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Opening Extract from...

Angels of Mercy

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CHAPTER ONE

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The Story Begins

This story concerns an abbey, a hospital, some women and the war.

It all took place in the Abbey of Royaumont, one of the most beautiful of all the lovely Cistercian abbeys of France. Set in gently rolling wooded country some 30 miles to the north of Paris, it is still in a relatively unspoilt area. The continual expansion of Paris has not yet engulfed it, though the nearby villages are gradually losing their local character. The roads are now of a quality that would have aroused the envy of those women ambulance drivers who, dodging potholes, tried to protect their wounded passengers from the jolts and bumps of the 12-mile journey on atrocious roads from the railhead at Creil.

The train service nowadays is perhaps not very much better than the one they knew. But for those travelling to and from Paris in the First World War it must have been a very much more beautiful journey than it is now, especially in spring when the orchards were in flower.

The journey from England now is, however, very different. A rapid and comfortable flight to Charles de Gaulle airport bears no comparison with the crowded cross-Channel steamers with the ever-present danger of U-boat attack, and the slow, and often devious, journeys by train to Paris and on to Viarmes.

Today from the air you can look down on a crossroads, where you can see, clearly visible, the Royaumont Monument, marking the limit of the German offensive in 1914 and commemorating those who died in the hospital. And if you are quick enough you might also catch a glimpse of the Abbey of Royaumont itself, among its trees and its landmark spire.

The forests where the women loved to wander and picnic are still there, but the trenches they sometimes explored are gone. There are possibly fewer of the wild flowers that so delighted them. Did they, perhaps, gather too many of the lilies-of-the-valley? We know that the *poilus** were allowed to do so, and that they delighted in offering great bunches to the sisters and orderlies. The beauty of the unspoilt countryside in those days made an unforgettable impression. In spring and summer they remembered:

The fields blue with cornflowers and scarlet with poppies – the woods carpeted with cowslips, lilies of the valley, dwarf daffodils, and all made gayer and more exciting by gorgeous butterflies, dragon flies and moths.¹

And in November:

I have no words to tell of the beauty of that autumn forest [the forest of Beaumont]. The hush of St Luke's peace was over all the forest, that dream beauty which comes with a still November, a kind of hushed period of farewell when the tattered banners of scarlet and gold hang on the edge of the winds. A perfect sunset lit the forest aisles with subtle light ... and the misty blue distances between the tree vistas had the spell of moonlight on them. The names too of these forest alleys were a perpetual delight to me - imagine such a light shining along the 'Route de la Pierre Turquoise'. In these woods Blanche de Castille used to ride on her white palfrey. When we emerged from the wood a new beauty awaited us, a great copper moon rising on the loops of the Oise - Seen through the straight poplars it was like a Japanese painting ... That ride home through the little village of Beaumont and by the Oise in the last lingering purple twilight and glorious moonlight was unforgettable.

^{*} The informal name given to French private soldiers in the First World War, the equivalent of the English 'Tommy'. *Poilu* literally means 'hairy'.

The trees in front of the abbey – in their spring or autumn foliage, shrouded in snow, or sparkling with frost – are the same ones that grew there all those years ago; and the canals and waterways around the abbey, where convalescent *poilus* so hopefully went fishing, are there still.

The buildings themselves struck every newcomer then – as they still do today – with their beauty. The cloister court is unchanged, though the rose garden has disappeared. In imagination the visitor can picture the cloister court filled with beds, and patients lying there enjoying the healing power of the sunshine and the lovely surroundings and the nights of peace and quiet. 'On moonlit evenings,' Antonio de Navarro tells us in his 1917 account of the hospital, 'the scene was one of indescribable beauty. The old grey masonry, assuming then a ghostly pallor, shone like marble in the dark, shimmering sky.'³ The terrace above the cloisters, where they used to sit and rest and chat, has now been removed – it had been a 19th-century addition. Behind the present buildings there is a field where a crater remains from a shell that landed in 1918.

