

SISTERHOOD:
THE ROLE OF FEMALE FRIENDSHIP AMONG ALLIED NURSES IN THE SECOND
WORLD WAR

by

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A thesis submitted to the faculty of
The University of North Carolina at Charlotte
in partial fulfillment of the requirements
for the degree of Master of Arts in
History

Charlotte

2022

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ABSTRACT

CARTER WYATT. Sisterhood:
The Role of Female Friendship Among Allied Nurses in the Second World War
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This paper shows how allied military nurses utilized female friendship during the Second World War. This study examines the experiences of nurses stationed in hospitals, field hospitals, ships, and prisoner of war camps. It examines how the nurses' friendships functioned in the novel spaces they inhabited during the war. It further analyzes how expressions of femininity helped strengthen bonds among the nurses. It shows how comradeship provided them with numerous benefits, such as emotional support, physical protection, and entertainment in otherwise traumatic circumstances. Lastly, it analyzes the relationship between friendship and memory by examining how the relationships between the nurses affected their transition into the post-war period and how they received recognition and preserved their memories of the war.

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Introduction

Throughout the Second World War, numerous governments across the globe issued a call to arms to their civilian populations. A sudden demand for anything from soldiers to farmers to munitions workers developed. The First World War had taught western nations the value of female labor in times of war, and one group of women held particular merit for the war effort: nurses. British, Australian, and American nurses served under numerous outfits in the Second World War. In the British Army, they served with the Civil Nursing Reserve (CNR), Queen Alexandra's Imperial Military Nursing Service (QAIMNS), and the Voluntary Aid Detachments (VAD). Initially, Australian women served only in the Australian Army Nursing Service (AANS), and after 1940 they also served in the Royal Australian Air Force Nursing Service (RAAFNS), and lastly, in 1941, Australia formed the Royal Australian Navy Nursing Service (RANNS).¹ American nurses served under the Army Nursing Corps. Within the military, intense friendships and comradeship developed among the nurses residing inside a masculine space. This project seeks to answer the question of how female friendships shaped the nurses' experiences and memory of the Second World War.

The call for nurses encouraged many young women working in civilian hospitals to join the military and serve the country. Unlike the women who served in other military branches, nurses already worked in their occupation. In order to join the army as a nurse, women had to have completed nursing training. Thus, most of the women in this study had already left their family homes and spent time working for a living. At the start of the Second World War, approximately 30,000 women comprised the British Civil Nursing Reserve. By March 1940, this

¹ "Second World War Nurses," Exhibitions, Australian War Memorial.
<https://www.awm.gov.au/visit/exhibitions/nurses/ww2#:~:text=When%20the%20Second%20World%20War,%2C%20the%20Pacific%2C%20and%20Australia.>

number grew to 40,000.² As a part of the British Empire, Australia followed Britain's lead and joined the Second World War in 1939. Over the next six years, approximately 5,000 Australian women served as nurses.³ According to Marsha L. Burris, the nursing profession in the United States struggled to gain status due to its "feminine nature." Although in the US, Women comprised the majority of the nursing workforce they had to adhere to the authority of male doctors and hospital administrators. However, nursing allowed for hierarchies among the women through leadership roles. Initially, the US Army Nursing Corps only allowed "young, white, single females" to volunteer.⁴ Through years of rigorous recruitment and policy changes, the Army Nurse Corps boasted 47,000 nurses in May 1945. By this point, another 2,000 African American nurses "held credentials that made them eligible for commission," and 4,500 nurses awaited a posting as members of the First Reserve.⁵

In 1939, when the British deployed troops in France to fight the Germans, the QAIMNS, went with them, and from then onward nurses remained an integral part of the war effort. As the war progressed, allied and axis militaries spread nurses across the globe as they participated in the conflicts in Africa, Asia, and Europe. As Jane Brooks notes, while apprehension prevailed regarding women in combat zones, the need superseded any reluctance.⁶ They worked in various conditions, such as small field hospitals, local hospitals, hospital ships, transport ships, and often makeshift hospitals constructed in available buildings. Others nursed continued to work as civilians within local hospitals on the home front. Women working in London hospitals during

² Penny Starns, *Nurses at War: Women on the Frontline, 1939-1945* (Stroud, Gloucestershire, United Kingdom: Sutton Publishing, 2000), 16.

³ Australian War Memorial, "Second World War Nurses."

⁴ Marsha L. Burris, *Paradox of Professionalism: American Nurses in World War II*, (Morrisville: North Carolina, LULU Press, 2007), 25-26.

⁵ Burris, *Paradox of Professionalism*, 40.

⁶ Jane Brooks, *Negotiated Nursing: British Army Sisters and Soldiers in the Second World War* (Manchester, United Kingdom: Manchester University Press, 2019), 1-5.

the bombings have been included in this study, as their location existed as a warzone, although they worked as civilians.

According to Penny A. Weiss, women have historically formed female communities as a means of survival. She claims that their existence refutes the misconception that women "cannot get along together."⁷ Furthermore, she argues that women enduring "destructive circumstances" rely on their bonds with other women.⁸ The formation of the friendships enabled the nurses to gain the emotional and intellectual support necessary for survival and resistance in hostile environments.⁹ Despite living in a masculine environment the nurses were able to establish women only spaces that offered safety and comfort. A women's space is anywhere occupied privately or semi-privately by women, such as women's latrines, women's sleeping quarters, and the temporary spaces where women bathed or washed their laundry. These spaces emerge wherever two or more women share moments of solace and community among themselves, separated from male participants. Numerous nurses recount moments of comradeship developing into strong friendships within such spaces. In analyzing nurses' experiences in the Second World War, three sets of historiographies are directly relevant: what space the women occupied, how traumatic experiences affected medical professionals, and how gender affected the memory of women's work and relationships.

Space represents a fundamental aspect of what made nurses' experiences distinct from other female occupations during the war. Discussing the significance of gendered spaces in warfare in *British Army Sisters and Soldiers in the Second World War*, Jane Brooks argues that the warzones remained dominantly male spaces. However, since the modern medical

⁷ Penny A. Weiss, "Feminist Reflections on Community," in *Feminism and Community*, ed. Penny Weiss and Friedman, Marilyn (Philadelphia, Pennsylvania: Temple University Press, 1995), 4.

⁸ Weiss, "Feminist," 9.

⁹ Ibid.

understanding of wound care recognized the benefits of more rapid treatment, the military required nurses to serve closer to the front.¹⁰ When nurses moved into a masculine sphere, it upset gender assumptions regarding the appropriate places for women. As Brooks observes, the nurses thus represented a dichotomy of gendering. Although nursing signified the most feminine profession available to women during the Second World War, the military permitted nurses to reside within the masculine combat zones. This privilege did not extend to other categories of women in the war effort, and thus, nurses acted as pioneers in the gender divide.¹¹ According to Penny Starns in *Nurses at War*, inconsistencies in education and registration requirements meant that the nursing profession still lacked credibility at the start of the Second World War. This war transformed all of Britain into a military space, and the nurses exploited this change to militarize their work to gain increased recognition for their profession.¹² However, as Brooks notes, male military personnel sometimes resented females' existence within masculine spaces so severely that they abandoned the nurses, even when the enemy invaded their region.¹³

Margaret H. Darrow wrote about the critical perceptions of the relationship between women and war during the First World War in France. According to Darrow, women's presence in war diluted the masculinity of war. Thus, few people chose to acknowledge women's participation in war, especially if that participation occurred within the highly masculine zone of the battlefield.¹⁴ However, the nurse represented a complicated figure in the complex relationship between women and war. In World War I, two images of nurses appeared: the true nurse, whose femininity was exemplified by her motherly care of patients, and the false nurse,

¹⁰ Brooks, *Negotiating Nursing*, 2-5.

¹¹ *Ibid.*, 5- 9.

¹² Starns, *Nurses at War*, xvi-xvii.

¹³ *Ibid.*, 99.

¹⁴ Margaret H. Darrow, "French Volunteer Nursing and the Myth of War Experience in World War I," *The American historical review* 101, no. 1 (1996): 81.

who attempted to "hijack" the masculinity of the war instead of utilizing her femininity to help the cause.¹⁵ The true nurse ultimately served the male body of her patient. While he fought for France, she labored for him (84).¹⁶ Furthermore, the image of the military nurse became intrinsically linked with the ideals of motherhood and religious devotion. This image of the ideal nurse fostered hostility toward women who failed it or who embodied opposing ideals, such as fashionable or high-class women.¹⁷ Ultimately the true nurse remained asexual, and the "fashionable" woman polluted the institution with her sexuality.¹⁸ Furthermore, according to Darrow, these judgments surrounding a women's place in war influenced their written accounts. As a result, nurses' contributions to the literature on war memory received deeper scrutiny than male writers. Darrow claimed that when writing memoirs, nurses had first to justify their participation before they could detail their memories.¹⁹

In *Women in the British Armed Forces during the Second World War*, Jeremy Crang writes about British women's experiences and roles in military service. While his analysis excludes nurses, it still offers critical insight into the gendered spaces women confronted during the war. Similar to Brooks, Crang notes that servicewomen often faced hostility from servicemen. For example, he wrote that men often refused to help their female colleagues because they disapproved of women inserting themselves into the male sphere. Additionally, Crang wrote that working in close proximity to male servicemen subjected women to sexual

¹⁵ Darrow, "French Volunteer" 84.

¹⁶ Ibid.

¹⁷ Ibid., 90-96.

¹⁸ Ibid., 96.

¹⁹ Ibid, 99.

harassment and assault at their own soldiers' hands.²⁰ Therefore, the issue of space extended beyond the gendering biases and resentment by placing women in positions of real danger.

Mark Harrison provides further evidence for the dangers that nurses faced by occupying hostile spaces. In *Medicine and Victory*, he discussed the atrocities that took place in Hong Kong in December 1941. According to Harrison, when the Japanese invaded Hong Kong, they took over the hospital at Stanley Prison, killed the RAMC officers, among other staff, and rounded up female nurses and raped them numerous times. Harrison suggests that the British chose to remove female nurses from hospitals in Malaya following the incidents in Hong Kong.²¹ The work by Harrison and Crang illustrates how the issue surrounding space extends beyond gender dynamics. It highlights how the military enabled women to occupy potentially unsafe spaces. The environment that nurses occupied made them vulnerable to traumatic events. As Penny Starns noted in *Blitz Hospital*, despite remaining on the home front, hospital nurses still occupied hazardous and highly traumatic spaces when they worked in London during the bombings.²² As the above historiography suggests, the war placed women into dangerous and highly stressful spaces, whether due to war-related hazards or the aggressive disapproval of their presence by male colleagues. The need for their services close to the front meant that nurses inhabited male spaces for long periods, they often physically confronted the enemy. Through occupying these spaces, the nurses not only challenged gender boundaries but subjected themselves to disapproval and danger.

²⁰ Jeremy A. Crang, *Sisters in Arms: Women in the British Armed Forces During the Second World War* (Cambridge: Cambridge University Press, 2020), 78-80.

²¹ Mark Harrison, *Medicine, and Victory: British Military Medicine in the Second World War* (Oxford: Oxford University Press, 2004), 67-72

²² Penny Starns, *Blitz Hospital: True Stories of Nursing in Wartime London* (Cheltenham, United Kingdom: The History Press, 2019), 9-11.

Trauma represents another central theme within the historiography of Second World War nurses that has elicited considerable scholarly discussion. The war exposed nurses to more than gendered biases and hostility by permitting nurses to occupy combat spaces. The war placed medical professionals, including women, into spaces of high stress and traumatic events. The simple act of existing inside these spaces could cause psychological health issues. Ben Shephard's *A War of Nerves* provides a comprehensive analysis of the history of war-related trauma and psychological health practices.²³ According to Shephard, doctors assessing the psychological impacts of the First World War on soldiers determined that personality played a more significant factor than exposure to trauma in a soldier's likelihood of recovering from shell-shock.²⁴ Additionally, the bombing of London during the Blitz ignited a debate about the civilian populations' psychological reaction to the air raids. While some argued that the Blitz enhanced the city dwellers' mental health (due to a decrease in suicides and drunkenness), other medical officials contended that the citizens of bombed cities masked their distress. The media discouraged the population from reacting negatively and instead promoted the idea of "carrying on."²⁵

In *Containing Trauma: Nursing Work in the First World War*, Christine Hallett argues that First World War nurses developed methods whereby they worked to contain the physical and emotional trauma of their patients and themselves to best perform the responsibilities of their occupation.²⁶ Similarly, in *Working in a World of Hurt*, Carol Acton and Jane Potter claim that nurses experienced external pressures to mask emotional responses to trauma in the Second

²³ Ben Shephard, *A War of Nerves: Soldiers and Psychiatrists in the Twentieth Century* (Cambridge, Massachusetts: Harvard University Press, 2001).

²⁴ Shephard, *War of Nerves*, 166.

²⁵ *Ibid.*, 178-179.

²⁶ Christine Hallett, *Containing Trauma: Nursing Work in the First World War* (Manchester: Manchester University Press, 2009), 2-9

World War. These emotional constraints could derive from the "keep cheerful" mantra of Britain's war effort or the desire to mimic masculine behavior that avoided emotional vulnerability.²⁷ Acton and Potter argue that the "narrative of wartime stoicism" revealed "subjective pain" on the nurses' part.²⁸ They claim that the emotional forbearance that the nurses used to perform their duties did not equate with apathy to their environment or experiences. Acton and Potter further contend that nurses struggled to justify their own emotional suffering compared to their patients' suffering.²⁹ They write that nurses struggled with a "hierarchy of suffering," whereby their own pain always faced direct comparison to the pain of those in their environment under their care.³⁰

According to Shephard, "a paradox developed" in which older doctors, with experience treating patients from the First World War, dealt with the civilian public and avoided a neurosis diagnosis, whereas the younger doctors, influenced by Freudian psychology, treated soldiers.³¹ These young doctors more readily diagnosed their soldier patients with mental health issues as a result of trauma. In sum, Shephard claims that the psychiatric community emphasized the psychological stress of soldiers while downplaying the stress of the war on the civilian public.³² While this argument does not directly contain information regarding nurses' treatment, the discrepancy in diagnostics and treatments suggests that the nurses potentially received the diagnostic preferences of the civilian doctors who remained less likely to acknowledge war-related traumatic stress. Overall, the historiography on military trauma suggests that while the war exposed nurses to highly stressful environments, British society and the medical community

²⁷ Carol Acton and Jane Potter, *Working in a World of Hurt Trauma and Resilience in the Narratives of Medical Personnel in Warzones* (Manchester: Manchester University Press, 2015), 79-82.

²⁸ Acton and Potter, *Working*, 85.

²⁹ *Ibid.*, 85-87

³⁰ *Ibid.*, 87.

³¹ Shephard, *War of Nerves*, 181.

³² *Ibid.*, 181.

discouraged emotional vulnerability. Pressures for job performance or comparisons with patients suffering meant that many nurses chose to contain their emotional trauma. The mantra of “carrying on” discouraged admissions of emotional weakness, and as Shephard argues, psychiatrists remained reluctant to acknowledge the war-related trauma disorders among civilians as a means of upholding morale. Thus, the historiography shows that social pressures regulated nurses’ ability to recognize and address their trauma.

Within the scholarship on women's history, historians have studied the effect that gender has on the formation and maintenance of memory. For example, Hallett argues that during the First World War the military nurse became fixed in the collective memory as an "iconic figure" with her white scarf and red cross.³³ However, this status came with a series of myths that oversimplified the nurses' work and the diversity within their ranks.³⁴ In *Veiled Warriors*, Hallett wrote about the cultural memory of First World War nurses and VADs in post-World War I Britain. She argued that the nurses sought acknowledgment for their skills and expertise achieved through hard work instead of being belittled by those attributing their medical successes to nothing more than feminine instincts.³⁵ Hallett’s insights into First World War nurses remain applicable to their Second World War successors.

While the military nurse can invoke the type of romantic imagery found in Hallett’s work, the often absence of memory speaks louder. Acton and Potter argue that a cultural “silencing” of nurses’ voices happened through pressures for stoicism both during the war and in the post-World War II period.³⁶ Penny Summerfield constructs her analysis in *Reconstructing*

³³ Hallett, *Veiled Warriors: Allied Nurses of the First World War*, First Edition (England: Oxford University Press, 2014), 2.

³⁴ Hallett, *Veiled Warriors*, 2-3

³⁵ *Ibid.*, 30.

³⁶ Acton and Potter, *Working*, 84.

Women's Wartime Lives around the oral testimonies of women who worked in civilian and military services during the Second World War. She explores how gender affected women's memory of their wartime contributions and experiences and contends that society viewed women's memories as holding less "legitimacy" than men's.³⁷ Furthermore, she claims that husbands, whether present in the interview process or not, significantly shaped their wives' verbal recollection of their war experiences.³⁸ Summerfield's research included questioning the women about their relationships with other women. Her analysis centers on social/professional hierarchies, class structures, and the influence of unity forged by the war effort.³⁹ She argues that the women in the service enforced cleaning rituals and strict discipline to curtail moral deviance among their colleagues.⁴⁰

The existence of female friendships represents another aspect of the nurses' experiences that frequently undergoes erasure. Janice Raymond discusses the importance of female friendships and communities in general civilian life. According to Raymond, the belief that female interactions operate to prepare women for men has led to the erasure of the memory of women's fondness for each other.⁴¹ Furthermore, society invalidates these relationships at the time of their existence. In *A Passion for Friends*, she states that "hetero-reality" perpetuates the perception that women "exist...in relation to men" and that female groups and friendships cannot exist in the absence of men.⁴² In other words, when two or more women spend time together without men, society perceives them as multiple women *alone*. Although two women may sit

³⁷ Penny Summerfield, *Reconstructing Women's Wartime Lives: Discourse and Subjectivity in Oral Histories of the Second World War* (Manchester: Manchester University Press, 1998), 27.

³⁸ Summerfield, *Reconstructing*, 25-27.

³⁹ *Ibid.*, 162-189.

⁴⁰ *Ibid.*, 189.

⁴¹ Janice G. Raymond, *A Passion for Friends: Toward a Philosophy of Female Affection* (North Geelong, Australia: Spinifex Press, 2001), 23.

⁴² Raymond, *Passion for Friends*, 3.

together at a table, they are each sitting alone. Hetero-reality fails to acknowledge that women seek and enjoy each other women's company.⁴³ Raymond claims that "hetero-relational theories" worked to "suppress" the memory of positive female relationships due to anxieties about the potential power of female companionship.⁴⁴ Overall, the scholarship on memory highlights how post-war society distorted the memory of the nurses' work war through myths or smothered the memory entirely. Furthermore, the research by Summerfield emphasizes that women's memories hold less legitimacy compared to men. Lastly, Raymond's work postulates that not only does society trivialize women's work, it also trivializes female friendships.

As this paper concerns an analysis of the role of gender identity among nurses in the Second World War, it is pertinent to include the analytical framework supporting the arguments made. Joan Scott defines *gender* as "a constitutive element of social relationships based on perceived differences between the sexes, and gender is a primary way of signifying relationships of power."⁴⁵ One of her four elements of gender is "culturally available symbols," that create tangible images or ideas of womanhood, such as persons (i.e., the Virgin Mary) or concepts such purity versus depravity. Secondly, she argued that perceived normative customs or practices refute the possibility of different truths or interpretations. Essentially, this is the belief that a traditional gender role has always existed as a fixed aspect of society and that no alternative construction of roles existed previously. Scott argued that historians needed to critically examine so-called binary or fixed concepts of gender by examining how different roles developed. In Scott's third element, she expanded the study of gender relationships beyond the family unit to

⁴³ Ibid.

⁴⁴ Ibid., 25.

⁴⁵ Joan W. Scott, "Gender: A Useful Category of Historical Analysis," *The American Historical Review* 91, no. 5 (1986): 1067. <https://doi.org/10.2307/1864376>

include a study of how gender functioned in the public sphere, including systems of labor, education, and the political sphere. Lastly, Scott included the “subjective identity” as an element that concerns the role of “social organizations” and “cultural representations” on gender.⁴⁶

This historiography of Second World War nurses spans a multitude of issues, including gender dynamics of the space they occupied, the social factors that influenced their ability to exhibit an emotional reaction to trauma, and how gender impacted the memory of nurses in the aftermath of the war. While the above historians' work represents extensive research and analysis about the nurses' experiences during the war, much of their scholarship focuses on the male-female dynamics in combat zones. The scholarship fails to include the critical role of female friendships in shaping the nurses' war experiences and memories in the postwar period. The development of friendships among the nurses provided validation during the war and preserved the memory of their war experiences. Too much military nursing history focuses on the nurse-patient relationship or nurse-doctor relationship dynamic. This thesis examines the dynamics of female-female relationships among nurses and argues that those friendships shaped the nurses' experiences and memory of the war.

In my research, I analyze the creation of friendships and the rituals employed to maintain a group identity among female nurses in combat and hospital settings. I also study the role of domesticity and femininity as performative acts for the benefit of other women. I suggest that they did not perform acts of domesticity and femininity solely for the male soldiers, but rather these represented rituals for group identity among the women. In other words, beauty and fashion rituals functioned as performative acts that reinforced and strengthened their connection to the female gender. Through acts of femininity, women participate in a feminine culture that includes

⁴⁶ Scott, “Gender,” 1067-1068

physical distinctions (such as hairstyles, lipstick color, and skirt length) and ritual customs (e.g., the application of makeup, shopping, cooking, etc.). Different women expressed and perceived femininity through a variety of attributes and actions. In this paper, femininity represents activities and physical traits that women consume and produce to feel a stronger connection to the female gender. Their participation in the feminine culture helped solidify their place within a group identity comprised other women. Due to their hazardous circumstances and limited resources, the nurses struggled to maintain femininity while serving abroad. However, the evidence detailed in this paper suggests that they continued to make an effort to participate in the feminine culture despite the significant difficulty in doing so. Their efforts signify the value they placed on their feminine identity and their place within the feminine culture.

According to Scott, power and gender have remained intrinsically linked throughout history.⁴⁷ The power dynamics between men and women meant that the nurses experienced significant vulnerability to their male peers or patients during the war. This vulnerability meant a more vital need for strong relationships among the women to protect against the dangers of these power dynamics. Thus, this paper explores how women used female comradery and community as a tool for survival in a male-dominated world where power structures worked against them. Additionally, this paper seeks to expand Scott's concept of gender as "perceived differences between the sexes" to include the role of their own sex on influencing their perceptions and behaviors. In other words, it analyzes not only the "perceived differences" between men and women but also examines the role of perceived similarities among women. Utilizing Scott's idea of normative ideas of gender, this paper explores how women held onto these ideas to create a faux sense of normalcy. Within Scott's framework, the idea of a "normal" or "traditional"

⁴⁷ Scott, "Gender," 1069-1073.

concept of women hood represents a fallacy. This paper is concerned with how a woman used that fallacy. In terms of her third concept, this paper agrees with Scott that gender relationships exist beyond the kinship or family unit by incorporating a study of how gender relationships work within communities or social structures comprised of women. The idea that gender exists solely as the relationship between opposing sexes is fundamentally reductive. It places all women's choices and expressions of identity as a reaction to men's choices and expressions of identity. Therefore, this paper hopes to explore women's influence on other women's gender expression.

