

# Nursing Praxis in New Zealand

## POTENTIAL FOR PROFESSIONAL PROFIT: THE MAKING OF THE NEW ZEALAND ARMY NURSING SERVICE 1914 - 1915

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### ABSTRACT

This article examines the development of the New Zealand Army Nursing Service between August 1914 and April 1915. War was seen as an opportunity to further promote the new order of nursing, and nurses fought against the employment of amateur war-time workers to help with nursing duties. However, despite the central place trained nurses held in civilian nursing by 1914, they faced gender-based barriers in order to achieve a place within military structures during World War I.

### INTRODUCTION

During the Gulf War, a television interview focused on the New Zealand medical team leaving for the Gulf. The interviewer examined the departure from the tradition of having only men as leaders of military teams. For the first time women would lead men into combat. This particular incident could be considered a first for New Zealand, in both having a woman leader, and of recording women's role within military structures. New Zealand war histories have, in the main, acknowledged the actions of men as the fighters, and men as the military tacticians. According to George Mosse, war is seen as an all-male preserve, and in spite of their presence, women have been largely ignored, or presented as passive players.<sup>1</sup> Anne Summers states that traditional histories of British wars have provided women with the images of the 'quintessential civilians', the furthest removed from the machinery of warfare, involved in war but nonetheless removed from it.<sup>2</sup> Jean Bethke Elshstein records that women are seen as 'exterior to war, men interior, men have long been the great war-story tellers, legitimated in that role because they have "been there"

or because they have greater entree into what it "must be like".<sup>3</sup> Jane Tolerton suggests that Lady Liverpool, wife of the Governor General, set out the prescription for New Zealand women's World War I work. On the cover of *Her Excellency's Knitting Book*, women were advised of their role in war:

For Empire and for Freedom  
We all must do our bit  
The men go forth to battle  
The woman wait - and knit.<sup>4</sup>

Despite the fact that over 500 New Zealand trained nurses took part in the care of soldiers here in New Zealand, and overseas during the years 1914 to 1918, some of whom spent as long as five years as military nurses, little has been recorded about their experience.<sup>5</sup> It seems timely to tell a part of their story.<sup>6</sup>

### WHY DID NURSES WANT TO GO TO WAR?

During the 1880s, New Zealand adopted a pattern of nursing similar to that developed in Britain from the 1860s, and invariably attributed to Florence Nightingale. For Nightingale, nursing leaders were 'ladies', a term which distinguished those with rights and privileges over other women.<sup>7</sup> She initiated a system of training which aimed to support the widespread Victorian ideas about women's 'natural' ability to nurse and their 'duty and obligations' to care for others.<sup>8</sup> Femininity and domesticity, the cornerstones of British nursing, also becoming the cornerstones of our early New Zealand nursing.<sup>9</sup> The assumed 'nature' of women, which shaped the new order of British nursing, also set the boundaries for the new system in New Zealand.

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British nursing pioneers who led the New Zealand nursing reforms adopted the Nightingale ethos of nursing as work suitable for women.<sup>10</sup> English nurses appointed as lady superintendents at Wellington and Auckland Hospitals in the 1880s led the crusade to transform the menial tasks of everyday domestic work into a noble occupation for women. As had occurred in England, these women, aligning themselves with the Victorian ideas about women's nature and duty, brought new standards of cleanliness and order to New Zealand hospital wards, along with a moral standing, symbolic of the respectability of Victorian women.

The importance of adopting the image of British womanly behaviour cannot be underestimated. Unless their work could be associated with proper moral behaviour, nurses had little chance to prove their professional abilities to the public, to doctors and to male administrators. The early history of New Zealand nursing is bound up with convincing hospital authorities of the 'unhandy' skills of untrained women, winning public support, and gaining recognition for a nursing profession based on 'womanly' abilities. From 1883, a new system of New Zealand nursing developed to replace the 'handy woman' and her 'unhandy methods'. The 'new' nursing order needed to be considered both morally superior and skilled in nursing. During the years 1883 to 1920 a progressive demotion of amateurs and explicit promotion of trained nurses occurred through the setting standards of nursing education, nursing practice, and by the registration. As a public service to help rid the care of the sick of amateurs, trained nurses' names were published in the *New Zealand Gazette*.

