

CANADA'S MILITARY NURSES IN THE FIRST WORLD WAR: THE BLUEBIRD  
UNIFORM AND AUTOGRAPH BOOKS AS MATERIAL CULTURE

by

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Dedicated to my parents, Danielle and Kevin.

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## **ABSTRACT**

The history of Canada's First World War military nurses, the "Bluebirds," has been defined by the appearance of their light blue uniforms. This thesis uses the framework of material culture methodology to examine the Canadian Army Medical Corps (CAMC) uniform, and a collection of nurses' autograph books which contain illustrations, poetry, and comments by patients.

Examination of the uniform provides insight into the collective identities of CAMC nurses, and how nurses interacted with the national identities projected upon their dress. Autograph books reveal the complicated and deeply personal relationships between nurses and patients. This thesis recoups the complex identities and unique experiences of the Bluebirds.

## **ACKNOWLEDGEMENTS**

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## CHAPTER ONE

### The Bluebirds, Military Nursing, And War

#### Introduction

The Bluebird nurses have become a symbol of Canada's role in the First World War and the contributions of women in health care at home and abroad. The Canadian Army Medical Corps' (CAMC) nursing sisters, as they were known, were professionally trained nurses, enlisted as Lieutenant Officers with the Canadian Expeditionary Force (CEF). Within Canadian historical memory the CAMC nurses have been defined by their appearance as "Bluebirds," a reference to their light blue uniforms. CAMC nurses did not refer to themselves as Bluebirds during the war, with the term originating as an affectionate nickname soldiers used to describe the nurses.<sup>1</sup> The CAMC military nurses were seen as symbols of mercy and godliness, represented by their appearances through the uniform, complete with white veils.

This thesis explores the individual and collective experiences of the CAMC nurses through their uniforms and the examination of a collection of personal autograph books that include images, poetry, and comments by patients, while in military hospitals in Europe. It examines the unique characteristics of the nurses as medical professionals, Canadians, and Lieutenant Officers. These identities set them apart from members of other nursing services including the Royal Army Medical Corps (RAMC) and Volunteer Aid Detachment (VAD). The

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<sup>1</sup> Susan Mann, 'Where Have All The Bluebirds Gone? On The Trail Of Canada's Military Nurses, 1914-1918' *Atlantis* 26, no. 1 (2001), 35.

unique experiences of Bluebird nurses and their complicated relationships with other allied nurses are often lost within feminist histories of the First World War.

The Bluebird uniform presents an opportunity to study the collective experiences of the CAMC nursing, and how reactions to and criticisms of their appearance and professional achievements affected individual nurses. Required to wear the uniform in almost all circumstances, the nurses were defined by the symbolism of their dress, and how the uniform was viewed by others directly affected how the nurses viewed themselves. Unique elements of the Bluebird uniform, including the blue colouring, rank badges, and CAMC buttons, contributed to the creation and articulation of group identities within the CAMC nursing service.

Autograph books offer a glimpse into individual connections and personal stories through the study of nurse-patient relationships and the private illustrations and messages recorded by patients. The relationship between CAMC nurses and wounded Canadian soldiers was highly romanticised by the Canadian media, and nurses kept their personal interactions private through the practice of autograph keeping. Despite differences in how nurses and soldiers interpreted their relationship, autograph books reveal how significant the personal bond was to both nurse and patient. Through an analysis of the Bluebird uniform and collection of autograph books, this thesis aims to leave the reader with a more complex and nuanced understanding of the CAMC Bluebird nurses and their personal experiences during the First World War.

## **Literature Review**

Military nurses captivated the interest of the Canadian public during the war and continue to be the focus of historical studies. Alongside academic sources, wartime nurses frequently appear as heroines in historical fiction. To build a strong foundation for this thesis, research began with



sources relating to Canada's involvement in the First World War, before focusing more closely on military nursing and the Canadian Army Medical Corps nursing service. The works of military historian Tim Cook provided histories of Canadians both overseas and on the home front during the First World War. Cook's *The Secret History of Soldiers: How Canadians Survived the Great War* (2019) exemplifies how to study wartime histories through the lens of quotidian events.<sup>2</sup> Cook examines the daily lives of soldiers, contributing to a deeper understanding of their experiences with and perspectives on the war. Cook has also written with a wider lens, as seen in *Vimy: The Battle and the Legend* (2018), which examines not only the history of the battle of Vimy Ridge but also the cultural and political impacts of the battle within Canadian memory as well.<sup>3</sup> His previous work, *Clio's Warriors: Canadian Historians and the Writing of the World Wars* (2006), considered how Canadian historical writing has contributed to national narratives and memories of the world wars, and has informed the way Canadians view Canada's participation in wartime.<sup>4</sup>

Cynthia Toman's *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (2016) presents a more comprehensive history of the CAMC nursing service during the First World War.<sup>5</sup> Toman defines the unique position of the nurses as military personnel and provides a detailed history of the CAMC as a revered institution, recognized as "The Great Machine of Healing". *Sister Soldiers*, furthermore, focuses on the lives and experiences of individual nurses, and their contributions to military nursing. *Sister Soldiers*

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<sup>2</sup> Tim Cook, *The Secret history of Soldiers: How Canadians Survived the First World War* (Toronto: Penguin Random House, 2019).

<sup>3</sup> Tim Cook, *Vimy: The Battle and the Legend* (Toronto: Penguin Random House, 2018).

<sup>4</sup> Tim Cook, *Clio's Warriors: Canadian Historians and the Writing of the World Wars* (Vancouver: UBC Press, 2006), 1.

<sup>5</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016).

follows Toman's 2013 article "'Help Us, Serve England': First World War Military Nursing and National Identities", published in the *Canadian Bulletin of Medical History*.<sup>6</sup> In this article, Toman focuses on nursing sister Emeline Robinson, who served in both the Queen Alexandria's Imperial Military Nursing Service (QAIMNS) and CAMC. Robinson's experience is studied by Toman as evidence of the growing sense of Canadian national identity during the war, and the changing relationships between Canada and Britain. The works of Cynthia Toman are foundational sources within the history of Canada's Bluebird nursing sisters, offering a more intimate view of the experiences of these professional women in the wartime environment.

Throughout the study of CAMC nurses, additional attention is paid to ideas of regionalism that identify differences between the various groups from within Canada. Similar to Toman's *Sister Soldiers*, though narrower in its focus, Katherine Dewar's *Those Splendid Girls: The Heroic Service of Prince Edward Island Nurses in the Great War* (2014) illuminates the role of war-time nurses in Atlantic Canada.<sup>7</sup> Shawna M. Quinn's *Agnes Warner and the Nursing Sisters of the Great War* (2010), further highlights the roles and experiences of nursing sisters from New Brunswick.<sup>8</sup> Regional Canadian identities played an important role in the relationships between C.A.M.C nurses and the relationships between nurse and patient.

The subject of military nurses and women in wartime is a well-represented one in recent military historiography, though these accounts often group together the experiences of all nursing sisters despite differences between allied nursing services. Christine E. Hallett's *Veiled*

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<sup>6</sup> Cynthia Toman, "'Help Us, Serve England': First World War Military Nursing and National Identities", *Canadian Bulletin of Medical History* 30, no. 1 (2013), 143-166.

<sup>7</sup> Katherine Dewar, *Those Splendid Girls: The Heroic Service of Prince Edward Island Nurses in the Great War 1914-1918* (Charlottetown: Island Studies Press, 2014).

<sup>8</sup> Shawna M. Quinn, *Agnes Warner and the Nursing Sisters of the Great War* (Fredericton: Goose Lane Editions, 2010).

*Warriors: Allied Nurses of the First World War* (2014) studies the myths and narratives surrounding First World War nurses, grouping together the volunteer and professional nurses of Britain, Canada, Australia, New Zealand, the United States, and France.<sup>9</sup> Studying the characteristics of other allied nursing services allows for a deeper understanding of the details which made the CAMC nurses so unique, and often contested, among their peers. The largest volunteer service, the Volunteer Aid Detachment (VAD) is examined by Linda J. Quiney in *This Small Army of Women: Canadian Volunteer Nurses and the First World War* (2017).<sup>10</sup> Though it does not focus on CAMC nurses, it provides an example for the study of a wartime nursing service, and situates Canadian nurses within the history First World War military nursing.

Another lens through which the CAMC nurses have been studied is through individual biographies similar to Cynthia Toman's article focusing on Emeline Robinson, discussed above. Another piece centered on a single nursing sister is "Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18", written by Meryn Stuart, and published as a chapter in *Place and Practice in Canadian Nursing* in 2008.<sup>11</sup> Stuart examines the letters and diaries of nursing sister Helen Fowlds to "confront questions of the *constructed nature of experience* and how subjects (such as female nurses) constituted themselves in the context of war."<sup>12</sup> Another source focusing on an individual nurse is Susan Mann's 2005 biography of the CAMC Matron-in-Chief *Margaret Macdonald: Imperial Daughter*.<sup>13</sup> This

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<sup>9</sup> Christine E. Hallett, *Veiled Warriors: Allied Nurses of the First World War* (Oxford: Oxford University Press, 2014).

<sup>10</sup> Linda J. Quiney, *This Small Army of Women: Canadian Volunteer Nurses and the First World War* (Vancouver: UBC Press, 2017).

<sup>11</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016).

<sup>12</sup> *Ibid*, 25.

<sup>13</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005).

format highlights the pivotal nature of the First World War was on the life of an individual nurse. In writing about the Matron-in-Chief, Mann also brings to the surface the significance of the CAMC nursing service as a woman-run, all-female branch of the Canadian military, in contrast to the all-male battalions.

This thesis draws inspiration from these sources and their methodological approaches to uncover previously unheard stories and perspectives of those who served as nurses in the CAMC during the First World War. Building from sources which focus either on the nursing service or on individual nurses, this analysis constructs a balance between the two perspectives – seeing the nurses both as individuals, and as part of a collective.

## **Methodology**

This exploration of Canada's nursing sisters draws from primary sources held at various archives in Canada, including archival information such as personal memoirs, historical newspapers, military records, and material culture such as nurses' uniforms and a series of autograph books, created in military hospitals with contributions by the soldier-patients, held at various archives in Canada. Further access to digital collections from the Canadian War Museum (CWM), include detailed images of a full CAMC nursing uniform, once worn by nursing sister Alma Florence Finnie.<sup>14</sup> Finnie was from Bailieboro, Ontario, and her fonds at the CWM includes a Working Dress and Full Dress uniform, along with badges, a belt, and buttons.<sup>15</sup> Alongside Finnie's uniforms the CWM collections include multiple veils, an important part of the nursing uniform.

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<sup>14</sup> "Work Dress Blouse" 20000105-086. Fonds of Nursing Sister Alma Florence Finnie. 1914-1919. Personal Artifacts, Dress and Insignia Department. Canadian War Museum (Ottawa, Ontario).

<sup>15</sup> Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 30900-3. Item 391039. Finnie, Alma Florence.

This collection offers comparison between individual veils and garments, identifying the opportunities nurses had to individualize their uniforms as expressions of their identity. This research is strengthened by a close-read analysis of a Full Dress blouse, Working Dress blouse, cape, and veil held at the Army Museum in Halifax, Nova Scotia.<sup>16</sup> The diaries of nursing sister Helen Jones and the autograph book of Emma Walters were examined at the Nova Scotia Archives. Additional autograph books were accessed through the CWM collections, and the Beaton Institute Archives. The ability to consult these archives and view these sources both digitally and in-person allowed for the use of a methodology grounded in material culture studies.

This research took inspiration from the recent 2021 publication *Material Traces of War: Stories of Canadian Women and Conflict, 1914-1945* and how authors Stacey Barker, Krista Cooke, and Molly McCullough combine a wide variety of historical objects into a cohesive presentation of women's contributions to the war effort.<sup>17</sup> Their thematic structure, and material culture methodology, are a guide for how I organized the sources examined throughout this thesis.

The field of material culture is a rich resource which lends itself to multidisciplinary approaches and takes into account many elements of an object including the physical materials, construction, and process of consumption.<sup>18</sup> In my analyses of these primary sources, I follow on

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<sup>16</sup> Tunic, 1914-1918, UGM/81/018/C5b. Cotton, Metal. The Army Museum (Halifax: Nova Scotia); Tunic, 1914-1918, UGM/81/018/C5a. Wool, Metal, Paper. The Army Museum (Halifax, NS); Cape, 1914-1918, UGO/81/025/C5. Manufactured by James Shoolbred & Co. Wool, Silk, Metal. The Army Museum (Halifax, NS).

<sup>17</sup> Stacey Barker, Krista Cooke and Molly McCullough, *Material Traces of War: Stories of Canadian Women and Conflict, 1914-1945* (Ottawa: Canadian Museum of History and University of Ottawa Press, 2021).

<sup>18</sup> Henry Glassie, *Material Culture* (Bloomington: Indiana University Press, 1999), 46.

from the work of material culture scholars such as Henry Glassie, who describes the material culture methodology as a study, “beginning necessarily with things, but not ending with them; the study of material culture uses objects to approach human thought and action.”<sup>19</sup> This sentiment is echoed by Giorgio Riello in *Things that Shape History: Material Culture and Historical Narratives* (2009), where Riello explains that object-based analyses are not designed to provide answers, but are tools for asking better questions.<sup>20</sup> In the case of a pictorial object such as the illustrations drawn by patients in CAMC nurses’ autograph books, different questions must be addressed. Chris Jenks discusses on the unique nature of visual sources, in the 1995 publication *Visual Culture*, where he breaks down the importance of understanding selection processes the artist both consciously and unconsciously undertakes in choosing which elements to include, or not include, in their depictions of life.<sup>21</sup> Jenks states that it is “critical that vision should be realigned with interpretations rather than with mere perception.”<sup>22</sup> The writings of these material and visual culture scholars created a foundation for how this thesis research was conducted, as it began with two objects – the Bluebird uniform and nurses’ autograph books – and worked outwardly into the larger histories of CAMC nurses, military nursing, and Canadian women during the First World War.

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<sup>19</sup> Henry Glassie, *Material Culture* (Bloomington: Indiana University Press, 1999), 41.

<sup>20</sup> Giorgio Riello, “Things that Shape History: Material Culture and Historical Narratives”, in *History and Material Culture: A Student’s Guide to Approaching Alternative Sources*, ed. Karen Harvey (New York: Routledge, 2009), 29.

<sup>21</sup> Chris Jenks, “The Centrality of the Western Eye in Western Culture: An Introduction”, in *Visual Culture*, ed. Chris Jenks (New York: Routledge, 1995), 8.

<sup>22</sup> *Ibid*, 4.

## Chapter Outline

Chapter Two introduces the CAMC nursing service and nursing sisters during the First World War, serving as a historical background for the material culture analyses of chapters three and four. The First World War saw the CAMC nursing service expand from five permanent nurses before the war, to just under three thousand members by 1918.<sup>23</sup> The nursing service was the only female branch of the Canadian military and when Margaret Macdonald was appointed Matron-in-Chief in 1914, it became the only female-run operation as well. The *Instructions for Members of Canadian Army Medical Corps Nursing Service (When Mobilized)* were established by Margaret Macdonald.<sup>24</sup> The nurses were paid the same as men with the same rank – that of Lieutenant Officer.<sup>25</sup> Their necessary contribution to the Canadian war effort was revered and recognised in both title and compensation.

This chapter explores other elements of military nursing, such as the social lives of hospital staff and relationships between nursing sisters. In introducing some of the women whose works are cited throughout this thesis, chapter two not only studies the CAMC nurses as part of a collective unit but also for their individuality. Memoirs, letters, diaries, and other primary source material provides first-hand accounts to the nursing experience.

Chapter three interrogates the Canadian Army Medical Corps' uniform as material culture. This Bluebird uniform came to symbolise the legacy of the nursing profession and the

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<sup>23</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 73.

<sup>24</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, (Ottawa, ON); Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005).

<sup>25</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 17.

ways military nursing became a symbol in Canadian historical memory. The chapter begins with a detailed breakdown of the required uniform pieces, and a close-up analysis of surviving blouses, a cape, and a veil, from the Army Museum collections in Halifax, Nova Scotia. Further research was possible through the Canadian War Museum collections, including a full Working Dress uniform and veils. A close study of the textiles from which these uniforms were made illustrates how these garments were designed for both symbolism and practicality. Studying the construction of the veils uncovers new perspectives, which complicate the portrayal of veiled nurses as meek and nun-like. This chapter recontextualizes the veils as singular garments, linking the veils to home and country: each veil represents the handiwork of either the nurse or a family member at home and serves as a symbol of its wearer's identity. These extant uniforms and veils reveal how the uniform was not designed solely for practicality, but also as a decorative piece designed to be on display.

Following the detailed study of the uniform itself, Chapter Three considers how the uniform informed the opinions and judgments of onlookers about the collective and individual identities of CAMC nursing sisters. When the CAMC uniform was criticized by British nursing sisters, the Bluebirds defended themselves by showing pride in their uniform and appearance. The Canadian public came to recognize the Bluebird uniform as a national symbol of Canada's military involvement overseas and at home. Moreover, this chapter is concerned the meanings attached to the uniform, and how the uniform shaped the nurses' experiences. The nurses were required to remain in uniform in almost all circumstances and were therefore unable to separate themselves from the identities displayed upon their dress. The uniform influenced how the nurses were perceived, and in turn how they perceived themselves.



The final chapter of this thesis explores the nurse-patient relationship through an analysis of autograph books kept by CAMC nursing sisters and held by the Canadian War Museum, the Beaton Institute Archives, and the Nova Scotia Archives. Nurse-patient relationships were an essential part of military medical care. CAMC regulations over personal interactions were directly influenced by Matron-in-Chief Margaret Macdonald, who through her own experiences understood the complexities of wartime nursing. Despite restrictions on gift-giving and casual interactions between nurses and patients, autograph books were common practice, as is reflected in the many surviving copies, carefully preserved by nursing sisters after the war.

The nurse-patient relationship was complex, and deeply personal: many nurses viewed patients as their Canadian brothers. CAMC nurses developed personal relationships with many of the men they cared for, viewing the patients as brothers related to them through a sense of regional and national identity. Conversely, the patients viewed the nurses as potential sexual or romantic partners rather than medical professionals, and are represented through patient's illustrations depicting CAMC nurses and the corresponding messages, inscribed in their autograph books. Though the groups interpreted the relationship differently, both nurses and patients were impacted by the intimate nature of wartime nursing. This intimacy was judged by outsiders, such as CAMC officers who were concerned by the gender dynamics. British nursing sisters deemed the relationship unnecessary and unprofessional in their criticism of Canadian nursing practices. The Canadian public romanticised the relationship and exploited it within national wartime media. Despite outside opinions and criticisms, the nurse-patient relationship was personal and private. The autograph books examined in chapter four provide an intimate glimpse into these personal histories.

## **Conclusion**

This thesis contributes to the literature on allied military nursing and the First World War, and the CAMC nursing sisters. Through the consideration of often overlooked daily experiences, this research will add to the greater history of Canadian military medical care. Researching how nurses were perceived by onlookers, including superior officers, British nursing sisters, and the Canadian public, reveals how nurses interacted with their wartime environment and reacted to other's opinions. This study recoups the experiences of individual nurses within the collective CAMC nursing service.

Military nurses are often grouped beneath an overreaching identity of women in wartime histories. Military nurses during the First World War had complex identities and relationships to one another, with divisions based on rank, professional training, and home country. The CAMC nursing sisters were included in the archetype of the merciful, gentle, and feminine nurses which was projected upon all allied military nurses. This investigation of the uniform and autograph books uncovers identities and experiences unique to the nurses of the Canadian Army Medical Corps. The uniform offers a study in group identity, and the autograph books return the focus to individual and intimate personal relationships. The Bluebirds were defined by their appearances, and set apart by military personal and the public from other national nursing units. Through their personal effects, this thesis will bring to light their personal experiences and contributions to Canada's war effort.

## CHAPTER TWO

### The Canadian Army Medical Corps Nursing Service, 1914-1918

#### Introduction

The nurses serving with the Canadian Army Medical Corps (CAMC) during the First World War set new precedents in the Canadian military and within the professional field of military nursing. The First World War was the first large-scale mobilization of Canadian military nurses, with the number of nurses and hospitals growing far larger than the CAMC had originally planned for.<sup>1</sup> This chapter discusses the history of the CAMC nursing sisters, the members' interactions with each other, and the wartime environment in which they lived and worked. Furthermore, this chapter introduces the nurses whose memoirs, letters, and diaries are explored in the following chapters. Six nurses - Gass, Loggie, Fowlds, Wilkinson, Clint, and Jones - are introduced along with the texts through which they documented their wartime experiences. Through personal writings, associated with these six nurses and many others, this thesis recoups the perspectives and experiences of CAMC nurses between 1914 and 1918.

#### Nursing in the Canadian Army Medical Corps

The nurses serving with the CAMC during the First World War set new precedents as professional nurses, Canadians, and women in active military service. When the First World War began, there were five permanent nursing sisters in the CAMC.<sup>2</sup> By the end of 1914, almost one

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<sup>1</sup> G.W.L Nicholson, *Canada's Nursing Sisters* (Toronto: Samuel Stevens Hakkert & Company, 1975).

<sup>2</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 73.

thousand Canadian nurses had applied for a CAMC position and, by the end of 1918, there were almost three thousand active nursing sisters.<sup>3</sup> There was evidently something drawing the women into service. Mabel B. Clint recorded her experiences in a 1936 memoir titled *Our Bit: Memories of War Service by a Canadian Nursing Sister*. In her explanation for the high number of applications, she explained, “like the men the lure of adventure was uppermost in the minds of some, experience and mass-action appealed to others, but we like to think that most of those who responded immediately to the call were awaiting a chance to serve.”<sup>4</sup>

The CAMC offered the nurses a unique position in the military, as the women were given the rank of lieutenant and received “pay equal to that of men of the same rank, equal privileges, and specific expectations related to dress and comportment.”<sup>5</sup> The rank of lieutenant was commissioned by the King and included in the grouping of commissioned officer rankings.<sup>6</sup> The commissioned title would have ranked nurses above many of their patients, though there was a level of separation between soldiers’ with non-commissioned ranks and commissioned officers, as the later was not achieved by moving up the ranks. Other members of the Canadian military and nurses in other commonwealth medical corps criticized the notion that women could be commissioned officers. The status held by commissioned Canadian nurses led to resentment from women serving in the British Army Medical Corps or Voluntary Aid Detachments, who were not granted equivalent ranks within their own services. The opening lines of the

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<sup>3</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 74.

<sup>4</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 5.

<sup>5</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 17.

<sup>6</sup> Michael O’Leary, “Researching Canadian Soldiers of the First World War”, *The Regimental Rogue*, [http://www.regimentalrogue.com/misc/researching\\_first\\_world\\_war\\_soldiers\\_part11.htm](http://www.regimentalrogue.com/misc/researching_first_world_war_soldiers_part11.htm)

*Instructions for Members of Canadian Army Medical Corps Nursing Service (When Mobilized)*

states,

sisters are to be regarded as having authority in and about Military Hospitals next after the officers of the C.A.M Corps and are at all times to be obeyed accordingly, and to receive the respect due to their position.<sup>7</sup>

The title of Lieutenant allowed for independence and authority “in and about Military Hospitals,” though their authority as Lieutenants did not extend to non-medical military affairs.”<sup>8</sup> Enlisting and commissioning nurses was a strategic decision by the Canadian military “in order to have control, not only over [nurses] behaviour and activities ... but also over their movements and postings.”<sup>9</sup>

Matron-in-Chief Margaret Macdonald was one of Canada’s first military nurses and was a formative figure in the creation of Canada’s military nursing service. A biography of Margaret Macdonald, *Margaret Macdonald: Imperial Daughter* (2005). Born in Bailys Brook, Nova Scotia, Mann labels Macdonald an “Imperial Daughter” for her loyalty and pride towards the British Empire. Her first military nursing experience was with the United States, when she served in the Spanish-American War in 1898. This experience evidently made her attractive to the Canadian military, who were searching for nurses to serve in South Africa. In January 1900, she was enlisted with the Canadian Army Medical Corps and travelled to South Africa alongside

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<sup>7</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, *Library and Archives Canada*, (Ottawa, ON).

<sup>8</sup> Genevieve Allard, “Caregiving on the Front: The Experiences of Canadian Military Nurses During World War I” in *On All Frontiers: Four Centuries of Canadian Nursing*, Christina Bates, Dianne Dodd and Nicole Rousseau (Ottawa: University of Ottawa Press, 2005), accessed through Library and Archives Canada, nlc-11250.

<sup>9</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 16.

three other nursing sisters.<sup>10</sup> Prior to 1899, the Canadian military had no official nursing service.<sup>11</sup> When the CAMC was established in July 1904, it included both a permanent and reserve nursing service.<sup>12</sup> In response to the success of Canadian nurses in the South African war, five permanent nurses were enlisted to work in Canadian military hospitals. Twenty-five non-permanent nurses were also kept on reserve.<sup>13</sup> Margaret Macdonald was one of the five permanent nurses.<sup>14</sup> As one of the first women to enter the Canadian military, Macdonald was a key force in the establishment of gendered divisions and roles in the CAMC.

