

Nursing the Enemy in the First World War

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Abstract

This article explores the ethical dilemmas posed by the experience of nursing enemy or prisoner-of-war (POW) patients during the First World War. It asks two key questions. First, what was at stake in the evocation of the relationship between the female nurse and the enemy patient in nationalist images and narratives designed to justify a nation's conduct in the war and to demonize the enemy? Second, how did both trained and volunteer nurses evoke the experience of nursing such patients in their diaries, letters and memoirs? It concludes that these writings reveal contradictory attitudes. Some nurses emphasized their role as 'neutrals', underscoring the importance of impartiality in their medical work in line with the transnational humanitarianism embodied in the symbol of the Red Cross. Others reproduced nationalist and xenophobic stereotypes. Such nurses presented the nursing of enemy patients as incompatible with their patriotic duty and therefore as less deserving – or, in some cases, as undeserving – of their care.

Keywords: Nurse, Nursing, First World War, Enemy, Prisoner-of-War, Patient' History, 20th Century

1 Introduction

The relationship between medical personnel and enemy and/or prisoner-of-war patients was a source of debate, fascination and ethical dilemmas during the First World War. This article does not seek to evaluate the medical care of enemy patients during the war more broadly. In the case of POWs this medical care varied not only on different fronts and for patients of different nationalities, but also according to the different contexts in which the treatment took place.¹ Instead, this article focuses on the relationship between the female nurse and the enemy patient in temporary and base hospitals. Although some scholars have touched on this relationship, studies have tended to be limited to national contexts, rather than considering the ethical implications of the nurse-enemy patient relationship from a transnational perspective.²

This article therefore breaks new ground by comparing and contrasting a broad range of examples of women who nursed for both the Allies and the Central Powers. It does so with two main objectives in mind. First, it asks what was at stake in the evocation of the relationship between the female nurse and the POW patient in nationalist images and narratives designed to justify a nation's conduct in the war and to demonize the enemy. Second, it explores the tensions at play in the attitudes that trained and volunteer nurses themselves had in relation to caring for enemy patients, drawing on their personal writings. Evidence from nurses' letters, diaries and published and unpublished memoirs reveals that responses not only varied among nurses according to their attitudes towards their wartime role, but also that they evolved during the war. Proximity to young, vulnerable men tended

¹ Death rates varied considerably, depending on the standard of care and sanitation in POW camps and hospitals; there were typhus outbreaks in 1915 in camps in Russia, Austria Hungary and Germany, for example. For studies of the treatment of POWs in captivity see Jones 2011; Panayi 2012; Wilkinson 2017.

² For other discussions of the relationship between First World War nurses and enemy/POW patients see Alterio 2013; Butler 2013; Carden Coyle 2014; Harris 2013; Higonet 2018 a; Montgomery 2013.

to transform the patients from representatives of an enemy ‘race’ or nation into suffering individuals. In this sense, proximity led the enemy to become another ‘body in pain’ to which nurses bore witness, as explored by Santanu Das, Jane Potter, and Carol Acton.³ However, even with prolonged contact, nurses often expressed ongoing hesitations about the extent to which sympathy and care for a POW or enemy patient could be interpreted as an unpatriotic or even as a treacherous act.

2 Trained and Voluntary Nurses in the First World War

During the course of the war, hundreds of thousands of women were mobilised for military nursing work, both in their home nations and on military fronts. These comprised trained nurses, religious nursing orders, and volunteers. The latter included those who had undergone some limited training in the years preceding 1914, usually via national Red Cross societies, and those who volunteered for the first time during the war.⁴ In Britain in the early months of the war there were around 2,300 members of military nursing units: the Queen Alexandra’s Imperial Military Nursing Service and its Reserve, and the Territorial Force Nursing Service. By the end of the war, however, approximately 24,000 British trained nurses were involved in some form of war nursing. From 1915 onwards, they were joined by trained nurses from the Dominions (Canada, Australia, New Zealand and South Africa) and, from 1917, by over 21,000 women from the US Army Nurse Corps.⁵ British volunteer nurses, who numbered over 70,000 in total, were members of the Voluntary Aid Detachment (VAD), which had formed in 1909 and was organised under the auspices of the British Red Cross Society and the Order of St John of Jerusalem.

Other belligerent nations followed the same pattern of a combination of trained nurses, who undertook more of the skilled nursing, and volunteers, who often carried out more of the domestic work in the wards. France and Germany, however, had relatively low numbers of trained secular nurses. Around 6,000 French professional nurses were employed by the state authorities, the *Assistance publique*, and 2,500 women were members of the *Berufsorganisation der Krankenpflegerinnen Deutschlands* (German Professional Organisation of Nurses).⁶ The majority of French and German war nurses worked for their national Red Cross societies. In France, 100,000 women belonged to the three societies that made up the French Red Cross, and they worked alongside a further 10,000 members of Catholic nursing orders.⁷ In Germany, there were over 92,000 Red Cross nurses, of whom 73,000 were stationed at home and nearly 20,000 overseas. Unlike in France, German Red Cross nurses included Catholic nursing orders and Protestant deaconesses. Training for these religious

³ Das 2008; Potter/Acton 2015.

⁴ On Allied nursing see Fell/Hallett 2013, pp. 1–14; Hallett 2014. On Central Powers nursing see Hämmerle 2014; Montgomery 2013; Quataert 2000; Schulte 1996.

⁵ Fell/Hallett 2013, p. 2.

