NUNS, GUNS AND NURSING: 
AN ANGLICAN SISTERHOOD AND IMPERIAL WARS 
IN SOUTH AFRICA 1879 - 1902

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Abstract

The Community of St Michael and All Angels, an Anglican religious community of women, was established in Bloemfontein the Orange Free State in 1874. The sisterhood was established firstly in the context of the mid-nineteenth century catholic revival within Anglicanism, and secondly in the context of changing roles for women which saw their increased engagement in public philanthropy.

This article focuses on the work of sisters and associates of the community as military nurses in the Anglo-Zulu war of 1879, the Transvaal war of 1880-1881 and the South African war of 1899-1902, and examines the extent to which community life allowed the sisters a degree of independence within a patriarchal church; analyses women’s role in the colonial and imperial enterprise in southern Africa; and explores the extent to which the sisters’ role as military nurses contributed to increased official and public recognition of a professional role for women.

1 INTRODUCTION

The Community of St Michael and All Angels was established in Bloemfontein in April 1874. Although the best known member of the community is probably Henrietta Stockdale, who was instrumental in the 1891 act of the Cape parliament which provided for state registration of nurses, and so laid the foundations of nursing as a profession for women in South Africa (Searle 1965, Marks 1994), other sisters of the community also played a pioneering role as nurses, particularly in the 1879 Anglo-Zulu war, the 1880-1881
Transvaal war and the South African war of 1899-1902. The accounts by these sisters of the wars in which they nursed, reflect some of the ambiguity and complexity of women's role in the imperial enterprise in Southern Africa.

One approach to women's history has been recuperative, an attempt to restore women to the story of the past from which they have largely been excluded. Initially, imperial historians argued that women in colonial society distracted colonial officials from their work, needed to be protected from indigenous men, frowned on concubinage and therefore hardened racial divisions in colonial society. An early feminist response was to argue that white women, themselves victims of the patriarchy of European men, were particularly sympathetic to the position of colonised peoples and sought to alleviate oppression. Recent scholarship, however, emphasises the need to move beyond complicity, compensatory and resistance modes of writing women's history (Formes 1995), to explore the role of gender in imperialism and in the construction of colonial society. This essay is an attempt both to recover story of the women of the Community of St Michael and All Angels and to show how their life and work was embedded in the colonial enterprise.

2 WOMEN IN COMMUNITY: SUBORDINATION OR SELF-FULFILMENT?

The establishment of Anglican religious communities had theological and social roots in 19th century England. A significant shift in Anglican theology meant that women were regarded as repositories of religious and moral values rather than the source of sinfulness, as had been the earlier view, but this still meant that women were subject to a doctrine of subordination, in which the role of wife and mother was their chief vocation (Gill 1994:11-38, 76-89). The century saw enormous increases in women’s involvement in public philanthropy of various kinds – Sunday schools, missionary societies, penitentiaries, sick visiting, and temperance organisations. Because it was assumed that leadership, reason and organisation were male attributes, the theory of subordination was maintained by the argument that women were simply extending their feminine religious powers and attributes beyond the home (Vicinus 1985:12).

From about 1850, the monastic life for men and women was recovered as a result of the Catholic revival within the Church of
England. The founders were motivated by a desire to create communities living a life of prayer and discipline under the evangelical counsels of poverty, chastity and obedience, inspired by the pattern of the early and medieval church. The urban poverty in the cities of industrial England was to be the particular focus of their life of service. The formation of the sisterhoods raised questions about the extent to which women could undertake work free from male control. Celibacy challenged the Victorian belief in marriage and the family as the highest form of Christian vocation for women, while the idea of women taking vows on entering a community was not only regarded by many as unscriptural, but as a challenge to parental authority and property rights. These issues, which were not confined to the metropole, faced the Bishop of Bloemfontein, Allan Webb and the first sisters of the community of St Michael and All Angels in the distant Orange Free State.