Although the historiography of space provides critical insights into the role of gendered spaces, it fails to include an analysis of the women's spaces carved out of these masculine spaces. Acton and Potter argue that women remained guarded of their emotions to appear more masculine. As their gender exposed them to hostility and biases, their friendships enabled them to cope with their environment and situation. While Starns and Brooks examine the tactics women employed to gain professional recognition by their male peers and the wider public, my research highlights how the community of nurses ensured that individual nurses' actions and sacrifices received validation. Although the recognition from official government bodies remains lacking, through their friendships, the nurses preserved the memory of the nursing work in the Second World War. A focus on female friendship allows this project to examine the nurses' experiences outside of their relationships with their male colleagues and male patients. In other words, it considers the role of the appreciation and approval from their female colleagues instead of male society or male authorities.

By exploring the importance friendship, this research demonstrates that women relied on other women to cope with the war's traumatic events. However, as Acton and Potter observe,

nurses often kept their emotions constrained due to a desire to emulate masculine behavior or comply with the British collective mentality of "carrying on." This paper analyzes how women behaved and expressed emotion among each and how they offered emotional support.

Furthermore, as Crang and Harrison note, the Second World War often placed women into dangerous positions, either due to enemy invasion or harassment by their male colleagues. The evidence presented in the following pages shows how the nurses protected each other against external aggressions or potential threats.

Summerfield, Acton, and Potter argue that postwar Britain represented a period of erasure of women's war work from the collective memory. While Acton and Potter present compelling arguments about the silencing of women in the public sphere, their analysis does not address the influence of women on women. For example, they do not analyze whether female friendships impacted women's memory of their war work and contribution. Additionally, although Summerfield's insight into feminine bonding highlights the importance of female-female relationships, she does not connect these bonds with women's ability to cope with the gendered biases and hostilities they faced in the war. Instead, much of Summerfield's argument centers on how well the women got along and what aspects of their environment, social hierarchies, and prejudices elicited discontent. Furthermore, while Summerfield notes the influence of husbands on women's wartime memories, the purpose of this project seeks to understand how female-female relationships and female communities engendered different memorialization of wartime experiences. Following the suggestion of Raymond, this project views women outside of their relation to men and focuses on how female-female relationships function within a masculine and military space. Lastly, Summerfield's analysis extends only to servicewomen and civilian

workers outside the medical sphere. This project investigates how female communities functioned in the unique spaces that nurses occupied.

Outline of Chapters

The first chapter concerns the construction of female communities within military spaces. It examines the role of space and the critical impact of femininity in establishing social groups and maintaining group identity among military nurses. This chapter analyzes how the female friendships shaped the nurses' experiences within masculine spaces. The nurses became vulnerable to sexual harassment and physical danger in military spaces. Due to gender policies, the army often kept nurses away from their male colleagues as much as possible. This separation caused the women to live in tight quarters and form strong friendships. It further enabled the women to live within women's spaces that were independent from the masculine sphere. Although the nurses faced significant hostility and danger entering into male spaces, they protected each other physically and mentally. Instead of analyzing domesticity and femininity as performative acts for men, this paper argues that the nurses performed these acts and rituals to reinforce female group identity. I argue that rituals act as critical components of the *feminine culture*. Activities such as shopping, wearing makeup, or domestic activities such as banking, helped women reconnect with the feminine culture and regain their identity.

The second chapter argues that friendships among the nurses offered them significant benefits during wartime that shaped their experiences in important ways. As the nurses got sent across the globe, they formed strong bonds with other women and share emotional comfort. The constant exposure to traumatic events and the stress of their labor took a toll on the nurses' mental health and led to significant emotional fatigue. Second, their friendships provided the nurses with companions who understood their unique condition. Third, the women provided each

other with emotional comfort and worked to safeguard each other's mental health and morale. Fourth, this chapter concerns how they offered each other physical protection, both against enemy soldiers and their countrymen. Lastly, this chapter examines how the nurses entertained themselves and how female friendships created situations of humor and laughter. The recollection of communal entertainment and the numerous jokes and humorous anecdotes highlight the significant role of friendship in creating positive experiences and memories in otherwise grim circumstances.

In the third chapter, I analyze the impact of the female friendships on the preservation and shaping of their memory of the Second World War. After it ended, the American, British, and Australian governments erected numerous statues and physical representations of their appreciation of the sacrifices made by their servicemen. However, the work to resurrect similar structures in honor of female contributions took significantly longer to deliver results. Regardless, the nurses received numerous individual medals, awards, and honors from their governments in recognition of their service. This chapter analyzes how female-female friendships among the nurses preserved the memories of each other's war work and sacrifices. It specifically examines the nature of storytelling as an act of promoting the deserved honors of their peers, whether for acts of heroics or acts of kindness, comfort, and companionship. It further studies the role of personal commemoration through the admiration of their peers. Next, chapter three studies the role of friendships in the transition into the post-war world. It investigates the destruction of the nurses' female communities through the marriage of its members and the end of the war. Lastly, the third chapter covers the existence of the "second experience" and its impact on military nurses' wartime memories. This chapter argues that the friendships provided the nurses with avenues to maintain their memories and acknowledge the

pain of the nursing community when they struggled to acknowledge their own individual suffering.

Sources

This study draws upon numerous letters, diary entries, published and unpublished memoirs, oral interviews, official government reports, and propaganda. These sources come from a wide range of places, including the Imperial War Museum's archives, the Museum of Military Medicine's archives, the Library of Congress, the People's Museum's archives, the Working Class Movement's archives, the Australian War Museum's archives, and published memoirs. To answer the questions of this project, I analyzed the letters and diaries of women written at the time and the memoirs written after the war's conclusion. I focused on instances in which women wrote about other women and their experiences within female communities. I further analyzed their writing for evidence about the specific benefits that the communities offered them. These accounts showed many examples where the nurses wrote about other women and characterized how they supported, protected, and validate each other within female communities and spaces. Additionally, I studied the official governmental post-war commemoration of the nurses' services and the employment of nurses in the post-war world. Finally, I further analyzed the status and resources available to working women after the war within the United Kingdom, the United States, and Australia.

This paper incorporates a large volume of oral histories in its analysis. These interviews were largely conducted decades after the war ended. Therefore, they are heavily subjected to the biases of time. In addition, the many mythologies and popular interpretations of the Second World War of the post-war period undoubtedly influenced the speakers' memory significantly. However, the primary concern of this paper is the role of friendship among the nurses. It is

interested in the value of these friendships to the women who maintained them. Thus, when a veteran nurse speaks of a friendship she had thirty years ago, it only further exemplifies that friendship's value and impact on her war experience and memory. Therefore, while acknowledging the limits of oral testimony, the fallible memory still offers critical insight into how friendships benefited women through protection, emotional support, and entertainment.

The accounts included in this paper are from nurses who served on transport ships, hospital ships, field hospitals, civilian hospitals, stateside military hospital, and hospitals constructed in buildings abroad. It further includes the voices of many women captured during the war who worked in hospitals constructed by the enemy. The women almost always worked in groups of two to six nurses, depending on the size of their assignment. While many nurses traveled across oceans or the English Channel in large groups, once assigned to stations, their numbers often dwindled to less the six. Only within the POW camps and larger military hospitals were the number of women working and living together large enough to comprise an entire community. Although within the POW these numbers consisted of nursing and civilian women.

Establishing Bonds:

Navigating Issues of Space and the Production of Femininity in a Male Sphere

During the Second World War, allied military nurses from the United States, Britain, and Australia structured an identity that extended beyond their army or navy unit. Instead, their occupation and gender comprised a group identity. Furthermore, their position in the *feminine culture* played a prominent role in how they chose to navigate space and engage with rituals and expectations of femininity. The *feminine culture* acted as a community through which women established and maintained their identity. For the purpose of this paper, *feminine culture* represents the wide variety of physical expression, rituals, and behavior expectations that people perform to establish a deeper connection with the female gender. The feminine culture takes on many forms across different nationalities, races, and incomes. Instead, this paper explores how women utilized different elements of feminine expression to reinforce their identity as women and strengthen their bond with other women. Therefore, nurses used femininity as a tool to recognize similarities among their female colleagues which helped strengthen their friendships.

The *feminine culture* appears within elements of space in terms of the appropriate spaces that women can or should occupy. For example, women can engage with the feminine culture through the application of beauty products or attention given to domestic comforts (cooking or the creation of an artificial homelike space). The Second World War drastically altered the parameters of acceptable spaces for women. However, as nurses moved into the combat zones, the issue of space remained significant. *Feminine culture* further appears within behavior expectations. These expectations can concern how women navigate space, for example, always traveling in groups when exiting the safety of women's spaces. Nurses' position as the only

women within masculine spaces meant they had to remain guarded against attacks by friend and foe alike. Furthermore, women managed and used space within their tents to construct domestic comforts or for beauty rituals. In addition, to issues regarding space, the war brought significant upheavals in how nurses could access and express femininity. Military nurses' efforts to maintain their femininity throughout the war show how femininity functions as an aspect of identity, agency, and culture. This chapter explores how military nurses navigated issues of space and femininity within female communities to maintain their place within the *feminine culture*.

Change of Space

Due to the nurses' distance from home and proximity to military men, their female community acted as their primary protection. Many of the nurses had never left home before, and thus the war represented the first time they strayed beyond the safety net of family. As Jane Brooks argues in *Negotiating Nursing*, the profession of military nursing put women into the paradoxical position in which they performed a highly feminine occupation in a highly masculine space. In addition, the advance of medicine meant recognition for the value of immediate care for wounded soldiers. Thus, the outbreak of war in September 1939 caused a shift regarding the acceptable place of nurses in relation to the battlefield.⁴⁸ Although military and government officials called on the female nurses to enter this critically male sphere, many men occupying the space remained less tolerant. In Ruth Haskell's memoir, *Helmets and Lipstick*, she claimed that her friend overheard an English officer expressing his displeasure at having women on board their ship. According to Haskell, the officer "did not see any earthly use for women on the ship." Furthermore, the women could not "possibly be anything but a

⁴⁸ Jane Brooks, *Negotiating Nursing: British Army Sisters and Soldiers in the Second World War* (Manchester: Manchester University Press, 2019) 2-9.

hindrance," and he declared the women onboard represented an "ill omen."⁴⁹ Haskell wrote that she and her roommates aboard the ship discussed this opinion with aggravation. Later an American officer expressed the same disdain, declaring that these nurses would "be more trouble than they're worth." Finally, Haskell wrote that a "meek little girl" defended the women and asked that the men give them a chance. She had declared, "When the going gets tough, I guess you'll find that we will carry our own weight."⁵⁰

Other men expressed concern over the nurses' welfare when they worked so close to the front lines. According to Muriel Phillips Engelman, when she and her fellow nurses were stationed in Liege, her patients expressed displeasure at the nurses' nearness to the Battle of the Bulge. Some patients offered to give up their seats in ambulances. Other patients gifted Engelman with knives or small weapons to attack "Krauts" in the event of an invasion. One patient instructed, "Kraut approaches, you plunge this knife into his belly, you turn it, and you run like hell."⁵¹ Ruth Lillian Anderson Aitkin noted a similar reaction in her oral interview. She said, "When you went into the triage tent, you can't imagine the looks on their faces when they saw a white woman. They could not believe that there were nurses there during the battle."⁵² The soldier's incredulity at seeing a white woman so far from home represents how the nurses' presence in such a masculine sphere upset the natural order of war. Men went away to fight in wars to protect their women at home. They entered the dangerous warzones with the noble intention of protecting women in the safety of the home front.

⁴⁹ Ruth G. Haskell, *Helmets and Lipstick: An Army Nurse in World War Two*, (New York, New York: P.G. Putnam's Sons, 2017), 62.

⁵⁰ Haskell, *Helmets and Lipstick*, 64.

⁵¹ Muriel Phillips Engelman, interviewed by Betty Hoffman, April 28, 2009, Veterans Project, Library Congress, Washington, DC.

⁵² Ruth Lillian Anderson Aitkin, interviewed by Kathryn M. Rasch, Veterans Project, Library Congress, Washington, DC.

In many ways, their unwelcomeness in the military spaces marked one aspect of the nurses' identity that all the nurses shared. No matter how well they did their job, their existence within military spaces (field hospitals, combat zones, or transport ships) prompted adverse reactions from their male peers or patients. Even if their presence received positive feedback, it did not negate the fact that their presence received consideration in the first place. Women's nearness to the battlefield challenged gender norms and invited scrutiny. Through this scrutiny, an aspect of the women's shared identity solidified. Whether or not their peers welcomed women in this space, the fact remained that they each represented an interloper in this space. As the only women in heavily male spaces, the nurses shared an otherness that further reinforced their group identity.

In *We Band of Angels*, Elizabeth M. Norman traveled the US interviewing the surviving nurses who had served in Bataan during the war. She discovered during her oral interviews a running pattern in the way the nurses recollected their time in the army. She claimed that many of the women she interviewed tended to speak in terms of "we" and viewed their memories through the lens of a group experience. Although Norman wrote that the women struggled to speak only about themselves, "they insisted on emphasizing their connections, their relationship with one another." Thus, Norman referred to the veteran women as possessing a "collective persona." According to her, this sense of group identity crucially affected the nurses' high survival rate when other groups fared less fortunately.⁵³ Women spent time in shared spaces led to intense bonds that solidified a group identity.

⁵³ Elizabeth M. Norman, *We Band of Angels: The Untold Story of the American Women Trapped on Bataan* (New York, New York: Random House, 1999).

The physical segregation of military personnel marked another way that space created particular distinctions of gender. Space functioned as a significant division between men and women within the military world. In each woman's account, military officials never failed to place the nurses in separate sleeping areas to the men in their immediate company. In Brenda McBryde's memoir, *A Nurse's War*, she wrote that on one occasion, the major in charge placed a sign outside the nurses sleeping quarters, reading, "'Sisters' Quarters. Keep Out'." The engineers poked fun at this effort for boundaries by fixing a sign outside their tent that read, "Brothers' Quarters. Come In."⁵⁴ Multiple women reported that the military supplied them with cabins that slept four to eight women aboard a ship. In Haskell's memoir, she places significant attention on the bond she shared with her initial cabin roommates. For example, her roommates helped take care of her when she fell ill to seasickness. The bonds that the nurses made with roommates could last the duration. QA 'Audrey' Etheldreda Honora Agate spoke highly of the women with whom she roomed. "Four of us put into a cabin, which was luxurious really for a troopship, and we became very good friends. We stayed together." She later affirmed in her interview that the four of them developed a sisterlike bond and spent all their off-duty together.⁵⁵

Mary Louise Carpenter described her living quarters in a letter written in July of 1944: "The five nurses of our platoon live in a small square tent that's pretty dark when the sides aren't rolled up, as there's just one smallish door cut into one side. Camping experience has taught me the value of any waterproof material for outdoor living....We sleep on our bedrolls, which contain our clothes and are on canvas cots....We use wooden boxes for bureaus and keep the rest

⁵⁴ Brenda McBryde, *A Nurse's War* (New York, NY: Universe Books, 1979), 104.

⁵⁵ 'Audrey' Etheldreda Honora Agate, interviewed by Lyn E. Smith, July 18, 2001, Reel 3, Imperial War Museum, London, United Kingdom.

of our things in suitcases and musette bags.”⁵⁶ Haskell reminisced about when she and the other nurses received the top floor of a beach house when they landed in Italy. According to Haskell, the nurses jammed so tightly in the space that if they wanted to turn over, as one girl claimed, they would need to do it "by numbers."⁵⁷ The comment received a burst of laughter from the room of nurses. In many respects, the change into a masculine space meant the nurses lived in tighter quarters and spent significantly more time among women.

Once overseas, this shared space between men and women created logistical problems. For example, according to Isabelle Cook, while she was stationed in North Africa, the military had to make special arrangements to allow the nurses to bathe. She reported that “they had a portable shower unit for the soldiers, for the combat soldiers, and they stopped the soldiers from going in to allow the ten nurses to take a shower, which was wonderful after two days being on the road.”⁵⁸ Beyond simply logistical problems, women's existence in the male space meant their bodies and behaviors were on constant display. Cook commented that she doubted whether she and the other nurses received complete privacy during these showers. She stated, "And, of course, we had the soldiers all lined up ready to wash our backs and do everything else. They were very helpful, but, of course, I do think there might have been a hole in the tent, but we never did find out for sure whether there was one or not."⁵⁹ McBryde disclosed a similar experience of finding her body on display. She wrote, “Bath night, we were to learn later, was greatly appreciated. Then, our perfectly thrown silhouettes, each with a foot in a biscuit tin and wearing nothing at all but a tin hat, were revealed on the side of the tent by the glare of our Tilly

⁵⁶ Mary Louise Carpenter letter, *With Love, Jane: Letters from American Women on the War Fronts*, North American Women's Letters and Diaries.

⁵⁷ Haskell, *Helmets and Lipstick*, 78.

⁵⁸ Isabelle Cook, interviewed by Jeffery M. Beers, Veterans Project, Library of Congress, Washington DC.

⁵⁹ Cook, interview.

lamp.”⁶⁰ Mary Haddie Swan, a British nursing sister, claimed that she and her fellow nurses brought shorts aboard their ship to exercise on the boat. According to Swan, their activities drew a crowd as men would come out to watch the women work out in their shorts.⁶¹

In her memoir *Lingering Fever*, LaVonne Telshaw Camp wrote about her experience as an American nurse serving in Bataan. She recounted the strangeness of using the latrine with a male escort. She wrote that while her commanding officer required male escorts for the restroom to protect the nurses from dangerous animals, she and her fellow female colleagues perceived the men in their medical care to be "wolves" from which they needed protection. According to Camp, some nurses tried to sneak to the bathroom without an escort. However, one woman found a snake waiting for her in the dark stall and immediately called out for the guard.⁶² The need for physical protection in the space meant that many nurses did everything in a group. For example, Jeanne Grushinski Rubin specified multiple times during her oral interview that they did so as a group whenever she and her friends went out.⁶³ Mary Haddie Swan made a similar statement in her interview. “Whenever we went out, we always went out in a group, never alone.”⁶⁴ While constantly moving out in groups offered the women physical protection against sexual assault, it also protected their reputations against the possibility of rumors and contamination of characters.

In *Lingering Fever*, Camp reported that when they crossed the Atlantic on route to Asia, one woman dared go out on the deck by herself one night among the men. She quickly won the

⁶¹ Mary Haddie Swan, interviewed by Lyn E. Smith, October 26, 1998, Imperial War Museum, London, United Kingdom.

⁶² LaVonne Telshaw Camp, *Lingering Fever: A World War II Nurse's Memoir* (Jefferson, North Carolina: McFarland & Company, 1997).

⁶³ Jeanne Grushinski Rubin, interviewed by Therese Strohmer, August 22, 2014, Oral History Collection, the University of North Carolina at Greensboro, Greensboro, North Carolina.

⁶⁴ Swan, interview.

title of "Horizontal Harriet." Camp claimed that after that incident, "Nobody talked about it, and everybody avoided Harriet as though she were grossly contaminated."⁶⁵ While the actual threat of physical or sexual danger encouraged the women to always travel in groups, as the nickname "Horizontal Harriet" suggests, their reputations represented another aspect that needed guarding. After this unfortunate woman developed this title, she no longer received the support of the other women aboard the ship. Women who engaged in moral deviance committed a significant violation of a social norm within the *feminine culture*. The violation of this norm often resulted in social ostracization from other women. As this paper suggests, the nurses depended on the female community for physical protection and emotional support. Even outside of the fighting and bloodshed, female comradery helped the women's mental health during long lulls.

Despite the social shame that followed Horizontal Harriet for her actions, the nurses enjoyed considerably more freedom in their interactions with men during the war. In Parkin's memoir *A Desert Nurse*, she details her experience in nurses training prior to the war. According to Parkin, while she worked in a London hospital, her matron enforced a policy that prohibited male medical students from speaking to the same nurse twice.⁶⁶ However, once they joined the QAs and moved into military space, the nurses experienced a significant increase in independence over their interaction with men. Although many nurses enjoyed their numerous dates and frequent trips to the officers' clubs, some women negatively felt the pressures to date. For example, when Agate first met her husband, he urged her to bring her friends to the officers' mess to spend time with him and his friends. According to Agate, he said, "It would be nice to have a few females around." Despite this insistence, she initially held out. "'Well,' I thought,

⁶⁵ Camp, *Lingering Fever*.

⁶⁶ Betty C. Parkin, *Desert Nurse: A World War II Memoir*, (London, United Kingdom: Robert Hale, 1990).

'over my dead body.'" Unfortunately, in Agate's situation, this soldier continued to pressure her, and eventually, she claimed that he used "emotional manipulation" to get her to marry him before she was ready. In her oral interview, Agate stated, "I didn't like him when I first saw him. I should have stuck to it."⁶⁷

Occasionally, the confinement to limited space strained some of the women's nerves. Muriel Phillips Engelman talked about her time stationed in England. "We had to stay there in this cow pasture for seven weeks before it was safe before they had chased all the Germans out of Liege. So, they had these huge tents, we had 30 nurses to a tent, and we lived in the tents for seven weeks."⁶⁸ When asked what she and her fellow nurses did during the interval, Engelman answered, "Went nuts. Well, for the first few weeks we couldn't do anything. We couldn't leave the cow pasture because every road was mined, every town was mined. All the nearby towns, Isigny, St. La, Sainte Mere Eglise, they had all been bombed out, so we couldn't leave our cow pasture." In order to fill the void, Engelman said, "So, we had fashion shows. We took our aluminum mess kits and put them on our heads, and we draped ourselves with blankets...[and] we played baseball and softball."⁶⁹

The change of space for black nurses placed them in positions of vulnerability for more than just their gender. Unlike her white colleagues, Oneida Miller Stuart experienced intense hostility from some of her patients due to her race. According to Stuart, she treated both black and white soldiers at her military hospital in Nichols General Hospital in Louisville, Kentucky. She recalled several instances when the men under her care called her "nigger" numerous times and made her uncomfortable. She even turned down an opportunity to run a ward due to the

⁶⁷ Agate, interview.

⁶⁸ Engelman, interviewed.