⁶ Knibehler 1984, p. 96; Schulte 1996, p.123.

⁷ The three societies were the Société française de Secours aux Blessés Militaires, the Association des Dames de France, and the Union des Femmes de France. Darrow 2000; Thébaud 1986, p. 86.

nurses took place in a hierarchial motherhouse structure, a model that was adopted by the Red Cross sistershoods in Germany.⁸

These differences between the types of women involved in nursing work in the First World War are important in an analysis of their personal writings, and of their attitudes towards enemy and POW patients. Although patients and the general public might not have always made a distinction between a trained or a volunteer nurse, the perspective of a professional nurse who had already experienced medical trauma and who had been trained to take emotional distance from her patients was bound to differ from that of an inexperienced volunteer, and this is evident in the memoirs, letters and journals that they left behind.⁹ Further, many trained nurses and their leaders shared a transnational vision of nursing as a profession, and joined campaigns for state registration, better conditions, and standardised training. This kind of transnational vision for nursing as a profession was articulated, for example, by the International Council of Nurses, which was established in 1899 with Britain, Germany and the US as charter members. Trained nurses thus already had clear ideas about where their duties lay as medical professionals before 1914. Once war was declared, these understandings of nursing sometimes underpinned and sometimes competed with the nationalist discourses that aimed to rally belligerent populations to the nation's cause.

In contrast, volunteers mobilised by their nations for the war effort tended to be primarily motivated by appeals to their patriotism and duty at a time of national emergency. While recruitment material for Red Cross nurses drew on religious understandings of nursing as women's sacred duty of care to mankind, this was often attached to a nationalist rhetoric of duty to the homeland. Jean Quataert's analysis of German Red Cross imagery, for example, reveals that 'the language of civilian war work drew on idealized images of men and women and placed them squarely in a sphere of humanitarian sacrifice of selfless duty to neighbour and country – an affirmation of the essential unity of fatherland and folk that Red Cross posters displayed for all to see.'¹⁰

As Margaret Darrow notes in relation to France, circulating alongside these idealised images of angelic volunteer nurses doing their patriotic duty were negative evocations of 'the false nurse', who 'put her own, that is, feminine interests ahead of the national'.¹¹ Heather Jones concludes that, in contrast to the original aims of the International Committee of the Red Cross (ICRC), if we look at national societies of the Red Cross 'we find patriotism and hyper-nationalism emerging'. As a result, 'national Red Cross societies and the ICRC in Geneva [...] although they shared a common symbol did not always share the same motivations.'¹² In what follows, this article will explore further these tensions between, on the one hand, ideals of neutral transnational humanitarianism and, on the other, nationalist understandings of feminine duty that come to the fore in nurses' writings about their encounters with POW and enemy patients.

⁸ Schulte 1996; Montgomery 2013, p. 4.

⁹ Hallett 2013.

¹⁰ Quataert 2000, p. 459.

¹¹ Darrow 1996, p. 84.

¹² Jones 2009, pp. 702–703.

3 Nationalist Representations of Enemy Nurses and POW Patients

In all of the belligerent nations, posters, postcards, reports and newspaper articles, as well as propagandistic memoirs published by nurses, endeavoured to portray their own medical personnel as offering good medical care to POWs, and the enemy as failing to do so. Accusations of the mistreatment of enemy patients allowed Allied nations in particular to provide further justification for the dichotomy between 'civilization' and 'barbarism' that they constructed in anti-German rhetoric during the war. In theory, all belligerents claimed to be adhering to the humanitarian guidelines established before the war. The Geneva Convention of 1906 stated that enemy patients must be treated with the same consideration as one's own wounded. In an article entitled 'The Sick and Wounded in War', which appeared in the Allied nursing press in 1915, for example, nurses were told:

The obligations of belligerents with regard to the sick and wounded of the enemy are governed by the Geneva Conventions of 1864 and 1906. [...] The soldiery and other persons officially attached to armies who are sick and wounded should be respected and cared for by the belligerent in whose power they are, without distinction of nationality. [...] The personnel engaged in the collection, transportation and treatment of the sick and wounded, as also in the administration of the sanitary formations and establishments, are protected under all circumstances.¹³

Similarly, an article in the German Red Cross journal *Das Rote Kreuz* stated in 1917 that 'the Red Cross sentiment is developed without any aims to personal benefits, in unselfish generosity to friend and enemy, without loyalty to only one confession.'¹⁴ Such articles set out clear and strict guidelines for nurses to follow.

But alongside such references to the importance of the neutrality of care, both nurses and their patients were exposed to nationalist images depicting the mistreatment of the sick and wounded by enemy nurses. Figure 1 shows a well-known British example, the poster 'Red Cross or Iron Cross', which was produced under the aegis of the National War Aims Committee and probably dates from 1917.

¹³ Anon 1915. This article appeared in at least four nursing journals in 1915: *The Hospital*, *British Journal of Nursing*, *Kai Tiaki*, and *Una*.

¹⁴ Quoted in Montgomery 2013, p. 12.



