

Title VIII Research Scholar Program Grant Final Report

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My research focuses on Russian women during World War I. My first book, *They Fought for the Motherland: Russia's Women Soldiers in World War I and Revolution* (University Press of Kansas, 2006) explored the experiences, roles, and significance of the thousands of women who entered combat service in Russia during the Great War. This is the pioneering work on the subject, breaking new scholarly ground as the first to explore this topic in depth using extensive archival and printed sources. The book was chosen as a selection of the History Book Club in 2007 and has been lauded as an important contribution by leading scholars in Russian, women's and gender, and military history.

My current project concerns the women who served Russia in medical capacities in the World War I. As a "total war," the First World War required the participation of millions of individuals, including many women. Although women engaged in a variety of wartime activities, the most popular form of female service was nursing. In Russia, tens of thousands of women became involved in nursing activities. By 1917, the number of women serving as "sisters of mercy," as Russian nurses were called, was approximately 30,000. Nurses served in the Russian Society of the Red Cross as well as in organizations "under the flag" of the Red Cross such as the All-Russian Union of *Zemstvos* (local government organs) and All-Russian Union of Towns. Without their participation, the nation would have been unable to prosecute the war. Army military medical services needed extensive assistance from civilian organizations to treat the enormous numbers of wounded and ill soldiers that resulted from the conflict. Nurses

also carried out vitally important services among Russia's civilian population, as the war precipitated a crisis in public health in Russia: epidemic diseases spread, millions faced homelessness, starvation and illness, and thousands of children lost their parents.¹

As one of the most prominent ways that women became involved in the war, wartime nursing deserves critical scholarly engagement. Despite the immense importance of the contribution of women to the Russian war effort, their experiences have received scant historiographical attention. As with many conflicts, the "myth of war" celebrated male achievements in a masculine endeavor, relegating female activities to secondary positions, even overlooking them at times. This gap has begun to be filled by scholarly studies of women and the war in Western Europe, including some attention to nursing. The same cannot be said of Russia's Great War, despite the fact that the participation of Russian nurses was often profoundly different than those of their Western counterparts. As historian Peter Gatrell has commented, "military nursing is the obvious example" of how "the war also demonstrated female capacity to enter directly the military terrain, in ways that both liberated women and disturbed current convention" and thereby deserves serious scholarly attention.² Works that explore women's roles in the conflict are rather scarce, and there is, as of yet, no comprehensive scholarship devoted to Russian women and World War I. Those that address women in nursing activities specifically are indeed scant. Russian scholars have begun to address the topic of nursing in general and the *obshchiny* (communities) of Russian Society of the Red Cross, including chapters on World War I.³

¹See V. P. Romaniuk, V. A. Lapotnikov, and Ia. A. Nakatis, *Istoriia sestrinskogo dela v Rossii* (St. Petersburg: SPbGMA, 1998), 78 and *Rossiskii Gosudarstvennyi Voенно-Istoricheskii Arkhiv* (hereafter RGVIA) fond 12651, opis 3, delo 456, list 71.

²Peter Gatrell, "The Epic and the Domestic: Women and War in Russia, 1914-1917," in Gail Braybon, ed. *Evidence, History and the Great War: Historians and the Impact of 1914-1918* (New York: Berghahn Books, 2003) 202.

³These important works include A. V. Posternak's *Ocherki po istorii obshchin sestry miloserdiia* (Moscow: Izdatel'stvo Sviato-Dimitrievskoe Uchilishche sestry miloserdiia, 2001); V. P. Romaniuk, V. A. Lapotnikov, and