## THE SOUTH AFRICAN WAR NURSING CAMPAIGN

For the newly emerging New Zealand nursing profession, the South African Campaign had provided an early opportunity to show not only their patriotism, but also their professional skills. This first encounter with military nursing, however, could not

be considered an outright success. Approximately 29 New Zealand trained nurses went to war between 1900 and 1902, under the auspices of the British Army Nursing Service. The ambivalent attitudes of doctors and military authorities towards trained nurses, whether British, Australian or New Zealanders, frustrated trained nurses' military work. Amateur, untrained women, successfully established a place in military nursing. The place of orderlies, who were acknowledged by the military authorities as the first-line attendants of sick and wounded soldiers, also impacted on nurses' work. With the army's reliance on orderlies and the belief that nurses, be they trained or amateurs, should stay in the background, the role of the military nurse was severely limited.<sup>11</sup> This history had its impact when New Zealand nurses attempted to overcome these constraints during World War I, and the road to this success was paved with difficulties.

## PRE-WAR MILITARY MEDICAL SERVICES

Getting to World War I was not an easy endeavour for New Zealand nurses. In the years immediately following the South African War, the New Zealand military medical service consisted of a small, unorganised, volunteer service with men of the New Zealand Medical Corps employed to attend to the wounded soldiers. Any military medical matters received attention from army doctors scattered throughout the country, with soldiers with first aid knowledge attending to any small incidents that might require medical attention. The military arrangements certainly did not encourage a female nursing service, and there were no regulations that would allow a female to act in a military capacity.

Following the revamping of the New Zealand military organisation from 1908, nurses' part in military nursing became more obvious. The new design of military defence brought the New Zealand military structures into line with British changes, and opened a niche for the military nurse.<sup>12</sup> Princess Christian of Schleswig-Holstein is given the

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credit for recommending to Lord Plunket, Governor of New Zealand, that an affiliated branch of the British Army Nursing Service should be established in New Zealand, and from 1908, this suggestion became a reality. This service, headed by Mrs Janet Gillies, the sole officially appointed military nurse with the title of matron-in-chief, set the scene for future developments.<sup>13</sup>

Gillies experience as a military nurse in the South African War and subsequent training in the British Army Nursing Service, no doubt influenced her appointment. However, her enthusiasm for nurses to be involved in military nursing was overshadowed by the lack of interest shown by nurses generally. Only eleven trained nurses scattered from Invercargill to Auckland appear to have applied to join the service.<sup>14</sup> For the period of 1908 to 1910, reports on military services made no mention of the nursing service, and no evidence has been found that nurses, other than Gillies, were ever formally enrolled.<sup>15</sup>

The apparent lack of interest shown by nurses in military nursing between 1908 and 1910, seemed related to the lack of romance or danger associated with military endeavour. The country was not at war, and there appeared to be little threat of war. However, Gillies also lacked organising skills. According to Hester Maclean, Assistant Inspector of Hospitals and Charitable Institutions, and the recognised leader of civilian nurses, Gillies, an enthusiast for military nursing, created nothing more than a large amount of paper work during her time as matron-in-chief.<sup>16</sup> By July 1910, Gillies had resigned and Maclean was appointed as matron-in-chief.<sup>17</sup> Maclean apparently recommended herself for the position of matron-in-chief, citing her professional connections as Assistant Inspector of Hospitals.<sup>18</sup> The next few years proved Maclean to be as capable of promoting military nursing as she had been in promoting civilian nursing.

The only apparent opposition to Maclean's appointment came in June 1913. In the

wake of her resignation, Gillies wrote to James Allen, Minister of Defence, offering to 'have a fully efficient Army Nursing Service ready for duty ... if required by our motherland'.<sup>19</sup> It is difficult to escape the conclusion that Gillies, embittered by her forced retirement from the army, attempted to undermine Maclean by drawing the Minister's attention to certain features of the military nursing service that could be considered as lack of progress. Between 1910 and 1913, Maclean's reign as matron-in-chief had also brought about little apparent change. Maclean remained the only member of the nursing service, no other staff had been appointed, no uniform and no badge had been designed.