Fig. 1: Poster, 'Red Cross or Iron Cross' © IWM (Q 71311)

The poster clearly evokes the supposed German rejection of the principles of transnational humanitarianism embodied in the Red Cross, which is shown to be incompatible with the German 'race' (note the typical depiction of the German officers who look on sneeringly). The German nurse here is the negative other of the positive propagandistic images of the

nurse that appeared in all the belligerent nations. She is angular, scornful, and cruel rather than soft, angelic, and maternal. The poster thus attacks the German nurse by showing how she fails to live up to the common depictions of nurses as saintly ‘angels’, as embodiments of the highest ideals of ‘womanhood’ itself. This was seen most obviously in the propagandistic images of Edith Cavell, who was depicted as having been shot by a Prussian officer wearing a Red Cross nurse’s uniform, whereas in reality she was executed wearing civilian clothes by a firing squad after the trial, the verdict of which was deemed legally correct by the British post-war Committee of Enquiry into the Breaches of the Laws of War.¹⁵ Cavell’s nursing of German patients was also frequently evoked in the many hagiographic descriptions of her nursing work that were produced after her execution. Another anti-German propaganda image that attempts to differentiate ‘barbarous’ enemy nurses from ‘civilized’ Allied nurses can be found in Figure 2, which shows a postcard produced in Belgium in 1915.



¹⁵ Photographs from the trial show Cavell in civilian clothes, and witnesses to the execution confirm that the story of the Prussian officer shooting her with a handgun was a myth. See Edith Cavell Collection, Imperial War Museum, EC 4, C4677. On propaganda images of Cavell see Pickles 2007; Fell/Sternberg 2018.

Fig. 2 : Benoni Van Der Gheynst, 'L'infirmière boche' (The Hun Nurse), 1915.

In this image, the German nurse is depicted as unfeminine, murderous, and bestial. Like the British example, the postcard also plays on the abuse of the Red Cross, as a symbol of neutral humanitarianism, in favour of the Iron Cross, a symbol of militarism in anti-German propaganda.¹⁶ These negative depictions of nurses as embodiments of the barbarous German race, as the antithesis of chaste and maternal 'white angels', were repeated in propagandistic texts produced in France during the war. Marguerite and Gabrielle Yerta's 1917 nationalist account of life in the occupied regions of France, for example, recounts the story of an alleged sexual encounter between a German officer and a German Red Cross nurse:

Bubenpech was a remarkably vicious specimen. [...] He looked upon himself as Don Juan, and expected everyone to yield to him. [...] On Sunday morning, about 10 o'clock, there appeared at our house a little German nurse of the Red Cross, dark-haired, smart, and – a fact hardly to be believed – pretty; but the lady had a peevish air – an air only. [...] Bubenpech came back as fast as he could, shut himself up with the little dame, and did not move until 4 o'clock in the afternoon, forgetful of his lunch.¹⁷

Here, we have an example of another way in which Allied nationalist discourse subverted the positive stereotype of the nurse as chaste 'white angel', this time by depicting the enemy nurse as a sexually voracious and promiscuous 'false nurse'.

Nationalist messages demonizing the enemy through claims of the mistreatment of sick or wounded POWs clearly had an impact on public perceptions, and stories of mistreatment began to appear in the nursing press. This was particularly the case in Britain after the publication of a 1918 report by the Government Committee on Treatment by the Enemy of British Prisoners of War. The government had established the committee in 1915 and interviewed British POWs about their treatment by German Red Cross nurses.¹⁸ Heather Jones and Jennifer Montgomery both persuasively argue that those accused of mistreating POWs were not Red Cross nurses but women working for German patriotic women's associations, for example in train station refreshment facilities.

Nevertheless, the months following the report's publication saw an increase in stories about the mistreatment of British POW patients. A July 1918 article in the *British Journal of Nursing* about the French Flag Nursing Corps, which consisted of British nurses who worked for the French Red Cross, anonymously quotes 'a Sister' stating:

In French hospitals the German wounded share all the good care that is going equally with the heroic Frenchmen. That is the law of chivalry – entirely

¹⁶ Four German nurses were awarded the Iron Cross during the war; British and French nurses were also regularly awarded medals normally reserved for combatants.

¹⁷ Yerta 1917, p. 325.

¹⁸ Montgomery 2013, p. 23; Jones 2009, p. 705.

superseded by the law of “frightfulness” so far as our brutalised enemies are concerned.¹⁹

Allied nurses’ published accounts of their war experiences sometimes included stories of the mistreatment of Allied patients by German nurses, such as the following passage in Canadian Red Cross nurse Mary Macleod Moore’s 1919 memoirs, extracts of which appeared in the *British Journal of Nursing*:

I never hear anyone speak of the decent German people, led astray by rulers, without remembering the man from Toronto, a bad amputation case, who said he shivered when his nurse drew near, for she used to pinch him when she dressed the wound, and twist the bandages.²⁰

The Editor of the *British Journal of Nursing*, Ethel Bedford Fenwick, however, insisted that ‘the nurses referred to in the [1918] report are not the professional nurses of peace time’ and that ‘it is only just to suspend judgement until we know that the incredible cruelty to our wounded has been practised by the trained German nurses.’²¹

Almost identical stories of the cruel treatment of POW patients circulated among troops and nurses of the Central Powers. The 1915 published memoirs of German Red Cross nurse Hedwig Voss claimed that the true enemies of the Germans were the English, ‘devilish’ enemies who stabbed sleeping German patients under the cover of night.²² As Margaret Higonnet notes, this is in keeping with the nationalist tone of Voss’ memoirs, in which she ‘praises the German people as generous, conscientious, thorough, and precise, as opposed to the British’ and ‘repeatedly describes German soldiers as good-humoured and handsome, by contrast to pale and small Russian prisoners.’²³

Accounts of POW patients’ responses to their nurses reveal that the beliefs and fears about the mistreatment of the sick and wounded who were taken prisoner were widespread on both sides during the war. Trained British nurse Joan Martin-Nicholson, who worked for the Belgian Red Cross, claimed that when nursing German patients she had to reassure them that she was not going to ‘gouge their eyes out with scissors and put poison in their medicine’.²⁴ French nun Sister Saint Eleuthère, who nursed for the whole of the war in German-occupied Noyon, makes a similar comment in her diary when she first nursed a German patient in September 1914:

The poor man seemed afraid to find himself alone in a ward full of French sisters; no doubt he believed that he was done for, and he wanted to leave.