However, in Western historiography, there are no studies dedicated to the experiences of Russian women as nurses in the Great War. This presents a serious oversight, not only in terms of gaining a fuller understanding of Russia's war, but also because the experiences of Russian nurses were often profoundly different than those of their Western counterparts. In contrast to the oft-stagnant trench warfare of the Western front, combat on the Eastern Front was extremely mobile. While most Western nurses were assigned to stationary hospitals, Russian medical personnel were required to move quickly with the troops, so rapidly that medical units sometimes arrived at a location one day only to evacuate the next. Moreover, unlike Western European nurses, Russian nurses often served very close to the fighting and were subject to dangerous and difficult conditions, very similar to those of combatants. Officially, female medical personnel of the Russian Red Cross and its subordinate organizations were supposed to remain three to four miles from the actual fighting, as in Western nations. Such procedural regulations were completely impractical, considering the rapidity with which the front lines moved and the great need for medical personnel. The battle lines on the Eastern Front shifted so often that distinguishing between "front" and "rear" became virtually impossible. While some Russian women were stationed in permanent hospitals or other fixed medical establishments, many others were part of movable units that operated alongside the armies on the front. These included mobile dressing stations, ambulatory transport units, and "flying columns" (*letuchky*), described by nursing scholar Christine Hallett as "mobile hospitals housed in makeshift

Ia. A. Nakatis, *Istoriia sestrinskogo dela v Rossii* (St. Petersburg: SPbGMA, 1998); and Iurii Khechikov, *Angely Khraniteli* (Moscow: Agenstvo vmeste, 1993). Few Western scholars of nursing have engaged with Russian subject matter. The exceptions are Christine Hallett, "Russian Romances: Emotionalism and Spirituality in the Writings of Eastern Front Nurses, 1914-1918," *Nursing History Review* Vol. 17, No. 1 (2009), but her analysis is limited to two Englishwomen serving as nurses in Russia and one Anglo-Russian woman and Elizabeth Murray, who discusses the nursing profession in Russia and the Soviet Union in "Russian Nurses: From the Tsarist Sister of Mercy to the Soviet Comrade Nurse" in *Nursing Inquiry*; Vol. 11, No. 3 (2004), but she neglects World War I.

accommodation or tents, carried on cumbersome wooden horsedrawn wagons, but often moving almost as rapidly as an army.”⁴

The experiences of Russia’s female wartime medical personnel must be integrated into the narrative and analysis of the war experience in order to create a more complete understanding of the conflict and its impact. The common assumption that medical positions were less dangerous and better suited to women than other wartime activities such as combat is revealed as a fallacy through a closer look at women’s medical services in Russia. Women’s wartime medical service actually shares many of the features of the male war experience (even in its mythological form).

An examination of Russia’s wartime nurses during World War I reveals much about the ways that women and war intersected and interacted. Most significantly, such an investigation demonstrates the variety of ways their experiences were shaped by a number of important influences. Gender is undoubtedly one such significant factor; in particular, the ways in which women as wartime nurses simultaneously confirmed and transgressed contemporary gender roles.⁵ Medical service was seen by contemporaries as consistent with what many assumed to be “natural” femininity in early twentieth century Russian society: caring, nurturing, passive, and supportive and was generally accepted as an appropriate way for women to fulfill national duty during a time of crisis. Nursing was supposed to be a distinctly gendered activity and a clear separation of spheres of activities was drawn, with women serving as passive nurturers while men fulfilled the roles of active defenders. As noted above, however, Russian wartime nursing moved women well beyond these traditional gender boundaries into nebulous areas and even into

⁴Christine Hallett, “Russian Romances: Emotionalism and Spirituality in the Writings of “Eastern Front” Nurses, 1914-1918, *Nursing History Review* 17 (2009), 102.

⁵The ways in which the Russian wartime nursing experience of World War I belie conventional gendered divisions are explored more thoroughly in Laurie Stoff, “The Myth of the War Experience and Russian Wartime Nursing in World War I,” *Aspasia, The International Yearbook of Central, Eastern, and Southeastern European Women's and Gender History* 6 (forthcoming, 2012).

distinctly male realms. Some nurses served in the forward positions, in the trenches, and even on the battlefields. They were not shielded from the difficult conditions of war and from coming into contact with aspects of life considered inappropriate for women. They experienced extreme cold, constant fatigue, vermin infestations, contagious diseases, deadly artillery fire, and aerial bombardment. The red crosses worn on their uniforms did not protect them from becoming victims of violence. Moreover, nurses often took on roles considerably more active than the passive binding of wounds. They took on leadership roles, engaged in arduous physical labor, came into contact with naked male bodies, and some even crossed the line into combat activities.