The initiative for the foundation of the community came from Bishop Webb, himself influenced by the Catholic revival in the Church of England. After an initial visit to his diocese, he realised a need for women workers to undertake nursing, visiting and teaching, and decided that a community of sisters who would provide continuity was the best way of achieving this. Webb also wanted a community established in southern Africa, not a branch house of an existing English community. The Sisterhood of St Thomas the Martyr in Oxford offered to lend Sister Emma as the first superior for five years, but she remained with the community in Bloemfontein until her death in 1887. Her Oxford community told Bishop Webb: “we are giving to South Africa one of our best” (Lewis & Edwards 1934:417-8). All the other sisters of the community were professed in South Africa, so they were aware of conditions under which they would live their lives, with no expectation of a permanent return to England unless they left the sisterhood. We know of Mother Emma that she was the daughter of a naval officer and was well educated, with experience in home visiting, nursing and teaching (Searle 1965:39). Apart from Henrietta Stockdale (Searle 1965, Marks 1994), the lives of most of the sisters before they joined the community are not easy to trace: the community history records their names and surnames, the date they were admitted and the date of their final profession, and little else. Even their reasons for joining are not recorded. In Sisterhood life and women’s work in the mission field of the church, Webb made it clear that the community in Bloemfontein would not challenge prevailing
Victorian assumptions about the role of women: women needed approval from a male relative before they could join. According to Webb, it was a “revealed law of creation” that women’s vocation in married life was to be a “help-meet for man” and to “replenish the earth: to fill it full of the riches and wealth of life”. This function was to be fulfilled by women in religious life, in their role as “helpmeets” of the diocesan bishop and his clergy: as a husband was head of the household, so the bishop was head of a religious community, which could not be entrusted to the “irresponsible rule of any woman” (Webb 1883:57-8).

To what extent did the women who joined the Community of St Michael and All Angels conform to the meek and dependent ideal? To what extent was life merely a sacrifice to duty and to what extent were the sisters able to develop their abilities for the sake of humanity? It is difficult to tell, because formal records of the community tend to reinforce the stereotype and to hide the reality of women’s lives, the pain and disillusionment, as well love and celebration, professionalism, strength, energy and innovation (Boner 2000:2-3). But for the fifty women who were professed sisters of St Michael and All Angels between 1874 and 1914, membership of the community meant more than this. Actual practice was the product of tension between Victorian ideology on the one hand and their needs on the other. With regard to the role of women in the period as a whole, Vicinus argues that they were not passive participants in society, but actively shaped their lives within the external constraints impacting upon them (Vicinus 1985:ix, 7). And it is not enough to look at the religious motivation for the formation of sisterhoods. By the mid-19th century, middle class spinsters had little significant purpose in life – there were not enough men for them to marry, so they could not fulfil the destiny society ordained for them as wives and mothers. They sought to define themselves beyond the nuclear family, but the context had to be pure, good and self-sacrificing. Single women transformed this passive role into passionate social service and pioneered new occupations and public roles, of which religious communities were one dimension (Vicinus 1985:3-5).

The creation of women’s communities implied that men were dispensable (Vicinus 1998:31). Complete self-sufficiency was impossible in the church, where women were dependent on the ministrations of the male clergy (Vicinus 1985:49), but sisterhoods affirmed that women had the right to choose celibacy, to live
communally and to do meaningful work (Vicinus 1985:83). In spite of Webb's (1883:57) assurance that women's communities would be under male authority, women religious found a way of governing themselves. The role of mother superior was very important and responsible, although the title conformed to prevailing gender ideology. When Mother Emma died in 1887, the community recognised the “hard work”, “financial strain” and “anxieties of government”, stresses normally associated with men's occupations, which had characterised her life. The sisters elected their superior from among themselves, for a three-year term of office, and wrote and adopted the regulations that shaped their life in community. The community allowed women to order their own time and space, to establish their own priorities in work and leisure. The professed sisters met regularly in chapter to make decisions about work, property and finance. They ran an active English Association, and every year about ten women came out from England as lay workers to live and work with them. The community created an alternative family, and allowed women to develop leadership skills, and a network of contacts which supported their public work. Quite quickly, they gained recognition in Bloemfontein and showed that women could lead women and work in the wider community.

Sisterhoods were nevertheless products of their time and carried the domestic work considered suitable for women into public life, through running hospitals and elevating nursing to a profession, through establishing schools and securing higher education for women. The work encouraged exploration of a distinctive female spirituality but, in accordance with the prevailing view, this was done with an emphasis on duty and service, not on equality, rights and independent action (Vicinus 1985:15-16). This general pattern was reflected in the life and work of the Bloemfontein community.