By 1914, Margaret Macdonald had established “security, status, and power” for herself in the Canadian military, leading to her appointment as matron-in-chief.<sup>15</sup> When the role was created Macdonald became the first woman to hold the rank of Major within the British Empire.<sup>16</sup> Susan Mann discusses the First World War as a pivotal moment in Macdonald’s life, both professionally and personally. Macdonald was an obvious choice for Matron-in-Chief, though she was unsure what the role would entail: she feared being confined to an office and experiencing the war from a distance. The appointment to Matron-in-Chief meant that Macdonald “stopped nursing and began working primarily with women”, which Susan Mann describes as an unexpected honour and challenge.<sup>17</sup> There were many financial decisions and logistical concerns awaiting Macdonald when she took office. Macdonald was stationed in

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<sup>10</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 32-37.

<sup>11</sup> Gerald W.L Nicholson, *Canada’s Nursing Sisters* (Toronto: Samuel Stevens Harkkert & Company, 1975), 33.

<sup>12</sup> *Ibid*, 44.

<sup>13</sup> *Ibid*, 44.

<sup>14</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 73.

<sup>15</sup> *Ibid*, 61.

<sup>16</sup> *Ibid*, 73.

<sup>17</sup> *Ibid*, 73.

Ottawa while she made the initial arrangements for training. Susan Mann writes that Macdonald was “quite prepared to stay in Ottawa ... throughout the war as the Director General Medical Services (DGMS) had originally intended for her. But she must have been thrilled when Colonel Jones changed his mind and added her name to those selected for overseas service.”<sup>18</sup> After selecting the nurses from her office in Ottawa, Macdonald joined them for training at Valcartier military base in Quebec. Shortly afterwards she sailed alongside them to her wartime office in London, England.

One of Margaret Macdonald’s first duties as matron-in-chief was to personally select approximately one hundred nurses out of almost one thousand applicants, based certain requirements: each had to be a British subject, a nursing school graduate, in good health, between the ages of twenty-one and thirty-eight, and unmarried.<sup>19</sup> Macdonald’s decisions when selecting nursing were based on her own discretion and experience. She treated the marriage regulations with more nuance than the official policy allowed for, for example, as the official CAMC marriage policy was a reminder of the gendered restrictions on CAMC nurses. Once the CAMC was made aware of marriages, they were quick to enforce their gendered policies. While serving in Europe it was discovered that nursing sister Beatrice Louise Armitage had been married before departing Canada. She was discharged from service and sent home, where she collected a military pension from her husband Captain Howard Dixon; Dixon’s military career was in no way impacted by the marriage.<sup>20</sup> Once the CAMC was made aware of marriages, they were quick to enforce their policies. Cynthia Toman points out in *Sister Soldiers of The Great*

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<sup>18</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 76.

<sup>19</sup> *Ibid.*, 74.

<sup>20</sup> Ruth Loggie, “Personal Diary” in *A Canadian Nurse in The Great War: The Diaries of Ruth Loggie, 1915-1916*. Ed. Ross Hebb (Halifax: Nimbus Publishing Limited, 2021), 105.

*War*, however, that “the records contain much evidence that many [nurses] were actually married or married after enlistment.”<sup>21</sup>

By 1917, Macdonald decided that the CAMC marriage policy needed updating. It seems that Margaret saw no issue with engagements and relationships but was concerned about the logistical complications of marriage. Macdonald had an ever long list of applications, unlike the Queen Alexandria’s Imperial Military Nursing Service (QAIMNS) who were constantly short on nurses and could not afford to send theirs home whether they were married or not. Macdonald was concerned that nurses would adopt the expensive practice of being trained, sent overseas, fitted into uniforms, and then quickly marrying and resigning. Rather than banning all marriages, the new 1917 regulations included a clause that any nurse who married before one year of service would lose all post-war gratuities.<sup>22</sup>

Macdonald’s interest in the personal relationships of her nurses was reflective of her “ear to the ground” approach as a Matron-in-Chief.<sup>23</sup> Though she was no longer nursing patients directly, she was actively involved in the practical details of CAMC nursing. Margaret Macdonald’s leadership was anchored in personal relationships with the nursing sisters. The varying demands of hospitals was one of the logistical challenges Macdonald encountered. Working and living conditions differed greatly between a general hospital forty miles from front lines, and a casualty clearing station positioned within miles of active combat. By 1918, Macdonald oversaw sixteen hospitals in England alone, in addition to CAMC nurses serving in France and the Mediterranean. The question of where to assign nurses was informed by the

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<sup>21</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 50.

<sup>22</sup> *Ibid.*, 134.

<sup>23</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 90-96.



nurses' experience, interests, skills, and health. If a nurse was experiencing fatigue, or recovering from illness, Macdonald could move them away from the front lines to a light-duty role in England. Staying up to date on the nurses was no easy task, and one way Macdonald kept in contact was through personal meetings. She established the requirement that every nurse stopped into her office while passing through London, on their way to active duty.<sup>24</sup> This ensured that Macdonald had a personal introduction to each nurse before their service began. She was admired by the nursing sisters, and her presence at events and during hospital visits is recorded as an honourable occasion in nurses' diaries.

Margaret Macdonald carefully selected the first contingent of nurses and joined them for training at Valcartier military camp.<sup>25</sup> Macdonald sent out the mobilization order on September 16, 1914, calling the nurses to assemble for training. Amongst the highly select first cohort, Susan Mann points out there were of nurses from almost every province, and Mann believes this to be a strategic and political decision on Macdonald's part.<sup>26</sup> Macdonald was working to find balance in the group between the nurses' home provinces, ages, and personalities. While the selected nurses made their way to Quebec, Macdonald's next challenge was to prepare everything for their arrival including lodgings, vaccinations, and uniforms. After this first contingent, Macdonald moved her office to London, England. The systems for training in Canada had been established, and she was able to leave them in the hands of the Canadian Expeditionary Force (CEF). By 1915, it was clear that more nurses were needed, and Macdonald

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<sup>24</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 96.

<sup>25</sup> G.W.L. Nicholson, *Canada's Nursing Sisters* (Toronto: Samuel Stevens Hakkert & Company, 1975), 53.

<sup>26</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 74-75.

was never short on applications.<sup>27</sup> The training was divided between Montreal, Ottawa, and Halifax, depending on where and when a nurse enlisted.<sup>28</sup> As the war continued, nurses were assigned to and trained with a specific hospital before leaving Canada. The first one hundred nurses were divided between two stationary hospitals and two general hospitals after their arrival in England. Throughout the war another nine stationary hospitals, and fourteen general hospitals, were established and staffed by CAMC nurses.<sup>29</sup>

### **Social Lives of CAMC Nurses**

#### *In The Nursing Service*

CAMC nurses took advantage of social events and interactions as a distraction from their wartime environment. Off-duty activities became a key element of nurses' daily lives. Beginning with the voyage overseas, social events provided entertainment and opportunities to build personal connections. Concerts, plays, and card games are the activities most referred to in nurses' diaries from the period. Some women briefly mention the events while others provided detail in their efforts to preserve the memories. While sailing back to England, after a leave in Canada, Helen Jones recorded the entertainments she observed and participated in.<sup>30</sup> She enjoyed dancing and cards on multiple occasions, and on April 19, 1918, she wrote, "Had a jolly little

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<sup>27</sup> Linda J. Quiney, *This Small Army of Women: Canadian Volunteer Nurses and the First World War* (Vancouver: UBC Press, 2017).

<sup>28</sup> Gerald W.L. Nicholson, *Canada's Nursing Sisters* (Toronto: Samuel Stevens Harkkert & Company, 1975).

<sup>29</sup> Library and Archives Canada, Guide to Sources Relating to Units of the Canadian Expeditionary Force, "Canadian Army Medical Corps". <https://www.bac-lac.gc.ca/eng/discover/military-heritage/first-world-war/Documents/canadian%20army%20medical%20corps.pdf>

<sup>30</sup> Helen Jones, "Diary – Isabel Ridd Jones and Helen Lorna Jones". 2015-030/003-05. Jones, Roome, Van Allen Family Fonds. 1918. *Nova Scotia Archives* (Halifax, Nova Scotia).

dance tonight in the lounge. Ten sisters and almost fifty young officers.”<sup>31</sup> On April 22, 1918, she writes “This morning the nursing-sisters practiced the tableaux for tonight’s concert, also after tea – a rehearsal. The concert was a great success ...”<sup>32</sup> Jones transcribed every detail of the four tableaux they performed.

Such planned and practiced events were not the only social gatherings. More casual activities occurred during off-duty hours. Helen Jones frequently recorded evening card games in the evening after her dayshifts and began taking singing lessons in 1918.<sup>33</sup> Clare Gass and Ruth Loggie frequently went on bicycle rides together and many nurses took up tennis as an opportunity for physical activity and social interaction. Card games, tennis matches, concerts, and dances were also planned by the CAMC as formal events. Alongside their professional relationships, and heavy workloads, the nurses were given many opportunities to interact in more casual and personal situations.

While living and working together, the creation of friend-groups and personal relationships provided comfort to the nursing sisters. Some relationships were influenced by pre-war factors, such as the locations where women received their medical training. Maude Wilkinson’s memoirs refer to her “clan” of friends, who called themselves “The Odds and Ends.” She describes their bond as rooted in their medical training, which they received in America.<sup>34</sup> The friend-group consisted of four women, who enlisted with the second nursing

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<sup>31</sup> Helen Jones, Diary Entry, April 19, 1918. “Diary – Isabel Ridd Jones and Helen Lorna Jones.” 2015-030/003-05. Jones, Roome, Van Allen Family Fonds. 1918. *Nova Scotia Archives* (Halifax, NS).

<sup>32</sup> Helen Jones, Diary Entry, April 22, 1918.

<sup>33</sup> Helen Jones, Diary Entry. September 7, 1918.

<sup>34</sup> Maude was trained in the NYC, and another member in Baltimore, Maryland. The locations of the others’ studies are not provided. Maude Wilkinson, “Four Score And Ten,” *The Canadian Nurse* (October 1977).

cohort in 1915. They shared a cabin on their voyage across the Atlantic, and were transferred to Salonika together where they were “tentmates.” Their friendship was influenced by pre-war conditions, established during training, and remained strong throughout and after the war. Another set of “tentmates” whose friendship pre-dated the war were Ruth Loggie and Clare Gass. The strength of their bond is evident throughout both of their diaries. Even when separated, through leaves or assignment to different hospitals, they remained in constant contact through letters and mutual acquaintances. When stationed together at the No. 1 Canadian General Hospital, both Gass and Loggie were frustrated with the hospital’s management. During this time the pair went on walks and bike rides almost daily, to escape the hospital environment.<sup>35</sup> Their friendship was a constant comfort to both women, and they showed their affection through gift-giving, and through taking care of one another.

Just as relationships had begun pre-war, many developed during service remained strong long after the war had ended. Nursing sisters Murney Pugh and Ellanore Parker, who met while serving with the CAMC, lived together for the rest of their lives, and are now commemorated with a shared headstone. In *Material Traces of War: Stories of Canadian Women and Conflict, 1914-1945*, the authors state that “it is far more likely that theirs was a love story.”<sup>36</sup> As seen through their shared headstone, which proudly displays “CAMC World War I” under both names, Pugh and Parker’s shared military nursing experiences continued to influence their lives long after the war.

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<sup>35</sup> Ruth Loggie, Diary entry, June 10, 1915.

<sup>36</sup> Stacey Barker, Krista Cooke and Molly McCullough, *Material Traces of War: Stories of Canadian Women and Conflict, 1914-1945* (Ottawa: Canadian Museum of History and University of Ottawa Press, 2021), 24.

Being together endlessly at work and home, both strengthened and tested the relationships between the nursing sisters. Clare Gass and Ruth Loggie shared a living space in Etaples and worked together to make it feel like home. On August 30, 1916, Gass recorded that “Ruth brushed my hair this morning while I read sitting in the sunshine at my tent door.”<sup>37</sup> Not everyone found the same harmony as Gass and Loggie, however. Helen Fowlds noted several examples of social conflict, such as when she was separated from her friend group and sent to a hospital, which she described to her mother:

Rather ghastly here at times. We have some awful fools along with us, and many times daily I'd love to kill them. All the girls we know are down at the Sussex, and Boulton and I nearly die here. I never thought women could be such d- fools. We have been so much with women lately that we are 'fed up' I think.<sup>38</sup>

A few weeks later, Fowlds reports that the No. 1 Clearing Hospital had “the most splendid lot of girls”. Despite the more positive social climate, there are still frustrations when Fowlds could not find a quiet space in the living quarters. In one letter from April, 1915, she tells her mother that “I am sitting by the stove now – and all the others ... are talking to beat everything in the other tent, and it is rather distracting.”<sup>39</sup>

### *Social Life Outside the CAMC*

Throughout the war, nursing sisters were offered many social invitations and enjoyed access to exclusive circles in British high society. When the first cohort arrived in London, British

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<sup>37</sup> Clare Gass, Diary Entry. August 30, 1916. Published in *The War Diary of Clare Gass*, ed. Susan Mann (Montreal: McGill Queens University Press, 2004).

<sup>38</sup> Helen Fowlds, Letter to Mother. April 9<sup>th</sup> 1915. 1915 Letter 14. Helen Fowlds. “Personal Correspondence,” 69-001 Series 1. Helen Marryat Fonds. *Trent University Archives* (Peterborough, ON).

<sup>39</sup> Helen Fowlds, Letter to Mother. April 24, 1915. 1915 Letter 15.

aristocracy and military officials wanted to show their support for the nurses, and Mabel Clint describes how “Invitations poured in upon us; visits to hospitals, Windsor Castle, Harrow school, private receptions, war lectures, etc. and theatre tickets were sent several times a week.”<sup>40</sup> Margaret Macdonald, herself the highest-ranking woman in active military duty in the British Empire and daughter of a notable Canadian family, worked to arrange opportunities for her nurses to engage with British aristocracy.<sup>41</sup> On several occasions, CAMC nurses were invited to meet with members of the royal family. Maude Wilkinson was invited along with a group of patients after they took a sightseeing trip to Windsor Castle while King George V and Queen Mary were present. They were unexpectedly invited into a state room, where the King and Queen “shook hands with all of the men and asked them about their service.”<sup>42</sup> On more formal occasions, such as those attended by Helen Fowlds and Irene Beyer, the nurses were invited to Buckingham Palace to receive military awards and recognition. Both women saved their telegrams from the palace among their wartime souvenirs. Fowlds wrote home about this 1917 trip to London saying that “you see Mother I’ll be moving in quite respectable circles for the next little while and I do hope you are ‘awfully bucked’ as the English say.”<sup>43</sup>

While on leave, nurses had the freedom to choose where, and with whom, they spent their time. Leaves ranged from a single day to two weeks. There were still regulations by the CAMC over the nurses’ behavior, as they were still representing the nursing service. Throughout the war nurses took their leaves in locations including England, Scotland, France, Greece, and Canada.

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<sup>40</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 17.

<sup>41</sup> Susan Mann, “Matron-in-Chief,” in *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 73-112.

<sup>42</sup> Maude Wilkinson, “Four Score and Ten”, *The Canadian Nurse* (November 1977): 22.

<sup>43</sup> Helen Fowlds, Letter to Mother. February 25, 1917. 1917 Letter 2.

Leaves were often taken with fellow nursing sisters, offering opportunities for friendships to blossom in casual social settings. At the same time, leaves were an opportunity to leave the CAMC social bubble and connect with friends and family. Nurses with brothers serving in the CEF coordinated leaves with their siblings and were often assisted by sympathetic CAMC officials. Though leaves were a chance to rest from work, they were often packed with physical activity, social visits, and sightseeing. During a day-leave on 22 May, 1918, Helen Jones took the train into London. She visited a bank and department store before having lunch, followed by more shopping. She then bussed to visit a friend's house in the evening. Afterwards she met with friends and saw a film. On her way back to the hospital "Cl. Mallack was on same train so [she] had company."<sup>44</sup> Jones managed to see multiple friends and visit multiple sites between 8:30 a.m. and 11 p.m in a single day. The following morning, she was back working and taking inventory of two wards.<sup>45</sup> The day was as active and social as Jones could possibly handle, despite her heavy workload back at the hospital. This was a common practice for Jones, suggesting that she found a day of social interaction to be more rejuvenating than a day of rest.

## **Identities of CAMC Nurses**

### *As Professional Nurses*

CAMC nurses were set apart from other voluntary nursing services, including the Voluntary Aid Detachment (VAD), Red Cross, and Queen Alexandria's Imperial Military Nursing Service (QAIMS). Matron-in-Chief Margaret Macdonald was protective of this prestigious identity and worked to ensure CAMC nurses received respect and recognition for their professional training.

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<sup>44</sup> Helen Jones, Diary Entry. May 22, 1918.

<sup>45</sup> Helen Jones, Diary Entry. May 23, 1918.

Macdonald received constant requests from Canadian women without nursing training wanting to join the war effort and serve as nurses. These volunteers were directed to the VAD or Red Cross. Without qualifications from a recognized nursing school, they could not be considered for the CAMC. Macdonald was not only selective about who could enlist with the CAMC nursing service, but who could serve alongside them in Canadian hospitals. Canadian VADs were serving in British hospitals and military authorities suggested that Macdonald utilize the volunteer nurses in her hospitals. VAD nurses had been working mostly in convalescent hospitals to that point, and not in close proximity to the frontlines. Linda J Quiney describes Margaret Macdonald's skeptical reaction to VAD nurses in the 2017 book *This Small Army of Women: Canadian Volunteer Nurses and the First World War*. Quiney details how Margaret Macdonald feared the volunteer nurses might undermine the professional status of her CAMC nurses. Without equal rank and training, Macdonald worried that the VADs would disrupt the professionalism and efficiency of the hospitals she commanded.<sup>46</sup>

Nursing sisters understood the importance of their collective reputation and were frustrated by attempts to question or undermine their professional identity. Throughout memoirs, diaries, and letters, nurses emphasized the prestige of the CAMC uniform and rank. They took pride in their appearance and the authority it projected. They worked hard to maintain their collective identity as medical professionals. Ruth Loggie was frustrated during her first few weeks overseas because she felt the McGill Unit operations were less-than satisfactory and therefore a threat to the CAMC reputation. She calls the hospital's management "a disgrace to Canada" – writing that "if Canadians knew the manner of the in-charge people they are paying

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<sup>46</sup> Linda J. Quiney, *This Small Army of Women: Canadian Volunteer Nurses and the First World War* (Vancouver: UBC Press, 2017), 40.



here, they would never stand for it.”<sup>47</sup> When British nursing sisters criticized the Canadian nursing style, the consensus acknowledged by CAMC sisters was that the other women were simply jealous. This response to criticism displays confidence in their own training and abilities. While serving at the No. 1 Canadian Stationary Hospital, Helen Fowlds wrote to her mother about the complicated relationship between the Canadian and British nursing sisters. The elevated status of the professional nurses challenged contemporary gender norms, and Fowlds writes that “of course the anti-suffragist element resent the fact that we wear two stars and rank as officers.”<sup>48</sup> In response to criticism of their rank, she writes that “this is the first time in history military nursing has been tried out on a large scale and there is bound to be criticism, especially from the women who are not trained nurses...”<sup>49</sup> The nurses understood how unique and contested their identity was, and were protective over their collective reputation.

### *As Canadians*

While serving alongside other Commonwealth medical services, and caring for men from around the world, the reputations and identities of CAMC nurses were closely tied to their home country. The differences between Canadian and British nursing styles were a frequent subject of conversation, both in daily interactions between nurses and in high-level discussions between the British Matron-in-Chief Maud McCarthy and Margaret Macdonald. Discrepancies in nursing styles and in military rank, influenced the relationships between CAMC and Royal Army Medical Corps (RAMC) nurses. These divisions often manifested themselves through the identification of Canadians as “colonials” rather than British citizens. The CAMC nurses stood

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<sup>47</sup> Ruth Loggie, Diary Entry. June 4, 1915; Ruth Loggie, Diary Entry. June 5, 1915.

<sup>48</sup> Helen Fowlds, Letter to Mother. June 3, 1915. 1915 Letter 22.

<sup>49</sup> Helen Fowlds, Letter to Mother. June 3, 1915. 1915 Letter 22.

firm in their patriotism in the face of judgement and criticism, both for Canada and the British Empire. When British journalist Harold Begbie published a critique of the Canadian nursing sisters in 1915, Helen Fowlds responded with a defense of the Canadians, writing to her mother that “he isolated us strictly, not allowing us to even consider ourselves as British – only beastly colonials ... he has probably regretted his outburst by this time – after having been made to realize that but for the Canadian army the Germans would have been in Calais April 23<sup>rd</sup>.”<sup>50</sup> Fowlds equates Begbie’s statements on the nurses’ as a criticism of the entire Canadian Expeditionary Force CEF. The connection between personal and national identity was clearly seen through Irene “Bessie” Beyer, who was known as “Canada” while serving as a QAIMNS nurse before joining the CAMC. Former patients who wrote to Beyer often opened their letters with “Dear Canada” rather than her own name.<sup>51</sup>

### *In Canada*

The Bluebird nursing sisters became a national symbol of the Canadian war effort, and this elevated status affected the experiences of nurses in Canada. Helen Fowlds experienced the reactions of Canadians first-hand when she went home on leave in 1917. At the end of her leave, she wrote her mother from the troopship docked in Halifax, on October 17, 1917. The nursing sisters discussed their shared experience of feeling like they were on parade for the Canadian public. Fowlds explains,

everyone was all in and spoke bitterly of the people who had insisted on coming in and asking them to address public meetings. They all wanted to sleep, and their families had made them be civil and they were all fed up with the attitude of

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<sup>50</sup> Helen Fowlds, Letter to Mother. June 3, 1915. 1915 Letter 22.

<sup>51</sup> Elizabeth Hirst, *They Called Her Canada: The War Diaries of Nursing Sister Bessie Beyer* (St Catharines: Mayholme Foundation Press, 2015).

Canadians in general anyway and didn't see why they should be made to give up their leave to entertain them. So my experience wasn't unusual.<sup>52</sup>

CAMC nurses were forced to adapt to a new way of existing in public spaces. By the time Helen Fowlds was on leave in 1917, civilians in Europe had been living in close proximity to the war for over three years and would have become accustomed to seeing the nurses. The attention was more potent back in Canada, where the public did not often encounter CAMC nurses. When nurses returned on leave, they may have been the first nursing sister their communities had encountered. The opportunity to see and interact with a nursing sister was a rare and celebrated opportunity. By 1917, the Canadian public had been reading stories and praises of nurses since 1914, and yet the Bluebirds were still surrounded by a sense of mystery.

The Canadian media praised CAMC nurses for their femininity, gentleness, and mercy rather than their professional skills and accomplishments.<sup>53</sup> They were portrayed as merciful women, patriotically caring for vulnerable Canadian men. Newspapers romanticized the relationship between Canadian nurses and Canadian patients, and how the women's patriotism was connected to their own brothers serving alongside them.<sup>54</sup> In 1915, a submission to *The Globe* newspaper read, "it has not been my privilege, like some, to go as a nurse to the battlefield and relieve the suffering of our brave and loyal soldiers, so I am doing what I can at home."<sup>55</sup> The writer focuses on the bravery of the patients, and admires the nurses not for their own work but for whom they are working for. Historian Ruth Pierson discusses how women were viewed

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<sup>52</sup> Helen Fowlds, Letter to Mother. October 17, 1917. 1917 Letter 9.

<sup>53</sup> Canadian Press Dispatch, "Made Hun Take His Own Medicine / Captured German Officer Wanted to be Placed in Dugout / Hospitals Were Bombed / Inspiring Bravery of Canadian Nurses During Recent Outrages" *The Globe* (Toronto: ON), June 18, 1918.

<sup>54</sup> Mona Cleaver [Pen Name Polly Peele] "Canadian Nursing Sister On Leave" *The Globe and Mail* (Toronto, ON), July 23, 1915.

<sup>55</sup> "Relief Work" submission to The Postoffice column. *The Globe and Mail* (Toronto, ON), April 17, 1915.

and, described differently so, than their male counterparts in wartime. Pierson describes the two metaphors “that stereotypically portray women as ‘beautiful souls’ (angels ad heroines) and men as ‘just warriors.’”<sup>56</sup> This praise of CAMC nurses was rooted in contemporary gender norms, which focused on their merciful and maternal nurturing of the Canadian men. Canadians became personally invested in the CAMC nurses because they “expected nurses to watch over the health of their beloved enlisted brothers and cousins and to fly the flag for the Empire and for Canada.”<sup>57</sup>

### **Women of the CAMC Nursing Service**

This section introduces some of the nurses whose memoirs, letters, and diaries are discussed throughout this thesis. It is important to understand the context of their wartime experiences – as officers in the Canadian military, as medical professionals, and as women navigating unprecedented circumstances. These personal stories can fill in the gaps left by top-down approaches to histories of the First World War. In *Evidence, History and the Great War: Historians and the Impact of 1914-1918* (2003), historian Gayle Braybon discusses the need for further “research, which concentrates on small groups, individual lives, the events of a few days or weeks”.<sup>58</sup> Braybon calls for wider timelines which incorporate life before the war, to achieve a “more complex” analysis. When researching experiences of military nurses during the First

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<sup>56</sup> Ruth Roach Pierson, “Beautiful Soul or Just Warrior: Gender and War” *Gender & History* 1, no. 1 (1989).