Because armed conflict is a highly gendered activity, a study of Russia's wartime nurses has much to demonstrate about the relationship between women and war and the dynamism of gender during this period. Historically, men and women have been assigned distinct and specific behaviors in wartime. The gendered implications of the First World War have long been considered of primary importance to scholars of the conflict. The arguments concerning the impact of the war on women range from an emancipatory experience to one that solidified the sexual division of labor and restored patriarchy. Recently, scholarship has moved to presenting more nuanced interpretations of the ways that war and gender intersected. On the surface, female medical service seems consistent with efforts to retain or restore a traditional gender order because it was seen as passive and supportive to active, male warrior heroes. Yet, wartime medical service moved women well beyond these traditional boundaries into nebulous areas and even into distinctly male realms. Upon closer examination, many of Russia's nurses actually demonstrated the limitations of traditional conceptions of femininity and failed to restore strict sexual divisions of labor.

In examining the way female medical personnel participated in and were impacted by the war, however, gender is not the only useful framework for analysis. In particular, class and social status were vitally important determinants of experience for Russian sisters of mercy. Distinct differences existed between female nurses, revealing inadequacies of literature on women and the war that, as scholars such as Gail Braybon have argued, “choose to discuss ‘women’ as though all ages and classes went through a single, defining war experience.”⁶ By using the lens of class in addition to that of gender in investigating the experiences of Russia’s wartime nurses, one can avoid the methodological pitfall of ascribing a singular model of representation to women’s war experiences. In so doing, wartime nurses become salient examples of the dynamism of Russian social structures during the war period, attesting to significant malleability and change within those structures, while simultaneously indicating the continued importance of traditional roles and old forms of social designation and, perhaps more importantly, personal connections based on status.⁷ As a result, they demonstrate the impact of the First World War on Russia beyond merely preparing the ground for the revolutions of 1917, focusing on the ways that the war created new opportunities for action while simultaneously allowing existing social structures and identities to continue to operate.

⁶Gail Braybon, ed. *Evidence, History and the Great War: Historians and the Impact of 1914-1918* (New York: Berghahn Books, 2003), 15.

⁷The view of an unresponsive and inflexible estate structure is a key feature of Soviet historiography of the late Imperial period and figures centrally into that interpretation of the causes of the 1917 Revolution. In the West, this notion has been popular, promoted by scholars such as Alfred Rieber in *Merchants and Entrepreneurs in Imperial Russia* (Chapel Hill: University of North Carolina Press, 1982). The challenge to this interpretation has been presented by historians such as Daniel Brower in *Estate, Class, and Community: Urbanization and Revolution in Late Tsarist Russia*, Carl Beck Papers in Russian and East European Studies (Pittsburg: University of Pittsburg Press, 1983) and Gregory Freeze in “The *Soslovie* (Estate) Paradigm and Russian Social History,” *The American Historical Review* Vol. 91, No. 1 (February 1986): 11-36. For examinations of the extent to which connections were still vital, see Geoffrey Hosking, “Patronage and the Russian State,” *Slavonic and East European Review* Vol. 78, No. 2 (April 2000): 301-20.

Examining the experiences of women's wartime medical services provides valuable insight into the ways in which governments mobilize and utilize civilian populations during war in order to accomplish their military goals. More specifically in the context of early twentieth century Russia, women's medical services are important to the debate concerning Russia's development at this critical juncture in its history. The voluntarism of women in the Russian Society of the Red Cross, the Union of Zemstvos, the Union of Towns, and other non-government organizations was invaluable to the war effort, but theirs and other volunteer efforts, even those initiated after the fall of tsarism, represent ample evidence for the presence of a developing civil society, one that had begun to congeal prior to the war and which continued to grow during the conflict. As historian Aaron Cohen has argued, "one cannot deny that Imperial Russia had a functioning civil society mobilized to conduct tasks in a public sphere made up of mass media, commercial culture, and nongovernmental institutions by the early twentieth century."⁸ During the war, a proliferation of civilian organizations took up wartime activities as part of the mass mobilization required by total war and thus, Russia's civil society continued to develop during the Great War. Such a civil society, however, seemed fundamentally incompatible with the tsarist regime, even as it evolved toward more a participatory political structure. Efforts to mobilize medical support for the Russian armed forces is a poignant case study, specifically demonstrating the turbulent relationship that civilian organizations had with the tsarist regime and indicative of the problems tsarist (and even democratic) Russia had in making efficacious use of civilian efforts, despite ample presence of desire, skill, resources, and initiative. The autocracy was loathe to relinquish responsibility to and was highly suspect of even the most well-intentioned of private initiatives, even during the crisis period of the Great War. The

