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Fig 1: Photograph of Nurse Jane Heath (c1911) from a printed document in the possession of the editor. The photographer, publisher or printers are not identified. See biography on page 52.

A Thoroughly Cordial Relationship. A Narrative Account of the French Flag Nursing Corps 1914-19.

Peter Jones

The French Flag Nursing Corps (FFNC) was a small organisation of trained British, Irish and Commonwealth nurses who worked not for the British military during the First World War but within the French army. The organisation can be seen as two things. Firstly, it was internationalist in outlook, seeing nursing as being above national boundaries and acting out an obligation to help France in its hour of need. Secondly the Corps can be seen as a means of demonstrating to the French, and probably also to the British, how effective nursing can be when practiced by a workforce whose members are all fully-trained experts.

The Difficulties experienced by the French nursing services.

When the First World War broke out in 1914, the French state was not well equipped to deal with its casualties. France's Third Republic (1870-1940) was frequently anti-clerical. As a consequence, after 1901, many of the Catholic nursing sisters, who had provided the mainstay of French nursing, and military nursing in particular, were unceremoniously evicted from their posts (Schultheiss 2001). They were seen as being tied to the past and standing in the way of progress. In the army, these nursing sisters were replaced largely by male orderlies. Those selected, Schultheiss suggests, were chosen because they had failed in just about every other role the army had given them. The public began to suspect that little progress in terms of the quality of care had been made and, from 1907, female nurses were allowed back into military hospitals. As Schultheiss says, there were however simply not enough suitable applicants to meet the shortfall. Only forty nurses were recruited in the following year (Schultheiss

2001). There had been initiatives in France to improve the standing and expertise of nurses. Dr Anna Hamilton in her Protestant (and so not always acceptable to Catholics) training school in Bordeaux, was the standard-bearer for nursing in the Anglo-American style of Florence Nightingale and her successors. A passionate proponent of scientific nursing, her training was rigorous but on a small scale. Only eight schools which followed her philosophy had been created by 1914. There were other isolated examples of forward thinking and energy in Paris and Lyons. But, in general, nursing progress was fatally slowed by a poisonous political climate.

To a greater or lesser extent in Europe there was a sense of potential threat hanging over the generally prosperous early twentieth century. In Great Britain, this sense of impending trouble led to large numbers of people volunteering for military service in reserved forces; both as soldiers and nurses (Wildman, 2015). France struggled to match this level of preparation because of the limited numbers of trained nurses available. The French Red Cross was able to step in with a group of enthusiastic, but only partially trained, volunteers. As events were to prove, the response was inadequate.

In 1914 after a political outrage in Bosnia, like a tumbling line of dominoes, all the major European states followed a strange and inexorable logic into war (Strachan 2014). Germany invaded Belgium and France. Great Britain, declared war on Germany on August 4th, 1914. The first engagement of the war, immediate and cataclysmic, was called the Battle of the Frontiers. French troops, conspicuous in bright red trousers and blue coats, full of patriotic zeal and following out-dated tactics, advanced across open ground towards ranks of machine guns (Strachan,

2003). Over 27,000 men were killed on one August day alone. Lefort et al (2014) have suggested that in the first few weeks of the war, following initial military disasters, there was also a 'désastre sanitaire majeure' as the French medical services were unable to cope with this level of industrialised military destruction.

Creation

As these battles raged, the scale of the French *Service de Sante* problems was quickly brought to the world's attention. A reporter, amongst others, for the British *Daily Telegraph* came across a railway cattle wagon, filled with abandoned wounded French soldiers being transported away from the Battle of the Marne, stuck in a siding outside Paris. He wrote: '*towards the end of the train no faces appeared at the window, and on opening the doors, one saw some ragged and helpless victims of the war lying amid straw, crying feebly for drink, and asking if there was at last a hospital where his sufferings were to end*' (quoted in Binyon, 1917).