## FIGHTING FRUSTRATIONS

Any effort of Maclean's to form an active nursing service appears to have been blocked by Colonel J. R. Purdy, the Army's Director of Medical Services. Purdy had a history of obstructing nursing's progress. As early as 1905, Elizabeth Grace Neill, the first woman to be appointed as Assistant Inspector of Hospitals and Charitable Institutions, had identified Purdy as one of the 'mean' doctors impeding the setting up of the St Helens hospitals for midwifery training.<sup>20</sup> From 1908 to 1913, Purdy held the position of Director of Military Medical Services. In carrying out his duties, Purdy seemed frustrated by a loosely structured part-time territorial medical service restricted by a tight budget. The lack of interest in military concerns shown by civilian doctors created gaps in the structure of military medicine. Territorial medical officers received £50 each year to defray the cost of *locum tenens*, but this amount, according to doctors, did not cover the cost of their absence from private practice and a number sidestepped their military duties.<sup>21</sup> James Allen, the Defence Minister, noted in 1915 that, 'No steps had been taken to provide a permanent army medical staff or to organise the medical department, owing to public outcry against excessive expenditure'.<sup>22</sup> Whether Purdy was an incompetent administrator, or hampered by lack of support from doctors, or restricted

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by military expenditure, is uncertain.<sup>23</sup> What can be concluded from later accounts of Purdy's time as Director is that few initiatives occurred during his directorship. He was unable to marshal the necessary numbers of doctors for military service, and was ineffective as an advocate for the nursing service. Purdy's time as Director expired in July 1913 and his assigned position went to Dr. W. Will. This change, and the outbreak of war a year later, opened the way for nurses to become more involved in military nursing.

The appointment of the new Director of Military Medical Services influenced the future progress of military nursing. Maclean benefited both from the emphasis now being directed towards military preparation (from 1912, under the new Reform Government, there was a move to improve national defence), and the fortunate appointment of Will.<sup>24</sup> Will, a longstanding medical member of the Trained Nurses' Association, had supported the development and extension of civilian nursing, and now he extended his support to include military nursing.<sup>25</sup> Change occurred quickly. Within months of Will's appointment Maclean became formally acknowledged as matron-in-chief, had her name listed in the *New Zealand Gazette*, and rapidly moved to develop a substantial military nursing organisation.

By October 1913, Maclean had set in place a variety of rules and regulations related to military nursing. Military nursing became classified as work for trained nurses. In the event of war, probationers, already ensconced in public hospitals, would fill the gaps left by trained nurses who would move into military services. Imitating the hierarchy of military arrangements, she appointed each of the matrons of the four major public hospitals to lead a unit of nurses. Their instructions, 'to form a detachment of sixteen' trained nurses under the age of forty years from hospitals and private practices, set the formation of military nursing for years to come.<sup>26</sup> The four matrons, all members of the Trained Nurses' Association, became responsible

for the local organisation of military nursing and assisted with the selection of nurses for military service. The structures now in place, Maclean requested volunteers to make up a reserve ready to move in the event of war.<sup>27</sup>

## ESTABLISHING A NURSING FORCE

With the outbreak of war in August 1914, trained nurses, like the men who enthusiastically volunteered for war duties in the early months of the war, became caught up in the general swell of patriotism and willingly offered to take their share in working for their country. Three months after war had been declared, a robust number of 400 nurses had volunteered as members of the army nursing service reserve. Although the New Zealand Government had still not acknowledged the place of nurses, nurses were waiting in the wings, ready for the moment when they could move into formal military structures.<sup>28</sup> A number of nurses, in patriotic zeal, independently travelled overseas to join the Queen Alexandra Imperial Military Nursing Service Reserve (QAINS(R)), the British Territorial Nursing Service, or the Red Cross Nursing Society. Grace Neill, a strong believer in nurses' involvement in war, made an impassioned plea that nurses should fight for their place within military structures. 'Why', she asked, 'in 1914, do men make tall talk about Florence Nightingale, and then practically ignore the lesson she taught the British Army and their red-tape Medical Service?'<sup>29</sup> Intensely enthusiastic for nurses to be involved in overseas military service, Maclean also rallied her troops through the *New Zealand Nursing Journal* editorials.<sup>30</sup>

Underlying Maclean's desire for nurses involvement in war was her concern that untrained women might be given priority over trained nurses, a situation still being met with in private hospitals and homes. For Maclean, trained nurses had a place alongside the New Zealand soldiers in the fight against 'the terrible stories we read (which) ... strike terror into the hearts of the innocent country people ...'<sup>31</sup> So she

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balanced her appeal to patriotism with a recognition of the professional abilities of the trained nurse. Stressing the importance of nurses' professional skills, she urged the Government to accept the services of New Zealand nurses alongside their sisters-in-arms, the nurses of Britain and Australia.<sup>32</sup> Only the best nursing was good enough for the wounded soldiers, and this could only be achieved by employing trained nurses.