⁸Aaron Cohen, *Imagining the Unimaginable: World War, Modern Art, and the Politics of Public Culture in Russia, 1914-1917* (Lincoln: University of Nebraska Press, 2008) 7

Russian Army suffered similar reluctance to accept aid from civilian quarters. This proved disastrous, since official efforts to provide requisite auxiliary, particularly medical, services to the armed forces were woefully thin and terribly mismanaged. Such problems are further revealing of larger difficulties facing the country not only as a result of the strain of the war and the deterioration of the autocracy, but also the failure of liberalism to take root in Russia. This has contemporary relevance, as this debate has resurfaced since the fall of communism in 1991, and once again the question of whether Russia can emulate, or is even desirous of following, the model of democratic development is central to national policy. Furthermore, my study has implications beyond the borders of Russia, examining ways in which governments mobilize and utilize civilian populations during wartime.

In investigating the women who served Russia in medical capacities during World War I, I have made use of a variety of sources to construct a narrative of their experiences and to analyze the relevance of their service to the war, to gender roles, and the relationship between women and war. I have mined the wartime Russian press for articles covering the activities of women in medical services. I have made extensive use of the journals of the Russian Red Cross, charged with carrying out medical services during the war. I have collected a number of personal accounts of those who had direct experience in the war. I have explored the collection at the Hoover Institution on War, Revolution, and Peace and am currently using these materials to examine the image of Russian nurses during the war. During the grant period, I collected documents of the Russian Red Cross operating as auxiliary medical services of the Russian armies, located in the Russian State Military-Historical Archive in Moscow. These sources have provided me with valuable information regarding the numbers of women who served as medical personnel during the war, who these women were, their socio-economic backgrounds, levels of

education, occupations, marital status, training received, services performed, location and duration of their service, sources and amount of their funding, level of support they received from official quarters, nature of their interaction with male medical personnel, difficulties they faced, and the public reaction to their presence in the realm of war.

From my examination of the documents located in the Russian national archives, I have been able to discern important aspects of the nursing experience during World War I. The tsarist military machine, as well as the Russian Society of the Red Cross, was significantly underprepared with regard to the provision of medical care to the soldiers fighting in the war, as well as the civilian population suffering from the effects of the war. Significant shortages of medical facilities, equipment, supplies, medicines, and perhaps most importantly, trained medical personnel, plagued the ability of the Russians to treat its population of soldiers and civilians. Nurses in particular were in short supply. Immediately upon the outbreak of the hostilities in August 1914 the Russian Red Cross began intensive efforts to increase the number of female medical personnel.⁹ The Unions of *Zemstvos* and Towns similarly recruited and trained nurses for war service. To meet the increased demand, in September 1914 the Red Cross shortened the normal year-long training courses to two months.¹⁰

By the end of 1914, the Red Cross had created 150 schools with 10,000 students in attendance. There were also practical courses for nurses set up in 80 hospitals, 12 ambulatory units, and 10 pharmacies run by the Red Cross.¹¹ Only those who had been trained through these schools were allowed to be officially designated as sisters of mercy of the Red Cross, which not

⁹ Romaniuk, Lapotnikov, and Nakatis, *Istoriia sestrinskogo dela v Rossii*, 77.

¹⁰ Circular from the Main Directorate of the Russian Society of the Red Cross to the district and local committees and the committees and fiduciary councils of the communities of Sisters of Mercy of the Society, Sept. 4, 1914, RGVIA f. 12674, op. 2, d. 1, l. 54.

¹¹ Romaniuk, Lapotnikov, and Nakatis, 77-78.

only gave them the right to receive compensation from the organization for their work, but also to wear the uniform of a Red Cross sister. The Main Administration of the Red Cross insisted that only women who had completed training conducted by the official societies of the Red Cross could bear the designation “sister of mercy” and wear the uniform associated with it, especially with the red cross insignia.¹² Therefore, many women were instead accepted as voluntary aids. Thus, a number of the women who became wartime nurses had only a cursory introduction to medical training, often knowing little more than basic anatomy and the bandaging of wounds. Much of their real learning occurred on the job. Sisters who did not possess the full staff training were not supposed to serve in medical establishments directly in frontline positions. In fact, the preference was for male orderlies and medical students to staff these units. However, the tremendous need for their services often superseded this and many women ended up in their ranks.