⁶⁹ Ibid.

aggressive racism of one patient. Overall, however, Miller claimed that many white soldiers treated her kindly.⁷⁰ Furthermore, Nurse Prudence Burrell, a black nurse serving at 268th Hospital in the South Pacific, had to contend with the racism of some of the Australian civilian population while living abroad. She recalled an episode when a few "Australian ladies" believed rumors that she and the other black nurses had tails. However, Burrell claimed that white officers at the nearby white hospital had started the rumor.⁷¹

American army officials considered race when making decisions about a nurse's placement. For example, when the US Army initially reassigned Verla Virginia Kallemeyn DeBeer to the South Pacific when the war ended in France, DeBeer's roommate could not travel with her due to her race. In her interview, DeBeer recalled, "I served with a little Japanese girl...she couldn't go to the South Pacific with me, so she had to stay in Europe. Because she was Japanese, they wouldn't let her go."⁷² Working in military hospitals abroad could cause nurses to face complex ethical challenges surrounding race. Nurse Burrell claimed that she and her fellow black nurses could only treat black soldiers. She recalled one incident where a severely wounded white soldier came to their hospital in need of blood. They only had blood labeled A for African. Initially, they refused to give the white soldier the A blood, but he said, "I don't give a damn, don't let me die!" So, they treated him, and Burrell joked in her interview, "If he's still living, he's walking around with this 'A' blood."⁷³

⁷⁰ Oneida Miller Stuart, interviewed by Douglas Clanin, 15 September 1992, Veterans History Project, Library of Congress, Washington DC

⁷¹ Prudence Burns Burrell, interviewed by Katie Cavanaugh, 19 March 2022, Veterans Project, Library of Congress, Washington DC.

⁷² Verla Virginia Kallemeyn DeBeer, interviewed by Victoria Vernau, 05 September 2006, Veterans Project, Library of Congress, Washington DC.

⁷³ Burrell, interviewed.

Change of Space: Nurses as Prisoners of War

One way the Second World War radically changed the lives of some women was by placing them in positions vulnerable to capture. In the Pacific Theater, some nurses underwent the traumatic experience of imprisonment by the enemy. The stories of several Australian nurses who surrendered to the Japanese and spent three years in POW camps exemplify one of the distinct impacts that war made on some women's lives. In particular, the women in POW camps felt the strains of limited and hostile space more acutely than their free counterparts. Within the POW camps the bonds among the nurses extended beyond those of their non-interred peers. The imprisoned nurses and the civilian women within their camps formed full community structures throughout the duration of the war. Due to the nature of confinement, limited resources and close housing, the POW nurses established a working community that developed systems of entertainment, food sharing, and emotional comfort.

Iole Burkitt (nee Harper), Betty Jeffries, and Vivian Bullwinkel were all aboard the ship SS Vyner Brooke that sunk after Japanese aircraft attacked. According to Burkitt, those who could swim were asked to leave the lifeboats for those who could not swim. She and Jefferies were among the women who went directly into the water. Burkitt claimed that she picked up a small child in the water and deposited her on a raft. She and Jefferies eventually separated from the rest of the group and swam to shore. They spotted land with mangroves, and the two women swam toward them. Burkitt recalled that she and Jefferies passed the night hiding in the tree branches, engaging in long conversations, and getting to know another. Eventually, some Chinese fishermen picked the two women up and gave them food, water, and shelter. With few other options, Burkitt and Jeffries faced their fate and turned themselves into Japanese patrols. According to Burkitt, the patrols expressed excitement when they discovered their profession

and eagerly utilized the nurses' skills. They quickly set to asking Burkitt and Jefferies for advice on medical issues.⁷⁴

From there, the Japanese took Burkitt and Jefferies to a prison camp in Muntok, Indonesia, where they eventually met up with Vivian Bullwinkel, who had been among the women who boarded the lifeboats when the SS *Vyner Brooke* sunk. Bullwinkel's narrative offers a less friendly interaction with the Japanese soldiers. According to Bullwinkel, the lifeboats steered their boats toward a fire on the beach with their shipmates. After a failed attempt to get locals nearby to help the stranded passengers, the Chief Officer of the SS *Vyner Brooke* took a vote from the shipwrecked party, which Bullwinkel reported numbered near a hundred. As they had no food, they all agreed to turn themselves into the Japanese as prisoners of war. Several civilian women with children left the camp to surrender closer to food and shelter. However, when the Chief Officer brought Japanese soldiers to the camp and explained their desire to surrender, the Japanese soldiers ignored his request. Instead, Bullwinkel claimed that he took the men away from the women down the beach. The Japanese soldiers returned alone, wiping their bayonets.⁷⁵ Bullwinkel testified about this event and what happened next in an affidavit before the Australian War Crimes Board of Inquiry.

“The one in charge suggested that we should go towards the sea and sent a couple of Japs to push us along. We went towards the sea and kept walking in, and when we got up to our waists, they started firing up and down the line with a machine gun.... the girls fell one after the other. I was toward the end of the line, and a bullet got me in the left loin and went straight through.... There were 23, including myself – 22 nurses and one civilian. The waves brought me back to the edge of the water. I lay there for 10 minutes, and everything seemed quiet.... I sat up, and there was no sign of anybody.”⁷⁶

⁷⁴ Iole Burkitt (Harper), interviewed by Jane Fleming, 1983-1984, Tape 42, Prisoners of War: Australians under Nippon, Australian War Memorial.

⁷⁵ Vivian Bullwinkel, interviewed by John Clements, 1977, Imperial War Museum, London, United Kingdom.

⁷⁶ Vivian Bullwinkel, Affidavit. Australian War Crimes, Board of Inquiry, October 29, 1945, 5.

Bullwinkel took refuge in the jungle where she hid and slept for days until she eventually met with an Englishman, Private Kinsley, who had been injured by a bayonet and lost part of his arm in the shipwreck. Bullwinkel tried seeking help from local men in the village, but the men refused to help her. Instead, two women in the village gave her some food, "rice, dried fish, and pineapple." The men in the village only consented to help Bullwinkel and Kinsely when they heard that the pair had decided to turn themselves into the Japanese. One man, who spoke English, told Bullwinkel that a concentration camp was nearby in Muntok. Bullwinkel asked, "Are there any white women there?" He answered, "Yes, they're wearing red cross armbands."⁷⁷ The purpose of this question and the relief at the answer signify the importance Bullwinkel felt about reuniting with her fellow nurses. Since the massacre at the beach, Bullwinkel had only interacted with civilian Malaysian women. Furthermore, the incident on the beach had involved the slaughter of 21 nurses with whom Bullwinkel had been traveling. Her traumatic experience and near-death meant she expected another attempt at her execution if she reencountered the Japanese. The assurance that other nurses had been seen in the camp alive alleviated her concern over the danger of turning herself in.

Fearful that the Japanese would want to silence any news about the incident on the beach, Bullwinkel and Kinsley agreed to keep quiet about their traumatic experience. The Japanese then separated Bullwinkel and Kinsley, but she expressed relief upon entering the camp and seeing women sporting the Red Cross Band. She stated that she had wished to be with her own countrywomen again. When inside the camp, she overheard a person cry out, "Oh, it's Bullwinkel!" At the sound of a familiar voice recognizing her, Bullwinkel reported that she immediately began to cry. Bullwinkel claimed that the whole time in the camp if ever she felt

⁷⁷ Vivian Bullwinkel, Interview.

frustrated or downtrodden, she would remember her time of isolation in the jungle and be grateful for the company of her fellow nurses.⁷⁸

The nurses formed a strong community while within the prison camp. Bullwinkel stated that the nurses' background in hospital work enabled them to adapt more quickly to the prison environment. "I believe that being nurses, we were able to adjust perhaps more quickly than civilian women who had really had to work very hard for some years, and also we were used to taking orders." Furthermore, their bonds of friendship gave them psychological comfort. "The very great thing, we had that confidence in each other, and if anything happened to us, there was somebody who cared, and that was terribly important."⁷⁹ Bullwinkel's time in isolation allowed her to reflect on her time in the camp with a unique perspective. In an affidavit for the Australian War Crimes Board of Inquiry, she claimed that the nurses lived in constant fear of the Japanese guards. The latter occasionally slapped women for not listening. She reported that a few women had lost teeth or had a black eye as a result.⁸⁰ Despite the violence, limited food, and comforts (the houses came completely unfurnished), she remained grateful for the community of women that she lived among. Her time in the jungled provided a contrast for which to measure her days in the camps.

Similar to the nurses still at liberty with their own troops, the POW camps in India offered limited privacy for the nurses imprisoned by the Japanese. In the initial camp at Muntok, Burkitt stated that a male guard would come walking through when women relived themselves. However, "When there's no alternatives, we found you accept thing quite happily...if it was urgent enough, you didn't take any notice of that either."⁸¹ Bullwinkel claimed that the Japanese

⁷⁸ Ibid.

⁷⁹ Ibid.

⁸⁰ Vivian Bullwinkel, Affidavit, 7.

⁸¹ Burkitt (Harper), interview.

had moved her and the other nurses several times. Once to huts where they "didn't have much privacy." Privacy in terms of bathing became increasingly difficult for the POW nurses. Eventually, the Japanese moved Bullwinkel and the other nurses to a rubber plantation where they could only bathe in the river. However, Bullwinkel claimed that they had "become conditioned to having less and less, and having you know, less and less privacy."⁸² Beyond the complexities of privacy that female nurses demanded, women usually require an increase in hygiene products once a month. However, within her camps, Burkitt claimed that "Very fortunately, nobody had a period during that time. Shock and everything else, fortunately –well, when I say none, I think one or two did, but I think the sailors gave us singlets and those things. And that was it. But most people didn't, I'm glad to say, for months, years." The lack of menstruation for such a prolonged period confirms high-stress levels and severe malnutrition.⁸³

The women in the Japanese POW camps also experienced pressure from men to engage in romantic and sexual activities. On occasion, Japanese soldiers attempted to get the nurse prisoners to socialize with them at their officers' club. Both Bullwinkel and Burkitt recalled only one such incident. According to Burkitt, the Japanese soldiers had plenty of other women to choose from, and so, "why bother about a lot of haggish looking nurses?" Burkitt's recollection of her time in the POW camps does not include any instances of violence against the women; she stated that she believed an order had been made that the nurses were to remain "unmolested."⁸⁴ However, Bullwinkel swore in her affidavit that they recalled several instances of face slapping that occurred.⁸⁵ Bullwinkel stated that the women did similar activities to non-imprisoned nurses to keep themselves entertained inside the POW camp in Sumatra. "Moral was, on the whole,

⁸² Vivian Bullwinkel, interview.

⁸³ Burkitt (Harper), interview.

⁸⁴ Ibid.

⁸⁵ Vivian Bullwinkel, affidavit.

very good. One had to keep a sense of humor. We held concerts. We had a choir." Additionally, a missionary woman produced a paper for the camp until they ran out of writing supplies. Like Engelman, Bullwinkel claimed that the nurses put on parades with costumes in the camp, "which led to a lot of fun."⁸⁶ Nevertheless, the stories shared by Bullwinkel and Burkitt paint a picture of a highly stressful environment in which the nurses lived on limited resources in terms of clothing or food. Indeed, as Burkitt mentioned, most of the nurses interred in her camp lost their period for their three-year incarceration period. Due to their position as prisoners, these Australian nurses suffered the unwanted attention of enemy troops. As the war progressed, the women's loss of privacy highlighted their deteriorating control. Despite their difficult circumstances, the nurses established a strong, close-knit community within the confines of their camp.

Conclusion: Change of Space

Overall, the evidence suggests that although the military placed nurses in unfamiliar, masculine spaces, the *feminine culture* pervaded these spaces. Nurses responded to the hostilities and anxieties of their male colleagues through unity and confidence. Military officials segregated the nurses from their male colleagues and patients as much as possible. In many cases, the women formed tight friendships and intimate communities with the women they shared their living spaces. In the case of the Australian POWs, they created a strong community while imprisoned where they relied on a group mentality to keep morale high. The example of the Australian nurses highlights how the Second World War placed women in positions of real danger.

⁸⁶ Vivian Bullwinkel, interview.

Additionally, female nurses inhabiting a masculine space created significant logistical issues regarding sanitation and privacy. Although no nurses reported physical, sexual molestation, numerous women reported that their privacy had been violated during bathing incidents. The *feminine culture* of the 1930s and 1940s still maintained harsh judgment about unsupervised interactions between men and women, as evidenced by Parkin's account of her time in nurse training. However, once they entered the military world, nurses enjoyed significantly more freedom in their interactions with men. Typically, within feminine communities, the *feminine culture* places behavior expectations on women, the violation of which can result in significant isolation from feminine communities. The fate of "Horizontal Harriet" exemplifies the result of violating a behavior expectation of the feminine culture. However, while women were abroad, outside social expectations pressured them to engage in romantic activities more frequently than they would have done in civilian life. Nonetheless, when women maintained good status within their female communities by adhering to all the feminine cultural expectations, they enjoyed strong friendships and participated in morale-boosting activities.

The Role of Femininity in Comradery and Group Identity

Expressions of femininity can take many forms across different groups of women. This paper defines femininity as any physical or behavioral expression enacted by someone to reaffirm their connection to the female gender. Joan Scott defines gender as "a constitutive element of social relationships based on perceived differences between the sexes."⁸⁷ This paper extends that definition to include the perceived similarities between people of the same sex. Women engaged in performative acts of gender that serve not only to differentiate them from

⁸⁷ Scott, "Gender," 1067.

their male peers but also to further unite them with their female peers. This paper adopts the framework that gender construction functions as a tool of social organization and that women's perceptions of their gender derives partially from the influence of other women, and not only as a response to men. In other words, a women's connection between gender and identity falls not only on her otherness or separateness from men but on her similarities to other women. Women engage in expressions of femininity to align themselves with other women in their community (e.g., mothers, sisters, friends, teachers).

Expressions of femininity remain fluid and take different forms across different cultures. This paper does not suggest that a single, universal idea of feminine expression exists, but instead that women used their own concepts of femininity to bond with other women who adhered to the same or similar concepts. Therefore, women who subscribe to the idea that the act of shopping for silk scarves or perfumes represents a feminine activity would participate in these activities with other women as a means of connecting to their gender together. Under Joan Scott's framework of gender, she argued that gender roles or customers are merely perceived to be "normative" gender roles.⁸⁸ While an individual women's idea of traditional gender customs may not be based on fact, the perception itself matters. The nurses bonded with other women who shared the same or similar ideas of normative gendered activities. These activities helped them maintain a connection with their identity. Therefore, engaging in activities or donning certain attire serves several vital purposes in terms of gender. Firstly, it separates them from the male gender; secondly, it more firmly aligns them with the female gender; and lastly, it helped them obtain a sense of normalcy under challenging circumstances.

⁸⁸ Ibid., 1067-1068.

As the nurses could not fully assimilate with the male gender (no matter how much Khaki or army boots they wore), their best option was to establish strong bonds among the women in their community. Although circumstances made it difficult for the nurses to utilize Western ideals of femininity (such as skirts, stockings, makeup, or elaborate hairstyles), they found means of introducing and incorporating femininity into their lives while serving abroad. Furthermore, by participating in the feminine culture, they maintained a sense of normalcy in uncertain and novel circumstances. Women utilized femininity to strengthen their identity and find a common identity among their peers. Through these strategies, the women developed closer bonds and a group identity that offered the numerous benefits of comradeship.

The construction of a community relies on shared cultural norms and expectations. Within the female communities, rituals, and aspects of femininity function to form a group identity. Western culture in the 1940s offered women limited opportunities for control in their lives. For example, they possessed limited control of their mobility in public spaces. Nonetheless, Women still exercised control over their physical appearance. According to Melissa A. McEuen, the United States government recognized a connection between women's physical appearance and mental health. According to contemporary doctors, the use of beauty products positively influenced women's physiological wellbeing. The British placed "beauty stations" in their factories to encourage women to work for them. McEuen claimed that the "constructed face" protected the femininity that war work threatened.⁸⁹ An all-female factory has no male gaze to serve as the reason why the women workers cared about their appearance. Another possible explanation for the attention on their appearance within a female social space suggests

⁸⁹ Melissa A. McEuen, *Making War, Making Women: Femininity and Duty on the American Home Front, 1941-1945* (Athens: University of Georgia Press, 2011), 6-7.

that their appearance reinforced group identity. By applying cosmetics and matching the popular hairstyles, women's perception of themselves as members of the group increased, potentially correlated with increased mental health.

In McBryde's recollection of her time in the war, her attire played a critical role in her separation from civilian women. McBryde wrote about the strange looks she and her fellow nurses received from the local women in a modest French community during the Normandy Invasion due to their trousers. When she and the other nurses in her group spent the night in a convent, she paid particular attention to the swish of the nuns' full skirts compared to the clunky step of her gumboots. When they bathed, McBryde wrote that the nurses only dared roll up their sleeves and unbutton shirt collars in the "modest" environment. Writing about the other women in the convent, McBryde wrote, "Wary of our trousers, they returned our smiles shyly and looked the other way."⁹⁰ In her account, McBryde expressed concern over the perspectives of other women (not men) when contemplating her loss of femininity.

Muriel Phillips Engelman expressed a similar separation from female identity when she informed an interviewer that her mother sent her underwear because, as she stated, "sometimes you didn't feel feminine at all, and you would say send me a slip with lace on it." Then she admitted, "We never got to wear slips. We wore combat pants and combat boots."⁹¹ In addition, Engelman's collection of war memorabilia contained a "glamor shot." Her interviewer questioned her about her motivation for taking that photograph. She replied:

This was in Liege, Belgium, and...we had been living in these olive drab combat pants and olive drab combat liners and olive drab long underwear and everything olive drab and wearing helmets on your head and combat boots. You know you felt grungy. You never felt feminine. So, at one point, I decided on my day off I went into this photographer in Liege, and I had a beautiful lace...that I had bought in Paris, and I told the photographer...make me look feminine.... He posed me in front of the camera, and I

⁹⁰ McBryde, *A Nurse's War*, 98-100.

⁹¹ Engelman, interview.

had the most gorgeous, glamorous-looking photo. ...I was so proud of myself. It made me look feminine, and every so often, I'd take the photo out and look at it. I'd say, 'Boy, that will be the day when I look like this.'⁹²

During the Second World War, uniforms signaled a person's method of contributing to the war effort. Uniforms showed membership in the military, the medical field, or often, what civilian job a woman had taken on during the war. According to Julie Summers, civilians learned to identify a person's rank based on their uniform as the war progressed. In 1940, Britain hit its peak in uniform production with 17.5 million BD blouses and trousers, 3.5 greatcoats, and 12 million boots.⁹³ Both Mary Haddie Swan and Amy Selina 'Pam' Dunnett, who served as British QA's during the war, reported that the British military had required them to purchase their own uniforms. Dunnett stated that she received instructions to go to Boyd Cooper on Hanover Square. She further shared that her uniform differed from the other QA's since she served in the Reserve. She wore a grey cape with only a red border to signify her membership in the reserves.⁹⁴

According to 'Audrey' Etheldreda Honora Agate, who served in Kohima, India, with the QAIMNs (Queen Alexandra's Imperial Military Nurses), the nurse's uniforms helped show a women's position in the nursing hierarchy. She said, "It is a pity that our hospitals don't still have capes. Because you can tell at a glance the status of a nurse or sister by the capes."⁹⁵ An edition of *Life* magazine, published in 1938, reported on American nurses' training at institutions like Roosevelt Hospital. It informed its readership that nurses only donned a cap once they graduated from their probationary period. In this respect, nurses differed from civilian women in that their

⁹² Ibid.

⁹³ Julie Summers, *Fashion on the Ration: Style in the Second World War* (London, England: Profile Books, 2015), 39.

⁹⁴ Swan, interview; Amy Selina 'Pam' Dunnett, Interviewed by Lyn E. Smith, March 25, 1999, Imperial War Museum, London, United Kingdom.

⁹⁵ Agate, interview.

attire had signified their professional status before the war.⁹⁶ To don a cap symbolized a significant achievement and an induction into the ranks of her nursing peers.

Agate claimed that she and her fellow nurses' uniforms underwent several changes during her time in the service. Initially, they wore khaki skirts in the day, only to change into trousers in the evening. Later in the war, they switched to army green to match the men. Lastly, she stated that the nurses returned to their original grey uniforms. "For the morale of the troops, our uniforms were replenished, and we wore a grey frock and...cap. We were trying to run a proper hospital, and the men liked to see us in proper uniform." The uniform signified their identity as nurses. When their uniforms slowly changed to blend in with the men's uniforms, it meant a loss of distinction, which harmed their identity as nurses. Agate claimed the soldiers didn't view them as "proper nurses..." without their capes and uniforms.⁹⁷ In this respect, women's wardrobes functioned not to promote sexual attractiveness to their male peers but as a marker of their professional status and identity. Traditional nursing uniforms allowed the nurses to enjoy increased confidence from their patients regarding their abilities. The accounts from Dunnett and Agate highlight how wardrobes functioned to establish a women's identity and membership in a particular group. Furthermore, their accounts emphasize that the nurses had a keen awareness and appreciation for how attire and accessories signified identity and group membership. Their awareness refutes the assumption that women wore clothing without consideration. These women did not simply consume and wear clothing without awareness of how their bodies act as spaces of communication. Although the military stipulated their wardrobe

⁹⁶ Life Magazine 31, January 1938.

⁹⁷ Agate, interview.

requirements, the nurses still acted with the agency through their understanding and opinions surrounding the different aspects of their uniforms.

When some of the nurses received uniforms delivered to them, the war officials failed to appreciate the dimensional differences between male and female bodies when designing uniforms. In her memoir, *A Nurse's War*, Brenda McBryde, who served in the Queen Alexandra's Imperial Military Nurses (QAIMN), described her fellow nurses' dismay upon receiving their kit after arriving in Normandy. She wrote, "The outfit had been designed for a man. The unyielding trousers were too tight over the behind, too big around the waist, and too long in the leg except for giraffes like Miss Agate."⁹⁸ Furthermore, some women were frustrated by the inconsistent clothing given to different services (the WRNS received stocking coupons, whereas the WAAFs did not).⁹⁹ According to Summers, the issuing of uniforms elicited different reactions among women. For some, it meant a "sense of belonging," while for others, it represented a precedent of possessing their own apparel.¹⁰⁰ Irene Mertz admitted in her oral interview that she had been unsure what branch of the military to join but ultimately decided she liked the "romantic" nature of the navy. In particular, she favored their uniforms.¹⁰¹

While uniforms stripped women of their clothing choice, many women still exercised control over their hair and use of cosmetics. For example, Marta Gorick wrote a letter home about her experience evacuating her ship in the middle of the night after it sustained a torpedo attack. When rescuers picked up her lifeboat, Gorick admitted in a letter to a loved one that she applied, "my rouge, lipstick, and powder before being picked up, thinking I might look at least a

⁹⁸ McBryde, *A Nurse's War*, 70; Different Agate then mentioned above.

⁹⁹ Summers, *Fashion*, 46.

¹⁰⁰ Summers, *Fashion*, 47.