¹⁹ *British Journal of Nursing*, 13 July 1918.

²⁰ Macleod-Moore 1919. This quotation was taken from an extract reprinted in the *British Journal of Nursing*, 30 August 1919.

²¹ *British Journal of Nursing*, 2 March 1918.

²² Quoted in Higonnet 2018 a, p. 253.

²³ Higonnet 2018 a, p. 253.

²⁴ Martin-Nicholson 1916, p. 75.

Luckily, another German patient arrived to keep him company and reassured him a little.²⁵

An example taken from a 1936 edited collection of German Red Cross nurses' diaries, field-post letters, loose notes and memoirs provides evidence that these rumours were still circulating after the 1918 armistice.²⁶ In this account, a group of German nurses who had been imprisoned in St Lazare prison in Paris were subjected to taunts and attacks because it was believed by the French locals that they had been cruel to French patients:

In St Lazare prison the rumour went round that these were the evil women who had murdered wounded French soldiers with poison and revolvers. This is what was often claimed in the French newspapers. Thus people also saw these nurses as "murderesses".²⁷

These examples prove that the propagandistic depictions of cruel enemy nurses in nationalist texts and images, which were sometimes reinforced by government reports or negative press coverage about the misconduct of medical personnel, shaped the responses and behaviours of populations towards enemy medical personnel.

4 The Enemy Patient in Nurses' Diaries, Letters and Memoirs

However, while nurses' personal writings reproduce wartime nationalist stereotypes designed to demonize the enemy, they also bear witness to a more complex set of responses to the nursing of POW patients. This section will examine a broader range of (published and unpublished) texts that reveal the common tensions between nurses' support of their nations' causes and their adherence to the universal qualities of the nurse as a selfless caregiver. It will show in particular how prolonged contact with POW patients tended to nuance and complicate nurses' attitudes towards the enemy, and in some cases towards war itself.

4.1 Hospital Wards as 'Contact Zones'

Mary Louise Pratt's influential conceptualisation of 'contact zones' as the 'social spaces where cultures meet, clash and grapple with each other, often in contexts of highly asymmetrical relations of power' is helpful in an understanding of wartime encounters between nurses and their patients.²⁸ For instance, Anna Maguire uses Pratt's concept in her analysis of the ways in which the First World War brought men and women from different parts of the British Empire into contact with one another. Maguire argues that in hospital wards, 'the body became a key site of colonial encounter, as the physicality of medical care and comfort, through touch and gesture, was demanded' and that 'as such, this was

²⁵ Sœur Saint Eleuthère 2003, p. 12.

²⁶ For further discussion of the von Pflugk-Harttung collection see Schulte 1996, p. 135.

²⁷ Von Pflugk-Harttung et al. 1941, p. 36. The author would like to thank Paul Cooke for the translations from German.

²⁸ Pratt 1991, p. 34.

perhaps the most intimate of all the contact zones colonial troops journeyed through.²⁹ This posed a dilemma for the nursing of colonial troops, given the dominance of discourses of white supremacy that demanded white women ‘not cross the boundaries of intimacy to retain propriety.’³⁰ One way of circumventing possible accusations of impropriety in nurses’ personal writings was to adopt an ethnographic approach, treating colonial patients as ‘specimens’ of a particular race or ethnicity to be categorized and described for the benefit of their readers.³¹

A similar approach can be found in some nurses’ war writings in order to avoid accusations of fraternising with the enemy. In the war diary of Yvonne Blondel, for example, a French volunteer nurse who nursed in 1916 and 1917 in Romania, the descriptions of the enemy remain fixed in ethnic stereotypes. When praising the actions of a Romanian soldier-patient she exclaims:

Here is our Latin race, with its admirable humanity. I am certain that a “Boche”, with his pretentious “Kultur”, and even less so a Bulgarian, as a ferocious slav, wouldn’t have reacted in the same way.³²

Similarly, British military nurse Edie Appleton uses nationalist stereotypes to describe her German patients in her 1916 diary:

They really looked like robbers, and there were some poor, cringing creatures among them. [...] Really, the smell of gangrene, added to the always unpleasant German smell, was a trial to one’s stomach.³³

Another entry describes French civilians and British medical orderlies flocking to try and catch a glimpse of Appleton’s German patients:

As before when I had the German patients, the whole population of Étretat turned out to see them carried in (37 were on stretchers), and they made themselves such a nuisance that I closed the ground-floor shutters. The youth of Étretat have been parading in front of the house singing the Marseillaise for the benefit of the Germans, and our own people are as bad. I find bunches of strange orderlies gazing at them, and I then make myself thoroughly unpleasant and banish the lot. I’m not going to keep a peep show. If they want to see Germans, I tell them to join an Infantry Regiment and they will get what they want.³⁴

Here, the POW patients have become objects of fascination to be gazed upon. Yet at the same time Appleton is keen to foreground her maintenance of the norms of her profession in refusing to ‘keep a peep show’. A similar sense of detached professionalism combined

²⁹ Maguire 2021, pp. 184–185.

