

A Leading Nurse in World War One: Dame Maud McCarthy

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Abstract

Dame Maud McCarthy was born in Sydney, Australia in 1859, the first child in a large, wealthy family. In 1889 she travelled to London, where, giving her age as a year younger than she really was, she entered the probationer's programme at The London Hospital and trained as a nurse. She joined the military nursing establishment and served in the South African War and then as matron of several military hospitals in the United Kingdom. With the outbreak of World War One, she was made Matron-in-Chief, France and Flanders, in which position she was in charge of all the nurses from British Empire countries and the United States of America. McCarthy introduced innovations such as anaesthetic nurses, and was one of the first to recognise what was known as "shell shock". She facilitated special nursing for men suffering from this. After the war, she became Matron-in-Chief of the Territorial Army Nursing Service. McCarthy was awarded many honours, and was made a Dame of the British Empire in 1918. She died in 1949 and was buried in London. Her influence on nursing as a profession was profound.

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Figure 1: Dame Maud McCarthy, Matron-in-Chief, British Expeditionary Forces, France and Flanders, World War One. (With permission from the Army Military History Museum, Aldershot, UK).

Introduction

In World War One, men and women from across the British Empire countries served. Most of the women were nurses. The nurse who was the supreme leader of British Empire and American nurses serving overseas was the Matron-in-Chief for France and Flanders, Dame Emma Maud McCarthy (1859-1949) (Figure 1). Born in Sydney, Australia, McCarthy became a hugely influential figure in nursing, though today is often forgotten outside military nursing circles. This brief paper explores the background to nursing in World War One and how an Australian woman came to lead nursing in the “war to end all wars”.

Background

The catalyst for the commencement of World War One was the assassination in Sarajevo of Archduke Franz Ferdinand, the heir to the Austro-Hungarian throne, and his wife Sophie, on the 28 June 1914. By 4th August, Serbia, France, Russia, Great Britain and the Empire were at war with Germany and Austria-Hungary. By 1917, the war included most countries in Europe, in addition to Japan and the United States of America (USA) (Stevenson, no date). Stirred by a strong connection to Britain as the “Mother Country” and centre of Empire, men from across the British Empire countries enlisted between 1914 and 1918, joined by a smaller number of women, most of whom served as nurses (Australian War Memorial, no date). The complex political alliances and treaties that led to World War One resulted in the death of 35 – 40 million soldiers and civilians (Sarkees, 2000).

Nurses from the British Empire served in France, Greece, India, Serbia, Egypt and other theatres of war. Most were in military services such as Queen Alexandra’s Imperial Military Nursing Service (QAIMNS), while others joined civilian nursing services. Those who were actual members of the military nursing services were qualified nurses, but those who wanted to serve and were not trained nurses joined the Voluntary Aid Detachments (VADs). By the end of the war, 90,000 women had served as VADs both on the home front and on postings overseas (British Red Cross, no date). Women from the countries of

the British Empire including Australian, New Zealand, South Africa, Canada and India served with their counterparts from France, Belgium and other European countries, and from the USA after they joined the war in 1917. While nurses joined their respective countries’ nursing services, some served in British organisations such as the QAIMNS. As an example, the majority of Australian nurses (2,498) served in the Australian Army Nursing Service; and at least 720, including McCarthy, joined British and other nursing organisations (Harris, 2008).

The nurses worked in dangerous and unpredictable conditions in a range of arenas. They were employed in casualty clearing stations (the nearest service areas for nurses to the front line, from where wounded soldiers were triaged and sent to the so-called stationary hospitals before being transferred to a base hospital), the trains and barges in which the wounded were transported, on the ships that carried soldiers back to England for rehabilitation, and in hospitals in England (Hallett, 2009).

The nurses, in addition to describing the horrific traumatic injuries caused by bullets and shrapnel, spoke of the psychological injuries caused by “shell shock”. The horrors of phosgene, chlorine and mustard gas were added to this menu of suffering nine months after the war began (Rees, 2008). This was the experience of many nurses working in varying contexts from casualty clearing stations to rehabilitation facilities. They were expected to utilise a broad range of skills, for example triage, early management of trauma, medical retrieval, surgery, anaesthetics, complex wound management, pain management, physiotherapy and nutrition. Of no less importance was the establishment of therapeutic relationships based on trust, empathy and skilled communication. Often this care was provided at cost to the physical and psychological health of the nurses themselves (Hallett, 2009; McCullagh, 2010). In charge of them all was Emma Maud McCarthy, described by a contributor to the Sydney Morning Herald in 1914 as a ‘slight, delicately-organised woman’ with ‘an absolutely wonderful gift for concentrated work, and a power of organisation that has made her invaluable in army hospital

work’ (McCarthy, 1986). This strong leadership, characterised by tact, skill, bravery and determination, was a boon to her nurses and army General Headquarters. Undoubtedly, her presence as Matron-in-Chief of the British Expeditionary Force improved the quality of care experienced by thousands of injured men (McCarthy, 1986).