The issue came to the attention of a wealthy Scots journalist living in France called Grace Ellison. Binyon (1917) reports that she went to the head of the French

Army Medical Corps, General Troussaint and offered, perhaps rashly, to recruit three hundred British nurses '*of ripe experience and very reliable character who will be able to teach and influence*' (British Journal of Nursing, 1914a). The French army immediately accepted this offer. However, Ellison found that many of the women who volunteered to help were without any expertise. So, she wisely turned to Mrs Bedford Fenwick, for advice. At the heart of the British nurse registration movement, Mrs Bedford Fenwick, well connected and influential, must have immediately sensed that this was an opportunity not only to advance the cause of trained nursing but also to be true to her deeply-felt internationalism. She rapidly became whole-heartedly involved in the venture and both women remained the driving forces behind the Corps for the next four years. Bedford Fenwick immediately decreed that only trained nurses could join the Corps, and this stance, uniquely, was maintained throughout the war. As editor of the British Journal of Nursing, she also gave the FFNC a very full and partisan prominence. Progress was rapid, by October 24th; eight or so nurses were on their way to France, followed by sixteen more on the fifth of November.



Fig. 1: The First FFNC nurses with French military at Rouen, October 1914

An editorial in the *BJN* of December 5th, 1914 stated: '*It is happiness that the work of nurses trained in the best nursing schools of England and Wales, Scotland and Ireland in the most modern methods, is of value to our allies*' (British Journal of Nursing, 1914b). The nurses were paid £40 salary with board; lodging and travel paid for by the French government. Their service was based on six monthly, renewable contracts. They were emphatically not volunteers but paid professionals.

Ellison never managed to reach her original recruitment target. The FFNC was at its largest in April 1915 with around 108 nurses. The numbers slowly declined as the war progressed and there were around only 48 nurses remained in the Corps by November 1918. The British War Office was not keen to lose invaluable workers to France and fought Bedford-Fenwick in her efforts. But those nurses that did stay held positions of trust and authority in the French forces and must have developed an extraordinary depth of experience and expertise.

Wartime experiences.

The poet, Laurence Binyon who had himself worked as an orderly in a hospital caring for the French wounded, described the Corps' initial experience (1917, p35): '*Picture the English nurse as we know her, trained to an exacting standard, accomplished in every*

detail of her profession and accustomed to have at hand every necessary material and appliances and to follow a settled routine. Picture her plunged into a foreign land, amongst strangers whose tongue she perhaps understands and speaks but imperfectly, picture herein a hospital improvised for the war...picture her confronted with a desperate pressure of work, severe cases coming in every day. You can imagine that this was no light undertaking.'

Ellison suggests that there was some bemusement at first amongst the French. Many of the doctors whom the French drafted into military medical were local practitioners who had not heard of trained nurses. Ellison (1917) reports that they were baffled as to who these nurses were. They were not nuns but seemed to have a similar dedication to their calling. They were not 'ladies' because they were paid, but seemed to hold a superior social position. One soldier asked a particularly pretty nurse if she was allowed to marry. Ellison deemed her, not entirely truthful, answer '*no, it's strictly forbidden*' a wise one.

Included in the first group of nurses dispatched to France was Margaret Ripley a sister from Lazarus Ward, Guy's Hospital. Her experience, alongside colleagues Miss Lear and Miss Todd, can be followed in the postcards she sent home (Morley, 2014).



M Ripley
E. M. Lear
H. Colchester
& Finlors.

Lussemburg Gardens
Paris. Jan 1915.

Fig. 2: Ripley, Todd, Lear

From the first things did not go well. On November 23, 1914, Ripley wrote: *'There are four who are at this hospital, the other two are having an awful time & we are all going to throw it up in a week or so unless things improve. Everyone is good & kind to us here but there is no work just given out.'*

The Nursing Times had hinted that there were examples of French intransigence and obstruction. It was said that, on occasions, British nurses were ignored when the convoys of wounded drove in. Whatever the cause, the passionate Guy's nurses clearly

felt frustrated in their thwarted attempts to help. On February 5th Sister Ripley wrote from Bergues, *'things not very happy here & not working smoothly it seems quite hopeless to do anything for foreigners, looking forward to April & release. Scheme an utter failure.'*

However, there were other FFNC nurses at Bergues who were happier. One nurse wrote: *'It is perfectly wonderful to be here and we are most happy in having got our heart's desire – real work where we are really needed'* (British Journal of Nursing,