³⁰ Maguire 2021, p. 189.

³¹ Fell 2011.

³² Blondel 2001, p. 14.

³³ Cowan 2013, p. 194.

³⁴ Cowan 2013, p. 194.

with an 'ethnographic' gaze is apparent in the unpublished memoir of trained Australian nurse Elsie Steadman:

Fritz made a good patient but I am sure he had not the fine sensibilities of our own British boys [...] There was one thing about nursing them, you did your work without a vestige of sentiment, just for [...] work's sake, nothing else. Fritz you left when your day was done without a thought.³⁵

In Steadman's diary, the German patients are reduced to a singular ethnic type: 'Fritz'. Yet these kinds of comments also show that trained military nurses like Appleton and Steadman were forced to find ethical compromises between the demands of their profession to give impartial care, and their espousal of patriotism and loyalty to nation.

Prolonged contact with POW patients in the intimate context of a hospital ward, moreover, further challenged the racial or national stereotypes that had been internalised by nurses. The ambiguities brought about by nursing the enemy are particularly evident in the unpublished diary written by Kit McNoughton, a trained Australian nurse.³⁶ She was in charge of a ward of 45 German POW patients at a base hospital in Boulogne in July 1916, and her attitude towards them evolved as the exhausting work of caring for so many seriously wounded young men took its toll. Like Appleton, she initially presents her German patients as specimens of an enemy 'race', as objects of fascination to be gazed upon: 'We have all the swank in our ward as they come and see the Huns.'³⁷

However, as the weeks pass her tone changes. By the time the first batch of wounded are evacuated they have become individualized, and she claims them as 'her' Germans:

Evacuated all my Bosches today even my Hein & William Schellor – I hated them going & so did they & the poor kids along with souvenir in the shape of buttons for "Sister" – their eyes filled up when they said goodbye. Of course they are going to write to me, so I can see myself being watched as a German spy.³⁸

She writes about her German patients in a manner similar to that in which she discusses her young Allied patients, although her additional comment about the dangers of corresponding with German POWs reveals an awareness of the risks of sounding like she is sympathizing too much with the enemy. In another entry she states that the book is 'filled up with chats re Germans but I don't mind as long as the fight goes well with us.' Despite the shift in her perception of the enemy from embodiments of Germany to individualized wounded bodies, she remains keen to reassure the imagined readers of her diary (and perhaps herself) of her ongoing patriotism alongside her growing sympathy as a nurse with the POW patients for whom she was caring.

³⁵ Steadman (n.d.), pp. 2–3.

³⁶ McNoughton's diary is extensively quoted and contextualised in Butler 2013.

³⁷ Butler 2013, p. 131.

³⁸ Butler 2013, p. 137.

4.2 Nursing under Enemy Occupation

The above examples reveal how attitudes to enemy patients among nurses in the intimate ‘contact zone’ of a hospital ward confirm Ana Carden-Coyle’s observation that ‘cultural identities were framed and reframed in global war, and amplified in intimate hospital encounters.’³⁹ Similar tensions in relation to the ethics and ambiguities of nursing POWs were evident across national borders, but the relationship between nurses and enemy patients was also inflected by the particular contexts in which they were encountering one another. In cases of enemy occupation, tensions were evidently heightened. Many nurses’ published accounts of occupation were nationalist in tone, critical of the conditions in which they nursed, and quick to counter any accusations of ill-treatment of enemy patients. In an article published in 1916, for example, French nurse Marthe Feret, a French Red Cross nurse who nursed in occupied Noyon, was highly critical of the German authorities, but referred to her patients as a collective rather than by nationality, thereby denying any partiality towards her ‘own’ patients:

The wounded flooded in, some French, mostly German. During the whole of September, the number increased every day. [...] They came straight to us from the battlefields. They were seriously wounded. We put them everywhere – in the basement, in the chapel, in the corridors, on the landing. There was a stream of blood down the stairs. At the foot of the beds, at the edges of mattresses, there were pools [...] everything was red. We didn’t have the time to clean it up.

She was openly indignant about claims that French nurses mistreated German patients:

If ever German newspapers claim that French Red Cross nurses refused to nurse Germans or that they were cared for less well than the French, they are lying. None of my nurses distinguished between their patients. For us, a wounded soldier, whether French, English or German, is a man in pain who needs our help. That’s it.⁴⁰

Her article thereby echoes the nationalist discourse that presented France as a civilized nation that could be differentiated from Germany in its treatment of the sick and wounded. Another 1916 account of nursing in German-occupied France, by Red Cross nurse Yvonne Guinard, was very similar in its support of the tenets of French nationalism, and its condemnation of German attitudes towards French medical personnel. Working in a German-run hospital, Guinard described herself as being ‘the object of perpetual suspicion, the subject of a mocking and exhausting surveillance by the Kommandantur.’⁴¹ In February 1916 she was transferred to Rastatt in Germany where she worked in a POW camp for French soldiers, and her article attacks the inadequate food, medical supplies, and personnel there, once again suggesting that the Germans were not adequately fulfilling their ethical duty to medically care for POWs.

³⁹ Carden-Coyle 2014, p. 200.

⁴⁰ Feret 1916.