Although it appeared that nurses required little urging to serve their country, the limitations placed on New Zealand's war commitment hampered their involvement. The main thrust of the New Zealand medical service was initially, on care of the wounded at the battle front. This service was the domain of doctors, orderlies and stretcher bearers. The British War Office and the New Zealand Government agreed that wounded New Zealand soldiers should be moved to England rather than risk transport through the Red Sea.<sup>33</sup> These arrangements made no mention of the services for the 'sick' soldier. As had occurred in the South African War, decisions on medical services came from the Imperial Force medical staff and, in their estimation, the number of soldiers initially requested from New Zealand did not warrant more than a medical service for the wounded.<sup>34</sup>

## **SURPRISING DEVELOPMENTS**

When six nurses out of the now available 400 were suddenly selected to travel with the Advanced Expeditionary Force to German Samoa in August 1914, their duties reflected the traditional organisation for female nurses.<sup>35</sup> These nurses would attend the civilian Samoan population. The appointment of the nurses brought to the fore the question of women's place in war and its implications for the military. No uniforms existed for women, and no clear rules had been established for their duties or placement on the transport ships. The initiative to send six nurses on the troopships with the Advanced Force, 'details ordered by Sir Alexander Godley in excess

of war establishment', was a pragmatic solution for staffing, and Maclean had had little input into the decision.<sup>36</sup> Previously staffed by German doctors and nurses, the hospital at Apia treated the civilian population. Once Samoa had been occupied, so Godley thought, the New Zealand nurses would replace the German nursing staff.<sup>37</sup>

The news that nurses had been called upon came as a surprise to Maclean and though she selected the nurses, their prescribed nursing duties remained under the control of politicians, military advisers and doctors. These six nurses wore a uniform similar to the QAIMNS(R), and are recorded in the ship's records as belonging to this British service, even though no official recognition from Britain had been obtained. It seems to have been an arbitrary decision by the New Zealand military authorities to call these nurses members of the QAIMNS(R).<sup>38</sup>

## **THE BATTLE FOR GREATER RECOGNITION**

For nurses in general, the selection of six nurses for Samoa was not sufficient evidence that nurses' role in war had been acknowledged. On 31 December 1914, a carefully selected deputation from the Trained Nurses' Association met with Allen, the Minister of Defence, to request his support for nurses to be considered a practical part of the war effort.<sup>39</sup> With Maclean in attendance, Dr Marshall Macdonald of Dunedin, the selected leader of the deputation, informed Allen that Australia had already sent nurses with Australian hospital ships and it was now timely to consider the responsibilities of New Zealand towards its wounded soldiers.<sup>40</sup> Nellie Monson, a South African War nursing veteran expanded on the lessons learned during the South African War. 'Though the orderlies there did good work' she stated, 'they were not competent to attend to critical cases'.<sup>41</sup> The situation of the South African War, when men died from pneumonia and dysentery and hospital staff failed in their attempts to meet the demands of the sick, made an impressive argument and

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reinforced the concern nurses had for the New Zealand soldiers.

A strong sense of womanly concern for the welfare of the soldier, the support of a doctor to give weight to the argument, and an organised appeal from a disciplined, well organised nursing profession appeared to have the desired effect. Moreover, British and Australian nurses had already joined the war effort and were now proving their worth in military hospitals, on hospital ships, trains and barges. New Zealand nurses could also report on news from Britain that told of untrained women led by British women of standing, availing themselves of the opportunity to care for the soldiers.<sup>42</sup> This fact had already come to the notice of officials who thought it possible that amateur New Zealand women would also take the initiative and move in mass to nurse the soldiers. Already, numbers of women had made inquiries about the possibility of overseas nursing assignments. Women with experience ranging from good health and a good sailor, a St John's Ambulance nursing certificate, or a personal 'desire to nurse the soldiers', offered to serve as nurses overseas.<sup>43</sup> Professional nurses offered the promise of an organised group of disciplined women, rather than the likely disorder which could result if amateur women, unfettered by organisational structures and bent on gaining a place in military nursing, took matters into their own hands. On 6 January 1915, Allen cabled the British War Office, offering the service of fifty New Zealand nurses.<sup>44</sup> He also contacted the Defence Minister of the Australian Commonwealth, F. Andrew Fisher, suggesting New Zealand nurses be included in any subsequent detachments of Australian nurses.<sup>45</sup>