The interior of the buildings is now much changed. The entrance hall, so large and impressive in the hospital era, has been divided, but happily concessions to modern ideas of comfort have not gone so far as to install a lift. The visitor must still climb 71 steps to the second floor, and is thankful not to be burdened with a heavy patient on a stretcher. Nor, with modern heating and plumbing, must fuel and water still be carried up all those stairs.

The hospital wards are recognizable from their beautiful vaulting and ornamental pillars. How impossible it must have been to black out those tall Gothic windows when the Zeppelins and Gothas were overhead.

The present well-heated bedrooms with their ensuite bathrooms are a far cry from the primitive conditions of wartime, and would have seemed an unbelievable luxury to the women who strove to keep themselves warm and clean in those early days. Perhaps also they might have envied the sanitary arrangements enjoyed by the monks of the 13th century, who were provided, in what is now known as the *Maison des Latrines*, with no fewer than 60 seats placed back to back and draining into a canal. A generous allowance, it

would seem, for 180 monks. How useful these would have been for the patients in the wartime hospital, where the sanitary arrangements were pretty primitive and the graceful lectern in the refectory was used as a convenient depository for bedpans.⁴

All those coal-burning stoves seen in the archive photographs, with the flues finding their way out through the old stone walls, are gone without a trace. Gone also is the monstrous stove in the kitchen on which Michelet, the renowned chef, used to dance, and gone also is the sink. Instead there are priceless mediaeval tapestries, and a superb 15th-century statue of the Virgin and Child.

Standing in the great refectory, or perhaps enjoying one of the concerts that frequently take place there, the visitor requires a keen imagination to picture it when it was a ward of wounded – often desperately wounded – men: beds on each side and a row down the middle – 100 in all; brilliant scarlet bed covers against the soft grey of the Gothic pillars; and a giant Canadian flag reminding us that this was 'Canada Ward'. It must have looked even more colourful at Christmas time when it was decorated with great branches and bunches of mistletoe, and how beautiful it must have been when the old Curé celebrated Mass in the candlelight.

One member of that wartime community tells us what it was like to be a part of this great endeavour:

I dreamed dreams of a grey, dusty austere Royaumont, where eager grey, blue and white figures hurried about, intent and tight-lipped, or enthusiastic and laughing; rows of redblanketed beds in the quiet nights and the soft pad of feet and the long shadows moving on the high stone walls; of a purpose and unity of mind; of life and of death and of memories too deep for words ... something of which nobody left in the whole building knows.⁵

On their tour of the abbey the observant visitor might notice a rather worn and inconspicuous plaque, which translates as follows:

Here from 1915 to 1919 Miss Frances Ivens CBE MS Lond was Head Physician of the Scottish Women's Hospital estab-

lished in the Abbey of Royaumont by the good grace of its owner, M. Edouard Goüin, and the generosity of British and Allied donors.

Ten thousand eight hundred and sixty-one wounded French soldiers received from an exclusively feminine staff the benefits of a devotion without limits.

What was this hospital? And who were these women?

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Before we answer those questions, let us first unravel a little of the broader history of the abbey,⁶ which was founded by Louis IX of France (later known as Saint Louis) in 1229. His father, Louis VIII, had had the ambition to endow a monastery. When he died, his 12-year-old son lost no time in carrying out his wishes, with the help of his redoubtable mother, Blanche de Castille.

The little boy took his duties seriously. The abbey was to be under the Cistercians, a relatively new order that called for greater simplicity than that practised by the longer-established Cluniac foundations. However, as this was to be a royal foundation, simplicity was somewhat modified. It was to be known as Royaumont, or Mons Regalis ('royal mount', although there is little evidence of a mount). It was well-endowed – in fact its subsequent history showed that it was too well-endowed.