⁴¹ Guinard 1916.

In her study of Austro-Hungarian war nurses, Christa Hämmerle notes that there were two waves of war memoirs: those published during the war as part of a nationalist propaganda effort, and those that appeared 'in the warmongering atmosphere of the 1930s, when Austro-fascism and remilitarization had begun to shape retrospection on the First World War'.⁴² Although the national contexts differ, a similar pattern can be seen in many of the examples of nurses' war writings analyzed here. Feret and Guinard's accounts of working in German-occupied zones were published during the war and reflect the dominance of anti-German rhetoric in French nationalist discourse.

The collection of testimonies by German Red Cross nurses that was published in 1936, on the other hand, reflect the hyper-nationalist cult of First World War service common under National Socialism. A collective account by a group of deaconesses from Königsberg in this volume, for example, begins by describing the invasion of Belgium in August 1914 as 'the franc-tireur war', and attacks the hostility of the Belgian nuns whose convent they had taken over to use as a hospital. However, they claim that they were treated like POWs in contravention of the 1906 Geneva convention when they were forced to nurse under French rule when the French army re-entered the town of Péronne. They also claim it was necessary to have a French soldier with them when they went into the streets of the town because of the risk from inhabitants, who they describe as having a 'passionate hatred towards us'. Echoing the French accounts of nursing under occupation, they defend the impartial stance they took in their nursing work: 'We looked after the French in exactly the same way that we looked after our own people, but the people seemed to have forgotten that.'⁴³

Margaret Higonnet analyses a 1931 memoir by German Red Cross nurse Anne-Marie Wenzel, which is similar in tone to the account by the Königsberg deaconesses. Wenzel chronicles two official trips she made to Russia to inspect German POW camps in 1916 and 1918–21. She claims that she and her colleagues were treated by the Russian bureaucracy as spies and criminals, and argues that the German POWs received poor medical care from Russian doctors she describes as 'lazy', and Russian nurses whom she accuses of being prostitutes.⁴⁴ In all of these cases, the nurses' testimony of the conditions in which POW patients were cared for in military hospitals is, at least in part, designed to underscore their own nation's adherence to the Geneva conventions, and to criticize the failings of enemy medical care.

However, even in cases of working under enemy occupation, some nurses' beliefs in a higher ideal of nursing, or the humanising of the enemy brought about by prolonged contact, could challenge or weaken national allegiances. The British medical women of the Serbian Relief Fund, who remained in Serbia under the authorities of the Central Powers in 1915 caring for Serbian POWs, refused to treat enemy soldiers as a point of principle, agreeing only to treat Serbian casualties. However, Leila, Lady Paget, in her account of the invasion of Serbia printed for private circulation in 1916, also described the affection

⁴² Hämmerle 2014, p. 90.

⁴³ Von Pflugk-Harttung et al. 1941, pp. 29–38.

⁴⁴ Higonnet 2018 b, p. 309.

between the British women of the Serbian Relief Fund and the Austrian POWs who worked as orderlies in their hospital after having been taken prisoner by the Serbians. When they left Skoplje in February 1916, Paget wrote:

It was not very easy to leave the hospital, though it held for us the memory of so much pain and hard work. [...] It was a sad leave we took of the poor Serbian captives, and tears rolled down the faces of our faithful Austrians.⁴⁵

Here, the Austrian orderlies are depicted alongside the Serbians as needing protection from the German, Austrian, and Bulgarian occupiers, suggesting a shifting of national allegiances in the intimacy of a hospital that had been stretched to its limits caring for typhus cases.

Another example of more ambiguous attitudes is found in the post-war published account by the French woman Françoise Lafitte-Cyon, who was a volunteer nurse in Lille and Mauberge from September to December 1914. She wrote at the request of Harold Picton, a British schoolteacher whose mother was German, and who attempted to counter British anti-German rhetoric in his 1919 publication entitled 'The Better Germany in Wartime'. Lafitte-Cyon suggests that the exposure to violence and the fear in which the population of Lille lived during the early months of the war led to a 'feeling of hatred [...] amongst most of the staff of the hospital where I was working', which meant she 'was able to note at first hand the effect it had in the dealings of the nursing staff with the German wounded'.⁴⁶

Hospital 105 was run by one of the French Red Cross societies and was situated in the school in which Lafitte-Cyon herself had studied before the war. In her account, she is dismissive of those 'society ladies' who she believed lacked medical expertise and 'avoided nursing Germans with great skill.' These women were driven, according to Lafitte-Cyon, by nationalist motivations, and were therefore not 'true' nurses:

They were very diplomatic in their dealings with the enemy, as silly and painful in their hatred of the German and their cautious dealings with him as they were in their other activities. Their hatred was of the emptyheaded kind, but all the more dangerous for being based on frivolity of heart and crass ignorance.⁴⁷

However, she devotes more space to describing the attitudes of 'three trained nurses and nine or ten women clerks or teachers, of quite another sort.' She describes one young nurse as being both a devoted nurse and a devoted patriot: 'She hated the Germans with the strongest hatred and yet nursed them with utter devotion, for she was as earnest a nurse as she was keen a patriot.' This nurse apparently did not see a contradiction in the two roles. Others, she claims, were more torn. While a doctor argued that they should put cholera into the German patients' water, another nurse admitted to her that she had 'an unflinching hope that in the long run "brotherhood" [would] be the watchword of all humanity'.⁴⁸ Lafitte-Cyon concludes that her first-hand experience of seeing the fraternity between French and German troops within hospitals dispelled any feelings of animosity she may have

⁴⁵ Paget 1916, p. 93.