<sup>57</sup> Meryn Stuart, “Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18” in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008), 28.

<sup>58</sup> Gail Braybon, *Evidence, History, and the Great War: Historians and the Impact of 1914-18* (New York: Bergahn Books, 2003), 21.

World War, a balance is necessary in viewing the CAMC nurses for their collective identities and for their personal identities.

Clare Gass is perhaps the most famous of the Bluebirds in contemporary Canadian histories. Gass recorded her wartime experience in great detail through frequent diary entries. Her diary was transcribed and published by Susan Mann in 2000, which made it accessible to students and scholars. This was one of the first public insights into the wartime writings of a CAMC nursing sister. Gass also kept an autograph book, which is held by a family member. Gass' connection to the poem *In Flanders Fields*, by Lt. Col. John McCrea, has also contributed to her name appearing in Canadian media. McCrea showed Gass a copy of his new poem, and she encouraged him to publish it in *Punch* magazine. She made a personal copy into her diary on October 30, 1915.<sup>59</sup> Gass grew up in Shubenacadie, Nova Scotia, and was the only daughter of seven children. As a child she attended a private school for girls in Windsor, Nova Scotia. She received an education intended to prepare her for marriage, though instead Gass instead pursued a career in nursing, enrolling in the Montreal General Hospital's training school in 1909.<sup>60</sup> Gass signed her CAMC enlistment papers on April 22, 1915. Assigned to McGill's No. 3 Canadian General Hospital, she sailed from Montreal on May 6, 1915.<sup>61</sup> Susan Mann describes how in 1915 "Clare Gass went to war as a patriotic Canadian, a dutiful daughter, a devout Anglican, a

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<sup>59</sup> "In Flanders Fields Poem Published with N.S Nurse's Help" *CBC News Nova Scotia* (Halifax, NS), November 8, 2013.

<https://www.cbc.ca/news/canada/nova-scotia/in-flanders-fields-published-with-n-s-nurse-s-help-1.2419774>

<sup>60</sup> Susan Mann, Introduction to *The War Diary of Clare Gass*. ed. Susan Mann (Montreal: McGill Queens University Press, 2004).

<sup>61</sup> Library and Archives Canada, Guide to Sources Relating to Units of the Canadian Expeditionary Force, "Canadian Army Medical Corps". <https://www.bac-lac.gc.ca/eng/discover/military-heritage/first-world-war/Documents/canadian%20army%20medical%20corps.pdf>

loving sister, a dear friend, an adventurer, a romantic, - and a nurse.”<sup>62</sup> Gass’ diary entries feature a steadfast patriotism that forms the foundation for her interpretations of events occurring around her. She refers to Canadian troops as “Our boys”, and records updates on major Canadian campaigns. Gass’ nursing style was shaped by her faith, patriotism, and personal connection to the war.

Ruth Loggie kept a diary very similar to Gass’, who was a close friend to Loggie before, during, and long after the war. Their lives are so entangled that in some instances, their diaries cannot be understood without also reading the other’s entries. Loggie met Gass while at the Montreal General Hospital, where Loggie was already working as a professional nurse, having graduated from the school two years ahead of Gass.<sup>63</sup> When she signed her attestation papers on April 22, 1915, she was thirty-two years old. Loggie was from New Brunswick, and diaries is held by the *Provincial Archives of New Brunswick*. In 2021 the diaries were transcribed and published by Ross Hebb. Loggie moved to Montreal to pursue her career in nursing – a decision which ultimately shaped her wartime experience after enlisting with McGill’s No 3. Canadian General Hospital. The diary of Ruth Loggie showcases her professionalism and strong sense of pride in her work. She critiques institutions and individuals whose work she feels is less than satisfactory. Considering the risk of her diary being found, Loggie’s honesty and criticism implies that she did not fear her CAMC superiors. She was highly professional, meticulous, and critical of work-related subjects. She was also highly social, empathetic with patients, and a devoted friend.

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<sup>62</sup> Susan Mann, Introduction to *The War Diary of Clare Gass*. ed. Susan Mann (Montreal: McGill Queens University Press, 2004), 1.

<sup>63</sup> Ross Hebb, Introduction to *A Canadian Nurse In The Great War: The Diaries of Ruth Loggie, 1915-1916*. Ed. Ross Hebb (Halifax: Nimbus Publishing Limited, 2021).

Helen Fowlds wrote to her mother consistently throughout the First World War, as well as kept a diary. Upon her death in 1965 the surviving documents - ninety-four letters and three diaries between the years 1915 and 1918 - were bequeathed by Fowlds' family to Trent University Archives.<sup>64</sup> Fowlds was one of the younger nurses in the CAMC, having started her training in 1914 at the age of twenty-five.<sup>65</sup> She enlisted within a year of her graduation from the Grace Hospital nursing school in Toronto.<sup>66</sup> The letters between Fowlds and her mother include detailed descriptions of social life in the CAMC. Meryn Stuart describes Helen Fowlds as “unafraid to express, even to her mother, her pleasure in the numerous social activities in which she took part”, and Stuart focuses on discussions of gender and sexuality.<sup>67</sup> Fowlds was a young woman coming of age in an extraordinary, traumatic, and challenging environment. She faced health challenges throughout the war, but continually returned to her work until demobilization in 1919.<sup>68</sup>

Mabel Clint was thirty-eight years old when she enlisted with the first cohort on September 25, 1914.<sup>69</sup> In her 1934 memoir *Our Bit: Memories of War Service by a Canadian Nursing Sister* she recalls “the fateful telegram: ‘You have been selected as Nursing-Sister for service abroad.

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<sup>64</sup>Meryn Stuart, “Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18” in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008), 29.

<sup>65</sup> Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 839 – 62. Item 402200. Fowlds, Helen Lauder Lander.

<sup>66</sup> Helen Fowlds. “Personal Correspondence”. 69-001 Series 1. Helen Marryat Fonds. *Trent University Archives* (Peterborough, Ontario).

<sup>67</sup> Meryn Stuart, “Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18” in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008), 25-26.

<sup>68</sup> Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 839 – 62. Item 402200. Fowlds, Helen Lauder Lander.

<sup>69</sup> Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 1803A. Item 106113. Clint, Mabel.

You will report to Quebec...”<sup>70</sup> Clint was an established member of the Imperial Order Daughters of the Empire in Canada, and her imperial pride can be read throughout the memoir.<sup>71</sup> When discussing the arrival of Canadians in London, she recalls spectators thanking them for joining the war that she “assured them that thinking Canadians recognized the complete justice of the cause, and that, should Britain suffer defeat, the Empire, the greatest force in the world for good, would break up.”<sup>72</sup> As one of the oldest and most experienced nursing sisters, Clint was able to mentor younger nurses. Helen Fowlds was granted leave in 1915 and was unsure where to visit on her first trip to Scotland. Fowlds wrote to her mother: “Miss Clint is our chief authority on matters of this kind having been over three times and therefore familiar with all this country...”<sup>73</sup> This reported exchange between Fowlds and Clint illustrates the unique social climate in the CAMC, as women learned from and supported one another.

In 1977 Maude Wilkinson published her memoir, *Four Score and Ten* in the Canadian magazine, *The Canadian Nurse*. The memoir was split into two volumes, published in the October and November editions. Wilkinson enlisted with the second cohort of nurses, signing her enlistment papers on April 7, 1915.<sup>74</sup> She was twenty-seven years old when she enrolled in nursing school, studying at Roosevelt Hospital in New York city from 1909 to 1912.<sup>75</sup> At the age of thirty-three in 1915, she was not one of the younger nurses, though she was one of the more

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<sup>70</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 4.

<sup>71</sup> Cynthia Toman, “‘Help Us, Serve England’: First World War Military Nursing and National Identities”, *Canadian Bulletin of Medical History* 30, no. 1 (2013), 147.

<sup>72</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 16.

<sup>73</sup> Helen Fowlds, Letter to Mother. June 29, 1915. 1915 Letter 26.

<sup>74</sup> Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 10370-54. Item 313778, Wilkinson, Maude Ethel.

<sup>75</sup> Maude Wilkinson, “Four Score And Ten”, *The Canadian Nurse* (October 1977), 1.



recent graduates. She was sent overseas with the No. 4 Canadian General Hospital and served in England and Greece. Through stories about night duty, relationships with orderlies, and supply shortages in Salonika, Wilkinson captures the details of military nursing which might be relatable to readership of *The Canadian Nurse*. Wilkinson achieved a balance between professionalism and personality through the stories chosen for her memoir, and clearly took pride in her wartime nursing experience.

Helen Jones kept yearly diaries throughout her military nursing career as both as a British VAD and as a CAMC nursing sister. These diaries are held at the Nova Scotia Archives, along with correspondence and wartime writings from her mother, brother, and husband.<sup>76</sup> Jones received her training through the VAD and was one of the few nurses that Margaret MacDonald allowed to transfer into the CAMC based on her wartime training.<sup>77</sup> Born in New York, Jones lived in Dartmouth, Nova Scotia, before the war, and enlisted with the CAMC on May 26, 1917.<sup>78</sup> Jones was only twenty-two years old when she was accepted by the CAMC. After the Halifax Explosion on December 6, 1917, Jones applied for leave to visit Canada and support her family. The CAMC granted her compassionate leave, and she was able to provide nursing support in Halifax.<sup>79</sup> Jones' diaries focus on social activities and detailed descriptions of her leaves, with less information on work-related subjects. There are long breaks in her writing,

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<sup>76</sup> Helen Jones, "Correspondence, Diary, Photographs of Helen Jones (Mrs. REG Roome)". 2015-030/001-08. Jones, Roome, Van Allen Family Fonds. 1916-1972. Nova Scotia Archives (Halifax, NS).

<sup>77</sup> Helen Jones, "Correspondence, Diary, Photographs of Helen Jones (Mrs. REG Roome)". 2015-030/001-08. Jones, Roome, Van Allen Family Fonds. 1916-1972. Nova Scotia Archives (Halifax, NS).

<sup>78</sup> Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 4940 – 5. Item 339675. Jones, Helen Lorna.

<sup>79</sup> Helen Jones, "Correspondence to and from Helen Jones – Halifax Explosion" 2015-030/001-09. Jones, Roome, Van Allen Family Fonds. 1917-1918. Nova Scotia Archives (Halifax, NS).

typically bookended by two leaves. Having served with two nursing services, and being engaged to be married to a Captain, Helen had many social connections and kept track of those with whom she visited and travelled on her days off. Her detailed descriptions of social activities paint a picture of an extroverted and energetic young woman.

### **Documented Experiences of the CAMC Nurses**

Memoirs, letters, and diaries are three media through which nursing sisters were able to record their wartime experiences, in their own words. Many of these sources have been preserved and are currently accessible through Canadian archives. The wartime sources recorded by nursing sisters, however, have long been overshadowed by the records and recollections of their male counterparts. A handful of these sources have been published, and others donated to Canadian archives, with an unknown quantity still held by the nurses' families in private collections. When reading these personal documents as historical sources, it is important to understand and value the unique benefits and limitations of each medium.

#### *Memoirs*

Memoirs allow the author to reflect on and revise their wartime memories, both purposefully and thanks to the passage of time. Memoirs as a genre are published in a variety of formats, and vary in size, intended audience, and scope. There are only a few memoirs written by CAMC nurses who served in First World War, and not all are published or accessible outside of private collections. Mabel Clint's and Maude Wilkinson's memoirs, published as *Our Bit* and *Four Score and Ten*, are examples of how a memoir's publication impacts the source's analysis as a primary source. The Alumnae Association of The Royal Victoria Hospital published Mabel

Clint's memoir as a book intended for public audiences. Alternatively, Maude Wilkinson's memoir, on the other hand, was published inside *The Canadian Nursing Journal*, where readership was limited to individuals with a connection to nursing. This difference in intended audiences likely explains the difference in scope between the two memoirs, as they are impacted by their intended audiences. Clint discusses civilians and public opinions during the war in greater detail and frequency than Wilkinson. Clint's stories provide a large audience of civilians with something relatable. Wilkinson's memoir, in contrast, focuses on stories tied to nursing. This is in part due to the short-form publication format, and partially because of the *Journal's* audience of professional nurses.

When writing a memoir, the authors are aware of their work's eventual publication. Clint's inclusion of newspaper quotations suggests that she was saving newspaper clippings throughout the war, perhaps with the intention of one day writing about her experience. Without keeping notes, memoirs also relied on the memory of the author, which naturally faded over time. Unlike more personal mediums such as diaries and letters, which are written for a limited audience, or with diaries often no audience at all, memoirs are written for a large readership. Therefore, when reading memoirs as historical sources, not only is the content taken into account, but also the era, setting, and circumstances in which the content was written and later published.

### *Personal Letters*

Letters feature a unique balance between private and public writing, as they discuss personal thoughts through socially acceptable conventions of expression.<sup>80</sup> They were the most frequent form of writing for nursing sisters, used for communication with family and friends both back home in Canada, and elsewhere on the frontlines. Diaries are filled with records of Canadian Mail deliveries, such as circulating stamps, featuring multiple letters from various friends and family. When the Lusitania was sunk in 1915, Helen Fowlds wrote in a letter that some of the nurses “are bewailing the fact that probably a lot of mail was lost – now doesn’t that sound selfish?”<sup>81</sup> Letters from home were highly important to the nurses, and evidently at the front of their minds even in response to major wartime events. The process of exchange left letters vulnerable to being lost, damaged, or discarded, leading to fragmented collections. The financial cost of letters limited their scope and forced the writers to be intentional about which pieces of information they chose to include.

Letters are not only being written to someone, but *for* them, as the author alters their interpretations and descriptions of events for the intended reader.<sup>82</sup> The collection of Helen Fowlds’ letters held at The Trent University Archives, were written for her mother and occasionally her father. Her mother served as a trusted confidant throughout the war, allowing Fowlds to freely express her honest thoughts about her social and personal affairs. The letters between mother and daughter also served as a connection between home and the front lines, and were a comfort to Fowlds as she navigated the horrors of war. Throughout the letters, it is clear

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<sup>80</sup> Steven Stowe, “Making Sense of Letters and Diaries”, *History Matters: The U.S Survey Course on the Web* (2002), 1.

<sup>81</sup> Helen Fowlds, Letter to Mother, May 9, 1915. 1915 Letter 17.

<sup>82</sup> Steven Stowe, “Making Sense of Letters and Diaries”, *History Matters: The U.S Survey Course on the Web* (2002).

to see that Fowlds is filtering her words through an optimistic lens, likely for the sake of her mother's wellbeing. Fowlds frequently included reassurances that she was safe and that her mother need not worry. On May 20, 1915, Fowlds wrote home noting, "I hope you are not worrying about me. We are safe and safer than at home, for we are protected in every way."<sup>83</sup> Throughout her letters she repeatedly states sentiments such as, "My dear mother I wouldn't go home for a million dollars," insisting, she was having "heaps of fun" with her fellow nursing sisters.<sup>84</sup> Historian Meryn Stuart observes that Fowld's diaries "often contain[ed] 'bad' news instead of encouraging, uplifting news, and, in them she mentioned more difficult issues such as her sorrow at attending nurses' funerals, battles gone wrong, and her own persistent health problems."<sup>85</sup> Amidst the hardships of war, it is also possible that Fowlds curated her letters not only for her mother's sake, but for her own comfort. Writing about more optimistic, selectively positive experience may have been a way to reassure herself and attempt to see things in a different perspective.

The thought of strangers reading letters, both censors and postage thieves, presented a challenge for nursing sisters. Beyond the writer's intended audience, the letter would also be read by military censors. Nurses were aware of this fact and tailored their letters accordingly. The writing of information one knew would be censored was a waste of expensive postage. Nurses had to be careful not to share anything considered confidential. In one of Helen Fowld's letters, she shared details of the social climate at the No. 1 Canadian Stationary Hospital, which resulted

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<sup>83</sup> Helen Fowlds, Letter to Mother. May 20, 1915. 1915 Letter 20.

<sup>84</sup> Helen Fowlds, Letter to Mother. April 5, 1915. 1915 Letter 13; Helen Fowlds, Letter to Mother. March 11, 1916. 1915 Letter 14.

<sup>85</sup> Meryn Stuart, "Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18" in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008), 30.

in the blocking of names by the censor.<sup>86</sup> When arriving to a new posting, the location, people, and structure of the hospital were considered classified by the CAMC. When Fowld's first arrived to Salonika in 1916, she wrote that "I should have written before, but when I first come to a place I can't think of anything except what I shouldn't write about."<sup>87</sup> Nurses also understood the potential danger of sending letters through public mail systems, rather than confining their thoughts to private diaries. They knew that confidentiality was not guaranteed. In 1916 Fowld's warned her mother that she may not be able to write as frequently, as letters of nursing sisters were being intercepted and published in newspapers. She described how "I'm not writing many letters these days – it's too big a risk to take" because "no matter what one tells – by word of mouth – it never does any harm, but the minute a single statement is given to a paper it is never unsaid."<sup>88</sup> Putting personal thoughts into words put them at risk of falling into the wrong hands, and this possibility was a consideration for what information was left unsaid.

### *Diaries*

Diaries are the most private and personal of the nurses' written records, serving as a tool for self-reflection, memory keeping, and self-fashioning. Diaries were a place to record private thoughts and opinions which could not be expressed to others. Diaries are not written to an audience, and did not provide context or introductions for people and places they discuss.<sup>89</sup> The study of multiple sources written by CAMC nurses allows researchers to compare the contents of these diaries with one another. This is an exceptional opportunity, especially when the women mention

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<sup>86</sup> Helen Fowlds, Letter to Mother. April 5, 1915. 1915 Letter 13.

<sup>87</sup> Helen Fowlds, Letter to Mother. March 11, 1916. 1916 Letter 7.

<sup>88</sup> Helen Fowlds, Letter to Mother. Jan 5, 1916. 1916 Letter 2.

<sup>89</sup> Steven Stowe, "Making Sense of Letters and Diaries", *History Matters: The U.S Survey Course on the Web* (2002), 8.

each other and provide details that offer multiple perspectives on the same events. The nurses who kept diaries typically recorded more quotidian events that were not necessarily considered interesting enough for letters. These more banal and daily events were equally as important because they offered the opportunity for self-reflection and introspection, and were recorded more regularly. One of the most common opinions found only in these diaries was critiques of CAMC operations or hospital management. When a nurse disagreed with a matron's decision, or was unsatisfied with their job posting, they used private diaries to work through their frustrations. Some of the wording found in these diaries directed towards CAMC doctors and matrons could not be spoken, for risk of punishment.

Wartime diaries were built around a major life event and the diarists viewed themselves within the greater context of history. When a diarist is aware of their "own time as an era or a turning point in historical time" this influences their accounts.<sup>90</sup> Diaries allowed nurses to look inward and self-reflect, while also looking outward and establishing their daily experiences as part of a larger history of Great War. Knowing that the diaries were a part of a larger history may have influenced how nurses depicted themselves, and how they fashioned their wartime identity.

## **Conclusion**

The Canadian Army Medical Corps nursing service was the first female branch of the Canadian military, and during the First World War became one of the largest and most internationally recognized military nursing units internationally. From its creation in 1904, the nurses were all female, and when Margaret Macdonald was appointed Matron-in-Chief in 1914 the service was

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<sup>90</sup> Steven Stowe, "Making Sense of Letters and Diaries", *History Matters: The U.S Survey Course on the Web* (2002), 10.

not only staffed by women but women-run as well. Macdonald had served as a military nurse prior to the establishment of an official nursing service, and her influence can be found throughout CAMC instructions and operations throughout the early twentieth century. The nurses who served in the First World War were breaking new ground as women in a previously all-male military. Supporting one another as they navigated this unprecedented environment, relationships between the nursing sisters were not merely professional. They both worked and lived in close proximity, and often chose to remain together during leaves and off-duty hours. The unique nature of their shared wartime experience, their shared home country, and their shared profession connected the nursing sisters. Despite these similarities the CAMC nursing service featured members with an intentionally diverse range of age, professional training, and personalities. The sources left by nursing sisters, including memoirs, letters, and diaries, provide insight into the nurses' daily lives and social interactions.



## CHAPTER THREE

### The Bluebird Uniform

#### Introduction

Over one hundred years after the First World War the Bluebird nursing sisters are still present and celebrated in Canadian historical memory. The blue uniforms worn by Canadian Army Medical Corps (CAMC) nurses became a national symbol in Canada, which influenced the experiences of the women who wore them. Brass buttons and lieutenant stars boldly declared the nurses' military rank, while white muslin veils contributed to their angelic, nun-like reputation. Nurses were required to wear the uniform in almost all situations, and were therefore unable to separate themselves from the identities displayed by their dress. An exploration of the uniform as material culture, reveals insights into the nurses' experience and identities while they served in the Canadian military. Their movements are easily followed throughout the war, but with demobilization in 1919, they, as a collective, blend back into society by wearing civilian clothing. For over four years, the nursing sisters were constantly on display for the benefit of both their fellow service members and a Canadian public eager to consume stories about CAMC nurses. This chapter interrogates the uniforms of CAMC nursing sisters, to investigate how nurses interacted with the uniform, and how the uniform influenced the nurses' social experiences.

The uniform designs had already been determined in the decade before the war began, though on a much smaller scale. Matron-in-Chief Margaret Macdonald was one of the first nurses to wear a blue version of the previously khaki CAMC nursing uniform, which debuted

around 1906. The design of this uniform is credited to Georgina Pope.<sup>1</sup> Pope and Macdonald were the only two permanent nursing sisters in the CAMC during 1906, and it is likely that Pope and Macdonald would have exchanged opinions regarding the appearance and practicality of the uniforms based on their own experiences.<sup>2</sup> Despite its origins around 1906, the blue colouring of the Working Dress is most commonly associated with the First World War. The new uniform was representative of contemporary changes in women's daywear, with a more relaxed silhouette and shorter skirt than nursing uniforms of the late nineteenth-century.<sup>3</sup> The bluebird uniform was outlined in the *Instructions for Members of Canadian Army Medical Corps Nursing Service (When Mobilized)*, which was written by Macdonald in 1914, and included packing instructions, lists of hospital duties, rules regarding patient relationships, and uniform regulations.<sup>4</sup>

### **The CAMC Uniform**

The instructions included details on the materials and colours of key garments, which pieces should be worn together, and when they should be worn. Instruction 58 advises that the “uniform is to be worn on all occasions, both indoors and out of doors, except when on leave out of garrison, or by special permission of the matron. Jewelry is not worn with uniform.”<sup>5</sup> Macdonald would have likely been under pressure to secure the uniforms, since the nurses already actively enlisted were required to be in official dress. The regulations included detailed information on

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<sup>1</sup> Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 61.

<sup>2</sup> *Ibid*, 61.

<sup>3</sup> *Ibid*, 40, 43.

<sup>4</sup> *Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized)*. 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, (Ottawa, ON).

<sup>5</sup> *Ibid*.



Figure 3.1. Full Dress Uniform of Nursing Sister Alma Florence Finnie. “Service Dress Jacket,” 1914-1918. 19590034-002. Canadian War Museum. Ottawa, ON.

the two versions of the uniform – Full Dress and Working Dress. The Full Dress uniform expressed the nurses’ military authority and placed the nurses within the traditional military hierarchy. The Working Dress uniform combined practicality with performance, with decorative elements designed to emphasize the nurses’ unique identity as female commissioned officers.

Full Dress, listed first, “should not be worn whilst actually engaged in ward duties; otherwise interchangeable with working dress.”<sup>6</sup> Off-duty the nurses were given the opportunity to personally choose between which uniform they chose to wear. The “Bluebird” nickname came from the light blue linen of the Working Dress, while the Full Dress was made from a deeper “navy blue cloth”, and a “scarlet collar and cuffs, with white piping.”<sup>7</sup> (Fig. 3.1) The combination of scarlet and navy blue wools, and the sharper lines of this uniform expressed a formal military look.

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<sup>6</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, (Ottawa, ON).

<sup>7</sup> Ibid.



Figure 3.2, Inner lining of a Full Dress uniform collar. “Tunic” Wool, Metal, Paper. UGM/81/018/C5a. The Army Museum. Halifax, NS. Photograph by author.