While some scholars have commented that the initial female response to the call for volunteer medical personnel was so overwhelming that many had to be turned away, it is clear that serious inadequacies of nurses existed from the very beginning of the war.¹³ Even with the thousands of women who applied to become nurses, there was a chronic shortage of qualified sisters of mercy, particularly during active fighting. This was a result of the time it took not only to train the women, but to transport them from the interior to the needed medical establishments serving the army at the front. In many instances, nurses arrived at field hospitals and other medical units only after the most critical need had passed. To alleviate this problem, the Red

¹²Preliminary Report of the Mobilization Council of the Russian Society of the Red Cross, Oct. 16, 1914, RGVIA f. 12651, op. 3, d. 346, l. 388

¹³Alfred Meyer, “The Impact of World War I on Russian Women’s Lives,” in *Russia’s Women: Accommodation, Resistance, Transformation*, ed. Barbara Evans Clements, Barbara Alpern Engel, and Christine Worobec (Berkeley and Los Angeles: University of California Press, 1991), 220. The motivation for their rejection was likely lack of medical training and experience rather than overabundance of personnel.

Cross established special reserves of nurses that ready to be sent to the front when needed.

Despite these measures, shortages of sisters of mercy persisted.¹⁴ The Red Cross eventually shortened the term of training courses to six weeks to try to meet the demand for qualified medical personnel created by the war.¹⁵ The supervisor of medical units on the northern front, Dr. S. K. Solov'ev, commented that training courses "grew up like mushrooms" around the country.¹⁶ In order to distinguish between nurses who had completed the shortened two-month or six-week courses from those who had gone through the longer (usually no less than one year) regular pre-war training, the organization applied separate designations. The latter were referred to as "staff sisters" or "reserve sisters," depending on whether they were assigned to active duty or placed in reserve medical units, while the former were termed "wartime sisters of mercy," a distinction that also included different pay scales.¹⁷

Archival research conducted during this grant period also revealed the extent to which, as part of frontline units, Russia's wartime nurses performed under very dangerous conditions, serving in forward positions, even in the trenches and venturing onto the battlefields to retrieve wounded soldiers. A survey of contemporary press reports clearly indicates the extent to which women performed medical duties in combat situations. Mirroring the praise garnered by men in combat activities, numerous nurses were award medals of bravery for carrying out their duties "under heavy enemy fire," "in deadly danger," "in the midst of battle," and "in conditions of

¹⁴"Otchet doktora meditsny S. K. Solov'ev, zaveduiuvaiushchii meditsinkoi chastiu severnom front," RGVIA f. 12674, op. 1, d. 10, l. 375.

¹⁵Ibid, RGVIA, f. 12674, op. 1, d. 10, l. 370-371.

¹⁶RGVIA, f. 12674, op. 1, d. 10.

¹⁷Circular from the Main Directorate of the Russian Society of the Red Cross to the District and Regional administrations, Sept. 4, 1914, RGVIA f. 12675, op. 2, d. 1, l. 55

clear threat to their own lives.”¹⁸ Many became casualties themselves, wounded or killed because they were required to carry out their duties despite close proximity to the fighting. Even those stationed in field hospitals miles from the front line positions were not safe, as aerial bombardments frequently hit medical establishments. Sisters treating soldiers suffering after gas attacks were sickened and even died because the men carried gas on their clothing. Epidemic diseases did not spare female medical personnel either and many died after becoming infected with typhus, cholera, tuberculosis, and other deadly diseases contracted from their patients. The rate of infection among medical personnel was extremely high as a result of poor sanitary conditions and close contact between patients and nursing staff.¹⁹

