

# Stockbridge Library Exhibition – the Scottish Women’s Hospitals in World War One



‘Go home and sit still’ is the now infamous reply given to Dr Elsie Inglis when, at the start of the First World War, she offered a hospital unit to the British War Office. Elsie did neither. What happened next was the subject of a fascinating and inspiring talk by Chris Short of the Surgeon’s Hall Museum at Stockbridge Library this week.

Elsie Inglis was born in India in 1864; from childhood she knew she wanted to be a doctor. At the age of 22, she enrolled at the Edinburgh School of Medicine for Women. She founded the Scottish Association for the Medical Education of Women, opened a hospital in George Square, and worked with women and children in the slums of the Old Town and Morrison Street.

She was involved in the Suffrage movement, but did not approve of the Pankhursts’ militancy,; instead she became active in the Scottish Federation of Women’s Suffrage Societies. The suffrage societies funded the setting up of the Scottish Women’s Hospitals for Foreign Service Committee, of which Inglis was a founder.

Rebuffed by the UK government, the women offered their hospitals to other countries. The allies (mainly the French) had already lost 300,000 men by December 1914, with a further 600,000 wounded, missing or captured; France and Serbia were happy to accept the offer.

Inglis herself was already 50 years of age and ill; she was not expected to go to the front (although she wanted to) – instead she was needed for essential fundraising. Fundraisers had to be determined, self-sufficient women, happy with their own company in what could be a lonely job. They canvassed in the UK, India and the USA (though not in the Midwest, with its large German population); they tried but failed in Australia, then ‘a country run by men for men.’ There was much competition from other charities, so the women had to ‘reward’ their donors; wards and even beds were named after benefactors, and in the midst of battlefield carnage wealthy patrons still had to be entertained in the units: the Queen of Serbia visited one whilst the drains were being cleaned out. Before the end of 1914, £1,000 had been raised, enough to send one hospital unit to France and another to Serbia.

✘ Each unit comprised two senior doctors, ten nurses, an administrator, junior doctors, orderlies and chauffeurs. Some were single, some married, some were suffragettes, some not. Many just wanted to get away from the stifling restrictions of middle-class society. Chris emphasised that the women were *not* militant man-haters, and only formed the all-women units because they were refused the opportunity to work alongside men. Female doctors in particular were very limited in their choice of work in the UK; obstetrics, child health and traditional ‘women’s roles’ were often the only posts available to these highly educated women; some doctors had to work as nurses to find any employment at all. Now came their opportunity to prove themselves.

In December 2014, the first unit arrived at Royaumont Abbey, 25 miles from Paris; Miss Francis Ivens was its surgeon. The Abbey was cold damp and derelict, with no running water or electricity. They had two pans, one kettle and a stub of candle to with which to cook for 25 people; plumbing and carpentry skills were at first just as valuable as medical knowledge. There were always some issues between the units

and the committees back in the UK; the committees viewed the units as profligate with funds, the units felt that the committees could not understand conditions in the field.

Inglis became a skilled negotiator between the two, explaining the real needs of the units to the fundraisers back in the UK.

The unit soon started to receive serious casualties; shells, machine guns, shrapnel and flame throwers caused horrific injuries. From 1915, gas led to blindness, lung and skin damage. There were no antibiotics, amputations were common and the chances of survival were slim, but Royaumont gained a reputation for saving men's limbs. Sphagnum moss, a known antiseptic, was sent out from Scotland to dress the wounds.

The number of beds soon grew; from 100 in 1914 to 600 by the end of the war. Orderlies were up at 4.30am to change beds, feed the men, and dress their wounds. Three hours sleep became a luxury. The untrained orderlies were not appreciated by all; some qualified nurses resented them, and one retired matron announced that those who wore silk underwear were 'doomed to perdition.'

At the start of the war there were no ambulances; the chauffeurs had to drive their own cars to France, and act as their own mechanics. The roads between the trains from the battlefields and the units were unlit. There were three female drivers and one male; only the man was paid.

✘ The Somme Offensive began in July 1916; it was far from the hospital, and when the injured arrived they had to be carried up 71 steps to the wards. Despite the huge numbers of casualties, (the X-Ray staff were so busy they suffered radiation burns) no man was lost through delay. By now, however, some of the women were so short of money that they had to leave to take paid jobs.