¹⁰¹ Irene Mertz interviewed Beth Ann Koelsch, May 9, 2011, Women Veterans Historical Project, the University of North Carolina at Greensboro.

little bit glamorous, although worn-looking." Although Gorick had minimal control over her situation as a survivor of a torpedo attack, the application of makeup represented something she had control over. Later in the letter, Gorick wrote humorously of a "dignified matron of the British Sisters" in her stockings and sleepwear. Her superior's authority aligned with her ability to control her appearance. However, Gorick noted that the matron kept her chin up despite her disheveled appearance.¹⁰² Women's hair presented a significant concern for United States officials during the war. Hair that hung too low ran the risk of being a hazard around machinery in the factories. It caused so much concern that *Life* magazine used the influence of the Hollywood starlet Veronica Lake to promote pulled-back hairstyles. *Life* quotes Lake saying, "Any woman who wears her hair over one eye is silly." The article goes on to suggest that Lake's hair frequently got caught in buttons and ceiling fans.¹⁰³ This article suggests that *Life* magazine understood that to get women to alter their hairstyles for safety, they would need the influence of a highly feminine figure. Lake's signature style of hair falling over one eye had represented an ideal feminine hairstyle that many women had sought to replicate. The sudden change to a pulled-back style emphasizes the fluidity of feminine expression. Ideals and expectations of femininity change through time. For example, the first half of the 20th century saw the lengthening or shortening of skirts and hair cuts as the decades went on. Therefore, femininity is not static, but constantly evolving. As the use of Veronica Lake suggests, women influenced other women's decisions on how to express their femininity. Millions of American women looked to starlets such as Lake for the new ways of showcasing their participation and connection to the *feminine culture*.

¹⁰² Marta Gorick letter, *With Love, Jane: Letters from American Women on the War Fronts*, North American Women's Letters and Diaries.

¹⁰³ *Life* Magazine March 8, 1943, page 39

Although the nurses wore uniforms, or in the case of the POWs, shorts and sun tops, one activity that allowed women to interact with *feminine culture* was shopping. Shopping represented a recreational activity that women engaged in collectively. Civilian or military, women represented major consumers within the mid-twentieth century. Advertisements from the period shed light on how companies targeted women's desire to participate in *feminine culture* during the war through beauty products, clothing trends, and changing hairstyles. Beauty leaders such as Elizabeth Arden designed lipsticks to go with the muted colors of uniforms, such as Montezuma Red, "inspired by the brave, true red of the hat cord, scarf, and chevrons of the women in the Marines."¹⁰⁴ Proctor & Gamble encouraged women to "Keep your BEAUTY on duty!" with Ivory Soap in one advertisement.¹⁰⁵ Additionally, propaganda encouraging women to join a branch of service or engage in military labor through factory production never featured a woman who had neglected her femininity. Regardless of her new masculine occupation, with a face entirely made up and bandanas tied in bows, women never sacrificed their femininity for the war effort. Adverts encouraging nurses to join the war effort, the women in uniform continue to represent the pinnacle of femininity with modern hairstyles and perfected makeup complete with lipstick.¹⁰⁶ In figure 1. the nurse shown has a face with full red lips as a pair of patriotic arms fix her cap upon her head. As mentioned previously, caps symbolized nurses' status and achievement. Additionally, the hairstyle and feminine face with significant cosmetics assure any potential army nurse that her femininity will not be sacrificed in the line of duty.

¹⁰⁴ Elizabeth Arden, Elizabeth Arden Advertisement 'Montezuma Red,' Vanity Fair, April 14, 2017, <https://www.vanityfair.com/style/photos/2017/04/elizabeth-arden-archive>

¹⁰⁵ "Keep Your Beauty on Duty!" Proctor & Gamble Co., Women's Home Companion, <https://repository.duke.edu/dc/adaccess/BH0904>

¹⁰⁶ "Young Women Received Her Nursing Cap," 1942, American Nurse Association, World War Poster Collection, UNT Digital Library, UNT Libraries, University of North Texas, Texas, United States.



Figure 1. Nurse Propaganda (Photograph courtesy of University of North Texas Digital Libraries)

On the American Home Front, efforts had gone forward to reduce excess in women's attire. For example, the War Production Board produced the General Limitation Order L-85 that encouraged reducing various fabrics such as nylon, rayon, silk, cotton, and wool. These reductions meant narrower skirts, fewer pockets, and less wasted materials on hoods and shawls.¹⁰⁷ Outside of the purview of the military, the war put constraints on women's ability to express femininity. Scholarship such as that conducted by McEuen studied the relationship between women, femininity, and fashion through the lens of governmental and corporate pressures to utilize women's bodies as canvases for propaganda and promotion of their objectives. However, these narratives imply that women act as obedient consumers, following trends as a means of agentless compliance. Although government regulations and agendas influence social pressures, and corporations press various trends as a means of increasing their profits, it is worth studying why women consume these products. Why do fashion trends matter so overwhelming to women?

¹⁰⁷ McEuen, *Making War*, 138.

Although women utilize femininity to increase their attractiveness for male attention, many beauty and fashion trends fall outside the scope of sexual attractiveness. For example, many women chose to cut their hair short or adopt looser-fitting dresses during the 1920s despite general adverse reactions by their male peers. One hundred years later, similar loosing fitting trends rose in 2020 with oversized t-shirts and sweaters. None of these specific fashion or beauty trends represent an increase in a women's expressed sexuality or a desire to be seen as a potential sexual partner. Further, the adoption of these trends does not suggest that these women possess a morally superior character and would make good homemakers or mothers. Instead, the adoption of these trends represents communication between women. For example, women wear specific shoes with the expectation that their female peers will compliment them. Thus, women act with agency when they choose to engage with consumer trends that promote femininity. Through their participation in trends, women promoted their femininity to engage in the *feminine culture*. For example, women adopt changes into haircuts and styles as a collective group. Changes to hemlines and figures also happen as widescale trends. Women dress like other women to reinforce their place within the feminine culture and their communities of women. Expressions of femininity represent rituals that allow women to maintain a group identity. This shared identity further enables them to develop strong comradery and form lasting bonds.

The nurses' desire to participate as consumers through shopping rituals represents a desire to engage in feminine rituals that reaffirm their identity as members of the *feminine culture*. According to McEuen in *Making War*, women in uniform significantly concerned government officials that they would become unfeminine. As McEuen states, "Apparel was meant to separate men from women."¹⁰⁸ However, studying only the government's desires to maintain control over

¹⁰⁸ Ibid., 148.

women through clothing and beauty neglects the motivation of women. What motivated women to consume feminine products and promote a distinctly feminine image? The idea that a woman's entire motivating force revolves around the approval of male peers excludes the larger and equally impactful part of a woman's community – other women. Arguments surrounding women's wartime wardrobe that exclude the agencies of women examine women's relationship with beauty through a narrow scope where women exist and act solely under the male influence. In this lens, these male overlords take the form of fathers, brothers, corporate leaders, or governmental officials instructing women to use their bodies to demonstrate their morality or sexuality. However, through purchasing and participating as consumers, women acted with agency. Therefore, it is worth examining their motivations for engaging in social trends.

Women's motivation for consuming feminine products does not exclusively reside in their desire to attract male approval. Instead, women acted with agency when they chose to subscribe to feminine products or rituals to reinforce their identity as members of a feminine culture. In Haskell's account, she became most acutely aware of her trousers when in the company of civilian women. The distinct difference between her pants and gumboots to her host's skirts impacted Haskell's sense of femininity by making her feel outside of the feminine culture. On the other hand, Haskell discovered that she had more access to femininity than civilian women living in ration-strained London. According to Haskell in *Helmets and Lipstick*, she and her fellow American shoppers drew considerable attention from women passing by on the streets in London. After talking to one such passerby, Haskell discovered that their silk stockings were to blame. The woman stated, "You know, there hasn't been a woman gone by you who hasn't envied you your stockings! It's been so long since we have had them!"¹⁰⁹ The use of

¹⁰⁹ Haskell, *Helmets and Lipstick*, 40.

Veronica Lake as a promoter of pinned back hair shows the need to have a woman as the spokesperson to promote a change within female appearance. Women needed to see a prominent member of their community suggest and adopt a change before they considered it a viable option. Veronica Lake's femininity and membership in the *feminine culture* were unquestionable. Therefore, she held a specific authority on femininity and how it could be displayed. As the example with Gorick indicates, despite their harsh circumstances, the nurses still engaged with the *feminine culture* through beauty rituals. The fact that nurses continued to apply makeup and style their hair modeled after the feminine standards of the day suggests that they placed heavy value on their feminine identity. The extreme duress of their nurses' situations, whether near to gunfire or on a lifeboat, meant that normal cultural norms could be violated (such as the nurses' daily interactions with men). Regardless, the nurses' identity as women still functioned within the rules of *feminine culture*, and the nurses utilized beauty rituals to maintain their identity and substantiate their place within a larger group identity.

As the nurses adapted to harsh living conditions, expressing their femininity became increasingly difficult. Similar to nursing, shopping represents a feminine and domestic activity that occurs within the public sphere. While in foreign countries, whether African, Asian, or European, numerous nurses reported that they spent considerable off-duty time traveling into town with their friends to visit the local shops. Brenda McBryde's memoir recounts a particular trip to Rouen where she and other nurses visited local shops. "Dark little shops selling hand-wrought silver jewelry, pure silk lingerie, and French perfume drew francs from our wallets like magic."¹¹⁰ McBryde and her companions had lived in harsh conditions since their invasion of

¹¹⁰ McBryde, *A Nurse's War*.

Normandy. Their purchasing choices in the shops demonstrate an interest in restoring their femininity through the consumption of feminine objects, such as perfumes and silk lingerie.

Although men also shop, shopping represents a feminine activity that the nurses could collectively participate in while stationed overseas. As mentioned above, shopping stands as one of the main female-appropriate activities that women conduct within the public sphere. Women did not solely act as consumers of beauty and fashion products, but they often played the role of the consumer through domestic shopping for foodstuffs. Camp wrote in *Lingering Fever* that the nurses' station in India learned to share goods and beauty products amongst themselves.

"Occasionally, one of the nurses would get a parcel from home with all the good things we longed to have: lipstick, deodorants, cologne, bath powder, toothpaste, and other cosmetics...A package for one meant something for everyone."¹¹¹ Camp's accounts highlight the importance of a communal mindset in the acquisition of necessities. In order to participate as consumers and increase their femininity or domestic comforts, they relied on a communal mindset reinforced by group identity.

The Role of Femininity: Nurses as Prisoners of War

Similar to issues of space, the nurses who became imprisoned by the Japanese struggled significantly more than the non-imprisoned counterparts in terms of femininity. The confinement meant that the Australian nurses interned in camps did not have the same access to beauty products or clothing that other nurses had during the war. As the war progressed, the cultural norms and expectations within the *feminine culture* underwent radical shifts. In particular, it became increasingly common and approved for women to wear pants instead of skirts. However,

¹¹¹ Camp, *Linger Fever*.

the POW nurses remained unaware of these cultural changes and greeted the new world with shock upon their release in 1945. According to Bullwinkel, she and her fellow prisoners expressed astonishment upon exiting their camp and meeting a matron in trousers. Although the nurses had adorned shorts and sun tops throughout their time as POWs, they had not expected to find a woman of such station on the outside wearing pants. To Bullwinkel, this shock signified the way times had changed during their imprisonment.¹¹²

The use of uniforms signified another significant difference between the POW nurses and those still living free with their own armies. Bullwinkel claimed that the nurses kept their uniforms throughout their entire stay as prisoners of war. She stated that while the nurses typically wore shorts and shirts, they chose to don their uniforms whenever the Japanese moved them. They hoped that if their paths crossed with any ally armies, that those armies would recognize their uniforms. At the end of the war, their uniforms showed their wear and tear of several years, but Bullwinkel said that each nurse wore hers upon her release.¹¹³ Other accounts from non-imprisoned nurses highlight the significance uniforms held in maintaining rank and status within the hierarchies of the nurses. The inability to wear their uniforms regularly suggests that the imprisoned nurses held less rigid views on the distinctions between their nursing units and ranks. Regardless, their insistence on wearing their uniforms at the war's end shows the value they placed on their identity as nurses.

The establishment and maintenance of domestic comforts represent one of the main ways female POWs retained their connection with the *feminine culture*. The POW nurses did not possess the ability to travel to different markets and spend large sums on domestic comforts such as food and home goods. Nevertheless, the accounts from Bullwinkel and Burkitt indicate the

¹¹² Bullwinkel, interview.

¹¹³ Ibid.

value women placed on such comforts through the extreme efforts they made to create them. Although they could not leave the camps, the Australian nurses imprisoned in the Japanese POW camps purchased and acquired goods through a traveling market that entered their camp. Within the Palembang, Muntok, and Lubuk Linggan camps in Sumatra, the nurses worked hard to diversify their cooking with the abundance of rice. While they could not go into town and participate in market shopping, Bullwinkel and Burkitt recalled that their camp provided little food to its inmates. Bullwinkel stated that a traveling shop came inside the camp once a week and allowed the women to purchase more goods. Unfortunately, the shop expected the women to pay for it. To overcome this hurdle, the women relied on the strength of their community bonds to work together. Bullwinkel said, "So, none of us had any money, and so we decided that well we wanted these things, we better do something. So, we all took on various jobs. One girl became the camp hair barber." Other girls did chores for the wealthier civilian women in the camp who had money. Bullwinkel and another woman "joined the lavatory squad and emptied the great big cement tanks that were being used as toilets."¹¹⁴ Burkitt stated that she and her housemates created and sold a Mah-Jung set to earn money.¹¹⁵ The women worked together to participate in communal shopping to buy sugar and other supplies to improve the cooking of the entire household. Although the interred Australian nurses had limited control over their situation, they engaged in the domestic activities of shopping and cooking as a means of control.

Burkitt recalled that her housemates made sure to celebrate birthdays and holidays.

"When it came to Christmas and birthdays everybody got a little present. They'd make a little rice cake and stick a flower or two in it. Someone would lend them a piece of ribbon that they

¹¹⁴ Ibid.

¹¹⁵ Burkitt (Harper), interview.

happened to have gotten from somewhere and make a little cake.”¹¹⁶ These efforts demonstrate how the nurses utilized domestic and feminine cares to improve mental health and morale within the camps. For example, the production of foodstuffs or decorative pieces (such as ribbons and flowers) represent feminine attributes that women devised and carried out for other women. Women utilized their limited resources to improve the mental wellbeing of their fellow inmates. Furthermore, the nurses created these feminine touches to improve and maintain community bonds.

According to Burkitt, the nurses in her household shared an obsession with food during their time in the camp. She claimed they loved finding photographs of foods they could not get in the camp. For example, they hung one picture up in their house of a Christmas turkey that, Burkitt stated, "Was our favorite picture."¹¹⁷ When the nurses found out that the war had ended and they would be returning home, they celebrated through a feast. Likewise, when Bullwinkel and her friends found out they would be flying home, they cooked their remaining supplies of rice and coffee and had "a midnight supper."¹¹⁸ These accounts from Bullwinkel and Burkitt highlight the distinct difficulties that the POW nurses faced compared to the non-imprisoned nurses. Regardless of the inaccessibility of most forms of femininity, the Australian nurses still made considerable efforts to bring domesticity and femininity into the camps. These feminine rituals further reinforced a sense of community among the women in the camps.

Conclusion

Overall, an examination of military nurses during the Second World War suggests that femininity played a critical role in group identity that acted as a tool for female comradery.

¹¹⁶ Ibid

¹¹⁷ Ibid.

¹¹⁸ Vivian Bullwinkel, interview.

Women lost control over their clothing choices when they entered the military through the various nursing services. Once they traveled overseas and participated in allied invasions, the nurses' uniforms underwent a radical shift to incorporate trousers. Through wearing trousers, the nurses felt separated from their female peers in the local towns they traveled through or stayed in during their time abroad. Overall, the nurses valued their uniforms and paid particular attention to the different pieces' symbolism. The act of donning a cap meant a critical achievement that deserved recognition from other nurses. Additionally, nurses utilized capes to express a nurses' professional status or belonging.

Numerous nurses reported the importance of maintaining femininity while stationed in unforgiving conditions throughout the war. Advertisers and governments paid critical attention to how women-maintained femininity while in uniform. However, a critical analysis of women's motivations for maintaining femininity suggests motivation beyond the approval of their male counterparts. As Gorick's example suggests, women often gave attention to their beauty rituals as a means of demonstrating control. Furthermore, women utilized feminine and beauty rituals as a method of participating in *feminine culture*. Through the consumer's position, women expressed agency in their desire and choice to participate in the *feminine culture*. Engelman's glamour shot emphasizes that the nurses felt a distinct separation from their feminine identity. Engelman's desire to take those photographs and keep them as a reminder of that lost identity exemplifies the value women placed on engaging in femininity rituals and consumption as a means of maintaining their identity. Thus, the nurses utilized femininity to maintain their place within the *feminine culture*.

In conclusion, the outbreak of the Second World War and the call for nurses meant a radical change in the spaces that many women occupied. This change often brought hostility,

logistical challenges, and danger. Despite moving into a masculine sphere, military nurses established close-knit female friendships groups within masculine space. Furthermore, pressures, social norms, and expectations from the *feminine culture* continued to influence the nurses' experiences during the war. These pressures arose in the form of expectations of women's interaction with men. The relationship between femininity and identity became most evident in its absence. An analysis of the nurses' perspective on their femininity and access to feminine products/rituals sheds light on the relationship between femininity and agency. While past scholarship focuses on external pressures placed on women to conform to established routes of femininity, this study examined how women chose to engage and participate with the *feminine culture* through established trends within beauty and fashion. The evidence suggests that women actively chose to engage in feminine consumerism and rituals to strengthen group identity. Therefore, feminine expression acts as a method of solidifying a women's place in the feminine culture which in turn helped construct friendships.

The Benefits of Friendship:

Receiving Comfort, Care, and Courage while Laughing through a World War

As discussed in the previous chapter, factors such as space and feminine culture contributed to constructing a group identity and bonds among military nurses. This chapter examines how these female communities affected the nurses' experiences during the war. The war placed women in positions of extreme physical vulnerability, and that vulnerability came with numerous casualties and emotional strains. The women's friendships and community structures throughout the war helped sustain them through their difficult circumstances. The women dealt with physical and emotional exhaustion and faced dangerous and frightening situations. Through female sisterhood they created systems of survival. Humor, in particular, acted as a vital element of these friendships that not only allowed them to relieve stress but also to create shared stories and emotions with their fellow nurses. This chapter argues that the female friendships provided the nurses with numerous benefits such as emotional comfort, physical protection, and positive emotional experiences such as entertainment and humor.

Care, Comfort and Courage

The nurses' role in the military meant working and sleeping near the battlefields. Often packing up their hospital supplies under fear of enemy capture. When the unit that Amy Dunnett's hospital was attached to crossing the Rhine, "the gunfire was so bad that we couldn't speak to each other for at least twenty-four hours. We just had to sign to each other. You couldn't hear another person."¹¹⁹ The severity of the situation only increased as time went on, and soon even the nurses became casualties. "They put the first airstrip quite near to where we

¹¹⁹ Dunnett, Interview.

were, and they started shelling it that night....I had to get up and out of my tent. And we rushed across, and...two of the nurses were hurt. One had half her hand blown off.”¹²⁰ Some emotional triggers resulted from the constant wear and tear the nurses suffered in the high-intensity environment. McBryde wrote about an instance where she lost her "self-control over a tin of peaches." The army could only supply a limited number of tinned fruits, and the majority of these supplies the nurses gave out to the sickest of men. When a soldier helped himself to one of McBryde's peach tins, she reported the crime to her matron. The matron immediately realized how exhausted and emotionally drained McBryde was when she began to cry over the incident. The matron recognized the deterioration of McBryde's mental health and chose to move her to a different, less stressful ward for a while to regain her mental health.¹²¹

An American nurse, Verla DeBeer, wrote of the stress that continual nursing took on her. "Just before Christmas 1944, we sent a large number of patients home, and we were so happy for them. But then a new trainload came in. That night when I finally got off duty, I sat down in our hut by the stove and cried –those new patients were so bad." Fortunately, DeBeer wrote that her friend, a nurse by the name of Miller, helped her battle the emotions associated with nursing. "Miller came up to me and said, 'Here, smoke a cigarette and relax.' That's all it took, and for the next thirty years, I was hooked on cigarettes and mad at Miller."¹²² As caretakers, the nurses played a unique role in the war effort. Their actions often meant life or death for other people. Therefore, nurses required the sympathy of other nurses who could understand the unique pressures of the job and the burden that nurses carried throughout the war.

¹²⁰ Ibid.

¹²¹ McBryde, *A Nurse's War*, 115

¹²² Verla Virginia Kallemeyn Debeer, *My Years as an Army Nurse* (Unpublished Memoir June 2004), Typescript, Library of Congress, 26.

When Sister Bond first arrived in Quassasin (a location near Cairo), she initially had negative feelings due to the sensations of isolation that the long stretches of sand and "skeletons of a number of tents" caused. However, she soon met her tent mates. "I was introduced to the two Sisters I was to share a tent with, and very soon to share so many memories also." The friendships she developed with her tentmates helped soften the feelings of isolation and the hardships she faced. In her memoir, Bond wrote, "Gladys, Joyce, and I did our best to try to make tent number twelve a kind of home where problems and thoughts could be shared. Perhaps because of this, it did not take me too long to get used to the bare comforts of a camp bed, primus stove, and perhaps most importantly – the essential mosquito nets."¹²³ As previously discussed, space became a significant issue for the nurses during the Second World War. Often the war meant nurses lived in treacherous conditions or struggled against hostility, poor working conditions, and lack of comfort. The case of Sister Bond shows how the comradery among nursing sisters helped them combat the discomforts and difficulties created through space. Together they reclaimed negative spaces and transform them into positive ones. The bond felt by the nursing sisters in Bond's tent helped them establish a safe space and home within an unwelcoming environment.

While stationed near battlefields, the nurses encountered death every day in their makeshift hospitals. British QA Agate admitted that she had difficulty remembering all the death and the destruction. In her interview conducted in 2001, Agate commented on the benefits of memory loss, "I think nature does this. Otherwise, you wouldn't live. It was absolutely awful at times."¹²⁴ The stressful situation took a severe strain on the nurses' mental state. For example, in

¹²³ Mary E. Bond, "Wartime Experiences from the Midnight Sun to Belsen," (E.L. Jones & Son. Cardigan, September 1944), Imperial War Museum, London, United Kingdom, 23.

¹²⁴ Agate, interview.

the American nurse Verla Virginia Kallemeyn DeBeer's memoir, she details what she called "One of the worst days of my life." At the end of the war, DeBeer and a fellow nurse went to a meeting regarding what happened to the nurses after peace in Europe. Upon returning home, they discovered their shared room locked. After getting the door unlocked, they discovered their friend and fellow nurse unconscious on the bed with a suicide note next to her. Unfortunately, the nurses and doctor were unable to save the woman. The officials blamed a breakup letter from a boyfriend as the cause for their incident. While heartbreak may have contributed to the unfortunate individual choosing to end her life rather, the stresses and devastation of the war no doubt damaged the young woman's mental health. DeBeer wrote of her friend, "At her funeral, when we had to salute during 'Taps,' I thought to myself 'I could salute her for many things, but not for this.'"¹²⁵

Some women felt it necessary to conceal their emotions so as to denounce negative stereotypes about women. In her memoir, *Helmets and Lipstick*, Ruth Haskell recounted the reactions of herself and the other nurses when military officials explained the landing procedures for Normandy after D-Day in June 1944. Haskell wrote,

I imagine that the expression on the faces of all the girls were something to behold, as I caught one big burly MP with a very knowing grin on his face. I suppose they thought: Well, here is where those girls will break, now that they realize what they're in for. God love every girl in the nurses' group. No matter what they might have been thinking, they kept their chins up, eyes front, and didn't bat a lash. Somehow you could perceive a growing respect in the eyes of the male officers who had been fussing about our not being able to take it.¹²⁶

The tension only broke when the nurses left and returned to the foyer. One of Haskell's friends, Anne Cooney, stated, "Heck, I never did like to wear a bathing suit [when] swimming." According to Haskell, "everyone roared, and from then on in the quips flew thick and fast." She

¹²⁵ DeBeer, *My Years*, 26.