At the centre of the sisters’ life was the regular discipline of prayer and spiritual reading, the monastic offices and daily attendance at the Eucharist. By 1883, ten sisters in the Bloemfontein were running St Michael’s school with 100 boarders, St Gabriel's school for 60 infants, the Good Shepherd School with 90 coloured pupils, a cottage hospital and a private nursing service. In Kimberley, the community ran the hospital with 200 beds and St Michael's day school. They also had a hospital at Jagersfontein with sixteen beds, ten for whites and six for Africans, and a convalescent home at Barkly. At Harrismith, three days by post cart from Bloemfontein,
there was a boarding school for white girls and a day school for African children. They assumed financial responsibility for these institutions, as well as providing staff. They also did parish work, taught baptism and confirmation classes, and administered funds for the sick and needy. By 1911, the community had given up the hospitals, although they still did private nursing and ran a home for lepers, as well as schools and a great deal of parish work. Three sisters were by then working in Lesotho, where they visited a dozen villages, some accessible only on horseback, and ran a weaving school for young African women at Leribe. The community was available to help in emergencies: eight sisters of the community nursed in Bloemfontein, Senekal, Bultfontein and Clocolan in the 1918 influenza epidemic.

In the narrow channel allowed by a patriarchal church, the sisters were able to exercise responsibility and initiative. The sisters themselves would normally have eschewed politics as outside women’s proper sphere of influence but, to understand the impact of their contribution, an analysis of the role the sisters and their associate workers played in disseminating and sustaining the ideology of political and cultural imperialism, which accompanied missionary expansionism, is also needed.

An important dimension of the work in Southern Africa was its class basis. Sisters of the community saw themselves as working for women less fortunate than themselves, and imported the class assumptions and hierarchical ideas about managing servants of middle-class Englishwomen. All this served to reinforce British imperialism and the brand of racism that went with it. At the same time, the Bloemfontein sisters worked among both the white republicans of the Free State and Africans and this also shaped their attitudes to race, culture and imperialism.

It is also significant that the sisters took on responsibility without receiving remuneration. During the early years, sisters of the community were themselves divided into choir sisters and second-order sisters, based on class distinctions, but this fell away within the first few years. The women who came out to work with the community were similarly categorised as “lady workers” or “servants”. It was acceptable for middle and upper class women to work, even to the point of exhaustion, but not to receive payment for their work, as payment was the mark of a servant. In 1891, the community received £100 from the Kimberley hospital board, the first financial
acknowledgement of their work at the hospital, which had started fourteen years earlier.\textsuperscript{17}

Bishop Webb and the sisters were quite clear that they had a role to play specifically as women in the imperial enterprise:

The importance of work for and amongst \textit{native girls and women} cannot be pressed home too strongly upon those who would avoid the expensive disaster of Kafir wars and chronic native restlessness. The women are more wedded to heathen customs than the men: \textellipsis Magistrates and Missionaries are all agreed that peace and progress in the country must largely depend upon the readiness of England’s daughters to take Africa’s dark maidens by the hand, bravely, gently, and patiently, and so to lead them out of the shadow of death (Webb 1883:43).

Clearly, for the bishop and the sisters, colonial rule was just and beneficial, while little good could be attributed to indigenous society until it conformed to standards of western civilisation. As they noted in 1876, when they began work among indigenous people, that “neither Dutch nor English Colonists as a rule sympathised with work among Coloured people, thinking it waste of time and misguided sentiment”.\textsuperscript{18}

War in Southern Africa provided occasions for the sisters to express their political opinions more forcefully than they did at other times. Their views on race and imperialism can be explored through their accounts of military nursing in the Zulu war of 1879, the 1880-1881 Transvaal war and the South African war of 1899-1902. Wars were an expression of the aggressive patriarchy implicit in imperialism and the sisters’ participation as nurses reflects this, but also illustrates ways in which they claimed space for women from the limited opportunities they were offered.