1915a). Bergues was a key part of the FFNC story. A typhoid epidemic had broken out there and another scandal of military and civil medical incompetence was looming. This was not the glamorous task of caring for soldiers wounded on the battlefield. The FFNC was asked to help refugees and civilians too and, of course, they were playing to their strength. This was work for which their rigorous training had admirably prepared them. The British Journal of Nursing in May 1915 reported; *'very happy news from Bergues: we hear a very steady improvement at St Union Hospital enough to cheer everyone's heart. You really would not recognise it as the same place'* (British Journal of Nursing, 1915b). This was despite having been bombarded by German artillery, destroying one hospital and forcing patients and nurses to shelter in caves underneath, and feeling obliged to fight off attempts by the French Red Cross to provide unskilled assistance. The organisation had however proved its worth and, unlikely many formed at the start of the war, was to continue in operation until the Armistice and beyond.

One theme of the British Journal of Nursing's coverage of the FFNC was the success of provincial, Scots, Irish and colonial nurses, the ones who relished the work at Bergues, compared to those from London teaching hospitals. The reasons for this are not clear. Ellison wrote: *'The most successful of our nurses have been those who have the patience of Job, wrapped up in a keen sense of humour. They had to be prepared to act the part of matron, theatre nurse, probationer seamstress and charwoman'* (Ellison 1917).

Ellison also suggested that the effective nurse was one who could explain to her new French medical colleagues just what she had to offer without upsetting national sensibilities. A successful example comes from Talence Hospital. Ellison quotes a French doctor who had been persuaded,

against his will, to give Miss Haswell a managerial role. In answer to a later question he had revised his position. This no doubt followed some careful rebuilding of male dignity and deference to a nation whose pride had been wounded by the need for allied help. *'Why does my hospital run so well? Because I am working with a reasonable woman who at once saw the value of me appointing her a matron'*. (Ellison, 1917, 173). Perhaps the provincial nurses had had more opportunities to practice these particular skills than their London-trained colleagues and so adapted better to these new conditions.

Talence Hospital, near Bordeaux, where Miss Haswell was the matron, was the only place where a large group of FFNC staff worked together. They ran it from early 1915 until 1917 when the Americans took over. The FFNC managed a complete wing of 700 beds and at least sixty-nine trained nurses are recorded as being sent there. There was clearly a sense that this was a hospital to showcase the skills of British trained nurses.

Whether the superiority of British nursing, was completely accepted by the French was perhaps a moot point. In 1916 an Australian nurse posted to Talence wrote to her hometown newspaper: *'We are supposed (?) to be trying how to have the model hospital for France worked by French doctors and British nurses; but only this week, in one of the big gun surgeon's wards, monsieur, himself, announced that he wished to meet all his nurses in one of his wards and give a lecture. They went in, in all good faith, but came out rampant. He just pitched into the British nursing whole, and said all the nurses could be trusted to do is 'put on a bandage', and didn't understand the rudiments of asepsis. All but two of his nurses in his wards (16 of them) signed a paper resigning that morning'*. (Brown, 1915).

This particular storm seemed to subside and, judging, at least from the letters of Mabel Jeffery, Talence seemed a happy posting but far from the drama of frontline nursing.

The sisters were sent out to hospitals in Caen, Evreux, Chateau-Thierry, Neufchatel, Malo-les Bains Besancon, Lisieux, Port-a-Binson, Vernieul, Steenvoordew and Bordeaux: 17 different sites in all in 1916. The FFNC opened a head office in the Hotel Bedford in Paris where Edith Haswell, promoted to matron-in-chief, and Grace Ellison held things together, the latter driving around France to visit the far-flung nurses. At Epernay, in the Department of the Marne, a sister reckoned that their little group, arriving in 1915, were four British women amongst 2500 Frenchmen. The nurses worked in hospital ships, evacuation barges, in rehabilitation wards and with patients with "shell-shock (possibly in ways

that would now be found insensitive). Some were close enough to the action to have experienced bombardments. In 1917 one Canadian nurse, Madeleine Jaffray, lost her leg to enemy shell fire. A close working relationship with the Borden-Turner hospital (immortalized in Borden's *The Forbidden Zone*, 1929), developed as several FFNC nurses, including three Canadians, went to work there.