¹²⁶ Haskell, *Helmets and Lipstick*, 64.

admitted, "We were all frightened. It was only natural, but each girl was keeping that fear to herself."¹²⁷ This account suggests that the nurses took comfort in the presence of other women, and the sharing of emotions enabled them to gain a sense of calm. On the boat waiting to go to Normandy, Haskell's roommate had asked, "Are you frightened?" and Haskell replied, "of course." Haskell then wrote of her roommate, "You could almost hear the sigh of relief." This exchange highlights the critical role comradery played in allowing the women to acknowledge and accept their emotions. A nurse's job demands prioritizing their patients' physical and emotional well-being. However, by admitting her fear, Haskell gave her companion the space to feel her fear and prepare for the next day.¹²⁸

Most nurses reported that their busy schedules prevented them from feeling any fear of the circumstances. For example, when asked whether she and the other had been frightened due to being away from home, American Nurse Alice L. Curry answered, "No, no. You know, you were busy, and the way you lived, it took you a while to get yourself organized."¹²⁹ Similarly, QA Mary Swan Haddie's interviewer asked if she felt fear when stationed close to the front lines. She answered, "No, I don't think we did."¹³⁰ In her interview, Engelman gave a detailed recount of her experiences upon arrival in Normandy. According to Engelman, the nurses attempted to sing and converse to calm their nerves. Unfortunately, the devastation of the landscape and the evidence of its recent events soured their mood.

They loaded us...into trucks....We were going to live in a cow pasture that had been cleared of mines until it was time for us to move up to Belgium. Well, we were going and going for hours. It got dark....with the smell of death and destruction...at first, we had been talking and singing the way we always did, when we were on our truck rides, then

¹²⁷ Ibid., 64-65.

¹²⁸ Ibid., 59.

¹²⁹ Alice L. Curry, interviewed by Kellian Clink, 2002, Veterans Project, Library of Congress, Washington DC.

¹³⁰ Swan, interview.

you sort of settled down and realized that there really was a war here just a couple of weeks ago and a lot of dead people. There were no buildings left standing.¹³¹

Unfortunately for the nurses, their truck driver soon stopped the car and announced that he had gotten lost on their journey. He informed the nurses that the other drivers would return in the morning, but the women would sleep in the field in the meantime. "Well, here, in the blackout was a cow pasture...we couldn't use our flashlights, and so we were stumbling around...trying to find a level spot to lay down for the night. Of course, you could hear the shrieks of the nurses as they stepped in a cow flop. But we survived the night."¹³²

However, when asked if she felt fear during her trip, Engelman echoed the sentiments of Haddie and Curry, "Well, you know, there was always a certain amount of fear, but you were with hundreds of other people, so not really. I don't think we were afraid. I didn't feel that afraid the whole time, except during the buzz bombs...But crossing the Channel, I just felt that thousands of other Americans have crossed already, nobody's going to pick on me." When asked how she dealt with the fear caused by the bombings while stationed in Liege, Engelman replied, "Well, you had no alternative. You knew you couldn't run away. We had patients to take care of. They were scared silly, and you just had to be there.... At night you didn't do much sleeping, but you did your best. But during the day, when you were on duty, you just did what you had to do."¹³³ Overall, many nurses reported dealing with fear by focusing on the work before them. The density of their schedules and the needs of their patients took precedence over their own anxieties and emotions. This realignment of focus enabled them to continue working under extremely hazardous conditions.

¹³¹ Ibid.

¹³² Ibid.

¹³³ Ibid.

The bonds between the women further offered the nurses physical protection in addition to emotional support. In *A Nurse's War*, one of McBryde's friends and colleagues, known as Duff, had aided a patient so well that he sought to thank her before his departure. Unfortunately, he chose to do so by entering the nurses' tent at night. McBryde had been asleep when the man first appeared, but as she wrote, "In my drowsy state, I imagined it to be some boyfriend of Kay's but the sheer improbability of any boyfriend, be he ever so eager, daring to set foot in the Holy of Holies, roused me to a clear head." As Kay, another nurse and McBryde's tentmate remarked, he was "as drunk as a fiddler's bitch, and he won't go away." Despite the women insisting the man leave, he came into their tent, "on all fours like a blundering animal." McBryde claimed that he went toward her bed and ripped off her blankets. "My instinctive response surprised even myself. It must have been some memory of those self-defense lessons way back in Scotland, for I swung my clenched fist straight into his face...He toppled over onto his back. In a flash, Kay and I were on him pinning his arms down."¹³⁴

Her tentmate's response was one of awe. "Bull's-eye, Mac," Kay had remarked in admiration to her friend's courage. It turned out that the man had meant the two women no harm and had only wanted to thank a different nurse for her attentive care for him when he had been her patient. However, due to his state of mind and intentions, he received limited punishments from the authorities for this offense.¹³⁵ Although the soldier had had innocent intentions, the actions of McBryde and her tentmate highlight the critical role women played in acting as each other's protectors. Nurse DeBeer wrote about the importance of nurses protecting each other in her unpublished memoir:

Our head nurse was LT. Haugen. During the first few days, she called us down to her cabin two at a time and talked to us –about how during Wartime, emotions were high,

¹³⁴ McBryde, *A Nurse's War*.

¹³⁵ Ibid.

and that people said things they didn't mean. She also warned us not to go out alone with a male officer and to be careful of promising things we didn't mean. We were also told to stay together. Naturally, after that, if we saw one nurse walking that crowded deck with a male, we would go up and join them, so they weren't alone—even though we usually had to walk behind them. The deck was so crowded we couldn't walk three abreast.¹³⁶

Similarly, QA Swan claimed, “Whenever we went out, we always went out in a group, never alone.”¹³⁷ Jeane Rubin Grushinski writing about her time in Florida, specified multiple times that she and her nursing colleagues always went out as a group and never alone.¹³⁸

The nurses took their duty of caring for the sick seriously, especially when it came to each other. QA Agate reported that she and her group of nurses risked splitting up when the Japanese threatened to overrun their hospital and the medical staff evacuated. According to Agate, one out of the four nurses had become ill, and the hospital could not transport her. Despite recovering from malaria, Agate and her two healthy companions “decided we would stay with Moira...It got very frightening. We had Moira on a stretcher at the side of the road. The three of us were there with her. It was getting dusk, and we were still there.” She had a “chit” in her pocket which she could exchange for a bottle of port to aid with dysentery. Agate went to the store to purchase some and got into an altercation with the man in charge. She asked him for a second bottle for her friends, and he refused. In response, “just picked up two bottles” and left the store. Agate said that although the man “shouted after me, that kept us warm. Just a little nip for the four us during the night because it was three or four o'clock in the morning before we were fetched. For the first time in our life, we were terrified...it was dark ...it was very, very cold...every noise we heard was either a great big animal or Jap. I know it sounds stupid now, but it wasn't stupid then.”¹³⁹ As this story suggests, the nurses' friendships and communities

¹³⁶ Debeer, *My Years*.

¹³⁷ Swan, interview.

¹³⁸ Grushinski Rubin, interview.

¹³⁹ Agate, interview.

offered protection. Without her friends, Moira would have been left to wait all night alone while extremely ill. Instead, the other woman risked their safety by standing guard in the cold, dark awaiting a vehicle to evacuate them.

When the nurses chose to cut loose, and have fun, they still needed to look out for each other. Lille Margaret Steinmetz Magette, who served with the 56th General Hospital in Normandy, talked about how she and her fellow nurses enjoyed themselves safely. "We did a lot of naughty things. We used to get drunk. Every time we went out, one of us would say we wouldn't drink so the other one could. We would watch out for each other."¹⁴⁰ Much like women in civilian life, the nurses protected each other and designated a sober person to keep an eye out so that the other could drink safely.

Since black nurses faced additional vulnerability due to their race, they had an increased need for protection from friendships and community bonds. Burrell claimed that after she received attention from wealthy Australian locals, some members of both the black and white community got upset that upper-class individuals chose to visit a black woman. In response, her chief nurse stuck up for Burrell and promoted her to the role of assistant.¹⁴¹ The issue of racism within a medical setting was not a new experience to the military nurses. Oneida Miller Stuart stated that while still training to be a nurse in Indiana, she had to contend with segregated dining and racist behavior by her instructors. She recalled that when she and the only other black nurse at the school attempted to attend an event for nurses, their instructors played the song, "Old Black Joe." However, Stuart stated that the other trainee nurses disapproved of the song choice. Speaking about her class, "they were very nice people, they sort of protected us." Over the years,

¹⁴⁰ Lille Margaret Steinmetz Magette, interviewed by Barbara Machann, 11/8/2005, Veterans Project, Library of Congress, Washington DC.

¹⁴¹ Burrell, interviewed.

she kept in contact with one student, Emmy Joan Davis, and Stuart stated, "she was my protector. She didn't let anyone bother me." Regardless Stuart and the other black nurses had to shower, eat, and sleep separately from their white peers.¹⁴² On the other hand, Dorothy Margaret Cook Jenkins' white instructors during her basic training meant well but lacked a critical awareness about segregation and issues surrounding race. During basic training, Jenkins believed that her white instructors had treated her and her fellow black trainees well because they were from Wisconsin and had limited experience with segregation. In fact, she claimed that due to their naivety, they sent her photograph to a newspaper in her hometown to be published, and the newspaper returned the photograph insisting that they send it to a black newspaper.¹⁴³

A thoughtful and caring matron made a significant difference in a nurses' war experience. Mary E. Bond returned home to Britain in 1943, and while they were both temporarily stationed in Britain, she and her fiancé quickly married. "Like so many others, despite the destruction of the war, my service had enabled me to meet my future husband, which was a certain bright ray of hope for the future, despite all the sadness I had witnessed."¹⁴⁴ However, the British military did not require Bond to retire from service upon her marriage. They did not even provide her extra leave for an extended honeymoon. Shortly after her marriage in 1943, the QIAMNS posted Sister Bond to Hatfield House, where she worked under the guidance of a Matron Bampton. Upon hearing that Bond had not received official leave for three years, she ensured that Bond "got all official leave due" to her.¹⁴⁵ This matron acted to protect the rights owed to the subordinate nursing sisters in her charge.

¹⁴² Stuart, interviewed.

¹⁴³ Dorothy Margaret Cook Jenkins, interviewed by Christopher Willoughby, 31 May 2005, Veterans History Project, Library of Congress, Washington DC.

¹⁴⁴ Bond, "Wartime Experiences," 35.

¹⁴⁵ Ibid., 35-36.

Making Friends, Killing Time, and Laughing through a War

Unlike other women entering military services, nurses came with a background in the workforce. They furthermore had experience with strict living conditions where they lived in close quarters with groups of women. According to Agate, the sense of community amongst nurses existed within civilian nursing settings as well. In an interview, she declared that the old role of the matron was an exemplary figure that could not exist in modern hospital structures. She claimed, "you can't have a family..." and be a matron. According to Agate, the matron's role must take precedence over all other life concerns (including husbands and children). Countless nurses described their matrons as motherly figures who watched out for the younger nurses in hospitals, especially overseas. Agate spoke of her matron in Kohima with admiration. "She was absolutely wonderful. She didn't give a toss for anyone. She had no fears, and she was loyal to us...She drank, she smoked, she swore, she was absolutely fantastic, and I've never forgotten her!"¹⁴⁶

The bond between the nurses themselves served a vital role in making the war bearable for numerous women. American nurses reported that their units stayed together for the duration of the war. When asked by her interviewer how the American military moved the nurses around, Alma Fisher answered, "You are stationed to a hospital, and you move with that hospital. In World War Two, I was with the 78th Station Hospital, so I went with the 78th to Africa, France, Italy, and then [we] came back as a unit...So, the hospital unit stays together through the whole because it'd be too confusing and too mixed up if you changed the personnel."¹⁴⁷ Engelman also reported that her unit remained together for three years.¹⁴⁸ This experience differs considerably

¹⁴⁶ Agate, interview.

¹⁴⁷ Alma Fisher, interviewed by Victoria Brandis, 1 November 2003, Veterans Project, Library Congress, Washington, DC.

¹⁴⁸ Engelman, interview.

from that of British QA Parkin. In Parkin's memoir, the British forces continuously reassigned her to different locations with different groups of people. Sometimes Parkin experienced a significant change when she left her work in a field hospital in Egypt to work on a hospital ship sailing towards Asia. In Parkin's memoir, the British army usually transferred her alone, and she joined new nurses with every change.¹⁴⁹

On the other hand, British QA Agate reported that she and her original cabinmates managed to stay together throughout the war. "Four of us [were] put into a cabin, which was luxurious really for a troopship, and we became very good friends. We stayed together." Later in her interview, Agate notes the significance of their ages and personalities in creating the dynamics of friendship they shared. "We were young...the four of us were sisters. We were all in our early twenties. I was twenty-three. I was in charge since I'd been in the QAs a bit longer. But we had a great laugh, and we looked after each other."¹⁵⁰ In her interview, American Nurse Lieutenant Colonel Alice Curry said, "We always cared about one another. We were always helping one another out. We formed bonds that, you know, weren't ever broken."¹⁵¹ McBryde recalled talking to a nurse after a stressful day treating war casualties during the invasion of France. She and her friends sat in their temporary residence drinking coffee and discussing the war. McBryde wrote, "To be able to talk like this with a friend made it all bearable. If we had stopped to think too deeply, we would have been drained by the tragedy of it all."¹⁵²

The relationship between the women stationed overseas was not universally pleasant. While variations in personality caused disruptions, the most significant cause of discourse centered on a nurse's unit. According to Agate, civilian nurses serving in the reserves felt

¹⁴⁹ Parkin, *Desert Nurse*.

¹⁵⁰ Agate, interview.

¹⁵¹ Curry, interview.

¹⁵² McBryde, *A Nurse's War*, 98-99.

resentment from regular army nurses. Agate noted that the camaraderie of her group of reserve nurses did not extend to the regular army nurses. Speaking about the non-reserve QAs, Agate claimed, "they couldn't cope, that was left to the civilian nurses in uniform. The civilian nurses in uniform –the reserves and the TANs (Total Army Nurses). The TANs were wonderful too. The Reserve QAs and the TANs worked together. It was a sisterhood! But none of us liked the regular QAs. They never went further than base, and they treated us like dirt."¹⁵³ The distinction between reserves and non-reserves surfaced in their attire. According to QA Dunnett, the reserve nurses such as herself wore "Grey capes with a border of red to distinguish them from the others."¹⁵⁴ Furthermore, Agate expressed suspicion that the regulars felt that the reserves were, "muscling in on their territory."¹⁵⁵ Agate suspected resentment from the regular nurses similar to the resentment felt by any men who disliked having women in the masculine sphere.

Lisa Handler wrote about the psychology of sorority sisterhood, arguing that "by seeing their sisterhood as an exceptional form of female friendship, sorority members separate themselves from other women outside the sorority."¹⁵⁶ According to Peniston-Bird, who utilized Handler's arguments, this same phenomenon applied to the different branches or units of war service that women belong to, whether civilian or military.¹⁵⁷ The evidence suggests that the comradery and group identity formed by the nurses and their sense of sisterhood remained confined to nurses. Their sense of sisterhood did not extend beyond that boundary to include all women who participated in the war effort (whether through military service or home front

¹⁵³ Agate, interview.

¹⁵⁴ Dunnett, interview.

¹⁵⁵ Agate, interview.

¹⁵⁶ Lisa Handler (1995) In the Fraternal Sisterhood: Sororities as gender strategy" *Gender and Society*, 9 (2), 236-55 (253)

¹⁵⁷ Corinna Peniston-Bird, *The People's War in Personal Testimony and Bronze: Sorority and the Memorial to the Women of World War II*, "British Cultural Memory and the Second World War," ed. Lucy Noakes and Juliette Pattinson (London; New York: Bloomsbury Academic, 2014)

activities). Furthermore, Agate's testimony suggests that the sense of sisterhood did not remain limited to the boundary of the military but extended to their military classification.

While marriage often meant the loss of a friend, the act of planning a wedding represented an element of feminine culture that the nursing sister could participate in together. Sister Bond wrote affectionately about Matron Moir, who made the desert weddings extremely special occasions.

Luckily, our matron...Miss Moir, was a very jolly helpful person to work and to socialize with...We had several weddings which took place in our tented church, followed by a reception at our tented mess. Miss Moir used to revel in making arrangements for the reception and would go to Cairo in the unit bus to return laden with special extras for the event. These weddings were treated as very special occasions for all and were greatly looked forward to. On the morning of the wedding, the bride-to-be would have breakfast in her tent, the tray having been specially arranged and decorated. After the ceremony, the Sisters on duty were lucky enough to be allowed to take turns in going to the reception in our mess to drink the bride's health and have some lunch.¹⁵⁸

The events described by Sister Bond show that while marriage often meant a nursing sister was leaving (although many nurses remained in service after marriage), the preparation and celebrations of the wedding are remembered fondly as activities the nursing sisters participated in together.

Sister Bond wrote in her memoir about the entertainment she enjoyed during the war. While aboard a hospital ship sailing along the middle east, Bond reported that she and her friends enjoyed numerous activities. "After the discharge of our patients, we were usually allowed some short leave," they used this time to engage in "sightseeing, shopping...cinema...Police boxing match or Police dance. Such evenings of fun ashore were much needed after a time at sea taking care of patients."¹⁵⁹ She later wrote, "Even though conditions were bad, I had a memorable time

¹⁵⁸ Bond, "Wartime Experiences," 25.

¹⁵⁹ Bond, "Wartime Experiences," 17.

in Arden, going around the bazaar ashore, where amongst other things, lovely silks, embroidery, and leather goods were sold. My favorite stall was called 'Sarmis,' which seemed to sell almost everything, and where I remember buying a gorgeous silk handkerchief which I have to this day."¹⁶⁰ Once again, shopping represents a feminine activity in which communities of women collectively participate. By purchasing items, such as silk scarves, the nurses found avenues to maintain their femininity while living in a masculine environment.

However, through entertainment, some nurses received harsh reminders that they had invaded a typically male sphere. While aboard a ship, Sister Sybil Brazell wrote that she and the other nurses attended a concert which the performers hastily altered when it became clear women would be in the audience. The women had "thrown the concert party who had prepared for an all-male audience into some consternation. Acts had to be hastily toned down and some scrapped altogether." Evidently, the performers had prepared material deemed inappropriate for women's eyes and ears. The need to change the performance highlights how war had not erased all gendered rules of propriety. However, the change also underscores how the performers' original production include degrading, sexual material that may have upset women. Brazell wrote, "The first man to appear on stage was clad in a short grass skirt and two breastplates. From each bosom hung a long-knotted cord, and by manipulating his torso, he managed to swing the cords clockwise and anticlockwise separately and together." She later admitted in her memoir that she and her friends "Tried this later in our cabin and never got anywhere." Lastly, another act involved a man imitating a woman changing behind a screen, and Brazell recalled, "It was a great concert, but we must have dampened things."¹⁶¹ This account by Brazell emphasizes how

¹⁶⁰ Ibid., 15.

¹⁶¹ Sybil R Brazell "Reminiscences of War," unpublished memoir, 18938, 16/14/1, Private Papers of Miss S R Brazell, Imperial War Museum, London United Kingdom, 10.

the nurses received constant reminders that they had entered a male space. They could not escape their gender even in public entertainment. However, as the attempts made by Brazell and her friends to replicate the act later show, through their friendships, the nurses found ways of laughing at these new experiences.

In a letter written to her mother, Sister A. K. D. Morgan described how they kept entertained.

We did physical jerks, we fenced, we read aloud, we sewed on buttons and stitched shirts and shorts, we mended socks and washed and ironed all manner of khaki uniforms – and meanwhile we talked and talked to keep our spirits up! In the end, we even got up classes for darning and buttons sewing.... No, it wasn't a dull voyage!!! I am glad that we made so many friends because they look up so frequently nowadays! ...Amid such circumstances, it is nice to be greeted with 'Oh we're alright, we're with the 8th. She's one of 'our' Sisters – i.e., a fellow traveler'¹⁶²

Morgan writes with enthusiasm about the busy life she kept while in service. Additionally, Morgan openly writes about her friendships' role in improving her war experience.

Friendships among the nurses provided physical protection in the perilous conditions and further gave them comfort in times of extreme stress or tragedy. The conditions of danger and extreme emotional fatigue meant that the nurses required morale boosters, and their friendships provided these boosters in the form of humor. Although the stories told by many nurses in their oral interviews are already several decades old, the reels of the women's retelling are often pervaded by laughter as they still delight in the antics or anecdotes from their fellow nurses. In her interview American nurse Engelman spoke about the stress and emotional strain she and the nurses experienced while the Battle of the Bulge raged nearby. "One of my patients, a Meriden boy, was killed that night, and I had become very close to him. I used to go over to visit him all

¹⁶² Private Papers of A K D Morgan, "Still with the Lamp: Letters to My Mother by an Army Nursing Sister, Egypt-North Africa- Sicily – Italy, 1941-1944," 08/134/1, Document:16686, Imperial War Museum, London, United Kingdom.

the time. That morning, when I went off duty with a couple of other nurses, we struggled down the path to the nurse's quarters, and we were just too empty and too spent even to talk, as we silently relived the night before in our own minds." This dark event coincided with the Christmas Holiday, and the nurses managed to find a bit of humor in all the gloom. Engelman went on with her story,

A nurse coming on duty greeted us with a very muffled, "Merry Christmas." It sounded so incongruous to us after the night we had just had that it struck a funny bone, and we stood there in the path, and we howled. We laughed, and we laughed hysterically for a few minutes, and it was great. It was a good catharsis for our very somber mood. Christmas Day dawned bright and clear.¹⁶³

This example suggests the critical role that moments of humor held in maintaining morale among the nurses who worked in miserable conditions for months. In her interview, Ruth Lillian Anderson Aitken admitted to pranking her tentmate.

We had to keep up our morale.... After the island was secure, we were allowed to go to Buckner Bay...and one day when I was there, we picked up a skull. So, I carefully took it back to the tent. Marge was off that night, and I put it in her -- on her bed, on her pillow. She screamed, of course. And that skull, I don't know where it finally landed. She threw it. I also was not afraid of bugs like some of the girls were. So, I would pick up walking sticks...and praying mantis...and then we'd put them on the girls' pillows, much to their chagrin. But we had a lot of laughs, too. We worked hard, and we took our work seriously, but we also had time for fun.¹⁶⁴

In another instance, Aitkin discussed how she and her tentmate managed to make light of a difficult situation. "One night, the guards decided they were going to shoot the rats around our tents, and they started firing... Marge and I hid behind the main tent pole, which was maybe five, six inches in diameter, no protection at all, but we laughed and had a good time avoiding any bullets."¹⁶⁵ Engelman also shared a story in which humor helped relieve the stress of a traumatic

¹⁶³ Engelman, interview.