3 MILITARY NURSING

In spite of Florence Nightingale’s efforts during the Crimean war, the British army was slow to reform nursing services. Between 1861 and 1882, there were only twelve women employed in the army nursing service and these were stationed at the military hospitals at Netley and Woolwich. By 1895, the number had only increased to 72, but
the experience of wars in South Africa between 1879 and 1883 revealed the weakness of the service, including the lack of financial provision, and led to increased pressure to employ women as military nurses. It was only during and especially after the South African War that the army enrolled women as nurses in significant numbers. Until then, the work of nursing the sick and wounded in the British army was done chiefly by male orderlies (Summers 1988:97-99). In this context, the British army called on the services of other trained nurses, including those in the Community of St Michael and All Angels in Bloemfontein.

Why was acceptance of women as military nurses such a drawn-out process? The idea of military nursing appealed to women: it differed from domesticity, and placed them with men at the heart of action. But this was not their allocated position in society, and the slowness of change reflected the slow rate of change in women’s status in society as a whole. The arm was public and masculine, and to employ women would engage them in the public sphere. Doctors saw enormous difficulties in integrating women into the army: as ladies, they could supervise ward work, but in the army they would have to accept subordination to male officers, and orderlies would find it difficult to accept orders from a woman who was not an officer (Summers 1988:99, 119).

In some ways, religious sisters were particularly useful in times of war. They were usually described as “ladies” and therefore of a class the army regarded as suitable for military nurses, partly because it would make troops respectful in circumstances where women nurses occupied an ambivalent position in the hierarchy (Summers 1988:118). In addition, sisters lived in community and under a rule, and so were used to discipline.

4 THE ZULU WAR

In the late 1870s, British imperial ambition included desire to control the mineral wealth of southern Africa, and therefore its labour resources. The British High Commissioner, Sir Bartle Frere, saw the independent Zulu kingdom as an obstacle to this, and presented an ultimatum to the Zulu king Cetshwayo, demanding that he dismantle the Zulu military system, a demand impossible for the Zulu king to meet. War was declared but the British and colonial forces that
invaded Zululand were halted at Isandlwana in January 1879, where the British were initially defeated (Guy 1979).

In early April 1879, the principal medical officer of British troops in Natal requested that sisters be sent from the Community of St Michael and All Angels to nurse sick and wounded soldiers in the military hospital at Ladysmith. Limited numbers in the community made assistance difficult, but Mother Emma, Sister Louisa and two associates, the Misses Potts and Langlands, left Bloemfontein for Natal later that month (*Quarterly Paper* 1879, 46:13-28).

Louisa Olden, already trained as a nurse in Ireland, travelled to South Africa as an associate of the community, intending to explore her vocation to the religious life, and arrived in Bloemfontein in February 1876. She was clothed as a novice in November 1876, and made her final vows as a sister of the community in July 1880. She took charge of the hospital in Kimberley in 1876, and remained there until March 1879, while the more famous Sister Henrietta, associated with the hospital as “lady visitor”, was training as a midwife. Sister Louisa was a very capable manager (Searle 1965:42), and a woman of indomitably cheerful disposition. Miss Langlands came out as a “lady worker” offering three years service to the community and was sent to Kimberley in 1877, where she and Miss Potts were among the six women first trained as nurses under the scheme set up by Sister Henrietta (Searle 1965:42).