Further reasons for Allen to meet the requests of the deputation emerged some months later. Aware since November that reinforcements would be required for the next four or five months, Allen anticipated New Zealand's military contribution increasing rapidly beyond initial projections.<sup>46</sup> Medical services had already created some

concern. The rate of sickness among soldiers at camp had increased with the death of two soldiers from cerebro-spinal meningitis. It also seemed likely that the Main Body, now training in Egypt, would soon be involved in battle.<sup>47</sup> Along with this, a steady increase in the numbers of sick soldiers being admitted to British general hospitals in Egypt and reported outbreaks of venereal disease and cerebro-spinal meningitis required some further commitment to soldiers' welfare, and nurses, with their knowledge of nursing the sick, could be a good investment.<sup>48</sup> By the end of 1914, England had begun to use amateur workers, Voluntary Aid Detachments members (VADs), to care for recuperating soldiers. In fact, one group of VAD members had been working in France for two months, setting up rest stations and first aid centres in Boulogne.<sup>49</sup>

Allen, fearing the war was far from over, and estimating the heavy demands about to be made on the medical service, not only from wounds but also from sickness, could see a way to placate those who were pressing for more government commitment to the welfare of soldiers. Nurses who were begging for a place in military work and anxious to be represented in war could add to the numbers of medical personnel now likely to be required for an expanding military services.

## SUCCESS AT LAST

By 26 January 1915, a reply from the British War Office accepted the New Zealand Government's offer of fifty New Zealand nurses, no doubt spurred into action by the now obvious necessity for military nurses.<sup>50</sup> By March, the Australian Government had also accepted twelve New Zealand nurses.<sup>51</sup> This first group of fifty nurses, many of whom remained in military service for the duration of war, were all classified as European, unmarried and each had at least six years of nursing experience. Maclean, in consultation with the Trained Nurses' Organisation and the matrons of the four major hospitals, hurriedly selected the women who would represent New Zealand nursing. She also organised their uniform,

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designed a military nursing badge, constructed the content of the military nursing 'kit' with its equipment of kettle, deck-chair, scissors, forceps, aprons and uniform, and made arrangements for the nurses to be enrolled as formal members of the Expeditionary Force.<sup>52</sup> The arrangements for the organisation of New Zealand nurses was not entirely in accord with Maclean's wishes. The NZANS became a distinct section under the supervision of a 'responsible (New Zealand) matron'. The overall control, however, was in the hands of the British matron-in-chief of the QAIMNS.<sup>53</sup> While this meant taking orders from, and working with, the Imperial nursing services, at least this could be seen as a start towards achieving the objective that military nursing would become work for New Zealand trained nurses. Whatever the outcome might be, Maclean and her nurses expressed a sense of relief that at last they were going to war.

Trained nurses seemed undeterred by the prospect of war work.<sup>54</sup> They also seemed unconcerned that their status in the army was, at this point, unclear.<sup>55</sup> Selection ahead of the many untrained women offering their skills was an achievement in itself. Although nurses were enrolled as formal members of the New Zealand Expeditionary Force, military regulations stated that only men could be members of the New Zealand Naval or Expeditionary Forces. A proposed amendment to the Defence Act 1915 to give recognition to the Army Nursing Service, failed to eventuate, and the official position of nurses remained unclear for the duration of war.<sup>56</sup> Maclean had made a plea to Allen as early as June 1914 that, in the event of war work, nurses should have military status within military structures. Allen replied that pay arrangements had been made but that no statutory authority existed for the formation of a nursing service.

Perhaps confident that Allen would initiate changes to the Defence Act to include the nursing service, or perhaps unconcerned with the finer legal details now that the nursing service had got under way, Maclean pushed ahead with arrangements,

completing details for New Zealand nurses' military representation.<sup>57</sup> Requesting absence from the Health Department to act as matron for the contingent she prepared for overseas action.<sup>58</sup> The contingent of twelve nurses who would work alongside the Australian Army Nursing Service throughout the war left on 1 April 1915.<sup>59</sup> By 15 April 1915, the first contingent, under the supervision of Maclean, left for England on the *Rotorua*. A further fifty nurses went through the routine of enrolling with the Expeditionary Force confidently expecting that they, too, would have the opportunity for overseas service. In the same month as the onslaught at Gallipoli began, the members of the NZANS commenced their overseas military nursing experience. Having gained a place in military structures they now set out to prove their abilities as nurses to World War I soldiers.

## CONCLUSION

A number of paradoxes emerge as significant from this brief account of early New Zealand military nursing. On the other hand, beliefs about women and war assisted nurses to enter military structures and shaped the role they played. On the other hand, military structures thwarted nurses contribution to the war effort. Again, womanly duties assisted nurses to be recognised as the appropriate carers of the soldiers. But alternatively, it reinforced the dominant ideology that women's place was away from the decision making and away from the action. These paradoxes placed the nursing profession in a lonely place, struggling to align itself with the military but also reinforcing the image of the 'good' woman and nurse. The masculine domain of the military organisation perpetuated the Victorian notions of women's 'natural' avoidance of military concerns and resulted in a situation that limited the control the nursing profession had over its military contribution. It would be interesting to hear how the first woman who lead men into combat found her role defined, and the paradoxes she met as the leader of men within what is commonly seen as a masculine domain.