¹⁶⁴ Anderson Aitkin, interview.

¹⁶⁵ Ibid.

situation. While stationed in Liege, Engelman worked in tent hospitals, and she described an instance when the Germans bombed her hospital.

There seemed to be hundreds of red flares dropping through the nighttime sky, and I just stood there mesmerized. It was so beautiful, and it was like a Fourth of July display. While I watched, the plane that had dropped these flares started flying back and forth across our hospital tents, strafing the tents and dropping antipersonnel bombs. I ran back into my tent, and my patients were already strapping on their steel helmets, and I said, "Get under your beds." ...I found an empty bed, and I scrambled under it too, and I let out a yell, and my ward man who was at the other end of the tent, yelled out, 'Lieutenant, have you been hit?' And I yelled back, very disgustedly, 'No, only by a loaded duck.' In hospital lingo, a loaded duck was a full urinal. My patients laughed wildly at this, and it was great because it helped dispel some of the fear and the tension that we had all felt a few minutes before.¹⁶⁶

British QA Dunnett recollected an amusing story that happened while stationed in England. "We were put into these trucks, and this a very amusing thing, to take to South Hampton, we got our tin hats and in our battle dress and our red cross bands on our arms, and some working women were there –headscarves and what have you – they suddenly looked, and they realized the invasion was on, and they said, "Oh my god! Women!" they thought we were going into battle, you see." Dunnett's tape filled with the sound of her laughter, and she admitted, "It was quite stupid. Silly little things."¹⁶⁷ A letter from American nurse Jean Truckey, written 26 June 1944, explains how humor played a critical role in women's mental health. She wrote, "It doesn't "get us" as it might seem. I guess the hurry and the great need for help take away the horror of it all. And we do try to keep our sense of humor. Funny things do happen, and we pass the stories along. When the girls are most tired, they get to giggling until they cry over the silliest little incidents."¹⁶⁸

¹⁶⁶ Engelman, interview.

¹⁶⁷ Dunnett, interview.

¹⁶⁸ Truckey, letter.

In her memoir, *A Nurse's War*, Brenda McBryde recalled when she and other nurses stayed in a convent with the lavatory out in the garden. After a long day of treating casualties near the front lines in Caen, the nurses enjoyed a bit of stress relief in the form of coffee and hot coffees in their sleeping quarters. McBryde wrote, "It was more like an alter than a lavatory. We were overcome by a fit of giggles. Ablutions at the pump were hilarious."¹⁶⁹ When landing on the beaches, Haskell wrote about the fear each woman felt upon descending the rope ladder and the anxiety they concealed about not making it into the boat. Finally, after she managed to get into the boat, her friend descended after her. As soon as the nurse had both feet in her boat, she looked at Haskell and immediately joked, "Fancy meeting you here."¹⁷⁰ Later, the women hunkered down in a farmhouse on the beaches, knowing they slept in a room which soldiers had only recently cleared of dead bodies. They jammed themselves in so tightly a nurse broke the tension by declaring, "If we want to turn over, we'll have to do it by numbers."¹⁷¹ According to Haskell, the women "howled" with laughter despite their dismal circumstances and anxieties about the road ahead of them.¹⁷² Even in their darkest hours of the war, the nurses managed to find ways to bring laughter to their lives.

Humor represents an individual enacting control over their emotional response to difficult situations. For example, Marta Gorick also chose to view a traumatic situation through the lens of humor as she wrote about her experience to a friend. After a destroyer discovered Gorick's lifeboat and rescued the woman and any items found in the water, she wrote to Margaret Sullivan, "You would laugh to see these tough sailors promenading through, carrying women's

¹⁶⁹ McBryde, *A Nurse's War*, 92-98

¹⁷⁰ Haskell, *Helmets and Lipstick*, 59.

¹⁷¹ *Ibid.*, 59.

¹⁷² *Ibid.*, 59.

unmentionables to dry."¹⁷³ This humorous anecdote could only exist due to the invasion of women into the masculine sphere of warfare. The stereotypically masculine figure of a military sailor fussing over women's underwear represents how femininity pervaded the previously male-centered spaces. The crossing of the cultures (masculine and feminine) created an uncomfortable situation that challenged old-world rules surrounding modesty and indecency. However, instead of viewing the situation as mortifying and a violation of feminine privacy, Gorick chose to laugh at the novel situation.

The British nurses further entertained Gorick in their attempt at maintaining their dignity. "When we finally landed, I only wished I had had a movie camera. Talk about costumes and outfits! One very dignified matron of the British Sisters came strutting down the gang-plank in her stockinged feet and long pajamas, but with her head up and chest out."¹⁷⁴ As written about in the previous chapter, women utilized their appearance as a space over which they had control. In this same letter, Gorick told her friend how she applied lipstick on the lifeboat in the hopes of maintaining some level of glamour. By doing so, Gorick exercised what limited control she had in a traumatic and chaotic situation. Her amusement at the nurses represents how vital a woman's physical appearance played in their ability to demonstrate their control. Gorick perceived the nurses' efforts to promote an image of dignity or control in their pajamas to be farcical and ridiculous. In the letter, she continued in a jocular tone complaining about her lost items. "And to think I ran myself ragged shopping for stuff and things to take with me! Oh well, they can be replaced, but there's only one of me, huh? However, if I ever get my hands on the Jerry who shot that torpedo, I'd choke him. My five lovely girdles! Maybe some shark is wearing them now."¹⁷⁵

¹⁷³ Gorick, letter.

¹⁷⁴ Ibid.

¹⁷⁵ Ibid.

Overall, Gorick's letter to her friend highlights the nurses' attitude through the war. They chose to view stressful situations through laughter.

The Benefits of Community: Nurses as Prisoners of War

The benefits of female companionship became most vital among those women detained in POW camps for years as the war dragged on. Their experiences differ drastically from their non-imprisoned compatriots. Their lack of liberty, resources, and often body autonomy meant an increased need for solidarity and a united collective working together for survival. The role of female companionship and community takes on a more critical role in the recollections of the veteran POWs. In oral interviews and memories, the veteran nurses speak more firmly about the role of other women in their lives and how much they valued those friendships. This study utilized numerous oral interviews, personal memories, diaries, and detainees' letters. The oral interviews and memoirs, in particular, shine with affection for the other women who aided their survival within Japanese camps. Several accounts given by women in the same camp who mention each other by name, providing a fuller picture of their experiences. Iole Burkitt and Vivian Bullwinkel had both been captured after the sinking of SS *Vyner Brooke*. Margot Turner had been aboard the *Kwala* and later the *Tanjong Penang*, both ships sunk by the Japanese, before finally making her way to the same camp as Bullwinkel and Burkitt. Therefore, the story of their first uniting remains one drenched in tragedy and danger. The hostile environment of an enemy prison camp requires a more profound bond among its inmates. It is unlikely that Burkitt, Bullwinkel, Turner, and the other women detained in their camp would have developed such a strong community under different circumstances.

Within the POW camps in Asia, Australian Burkitt, Bullwinkel, and nurse Margot Turner spoke about the poor nutrition and hard labor the Japanese subjected them to for three years. The extreme circumstances of the camps are most telling in a divulgence made by Burkitt regarding the nurses' physical health. "Very fortunately, nobody had a period during that time. Shock and everything else, fortunately –well, when I say none, I think one or two did...but most people didn't, I'm glad to say, for months, years."¹⁷⁶ Burkitt viewed the loss of menstruation as a blessing for the women. However, the lack of menstruation for such a prolonged period suggests that the nurses experienced constant severe stress or suffered significant malnutrition. The POW nurses responded to these circumstances through communal sharing of provisions. As discussed in the previous chapter, the nurses created a system of shared funds, experimented with different recipes (all with the base ingredient of rice), and celebrated birthdays. Through the development of their community, the nurses participated in social functions, shared foods, and created a space of comfort and companionship within a POW camp.¹⁷⁷ When asked about the horrible things that happened in the jails in the POW camps, Turner replied, "It's not something I really talk about much. Things they were doing to the local people. You could hear screams. I wouldn't say anything about it. It's just something I don't say." Turner claimed that she lost a tooth because she refused to stand to attention, "I got a fist to my face."¹⁷⁸ In Vivian Bullwinkel's testimony at the Australian War Crimes hearings, she corroborated the claims by Turner when she reported that some of their guards slapped the women's faces or made them stand in the sun when they disrespected their guards.¹⁷⁹ Sister M De Malmanche wrote of her time in a different internment camp, "In spite of everything, morale in the camp was very high. Church services were held

¹⁷⁶ Burkitt (Harper), interview.

¹⁷⁷ Ibid.; Vivian Bullwinkel, interview.

¹⁷⁸ Margot Turner, interviewed by Conrad Wood, 1986, Imperial War Museum, London, United Kingdom.

¹⁷⁹ Vivian Bullwinkel, affidavit.

every evening, each denomination, being in a different corner of the camp, and women gave lectures, well attended, on various interesting subjects.”¹⁸⁰ Through the community of women in de Malmanche’s camp, the women protected each other’s mental health and prevented extreme emotional strain.

Although male patients comprised the vast majority of the deaths the nurses faced, occasionally, they lost one of their own. For example, in Margot Turner's account of her time in the POW camps in Palembang, she reported that only one other British QA was interred with her. The rest of the women were either civilian or Australian. Unfortunately, Turner informed her interviewer that the other QA grew ill and died in the camps.¹⁸¹ Sister de Malmanche also experienced severe tragedy and trauma during the fall of Singapore. In an unpublished account of her time during the war, she recalled escaping Singapore with two nursing sisters (whose names she never learned) on the ship the *Kuala*. Unfortunately, she reported that those two nurses had been among those to drown in the sinking of the *Kuala*. "Dozens of people were trapped in the wrecked saloon, probably among them my friends, the two Sisters, as I never heard of them again.”¹⁸² Once ashore, de Malmanche reunited with her Matron Brebner, whom she found "dressed in her pants and bra." Matron Brebner expressed her joy over seeing de Malmanche again but remarked on her grief about all the nurses and sisters who had lost their lives. De Malmanche wrote that “she herself was killed two days later.”¹⁸³

During and after the fall of Singapore, the women in their community proved incredibly important to the survival of the nurses. In Sister de Malmanche’s account, two female doctors suffered severe injuries with the sinking of the *Kuala*, Elsie Crowe and Marjory Lyon. When de

¹⁸⁰ Private Papers of M De Malmanche, 78/68/1, Document: 6944, Imperial War Museum, London, United Kingdom

¹⁸¹ Turner, interview.

¹⁸² De Malmanche, private papers.

¹⁸³ Ibid.

Malmanche reunited with Crowe and Lyon after the wreck, she discovered that Lyon “was bleeding from a severe belly blast,” and Crowe “had an internal fracture of the skull, & the cerebrospinal fluid was trickling down her nose.” According to de Malmanche, Crowe lost consciousness due to her injury, and her friend had to rescue her from the water. Lyon “dived three times to bring her to the surface, & to the shore.”¹⁸⁴ Eventually, all three women ended up in a Japanese internment camp. According to Sister de Malmanche, the Dutch paid for their own food supplies for their camp, and a camp committee rationed the food for the camp's hospital. However, the nun in charge seemed confused about who would feed the medical women, including the nurses and Lyon. Lyon responded by threatening to leave and work at a British Camp instead. “The Nun agreed to that the camp would feed us, and Lyon, striking while the iron was hot, asked for an egg a day for each of us.”¹⁸⁵ (28) Although Lyon and Crowe served as doctors during the war and not nurses, their role as medical women meant they occupied a valued space within their community. Therefore, their accounts represent those of community members. Lyon's devotions and care for the nursing sisters working under her shine throughout de Malmanche’s account of the war. Her protection and affection for the nurses working beneath her highlights the significant role that female-female relationships play in protection.

Some nurses expressed that their time working and living in civilian hospital communities with other nurses prepared them for their war experiences. Burkitt and Bullwinkel expressed similar remarks regarding the civilian women in their prisoner of war camps in Asia. According to Burkitt, “They had never done a hand's turn in their life... We were used to living in a community. We had lived a community life, and we worked amongst all sorts of people.”¹⁸⁶

¹⁸⁴ De Malmanche, private papers, 8.

¹⁸⁵ Ibid., 28.

¹⁸⁶ Burkitt (Harper), interview.

Bullwinkel echoed these statements and further added, "I believe that being nurses, we were able to adjust perhaps more quickly than civilian women who had really had to work very hard for some years, and also we were used to taking orders."¹⁸⁷ These testimonies highlight how the nurses' pre-war lifestyle had prepared them for the communities structures needed for survival in wartime.

Turner described her times in the camps with the Australian nurses, "About six to eight of us..." shared a cabin, and "...we were together all the time, and...We cooked for each other, and we looked out for each other. You know, your friends and I got in with some nurses." Unlike the accounts from Bullwinkel and Burkitt, Turner entered the camp friendless. She said, "I didn't know anyone when I got into the camp at first. One other QA came in, but she, unfortunately, died in the camp. There were quite a few civilians and, of course, the Australian sisters. They were with us all the time."¹⁸⁸ The sense of community and companionship that the nurses established and maintained throughout their stays in the POWs alleviated some emotional strain. Furthermore, it gave the nurses comfort under challenging circumstances. As nurse Bullwinkel stated, "The very great thing, we had that confidence in each other, and if anything happened to us, there was somebody who cared, and that was terribly important."¹⁸⁹

After Singapore fell, Sister de Malmanche met her great friend and wartime companion Brenda Macduff. She and Sister Macduff shared numerous misadventures over the next few years as they lived and worked as POWs. When they received orders to report to Padang, de Malmanche wrote that she and Brenda tried to clean themselves before they departed, but "the bathroom was so filthy, & had obviously been used as a lavatory, that we couldn't face the thick

¹⁸⁷ Bullwinkel, interview.

¹⁸⁸ Turner, interview.

¹⁸⁹ Bullwinkel, interview.

green scum & mosquito larvae in the water but preferred to remain dirty.”¹⁹⁰ After being stationed in the Salvation Army Hospital, Padang in 1942, while a POW, de Malmanche and Macduff suffered through a bad attack bed bugs coming from their assigned sleeping quarters while internees in a Japanese POW camp. The pair of friends responded by dragging their bedding onto the veranda.¹⁹¹ De Malmanche claimed that many of her guards consisted of Indonesian men who harbored sympathy for the inmates, many of whom were Indonesian women. This sympathy enabled a smuggling operation to run, and de Malmanche and Macduff quickly took advantage of it. "Brenda managed to sell her engagement ring so that we could buy smuggled food. Later on, about once in six months, the Japanese sent in a lorry full of bananas, coconuts, dried chilies, blachang -made from dried fish and chilies - and peanuts. Brenda and I would buy all we could, eat half, and keep half to sell later at a profit. For economic purposes, we paired off."¹⁹² Later, de Malmanche sold her wedding ring, which provided enough income to get them through to the war's end.¹⁹³

The friendships and community structures the women established in the camps allowed for entertainment and amusement in an otherwise dismal environment. According to Turner, one of the girls in her camp managed to create a deck of cards for them to play. "Everything got very difficult. The food got less. We had a lot of sickness. As time went on, things were getting very difficult. But we had concerts. We had some very clever people. We had a wonderful missionary who used to write music."¹⁹⁴ The nurses often entertained themselves during long hours of boredom by putting on fake fashion shows. Engelman described the activities of the nurses

¹⁹⁰ De Malmanche, private papers, 16.

¹⁹¹ Ibid., 34.

¹⁹² Ibid., 41.

¹⁹³ Ibid., 48.

¹⁹⁴ Turner, interview.

waiting in a cow pasture as they invaded Normandy. “So, we had fashion shows. We took our aluminum mess kits and put them on our heads, and we draped ourselves with blankets, and we had drilled every day in the hot sun, and we played baseball and softball.”¹⁹⁵ The acts of dressing up in humorous garbs alleviated stress and helped establish bonds. The fashion shows acted as a community activity with humor centered on belonging to the feminine culture. The absurdity of the costumes highlighted their alienation from one aspect of that culture. Similar to how straight, cis-gendered men have dressed in female attire as a joke, the women emphasized their loss of femininity as a similar joke. The outfits derived humor from the fact that they were incorrect. They were a failed replica of what the women were supposed to be wearing.

Sister Margaret Lee became a prisoner of Stanley Camp after the fall of Hong Kong. Despite her status as a prisoner in an enemy internment camp, Lee's letters home depict a cheerful life as she continued to work as a nurse within the camp. Similar to the prisoners in the Muntok, the prisoners within Stanley Camp carried on a social life that helped keep up morale. In her diary, Lee made repeated mentions of birthday celebrations, games of bridge, and participation in netball and softball.¹⁹⁶ In her interview, Sister Burkitt reported that the sisters at the Muntok camps also made special occasions out of each other's birthdays. “When it came to Christmas and birthdays everybody got a little present. They'd make a little rice cake and stick a flower or two in it. Someone would lend them a piece of ribbon that they happened to have gotten from somewhere and make a little cake.”¹⁹⁷ In Sister Turner's diary, she recorded a poem that her friend Nuebronner wrote and had dedicated to her as a birthday gift.¹⁹⁸ In terms of daily

¹⁹⁵ Engelman, interview.

¹⁹⁶ Private Papers of Margaret M Lee, Document 13487, Imperial War Museum, London, United Kingdom.

¹⁹⁷ Burkitt (Harper), interview.

¹⁹⁸ Dame Margot Turner's Diary: Poems written by Mrs. O Neubronner while a POW in Japanese Hands 1942-1945. Died March 22 ,1945, 2019.2.1. to 2019.2.15, Box 45, Papers of Dame Margot Turner, Museum of Military Medicine, Ash Vale, United Kingdom.

entertainment, Burkitt claimed, "Also, make some sort of little thing. I remember we made a Mahjong set. Then we made another one and sold it. Because the Dutch had money, and we didn't have any."¹⁹⁹ The evidence provided by these veteran nurses shows how the female community enabled the POW women to keep up morale and, as Bullwinkel in Muntok stated, "live as normal sort of existence as one could under those conditions."²⁰⁰ They cared for each other and ensured that everyone felt valued and loved by celebrating birthdays.

In the POW camps, humor played a vital role in maintaining morale among the women interred. During her interview, Turner spoke about the difficulty of surviving the war with the limited information coming in from the outside world. She stated, "Certainly, you've got to have a sense of humor, or I should never have survived. You know, see the funny sides of things, although it was pretty black." In her recollections, Turner recounted a story where she and a few other nurses shared a laugh after tricking a few Japanese guards into doing a bit of labor for them. "We'd make them do things. For instance, sawing a tree. We'd say there was something wrong with the saw, and there was nothing wrong with it at all. So, they came along, and of course, they did it [sawed the tree], and they said, 'no, nothing wrong with it,' but that's all right because they'd done this big heavy log for us, and of course, we knew there was nothing wrong with it."²⁰¹ As the POW nurses had limited power and control over their lives, the trick represents an example of when they took control back. Through their entertaining ploy, the women regained some of their power. Not only did they control who performed the labor, but the woman gained power by constructing a humorous interaction. Their cleverness enabled the woman to get out of labor. Furthermore, by producing a humorous situation, the nurses

¹⁹⁹ Burkitt (Harper), interview.

²⁰⁰ Bullwinkel, interview.

²⁰¹ Turner, interview.

controlled their emotions. They created a situation that amused them in an otherwise dismal environment. In December 1943, the Japanese moved the POWs that included de Malmanche, Lyon, and Macduff. While helping with the transport of the children, de Malmanche desperately needed to use the bathroom, and Macduff suggested, "Go on the coals like a cat," as a reference to a typical behavior of cats in England. "We started to laugh, and the word was given to move off."²⁰²

The inclusion of jokes or instances where the nurses recalled laughing are significant to this paper because they highlight how the community of nurses managed to preserve happiness within dark environments. While amply scholarship has reflected on the preservation of negative memories, this study includes the role of positive memories. The preservation and retelling of the memories of times when they laughed indicates the significance of positive emotions in memory formation and maintenance. As several nurses noted when asked about trauma, they often avoided reflecting on negative events. However, many nurses retold funny stories or jokes eagerly, indicating that they had protected these memories through constant retelling. The retelling of jokes not only allows for the nurses to reflect on positive emotions but also positive relationships.

Conclusion

In the Second World War, Allied nurses found comfort in the relationships they established with the other women wherever they found themselves (e.g., hospital transports, field hospitals, POW camps, etc.). Due to the position close to the front lines or even within enemy territory, the nurses lived under the threat of death or capture. For example, those nurses

²⁰² De Malmanche, private papers, 36.

stationed in Liege during the *Battle of the Bulge* heard constant gunfire near their field hospital, and they suffered numerous bombing raids. This proximity to the frontlines could result in physical injuries. The constant flow of casualties also meant a deterioration of mental health, as with McBryde and her emotional break. Fortunately, chief nurses and Matrons looked out for their nurses and relieved pressures to alleviate some of the stress. Furthermore, friendships developed among the nurses where they took comfort in having another person who understood. In the POW camps, such as the Muntok or Stanley Camp, numerous nurses remained under severe stress and malnourishment that they lost their periods. Regardless, the women established a community where they shared food and celebrated birthdays to keep up morale.

Friendships among the nurses further enabled the nurses to accept their emotions, such as fear or grief. By admitting her own fear, Haskell had allowed her colleague and friend to accept her anxiety about the following day when the nurses were expected to participate in the invasion of Normandy. Numerous nurses reported that their busy schedules prevented them from dwelling too long on their own fears or emotions. However, the anxieties, stresses, or fatigue occasionally became too much, and the companionship of someone who had undergone the same experiences mattered. Through the position in trauma-related care of severely wounded soldiers, the nurses of the Second World War witnessed an immense loss of life. The constant exposure to death certainly meant stress on their mental health. Furthermore, due to their vulnerable positions, many military nurses lost their lives in the war. Many nurses died in numerous ships sinkings in the Pacific Theater of the war. Their memoirs report the loss of friends and colleagues with grief. However, through the strength of their community, the nurses interned in POW camps or stationed near battlefronts managed to maintain their morale.

Although the nurses regularly underwent traumatic experiences while serving, the nurses alleviated some of the stress through humor. The numerous accounts the nurses recorded in diaries and memoirs or told through oral interviews when their colleagues made them laugh to show how significantly humor created positive emotions and how these positive experiences solidified in their memories. Each clever joke, quip, or humorous misadventure represents a cherished memory between two or more women. Humorous exchanges require two or more participants to share an idea and emotional response. Therefore, the retelling of humorous stories represents how the nurses relived these shared experiences and preserved the friendships that created them. Like jokes and laughter, the activities the women did as means of entertainment highlight the role of comradery in maintaining morale and the significance of social bonding. The women subverted femininity in the comical fashion shows or participated in a feminine cultural activity such as shopping so as to maintain their connection to the feminine identity while in a male environment where their attire and appearance slowly lost its ideal femininity. Within the prisoner of war camps, the women utilized communal activities such as birthday celebrations, cooking, and concerts to establish a strong community bond. These social events assisted the nurses in maintaining their mental health while their physical health often deteriorated.