The sisters found that the military hospital in Ladysmith had been set up in the Dutch Reformed Church, augmented by four large tents. It was occupied by 80 soldiers suffering from fever and dysentery and was staffed by a sergeant, four orderlies and a doctor, “all overworked”. The beds were made of three planks raised 15 cm above the floor, and each soldier had his kit, bread rations and medicine next to his bed. The sisters’ first step was to reorganise the sick room so that the kit was stored in the pulpit and medicine was dispensed by the nurses instead of the sick being responsible for taking their own (*Quarterly Paper* 1879, 46:13-28). Ladysmith was so far from the front that the sisters were never really in danger, although there was one alarm in May, when intelligence suggested that the town might be attacked by a large Zulu force, but the report came to nothing. The sisters’ accounts of this alarm describe them getting ready for bed and going to sleep without fear, although they had been warned that they might be called into a *laager* at short notice. Their only concern was for really sick patients who should not
be moved (Quarterly Paper 1879, 45:21) Clearly they were aware of complaints that war nursing was unsuitable for women, and were determined not to give any ammunition to those who thought women would be a liability. Sister Louisa knew several of the doctors who served at Ladysmith through family connections (Loots & Vermaak 1975:67) and this helped the sisters to find acceptance. They also took care to report on the excellent relationships they developed with military orderlies. Mother Emma recorded: “time and paper would fail me if I tried to write all the little attentions and kindnesses of these goodhearted orderlies. Best of all, six or seven of them may now be seen every Sunday night at Church” (Loots & Vermaak 1975:70). This is significant, because the relationship between orderlies and military nurses was a bone of contention in the South African war, when orderlies often refused to recognise the authority of military nurses (Marks 2002:162, 167). The sisters reported that there were hospital sergeants and hospital orderlies trained in the military hospitals in England, “so the work is not hard” and “they all work under us” (Quarterly Paper 1879, 45:21). There may be various reasons for this harmonious state of affairs. It is clear from the tenor of these accounts that the orderlies responded to the sisters with deference, following the attitude of their senior officers. The fact that they were religious might have heightened this respect. Possibly also the fact that the number of nurses was relatively small and that they were obviously only working in a temporary capacity may have made the presence of the sisters less threatening.

At Ladysmith, their patients were mostly cases of dysentery and enteric fever, with relatively few injuries until July, when the wounded from the battle of Ulundi reached the hospital. At the end of August, military nurses from the Royal Military Hospital at Netley in England arrived, the party from the community felt “less wanted” and left early in September (Quarterly Paper 1879, 46). Their relationship with the army was tenuous, and the sisters felt insecure about official attitudes towards their efforts. This was underlined by a letter from the medical officer at the Base Field Hospital in May 1879, which told Bishop Webb that the doctors and patients valued “the kind and thoughtful services of the ladies” – a condescending tone towards trained women. The sisters may have been somewhat reassured by another letter from a senior medical officer:
Having heard that you were informed that the Sisters attending on the sick and wounded at the Base Hospital, Ladismith, were of little use, and not appreciated either by the patients, or the authorities there, ... I consider they were most useful in carrying out the orders of the Medical Officers, more especially in giving the patients their food and medicine regularly, looking after the cleanliness of the sick and wounded ... and preparing for them many little articles of diet ... Altogether I am of opinion they are not only most useful, but skilful nurses, and were of considerable assistance to me.21

The letter nevertheless tends to emphasise traditionally-defined womanly skills rather than to recognise the sisters as professional nurses: the army was still finding its way towards a role for women in warfare.

Another important aspect of the sisters’ accounts of the war is the discussion of their political views. The community tended to be reserved in public affairs and frankness about the war suggests that they saw the British cause as allied to their religious vocation. British propaganda created the image of the Zulu king Cetshwayo as a warmonger disrupting the subcontinent, and responsible for the outbreak of war here, there and everywhere. The sisters absorbed this view uncritically. Mother Emma wrote in May 1879:

I hope you do not believe what the papers are saying about this being an unjust war. If ever there was a just war, this is one. Until Cetewayo’s power is broken, there will be no peace in South Africa. He has been at the bottom of all the disturbances of last year, and every colonist out here knows that his own life and the lives of those dear to him are not safe, [as long] as Cetewayo is a free king (Quarterly Paper 1879, 45:20).

The sisters gave credence to rumours of the superhuman ferocity of the Zulu: and among the British sick were “many cases of heart disease brought on by excitement, and there have been cases of men losing their minds and their speech” (Quarterly Paper 1879, 45:22). Nor were the sisters ardent advocates of peace; war was an imperial duty, and Mother Emma wrote:
We fear so much that the Government will make peace too easily, the result of which would be that directly the troops are withdrawn, the Zulus will break out again. It would be the easiest thing in the world for them to devastate and lay waste to this colony from end to end ... I fear that our soldiers are rather afraid of the Zulus; one of the hospital orderlies said last Tuesday evening, “You see, it is not as if they were ordinary men, but it seems as if they had ten lives” (Quarterly Paper 1879, 45:21).