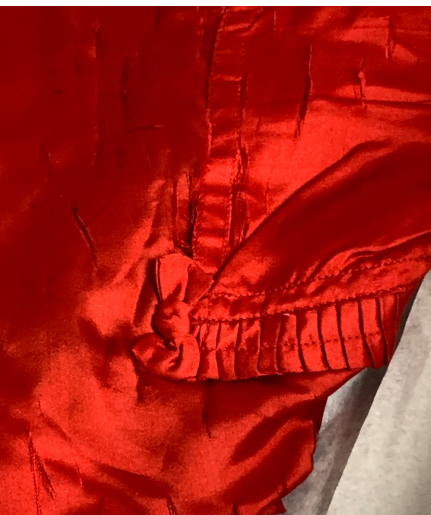


Figure 3.3, Interior pocket of a CAMC nursing sister's cape. “Cape” 1914-1918. Wool, Silk, Metal. UGO/81/025/C5. The Army Museum. Halifax, NS. Photograph by author

The navy blue and scarlet Full Dress was designed for appearances rather than practicality. Even elements of the internal construction were chosen to have an impact on the final look of the finished garment. The scarlet collar with white trim contained an inner burlap lining, which maintained the shape and supported the two CAMC pins fastened onto each side of the collar (Fig. 3.2).<sup>8</sup> The cape, though included in the Working Dress materials, was commonly paired with the Full Dress as it was constructed with navy blue wool with a red silk inner lining. Capes were a staple of nursing uniforms during the First World War. British nursing sisters wore similar capes of grey and red. The Royal Army Medical Corps (RAMC) and Queen Alexandra's Imperial Military Nursing Service (QAIMNS) capes were significantly shorter than the CAMC capes, covering the wearer's shoulders and leaving the arms unrestricted. The Canadian cape was more restrictive when working, compared to the shorter coats of the British nursing services.

Though the longer CAMC capes offered more warmth than the shorter British capes, CAMC nurses preferred the great coat rather than the cape when dressing for warmth. The great coat was knee length, oversized, and made of navy blue wool; offering more

<sup>8</sup> “Cape”, UGO/81/025/C5. Manufactured by James Shoolbred & Co. Wool, Silk, Metal. The Army Museum (Halifax, NS).

warmth, comfort, and mobility with sleeves and buttoned closure in the front. Nurse Helen Fowlds recorded that the CAMC capes were “very becoming to most of the girls but none too comfortable these days” and that nurses had “caught cold in their capes.”<sup>9</sup> The decorative details that made capes “becoming” were made of silk and would have been easily damaged. Despite its placement on the inner lining, hidden from view, the cape’s pocket featured a trim of pleated silk, and a small silk bows on the seams (Fig. 3.3).<sup>10</sup> The details of the Full-Dress uniform speaks to its level of purpose as a ceremonial, military costume, instead of its functionality. Rather than identifying the women as nurses, the design of the Full Dress uniform emphasised the status of CAMC nurses as active members of the Canadian military.

The Working Dress combined more nurse-specific and feminized features with the same CAMC buttons, rank badges, and gold belt clasp as the Full Dress uniform. Described as “linen, mid-blue, and washable” the Working Dress uniform combined practicality with decorative and symbolic elements.<sup>11</sup> If wearing the Full Dress uniform asserted the nursing sisters’ place in the established traditions of military style, the Working Dress carved out a new space for women and signaled a new era in military nursing. The lighter blue colouring became synonymous with the Bluebird nurses, as did the one-yard square of muslin worn as a veil. These uniforms were worn during all working hours, and often on leave as well. The work history of these garments shows in an examination of surviving examples. They show signs of wear and tear, including stains, thinning of the fabric at common tension points, as well as repairs.

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<sup>9</sup> Helen Fowlds, “Personal Correspondence”, March 13, 1915. 1915 Letter 8. Transcribed by Trent University Archives. Helen Marryat Fonds 69-001 Series 1.

<sup>10</sup> “Cape”, UGO/81/025/C5. Manufactured by James Shoolbred & Co. Wool, Silk, Metal. The Army Museum, Halifax, Nova Scotia.

<sup>11</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.



Figure 3.4, Working Dress uniform of CAMC nursing sister Alma Florence Finnie. “Work Dress Blouse” 1914-1918. 20000105-086. Canadian War Museum. Ottawa, ON.

A Working blouse, once worn by Marion MacLeod and currently in the collections of the Army Museum in Halifax, features multiple repairs to the seams along the wrists and underarms on both the left and right sides.<sup>12</sup> The underarm region is one of constant movement and the structural seams show signs of loosening, and detaching and repairs to close the resulting gaps. The same can be seen at the wrists, where the small metal fastener creates a tight fit. The seams show signs of unraveling, with repairs in the same places on both wrists. Perhaps the cuffs were impractical in certain situations, where it was desirable to roll the sleeve and prevent stains. Based on the clear wear around the cuffs, it appears the sleeve was frequently adjusted and manipulated – evidence of the Working Dress’ use while working in comparison to the Full Dress uniform’s use for symbolism and ceremony.

The Working Dress uniform combined practical garments with decorative elements intended to indicate the nurses’ status, such as CAMC buttons and belts (Fig. 3.4).

A white apron was worn over top the light blue blouse and skirt. The apron would have served many practical purposes, though it did not fully cover the buttons, and the

<sup>12</sup> “Tunic”, UGM/81/018/C5b. Cotton, Metal. 1914-1918. The Army Museum (Halifax, NS).

leather and metal CAMC belt was frequently worn over the apron. The exposed metal of the buttons and belt may have been impractical when working closely with patients. Various shapes and sizes of aprons are visible in photographs taken of nursing sisters in Working Dress, which may have combated this problem (Fig. 3.5). The woman standing third from the left is seen wearing a front-buttoning skirt apron, rather than the full apron from Figure 3.4. Some of the women are seen wearing linen, apron-like shirts over the button-lined uniform blouse. Perhaps the apron instruction was left intentionally vague, only stating “white”, as Macdonald understood that the Working Dress uniform needed to be more flexible than the Full Dress.



Figure 3.5, Nursing Sisters in front of tent, at the No. 7 Canadian Stationary Hospital, France. “Nursing Sisters in Front of Tent” MS-2-128, Folder 23. Dalhousie #7 Stationary Hospital – Group Images, Mostly Unidentified. Dalhousie University Archives. Halifax, NS.

Potential discomfort for the wearer caused by buttons and fasteners would have been minimized by undergarments worn under the Working Dress uniform. No undergarments were included within the *Instructions for Members of the CAMC Nursing Service*, though they were an essential element of the uniform, providing comfort and workability to the nursing sisters. Based upon contemporary clothing trends and research done on undergarments worn by Voluntary Aid

Detachment (VAD) nurses, CAMC nursing sisters would have worn combinations as the foundational layer, followed by a corset, and a petty coat.<sup>13</sup> The nurses were responsible for supplying their own underlayers, and could control the decorative style of combinations they wore, or the number of petty coats they deemed necessary for the climate they worked in. The exclusion of structural garments within the instructions may have been a choice by Macdonald, allowing a degree of flexibility for each nurse to make underlayer decisions tailored to her own body. Structural garments worn under the Full and Working Dress uniforms would have impacted both the physicality and appearance of the nurses while they worked in the uniform, and while they were off duty.

The Working Dress also included options for seasonal wear, since it was “permissible at all times, summer and winter”, which included raincoats, hats, and helmets.<sup>14</sup> Each of these items include some sort of CAMC badge, once again highlighting the importance of visually articulating the rank of Canadian nurses. The hats, like the capes, are frequently seen paired with the Full Dress, despite being included in the Working materials. While working, nurses were required to wear veils – and therefore the “seasonal” hats were most often worn for off-duty activities.

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<sup>13</sup> Nicole Loven and Pauline Loven. “Getting Dressed in WW1 – VAD Nurse”. CrowsEyeProductions. 24 July, 2018. YouTube video. <https://www.youtube.com/watch?v=QZOaMbTRxWY>; The Dictionary of Fashion History defined combinations as: “combination refers to this merging of chemise and drawers which appeared as fashions became sleeker in silhouette” *The Dictionary of Fashion History* (Oxford: Berg Publishers, 2010) “Combinations”, 68-69.

<sup>14</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.



## **Purity and Femininity: CAMC Veils**

Veils were vaguely defined as “one yard muslin, white” and, despite their simplicity, became an international symbol of the various nursing services.<sup>15</sup> The Voluntary Aid Detachment (VAD), Queen Alexandria’s Imperial Military Nursing Service (QAIMNS), and the Royal Army Medical Corps (RAMC) each wore a variation of the veil during the First World War. American nursing sisters, however, did not wear veils, however, which in turn contributed to the establishment of a common feature of uniformity shared between the Commonwealth nurses, speaking to the colonial identities within the Canadian military. Ella Mae Bongard, a Canadian nurse who served with the American Expeditionary Force, wrote of the CAMC nurses’ that “we’d all love to wear [veils] too if we could.”<sup>16</sup> The veil became an essential element of the CAMC uniform, and in shaping the new role of women in Canada’s Expeditionary Force.

Historian Meryn Stuart describes the veils as “feminine, even mysterious and seductive.” in how they “projected a certain image of heterosexuality, particularly through their relationship to those of a Christian bride in white.”<sup>17</sup> This hyper-religious connotation was founded in the cultural precedent of nuns’ habits. The Full Dress uniform, though it featured specific stitching and pleats intended to emphasise the female shape, also featured clear similarities to the uniforms of male officers such as the belts, CAMC buttons, and shoulder badges. The Working Dress was more feminine in its appearance, partially due to the soft colouring and lines of the

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<sup>15</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.

<sup>16</sup> Ella Mae Bongard, quoted in *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 155.

<sup>17</sup> Meryn Stuart, “Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18” in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008).

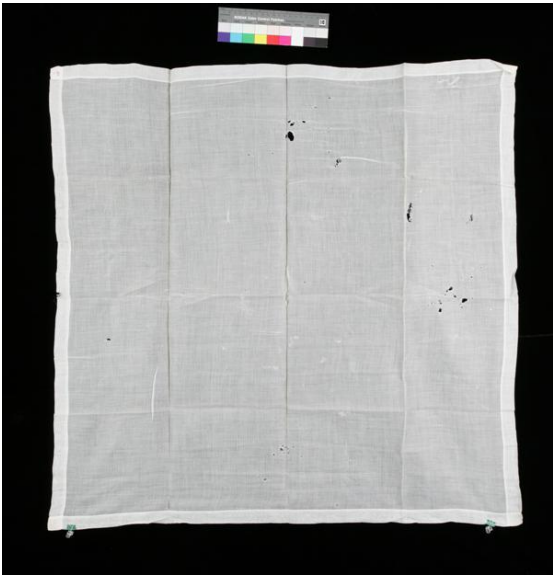


Figure 3.6, Veil worn by unidentified C.A.M.C nursing sister. “Service Dress Veil”. 1914-1918. 19840359-002. Canadian War Museum. Ottawa, ON.

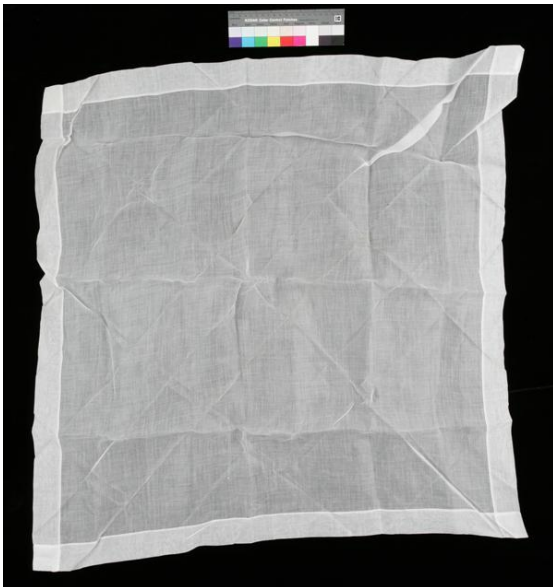


Figure 3.7, Veil worn by C.A.M.C nursing sister Lillie Ellen Galbraith. (“Service Dress Veil”. 1914-1918. 20000105-100. Canadian War Museum. Ottawa, ON.)

garments, but in large part due to the white veil. The veil took up considerable space and was an easy visual identifier. It became the most frequently mentioned item when nurses were described by both civilians and soldiers.

The cultural meanings and interpretations surrounding the veil reveal insight into nurses’ experiences, as can the smallest details of veil construction. These details were not easily captured with contemporary cameras, but in extant garments the stitches and textiles reveal stories of CAMC nursing experiences. Variations in the veils suggest that there was no single manufacturer or supplier. Two veils held at the Canadian War Museum appear at first glance to be “uniform” in their construction (Figs. 3.6 & 3.7). The borders are different in width, and close inspection reveals the textiles to be slightly different in their thickness and colouring. Common throughout the veils is a distinct border, most frequently created by folding the edge of the fabric. The stitching pattern used to secure the edge is not consistent across surviving examples. The requirement for this border is not specified within the instruction manual, but was likely a matter of practicality, keeping the edges of the muslin from fraying. Though born out of necessity it became an aesthetic feature,

and opportunity for more decorative stitching. Even the more simple and standard veils feature slight differences, suggesting smaller scale production practices. The hand-stitching and slightly off-centre alignment of fabric, suggest that these veils were not necessarily constructed by a professional.

Veils worn by nursing sister Irene Bessie Beyer are an important example illustrating that some veils were the product of small-scale production and sourced by the nurse herself. Beyer kept her uniform receipts, along with train tickets, as wartime souvenirs which are now held in her personal fonds at the Canadian War Museum, and notably none of the receipts include veils.<sup>18</sup> After her enlistment into the CAMC, Beyer placed a large purchase for uniform items, as well as orders for replacement garments in the following years. Though Beyer may well have placed other orders for which she did not keep receipts, the purchases represented in these documents do not include veils.<sup>19</sup> Included in the purchase were 9 Aprons, which similar to veils were loosely defined within the CAMC uniform instructions. The buttons, belt, and cotton dress would have all been made specifically for CAMC nurses, whereas the apron could have been reasonably mass-produced across nursing services. The veils could not be interchanged, as the CAMC requirement for a “one-yard square” differed from the rectangular shape of veils worn by British nursing services. Though they all wore veils, the shape of the veil itself and the way in which it was tied was not standard across allied nurses. Without a mass-produced, constant supply of the accessory, nurses would have to get creative with where they found replacement veils throughout the war.

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<sup>18</sup> “Clothing Receipts”, 19850448-037. Fonds of Nursing Sister Bessie Irene Beyer. 1914-1919. Canadian War Museum, Ottawa, Ontario.

<sup>19</sup> Ibid.

The delicately thin muslin and complicated styling of veils meant that nurses required a constant supply of replacements. In April 1915, Fowlds was serving in France, and wrote home to her mother requesting “half a dozen more veils – which are always necessary as they wear out so easily. The last ones you made – out of that muslin from Eaton’s, are the best.”<sup>20</sup> In concept, the veil had practical applications in keeping the women’s hair back. In practice, the veil was far from practical. The fragile muslin would have required delicate handling when dressing for work or making adjustments throughout the day. The material would not have remained in place without the use of pins – which would have left holes and easily torn the fabric. To achieve the desired shape, and a secure placement, the fabric would have to achieve a balance of structure and delicacy. Nurses noticed the difference between textiles depending on where the veil was made. Helen Fowlds wrote her mother again in September, discussing the different fabrics used previously and which performed best. Despite the “two veils which arrived in good condition,” Helen’s stock was “very low.” As a result, she wrote to her mother requesting, “If [she] could send me about two or even three a month it would be heavenly. There is a very fine material almost like bolting cloth that makes up beautifully and stays fresh ever so much longer than the others. The ones we made out of that piece of lawn were no good at all – too small and too heavy.”<sup>21</sup> Helen’s recollection of the veils “we made out of that piece of lawn” suggests that she and her nursing sisters were creating their own veils when necessary – and furthermore had to rely on family members to access the necessary fabric.

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<sup>20</sup> Helen Fowlds, Letter to Mother, April 9, 1915. 1915 Letter 14.

<sup>21</sup> Helen Fowlds, Letter to Mother, September 23, 1915. 1915 Letter 38; The Fairchild Books Dictionary of Textiles defines lawn as “A fine, plain weave, relatively sheer cotton fabric made in close constructions. Generally made of fine, combed singles although some cheaper carded yarn qualities also are produced...” Phyllis G. Tortora and Ingrid Johnson, *The Fairchild Books Dictionary of Textiles* (London, UK, 2013), 344.

Throughout the war, nurses noted supply shortages in hospital equipment. Though wartime called for creative and practical solutions, it is clear that Fowlds was not eager to wear the veil when it was not properly made. The description of “too small and heavy” would be impractical for working. Fowlds’ description of fabrics includes an emphasis on both aesthetics and practicality, as she desires a veil which both “makes up beautifully and stays fresh”, and that can be worn comfortably, with the right sizing and weight. There were certainly aesthetic elements added to veils, and though subtle, the veil’s potential for slight customization would have offered nurses the freedom to make their mark on the uniform.



Figure 3.8, Veil worn by unidentified C.A.M.C nursing sister “Veil” Linen. 2018.0.178. The Army Museum. Halifax, NS. Photograph by author.

A veil now held at the Army Museum in Halifax, features a more time-consuming and decorative stitching (Fig. 3.8) to define the border.<sup>22</sup> The presence of stains and repairs suggest that the veil was not reserved for special occasions, but was frequently worked in. There are more visible repairs on this example than the veils held at the Canadian War Museum, further emphasising the nurses’ desire to continue wearing this more decorative style despite reasonable use. One can

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<sup>22</sup> “Tunic,” UGM/81/018/C5b. Cotton, Metal. 1914-1918. The Army Museum (Halifax, Nova Scotia).



Figure 3.9, Dan Luno, Illustration of nursing sister sewing, 1917, from Emma Walters' autograph book (Photograph by author. Autograph Book. Registered Nurses Association of Nova Scotia fonds. 202200701. Nova Scotia Archives. Halifax, NS.)

imagine the nursing sisters working to repair their veils after their hospital shift and working together to ensure everyone had a wearable veil. An illustration drawn in Emma J Walters' autograph book, while she was serving at the Dalhousie No. 7 Canadian Stationary Hospital, shows Walters repairing what appears to be a veil (Fig. 3.9). This would have been a reasonably common occurrence – enough so that a soldier chose to commemorate Walters in this way. The practice of repairing veils was a matter of necessity, with the supply shortages discussed previously. In the case of the Army Museum veil, the repair work might also be due to the elegant appearance.

In Helen Fowld's case, some of her veils might have held special meanings and connections to her mother back home, presenting another reason for her to continue to wear veils after their deterioration.

The wearing of fabric from the Canadian department store Eaton's would have been a connection to home. A Canadian mother stitching the veil together herself adds a whole new layer of meaning to what is already the most symbolic of the uniform garments. Alongside the religious and gendered connotations, Meryn Stuart describes the veils as promoting “an idealized portrait of nurses as protected and dutiful daughters of the

military.”<sup>23</sup> The letters between Helen Fowlds and her mother speak to the nurses’ identities as daughters of Canadian women, in addition to their roles as daughters of the Canadian military. Veils connected nurses with Canadians on the home front, in some cases through the physical construction and wearing of the garment, but also through the national meanings the veil came to represent.

### **Wearing The Uniform**

When Margaret Macdonald ordered the uniforms in 1914, she was faced with the question of how to prepare garments for women whose measurements she did not know. Beyond questions of sizing, there were concerns that the garments might arrive unfinished, or poorly constructed.<sup>24</sup> Once the mobilization order had been sent, and the selected applicants notified, the nurses were sent for medical checks as part of the enlistment process. It is likely that Macdonald would have inquired about the nurses’ approximate sizing during enlistment, and nurses’ heights were included in attestation documents as part of the wellness checks. Even if Macdonald had access to this information, however, uniforms would need to be properly sized upon the nurses’ arrival to Valcartier. There are multiple accounts of fittings recorded in diaries and letters. The *Instructions for Mobilization* stipulated that “uniforms will be purchased by the members themselves an allowance for this purpose being granted. The establishments selected to supply it

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<sup>23</sup> Meryn Stuart, “Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18” in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008), 25.

<sup>24</sup> G.W.L Nicholson, *Canada’s Nursing Sisters* (Toronto: Samuel Stevens Hakkert & Company, 1975), 51.

will be intimidated to them ....”<sup>25</sup> According to the diary of Clare Gass, department store Holt Renfrew was the supplier chosen for those training in Quebec. On March 31, 1915, Gass recorded that “Tomorrow we leave for Montreal ... Government cheques this afternoon. Holt Renfrew’s also for fittings.”<sup>26</sup> The choice of a department store, rather than a tailor or smaller shop, would have presented more opportunities for the Canadian public to view and interact with the nurses while in uniform.

The James Shoolbred & Co department store, known as Shoolbred’s”on Tottenham Court Road in London, was chosen as the designated uniform supplier and as manufacturer of uniform garments. Clare Gass recorded shopping here on January 11, 1916, when she “went up to London this morning by the early train to do some shopping – ordered a new uniform at Shoolbred’s, got a navy-blue sweater coat at Evans; boots and other necessities elsewhere.”<sup>27</sup> Though multiple garments were purchased from the department store, the only item in the Army Museum collection which featured a manufacturing label from “J. Shoolbred & Co” was the cape.<sup>28</sup> The Royal Army Medical Corps (RAMC) and Queen Alexandria Imperial Military Nursing Service (QAIMNS) also used Shoolbred’s for the distribution of certain uniform garments. Bessie Beyer’s uniform receipts show purchases at Shoolbred’s throughout her time as both a QAIMNS and CAMC nurse. The day after her official enlistment into the CAMC, on June 18, 1918, she placed a large order for uniforms at Shoolbred’s – including one belt and nine

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<sup>25</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.

<sup>26</sup> Clare Gass, Diary Entry. March 31, 1915. Published in *The War Diary of Clare Gass*, ed. Susan Mann (Montreal: McGill Queens University Press, 2004).

<sup>27</sup> Clare Gass, Diary Entry. January 11, 1916.

<sup>28</sup> “Cape”, UGO/81/025/C5. Manufactured by James Shoolbred & Co. Wool, Silk, Metal. The Army Museum (Halifax, Nova Scotia).



aprons.<sup>29</sup> She had already begun preparing for her transfer into the Canadian service, as earlier in the week she had placed an order for a Canadian Panama hat and a Rain Hat with Badge, both from Scotts Hatters in London.<sup>30</sup> Later in the year, on October 15, 1918, she placed another order for “1 Cotton Uniform” – interestingly the “sold by” line is signed by the same Shoolbred’s employee, Agnes, as the receipt for Beyer’s first CAMC uniform order. Perhaps the uniform blouses and skirts were handled in a designated department, with Shoolbred’s employees specifically assigned to nursing uniforms. Although this could be a coincidence, as the surviving receipts of a single nurse are not enough to get a full picture of CAMC partnership with the store.

Bessie Beyer’s receipts are evidence of the nurses’ frequent visits to Shoolbred’s, both for uniform purchases and fittings. Shoolbred’s would likely have been a space where nurses of multiple allied forces would have interacted. The resultingly high demand proved too much for the department store to handle. Helen Fowlds wrote home to her mother on February 27, 1915 that “Shoolbreds are not proving as satisfactory as might be – and the matron-in-chief gave them a lot of orders as to what was to be worn that are not regulation and the result is a huge muddle.”<sup>31</sup> She describes herself and her fellow nursing sisters as “all sort of peeved as we were given to understand we had to go to Shoolbreds.”<sup>32</sup> The mentioning of garments that “are not regulation” may be alluding to the sweaters and coats purchased by many nurses at this time – such as the one purchased at Evans by Clare Gass. Many nurses were making personal purchases

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<sup>29</sup> “Clothing Receipts”, 19850448-037. Fonds of Nursing Sister Bessie Irene Beyer. 1914-1919. Canadian War Museum (Ottawa, Ontario); Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 713-15. Item 42601, “Beyer, Bessie Irene”.

<sup>30</sup> “Clothing Receipts”, 19850448-037. Fonds of Nursing Sister Bessie Irene Beyer. 1914-1919. Canadian War Museum (Ottawa, ON).

<sup>31</sup> Helen Fowlds, Letter to Mother, February 27, 1915. 1915 Letter 3.

<sup>32</sup> Helen Fowlds, Letter to Mother, February 27, 1915. 1915 Letter 3.

alongside their uniform necessities, both to be worn as mufti and to be worn as non-regulation additions to the uniform.<sup>33</sup>

The *Instructions for Mobilization* included optional garments, which nurses could purchase as needed and when their work placements changed throughout the war. Sweaters were mentioned in Appendix B “Articles of Field Equipment with which Members of the Nursing Service will provide themselves when ordered on Active Service”, were frequently mentioned in personal accounts, and seen in photographs. Included in the “1 Steamer Trunk” allotted to each nurse, they are instructed to include “1 Sweater, mid-blue. 1 Waterproof Apron.”<sup>34</sup> These were either brought with the women upon arrival to training or purchased during active service. Coats were another optional garment, which nurses could purchase when necessary. Helen Fowlds purchased a “big coat” when she arrived in London in 1915. Fowlds told her mother that “At first – none of them [other nursing sisters] ordered coats and I thought maybe I had been foolish in putting my money into one. But they are all buying them now...”<sup>35</sup> Their needs for specific items changed throughout the war, as nurses’ postings varied from cold winters in Britain to hot summers in the Mediterranean. In her 1977 memoir *Four Score and Ten* published in *The Canadian Nurse Journal*, CAMC nurse Maude Wilkinson shares her memories of serving in Salonica, and described how the stationary hospital was unprepared for the climate. In 1917, she was transferred back to London, where she ordered a new uniform as she “felt very shabby in my

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<sup>33</sup> The Cambridge Dictionary defines mufti as “ordinary clothes worn by people who usually wear either uniforms or special clothes for work or sports”. The term was frequently used by the CAMC and by the nursing sisters. *Cambridge Advanced Learner’s Dictionary & Thesaurus* (Cambridge: Cambridge University Press, 2013) “mufti”.