Lastly, the nurses of the Second World War utilized their bonds to provide physical protection. Protection took many forms. Sometimes it meant fending off unwanted male attention, traveling in groups, or occasionally saving each other's lives. As the accounts recorded in this paper suggest, their sense of sisterhood offered the women physical protection when they lived in a male-dominated atmosphere. The British and Australian nursing sisters and the American nurses kept each other safe. The Allied nurses' letters, diaries, memoirs, and oral

histories include numerous stories of the women protecting each other. Multiple nurses recalled establishing systems and rules where they never traveled or ventured out of women's only spaces without another woman. Many letters sent home to loved ones detailing shopping or sightseeing trips mention the name of a female friend who accompanied the writer on their journey. The fact that many veteran nurses specified that they always traveled in groups sheds light on the vulnerability that the nurses felt existing in a male sphere. Although most nurses reported that their male colleagues and patients behaved wonderfully, the possibility of harassment or assault remains evident in their need to travel in groups. In some cases, the nurses chose to stay with a sick or injured friend. The strong friendships they established allowed the women to explore unknown cities, go to officers' clubs, or sleep in their tents without anxiety. The women looked out for one another. In some cases, they risked their lives to save each other. As the accounts from de Malmanche record, the female medical officers in her community further protected the nurses under the charge by ensuring that they received supplies and accommodations. The sharing of food and materials in the POW camps within the female community represents another form of protection and safeguarding. Overall, the various testimonies given throughout this paper exemplify the significance of women protecting women. In conclusion, the evidence suggests that the friendships among the nurses constructed and maintained throughout the war offered them numerous benefits. These benefits took the form of emotional and mental health through comfort, understanding, and entertainment. Humor played an essential role in maintaining morale and fostering friendships. The preservation of specific jokes or humorous events hints at the value that the nurses placed on these moments of humor and joy. Furthermore, the inclusion hints at the role of positive emotions in memory formation and maintenance. The jokes imply fond memories of the companions where the positive emotions occurred. Lastly,

their friendships offered nurses the critical protection required to survive in a male-dominated space. Overall, the friendships among military nurses during the Second World War provided numerous critical benefits that significantly shaped their experiences.

Comradery and Memory:

Receiving Recognition, Transition into the Post-War Era, and Protecting War Memories.'

When the war ended in 1945, it meant another monumental shift for the nurses who had spent the last few years working alongside battlefields or imprisoned in prisoner of war camps. In many ways, peace meant a return to normalcy. It meant liberation. Women who had not seen their family or romantic partner in years could go home. However, the homecoming of thousands of women brought new challenges. The brave new world that the Second World War had fostered in gender dynamics did not align as smoothly with a peacetime world. Many women left nursing altogether to adopt a domestic lifestyle. Some women remained in the industry through civilian nursing jobs, and others stayed in the military. As the dust settled and the new post-war era carried on, the issue of recognition for service arose. Allied governments clamored over the next few decades to provide commemorative honors, statues, awards, and services to pay tribute to those soldiers who had fought and died for their country. However, as the United States, Australia and Britain erected statues and memorial sites to male servicemen, there remained a noticeable lack of tributes dedicated to women and their sacrifices. When considering the memory of the military nurses, it is worth comparing the official recognition to the way that veteran nurses chose to honor their colleagues. This chapter explores how the public institutions recognized the efforts of the nurses, and how the nurses received validation and commemoration from each other for their war work and courage. The stories the women tell of each other's heroics, friendship, and dedication to their trade demonstrate how the nurses safeguarded their honor when official institutions failed to do so.

This chapter further analyzes the legacy of the nurses through the disruption of their communities and friendships. This disruption arose either through individual members entering into matrimony or through the war's end. It further incorporates an analysis of how the relationships and larger community of nurses survived beyond the war through reunions and personal correspondence. It examines how changes in labor and society allowed women to straddle the two spheres in the post-war period and why they chose to do so. It argues that the feminine culture played a role in how women took on new roles and inhabited new spaces. Lastly, it analyzes how male experiences and popular media colored the interpretations of nurses' memories, and how the community of nurses protected their memories against these challenges. The strength of their friendships enabled allied nurses to obtain recognition for their work, transition into the post-war period, and combat the influence of the media and male experiences on their war memory.

Recognition for Military Service and Sacrifice

In 2005, London unveiled a massive stone block statue meant to commemorate the women who participated in the Second World War. The statue features the inscription, "This Memorial was raised to commemorate the vital work done by over seven million women during World War II." It resides in the City of Westminster and features seventeen uniforms or typical attire worn by women in various posts. These uniforms include those of the Women's Royal Naval Service, the Women's Land Army, and the uniform of the QAIMNS. According to Corinna M. Peniston-Bird, the inclusiveness of the statue represents the anxiety felt by its commissioners about leaving any group of women out. This anxiety stemmed from the fear that a neglected organization would interrupt their absence on the statue as a statement of their

inferiority. Their absence would mean their war work held less value than the work done by other organizations of women. Unfortunately, the inclusion of all women diluted the value of any one organization. While the creator, John W. Mills, focused on inclusivity, the presence of every female organization, including civilians, invoked a strong resentment from women who served in military roles during the war. While the hierarchy of suffering roused some indignation among female veterans, the main complaint, according to Peniston-Bird, arose over the failure to recognize the separation and distinction owed to military services for female commemoration. Male servicemen never shared their commemorative statues with the contributions of civilian men. If the difference between male servicemen and male civilian workers required a clear distinction in commemorative structures, then it forces the question as to why women's military service did not need the same distinction.²⁰³



Figure 2. and Figure 3. Photographs taken by author of the Monument to the Women of World War II in London, UK

A critical aspect of the statute is the absence of female bodies. The structure consists solely of female garments: hats, coats, and work-related accessories hang on invisible hooks.

²⁰³ Peniston-Bird, *The People's War*.

This choice of commemoration highlights the significant relationship between women's attire and their identity. Although uniforms of male statues signify their role (i.e., a navy uniform shows that a male figure is a sailor), the male body itself is represented. As Peniston-Bird writes, women felt frustrated that Mills chose to represent them through garments and fashion alone. The absence of a female body suggests that women's attire supersedes the purpose of the body.²⁰⁴ For nurses, this indicates that the morale boost gained by seeing a nurse in uniform provided more aid to soldiers than a nurse's physical work and expertise. As Dunnett stated in her interview, the nurses' uniform alone served as a significant morale booster.²⁰⁵ However, placing too much emphasis on the significance of the uniforms undermines the skill and physical labor undertaken by its wearer. As one woman wrote in a letter of protest to the design, "I think we deserve to be remembered by something that depicts who and what we were – but to be remembered by a great coat hanging on a peg! – I cannot understand how they reached such a stupid way to depict us."²⁰⁶ As this letter suggests, many women who had served during the war strongly resent the design's negligence of a human form. In many ways, the statue quite literally dehumanized the women's services.

Additionally, the presentation of coats hanging on the hooks invokes the image of women retiring from these services as soon as the war finished. It perpetuates the myth that women arrived in droves to help protect Britain in her hour of need, but as soon as Winston Churchill declared peace, they hung up their public occupations and hurried back to their domestic spheres. The uniforms and coats transformed the women during the war, but they safely removed their garments, and with the removal of their jackets, all progress and shifts in gender dynamics

²⁰⁴ Ibid., 67-82.

²⁰⁵ Dunnett, interview.

²⁰⁶ Peniston-Bird, *The People's War*, 73.

reverted back to their pre-war status. Moreover, the presentation of garments evokes the idea of costumes, as though the women donned costumes and performed roles, such as those in a play. They only pretended to be pilots, farmers, or nurses during the war. When peace was declared, they removed their costumes and returned to being proper women again.

In Arthur W. Anderson Peace Park, in Illinois a full collection of war statues wraps around a small enclosure. Anderson created the series of statues to depict veterans of the major five conflicts of the 20th century known at the Field of Honors Memorial. Within the war memorials, stands a solitary nurse in front of the World War Two classification inscribed in stone. Standing among an array of male figures, the sculpture included the entire body and torso of a nurse. The statue still presents the iconic image of the nurse's uniform, including a hat and cape. However, the figure still maintains a fleshed-out body adorning the clothes, showing the profession as more than a costume. Although the inclusion of a nurse in a war memorial acts vital representation, there is not a standalone structure dedicated only to Second World War nurses. In Australia, Betty Jeffrey and Vivian Bullwinkel, who survived internment by the Japanese during the war, founded a memorial institution. Jeffrey and Bullwinkel created the Australian Nurses Memorial Center to serve as "a living memorial to the heroism and sacrifices of the 77 Australian Nurses who died in World Two or survived in prisoner of war camps during that time." After the two women were liberated from their POW internment, they toured Victoria, Australia, to raise awareness and funds for their cause.²⁰⁷ The living memorial created by Bullwinkel and her colleagues straddles the lien between the official recognition for nursing efforts and the recognition given through the admiration of veteran nurses for their colleagues.

²⁰⁷ "About" Australian Nurses Memorial Centre, Date Accessed 8 March 2022
<http://australiannursesmemorialcentre.org.au/index.php/about/>

Although official statues or commemorative plaques dedicated to the nurses of the Second World War remain limited, both the United States and the United Kingdom honored their nurses with numerous individual medals and official awards. For example, according to Kathryn J. Atwood's book *Women Heroes of World War II: 26 Stories of Espionage, Sabotage, Resistance, and Rescue*, Muriel Phillips Engelman's entire hospital unit received the European Theatre Ribbon and Medal. Additionally, the United States Military awarded the nurses a battle star for each campaign they participated in, one of which represented their service in the *Battle of the Bulge*.²⁰⁸ In the United Kingdom, many nurses received awards such as the Royal Red Cross, Associates Royal Red Cross, and the Burma Awards.²⁰⁹ For example, Sister Muriel Tims alone received the 1939-1945 Star, the African Star, the France & Germany Star, Defense Medal, the War Medal, S.R.N Training Medal, and the Q.A.I.M.N.S/R Medal for her services during the war.²¹⁰

When Sister Bond received an award for her service, her Matron chose to play a practical joke on Bond by making her believe she was in trouble. Bond recorded in her memoir,

One night as I entered the office to collect the night report, I was shocked to hear Miss Bampton the Matron addressing me in a stern voice, "I don't know what you've done wrong," she exclaimed, "but you have to report to the CO at 10.00 AM sharp tomorrow morning." I worried all night about what was to come, puzzled about what I had done. Imagine the contrast to these feelings when next morning, I found out, to my delight, that I was being awarded a Certificate of Merit for outstanding service and great devotion to duty during the campaign in France.²¹¹

²⁰⁸ Kathryn J. Atwood, *Women Heroes of World War II: 26 stories of Espionage, sabotage, Resistance, and Rescue*, (Chicago: Illinois, Chicago Review Press, 2013), 211-212.

²⁰⁹ Europe/Far East/Dame K. Jones – Broadcast/Nursin – Belsen, Box 2, QARANC/CF/4/5/1/VARI, Museum of Military Medicine, Ash Vale, United Kingdom.

²¹⁰ Private Papers of Mrs. M Tims, Document 23842, Box No: 61/17/1, Imperial War Museum, London, United Kingdom

²¹¹ Bond, "Wartime Experiences."

In addition, to the honor paid to Sister Bond by the British military forces, she further wrote about the meaningful experience after the ceremony with her community of nursing sisters. "I was overwhelmed by emotion. Matron put her arm around me and took me up to her room where all the off-duty Sisters had gathered to toast me with champagne. This particular morning is certainly a memory I shall always treasure."²¹²

Another form of recognition the nurses received for the military services came via media reports of their acts of heroism. The popular media wrote about the nurses as women who represented exemplary figures of their gender. On 10 February 1946, the *Weekly Dispatch* wrote about the reunion of army nurses in Kensington. The headline boasted, "300 Heroines Who Faced Death Take Tea Together." As the headline suggests, these heroines had happily returned to the safety and comfort of feminine British activities. The article claimed, "At the tea party, those 300 women wore as many ribbons as you might find at a big official reception. For everyone has seen service – mostly near and often in the firing line." The article went into detail concerning one distinguished guest, Sister Turner. It devoted an entire section to detail Turner's harrowing tale of her time in service, beginning when her attempted escape of Singapore. According to the article, "She was one of 16 aboard who got on a raft that was intended for eight. For five days and nights, Sister Turner and the 15 others drifted. One by one, the 15 went mad and sank into the shark-infested oceans through exposure, hunger, and thirst." Turner remained the "sole survivor" who the Japanese eventually captured and imprisoned. Although this example perhaps more accurately depicts media sensationalism surrounding the heroes of the Second

²¹² Ibid, 44.

World War, it still represents a case where the popular media and society recognized the efforts of the nurses and allowed them to exist in the same category of “hero” as their male peers.²¹³

While official honors and recognition of the nurses’ work show the value and appreciation of their home countries and citizens, the nurses’ admiration for each other better demonstrates the value of their female communities and companionship. In her account of her services, Matron F.M. Smith wrote, “In conclusion, I would like to pay tribute to the sisters of the General Hospital for their loyalty and co-operation, without whose help the hospital would never have been the success it was. They worked hard, sometimes under very difficult situations. The arrival of reliefs in Dec. brought its moments of sadness as it meant the breaking up of the original unit.”²¹⁴ Sister P.M. Dyer wrote of the QAs, “To be either a regular or reservist to this great force of women fills one with intense pride, as one knows that whatever part of the world one of its members may be sent, and whatever hardships may prevail, the Army Nursing Service will always do its duty and be the leading service of the world.”²¹⁵ An example of the admiration nurses felt for their matron can be found in Dame Katherine Jones. Upon her retirement, the nurses who had worked under her comprised a small red book filled with their well-wishes and comments of respect and admiration. One nurse wrote, “I would like to say how much we do appreciate what Dame Kathrine has done – women in responsible positions who devote their

²¹³ “300 Heroines Who Faced Death Take Tea Together: Nurse on Raft Watched 15 Friends Go Mad,” Weekly Dispatch, 10 February 1946, QARANC/CF/4/5/1/VARI, Box 2, Europe/Far East/ Dame K. Jones – Broadcast/ Nursing – Belson, Museum of Military Medicine, Ash Vale, United Kingdom.

²¹⁴ (Sgd.) F. M. Smith (Matron, General Hospital, QAIMNS), “Account Given of Military Service,” QARANC/PE/1/321/France, Box 68, BEF France 1939/1940, Museum of Military Medicine, Ash Vale, United Kingdom

²¹⁵ “When Life was Grey and Scarlet, 1943-1946” unpublished memoir by P.M. Dyer, MMM QARANC/PE/1/151/DYER, 1956/159, Box 8, Museum of Military Medicine, Ash Vale, United Kingdom.

lives to Nursing and other Services added to their ordinary duties, have borne the extra trouble of dangers of a wartime job, and well earned a peaceful retirement."²¹⁶

Eva Irvine wrote to the *Nursing Mirror* that she wished to "express my admiration of Miss Jones, matron-in-chief of the Far East, QAIMNS, and her assistant Miss Mollet, and other Sisters of the QAIMNS, and members of the RAMC. Their courage and cheerfulness were stimulation to everyone." However, Irvine claimed regret upon parting from this group when she wrote, "I was very reluctant to leave my nursing colleagues when I had to leave Singapore for the safety of my four-year-old child."²¹⁷ Although not an official statement of admiration, the reluctance many nurses felt to part with their companions and communities represents the value they placed on these bonds. In her unpublished memory, Sister Sybil Brazell recalled her disappointment in separating from her friend when they received different postings. "Matron had indicated that there would be a possibility of being posted with friends. I had hoped to go with 'Pidge.' However, the alphabetical system was the order, and I found myself posted with three comparative strangers."²¹⁸ Pidge had provided Brazell with companionship and reasons for laughter, making her war experiences less difficult. The inclusion of her grief at separating from her companion signifies the value that her friendship provided.

The record given of Sister V. M. Bostock's war experience during the fall of Singapore as a nursing sister in QAIMNS was written post-humorously by her husband. According to the account made by Sister Bostock, when the orders came that the British army intended to evacuate Singapore due to the Japanese invasion, the nursing sisters initially wanted to stay with

²¹⁶ "Retirement Appreciation Book for Dame Katherine Jones," QARANC/PE/1/321/France, Box 68, BEF France 1939/1940, Museum of Military Medicine, Ash Vale, United Kingdom

²¹⁷ Eva Irvine, "Tribute to Matron-in-Chief, Far East," *Nursing Mirror*, Published 15 May 1942, QARANC/PE/1/321/France, Box 68, BEF FRANCE 1939-1940, Museum of Military Medicine, Ash Vale, United Kingdom

²¹⁸ Brazell "Reminiscences of War."

their wounded patients. However, the doctors stationed in Hong Kong reminded the nurses of the "Japanese atrocities" committed in Hong Kong and urged the women to leave. In Bostock's account, approximately 100 nursing sisters and matrons evacuated Singapore via the ship the Kwala on 13 February.²¹⁹ Unfortunately, the next day a Japanese Dive-Bomb attacked the Kwala killing several matrons and eighteen British Nursing QAs. The rescue ship, Tanjong Penang, discovered the stranded women and children. The next day the Japanese sunk the Tanjong Penang. A good chunk of Bostock's account concerns the experiences of a different nurse. She dedicates part of her narrative to telling the heroism of Sister Margot Turner. Her narrative concerns the same events written about earlier reported the *Weekly Dispatch*. Turner and another nurse attempted to save fourteen people (six of whom were children) by tying two rafts together. However, exposure and dehydration depleted their party rapidly, including all six children. In the end, "Only sister Turner and one other woman remained, sitting back-to-back on the raft. When this last companion over-balanced and was swept away by strong currents, Sister Turner was alone."²²⁰ As that Turner was the sole survivor of this tale, the appearance in Bostock's narrative highlights the collective mindset of the QAs and how they cherished each other stories enough to tell them.

Margot Turner provided the same service of memory preservation for a fellow nurse herself. She recorded the poems of Sister Olga Neubronner in her diary. Neubronner had been a Colonial Service Nursing Sister and Senior Superintendent to St. John's Ambulance Brigade in Singapore. According to the Muntok Peace Museum, Neubronner, who had been pregnant while

²¹⁹ Narrative by Sister V. M. Bostock, provided post-humorously by her husband to the museum archives, QARANC/PE/1/36/Bost, Box 4, Museum of Military Medicine, Ash Vale, United Kingdom; *alternative spelling "Kuala."

²²⁰ Bostock, narrative.

aboard the Vyner Brooke when it sunk. She later "miscarried on the Montauk Pier." The Japanese sent her and Sister Margot Turner to Palembang camp together after spending considerable time in a small cell in Kempetai. In this cell, Neubronner wrote "poems on her cell wall." Unfortunately, she later died while imprisoned at Palembang.²²¹ However, Turner safeguarded her friend's poetry in her diary that she kept during her time in the camp. Neubronner dedicated a poem to her friend titled: " To Margot (on her Birthday 10 May 1944)." In the poem, Neubronner wrote affectionately of her friend, "There is a joy to the eye just to see you come in."²²² The poem dedicated to Turner exemplifies the value of female-female friendship in multiple ways. Firstly, the poem's actual words state that Sister Turner fostered positive emotions with Sister Neubronner, even within their dismal circumstances. Secondly, giving a poem as a present highlights how the nurses found alternative ways of creating meaningful gifts to share despite their lack of physical resources. Thirdly, the fact that Turner recorded Neubronner's poems in her personal diary shows how much she valued the poems. With limited resources, space within diaries held significant value. Paper was not a commonly replenishable resource within POW camps. In Sister Lee's diary, her notes became smaller and smaller as time passed, as she worked to utilize as much space as possible. Therefore, Turner's dedication of valuable diary space to her friend's poems indicates how much she cherished them. Lastly, through this female-female friendship, Neubronner's poetry survived the war when she did not. Her poems traveled back to the United Kingdom through her friend's diary and have

²²¹ "Olga Mary Neubronner," The Palembang and Muntok Internees of WW2, Muntok Peace Museum, http://muntokpeacemuseum.org/?page_id=3547

²²² Dame Margot Turner's Diary: Poems written by Mrs. O Neubronner while a POW in Japanese Hands 1942-1945. Died March 22 ,1945, 2019.2.1. to 2019.2.15, Box 45, Papers of Dame Margot Turner, Museum of Military Medicine, Ash Vale, United Kingdom.

remained safeguarded in archives ever since. Neubronner's poetry may have disappeared in the Muntok Camp without her friend.

De Malmanche wrote proudly of the bravery exemplified by the fellow medical woman who survived the sinking of the Kuala. She depicted how her friend, Lyon, had dived in the water multiple times to save her friend from drowning. She further dedicated space in her account to the heroic efforts of an Australian nursing sister, known only in de Malmanche's account as Miss Jones. Jones "swam back into the sea eighteen times to rescue people who were either wounded or in difficulties. When she was too exhausted to swim anymore, she went out in the boat to help. She was extremely brave, as bombs were dropping all the time, & the underwater blasts were terrifying." According to de Malmanche, all the women showed incredible bravery and self-sacrifice after the shipwreck. De Malmanche wrote, "All the able-bodied women were dressed only in pants & brassieres, as they had torn up all their outer clothing to staunch wounds & make bandages."²²³ Similar to the account that Bostock preserved regarding Margot Turner's story, the best way that nursing sisters showed their admiration for each other was by ensuring that their stories of valor, bravery, and sacrifice survived.

Transitioning into the Post-War Period

When the war ended, the nurses faced another monumental shift in their lives as many of them slowly transitioned back to civilian life. Nurse Aitken's interviewer asked her about any difficulty she faced "readjusting to civilian life." Aitkens replied, "I really can't say. At first, I talked a lot in my sleep and woke up a lot thinking I heard air raids." However, soon after her discharge papers came through, she married and transitioned out of her military identity entirely.

²²³ De Malmanche, private papers.

According to Aitken, she went from Lieutenant to Mrs.²²⁴ This distinction highlights how nurses like Aitkin often severed their connection with their military identity through marriage. They viewed their marriage as a means of closing that chapter of their life entirely. While shellshock, or as it is now known, PTSD impacted numerous participants of the Second World War, many nurses likely continued to experience post-traumatic stress in later years. Further study is needed to determine whether gender differences existed in how men and women experienced PTSD after the Second World War and impacted diagnosis and treatment. As that many nurses worked and lived close to the battlefield and often worked under the threat of bombs, their experiences would offer a unique insight to any scholars choosing to pursue this course of research.