Documents collected from the Russian State Military-Historical Archive also clearly reveal that from the very start of the war, even the Russian Society of the Red Cross, the organization with the most favorable relationship with the tsarist government, faced serious difficulties in providing medical services both at the front and in the rear. Problems of supply, distribution, transportation, and other logistical difficulties plagued the organization. It also had somewhat troubled interaction with the Russian military authorities. Despite the severe shortages of medical personnel and the inability of the army to provide medical services without the assistance of organizations like the Red Cross and the Unions of *Zemstvos* and Towns, the military authorities had difficulty accepting the presence of such civilian organizations in the war zone. The supervisor of medical units on the northern front, Dr. S. K. Solov’ev, detailed these problems in a lengthy report to the Directorate of the General Commissioner of the Russian

¹⁸Reports to the Main Directorate of the Russian Society of the Red Cross from various command personnel of the armies of the Northern Front, RGVIA, f. 12675, op. 2, d. 2; Reports in *Vestnik Krasnogo Kresta*, 1915-1916; Reports in *Vserossiskii Zemskii Soiuz pomoshchi bol’nyim i ranenym voenam: Izvestiia Glavnogo Komiteta*, 1914-1916.

¹⁹Circular from the Main Directorate of the Russian Society of the Red Cross, “O nedopustivosti otkaza sester miloserdii rabotat’ v zarazykh hospitaliakx,” April 15, 1916, RGVIA f. 12675, op. 2, d. 1, l. 72.

Society of the Red Cross of the Northern Front, echoing other officials and observers.²⁰

Generally, Solov'ev assessed the Russian Red Cross as a weak organization that had lost its “constructive energy” after an initial burst of activity early in war and preferred to “rest on undeserved laurels” rather than undertaking responsible action to help the army with its medical needs. He complained that the organization lacked concrete plans for future action once it became clear that the pre-war plans were inadequate.²¹ Mistrust between military and civilian operations was common. Even the seemingly innocent sister of mercy was not completely seen as completely reliable by the military authorities. The military authorities seemed particularly concerned that women of the upper classes were becoming sympathetic to men of the lower classes.²² Nurses, as well as other women from the nobility, often performed the service of writing letters home for wounded soldiers. Authorities were greatly concerned about the content of such letters, which often included bitter complaints of malnourishment, neglect, and poor treatment.²³ These women were inclined to be sympathetic to their peasant and worker soldier patients and listened attentively to their grievances. There was considerable fear that contact with “radicalized” wounded and ill soldiers while providing them with medical care would “politically compromise” the sisters by exposing them to pernicious ideas, including, “revolutionary propaganda.”²⁴

²⁰“Otchet doktora meditsny S. K. Solov'ev, zaveduiuvaiushchii meditsinkoi chastiu severnom front,” *Rossiskii Gosudarstvennyi Voенno-Istoricheskii Arkhiv* (hereafter RGVIA), f. 12674, op. 1, d. 10

²¹ “Topografaia fronta i razmeshchenie na nem Krasnokrestnykh uchrezhdenii,” RGVIA, f. 12674, op. 1, d. 10, ll. 20-24.

²²Secret: To the Main Commission of the Red Cross from the Chief of Staff of the Dvinsk Military District, Department of the Military Sensor, Nov. 6, 1914. RGVIA f. 12674 op. 1, d. 7, l. 4.

²³Secret: To the Main Commission of the Red Cross from the Chief of Staff of the Dvinsk Military District, Department of the Military Sensor, Nov. 6, 1914. RGVIA f. 12674 op. 1, d. 7, l. 4.

²⁴Secret: From the Chief of Staff of the Dvinsk Military District, Department of the Military Sensor, to the Main Commission of the Society of the Red Cross with the armies of the Northwestern Front, Nov. 12, 1914. RGVIA f. 12674 op. 1, d. 7, l. 1.

The goal of this project is to produce a scholarly monograph in the form of a book-length study, tentatively entitled “More than Binding Men’s Wounds: Women’s Medical Service in Russia during the Great War.” My study will answer important questions concerning the wartime experiences of these women by examining the nature of their service at the front and in the rear, factors that shaped their war experiences, the relationship of women’s medical services to the tsarist government, reactions to their presence both at the front and in the rear, and whether their activities brought about change in perceptions of women or traditional conceptions of gender roles. I analyze these efforts within the context of the war as well as within that of this transformative period of Russian history.