According to tradition, the boy-king would ride over to the abbey from his nearby castle at Asnières, mingle with the lay brothers engaged in the construction work, and encourage them to greater efforts by pushing a stone-laden wheelbarrow himself. He would rebuke those who made too much noise, or rested from their labours, telling them 'Monks keep silence, and so should you. Monks don't rest, and neither should you.'

With or without this encouragement, the abbey church was ready for dedication on Sunday 19 October 1235 (an event which the hospital staff commemorated in 1915, almost 700 years later). The church was dedicated to the Holy Cross, Our Lady and All the

Saints, and King Louis donated a piece of the True Cross, a fragment of the Crown of Thorns, some relics of St Thomas of Canterbury, and some relics of St Agnes.

Many stories are told of Louis' piety. He took part in the Cistercian custom of washing the feet of the poor (just as in a later chapter Orderly Starr records how she washed the feet of the wounded *poilus*). Louis, in an excess of zeal, wanted to go further to demonstrate his humility by washing the feet of the monks. He was restrained, however, by the abbot, who suggested some people might speak ill of it – in other words he might be accused of showing off.

Louis used to visit the infirmary, and with his own hands prepare food and place it carefully in the mouth of a leper, removing any grains of salt that might cause pain – just as, centuries later, Orderly Starr would feed her patient with the wounded mouth so patiently and so carefully. Like the orderlies 700 years later, St Louis swept the floors, and at mealtimes carried his plates to the hatch into the kitchen – the very same hatch through which meals passed when the monks' refectory was used as the staff dining area. Sometimes Louis would read to the monks from the pulpit where, on Christmas Eve 1917, Orderly Don (a trained opera singer) sang to delight her listeners.

King Louis died at Tunis on the Second Crusade, but his endowments to the abbey were continued and even increased. Consequently, the initial period of devotion and austerity gave way to an era of laxity and indulgence.

In 1516 King Francis I gained the right to appoint 'commendators'. These appointments, being highly profitable, were much sought after, and were a useful source of royal income. Religious duties were not required, and commendators could be responsible for the worldly affairs of a number of abbeys. One such commendator was Cardinal Mazarin, who added Royaumont to his list. For reasons best known to himself he handed Royaumont over to the ten-year-old Prince of Lorraine, in whose family it remained, becoming a beautifully furnished *maison de plaisance* ('pleasure palace'). A later abbot was not content with the abbey as it stood and built a palace (later known as the 'chateau') alongside. How-

ever, he was not to enjoy this. The French Revolution broke out, and the abbot fled to Austria, where he was reported to have died in misery.

In 1790, when there were only ten monks remaining, the National Assembly decreed the destruction of the abbey church. This was duly carried out in 1792 – but the northeast tower was too strong for them and still stands today as the *flèche* ('spire'), the emblem of Royaumont.

The abbey was sold, its contents scattered and a cotton mill installed, and in the 19th century pavilions in the grounds became popular holiday resorts for fashionable Parisians. In 1864 the abbey was sold again, to the Oblate Fathers, and then in 1869 to the Sisters of the Holy Family. It was a religious building once more. Much preparatory work was done after the damage caused by the industrial installations, but the return to a religious use was not to last. In 1905 a law was passed against religious orders and the sisters had to leave for Belgium. The property was bought by Monsieur Jules Goüin (who already owned the nearby chateau). It lay empty until the advent of the First World War, when Goüin's son Edouard offered it to the French Red Cross. This in turn led to its occupation by the Scottish Women's Hospital for four and a half years.

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The Scottish Women's Hospitals of the First World War were the inspiration of one remarkable woman. On the outbreak of war Dr Elsie Inglis conceived the idea of setting up hospitals that would be run exclusively by women, as a means of supporting the war effort. She carried through her project until her own tragic death in 1917, but she had laid such firm foundations that Scottish Women's Hospitals continued in active service up to and beyond the end of the war.

It was a magnificent achievement, especially in the face of society's attitudes towards women – particularly medical women – in the early years of the 20th century.