Dame Maud McCarthy

Emma Maud McCarthy was born in Sydney, Australia on 22 September 1859, the oldest of 11 children (McCarthy, 1986). Her father, William McCarthy (1832-1881), was an influential solicitor, while her mother, Emma áBeckett (1840 - 1902) was the sister of the Chief Justice of Victoria, Sir William áBeckett. Emma Maud was known as Maud, and went to school at Springfield College at Potts Point in Sydney. She travelled to London about 1889, and in 1891 started her nursing training at The London Hospital in Whitechapel. Her probationer records have her on admission as 28 years, suggesting that she lied about her age so that she would be accepted as a trainee nurse. Despite her probationer record stating that she was “wanting courage” and “needing more force of character” (The London Hospital, 1894), she was eventually made Sister. With six others from the London Hospital, she joined the Princess Alexandra’s Nursing Contingent and served in the South African War from 1899 to 1902, where she was awarded the highest nursing honour, the Royal Red Cross and the Queen’s and the King’s Medals (McCarthy, 1986).

Following the South African War, the British government realised that a military nursing force was needed and Queen Alexandra’s Imperial Military Nursing Service (QAIMNS) was established (Piggott, 1990). The “QAs” as they came to be known, were an elite force that maintained the highest of standards of nursing practice, modern techniques and professionalism. In 1903, McCarthy joined QAIMNS, following a rigorous selection process that considered schooling, nursing training and social standing (Light, 2010). During her time before World War One, she served as matron in the three main military hospitals in England. When World War One broke out in 1914, she was sent with the first contingent of nurses to set up the

British Commonwealth Nursing Service in France with headquarters in Abbeville (McCarthy, 1986).

There were two matrons. Miss Ethel Becher (1867-1948) was the Matron-in-Chief of the QAIMNS, and McCarthy answered to her in her position as Matron-in-Chief, France and Flanders. She also answered to the Director of Medical Services (Light, 2010). In this position, McCarthy was responsible for all the nurses serving in France and Belgium from the United Kingdom (UK) and its Commonwealth countries, and later in the war, the American nurses as well. She co-ordinated not just nursing in the hospitals, but in the casualty clearing stations, the stationary hospitals, the trains and barges, and on the ships. McCarthy had not just the nurses for whom she was responsible – those who were there as VADs (untrained nurses, domestic staff and other ancillaries), also came under her remit.

McCarthy was one of the first to recognise that men's psychological states were being damaged in the same way as their bodies, and set up special units where men with "shell shock" (today known as post-traumatic stress disorder) could be nursed. She was also very supportive of the work of the VADs and lobbied the nursing education establishments to give women who had been VADs recognition of the training they received in war if they wanted to train as nurses after their service had finished (Light, 2010). Other innovations included allowing nurses to train as anaesthetists, although she stopped this when workforce requirements meant that nurses were required for general nursing, rather than specialisation (Light, 2010). After the war, McCarthy became Matron-in-Chief of the Territorial Army Nursing Service. She retired in 1925 (McCarthy, 1986).

McCarthy's service was exemplary, and she earned a raft of honours (McCarthy, 1986). She was appointed Dame Grand Cross (GBE) in 1918 (Figure 2); was awarded the Royal Red Cross and Bar, Legion of Honour (Chevalier) France; She was made a Lady of Grace of St John of Jerusalem; invested with the Medaille de la Reine Elizabeth avec Croix Rouge, Belgium; Medaille Epidemies an Vermeille (France); and was awarded the American Red Cross Medal and the



Figure 2: Dame Maud McCarthy robed for attendance at the coronation of King George VI. (With permission from the Army Military History Museum, Aldershot, UK).

Florence Nightingale Medal. Dame Maud McCarthy died on 1 April 1949 and she is buried in Chelsea Cemetery in London (McCarthy, 1986).

Conclusion

On 23 June 2014, a Blue Plaque (a scheme run by English Heritage to recognise where well known historical figures had lived) was placed on her former home, 47 Markham Square, Chelsea, London. Her extensive daily diaries have been digitised on Scarlet Finders website: <http://www.scarletfinders.co.uk/110.html>. This excellent resource is a gold mine of information about life for McCarthy and her nurses during World War One.

Emma Maud McCarthy was a hugely influential and important nurse in history, but outside military nursing, is largely forgotten. She embodied many of the qualities important to contemporary nurses, such as the ability to think strategically and critically, to problem solve effectively and to lead in a manner that inspires loyalty and confidence.

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