<https://dictionary.cambridge.org/dictionary/english/mufti>

<sup>34</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.

<sup>35</sup> Helen Fowlds, Letter to Mother, March 13, 1915. 1915 Letter 8.

faded blue and greyish apron” next to the starched and pleated aprons, bright white veils, and vivid blue uniforms of nursing sisters serving in Britain.<sup>36</sup> Wilkinson travelled to London to purchase the uniform around July of 1917, as Shoolbred’s department store remained the designated establishment until the CAMC demobilization in 1919.

Nurses had to locate and purchase any necessary non-regulation garments on their own, and often relied on personal relations sending packages from Canada. As discussed with Helen Fowld’s veils, nursing sisters requested textiles and clothing from their families. Considering the nursing sisters wore their uniforms almost all the time, there was a constant need for replacement items. When preparing for the “frightfully cold” winter in France, Clare Glass wrote the following to her mother on August 28, 1915, “I have been so hard on my boots since I came to France! ... I have worn two pairs completely out since April & was on my last pair when I got Granty to send me another pair ... Already here in the nights I am wearing all the clothes I possess including a sweater & am contemplating very soon sending to Granty to purchase flannels for me.”<sup>37</sup> Granty was a close friend of Gass’ back in Canada. With CAMC-run hospitals operating along the front lines, nurses were likely to be stationed away from London for long periods, and unable to visit Shoolbred’s for shopping. Pauline D. Balloch wrote home to New Brunswick on August 28<sup>th</sup>, 1915, asking for a flannel petticoat and hug-me-tight, but instructs “don’t knit these things mother, have the things and jacket knitted for me.”<sup>38</sup> The participation of mothers and other relatives back home in Canada speaks again to the act of

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<sup>36</sup> Maude Wilkinson, “Four Score And Ten”, *The Canadian Nurse* (November 1977).

<sup>37</sup> Clare Gass letter to mother, 28 August 1915. Granty was Clare’s close friend, who was in Canada.

<sup>38</sup> Pauline D. Balloch, Letter to Mother, August 1, 1917. Published by Ross Hebb, *In Their Own Words: Three Maritimes Experience the Great War* (Halifax: Nimbus Publishing Limited, 2018).

purchasing and wearing of the CAMC nursing uniform as more than a simple or unimportant process – but rather a complex network of both economic and social interactions.

Beyond required pieces and necessary additions to the uniform, any extra space in steamer trunks could be filled with luxury garments, presenting an opportunity for personal expression. The clothes purchased during service could be worn as mufti, gifted to friends and family, or saved for after the war. Throughout her correspondence with her mother, Helen Fowlds shared the purchases she made, and often described in detail garments and souvenirs in detail. On March 10, 1915, she described the “heaps of room” in her dunnage bag, which she intended to fill with practical items such as “tea – a few biscuits, matches, candles, etc...,” and tells the story of shopping with another nursing sister, and how they found “the dearest little Japanese kimonos.”<sup>39</sup> Since she had the room in her trunk, she decided to pack her dressing gown, and purchase a new one for travelling. She described her choice of “a pink crepe one lined with white China silk – the design is birds in black and white and it really is a beauty for the equivalent of about \$5.00.”<sup>40</sup> She goes into further detail about the prices of items, a subject she discussed in multiple letters. Considering the price and scarcity of postage, Fowlds devotes considerable space to discussing and describing the clothing she finds throughout her travels. Two months later, on May 27, 1915, Helen shared her explanation for why access to affordable clothing was so significant to herself, and other nurses

there is a dear little lingerie shop where we all get things the prettiest nighties etc. all French embroidery for a mere nothing. The girls all have lovely things and they say it is about their only pleasure. You get so sick of uniforms all the time that it is a change to have fussy underthings” ... “it just comes to this, Mother dear, that the war is going to last a long time and we’ve got to live somehow and we may as well live as happily as possible and not grow into ‘battle scarred vets’

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<sup>39</sup> Helen Fowlds, Letter to Mother, March 10, 1915. 1915 Letter 7.

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## Responses to the Uniform

### *Military Leadership*

The flexibility in Working Dress uniform items did not imply that nurses were free to accessorize, or mix and match as they pleased. After their fittings in Quebec, strict enforcement of uniform code began aboard the *Franconia* to England. Diaries and letters written by the first cohort of nursing sisters discuss a change in attitudes around regulations once onboard, and a feeling that military service had officially begun. On May 8, 1915, Ruth Loggie transcribed a posted order into her diary an order, which read: “Thou shalt not wear mufti” to which Loggie responds with “so goodbye comfort.”<sup>41</sup> She also notes daily uniform inspections in the morning, and drills in the evenings. The uniform was a physical reminder of the nurses’ place in the military hierarchy. The instruction to remain in uniform on all occasions continued to be strictly enforced. Nurses would have been aware of this requirement, and likely settled into a routine of automatically reaching for their uniform. When one nurse failed to do so in 1918, her breaking of CAMC protocol was noted by the RAMC Matron-in-Chief, Maud MacCarthy. In January MacCarthy recorded an incident where she reported nursing sister “Gregory” of the CAMC to Margaret Macdonald, as “this lady had overstayed her leave and had travelled in mufti.”<sup>42</sup> Despite not being a part of the CAMC, British Matron MacCarthy found this breach of protocol important enough to both report to the Canadian matron and record the incident in her personal records. Nurse Gregory’s uniform infraction was not overshadowed by her overstaying leave, speaking to the serious nature of uniform regulations. Maude Wilkinson recalled a moment

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<sup>41</sup> Ruth Loggie. Diary Entry. May 8, 1915. Published in *A Canadian Nurse in The Great War: The Diaries of Ruth Loggie, 1915-1916*. Ed. Ross Hebb (Halifax: Nimbus Publishing Limited, 2021).

<sup>42</sup> Maude McCarthy. Diary Entry. January 2, 1918. WO 95/3990/3. “Headquarters Branches and Services. Matron in Chief”. The National Archives, Kew, England.

during training when she was first exposed to dress-related regulations. She described on occasion when the sisters carried umbrellas on a rainy day and writes, “you can imagine the strictly Sergeant’s reaction to this display of femininity. ‘Put down the umbrellas, roll them and use them as canes’ he barked with annoyance.”<sup>43</sup>

The uniform served as an opportunity for interaction with superior officers, both testing and strengthening the nurses’ opinions of military hierarchies. Upon arrival to the No. 1 Canadian General Hospital, Ruth Loggie was frustrated with the CAMC doctors and staff running the hospital. She was especially critical of Matron Violet Claire Nesbitt and transcribed in her diary multiple orders which she found unreasonable. Among Loggie’s complaints was the strict enforcement of uniform codes, and her entry on May 31, 1915, includes an order from Nesbitt stating,

Irregularities in uniforms are still consistently being carried out by the sisters of No. 1 Canadian General Hospital such as capes being worn with flaps inside. What has been allowed by other hospitals will not be allowed in No. 1. There ought to be no confusion as it is supposed that all CAMC Sisters were properly instructed regarding these matters sometime or other ... Sisters are warned that the constant infringement of these rules will mitigate greatly against them in course of time.<sup>44</sup>

Though errors in uniform were a point of contention between Loggie and Matron Nesbitt, there are also examples of the uniform offering a bridge between nursing sisters and higher authorities. Maude Wilkinson wrote of an event where uniforms presented an opportunity for Matron-in-Chief Margaret Macdonald to “endear herself” to the nurses, when upon arrival to London she “told [the hospital’s] matron we were to go to specified shops to have our dresses and coats shortened and our hats (so unbecoming) reblocked. She too must have been appalled at our

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<sup>43</sup> Maude Wilkinson, “Four Score and Ten”, *The Canadian Nurse* (October 1977): 29.

<sup>44</sup> Ruth Loggie. Diary Entry. May 31, 1915.

appearance when we arrived.”<sup>45</sup> Though it cannot be stated what Macdonald’s intentions were with this order, from Wilkinson’s account the reaction of the nurses was a positive one.

### *British Nursing Sisters*

The uniform served as a visual representation of the complicated relationships between Canadian and British nursing sisters. Differences in cultural customs, military rank, and nursing practices were all factors in these personal relationships, and the uniform offered opportunities to discuss these differences without explicitly stating them. The daily interactions between nurses, both working and personal in nature, were affected by these differences. The published memoirs of CAMC nurses such as Mable Clint contain statements on how kind and brave the British nurses were, though even these official accounts did not omit disagreements between the nursing services. Clint overall describes the British nurses overall as honorable veterans and admits that their perceptions of Canadians contained “some prejudice.”<sup>46</sup> Personal writing material, not intended for publication, provide more immediate and uncensored feelings towards British nurses. Ruby Peterkin recorded in 1915 that: “I fear that [English] sisters do not love us. You see we have two stars and they hadn’t, and although they spend a great deal of time in assuring us that they ‘rank as officers’ it is not as convincing as those two stars.”<sup>47</sup> Her description of English nurses as spending “a great deal of time” suggests that conversations and comments about the uniform were frequent. Later in the same passage, Peterkin moves the discussion away

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<sup>45</sup> Maude Wilkinson, “Four Score and Ten”, *The Canadian Nurse* (November 1977): 15.

<sup>46</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 41.

<sup>47</sup> Ruby Peterkin, Letter to Irene. June 10, 1915. R7630-0-X-E. Ruby Gordon Peterkin Fonds. Library and Archives Canada (Ottawa, ON).

from the uniform, and states that British nursing was “punk, in fact not nursing at all.”<sup>48</sup> The differences in nursing styles and training were certainly a common topic of discussion, and point of frustration, for both nurses and doctors in field hospitals. The CAMC nurses were set apart from British Voluntary Aid Detachment (VAD) nurses, due to the Canadians’ professional training before the war. Despite serving side by side, they were also set apart from nurses in the Royal Army Medical Corps (RAMC), through differences in uniform, pay, and rank.

The British views of Canadians often held colonial undertones, embedded into the prejudice discussed by Clint. CAMC nurse Katherine Wilson recorded that her British coworkers referred to the Canadians as “Millionaire Colonials”.<sup>49</sup> The uniform embodied this sentiment and was seen as ostentatious by some members of British military and aristocratic circles. Harold Begbie, a British journalist, critiqued the CAMC nursing uniforms, and his comments were noted by multiple nurses. Helen Fowlds spoke of his publication, writing that “He says our uniform is a caricature of a staff officer’s uniform, and that we ‘breathe the gaiety of our high heeled spirits’ and a lot more”.<sup>50</sup> She also implies that Begbie “isolates us strictly, not allowing us to even consider ourselves as British”.<sup>51</sup> Mabel Clint also spoke of Begbie’s critiques, though Fowlds provides more details into how herself and her nursing sisters felt about the comments. Fowlds identifies a couple nurses by name, and describes their reactions to the comments, writing “Mickie who licks the boots of any one English, [and] wept most of the night. Blewett who has no mind of her own copied Mickie. Myra Goodene dismissed the author as a mental case and

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<sup>48</sup> Ruby Peterkin, Letter to Irene. June 10, 1915. R7630-0-X-E. Ruby Gordon Peterkin Fonds. Library and Archives Canada (Ottawa, ON).

<sup>49</sup> Katherine Wilson, quoted in Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 17.

<sup>50</sup> Helen Fowlds, Letter to Mother, June 3, 1915. 1915 Letter 22.

<sup>51</sup> Helen Fowlds, Letter to Mother, June 3, 1915. 1915 Letter 22.



therefore not worthy of attention.”<sup>52</sup> In the end, Fowlds determines that the British and Canadian nurses got along fine personally, but professionally “it’s a case of oil and water and we’re better kept apart. Our ways are not their ways.”<sup>53</sup> In *Sister Soldiers of the Great War* Cynthia Toman outlines how British nurses may have felt this same way. They viewed Canadian nursing sisters as less skilled and structured in their nursing practice. Toman relates these views to “the portrayal of Canadians as hardy, adventurous, accustomed to primitive conditions, and efficient in ‘making do’ [which] was part of a colonial discourse expressed in popular literature at the turn of the century.”<sup>54</sup> The rank badges, brass buttons, and overall prestige of the uniform did not fit into this narrative. The CAMC uniforms were attractive and prestigious, and contested any stereotypes of being second best.

The Canadians certainly did not see themselves as “less than” regarding either uniforms or nursing skills. They were aware of the uniform’s visual appeal, and the fashionable appearance certainly made an impact on the nurses’ confidence. Considering the judgement received from British VAD and RAMC nurses, the Canadians passed judgment right back. In the same letter where she called British nursing punk, Ruby Petekin explained common encounters where, “We just calmly survey their uniform, which is hideous ... then we calmly glance at our own, which believe me, looks pretty smart in these surroundings, and you can fairly see them turn green.”<sup>55</sup> Helen Fowlds echoed this interpretation of British judgement as jealousy, writing, “The English nurses are only jealous of our uniform and every day we notice little changes they

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<sup>52</sup> Helen Fowlds, Letter to Mother, June 3, 1915. 1915 Letter 22.

<sup>53</sup> Helen Fowlds, Letter to Mother, June 3, 1915. 1915 Letter 22.

<sup>54</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 191.

<sup>55</sup> Ruby Peterkin, Letter to Irene. June 10, 1915. R7630-0-X-E. Ruby Gordon Peterkin Fonds. Library and Archives Canada (Ottawa, ON).

are making in order to look like us – and imitation in this case is certainly flattery.”<sup>56</sup> The difference in colour, between “dull” grey and the CAMC blue is a frequently noted detail amongst the nurses. The fact that these interactions are described as “every day” and frequent, shows the close working relationships nurses developed, no matter their country of origin. Both the Canadian and British nurses were questioning one another’s nursing capabilities and authority over the other, and the CAMC uniform became an axis point for the debate. The uniform did not need to be explained - it spoke for itself and established a collective identity for the nurses before they could establish their own personal reputations through work. Despite these differences in identity, and the technicalities of nursing practices, the collective identity of “nurse” applied to all these women, and their daily interactions led to complex personal relationships across the different military services.

### **The Uniform in Public**

The CAMC nursing uniform caught the eye of the public and shaped the way civilians treated the nursing sisters. Nurses were aware of the stares and comments their uniforms drew and wearing the uniform in almost all social situations meant adjusting to a new way of existing in public spaces. Mabel Clint recorded that,

We ourselves, or rather our uniforms, attracted considerable notice even in these thronged thoroughfares [referring to London streets]. Our brass buttons, and particularly the Lieutenant’s stars on our shoulder-straps, made us conspicuous. A photograph taken at St. Thomas Hospital was posted in the window of a great Oxford shop, and hundreds paused for a look. We were often stopped and asked who and *what* we were.<sup>57</sup>

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<sup>56</sup> Ruby Peterkin, Letter to Irene. June 10, 1915. R7630-0-X-E. Ruby Gordon Peterkin Fonds. Library and Archives Canada (Ottawa, ON).

<sup>57</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 21.

During war-time civilians were familiar with insignia, as “London was in uniform” – making it likely that passersby would understand the implied status and significance of the stars.<sup>58</sup> Nurses could not avoid the attention, for better or worse. While on a trip to Oxford on January 28, 1916, Clare Gass recorded in her diary which sights she saw, and that throughout the day “my uniform was much admired and I was the centre of attention in many ways.”<sup>59</sup>

This attention was not always appreciated, as nurses in uniform were viewed as though they were always on duty. Before ever leaving Canada, Pauline Balloch’s uniform had already caused her unwanted attention. In a letter to her parents, Balloch describes her train ride into Halifax when, “the grey day took on considerable colour ... and ‘twas my uniform that did it.”<sup>60</sup> There was a medical emergency aboard the train, and she was caught by a conductor who spotted her uniform. She was then ushered quickly to a woman in labour and helped arrange her safe passage to a hospital. Afterwards, Balloch wrote that “still very much in the public eye, with red trimmings and brass buttons shouting my profession, I returned thankfully to the comparative obscurity of my chair.”<sup>61</sup>

The uniform carried with it the pressure of public opinion, though in many cases nurses enjoyed the benefits of positive reception and admiration. Upon her arrival in London, Pauline Balloch wrote home of the warm reception she had received, and how even policemen would salute her on the streets.<sup>62</sup> She also recorded the story of herself and fellow nursing sister visiting

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<sup>58</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 19.

<sup>59</sup> Clare Gass, Diary Entry. January 28, 1915.

<sup>60</sup> Pauline D. Balloch, Letter to Mother, May 24, 1917.

<sup>61</sup> Pauline D. Balloch, Letter to Mother. May 24, 1917.

<sup>62</sup> Pauline D. Balloch, Letter to Mother. June 3, 1917.

Westminster Abbey, “where our uniforms got for us a seat in the choir.”<sup>63</sup> The perceptions of CAMC nurses held by British and French civilians were overwhelmingly positive and shaped the nurses’ daily interactions. When boarding a train in France, Mabel Clint found that the conductor paid little attention to the nurses’ tickets, and she realized that nurses wearing the white veils “could go anywhere in France in those years.”<sup>64</sup> While travelling, the CAMC uniform meant first-class tickets on public transportation. Irene ‘Bessie’ Beyer’s saved train tickets are all Army/Service Member tickets, which clearly state that they are available only to “Forces Overseas (In Uniform).”<sup>65</sup> Wearing the uniform while on leave meant admiration and special privileges, at the cost of any anonymity.

### *The Canadian Public*

The nursing sisters experienced a similarly elevated status back home in Canada, as the fame of Canadian nurses became a symbol of national pride. The merciful nurse narrative swept through Canadian media. Newspapers reported the nurses’ enlistments, medals, and deaths the same way they did their male counterparts. The concept of women wielding military authority was foreign to a country where women did not have the right to vote, and the Canadian public was intrigued by the women’s elevated status. The uniform offered an engaging and accessible way for newspapers to discuss this disruption to gender norms. When the McGill Hospital was assembled and preparing to travel overseas, the *Montreal Gazette* published a detailed article on February 2, 1915. The title read “M’Gill Hospital Staff Is Chosen” with the subheadings “Nursing Staff of 42

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<sup>63</sup> Pauline D. Balloch, Letter to Mother. June 13, 1917.

<sup>64</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 44.

<sup>65</sup> “Travel Tickets and Documents”, 19850448-043. Fonds of Nursing Sister Bessie Irene Beyer. 1916-1918. Canadian War Museum (Ottawa, ON).

Also Selected with Miss McLatchey as Matron” and “Hold Rank as Officers,” with the latter title printed with capital letters for emphasis. The article focuses on the nurses’ rank of lieutenant, using the imagery of the uniform to explain the women’s’ rank. It reads:

Each nurse will be given rank as Lieutenant, with shoulder straps and stars, just the same as the mere man Lieutenant. They will also wear the regulation leather belt and metal buckle ... the nurses, however, will not be condemned to khaki ... their buttons will be the regulation brass buttons of the Army Medical Corps ... the outfit should present a very pleasing combination of feminine grace and military usefulness.<sup>66</sup>

The uniform served as an interesting and accessible means for Canadian journalists to discuss the nursing sisters. In July 1915, Canadian newspaper *The Globe* interviewed a nurse on leave as though she was a visiting celebrity. The article “Canadian Nursing Sister on Leave” was based on conversations with nurse Mrs. Burns, who was said to be one of the first nurses sent to France, and reportedly the first to return on leave.<sup>67</sup> While the CAMC uniform had been very visible overseas, the uniform was new to the streets of Toronto. There is a section dedicated to “The CAMC Uniform”, in which the reporter admits she “simply had to burst into exclamations over the beauty and becomingness of [the uniform].”<sup>68</sup> The women have a discussion about “the various nursing uniforms [Mrs. Burns] had seen since the beginning of the war” and conclude, “all of which had to yield the palm in the end to the Canadian Army Medical Corps, as indeed, Mrs. Burns declared, the British women themselves agreed.”<sup>69</sup> After the “delightful excursion into a wardrobe” the article turns to the warm welcomes Canadian nurses received in Britain, and

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<sup>66</sup> “M’Gill Hospital Staff is Chosen”, *Montreal Gazette* (Montreal, QB), February 2, 1915.

<sup>67</sup> Mona Cleaver [Pen Name Polly Peele] “Canadian Nursing Sister On Leave” *The Globe* (Toronto, ON), July 23, 1915.

<sup>68</sup> Ibid.

<sup>69</sup> Ibid.

later to the emotional nature of a nurse's work.<sup>70</sup> The article's author Mona Cleaver was a prominent Toronto journalist and member of the Canadian Women's Press Club, often writing under the pen name "Polly Peele."<sup>71</sup> Polly Peele was the leader of "The Circle" or "The Button Club," so named after the practice of sending buttons to anyone whose articles were published in *The Globe's* "The Post Office" column.<sup>72</sup> Young Canadians wrote to Polly Peele throughout the First World War, referring to her as the Queen, discussing their wartime experiences and perspectives. Mona Cleaver brought a large audience to her journalism, writing pieces, such as "Canadian Nursing Sister on Leave," which would have been targeted toward young Canadians through the use of Cleaver's pen name. On December 25, 1915, Mona Cleaver published another piece about Canadian nurses. Rather than an interview, in "the Youngest Countess' Christmas" Cleaver wrote a fictitious story about a nurse working on Christmas. The nameless nurse is upset that her Christmas package, containing a sweater-coat, did not arrive in time. In the end, her Christmas gift was being able to nurse a Canadian soldier and share memories of their home country together.<sup>73</sup> The idea of Canadian nurses caring for Canadian patients was highly romanticised and will be further explored through the study of autograph books in the next chapter of this thesis.

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<sup>70</sup> Mona Cleaver [Pen Name Polly Peele] "Canadian Nursing Sister On Leave" *The Globe* (Toronto, ON), July 23, 1915.

<sup>71</sup> Lindsay Bannister. "Mona Purser (1884-1954)" *Canada's Early Women Writers*, Canada Writing Research Collaboratory Online. 18 May, 2018.

<sup>72</sup> "The Post Office", weekly column. *The Globe* (Toronto, ON).

<sup>73</sup> Mona Cleaver [Pen Name Polly Peele] "The Youngest Countess' Christmas" *The Globe* (Toronto, ON), December 25, 1915.

## **The Uniform & its Impacts on Personal Identity**

With an understanding of how the uniform was viewed by others, and the meanings observers of the uniform projected upon the nursing sisters, it is important to ask how the uniform affected the women and how they saw themselves. With their superior officers, strangers in public spaces, and media outlets back home all discussing the nursing sisters' appearances, questions arise around the nurses' self-image and identity. Many nurses were clearly affected by external reactions to their uniforms. Those who kept diaries, wrote memoirs, or sent letters, felt compelled to record these interactions. The words Maude Wilkinson chose in discussing her encounter with Matron-in-Chief Macdonald in London, when they were sent to have their dresses hemmed and hats reblocked, is evidence that the nursing sisters wanted their uniforms to be flattering as well as practical. Before leaving for Britain, Wilkinson anticipated the reactions to their Full Dress uniforms – feeling that they were overly masculine and not entirely flattering. She writes that “looking at the group photo taken before we left makes it clear, no anxious father had to warn his daughter to beware of the men overseas. In those uniforms even the most adventurous male would hesitate before casting an amorous glance in our direction.”<sup>74</sup>

The nurses' military authority was clearly displayed through their dress, and this challenged contemporary gender norms. When the nurses left Canada in 1914, women did not have the right to vote. The authority held by CAMC nurses within military hospitals would have been a contrast to the experiences of a single woman living in contemporary Canada. The pattern of writing about buttons and rank badges within diaries, letters, memoirs, and newspapers was not coincidence. These features were so influential to wartime experiences that nursing sister

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<sup>74</sup> Maude Wilkinson, “Four Score And Ten”, *The Canadian Nurse* (November 1977).

Wilhemina Mowat Watt titled her memoir “White veils, brass buttons, and Me.”<sup>75</sup> These small but noticeable features impacted the way CAMC nurses were observed and treated by military and civilian onlookers. For these women to suddenly become the centre of attention for reasons related to their professional achievements and skills, it would have been quite the change from the recognition received by those in other nursing services. The nursing sisters of the CAMC understood that their uniform was a large piece of their newfound social status. The judgement they received from British nurses was interpreted as jealousy and heightened the Canadian nurses’ pride in their CAMC uniform. Beyond the privileges awarded to servicemembers in uniform, the CAMC uniform was regarded as unique and especially admired throughout other nursing services. As much as the uniform secured an elevated status, to be constantly defined by your appearance, and by clothing you have not choice in wearing, would have been frustrating.