The 19th century had seen many struggles by women to raise

their standards of education, to widen the their opportunities in employment, and to correct at least some of the injustices they suffered regarding property and other rights. By the end of the century women had gained access to universities. After a long and sometimes bitter struggle, they were able to qualify in medicine and, by having their names on the Medical Register, could be legally entitled to practise medicine. When Elizabeth Garrett Anderson gained admission to the Medical Register in 1865, she was only the second woman to do so. The medical profession were perturbed: they closed ranks and denied women access for the next 12 years. But others – among them Elsie Inglis – were pressing hard on the closed door.

In Edinburgh Sophia Jex-Blake, having won her own personal battle for registration in 1877, was struggling with the Edinburgh medical establishment to get instruction, practical experience and access to examinations for women students. Elsie Inglis was one of her students. At an early age Elsie showed the stuff of which she was made when she, with others of her fellow-students, rebelled against Jex-Blake's autocratic ways and, with outside help, set up a rival – and successful – Medical College for Women in Edinburgh. She herself qualified in 1892, and set up practice. She went on to carry out pioneering social and medical work with poor women in the slums of Edinburgh.

Elsie Inglis soon became involved in the campaign for votes for women, and in due course became the honorary secretary of the Scottish Federation of Women's Suffrage Societies. The Scottish Federation was allied to the National Union of Women's Suffrage Societies (NUWSS), whose president was Mrs Millicent Fawcett, a younger sister of the pioneer Dr Elizabeth Garrett Anderson. The policy of both these organizations was to pursue their aims through peaceful and constitutional means. These were the 'suffragists'. For some women these methods were too slow. Mrs Emmeline Pankhurst and her daughters founded the Women's Social and Political Union (WSPU), which adopted militant tactics and whose members became known as 'suffragettes'. These women became increasingly active in the years before the war, and gained considerable notoriety. They actively sought imprison-

ment and caused the government of the day more than a little embarrassment through their policy of going on hunger strike when they were imprisoned.

In the mood of patriotic fervour that accompanied the outbreak of war, most suffragists and suffragettes resolved to lay aside their campaigns for the vote, and devote themselves to the war effort. To Dr Elsie Inglis the war provided a golden opportunity to demonstrate what medical women could achieve, particularly in a very different field from the traditional one of caring for women and children. Dr Anderson – now aged 80 – had no doubts either. 'My dears,' she told the volunteers, 'if you are successful over this work, you will have carried women's profession forward by a hundred years.'

Elsie Inglis was an achiever. She had determination, and she knew how to be ruthless when she thought it necessary. She had a remarkable gift of persuading others to do what she wanted; she could gain support from influential people; and she could attract devoted followers. In addition she never spared herself.

Even before the war she was involved in the training of young women for Voluntary Aid Detachments, but on the outbreak of war she envisaged something much more ambitious. On 12 August 1914, at a meeting of the Scottish Federation of Women's Suffrage Societies in Edinburgh, Dr Inglis proposed 'that the Federation should give organized help to Red Cross work'. Miss Mair, the president, then proposed that the empty St George's School in Melville Street (the school for girls which she had helped to found, and which had moved to new premises) should be applied for and equipped as a hospital. One can almost feel Dr Inglis's mind leaping ahead as she then proposed 'that Melville Street should be equipped as a hospital staffed entirely by women – and if not required at home should be sent abroad'.⁸

Finding that the school building in Edinburgh was not available, Dr Inglis then proposed, with the backing of the committee, to offer the proposed unit of 100 beds to the War Office or to the Red Cross. Both offers were summarily turned down ('Go home and sit still' was the oft-quoted phrase). There was no interest in a hospital staffed by women.

Undaunted, on 15 October Dr Inglis wrote to the French ambassador in London:

I am directed by the Executive of the Scottish Federation of Women's Suffrage Societies to ask Your Excellency's consideration of our scheme for organizing medical aid for the help of our Allies in the field.