In 1916 Sister Clementine Addison who worked in Besancon, where soldiers wounded in the terrible bloodbath of Verdun were treated, was invalided home to Lancashire, amidst profound regrets and praise from the surgeon in chief of the hospital. She did not recover and her coffin was draped with a French flag alongside the Union Jack (BBC 2016).



Fig. 3: Clementine Addison

Sister Lind, from New Zealand, too died in 1917 on her way back home. She was buried in Sri Lanka (British Journal of Nursing, 1917a). She had contracted tuberculosis, possibly when she and her friend Daisy Hitchcock were working on hospital barges ferrying wounded away from the front line in the north of France. During the course of the war, or just after,

four members of the Corps married Frenchmen: Sisters Hendrie (Jamard: and baby in November 1918), Claudia Gaudin, Gertrude Denson and Marie Lepine (Mme Delord). The latter was a Frenchwoman who had trained at St Thomas's Hospital. Mme Delord died in 1918, possibly in the Spanish influenza epidemic or from complications in pregnancy. Her husband

was the medical chief of the Verneuil ambulance. Her mother had been interned at the start of the war and missed seeing her daughter again by a matter of days.

The time of real high adventure was occasioned by the dramatic German advance in the spring of 1918 which almost defeated the allies. Nurses at Vauxboin, Joignes and Verneuil (Ambulance 12/2) were forced to join in a headlong allied retreat. One sister wrote: 'On the morning of

May 27 we were awakened by whistling of huge shells across the charming valley in which our hospital was situated'.

After shelling with gas, the German troops arrived at one end of the compound; 'behind us we turned to see the blaze of red silhouetted against the sky telling us of the awful means by which the Germans trample ruthlessly in this fair land of France' (British Journal of Nursing, 1918a).



Fig. 4: 12/2 ambulance

The nurses escaped out of the opposite gate without harm, having to march seventy kilometres in two days to safety in Paris. For this, the nurses were mentioned in dispatches and Sister McKinnon won the Croix de Guerre, for caring for the wounded while under fire. Finally, as the tide turned and the Allied forces advanced, the nurses followed them through the country devastated by the war and on into Germany

itself. Just before the war came to an end, the nurses dressed in special gowns and masks bathed in disinfectant, had to care for patients with the 'grippe espagnol' (Spanish flu).

From their letters to the British Journal of Nursing, it is clear that the nurses developed a close identification with French military aims. The following passage was notable because it gives a glimpse both of

the nurses' clear identification with the French army and a rarely articulated awareness of their presence as women as well as professional nurses. During the allied retreat in the spring of 1918, the sisters were passed by an advancing regiment of Zouaves, a French elite corps:

'Some of the most heroic and the best fighting men in France. I shall never forget the sight of these brave men. Their faces were covered with a mask of tallow dust out of which flashed their eyes which were burning and gleaming like stars, their red fez's perched jauntily at the back of their heads. Closing up they made a little space for me in their camion (lorry). 'Come with us', they cried. I shook my head smiling the while. I had a curious feeling that I was smiling at men who were going to fight and die that night, and perhaps it was the last woman's smile some of them would see. They were going in the fourth year of the war with the same high courage and magnificent spirit into that dreadful hell close by where the cannons were booming to meet the enemy and stop the advance'. (British Journal of Nursing, 1918b).

Motivations

What of the motivation of these nurses? The course chosen by the FFNC nurses was, almost a perversely, difficult one. Undoubtedly there were as many different reasons for applying, as there were applicants. Perhaps some of the more self-consciously professional nurses felt the outbreak of war was an opportunity for the nursing profession to take its next step forward? Watson (2002) writes that nurses, not just in the FFNC, joined up in 1914 to show how indispensable was their discipline and 'strict adherence to formal training'. She suggests that, for nurses, patriotism, mixed with professional pride, created 'a very distinct call to arms'. The FFNC, being an organisation for trained nurses only, must have had its own particular allure. Vicinus (1985) has pictured a nursing