One of the ways in which nurses could control the perceptions of themselves, and create their postwar legacies, was through formal portraiture. Nurses could have their portrait taken as a souvenir or gift for their family back home in Canada. The uniform would be a central piece of the image, and nurses could decide which of the two dresses would represent their time in service. Many chose to wear the Full Dress, a choice which put less emphasis on their role of nurse, and more on their role of soldier, and officer, though some nursing sisters found the

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<sup>75</sup> Wilhelmina Mowat Waugh, “White Veils, Brass Buttons, and Me: Memoirs of a Nursing Sister in World War I in the Canadian Army Medical Corps 1915-1920”, Brandon General Hospital Archives (Brandon, MB). Referenced by Cynthia Toman in “Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps” UBC Press, 2016 (Vancouver, BC).





Figure 3.10, “Helen as a Young Nurse.” Portrait of nursing sister Helen Fowlds. 69-001 Series 1, Folders 207. Trent University Archives. Peterborough, ON.

Working Dress uniform to be more flattering. When Helen Fowlds went to have portraits taken for her family, she decided to wear the Working Dress. She explains the reasoning behind this in a letter to her mother, on March 13, 1915: “I had my photos taken this morning... I am having mine in my service uniform as I think they are more becoming and look more like a nurse’s uniform ... the service uniforms are and always will be more attractive.”<sup>76</sup> Fowlds wanted to highlight her identity as a nurse, and as a woman, rather than as an officer. In her portrait, you can see the care that went into displaying her uniform (Fig. 3.10). Her veil is neatly pressed and tied in a way that creates more volume and draws attention to the garment. Fowlds was choosing which elements

of the uniform she wanted to exaggerate and display. With the uniform often speaking for the nurses, portraits offered an opportunity for them to control which meanings they wanted to be remembered by.

## Conclusion

After the war’s end, records of the nurses become sparse. In one list recorded by the Overseas’ Nursing Association of Canada from 1936, the majority of women are listed as “Miss”, suggesting that a sizable population of single women, with extensive professional experience and considerable independence, who would have been navigating re-adjustment into

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<sup>76</sup> Helen Fowlds, Letter to Mother. March 13, 1915. 1915 Letter 8.

a patriarchal society.<sup>77</sup> Mabel Clint spoke to this, saying that “like the fate of our demobilized men also, The nursing-sisters in many cases found it difficult, through no fault of their own, to resume professional status where they left off four years before.”<sup>78</sup> Susan Mann predicted that the nurses sought to put the war behind them after demobilization in 1919.<sup>79</sup> Part of putting the conflict behind them included putting the uniform away. The uniform would have been a tangible reminder of positive memories, but also of the trauma nurses experienced throughout the war. Just as the uniform signalled the beginning of active service in 1914, the removal of the uniform signalled the end. Even when the uniforms were no longer being worn, depictions of the uniform lived on in public memory. Surviving uniforms have now outlived the women who wore them and serve a new purpose of preserving their memories within Canadian history.

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<sup>77</sup> Susan Mann, ‘Where Have All the Bluebirds Gone? On The Trail of Canada’s Military Nurses, 1914-1918” *Atlantis* 26, no. 1 (2001), 37.

<sup>78</sup> Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 5.

<sup>79</sup> Susan Mann, ‘Where Have All the Bluebirds Gone? On The Trail of Canada’s Military Nurses, 1914-1918” *Atlantis* 26, no. 1 (2001), 37.

## CHAPTER FOUR

### **Autograph Books and Nurse-Patient Relationships**

#### **Introduction**

The relationship between nursing sisters and their patients was an integral part of military medical care. Sharing in such lifechanging, often traumatic experiences created common ground between Canadian soldiers and the Canadian Army Medical Corps (CAMC) nurses – shaping relationships that were both professional and personal. The concept of Canadian women entering active war zones, and caring for Canadian men, was romanticised both by onlookers and by patients themselves. This chapter examines the personal side of nurse-patient relationships through autograph books, which offer an intimate glimpse into these private relationships in wartime hospitals.

Autograph books were a common practice among CAMC nursing sisters. In these books, patients signed their names alongside personalized messages, illustrations, and poems. Many of the books contain signatures from multiple years, and multiple hospitals, throughout the war. The messages and illustrations reveal the complicated nature of nurse-patient relationships. Nurses commonly saw the patients as Canadian brothers while patients, in turn, viewed their nurses from a more gendered and idealized perspective. Despite differences in interpretation, there was indeed a relationship that stretched beyond the labels of nurse and patient, rooted in a belief that emotional wellbeing was an essential part of medical care.

Annie Macdonald's autograph book, which she kept while she was working at the Dalhousie No. 7 Canadian Stationary Hospital, contains her portrait drawn by a patient, C.E



Figure 4.1, C.E. Griffiths, “The Greatest Friend Tommy Ever Had” Portrait of Annie Macdonald, 1918. Page 42 of Annie Macdonald’s autograph book. (“Autograph Book” MG 20.21 1.1. Beaton Institute Archives. Sydney, NS.)

Griffiths. The portrait exemplifies the duality of being both an authority Figure and friend in the eyes of patients (Fig. 4.1). The book is now held at the Beaton Institute Archives, in Sydney, Nova Scotia – close to Macdonald’s hometown of Sydney Mines. The artist, C.E Griffiths, chose to depict

Macdonald while she was actively working, rather than as a posed composition; she is shown in the process of asking a patient for their temperature, by holding out the thermometer. Her cheeks are flushed, and there are stains, potentially blood, on her hands. She is a professional nurse and Griffiths, a patient, chose to emphasise this identity in his commemoration of her. The caption “The greatest friend Tommy ever had” does not contradict Annie’s authority and legitimacy as a

medical professional. In this capacity the roles of nurse and friend coexist, and blend together, into the unique identity of CAMC nursing sisters.

The CAMC sisters became known for their sociability, and for their personal approach to military nursing. Their nursing style was critiqued by other military medical personnel, who viewed it as ineffective and inappropriate. The same interactions were praised by the Canadian public, however, who viewed the women as sisters of mercy in how they cared for the country's men. No matter how the nurse-patient relationship was seen by others, autograph books and the memories they contained were carefully preserved by nursing sisters. These albums now offer an intimate viewpoint into how both nurses and patients viewed the hospital environment, and how they supported one another through the First World War.

### **The Practice of Collecting Autographs**

Autograph books were a common practice amongst the Bluebirds and were owned by individual nurses. The books vary in size, material, and length, and all feature blank pages. Winnifred Byrne's autograph book resembles a photograph album, only 12.5 by 10 by 1.5 cm, with "Album" decorating the cover in gold lettering.<sup>1</sup> There was only one photograph included in the book, a portrait of Byrne on the first page, and the remainder of the ninety-five pages were filled with autographs. Emma Walters' book also resembles a photograph album, though the blank cover does not define an intended use. On the front cover, Walters drew her own "Autographs" cover page (Fig. 4.2).<sup>2</sup> Walters' book may have been created as a notebook, sketchbook, or

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<sup>1</sup> "Autograph Album", 19810519-001. Fonds of Nursing Sister Winnifred M. Byrne. 1916. *Canadian War Museum* (Ottawa, ON).

<sup>2</sup> Autograph Book, Registered Nurses Association of Nova Scotia fonds, Item 202200701. *Nova Scotia Archives* (Halifax, NS).

photograph album, before Walters began using it to collect autographs. Bessie Beyer's book was created specifically for autographs. The leather cover was decorated with "Autographs", in the same gold lettering as Byrne's book, and was almost identical in size at 13 by 10 by 1 cm.<sup>3</sup>

Whether they purchased albums designed for the collection of autographs, or innovated to create their own books, the CAMC nurses individually maintained their autograph books through personal interactions with patients.

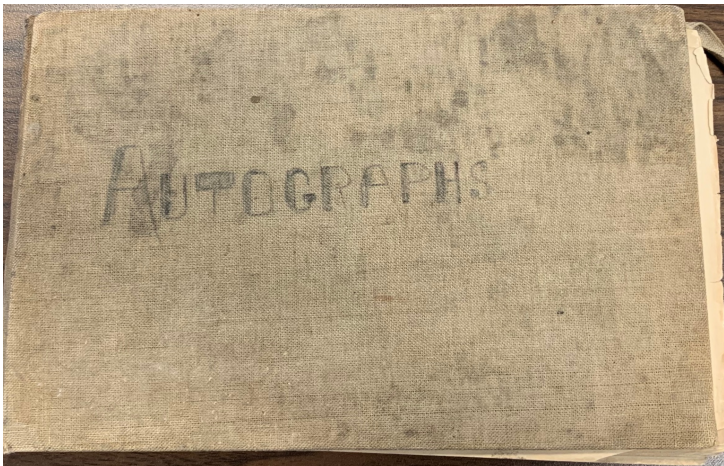


Figure 4.2. Emma Walters, front cover of autograph book. Photograph by Author. Autograph Book, Registered Nurses Association of Nova Scotia fonds, Item 202200701. Nova Scotia Archives (Halifax, NS).

Autograph books could be understood as a contravention of Instruction 55, which clearly stated that "A sister is not permitted to accept presents of any kind from any patient, or friend of any patient, whether during his illness or after his death, recovery, or departure."<sup>4</sup> The wording here is more specific than that of Instructions 61 and 53, as it emphatically states that no gifts

can be accepted in any context or relationship to patients. Despite the clear, detailed instruction, autograph books were a common and permissible practice. Had a patient given a nursing sister a painted canvas or a sketch on a sheet of paper, it would likely be considered a gift. The same applied to poems or greeting cards. The notebooks used to collect signatures from patients,

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<sup>3</sup> "Autograph Album", 19920080-006. Fonds of Nursing Sister Bessie Beyer. 1916-1918. Canadian War Museum (Ottawa, ON).

<sup>4</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.

however, belonged to the nurses. As the patients were not presenting a new gift, but adding to a pre-existing document, nurses were able to circumvent the gifting regulations. When multiple pieces of artwork, both illustrations and writing, were inscribed in a nurses' notebook, it became an autograph book, where Instruction 55 seemingly did not apply.

When presented with separate gifts of artwork or writing, nurses were able to affix them into the autograph book and sidestep Instruction 55. In Annie MacDonald's autograph book, an illustration has been adhered with medical gauze onto page 13 (Fig. 4.2). The sketch was drawn by Private. F. Rawson, in May 1918, and depicts Sneinton Mill in Nottingham, England. Rawson drew two other illustrations directly into Annie's book, including a colourful depiction of Ward 35 at the No. 7 Canadian Stationary Hospital.<sup>5</sup> The artwork on page 13 stands out in how it a separate paper was adhered to the book. The exchange of a soldier gifting this artwork to Annie would be a direct violation of Instruction 55, but once it was attached to the page of her autograph book, it takes on a new meaning. She is collecting, rather than receiving, the artwork from her patient. The process of exchange was interpreted differently when gifts were placed directly into an autograph book. As explained by Igor Kopytoff in *The Social Life of Things*, the biography of this illustration is defined not by the artwork itself and "what it deals with, but how and from what perspective."<sup>6</sup> The change in perspective, meaning, and perceived intentions behind autograph books defined this illustration not as an exchange of artwork, but as an exchange of memories.

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<sup>5</sup> "Autograph Book" MG 20.21 1.1. Annie MacDonald Fonds. 1918. Beaton Institute Archives, Sydney, NS. 10, 15.

<sup>6</sup> Igor Kopytoff, "The Cultural Biography of Things," in *The Social Life of Things* (Cambridge: Cambridge University Press, 1986), 68



Figure 4.3, F. Rawson, “Sneinton Mill”, 1918, adhered to page 13 in Annie Macdonald’s autograph book. (“Autograph Book” MG 20.21 1.1. Beaton Institute Archives. Sydney, NS.)

Though autograph books followed a common format, the messages were personalized to each nursing sister, creating a customized collection of wartime memories. There are a surprising number of surviving books held in archives across Canada, and presumably more that remain in private collections of nurses’ descendants. These books are typically in great condition, speaking to the importance of the books to the nurses. The albums follow a common structure, and the signing of autograph albums was clearly a common practice for both nurses and patients, as they repeat popular phrases and sign in a consistent format. The patients would sign books with their rank, first initial, and last name – very seldom including a full given name. The relationship between nurse and patient maintained a formal element that would have been determined under



military protocol, maintaining a level of professionalism in the hospitals and as a safeguard for patients and nurses.

The men's signatures and artwork represented a pride in their home country and military service. Their home country was simply implied by military titles. Illustrations of military crests were a popular choice for illustrations – with the Canadian Field Artillery and Australian Commonwealth Military Forces being the most frequently drawn. This is not to say that other countries are not also represented – there is a detailed, colourful illustration from a Scottish patient that reads “Scotland For Ever / My Native Home / We Lead. Others Follow” in Annie Macdonald's book. The drawing is dedicated not just to “A.McD” but to “Canada” itself.<sup>7</sup> The presentation of poems and drawing to Canada rather than the nurse alone appear frequently. These crest drawings, and their dedications to nurses, speak to the cultural exchanges that were occurring through personal relationships. Another example of these cultural identities, and how they shaped the nurse-patient relationship, is found within the autograph album of CAMC nursing sister Margaret Elliot Reilly. In 1916 a CAMC Captain, signing his name with his home city of Winnipeg, Manitoba, signed “In the Canadian Military Hospital / and / Moving about so blithely / at times a teeny bit shyly / Perhaps we don't rate her highly? / Our Scotch – Irish Sister Reilly.”<sup>8</sup> Though this officer was Canadian, he sought to recognize her care beyond her evidently shy demeanour.

The messages provide a record of original writing, and popular poems and sayings shared between the patients. Some authors individualized a message by including the specific hospital

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<sup>7</sup> “Autograph Book” MG 20.21 1.1. Annie MacDonald Fonds. 1918. Beaton Institute Archives, Sydney, NS, 9.

<sup>8</sup> “Autograph Album” 19920080-006. Fonds of Nursing Sister Margaret Elliot Reilly. 1916-1918. Canadian War Museum, Ottawa, ON.

ward. On page 8 of Macdonald's book, Don. MacMillan of the Seaforth Highlanders inscribed on May 17, 1918 "He who's sick and wants to thrive / Stay a while in ward 35"<sup>9</sup> Another poem written on the same date, from a soldier from the 10<sup>th</sup> Queens R.W.S (Royal West Surrey Regiment) said: "I am not much good at Prose / But I hope you won't forget / The time when I was Food Controller / at Ward 35"<sup>10</sup> The opening of this poem, "I am not much good at prose," is found in multiple books and this patient modified the popular poem in order to personalize it for Annie and for the No. 7 Canadian Stationary Hospital. As with the illustrations of certain crests, there are multiple poems that are repeated throughout multiple autograph albums.

Many of the poems are humorous in nature, through the use of popular phrases and inside jokes. One recurring joke featured a stamp adhered to the page, presumably using chewing gum, as it would read underneath "By gum it's stuck." The most commonly repeated joke is found on the last page of most books, where patients would write "By hook or by crook / I'll be the last in this book." In the case of Margaret Elliot Reilly's book, another soldier managed to write a small inscription below the original, reading "To prove you are wrong, I'll sign here."<sup>11</sup> Occasionally there are inside jokes, for which the context and meaning has been lost. In Annie Macdonald's autograph book, one of the CAMC doctors signed with "Who broke the hypo needles on f ward?" – alluding to a shared memory inside the hospital.<sup>12</sup> Also in Macdonald's book, a patient wrote "Just a wee sprig of Heather for luck," again alluding to a shared memory or saying shared

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<sup>9</sup> "Autograph Book" MG 20.21 1.1. Annie MacDonald Fonds. 1918. Beaton Institute Archives, Sydney, NS, 8.

<sup>10</sup> Ibid.

<sup>11</sup> "Autograph Album" 19920080-006. Fonds of Nursing Sister Margaret Elliot Reilly. 1916-1918. Canadian War Museum (Ottawa, ON), 126.

<sup>12</sup> "Autograph Book" MG 20.21 1.1. Annie MacDonald Fonds. 1918. Beaton Institute Archives, Sydney, NS, 32.

between nurse and patient.<sup>13</sup> No context is provided for either of these signatures, suggesting that they were not intended to be read by anyone beyond the signee and Macdonald.

Though less common than shorter messages, long form poetry was also transcribed into autograph books. These longer poems were more serious in their subject matter, addressing the traumas of war, with some even discussing the frustrations of conscription in Canada. The more personalized messages speak to the personal relationship between nurses and patients – and even more so the illustrations of nurses found within these books showcase the patient’s interpretations of CAMC nurses. The variety of signatures, ranging from simple notes and generic well wishes to detailed illustrations and long form poetry, reflects how different patients were reacting to their wartime environments. Some coped with humour, and others with melancholy. In either circumstance, the nursing sisters was an active participant in their wartime story, and in helping them process the traumas of war; autograph books present unique insight into the intimate and emotional nature of wartime nursing.

### **CAMC Regulations on Relationships**

Regarding the official policies on nurse-patient relationships, there were dedicated regulations included in the *Instructions*. Instruction 61 broadly states that “She will be careful to exercise due courtesy and dignity in all her relations with officers, NCOs, men and patients.”<sup>14</sup> The *Instructions* were tailored for the unique position of the women in an otherwise all-male environment. The focus on dignity echoes the gendered expectations of nurses, and how their

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<sup>13</sup> “Autograph Book” MG 20.21 1.1. Annie MacDonald Fonds. 1918. Beaton Institute Archives, Sydney, NS, 29.

<sup>14</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.

dignified, feminine, and merciful presence was part of their role in military medical care. The emphasis on dignity and professionalism prepared nurses for how to approach sensitive discussions with their male patients, which were part of a nurse's duty to keep patient records.<sup>15</sup>

It would have been difficult to maintain a sense of objectivity when discussing personal, and likely emotional subjects. "Instruction 52" reads that "Sisters are earnestly requested to interest themselves in the home circumstances of men being invalided as permanently unfit and make such representations as many be necessary to the matron."<sup>16</sup> Similar in its potential for personal conversation, "Instruction 53" reads that "She will be most careful in noting the religion of patients under her charge, and in the event of serious illness, she will see that the Chaplain of the patient's denomination is duly notified."<sup>17</sup> One can imagine the personal conversations that might arise when asking patients about their religious beliefs, and their life before the war. These are not simple, impersonal subjects. Despite the sensitive and intimate nature of such conversations, the nurses were expected to perform their duties within an unbiased and professional context.

Nurses' diary entries discuss the emotional connections that arose from such conversations, after finding similarities with patients. Occasionally the nurses recorded the progress of individual patients, or noted a personal connection with them. Ruth Loggie recorded the progress of her patient, Freeman, between October 31 and November 5, 1915. On October 31, Loggie was assigned to Freeman, who required specialized attention. For six days she

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<sup>15</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 34-35.

<sup>16</sup> Instructions For Members of Canadian Army Medical Corps Nursing Service (When Mobilized). 102368, Margaret Clotilde Macdonald Fonds, Library and Archives Canada, Ottawa, ON.

<sup>17</sup> Ibid.

recorded his physical and emotional progress, and feared that “he isn’t coming out on top.”<sup>18</sup> On November 3, she wrote a letter to his family, and on November 5, Loggie recorded that “Freeman died this A.M. at 8 and I feel lost and very badly in consequence, but his recovery was almost too much to expect.”<sup>19</sup> In addition to connections made during treatment, some nurse-patient relationships were formed through pre-war circumstances. Clare Gass recorded connections with patients from her home province of Nova Scotia. On June 9, 1915, she “bought flowers in an old French garden for a Nova Scotia boy in the ward.”<sup>20</sup> Though clear in their desire to regulate nurse-patient relationships, the *Instructions* remain relatively vague in their wording, leaving much to the discretion of the nurse. Margaret Macdonald had a career of nursing experience, specifically in military nursing, and would have understood the necessary balance between professionalism and personability required from the women.

### **Nurses Viewing Patients**

While soldiers depicted nurses in emotionally intimate ways, writing such personalized notes, nurses were equally affected by interactions with their patients. Nurses diaries and other written accounts offer insightful perspectives, illustrating nurse-patient relationships. Though there are of course exceptions, the general view of patients by nursing sisters was as brothers. The nurses write of the relationships with patients, especially Canadian ones, as being of a familial nature. In many cases, the nurses’ letters and diary entries focus on their actual brothers, if they were also

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<sup>18</sup> Ruth Loggie, Diary Entry, November 1, 1915. Published in *A Canadian Nurse In The Great War: The Diaries of Ruth Loggie, 1915-1916*. Ed. Ross Hebb (Halifax: Nimbus Publishing Limited, 2021).

<sup>19</sup> Ruth Loggie, Diary Entry, November 5, 1915

<sup>20</sup> Clare Gass, Diary Entry. June 9, 1915. Published in *The War Diary of Clare Gass*, ed. Susan Mann (Montreal: McGill Queens University Press, 2004).

enlisted with the Canadian Expeditionary Force. Nurses served as a sort of liaison between their families back home and their siblings on the front lines. Though nurses were transferred between hospitals, and hospitals themselves moved locations, these changes were typically done with more notice than the unpredictable movements of soldiers the front lines. Nursing Sister Helen Jones, who served first with the British Volunteer Aid Detachment (VAD) and later transferred to the CAMC, marked in her diary the days when she received “Canadian Mail”. Jones often wrote that her mother and father, both at home in Halifax, Nova Scotia, would enclose letters for Helen to pass onto her brother Fred.<sup>21</sup> This was a common practice, and nurses would do the same, sending news and correspondence from their brothers back to Canada.

Throughout the extant diaries and letters, there is a notable rise in anxiety for nurses’ Canadian brothers before and during major campaigns – such as Passchendaele and Vimy Ridge. Helen Fowlds wrote home to her mother on April 19, 1917, reassuring her mother by sharing: “Have had cards from Eric up the 15<sup>th</sup>. So, he was safe through the worst of the Vimy Ridge show. Am enclosing a letter though it doesn’t give much news.”<sup>22</sup> When Fowlds’ other brother Don was wounded in April 1918, she was the one to notify her parents, forwarding to them the original postcard from which she received the news. A few days later, in an update on Don’s condition, Helen wrote, “It is a great relief to know they are both safe if only for a while.”<sup>23</sup> Throughout the war Helen maintained her nursing duties, remained up to date on both of her brothers’ activities, and organized correspondence between her family members. In October

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<sup>21</sup> Helen Jones, “Correspondence, Diary, photographs of Helen Jones (Mrs. REG Roome)”. 2015-030/001-08. Jones, Roome, Van Allen Family Fonds. 1916-1972. Nova Scotia Archives (Halifax, Nova Scotia).

<sup>22</sup> Helen Fowlds, “Personal Correspondence”, April 19, 1917. 1917 Letter 5. Transcribed by Trent University Archives, *Nursing Sister Helen Fowlds Fonds: A Canadian Nursing Sister in World War I* (Peterborough: Trent University Archives Digital Collections, 2002).

<sup>23</sup> Helen Fowlds, Letter to Mother, April 12, 1918. 1918 Letter 2.

1918, she was the one to notify her father that Don had been killed in action. Fowlds' letter is clearly shaped by her over three years of military nursing experience, as she attempts to comfort her parents with details on how she received the news. She states that Don's quick death was a "poor comfort, perhaps, but it makes me thankful for I have seen so much death and suffering" amongst patients brought in with "shell shock" who died while in hospital.<sup>24</sup> She had already posted an obituary multiple newspapers and shared the clippings with her parents. Fowlds would have similar actions as part of official protocols after a patient's death; it is clear from her letters, however, through the letter that no professional experience could prepared her for such a personal loss.

Matron-in-Chief Margaret Macdonald and the CAMC nursing sisters understood the bonds between siblings serving overseas, and the women supported one another accordingly. Macdonald and the CAMC made an effort to aid nursing sisters to coordinate leaves with their brothers. It was not a simple task, and many nurses noted frustration and disappointment when planned reunions fell through. Helen Fowlds had taken leave with both of her brothers not long before her brother Don's death; and upon his death she wrote about how thankful she was to have had the time together, and to have an updated photograph of the three siblings.<sup>25</sup> Helen Jones frequently arranged leaves to meet with her fiance's brother, Captain Roome. At the time, Jones was engaged to Richard Edward Graham Roome (REG Roome), who she married in 1920.<sup>26</sup> On June 5, 1918, she wrote that "C. was at the station [in Reading]. He had to send the

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<sup>24</sup> Helen Fowlds, Letter to Father, October 22. 1918 Letter 8.

<sup>25</sup> Helen Fowlds, Letter to Father, October 22, 1918. 1918 Letter 8.

<sup>26</sup> Helen Jones, "Correspondence, Diary, photographs of Helen Jones (Mrs. REG Roome)". 2015-030/001-08. Jones, Roome, Van Allen Family Fonds. 1916-1972. Nova Scotia Archives (Halifax, Nova Scotia); Captain was his given name and is unrelated to his military status. Library and Archives Canada, Personnel Records of the First World War, RG 150, 1992-93/166, Box 8449 – 15. Item 616118. Digitization B8449-S015.

wire to sister Jones Roome because he could only get off to meet his ‘sister!’”<sup>27</sup> Captain had to imply that Jones was already his sister, rather than explain her status as a future sister-in-law, to gain priority in the planning of coordinated leaves.