For many nurses, marriage often meant a separate from female companions. Nurse DeBeer wrote that she returned to the United States after the war ended and intended to continue her career as a nurse in Massachusetts. "Boston University was starting the first post-graduate course of study on Orthopedic Nursing, and since I really liked that field, I applied and was accepted. I took one semester of classes; then went home for the summer." In DeBeer's case, the trip home, unfortunately, ended her career, as she wrote that her brother had returned home from his tour with the marines, and while visiting her brother, she spent time with his friends. She grew closer to Wayne DeBeer, and the pair married that August. "I quit my schooling to work while Wayne finished some course work. He had enough hours to graduate by still needed a major. After all that, I ended up with four children –one girl and three boys, and Wayne ended up with a Ph.D."²²⁵ For the nurses who married during and immediately after the war, societal expectations often meant they either quit their careers or postponed them while their husbands

²²⁴ Anderson Aitkin, interview.

²²⁵ Debeer, *My Years*, 42.

established theirs. Often, this postponement meant that women never returned to employment outside the home.

For those women who married during the war, their transition from military service was often sudden. For example, Gwendoline Lees, who served in the Special Operations Executive and later for the First Aid Nursing Yeomanry (FANY), reported that she had to leave the service when she married in Cairo due to an army rule that prohibited husbands and wives from serving in the same branch of the military.²²⁶ American nurse Miriam Broady attempted to avoid getting sent home by concealing her marriage, as evidenced by a letter she wrote, "If you can keep a secret until I am able to announce it, I may let you know that I was married to a MAC officer here three months ago. However, as soon as it is found out, one of us will be immediately transferred, so we are keeping it to ourselves as long as we possibly can."²²⁷ American nurse Claire Landorf Anderson learned of the policy on marriages too late. She wrote to a friend, "But I don't think I ever did a better thing for myself than to allow him to finally persuade me that I ought to marry him.... There is just one flaw in the matter. It seems that I and another one of our nurses tramped on the commanding general of this war theatre's toes. There are not supposed to be any military marriages of Americans in Asia. Thus far, we have heard nothing concerning our punishment. We were told about the regulation after I had already been married for five days."²²⁸

On the other hand, American Nurse Burns Prudence Burrell feared waiting until they returned to civilian life. She described her situation, noting the difference between herself and women in civilian life. "We had been wearing high-top shoes, and our hair, we had rolled it,

²²⁶ Gwendoline Lees interviewed by Conrad Wood, 16 January 1990, Imperial War Museum, London, United Kingdom.

²²⁷ Miriam Broady Letter, "Letter from Miriam Broady to Elizabeth Pugsley, Saturday 3 June 1944," Letters from the US Army Nurses, 1942-1946.

²²⁸ Claire Landorf Anderson Letter, "Letter from Claire Landorf Anderson to Hazel Goff, 18 December 1943," Letters from the US Army Nurses, 1942-1946.

because it was hot, and it would get messed up...So, after about a year and a half, this medical administrator began kind of dating me, and he said, "Well, will you marry me?" When he suggested they wait until they returned to the United States for the wedding ceremony, Burrell disagreed because she did not want to compete with civilian women. "I said, 'Oh, no, like hell, you'll get to the States where they've been dressing fine and all that, and we've been dressing like vagabonds, no way, we're getting married here.' So, therefore, that's why I had my wedding in the Philippines, and my dress was made from a parachute'." ²²⁹ Unlike other nurses, in Burrell's memoir, *Hathaway*, she claims that she continued to work as a nurse longer after her marriage. However, as Hathaway and her husband were African American, different socio-economic and societal factors may have influenced that decision. In Burrell's case, her marriage did not inhibit her ability to rejoin a female community within the work sphere in the post-war period. ²³⁰

Many nurses felt the keen loss of a friend when a nurse chose to get married and leave the service. In her memoir, *A Half Acre of Hell*, Avis Schorer recollected discovering that one of her friends from nursing school had chosen to enlist. Initially, she found immediate comfort in her friend's companionship while Avis settled into the camp. Unfortunately, this comfort soon disappeared when Avis' friend married. The army immediately discharged the young nurse and sent her home to Iowa. ²³¹ Nurses who married often left the public sphere entirely to return to the domestic sphere. Furthermore, they left their female communities. Marriage often meant that women became confined to the home and lost their regular communication with friends in their places of employment. It meant the loss of their place in the communal women's spaces among friends. While women's confinement to the domestic sphere acted as a barrier between

²²⁹ Burrell, interviewed.

²³⁰ Prudence Burns Burrell, *Hathaway* (Warren: Michigan, Harlo Press, 1997).

²³¹ Avis D. Schorer, *A Half Ace of Hell: A Combat Nurse in WWII*, (Galde Press, Inc, Lakeville: Minnesota, 2002)

themselves and interactions with men (outside their family members), it also meant isolation from other women.

The pamphlet *Working Wives* published the results of a 1957 survey conducted on married women who continued or returned to work after matrimony. The report found that a significant number of women who chose to return to work after marriage attributed their decision to feelings of social isolation.²³² For nurses, the shift into the domestic sphere was made more poignant since they had lived and worked in tight-knit communities of women. The nurses who had lived every day in groups of women now lived alone with a man. *Working Wives* recorded why one nurse chose to return to work after marriage, "We live in an isolated part...I go out for company and, of course, for the money."²³³ As the pamphlet notes, while many women reported money as a significant factor in their decision, 52% of women claimed "company, escape of loneliness at home" as an advantage to going to work when asked for reasons other than monetary gain.²³⁴ Further scholarship is needed to determine whether women who returned to work preferred working in female-dominated industries. In 1957, 73 percent of all working women fell between the ages of 33 and 44. While the age of children impacts a woman's likelihood of going to work, this age range also correlates with the women who would have been 21-32 at the end of the war.²³⁵ Therefore, this age group represents the women who may have participated in war work during the war. However, further scholarship is needed to determine whether war work affected how women viewed employment. Moreover, further study may

²³² Viola Klein, *Working Wives: A Survey of Facts and Opinions Concerning the Gainful Employment of Married Women in Britain*, The Institute of Personnel Management (Carried out in co-operation with Mass Observation Ltd., London, United Kingdom, 1957), 331.4, Box 11, F25, Working Class Movement Library, Salford, United Kingdom.

²³³ Viola Klein, *Working Wives*, 30.

²³⁴ *Ibid.*, 31.

²³⁵ *Ibid.*, 27.

illuminate whether working within predominantly female communities during the war impacted their perspective on working outside the home.

As the war ended, the fight for women's rights continued. The sudden shift in labor demands and gender expectations in peacetime meant a new fight for the appreciation of women's work. The pamphlet, *Woman Today*, focused on the various areas of women's labor, including nurses. *Woman Today* wrote two consecutive articles addressing the dire shortage of nurses in Britain. Ted Bramley described the grim situation in an article titled "Why Hospital Beds Stand Empty" to address the lack of staff. He wrote, "the existing staff is waging a heroic battle against heavy odds...student nurses spend over a quarter of their time doing cleaning work...A sister and one nurse handled an entire ward of 24 surgical cases. Two young nurses and an orderly were handling a ward with over 50 chronic sick. Just girls, barely out of their teens, shoulder such a colossal job. Four wards had no sister or staff nurse in charge."²³⁶ The situation Bramley described disturbed readers so severely that he worried he had only worsened the problem by scaring off any potential nurses.

In the next issue of *Women Today*, Bramley wrote an article detailing proposals to improve the situation. He addressed the issue of pay and working hours that the workplaces expected of nurses, and he further mentioned, "Extension of employment of part-time workers as nurses...with sufficient pay to make the work worthwhile for married women."²³⁷ The attention given to part-time work for married women hints at why many trained and highly qualified nurses who had served in the Second World War left the profession. When they married, their domestic responsibilities demanded too much of their time. In addition, marriage was often

²³⁶ Ted Bramley, "Why Hospital Beds Stand Empty: First of Two Articles," *Woman Today*, 3 December 1947, the People's History Museum, Manchester, United Kingdom, 15.

²³⁷ Ted Bramley, "Why Hospital Beds Stand Empty: Second of Two Articles," *Woman Today*, 3 January 1948, the People's History Museum, Manchester, United Kingdom, 14.

followed quickly by motherhood, which meant that many well-qualified nurses with extensive experience could not easily return to the workforce. Regardless, the development of part-time opportunities enabled women to rejoin the public sphere and interact with large communities of women again. The friendships that women established in their part-time labor reinforced the value they felt in giving their time and energy to non-domestic activities. In a 3 September 1947 issue of *Women Today*, Doris Butterworth wrote about her experience returning to nursing to serve as a part-time employee. She wrote that the "thanks of the over-worked sister" helped her feel the value of her service.²³⁸

Although many women left nursing for marriage, many nurses reported that they managed to maintain aspects of their war community through regular contact with the nurses with whom they served. For example, Aitken claimed, "Although we were only 19 nurses, we had a wonderful chief nurse who kept track of everybody, and we had reunions in Chicago annually for a few years." Unfortunately, as time passed, the group of friends slowly deteriorated after her chief nurse died. "We had a couple of reunions in Rockford at our home, and we also had a reunion in Grand Rapids, Michigan." As time went on, more and more members passed away, "Gradually, several would die each year; and there are now just three of us left, a friend in Michigan and another friend in a nursing home near Chicago. But all the others, as far as I know, have died."²³⁹ Margot Turner told her interviewer, "Some of those people I hadn't seen since we left camp in '45, we all started again as though we'd seen each other last week or the week before. It was a wonderful reunion."²⁴⁰

²³⁸ Doris Butterworth, "Part-Time Worker," *Woman Today*, 3 September 1947, the People's History Museum, Manchester, United Kingdom, 14.

²³⁹ Anderson Aitkin, interview.

²⁴⁰ Turner, interview.

Similarly, Isabelle Cooke claimed that she participated in a regular reunion with World War Two veterans. "I joined the Third General Hospital World War II Association. We've met every two years for a reunion. They always had this -- it was a newsletter, but it was full of pictures, and everyone contributed their stories about what their experience was. I am a charter member of the Women's Memorial in Washington, DC." Cooke further worked to keep the memory of her experiences alive through the next generation. "I have been going to some schools to talk to the children about what it was like to be a nurse during those times," she told her interviewer.²⁴¹

Lille Margaret Steinmetz Magette also participated in a project to teach the youth about the war. Major George Meister, a "reserve chaplain at Buckley Air Force Base and project manager for Operation Grey Eagle," approached Magette to recruit her assistance in a project. Meister had "organized a special program for the Veterans-on-Veterans Day." He told Magette, "We are forming the Grey Eagles. I've chosen six people from here, and we're going out to Buckley every six weeks and talk to the graduating classes." Magette agreed, and "That was at the beginning of it."²⁴² Magette and Cooke's reunions and efforts with youth show how nurses worked to protect the legacy of nurses. Cook's work, in particular, shows how veterans shared experiences and photographs as a means of preserving collective memories and promoting each other's legacies.

The Protection of War Memories

The nature of oral histories or memoirs means that the source itself is subjected to the biases and perspectives of the speaker/writer. It is additionally corrupted any events between their disclosure of their memory and the event itself. The oral histories used in this study were recorded in the 1980s or 1990s, several decades after the war ended and after many nurses

²⁴¹ Cook, interview.

²⁴² Magette, interview.

returned to civilian life. In the intervening time, significant discussions, commemorations, and art attributed to the immense hardship of the men on the battlefields had developed. Furthermore, the nurses witnessed firsthand the devastation physical and psychological trauma that the soldiers suffered due to their participation in horrific battles. The women's awareness of the men's conditions and experiences influenced their memory and interpretation of their own experiences. Whenever a nurse related her experience (whether in a memoir, letter, or oral interview), she filtered it through a second experience: the men's experience. This 'second experience' aligns with the claims made by Acton and Potter in *Working in a World of Hurt* regarding the "hierarchy of suffering." The evidence found in this paper, furthers the hierarchy of suffering argument, through an analysis of the second experience's influence on memory. Acton and Potter argued that this hierarchy inhibited the nurses from addressing their own emotional stress, this study further argues that this hierarchy significantly impacted memory formation and recollections given by military nurses.²⁴³

This second experience drastically influenced how the nurses viewed their contributions to the war. A letter from American nurse Imogene Martin written on 19 July 1944 provides evidence of this comparison. While stationed, "somewhere in France," she wrote to Hazel Goff to describe the current well-being and condition of the nurses. "After a few days' rest, we will probably get up to the front again and continue with the work. As I say, we get pretty tired, but when you see how much the boys are giving for all of us, what we do seems all too little."²⁴⁴ The nurses' memory of their experience does not exist in a vacuum. The second experiences of male soldiers, sailors, airmen, and medical personnel heavily influenced their memories. They placed

²⁴³ Acton and Potter, *Working in a World*, 84.

²⁴⁴ Imogene Martin Letter, "Letter from Imogene Martin to Hazel Goff, 19 July 1944," Letters from the US Army Nurses, 1942-1946.

every complaint, every hardship, and every emotion through a filter in which they compared it to the experience of the men fighting on the front lines.

Issues surrounding race also shaped a nurse's memories and opinion of the military. Dorothy Margaret Cook Jenkins, who served in a stateside military hospital, felt the sting of racism in the military. While in the service in Phoenix, she and a friend went to a football together and received aggressive harassment from a male soldier in the stands. When a struggle broke out, Jenkins overheard him say, "He was going to jerk those damn bars off my shoulder, and so they had to restrain him." She deduced that his anger derived from her being "a minority group member and a female too."

Furthermore, Jenkins felt that the army failed to promote her based on her race. She claimed they should have promoted her to captain, but instead, they kept her as a first lieutenant. Jenkins worked at a hospital treating German prisoners of war. She stated that the white American soldiers treated the enemy prisoners better than their black Americans. They even occasionally invited them to the officers club when the black nurses could not enter the club.²⁴⁵ Oneida Miller Stuart's memories of her war experience include instances where white patients reacted aggressively and issued slurs at her as she tried to treat them.²⁴⁶ As their experiences differed, black nurses' impressions and memories of nursing also differed significantly from their white peers. Many white nurses mainly had positive interactions with the allied soldiers in their care, and these positive memories helped reinforce the development of glorification of the soldiers in

²⁴⁵ Dorothy Margaret Cook Jenkins, interviewed by Christopher Willoughby, 31 May 2005, Veterans History Project, Library of Congress, Washington DC.

²⁴⁶ Oneida Miller Stuart, interviewed by Douglas Clanin, 15 September 1992, Veterans History Project, Library of Congress, Washington DC

the postwar period. However, black nurses had a different perspective on the soldiers and the military system.

Furthermore, women's perspectives of themselves and their experiences often get filtered through perspectives of the ideal. The influence of the feminine culture shapes how ideal women should behave and appear. According to Verla Virginia Kallemeyn DeBeer's memoir, "We had just seen a movie with Dinah Shore as an army nurse going overseas. In the movie, she walked up the gangplank in daylight and a very dressy Class A uniform, smiling and waving to the people lined up on shore. Our experience was quite different! We left in the middle of the night, wearing everything we possibly could and carrying our duffel bags and heavy purses. Nothing glamorous about us!"²⁴⁷ As this suggests, when reflecting on their experiences, veteran nurses compared themselves to the popularized images that existed at the time.

While the second experience influenced their individual recollection, the lasting friendships allowed for collective memory to help preserve a more accurate picture of the truth. As that memory formation remains an imperfect aspect of the human brain, the collection of numerous accounts by multiple nurses at the same event helps to establish a clearer picture of the nurses' actual experiences. The oral and written statements provided by the nurses exemplify how different individuals recalled the same events and circumstances differently. In the case of the POWs in Muntok, their recollections often aligned but occasionally diverged. For example, Margot Turner answered a question about the conditions of her time in prison, "It's not something I really talk about much. Things they were doing to the local people. You could hear screams. I wouldn't say anything about it. It's just something I don't say."²⁴⁸ However, when

²⁴⁷ Debeer, *My Years*. 12.

²⁴⁸ Turner, interview.

Burkitt's interviewer informed that her fellow prisoner Sister Margot Turner had stated there "were things too difficult to talk about," Burkitt expressed confusion and claimed she had no idea to which traumas Turner referred.²⁴⁹ This example highlights the difference in how veterans preserve memories after the war. Burkitt claimed that she did not remember their guards physically abusing any nurses. Whereas Bullwinkel, her fellow prisoner in the Muntok camps, reported in her affidavit to the Australian War Crimes Inquiry that the Japanese struck women or made them stand in the sun. She claimed that the guards caused enough damage to dislodge teeth and produce a black eye.²⁵⁰ Margot Turner recalled a Japanese guard slapping her face. On the fragility of memory Margot Turner stated:

I learned a lot and just talking to other POWs, they'd say do you remember so and so, and I'd say, I don't remember that at all. Even my very greatest friend, she came into the camp later. She'd been in another one. And she'd say, but I know that was when I was with you. One just forgets or doesn't know about certain things. You couldn't know everything that was going on, and if it was anything like that, you'd have to keep very quiet about it.²⁵¹

Other stories and accounts by the nurses paint a similar picture, and the retelling of the same event emphasizes how significant it was to the whole community that experienced it. For example, the story appears in Burkitt's, Turner's, and Bullwinkel's narratives. Below is the account reported by Burkitt:

The Japanese officers had "decided they'd have a club." "They came and said we were to go up to this club. Well, we put the worst possible things we could put on. Looked like absolute scarecrows. We went only once. There was one captain who took a fancy to me, but only because I was his right size, I think. All the others were taller than he was. We went up, they gave us some peanuts to eat and a drink which nobody drank. They got tired of that. We went home after about half an hour. They asked us to go up again. I said, well, I'm not going. They said, no, you're not. You stay here. We'll only take the tallest ones. So, they did.²⁵²

²⁴⁹ Burkitt (Harper), interview.

²⁵⁰ Vivian Bullwinkel, affidavit, 6-13.

²⁵¹ Turner, interview.

²⁵² Burkitt (Harper), interview.

Burkitt recalled, "When they came down to have a look at me, I was laying down on the floor covered up, rather sick. So that was the end of that." Although, according to Burkitt, the camps had plenty of women available who would willingly participate in sexual activities with the guards. As she put it, "why bother about a lot of haggish looking nurses?" Overall, Burkitt stated that she believed her Japanese guards had been placed under an official order not to "molest" the nurses. She did not remember guards ever entering the nurses' home. However, she claimed they would look through their windows whenever the nurses put on a concert.²⁵³ Margot Turner recalled this event as well. "In the early days, they tried to get the Australians and others to go to a nightclub, but of course, they just dressed themselves up in all sorts of things and put mud on their faces, and made themselves so unattractive, they reckoned there wasn't going to be anything there."²⁵⁴ In both their remembrances, Burkitt and Turner stressed how the women utilized their understanding of femininity and attractiveness to subvert them to their advantage. They had enacted control over their situation, and Burkitt and Turner emphasized those actions of control in the retelling.

While collective memories help align pieces that show how dire the nurses' circumstances often had gotten, the friendships also enabled the nurses to create positive memories. As evidence from the previous chapter shows, the nurses often included humorous stories in their memoirs, or they dedicated space in oral interview to retell a funny story. While individuals often choose to repress or forget negative memories, happy memories often get willingly retold numerous times. The inclusion of jokes and instances of laughter in this paper highlight how the friendships shaped the nurses' memory of the war. Although many of their memories of serving alongside the military included instances of desperation, trauma, and

²⁵³ Ibid.

²⁵⁴ Turner, interview.

danger, they also included instances of laughter. Their friendships enabled the nurses to experience positive emotions and preserve the memory of those emotions through the retelling of stories.

Furthermore, the admiration of their friendships and colleagues shines brightest in the retelling of humorous stories. These were instances where a friend improved their mental health by sharing laughter. While these instances may seem minuscule, the fact that the nurses have held onto these specific memories and choose to retell them signifies their value for the nurses telling the story. Overall, the collective memories allowed the nurses to combat the influence of the second experience. By speaking about each other's experiences, they safeguarded the memories and legacies of their friends when the second experience may have impacted how they saw their own emotions and physical conditions. Furthermore, despite adverse circumstances, the friendships between the nurses created positive memories that the women preserved through retelling.

Conclusion

One of the critical aspects of the legacy of the military nurses who served with Australian, British, or American military units concerns the official recognition from their respective governments and societies. As the statue in Whitehall suggest, the British made efforts to commemorate the work by nurses. However, comparing the statues attributed to male servicemen shows a lack of comparative commemoration. Many nurses received medals, awards, and special commemoration for their service on an individual effort. While these commemorations hold significant value for the appreciation of women's war work, the nurses' affectionate and admiring accounts of their colleagues serve as a testament to the efforts of their

colleagues and the strength of their companionship. Furthermore, the inclusion of stories focused on the admiration of others represents a significant benefit of friendships, the protection and preservation of each other's value and efforts. When nurses included the stories of their peers (whether regarding heroic acts, acts of comfort, or instances of humor), they protected and promoted the image of their friend that otherwise would remain unknown to the annals of history. Additionally, women in the same circumstances remembering the same events differently highlights the importance of community memory by helping to create a full picture. Overall, the collective memory retains the stories of their friends' courage, ingenuity, and self-sacrifice in dark times.

In many ways, marriage caused the breakup of numerous nursing communities scattered throughout the world during the war. When nurses married, they often left the service, although many stayed in their posts throughout the war and continued nursing afterward. For many women, marriage meant their immediate discharge. They returned to the domestic sphere thereby leaving friends or even whole communities of women. As research conducted in *Working Wives* suggests, many women found being at home lonesome. Many women reported the need for social companionship as their primary cause of returning to the workforce. The study looked towards the type of labor women preferred but did not question whether a workforce predominately comprised of women versus men influenced a women's work satisfaction. Furthermore, many women who may have chosen to remain in nursing after marriage found it impossible to continue once they had children. Despite the massive destruction of female work communities after the war's end in 1945, numerous nurses kept their relationships intact through annual reunions. More research is needed on how their friendships impacted the nurses' mental health in the postwar period. In other words, whether the continued companionship of fellow

veteran nurses helped retired women cope with the drastic change to domestic life and whether these companionships helped with any mental health issues related to the war. Overall, the relationships established by World War Two nurses created a social network in which the memories of their experiences survived. The retelling of stories of each other highlights the value that each woman placed on her companions and the importance of maintaining their legacy.

Perhaps, the legacy of the Second World War QAIMNS and the connection to future generations of nurses can best be expressed by the words of British nursing sister A Radloff. "I look back in gratitude for the friendship and camaraderie of which I was part. I watch with interest and admiration the immaculate appearance of successors the QARANC at the Remembrance Day ceremonies. But they do not remember the times that I remember...."²⁵⁵As time progressed and the QAIMNS transformed into the QARANC. Numerous women entered the nursing profession post-war, but a disconnect developed between those who served during the war and after. Although a larger community of nurses existed, the tightknit friendships of the World War Two nurses remained apart. This difference exemplifies the need for further research into the experiences and stories shared by World War Two veteran nurses, for their experiences remain unique.

²⁵⁵ Private Papers of Mrs. A Radloff, Box N: 89/19/1, Imperial War Museum, London: United Kingdom.

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