In March 1918, the Germans began their final Western push; there was aerial bombardment and many more casualties, and

women later recalled the constant sound of gunfire. The German retreat began, and in November the Armistice was finally signed.

On the Eastern Front, the First World War was a continuation of other wars; the area had suffered many years of disruption and turmoil. The second hospital unit arrived in Belgrade; others soon followed. Conditions were mediaeval; at first public health measures were needed more than acute nursing. Typhoid, typhus and cholera were rampant; the Chief Medical Officer and many others died of fever. Inglis was at last allowed to enter the field and run a unit. Her single-mindedness and impatience did not endear her to all, but she was an expert doctor and surgeon, and she loved the Serbs.

Serbia was stuck between Germany and its ally Turkey. Belgrade fell, and the retreat began over the mountains to Scutari. The high terrain was a huge challenge to the drivers – ‘we were looking down on eagles.’ One hundred thousand soldiers and fifty thousand civilians died as a nation passed into exile. Some hospital units went with them, some remained, caring for both Serbian and German soldiers. Their public health efforts worked, and there was no typhus in the units. Inglis’ unit was captured – although medical workers were not allowed to be taken as prisoners of war, so they were not labelled as such; they were sent to Hungary and kept in very cramped conditions until they were repatriated.

In 1916 the war was becoming increasingly vicious, especially between Serbia and Bulgaria. Humanitarian principles had been abandoned. Inglis took a unit to Odessa in Russia, sailing to Archangel and then travelling south, as the Dardanelles were closed to shipping. Conditions were so cold that tea froze in the cup; wolves howled. The first stirrings of the Russian Revolution began in 1917; Inglis decided that the unit and the Serbian soldiers should return to Macedonia. The only way to do this was to retrace their steps, and the women sailed back to the UK and up the Tyne in November of that year, many very

sad to leave Russia. Elsie, by now very ill with cancer, died the night after her arrival. She laid in state in St Giles Cathedral, and crowds eight-deep watched as her coffin was taken to Dean cemetery. When the papers asked why such women had not been awarded the Victoria Cross, the reply was that they had not worked for Britain.

Inglis's unit was renamed the Elsie Inglis Unit and returned to Macedonia. In September an armistice was signed and the women were at last able to visit the battlefields. What they saw there traumatised more than everything they had endured during the war: no birds, no trees, no flowers, no houses; just mud.

The units went on working after the war, dealing with a major flu epidemic and the paperwork for war pensions. The women came home gradually, many finding great difficulty in adjusting to home life. Medical schools started to refuse them entry; the drivers were not even allowed to drive in the UK. Many women became severely depressed; some went overseas to work. In 1918, some women were finally given the vote and nurses were required to be registered ; both of these advances were thanks in part to the work of the units.

The women of the Scottish Hospital Units have been largely ignored by their home country. In France, Frances Ivens was awarded the Legion d'honneur; Serbia gave some of the women the White Eagle (its highest award.) The local communities amongst which they had worked held them in high regard.

Serbia still holds an annual ceremony to remember them, and there is a plaque for them in Royaumont. There have been recent moves to have Inglis's grave restored and to erect a statue in her memory on the Royal Mile, but so far nothing has happened. As Chris Short says, we should be proud of our women, who left their homes and families to help their fellow men.

This was an exceptional talk about a little-known subject;

Chris's warm and lively style made it all the more gripping and entertaining.

✘ The exhibition **'Women, Warfare and Caregiving'** produced by the Surgeons' Hall and the University of Edinburgh is open at [Stockbridge Library](#) until 31st May: Details of Stockbridge Library opening hours can be found on our information page [here](#).

There is lots more fascinating information about the Scottish Women's Hospital Units, including biographies of many of the women who joined them and details of recent visits to Serbia to research the subject, on the excellent website [scottishwomenshospitals.co.uk](http://scottishwomenshospitals.co.uk). A programme based on these visits is to be shown on STV later this year.

**'Angels of Mercy: A Women's Hospital on the Western Front'** by the late Dr Eileen Crofton was published in 2013 by [Birlinn Limited](#).

The Surgeons' Hall is closing next week for major refurbishment, but will continue its programmes of talks and outreach work in other Edinburgh venues: see [www.museum.rcsed.ac.uk](http://www.museum.rcsed.ac.uk) for details.