profession in some degree of crisis before the war. She described nursing at the end of the nineteenth century as still offering women a road to freedom but one with self-imposed restrictive practices. Self-discipline and self-sacrifice were more important than self-expression and self-development. Indeed, Vicinus (1985) had also suggested that, while wages had been high in the 1870s, they had 'shrunk in comparison with those in teaching or social work' by 1900. Perhaps joining the FFNC was seen as an escape from this stifling environment. One of the nurses wrote, reflecting on her experience, after the end of the war: *'I really am a bigger person, humanly speaking if not physically. Living a life of routine before the war, I was shrivelling some, as the Americans say. I do hope things will be a bit brighter for Nurses in England in future -it is very difficult not to shrivel on £30 a year. I am glad the price of sisters is going up so that we may use the money to water our roots a bit and not live in such narrow allotments'* (British Journal of Nursing, 1919).

Vicinus was very critical of the uncollegiate nature of the nursing profession. She suggested that while discouraging intimacies with patients, nursing practice also discouraged intimacy and supportive networks amongst nurses. Working for the FFNC might have offered the opportunity for a greater level of comradeship than was possible in pre-war British hospitals. Some of Mabel Jeffery's correspondence supports this. A letter from Sister Wood, after the end of the war, but before the FFNC had been disbanded, illustrates both the esprit de corps and a sense of the excitement the nurses experienced; *'Dear Miss Jeff. I think we may both be going back to Pointoise. You and me together love. Meanwhile we sit tight and wait for Mrs F next letter. I can hardly be able to open it with excitement. Much love from your old comrade.'* (Adine) F A H Wood. (Quoted in Wenzel and Cornish, 1980).

In February 1918, a FFNC correspondent, reflecting on this collegiate spirit, had written; *'you sometimes say we are a very self-contained community. And so, we are. I always turn my BJN over to see the news of the FFNC before more impersonal matters'* (British Journal of Nursing, 1918c).

Professional pride and the chance to do a job well was clearly an extremely important motivating force. Ellison describes a visit to one of the hospitals: *'One of the patients rushed up to greet the sister. 'See his hand', she cries enthusiastically, 'he was told he would never use it again. Now with careful massage I have saved it', and her eyes danced with delight as she caressed the poor mutilated hand of which only two fingers remained.'* (Ellison, 1915). Certainly, the Corps offered enormous opportunities in autonomous practice and leadership. Nurses in the Corps tended to be placed in positions of reasonable authority, as trained nurses, and could be the senior figure in charge of quite large, often completely masculine, organisations. Several of Mabel Jeffery's letters were from male orderlies working under her and show her to be clearly in a position which commanded respect. It appears that her relationships with her French colleagues were deep enough to inspire continuing correspondence and the letters demonstrate the orderlies' awareness of both her kindness and expertise.

Ellison more openly placed the work of the FFNC with a wider women's movement and it is possible to see in her writing a clear feminist agenda in her vision of the Corps, particularly over properly paid employment. This might not have been shared by all the nurses. The New Zealander, Daisy Hitchcock, thought Miss Ellison *'an irresponsible journalistic suffragette sort of female'* (Ross 1917); but later admitted how helpful Ellison had been in helping her stricken friend Lily Lind.

It is likely, too, that joining the corps met some of the women's longing for adventure. We do not know if the women in the Corps turned back to peace with relief or perhaps disappointment as the opportunity for a life with wider horizons faded. Several nurses stayed on briefly to work in those parts of France devastated by the war and some worked in Germany itself. Mabel Jeffery in 1918 was in no hurry to return to her prewar life. She tried hard to find a new position in one of the recent war zones but gradually opportunities diminished. The shape of her future was finally determined, in a very Victorian way, by the need to care for elderly parents. Miss Banks set up a small hospital in the 'devastated' zones, before starting a nursing school in Paris. Later she becomes, rather more prosaically, a nurse tutor in Walthamstow. Robina McPhail joined the Indian North-west Frontier Force. One member, Annie McKinnon ('Mac') from Skye who had remained in the Corps for the full four years and was awarded the Cross de Guerre, went to work for the entirely adventurous Frontier Nursing Service in Kentucky. Perhaps more would have wished to do the same. On 12 February 1916, a sister wrote a letter to the *BJN* which explains perhaps some of the satisfactions of working for the corps: *'But I, for one, just love doing a bit of pioneer work, and I can honestly say I have been most happy and fortunate since I came to France: Coming into touch with French people in this time so terrible and heartrending for them, when their dear country which they love so devotedly is devastated, their people impoverished, and all they love wrenched from them, is a lesson in courage I could have learned under no other circumstances: As for the gratitude, simplicity, and sweetness of the sick and wounded nothing can exceed the nobleness of these brave men. I hope I may stay and help them to the end of the war.'* (British Journal of Nursing, 1916)