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## ENDNOTES

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- 20 Confidential letter from Grace Neill to Right Honourable Richard John Seddon, 29 July 1905, proofs of J.O.C. Neill's Book, New Zealand Nurses' Association Files, Box 18, File 1, Alexander Turnbull Library (ATL).
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- 23 Purdy, appointed to a new position as Director of the National Military Medical Service in 1915, complained that his duties had become unduly restricted by lack of assistance given by doctors, when he received censure for lack of 'energetic and effective methods' to control outbreak of cerebro-spinal meningitis at Trentham Military Camp.
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- 27 Anon. (1913). 'The New Zealand Branch Queen Alexandra's Military Nursing Reserve'. *NZNJ*, 6:4, p. 159.
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- 33 Memorandum from Wortley, Director of Movements, British High Commission to High Commissioner, New Zealand, 22 March 1915, ADI, 49/112, National Archives (NA).
- 34 I. McGibbon, p. 240.
- 35 On 15 August 1914, the first contingent of the New Zealand Expeditionary Force, the Advanced Expeditionary Force, left New Zealand for German occupied Samoa with six nurses also on board the transporters. Ida Willis joined them at Fiji where she was on holiday.
- 36 P.M.O. (Principal Medical Officer), Samoa, 27 August 1914 to 23 September 1914, War Dairy, War Archives (WA), Series 213, 213/1, NA.
- 37 Anon. (1914). 'New Zealanders at Samoa', *NZMJ*, 7:4, p. 171. Australian nurses initially provided services for the civilians at the hospital at Namanula, Rabaul, see Australian Medical Corps, Administration in Egypt, 1915. Memorandum from the DGMS (Director General of Medical Services), 12 January 1916, Tait File, No. 32, Australian War Museum (AWM), Canberra.
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- 39 Anon. (1915). 'Active Service' *NZMJ*, 8:1, p. 13.
- 40 *Ibid.*, p. 13. Dr Marshall Macdonald was president of the Dunedin Branch of the Trained Nurses' Association in 1914. His wife, Sadie, was an Australian trained nurse and also a member of the Association.
- 41 Anon. (1915). 'Active Service' *NZMJ*, 8:1, p. 13. Nellie Monson trained at Dunedin Hospital 1889-92 and was secretary of the Otago Branch of the Trained Nurses' Association.
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- 44 Telegram from J. Allen to Colonel A.W. Robin, 31 December 1914, Nurses-Samoa, Correspondence re. 1914/19, ADI, 49/65/1, NA.
- 45 Telegram from J. Allen to Right Honourable A. Fisher., 31 December 1914, ADI, 49/65/1, NA.
- 46 Letter from Minister of Defence, J. Allen to General Sir Alexander J. Godley, 22 January 1915, WA Series 252, 252/1, NA.
- 47 The Main Body was the title of the Expeditionary Force which left New Zealand 16 October 1914. This title distinguished it from the Advanced Party which had gone to Samoa in August 1914.
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- 51 Twelve New Zealand nurses join the Australian Army Nursing Service and worked with this service throughout the war.
- 52 'Nurses' Uniforms' (1915). *Parliamentary Debates*, 8 July and 14 July, pp. 173, 327.
- 53 Anon. (1915). 'Nurses for Active Service', *NZMJ*, 8:2, p. 62.
- 54 Diary of Annie Buckley, 1915-1917, private collection, B. Buckley, Wellington.
- 55 Memorandum from the Solicitor-General to the Under-Secretary of Lands, Discharged Soldiers Settlement Act 1915, 6 October 1917, Land and Survey Series, 13/25, NA.
- 56 Defence Force of New Zealand, *Appendices to the Journal of the House of Representatives*, 1916, H-19, Vol II, p. 8.
- 57 Anon. (1915). 'New Zealand Army Nursing Service', *NZMJ*, 8:2, pp. 72-73.
- 58 Telegram from J. Allen to Rhodes, 1 February 1915 ADI, 49/65/1, NA.
- 59 Anon. (1915). 'N.Z. Nurses for the Australian Army Nursing Service', *NZMJ*, 8:2, p. 69.