While the CAMC understood the bond between siblings and made attempts to bring families together, the support between the nursing sisters was even stronger. Throughout the week of June 5<sup>th</sup>, 1916, Clare Gass made multiple diary entries about travelling to the Red Cross with a fellow nurse, so that Gass could support her friend while her friend Mrs. Griffins searched for her brother. She writes,

Mrs Griffins brother was last seen by one of these men lying on his face in a trench. Louise McGreer’s brother has been in the thick of it - & there are thousands of others. It is terrible. I went down to the Red Cross today with Mrs Griffin in hours off to see if we could get news ... We heard from a patient also that Murray Anderson, Ruth’s cousin, was reported at one of the Clearing Stations shot through the lungs.<sup>28</sup>

From Ruth Loggie’s diary, it appears that Clare Gass immediately sent a letter to notify Loggie, who received the letter six days later.<sup>29</sup> Gass visited the Red Cross with Mrs. Griffin again later in the week, and eventually recorded that Mrs. Griffin’s brother was confirmed to be deceased. When the brother of a fellow nursing sister was wounded or killed in action, the women shared in each other’s grief. Helen Fowlds wrote to her mother on May 9, 1915, that “One of the girls here a Miss Smith from Montreal lost her brother April 29, but did not know definitely for over two weeks, she is terribly cut up of course and we all feel it too.”<sup>30</sup>

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<sup>27</sup> Helen Jones, Diary Entry. June 5, 1918. “Diary – Isabel Ridd Jones and Helen Lorna Jones”. 2015-030/003-05. Jones, Roome, Van Allen Family Fonds. 1918. Nova Scotia Archives (Halifax, Nova Scotia).

<sup>28</sup> Clare Gass, Diary Entry. June 4, 1916.

<sup>29</sup> Ruth Loggie, Diary Entry, June 9, 1916.

<sup>30</sup> Helen Fowlds, Letter to Mother, May 9, 1915. 1915 Letter 17.



The connections with their brothers and the shared experience of grieving contributed to a sense of patriotism and feeling that *all* Canadian patients were in a sense, their brothers. Nurses saw the aftermath of battles each day, knowing that their own relatives might be among the casualties. Many nursing sisters took comfort in the heroism and success of Canadian soldiers, such as when Helen Fowlds wrote home to comfort her mother with the exclamation that “The Canadians!!! Mother we should be proud to think we have one of our boys with them.”<sup>31</sup> The nurses supported one another in moments of grieving, not only for their own family members, but for their fellow Canadians. As was apparent with Clare Gass’ purchase of flowers for a Nova Scotian patient, connections to national and regional identities mattered to nurses. Gass frequently reported in her diary on the major Canadian campaigns and referred to the men as “Our Canadians.” Ruth Loggie held similar patriotic sentiments, and when criticizing the hospital where she was placed in June 1915, her most scathing critiques assert, “One couldn’t fancy anything worse than the management staff here in every way. A disgrace to Canada” and “To think our brothers may someday be brought to this place and to think that it is NOT Canadian.”<sup>32</sup> She implied that any other non-Canadian hospital would offer less-than satisfactory care. The idea of one day treating Canadian brothers at the hospital motivated Loggie and the nursing sisters to work through the difficult wartime conditions. Helen Fowlds wrote similar sentiments in 1915, when she told her mother, “I always think of the men as Eric and try to do for them what I hope others will do for him if he ever needs it.”<sup>33</sup> Canadian brothers became a prominent narrative amongst the nurses, evident in their most personal writings. The nurses’

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<sup>31</sup> Helen Fowlds, Letter to Mother, May 9, 1915. 1915 Letter 17

<sup>32</sup> Ruth Loggie, Diary Entry, June 4, 1915; Ruth Loggie, Diary Entry, June 8, 1915.

<sup>33</sup> Helen Fowlds, Letter to Mother, May 9, 1915. 1915 Letter 17.

relationships with patients were being shaped by a heightened sense of national identity, and the personal interactions were being viewed as sibling-like in nature.

### **Patients Viewing Nurses**

The soldiers saw the CAMC nurses through the same lens of national identity, though the nurses' view of a sibling-like love was countered by a more sexualized, romanticised view from the patients. The term sister was commonly used by both soldiers and civilians, and yet, did not carry the same literal interpretation as the nurses' use of brother.<sup>34</sup> It was simply a part of the term "nursing sister" which was used to refer to the women. The male patients were seeing nursing sisters as female bodies, and as potential wives. Perhaps the most striking illustration of this is found in Margaret Elliot Reilly's autograph book. The illustration on page fourteen, dated September 9, 1916, remains unsigned and depicts a nurse, likely Reilly, wearing dress with floral decoration on the collar, and a veil. The veil is drawn in a looser style than the way it would be folded for wear with uniforms, as though it is intended to depict a wedding veil (Fig. 4.4). The caption reads "Suggestion for alteration in official nursing Sisters head-dress."<sup>35</sup>

The religious connotations of the veils were also not lost on patients. As discussed in chapter three, veils held their own meanings in addition to the military elements of the buttons and badges. Historian Meryn Stuart describes veils as simultaneously projecting sexuality and

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<sup>34</sup> Cynthia Toman, *Sister Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps* (Vancouver: UBC Press, 2016), 3.

<sup>35</sup> "Autograph Album" 19920080-006. Fonds of Nursing Sister Margaret Elliot Reilly. 1916-1918. Canadian War Museum (Ottawa, Ontario), 14.



Figure 4.4, Unknown artist, Illustration of nursing sister wearing veil in decorative style. 1916. Page 14 in Margaret Elliot Reilly's autograph book. 1916 ("Autograph Album". 19920080-006Canadian War Museum. Ottawa, ON.)

purity, with this duality being captured in the portrait of Nurse Reilly.<sup>36</sup> One can imagine the emotional interpretations of veils that would be present when a soldier first arrived to a CAMC hospital. To have a woman care for you, wearing such a symbolic garment, would have been a drastic change in scenery from the trenches of the front lines. The unknown artists' drawing of Margaret captures the ways many soldiers blurred the lines between medical care and personal relationship in their views of nurses. One soldier chose to identify Margaret by her veil; and expressed a desire to continue their relationship after the war. The desire to turn the nurse-patient relationship into something romantic, and long-term, was

frequently articulated through autograph books. The connotations of purity attached to the veil were transformed into the suggestions of an intimate and sexual relationship. At the same time, the choice of marriage as the focus, rather than something more explicitly sexualized, speaks to

<sup>36</sup> Meryn Stuart, "Social Sisters: A Feminist Analysis of the Discourses of Canadian Military Nurse Helen Fowlds, 1915-18" in *Place and Practice in Canadian Nursing History* ed. Jayne Elliot, Meryn Stuart, and Cynthia Toman (Vancouver: UBC Press, 2008), 36.

the nurse-patient bonds and how patients felt they formed life-long, deeply personal relationships with the women.

The relationship was heavily influenced by contemporary gender roles, and the nurses' challenges to the patriarchal systems within the military and greater society. While in the hospital, women held positions of power, where soldiers were reliant on care they provided. Soldiers' views of the nurses' authority are evident in an illustration left by Frank Woy in the autograph book of sister Gertrude Mills. Titled "The Long & Short of It", the cartoon depicts differing perspectives of nurses and patients, with the image divided into two panels, labeled "imagination" and "reality" (Fig. 4.5). In the first "reality" panel, the injured man is depicted as physically much stronger than the nurse, despite his visibly injury with his arm immobilized in a cast and sling. The nurse points up towards the man and delivers an order. The second panel "imagination" featured the artist's interpretation of the nurse's perspective. Here the nurse is much larger than the patient and looks down upon him while delivering her instruction. It is interesting to note that in this panel, her uniform is much more detailed, and her rank badges and buttons are clearly depicted despite the small image. The comedy of Frank Woy's cartoon is rooted in contemporary gender roles, and in a difference of perspective based on sex.

The "reality" panel does not deny that the nurse is in a position of authority, while approaching this power dynamic with humour – and acknowledging the multiple interpretations of nurse-patient relationships. The disruption of gender roles presented by the nurses' authority was not lost on the men, who would not be used to taking orders from unmarried women. Though the nurses understood the unique nature of their status, they were committed to overlooking gender norms and remaining professional. The response of Frank Woy was to utilize comedy to define the nurse-patient relations, and in turn to confuse the nature of the relationship.



Figure 4.5, Frank Woy, “The Long and Short of It”, 1916. Page 31 in Gertrude Mills’ autograph book. (“Autograph Album”, 20020161-002. Canadian War Museum. Ottawa, ON.).

The humour plays upon the physicality of the relationship, but also the social contexts that surrounded these unprecedented male-female power structures. This illustration suggests that some patients disregarded the professionalism and authority of the nurses as imaginary. They saw them as women first, and medical professionals or military servicemembers second. The

cartoon also suggests that the nurses sought to uphold the “dignity and professionalism” required of them by the CAMC, despite the complicated personal relationships with patients. They saw the men as patients first, and fellow Canadians, military servicemen, and “brothers” second.

Soldiers’ views of the nurses’ gender can be studied through the patients’ conflation of physical appearances and medical care. Throughout the poems, signatures, and illustrations left in autograph books, there is a pattern of comments on smiles and appearances. Comments on smiles were often casual and complimentary in nature, though some suggest that smiles contribute to nurses’ ability to care for patients. In the words of patient Corporal P. Huthance, 5<sup>th</sup> Battallion Australian Imperial Force: “One of the essential qualities of a nurse is to always be pleasant.”<sup>37</sup> He inscribed this as part of his two-page cartoon illustration within the autograph book of Clare Gass. The images clearly depict Gass, complete with her wire-frame glasses, and show her walking through the ward (Fig. 4.6). The first page shows Gass walking quickly past her patients with a stern expression, with the caption “to show one is in a scot is to have a depressing effect on the patients” – as the men hide under blankets and look uneasy around their nurse. The second page shows Gass walking calmly with a “pleasant expression,” which “has the opposite effect” of the first panel. Here the men sit up, smiling, as they try to get a look at their nurse. The image depicts a patient approaching Clare as opposed to hiding from her. The background of the two images depicts entirely different hospital experiences for the men, hinging only upon the facial expression of a nursing sister. The “pleasant” demeanor of nurses is being equated with the medical treatment provided at hospitals – as the “depressing effect” is evidently impacting the men’s experiences and care. The illustration is signed “For Miss C. Gass never to

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<sup>37</sup> Clare Gass Autograph Book, published in *The War Diary of Clare Gass*. Ed. Susan Mann (Montreal: McGill Queens University Press 2004), 176-177.

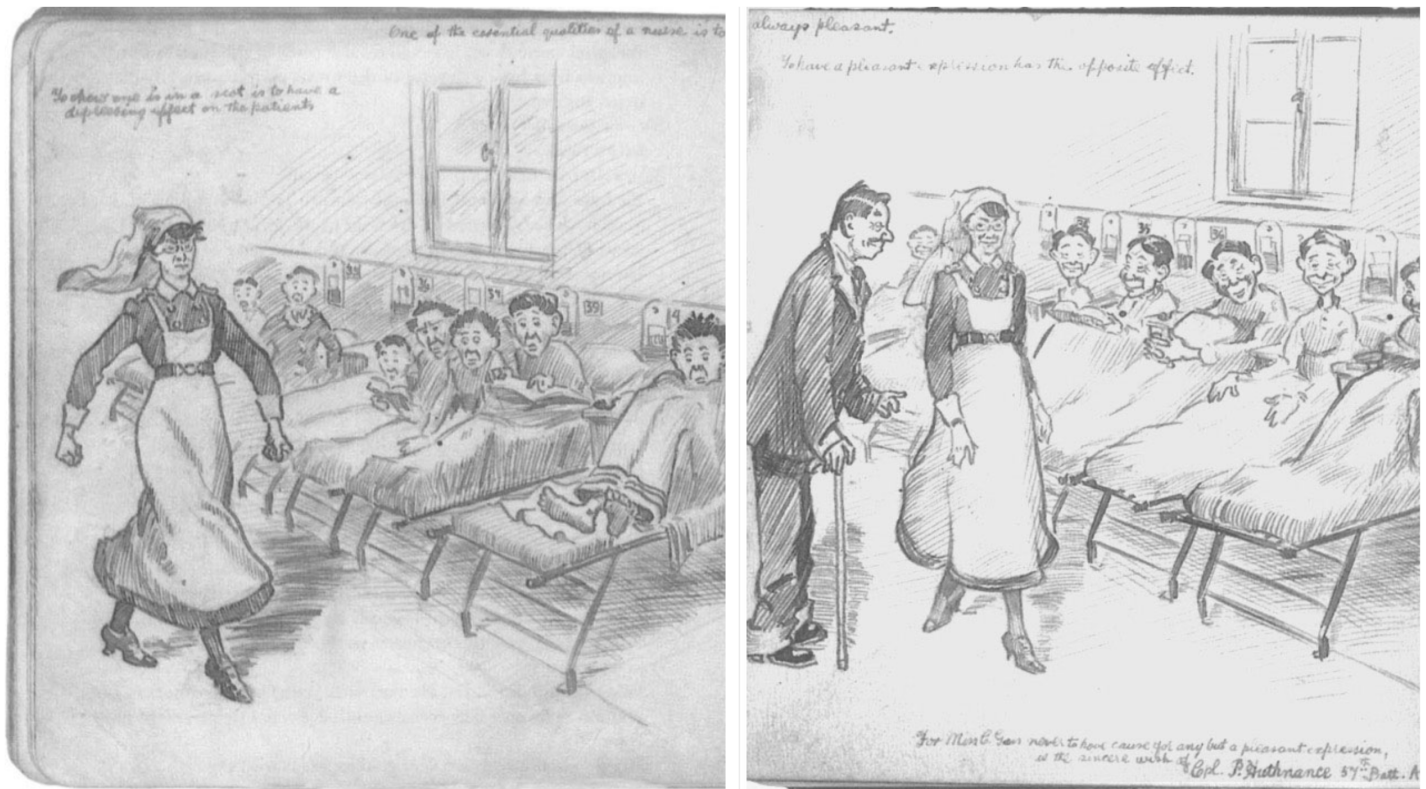


Figure 4.6, P. Huthnance, multi-panel illustration of Clare Gass, drawn in Clare Gass' autograph book. (Published in *The War Diary of Clare Gass*, ed. Susan Mann. Montreal: McGill Queens University Press, 2004).

have cause for any but pleasant expression, is the sincere wish of Cpl. P Huthnance....”<sup>38</sup> His focus on smiling expressions, both during and after care, speaks to the desire for post-war relationships. In Annie Macdonald’s book, the poem “Smile Awhile” was likely a transcription of a popular greeting card note, which reads, “And while you smile, others smile / and soon there’s miles & miles of smiles / and life’s worthwhile / because you smile”<sup>39</sup> A more personalized version can be found within Margaret Elliot Rielly’s book, where Lieutenant

<sup>38</sup> Clare Gass Autograph Book, published in *The War Diary of Clare Gass*. Ed. Susan Mann (Montreal: McGill Queens University Press 2004), 176-177.

<sup>39</sup> “Autograph Book” MG 20.21 1.1. Annie MacDonal Fonds. 1918. Beaton Institute Archives, (Sydney, NS), 16.

Medley wrote “Her tread is light, her smile is bright / Her touch a thousand aches dispel / And when we’re sick and all broke up / Our Sister Rielly makes us well”<sup>40</sup>

Patients discussed nurses’ appearances as a form of care, which continued after leaving the hospital. A poem titled, “To – A Lady” and found within Winifred Byrne’s autograph book exemplifies this. The patient wrote “Sister Byrne has eyes of blue / a heart of gold that rings quite true / a gentle, smiling, winning, way / that makes one wish they’d come to stay/ she eases the aches and soothes the pain / that whilst I’m up the line again / I’ll see at almost every turn / The kindly face of Sister Byrne / For she is sure – Some Sister”<sup>41</sup> This sentiment of nurses continuing to care for the patients once “back up the line” is again captured in an illustration by Albert Underwood in the autograph book of nursing sister Florence Price (Fig. 4.7). Here the soldier is depicted dreaming of Florence, who is shown in her uniform veil. The nurse is

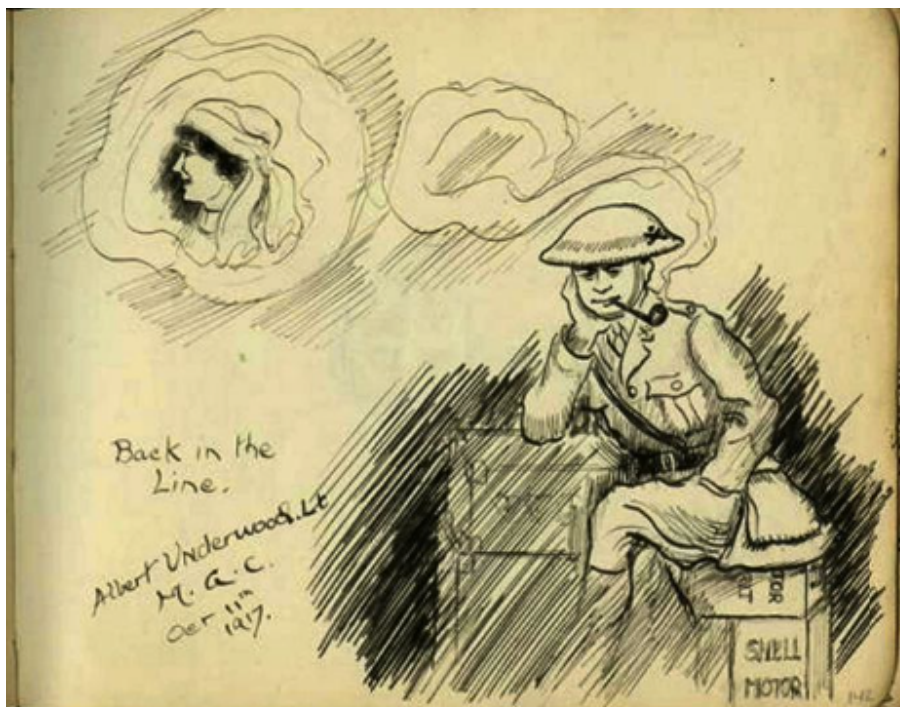


Figure 4.7, Albert Underwood, “Back up the Line”, 1917, page 142 in Florence Price’s autograph book. “Autograph Album”, 19990007-001. Canadian War Museum. Ottawa, ON.

<sup>40</sup> “Autograph Album” 19920080-006. Fonds of Nursing Sister Margaret Elliot Reilly. 1916-1918. Canadian War Museum (Ottawa, ON), 46.

<sup>41</sup> “Autograph Album”, 19810519-001. Fonds of Nursing Sister Winnifred M. Byrne. 1916. Canadian War Museum (Ottawa, ON), 82.



remembered in her working attire, and as with the imagery created by the poem about sister Byrne, the soldier's memory of the nurse is defined by her appearance. Just as patients were conflating nurses' appearances to a form of medical care within the hospital, memories by extension offered a form of emotional support once "back up the line".

Emotional care was an important part of military nursing, allowing soldiers to think about the nurses' as women, rather than professionals. In another book, kept by Emma J Walters throughout her time serving at the Dalhousie No. 7 Canadian Stationary Hospital, a patient describes the No. 7 nurses' gentleness, smiles, and emotional support. The man, who signed only with the initials A.B, composed a song,

Hospital Blue / Nothing to do / The day would seem long and so dreary / But the sisters all three / Are as nice as can be / Smile a smile that is always so cheery // Recovery's quick / For wounded and sick / The pain whether bodily or mental / The patients all know / It surely will go / When handled by Sisters so gentle.<sup>42</sup>

Despite all using different mediums, these patients all captured the same sentiments and created similar portraits of the nursing sisters. It can be questioned whether this emphasis on appearances and personality was undermining the authority of nursing sisters as lieutenants and medical professionals, or was simply a way of articulating their responses to more emotional, psychological care. As seen in the "reality versus imagination" cartoon, the men did not necessarily take the women's position of authority seriously. Evidently the patients and nurses did not share the same perspective, contributing to complicated relationships between the two.

One similarity in how the two parties viewed nurse-patient relationships can be found in feelings of Canadian patriotism. Although the gendered, often sexualized views of nurses

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<sup>42</sup> Emma J Walters, Autograph Book, Registered Nurses Association of Nova Scotia fonds, Item 202200701. Nova Scotia Archives (Halifax, NS)

opposed the “sibling” narratives of nursing sisters, there is evidence of Canadian patients forming personal bonds with CAMC nurses. The Canadian identity of the nursing sisters is frequently noted throughout autograph books, with nurses in some cases being referred to as “Canada”.<sup>43</sup> This was a more common practice amongst the VAD and QAIMNS, as nurses were often the only Canadian in their unit. Before transferring into the CAMC, both Helen Jones and Irene “Bessie” Beyer were identified by their Canadian citizenship. While serving as a VAD nurse, Helen Jones noted in her diary that the Matron would alert her to the arrival of new Canadian nurses, or large convoys of Canadian patients.<sup>44</sup> Bessie Beyer maintained contact with many of her former patients, whom she cared for as a QAIMNS nurse, and a collection of these letters is now held at the Canadian War Museum. Multiple men address their letters to “Canada” rather than to Beyer herself, and Jack Redmon provides a possible explanation for this nickname, writing to her that “oh such a bunch of Canadian Girls here, I guess it wouldn’t interest you tho as I remember you ever peeved because you weren’t the only Canadian Girl at 12 Stat[ionary].”<sup>45</sup> Beyer did not experience the military status and public adoration of the CAMC uniform until she transferred into the Canadian Expeditionary Force, however her experiences and relationships with patients were already influenced by her Canadian identity. The same identity is given to Margaret Elliot Rielly, when a patient titled her portrait “Canada” (Fig. 4.8). There was a clear bond between Canadian patients and Canadian nurses, with Canadian nurses being especially proud of Canadians.

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<sup>43</sup> Elizabeth Hirst, *They Called Her Canada: The War Diaries of Nursing Sister Bessie Beyer* (St Catharines: Mayholme Foundation Press, 2015).

<sup>44</sup> Helen Jones, “Correspondence, Diary, photographs of Helen Jones (Mrs. REG Roome)”. 2015-030/001-08. Jones, Roome, Van Allen Family Fonds. 1916-1972. Nova Scotia Archives (Halifax, Nova Scotia).

<sup>45</sup> Jack Redmond Letter to Irene Bessie Beyer. 1985044-036\_9. “Letters to Bessie Irene Beyer”, Fonds of Nursing Sister Bessie Irene Beyer. 1916-1918. Canadian War Museum (Ottawa, ON).



Figure 4.8, “Canada” portrait of Margaret Elliot Reilly. Page 89 in Margaret Elliot Reilly’s autograph book. (“Autograph Album” 19920080-006. Canadian War Museum. Ottawa, ON.)

As can be seen with the injury of Ruth Loggie’s cousin Murray, there were unofficial networks of communication between Canadian patients and nurses. Clare Gass was informed by a patient that Murray was wounded. Loggie was away on leave in Scotland, and therefore the patient’s knowledge of the relationship to Murray came through Gass. It is likely that Gass and the patient would have discussed their lives back home in Canada, and found similarities that linked the patient to Loggie’s family. With pre-war lives of nurses being discussed, it appears that patients quickly learned where in Canada each nurse was from – allowing for these networks of communication to thrive. Only a few days after the news of Loggie’s cousin, Gass was notified that her brother

Cyril had been wounded in the same battle. She wrote that “Early this morning a patient from the 25<sup>th</sup> in Ward B (MacLeod) sent for me to let me know that Cyril is wounded...”<sup>46</sup> The arrival of new patients created a constant flow of information, keeping nurses up to date on any news from the front lines. Clare Gass’ accounts of Canadian campaigns are clearly influenced by both

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<sup>46</sup> Clare Gass, Diary Entry. June 13, 1916.

official CEF news and by patient's accounts of the battles. They contain both official casualty numbers, and specifics on the types of wounds and experiences patients arrive with.<sup>47</sup>

The exchange of news, and discussions of Canada, were key elements of the hospital environment. When there is a shortage of updates and stories of victory, Helen Fowlds described how the social climate in the hospital was impacted by a shortage of updates front the front lines. She wrote to her mother stating, "There is nothing doing up at the front and consequently it is the same here, and these are the hardest times for everyone. The men are all so irritable and pessimistic there's no living with them and we are all nearly as bad."<sup>48</sup> When a large group of wounded Canadians was transported to the No. 1 Canadian Stationary Hospital, Helen wrote home asking her mother, through the Imperial Order Daughters of the Empire, to send socks, cigarettes, pencils, and "bundles of Canadian papers – as we have heaps of our boys in just now – old magazines – all those things are in demand constantly."<sup>49</sup> Fowlds understood the importance of connecting patients to their homes, and was going above and beyond her nursing duties to locate personal comforts for the Canadian patients. Soldiers served as connections for the nurses to their friends and family – and in return nurses served as comforts and connections to their shared home country.

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<sup>47</sup> Clare Gass. *The War Diary of Clare Gass*. edited by Susan Mann. Montreal: McGill Queens University Press, 2004.

<sup>48</sup> Helen Fowlds, Letter to Mother, June 29, 1915. 1915 Letter 26.