⁴⁶ Lafitte-Cyon 1918.

⁴⁷ Lafitte-Cyon 1918.

⁴⁸ Lafitte-Cyon 1918.

harboured: 'Where one felt the smallest amount of hatred existing on either side was amongst the men who had fought and been wounded.'

Proximity and continued contact led to a change of attitude:

Being left so much alone with my German wounded I got to know them well. I never had to complain of my Boches! They were so much like our own men, yes, so much like them! They were grateful for what was done for them in just the same way.⁴⁹

It is important to note that Lafitte-Cyon was a committed socialist and was also therefore politically motivated not only in her own account of nursing Germans as a French woman, but equally in her criticism of upper-class French women who expressed anti-German sentiments. Her political leanings are evident, for example, in her description of a feeling of kinship with one German patient who was also a socialist: 'He whispered the great names of Jaurès, Keir Hardie, and Liebknecht; I could read in his eyes the hope these names roused in him.'⁵⁰

Similarly, an account in the 1936 German collection written by Mimi Warth, a Red Cross nurse who worked in South Tyrol, is notable for the religious rather than nationalist discourse she uses to describe her nursing practice. For her, the spiritual care of her soldier-patients is as (if not more) important than their medical care, and in her account she makes no distinction of nationality, nor does she include descriptions of the characteristics of ethnic 'types'. Instead she discusses the problems of language: 'With a good morning in clear Hungarian, Polish, Italian, Czech and Romanian, I would enter the ward every morning.'

She also discusses the problems of caring for men of different faiths:

The hospital curate had given me a small crucifix, which I wore round my neck and I would bend down so the dying could kiss it with their lips. There were mostly Catholic, Orthodox but also a Mohammedan.

She is particularly concerned with giving the dying men a 'good death'⁵¹, and is frustrated when she felt she had failed in this duty:

Some wanted to tell me something, perhaps a last wish, but I couldn't understand it since there were too many languages spoken there. If it was possible I ran quickly to find someone to translate, but some had to be content with an answer from me in his mother tongue "I do not understand". How terribly sad it was for those poor men, but it was even more difficult for me. I wanted to help everyone so much.⁵²

Mimi Warth's account is not devoid of a sense of national duty or patriotism: when the Italians take over the hospital she describes the poor food and living conditions, and

⁴⁹ Lafitte-Cyon 1918.

⁵⁰ Lafitte-Cyon 1918. Picton's dedication reads: 'To the British and the German peoples and in memory of my mother, who knew and loved them both.'

⁵¹ For a discussion of accounts of a 'good death' in war nurse memoirs see Kelly 2015.

⁵² Von Pflugk-Harttung et al. 1941, pp. 255–259.

expresses her anger at being treated like a potential spy. Yet in relation to the patients, it is clear that for her nursing was a sacred duty to mankind (like many German Red Cross nurses she was a deaconess) rather than primarily her patriotic duty as a mobilized citizen.

4.3 Anti-War Nursing Memoirs

While some accounts of nursing the enemy published during the war or in the 1930s had a clear nationalist political agenda, other nurse memoirs were written from a pacifist or anti-war perspective. In these examples, nursing enemy patients is used as an important part of the political arguments being made about the futility of warfare. The published collection of letters and diary entries by Käthe Russner, who wrote them in 1918 when nursing in Galicia before being transferred in to St Quentin in France, expresses despair at the devastating losses and apparent futility of war while retaining some nationalist sentiments. As Margaret Higonnet notes, Russner includes in her account a description of a visit to a military cemetery at Stryj. This town at the foothills of the Carpathian mountains was part of the Austro-Hungarian Empire, before being occupied by the Russian Empire from October 1914 to May 1915, when the Russians lost a bloody battle to the South East Army of the Central Powers. The sight of the multiple rows of German, Russian, French and Turkish soldiers' graves led Russner to express an outright condemnation of war itself: 'Perhaps the whole world is deluded. Did our enemies then fall for the justice of their cause, as we fall for ours?'⁵³

A similar perspective is expressed in British VAD nurse Vera Brittain's well-known 1933 published memoir. In her description of nursing a ward of German POWs she criticizes their treatment by the British, challenging the wartime narrative that had held up the Allied treatment of POW sick and wounded as a differentiating factor from the Central Powers:

Although we still, I believe, congratulate ourselves on our impartial care of our prisoners, the marquees were often damp, and the ward was under-staffed whenever there happened to be a push – which seemed to be always – and the number of badly wounded and captured Germans became in consequence excessive.⁵⁴

She also describes a shift in attitudes from one influenced by nationalist propaganda to an individualized and humanized understanding of the German patients as suffering bodies:

Before the war I had never been in Germany and had hardly met any Germans. [...] So it was somewhat disconcerting to be pitch-forked, all alone [...] into the midst of 30 representatives of the nation which, as I had repeatedly been told, had crucified Canadians, cut off the hands of babies, and subjected pure and stainless females to unmentionable "atrocities". I didn't think I had really believed all those stories, but I wasn't quite sure. I half expected that one or two of the patients would get out of bed and try to rape me, but I soon discovered that none of them were in a position to rape anybody, or indeed to do anything

⁵³ Quoted in Higonnet 2018 b, p. 306.