The Influence of the Corps.

From the start, the FFNC was consciously promoting professional nursing in France. On March 13, 1915 Miss Ellison submitted an Official Report to the Committee of the FFNC. While acknowledging that there had been problems to begin with, Miss Ellison says: *'Their work most certainly means the uplifting of the whole nursing profession in France. Quite half the soldiers are gentlemen and having once been taken care of by the nurses they will have nothing else, and this war over, they will demand that the conditions as they were at the beginning of the war shall not occur again.'* The report continues; *'I have noticed in all the hospitals where our British nurses are working, the enormous difference in the appearance of the place, the cleanliness of the patients, their well-made beds and the comfortable manner they were lying in their bed.'*

The nurses, at least some of them, were conscious of their role as crusaders for trained nursing. This meant some differentiation between themselves and less-rigorously trained French Red Cross nurses. In a letter to the British Journal of Nursing, (1917b), one of the sisters wrote: *'We have had snow and frost until yesterday. We were asked to meet two trainloads of refugees from the invaded districts. The train was very late and arrived at the station at 3am. Being a very wretched night the Red Cross ladies were conspicuous by their absence and we, the FFNC sisters had to do the work ourselves. The following night we were again told to meet a train of refugees, but this time the weather was fine and not so cold, and the Red Cross ladies well to the fore, leaving only the gaps to be filled in by us.'*

This account highlights the self-perception of the trained nurse as being both more expert and more dedicated than those untrained.

It is not possible to confidently claim that the FFNC was ever big enough or influential enough to directly influence the development of professional nursing in France as its founders had hoped. As Schultheiss has described, when Registration finally came in France the factors driving it were more linked to nursing shortages and the unexpected technical demands of tuberculosis nursing. However, by working alongside many influential doctors, the FFNC sisters might have broken some barriers down and exerted an influence. Knibiehler (2010) in her history of French nursing in the twentieth century gives prominence to the influential role played in shaping the future of the French nursing profession by American registered nurses at the Hopital de Neuilly, Japanese nurses at the Hotel Astoria and the staff in the Scottish Women's Hospital, but does not mention the FFNC. Schultheiss on the other hand devotes some time to the Corps discussing the way in which the FFNC provided an example of professional practice, their influence being amplified as they were given relatively senior management roles. Perhaps the most that can be claimed is that the wartime mixing of different nursing approaches was felt in France and cannot have harmed nursing advancement.

In Britain, the Nurse Registration Act was passed in 1919 (White 1976). But in 1922, largely through the work of Leonie Chaptal (Schultheiss 2001), the French state too created a licensed nursing profession. So, Bedford Fenwick's long-standing goal was achieved in both countries.

On March 22nd, 1919 an anonymous editorial, but most likely written by Mrs Bedford Fenwick, summed up the work of the FFNC: *'Some day we hope to write a little history of the work of the Corps. The women who offered their services to the sick and wounded of France of the soldiers of the French Army do so knowing that*

there would be no 'sitting on the velvet' in their surroundings but the compensation for so many discomforts, insanitary conditions, cold and food shortages was the realisation of the value to the sick of every effort made, of every discomfort suffered and as time went on the great appreciation by sympathetic surgeons and doctors of skilled nursing as practiced by the British Sisters and the spontaneous and warm gratitude of the patients. It is greatly to be hoped that the seeds have been widely sown in many centres of the sweet-scented flower of skilled nursing and that many young women in France will dedicate themselves to its culture'. (British Journal of Nursing, 1919b)

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