<sup>49</sup> Helen Fowlds, Letter to Mother, April 24, 1915. 1915 Letter 15.

## Responses to Nurse-Patient Relationships

### *Military Personnel*

The connections between Canadian nurses and patients were met with judgement from British nursing services, who looked down upon the Canadian nursing style as overly personal, and contributed to the CAMC nursing reputation internationally. These sentiments were summarized in Mabel Clint's 1936 memoir, which noted, "If ever the 'human touch' was needed it was in the Great War. We allowed our patients more liberty, but our wards looked less orderly."<sup>50</sup> Despite criticisms from British nurses, Clint asserted that patients preferred the "Canadian way," citing an example where "a man who was nursed by Canadians, to another incoming patient [said] 'I'll say the Canadians are looking after him, and he'll be alright.'"<sup>51</sup> Helen Fowlds recorded some of her less than pleasant interactions with British nursing sisters, amidst frustration over the Harold Begbie publication critiquing CAMC nurses. In addition to Begbie's insults towards the uniform, Fowlds felt that "another objection he has to us is that we look as if we're enjoying ourselves."<sup>52</sup> A few days after her initial reaction to the publication, she wrote her mother to tell "our side of it" as she shares her critiques of British nurses.<sup>53</sup> When visiting a Red Cross hospital, Fowlds and her friend, nursing sister Ida Smith, felt they were disrespected by VAD nurses. The nurses passed judgement over Helen and Ida riding their bicycles – implying judgements against the frequent "joy rides" of Canadian nurses. Helen found it questionable that these untrained nurses would judge the actions of professional, "legitimate" CAMC nurses.<sup>54</sup> She stated that the British

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<sup>50</sup>Mabel B. Clint, *Our Bit: Memories of War Service by a Canadian Nursing Sister* (Montreal: Barwick Limited, 1934), 43.

<sup>51</sup> *Ibid*, 43.

<sup>52</sup> Helen Fowlds, Letter to Mother, June 3, 1915. 1915 Letter 22.

<sup>53</sup> Helen Fowlds, Letter to Mother, June 11, 1915. 1915 Letter 23.

<sup>54</sup> Helen Fowlds, Letter to Mother, June 11, 1915. 1915 Letter 23.

nurses also went out on bicycle rides in their spare time, but that the Canadians were only ones judged for it.

Another point of tension between Canadian and British nursing sisters was the difference in the regulations surrounding the CAMC and RAMC nurses' permission to dance with male officers. Matron-in-Chief Margaret Macdonald's wording in "Instruction 61" allowed her the final say in the regulation of nurses' relationships with men. The regulation that "She will be careful to exercise due courtesy and dignity in all her relations with officers, NCO, men and patients" was left to be more narrowly defined by Margaret herself during the war. When in 1917 British Matron-in-Chief Maude McCarthy attempted to ban dancing for all nurses working within British hospitals, including those enlisted with the CAMC, Margaret Macdonald refused to enforce the ruling upon her nurses. Macdonald wrote to McCarthy to state her reasons, explaining that

For long you have been aware that dancing goes on in the Canadian Units and I have been equally aware that it is not permitted in Imperial Hospitals ... That in off duty time all Nurses in the Field require diversion and amusement is an outstanding fact and without doubt, dancing is one of the favourite pastimes of Canadians. The see[m]lines of it under existing conditions is a debatable point with the French but not so with the majority of English people, I judge. Observation proves that given pleasant and congenial surroundings, greater efficiency, regards work is assured. The circumstances that the society of women has a healthy and wholesome influence among men is more evident now than ever before; it almost seems that dancing is part and parcel of a soldier's tonic and curative treatment over here. I am convinced that as long as it is recognized as legitimate in their quarters, Nurses will assuredly not break the rules to seek entertainment elsewhere<sup>55</sup>

The conversation around the appropriateness of these events continued throughout the war, and so did the Canadians' dancing.

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<sup>55</sup> Margaret Macdonald letter to Maude McCarthy, quoted in Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal: McGill Queens University Press, 2005), 127 – 128.

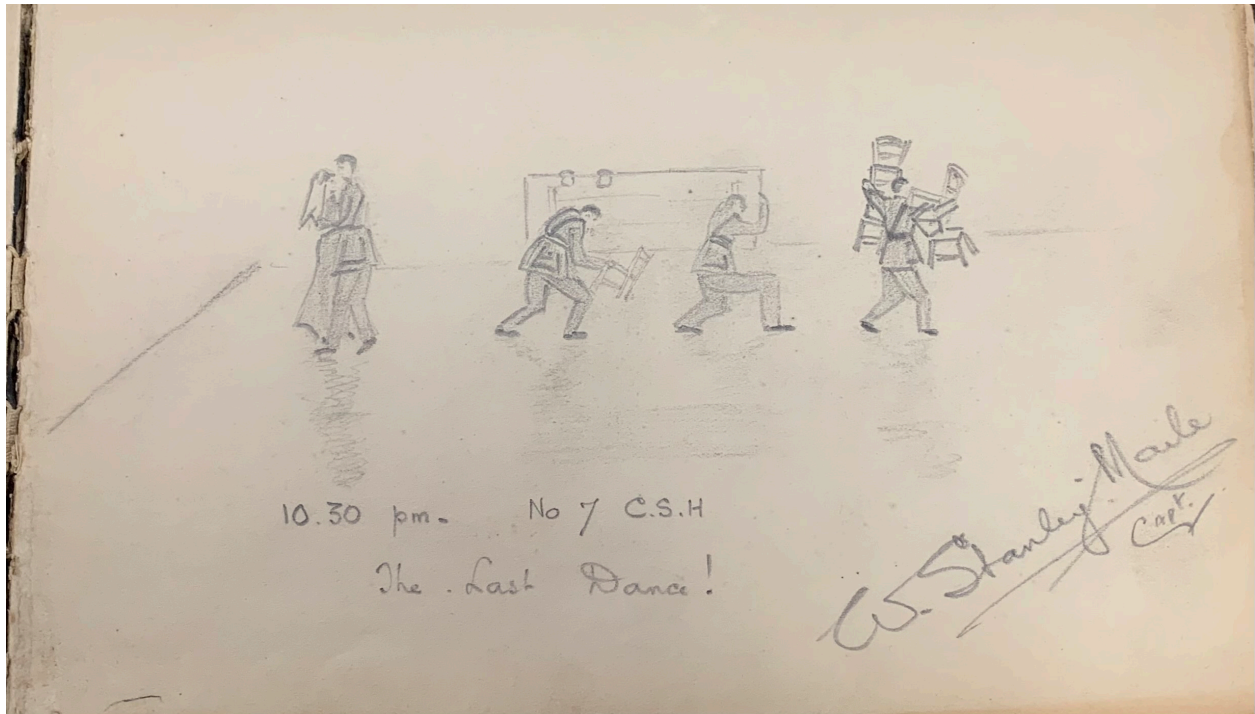


Figure 4.9, W. Stanley, “The Last Dance”, page 10 in Emma Walters’ autograph book Photograph by author. Autograph Book. Registered Nurses Association of Nova Scotia fonds. 202200701, Nova Scotia Archives, Halifax, NS.

In her defence of dancing, Matron-in-Chief Macdonald implies that personal relationships are a part of military medical care, mirroring the sentiments of soldiers throughout autograph books. The frequency of dances is illustrated throughout autograph books, and nurses’ diaries, as both nurses and patients sought to preserve these moments within their wartime memories. In the autograph book of Emma J Walters, Captain W. Stanley contributed an illustration titled “The Last Dance” (Fig. 4.9). It is important to note that this signature and illustration were from a Captain, and therefore the dancing would have been judged in a slightly different light due to his status. He was still a man, and the dance was viewed as a contravention of “Instruction 61.” This dance was clearly an impactful moment for the officer, as he chose to commemorate his time at the No. 7 Canadian Stationary Hospital with this memory. The details of the drawing speak to this being a personal moment between the officer and nurse, and he

emphasises the fact that this was the final dance of the evening, at 10:30pm. Three men can be seen cleaning up the chairs and decorations, while the two dancers are seemingly lost inside their private moment. He could have drawn the dance hall while it was full of other men and women, implying that they all danced with one another. The artist clearly wanted to emphasise the intimate nature of his memory.

Though dancing and personal interactions with the patients were permitted, and even encouraged by Margaret Macdonald, the CAMC organization was skeptical of male-female relationships within their service. When Helen Fowlds was transferred to a new hospital in Lemnos, she noted the importance of impressing the CAMC with their nursing abilities or else the unit would be recalled to France. She wrote to her mother of the hospital drama concerning the matron, who wished to leave Lemnos, and who desired a recall despite Fowlds' concern that it "would damn us forever."<sup>56</sup> Fowlds' noted,

Charleson is unspeakably awful as a Matron. She acts like a common servant and if there is anything that should be left unsaid she always says it ... We need a Matron to take hold of the Social end of it, for it's by our actions socially that we stand or fall in these men's estimations. Our nursing only counts with the Medical H.Q and we know that is as good as can be – The girls have worked awfully hard.<sup>57</sup>

The CAMC was concerned with the medical capabilities of their staff, and evidently left the social environments, and therefore elements of the personal and emotional care of patients, to the nurses. With Matron-in-Chief Macdonald intervening at the highest levels of the CAMC, it is likely that her influence and perspectives on nursing were followed by matrons. Ruth Loggie encountered the difference in perspective from the higher-up, medical H.Q when she was disciplined for her close relationship with patients. She recorded the interaction in her diary, on

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<sup>56</sup> Helen Fowlds, Letter to Mother, September 19, 1915. 1915 Letter 37.

<sup>57</sup> Helen Fowlds, Letter to Mother, September 19, 1915. 1915 Letter 37.



July 22, 1915, when she "...Got a 'call down' from the O.C for spoiling the patients and for talking back. He certainly is a disgrace to Canada and to Saint John particularly. He reported ward L to Violet [Nesbit] who in turn came to us. No sentimentally inclined sisters to be placed there."<sup>58</sup> It was evidently a careful balance between delivering effective, personal care and maintaining "dignified", professional appearances.

### *The Canadian Public*

The media narrative of the merciful nurse was built upon contemporary gender roles and assumed that all nurse-patient relationships were inherently personal. Short stories and poems were popular mediums for publishing patriotic material, in Canadian magazines such as *Maclean's*. The use of creative writing allowed the author to exaggerate stereotypes associated with nursing sisters. Ida Randolph Spragge was a frequent contributor of poetry to *Maclean's* throughout the war, and her work "The Price of Freedom" was published in the September 1915 issue. The poem follows a nurse, presumably Canadian, as they comfort a dying soldier. The poem opens "In the anguished arms of a nurse there lay / One broken beyond repair; / Not knowing his life was ebbing away / Nor sensing her pitying prayer".<sup>59</sup> After asking the nurse to contact his mother back home, "A hot tear splashed on his paling cheek / He looked at the nurse in surprise / And there he read, while his soul grew weak / His fate, in her brimming eyes". The poem ends with the soldier's death, as "Long, strangling sobs shook the sorrowing nurse / 'Another hideous wrong!' / And her brave soul sickened beneath the curse / 'How long, O God, how long?'"<sup>60</sup> In this poem, the nurse is not present to provide medical care, but simply to hold

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<sup>58</sup> Ruth Loggie, Diary Entry, July 22, 1915.

<sup>59</sup> Ida Randolph Spragge, "The Price of Freedom", *Maclean's Magazine*, September 1, 1915.

<sup>60</sup> Ibid.

the soldier and mourn his death. She is described as pitying, sorrowing, and brave. There is a clear attempt to create a parallel between the nurse and the soldier's mother, and with the readership. The vague description of the woman allows for readers to see themselves in their nurse, as she cries out 'how long?!' in reference to the war.

Fiction stories presented an opportunity to play upon the "merciful nurse" narrative, without being restricted by facts or military censorship. The article "The Youngest Countess' Christmas" by Mona Cleaver, pen name "Polly Peele" did exactly that. It was published on December 25, 1915 in *The Globe*.<sup>61</sup> Cleaver was a notable journalist, with a substantial following of young Canadians through her column *The Post Office*. The inclusion of Cleaver's pen name under the title suggests that this story was targeted at young Canadians – who would likely relate Nancy Burbridge, or the "Youngest Countess". Throughout the article the countess develops relationships with multiple patients, and Cleaver provides detail on their interactions. The countess meets a boy "who had once visited her own Canada, [and] spoke really intelligible English" and she is heartbroken when he dies. With the remaining patients speaking French, an older nurse teases Nancy that perhaps she will get another English-speaking patient for Christmas. During a moment of introspection, Nancy decides that she would not wish to go back home for a "conventional Christmas", as she is proud to see all the men she is helping. She meets a Canadian patient, on Christmas day, and just talking to him about Canada leads her to state "It was a nice Christmas present after all". Later that day, the patient boldly declares to Nancy that "You've been the one bright spot in the day, and you're bright enough to illuminate the whole of it. And every day of my life, if you'll only say that some time perhaps I might call you MY

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<sup>61</sup> Cleaver, Mona [Polly Peele] "The Youngest Countess' Christmas" *The Globe and Mail* (Toronto, Canada), December 25, 1915.

Countess”<sup>62</sup> This could have been a common occurrence for nurses, to have patients say aloud the same sentiments they were writing in autograph books. Where Mona Cleaver begins to take creative liberty is in the ending of the story, where Nancy ignores the needs of a patient nearby, so that when he needed her “there was no voluntary aid from the countess” – rather Nancy sits holding the hands of a Canadian patient, stating that they were one another’s Christmas gift. This story was published on Christmas in Canada, and likely would have led to emotional responses amongst the readership, through its fictitious exaggerations of the merciful nurse.

Even within reports of official military information, the discussion of nursing sisters was filled with gendered descriptors, and romanticised views of their relationships with patients. In a June 18, 1918, “Canadian Press Dispatch” published in *The Globe* newspaper said, “A remarkable story of the heroism of Canadian nurses is contained in the cable received by the Department of Militia and Defense from overseas...”<sup>63</sup> The article describes the conditions and bravery of nurses working amidst German bombings. It details “how women of the Dominion had to wear gas masks for hours while carrying out their gentle tasks” and “work of mercy.”<sup>64</sup> There is a clear emphasis on the “gentle” care of these women, as the article plays into the public’s view of nurses as merciful, motherly, and feminine. The article paints an image of the active war zone, describing a “surgical hut rocked with the force of the explosions from bombs that dropped only a few yards away.”<sup>65</sup> Amidst the shrapnel and chaos, the nursing sisters are described as calm and gentle. The nurse is praised as being “as cool as she was courageous – a

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<sup>62</sup> Cleaver, Mona [Polly Peele] “The Youngest Countess’ Christmas” *The Globe and Mail* (Toronto, Canada), December 25, 1915.

<sup>63</sup> Canadian Press Dispatch, “Made Hun Take His Own Medicine / Captured German Officer Wanted to be Placed in Dugout / Hospitals Were Bombed / Inspiring Bravery of Canadian Nurses During Recent Outrages” *The Globe* (Toronto: ON), June 18, 1918.

<sup>64</sup> Ibid.

<sup>65</sup> Ibid.

wonderful tonic for the shell-wrecked men who were in her care.” Despite these women being active service members, they are not treated as Lieutenants. The article discusses their actions as surprising, and impressive to have come from women. When helping men to shelters during a raid, it is not the efficiency but rather the “gentleness” with which they act that is continually noted. When writing for public audiences, it was not the details of military medical care that impacted readers, but rather the personal nature of nurse-patient relationships. The women’s gender and perceived feminine characteristics were exaggerated to focus more closely on the unprecedented male-female dynamic.

The public’s desire for media content related to Canadian nurses caring for Canadian soldiers began to threaten the women’s privacy while working overseas. To get first-hand accounts, and meet the demand for nurse-related content, personal letters were being published – often without the nurses’ consent. There were also nurses who willingly gave up information and received a certain level of celebrity status for it. When nursing sister “Mrs. Burns” returned to Canada in 1915, she gives interviews and shares details of her experiences serving so far. In the July 23, 1915 article “Canadian Nursing Sister on Leave” Mrs. Burns is interviewed by Mona Cleaver.<sup>66</sup> Mrs. Burn’s interview being with one of the most popular journalists for women’s content in Canada speaks to the large audience awaiting her stories. Mrs. Burns received enough fame in Canada that Helen Fowlds was aware of it while serving in Greece. Fowlds wrote home to warn her mother of “A Mrs Burns – who has been talking a lot in Canada ... She is a most dangerous and unscrupulous woman and in case she ever said anything about me that may have reached you through the Beamishs you may rest assured that I have never been better since I

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<sup>66</sup> Mona Cleaver [Pen Name Polly Peele] “Canadian Nursing Sister On Leave” *The Globe and Mail* (Toronto, Canada), July 23, 1915.

came on active service...<sup>67</sup> The primary concern was that Mrs. Burns had told stories of meningitis in France and included Helen Fowlds' as one of the nurses who fell ill.<sup>68</sup> The public was anxious to hear of every detail regarding their Canadian men and women in hospitals overseas, and Mrs Burns was evidently catering to the demand.

When the flow of information from nurses slowed down, Canadian newspapers looked to personal letters to find their stories. The incident with Mrs. Burns was not Helen Fowlds' only "scare" with the Canadian media. Her constant contact with her mother provides interesting insights into the differences between Canadian newspaper reports and Helen's first-hand knowledge of Canadian military operations. In May 1915 her mother inquired about these differences, wondering why the Canadian papers were not reporting on the nurses' treatment of Canadian patients, when Fowlds had been personally telling her about it. Fowlds' response is that "We fill up our day and usually evacuate the next so that is the reason the papers do not mention us having any of the Canadians. We have lots of them but not long enough to really say we have them as patients."<sup>69</sup> Soon it was common knowledge that personal sources had better information, and letters began to be stolen for publication. By September of 1915 Helen writes home that "I'm not writing many letters these days – it's too big a risk to take – for the people are so news crazy they can't resist the temptation of showing that they have a little 'ground floor information' ... in this unit alone we have people from one end of Canada to the other and practically every paper of any account comes to someone."<sup>70</sup> This frustration is noted in multiple others letters, as Helen describes to her mother the creative ways she must send her

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<sup>67</sup> Helen Fowlds, Letter to Mother, December 13, 1915. 1915 Letter 45.

<sup>68</sup> Helen Fowlds, Letter to Mother, December 13, 1915. 1915 Letter 45.

<sup>69</sup> Helen Fowlds, Letter to Mother, May 20, 1915. 1915 Letter 20.

<sup>70</sup> Helen Fowlds, Letter to Mother, September 11, 1915. 1915 Letter 35.

correspondence with hopes of it remaining anonymous. The official reports of wounded and deceased soldiers were readily available and frequently published – but the content most desirable to the Canadian public was not as easily obtained. The personal relationships between nurses, and between nurses and patients, were kept closely guarded by the men and women.

## **Conclusion**

Despite the fame it would have offered nurses, both during and after the war, autograph books were not published. The deeply personal practice remained private, and the books were kept by family members. It is likely that more books remain in private collections today than are currently available in archives. The illustrations, poems, and heartfelt sentiments were kept out of public view until making their way into archives. For many of the nursing sisters, these books held traumatic memories, and would not have been revisited often. Others may have read through them frequently, to remember the men who signed their names and left such personal messages. Over the years portraits drawn in autograph albums would have become a unique representation of that time in the woman's life, drawn through the lens of her patient. Despite differences in how they perceived the relationship, nurses and patients cared for one another in their own way. The interactions surrounding autograph books were of a personal nature, rather than purely professional.

The personal relationships between CAMC nurses and patients were both celebrated and critiqued, by nearby military personnel and a faraway Canadian public. The Canadian media romanticised the idea of Canadian women caring for wounded Canadian soldiers and created a patriotic narrative that lasted long after the war. Within autograph books, the emotional connections between nurses and patients were not just wartime propaganda, but that Canadian

nurses were combining both professional knowledge and patriotic sentiments in their medical care. The Canadian Army Medical Corps nurses were carving out their own identities, and creating their own relationships, through the development of a unique nursing style.

## **CHAPTER FIVE**

### **Conclusion**

The nurses of The Canadian Army Medical Corps were not defined by any singular identity. Through the study of their daily lives and interactions, the Bluebird nurses can be understood not just as a group or a national symbol, but as a collective of individual women living in extraordinary circumstances. The CAMC nurses have long been at the periphery of First World War histories. Through the study of uniforms and autograph books, this thesis repositioned the nurses as the focus of study. Rather than starting with the national symbolism of the nursing sisters, and studying the women because of these meanings, this analysis began with the nurses themselves and worked outwards into larger histories. The nurses' experiences were shaped by their professional medical training, officer commissions, home country, and gender. Today the CAMC nurses are remembered for their appearance as defined by their famous Bluebird uniforms. The goal of this thesis is to expand this historical legacy to include the nuances of their wartime experiences and leave the reader with a more personal understanding of Canada's First World War military nurses.

### **Unique Experiences**

The study of CAMC nurses through some aspects of their material culture uncovers their unique status and experiences in First World War military nursing. The commissioned rank of lieutenant granted to CAMC nurses within military medical care was unprecedented within the military medical hierarchy. This rank challenged contemporary gender norms in both the military and



greater society, and set CAMC nurses apart from their peers in other allied nursing services. This ranking was clearly displayed through the buttons and shoulder badges of the Bluebird uniform, visually identifying the CAMC nurses as a unique group within military nursing. The military authority displayed on the nursing sisters' uniforms provoked judgement from other nursing services, with differences in military rank and medical training complicating the relationship between allied nursing services.

CAMC nurses were aware of the differences between themselves and other allied nurses and were proud of their unique identities. When RAMC nurses judged their uniforms and nursing practices, CAMC nurses defended their professional integrity, interpreting RAMC judgement as jealousy. Matron-in-Chief Margaret Macdonald and her nursing sisters were protective of their professional identities, separating themselves from volunteer nursing services through the distinctive Full and Working Dress uniforms. The CAMC nurses understood the prestige of their commissioned ranking and asserted that their professionalism was deserving of formal recognition. CAMC nurses recognized the importance of their unique status and were proud of their collective identity.

### **The Agency of Uniforms**

The Bluebird uniform had agency over the CAMC nurses, visually identifying them as a distinctive group in the Canadian war effort and in international military nursing. The uniform continues to define the nurses within histories of the First World War. It was designed to define the nurses as symbols of mercy, dignity, and professionalism. Embedded in the uniform's construction was a balance between conspicuous decoration and practicality. The Full Dress uniform evoked military symbolism and tradition to assert the nurses' high-ranking placement in

the military hierarchy, while the Working Dress signaled a new era within military medical care. The white veil, light blue colouring, and tailored silhouette were designed to highlight the nurses' gender. These feminine elements were combined with the CAMC buttons, rank badges, and belt worn by men of the same rank. The duality of the Working Dress' symbolism contributed to its international recognition.

The symbolism projected onto the CAMC uniform shaped the experiences and identities of the women who wore them. Required to wear the uniform in almost all circumstances, the nurses could not separate themselves from identities displayed upon their dress. This thesis interrogated the uniform as material culture and asked how the uniform influenced the nurses' experiences. The uniform affected how others viewed the nursing sisters, and in turn how the nurses viewed themselves. The complex identities, experiences, and perspectives of CAMC nurses are inseparable from image of the Bluebird uniform.

### **Personal Relationships**

The autograph books of CAMC nurses contained the emotional and personal elements of wartime nursing. The nurse-patient relationship was romanticised by the Canadian public and criticized by RAMC nurses and CAMC superior officers, and autograph books offered a place to preserve memories while keeping them private. Nursing sisters circumvented CAMC instructions which regulated interactions between nurses and patients through these collections of private memories. The deeply personal elements of wartime military nursing may have been left to speculation if not for these documents which offer first-hand accounts of how patients viewed the nursing sisters, and how nurses viewed their patients. The preservation of these books reveals how important these relationships were to both nurses and patients.

Just as the nurses were influenced by how others viewed them and interacted with their uniform, they were shaped by how their patients viewed them. The patients viewed the nursing sisters as women first, and medical professionals second. Patient depictions of nurses, through illustrations and text focused on a woman's appearance rather than her medical authority. Despite seeing one another in different lights, the bond between nurse and patient was important to both parties, and was an essential element of the military nursing experience. While this relationship was idealized by public onlookers, and developed into the archetype of the merciful nurse, the true significance of nurse-patient bonds was privately preserved inside autograph books.

Through an analysis of primary source documents and surviving objects related to the Bluebird nurses, this thesis recoups the unique experiences of CAMC nurses during the First World War, recognizing the complex and unprecedented nature of the CAMC nursing experience. CAMC nursing sisters are commonly defined by their appearance (the "Bluebird" uniform) and by their gender (the merciful nurse). The Bluebirds have become an icon in Canadian military history, discussed for their symbolism rather than their authentic experiences. The CAMC nurses were aware of the narratives being developed around them and worked to emphasise and protect their professional integrity. This thesis shifts the focus onto the nurses, viewing their unique identities as a collective and as individuals. This approach promotes a more intricate and personal understanding of who Canada's Bluebird nurses were, and how they can be remembered.

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