The Federation proposes to send out hospital units, officered by women doctors, and staffed by fully trained nurses and properly qualified dressers. The Units will be sent out fully equipped to nurse 100 beds. Should Your Excellency's Government desire such aid as we are proud to offer, it will be very willingly placed at the service of the French Red Cross. Our Units will be prepared to move from place to place as the exigencies of war may require, and to utilize such buildings as may be placed at our disposal.⁹

A similar letter went to the Serbian authorities. Both countries recognized that their own medical services were very inadequate, and both countries accepted the offer. The Serbian story is a fascinating one, but is not the subject of the present book. ¹⁰ Dr Inglis now had the enthusiastic support of the NUWSS, and they agreed on an appeal for 'Scottish Women's Hospitals for Foreign Service'. Meetings were arranged, including a very large one in London on 20 October, where Dr Inglis outlined her plans to a big audience.

Back in Scotland a specially convened 'Scottish Women's Hospitals Committee' was organized to receive donations and offers from volunteers. Sub-committees were set up to deal with hospitals, personnel, equipment, uniforms and cars. Premises were obtained in St Andrew's Square, Edinburgh, gifted by the Prudential Insurance Society.

Excitement was mounting, and money was flowing in; by 30 October *Common Cause* (the journal of the NUWSS) announced: 'Dr Inglis has got her first £1000! One hospital is secure and will go to Serbia.' There were plenty of volunteers – 'surgeons, nurses, medical students and members of Voluntary Aid Detachments ... but many more are needed'.

The press work in the NUWSS offices in London was coordinated and masterminded by V.C.C. (Vera) Collum, who was to play a major role in the subsequent history of Royaumont.

By 6 November £2800 had been collected; they now hoped to fund three hospital units, at an estimated cost of £1000 (later raised to £1500) to equip each 100-bed unit. By 13 November two units were ready.

By 20 November *Common Cause* reported that Madame de la Panouse, president of the French Red Cross, was actively seeking a building that would accommodate the unit of these '*Dames tre's sérieuses*', and by 27 November the decision had been taken that it should go to the Abbey of Royaumont. By the end of November the link between the abbey and the Scottish Women's Hospital was firmly in place, a link that was to last longer than anyone conceived at the time.

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From the military point of view, the fighting in northern France between August 1914 and the arrival of the hospital in January 1915 represented one of the most dramatic periods of the war. It was in essence a war of movement, not to be repeated until the German onslaughts of 1918 and their subsequent repulse.

The so-called 'Battle of the Frontiers' began on 14 August. The Germans advanced rapidly, taking Amiens, Soissons, Laon and Reims; British and French forces were in retreat and Paris itself was threatened. What had seemed to be an inexorable onslaught was eventually halted at the River Marne, where the German advance was checked, signalling the end of the war of movement and initiating the horrors of trench warfare. In the first five months of the war the French lost 300,000 men killed, including 5000 officers; 600,000 men were captured, wounded or missing.

In September the Germans made a great effort to reduce Antwerp (in which they succeeded in October), and to destroy the Belgian army. The German cavalry, the Uhlans, swept across to the Belgian coast. With the Allies in full retreat, the Uhlans ranged at will over northwest France. It must have been at this time that

they bivouacked in the abbey – and left behind quantities of straw and other debris for the first orderlies to clear. The German advance had in fact drawn very close to Royaumont. On 4 September 1914 they reached the crossroads only a mile from the abbey. It was here that the dearly loved Curé had stood for several days ready, if it should prove necessary, to plead with the German commanders for the safety of his village of Asnières (see Chapter Five).

By the end of 1914 stalemate had been reached; both sides were beginning to dig in, and it was not until February 1915 that fighting was renewed. By this time Royaumont was just beginning to get organized.

The story of the abbey, the hospital, the women and the war had begun.