⁵⁴ Brittain 1987, p. 373.

but cling with stupendous exertion to a life in which the scales were already weighted heavily against them.⁵⁵

The crux of the ethical dilemmas bound up in nursing POW patients lies in this tendency to individualize and humanize the enemy within the intimacy of a hospital ward, while being aware that the same individual has potentially threatened or killed one's 'own' soldiers. Taken to its limits, this could lead to a pacifist position. In pacifist accounts, when the concept of the enemy is completely dismantled, the war becomes absurd and untenable.⁵⁶ Brittain reveals her pacifist beliefs in her an interwar political argument about the futility and absurdity of this and all wars:

Another badly wounded boy – a Prussian lieutenant who was being transferred to England – held out an emaciated hand to me as he lay on the stretcher waiting to go, and murmured: 'I thank you, Sister.' After barely a second's hesitation I took the pale fingers in mine, thinking how ridiculous it was that I should be holding this man's hand in friendship when perhaps, only a week or two earlier, Edward up at Ypres had been doing his best to kill him. The world was mad and we were all victims; that was the only way to look at it. These shattered, dying boys and I were paying alike for a situation that none of us had desired or done anything to bring about.⁵⁷

She also uses a letter from her combatant brother Edward, who was later killed in action, to underscore her point: 'It is very strange that you should be nursing Hun prisoners and it does show how absurd the whole thing is.' In this way, Brittain presents her position as being one that both combatants and nurses agreed with from their perspectives as authentic witnesses to the war. A similar political interpretation of the war can be found in the writings of French Red Cross nurse Germaine Malaterre Sellier, who like Brittain became a passionate advocate of both feminism and pacifism in the 1920s. In an article published in 1921, Sellier made a direct appeal to other French nurses:

Nurses of France, who in hospitals at the rear or in temporary hospitals at the front, cared for the bleeding and bruised bodies of the enemies of our country, didn't you feel, in your battle against Death, which was haunting their bedsides, your hearts beating with a passionate sentiment of human fraternity?⁵⁸

For Brittain and Malaterre Sellier, nursing enemy patients is presented as a key stage in a developing understanding of war as absurd. The ethical ambiguities brought about by the intimate care of an enemy soldier are used to appeal to their readers to condemn all wars as unjustified and futile.

⁵⁵ Brittain 1987, p. 374.

⁵⁶ Potter/Acton 2015, p. 106.

⁵⁷ Potter/Acton 2015, p. 375.

⁵⁸ Malaterre Sellier 1921.

5 Conclusions

This article has shown that there is often a degree of hesitation and ambiguity in nurses' responses to nursing the enemy as presented in their personal writings. Some nationalist accounts, especially those written by volunteers, revert to nationalist, racial, or ethnic stereotypes to depict the enemies they encounter. This is particularly true of the propagandistic memoirs that were published during the war. Trained nurses usually make reference to the importance of providing a high standard of care to all patients, but sometimes present their care for enemy patients as reluctant. They describe themselves as carrying out a professional duty while deliberately maintaining a distance as they felt nursing enemy patients was not compatible with their patriotic task. Other nurses continually emphasize their neutrality as medical personnel towards enemy patients but with a more political agenda in mind, in an attempt to provide evidence that their nation did not break the Geneva conventions, and therefore could claim the moral high ground in a global conflict that saw around 9 million men taken prisoner.⁵⁹

But nationalist or ethnic stereotypes were usually challenged or at least nuanced by nurses who spent weeks or months looking after POW patients. Even if their political attitudes to the war varied, many nurses wrote of the transformation of their patients from enemies into individual young and vulnerable men with whom they empathized. In rarer cases, this led to friendships that survived the war, or to an understanding of them as the sons and husbands of enemy women to whom they owed a duty of care. The confrontation with the shattered or sick bodies of enemies led, in the case of a few nurses, to a questioning of their allegiance to the nation. In openly anti-war or pacifist nurse memoirs, especially those published in the interwar years, the encounter with the POW patient is presented as a crucial moment that revealed the absurdity of war itself. In these cases, the nurses adhered more firmly to a conception of their nursing work as a form of religious vocation, or to the ICRC vision of the Red Cross, bringing transnational humanitarianism into the field of conflict, based on an understanding of shared humanity.

However, the majority of the memoirs, letters and diaries that have formed the basis of this analysis suggest that the response of most women involved in nursing work in the First World War was not as clear-cut. The shift from the tropes of Romanticism to an ironic or realist anti-war stance famously identified by Paul Fussell in relation to soldier-writers does not ring true for nurses' war writings.⁶⁰ All nurses were mobilized as part of national aid efforts that used the rhetoric of patriotic service to the nation – even if this was more apparent in the case of volunteers who worked for national Red Cross societies. At the same time, they were interpellated by broader, gendered discourses that associated womanhood with selfless and nurturing maternal devotion. Trained nurses were often engaged in transnational struggles for a greater professionalization of nursing with an important emphasis on the neutrality and consistency of care. Caring for their 'own' soldiers allowed nurses to be both patriotic citizens and selfless female carers. But being faced with a sick or wounded enemy patient forced nurses to challenge or break with one of these roles, which

⁵⁹ Jones 2014.

⁶⁰ Fussell 1975.

explains the ethical dilemmas it brought about. Hospital wards during the First World War were intimate ‘contact zones’ in which contrasting national and transnational understandings of women’s medical care were brought into sharp focus, and this was particularly the case with the nursing of POW and enemy patients.

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