When it came to nursing individual Zulu patients, however, the sisters escaped the political myth and the alarming stereotype. Two Zulu prisoners were brought to the hospital after Ulundi:

“Pashongo” had his leg amputated but died soon afterwards, though not before he had taught our soldiers many lessons in patience. One never heard a cross word pass his lips, and he was so grateful to his nurse for her kindness. The other, “Dick” (I never could pronounce his Zulu name), was very sulky at first, but kindness was in his heart. One night that “Pashongo” was very wakeful, and asking for water, he crawled out of bed to hand the drink, so as to save the orderly, who awoke, and so discovered his thoughtful conduct (Quarterly Paper 1879, 46).

But the general tenor of opinion among the sisters was that the British cause was just and that Cetshwayo ought to be punished. A letter from the community published for English consumption in August 1879 summed up their views:

I do hope there will be no nonsense about a patched up peace. It will only make Cetewayo believe himself invincible or rather confirm him in that opinion and make Natal unsafe, wasting utterly all those streams of brave and noble blood which have flowed through South Africa during the last eighteen months (Quarterly Paper 1879, 46:44-5).
It is instructive to compare the attitude of the sisters to the Zulu with their attitude to the Boers which is reflected in their writings and activities during the Transvaal war and the South African war, when sisters again served as nurses of soldiers and the civilian population.

5 THE TRANSVAAL WAR

Britain annexed the Transvaal in 1877 and, after the failure of protests and petitions to recover their independence, the Transvaal republicans resorted to arms in December 1880. They aimed to besiege British garrisons in the Transvaal and avert British reinforcements arriving from Natal, where the fiercest fighting took place. By early 1881, Britain had decided to restore a considerable degree of autonomy to the Transvaal: the Pretoria Convention provided for self-rule subject to British control of foreign relations, and a veto over legislation related to Africans, a proviso withdrawn by 1884 (Davenport 1977:130-134).

The Community of St Michael and All Angels was involved in military nursing in this war as well. Three associates, Miss Langlands, Miss Cuyler and Miss Pomeroy offered their services, as did Sister Louisa. They were stationed from February to June at Fort Amiel near Newcastle, and found the going very rough indeed. At Ladysmith, they had lived in the church rectory, but here their quarters were part of the military camp, they seldom saw other women, and regularly faced the possibility of a military attack. They slept in a hut where rain came through the roof and flowed through the doorway, their only furniture was a bed with mattress and pillows stuffed with forage, and they often had to stand in water to nurse the sick and wounded. In spite of the hardship, Sister Louisa wrote on 6 February 1881: “thank God, we all keep well and ... are able and ready for our work every morning as it comes” (Quarterly Paper 1881, 52:160). The work of nursing was also much more strenuous. After the battle of Majuba, Louisa remarked that the injuries made those of Ulundi look like scratches (Quarterly Paper 1881, 52:102). Men had multiple gunshot wounds and dressings took many hours each day. There were also daily operations (Quarterly Paper 1881, 52:160). The sisters wanted to go forward in the lines to reach gravely wounded men left lying on piles of grass at the front until an ambulance reached them, but the doctors would not allow this (Quarterly Paper 1881, 52:160). The nurses were much more closely
involved in the military world than they had been at Ladysmith. The Red Cross flew from the hospital tents, but there were soldiers in tents pitched all round, earthworks were thrown up in front and sentinels kept constant watch (Quarterly Paper 1881, 52:160). Two army sisters from Netley were also sent to Fort Amiel (Summers 1988:162), but the nursing demands meant that this time, the sisters from Bloemfontein did not feel redundant.

Women's involvement in war nursing was one of the factors contributing to change in the status of women. The idea of separate spheres for men and women, public and private, began to break down. By the early 1880s, the use of male orderlies as the main nursing service within the British army was under review as a result of an enquiry which exposed inadequacies in the system, including brutality of orderlies towards sick and wounded men (Summers 1988:160-162). This change is reflected in a letter written after the war by Dr James Holloway, the principal medical officer of the Newcastle district: “The sisters are not valued for domestic virtues, but because the records testify, by the large percentage of recoveries after desperate wounds, to their skill and devotion” (Quarterly Paper 1881, 53). This shift was recognised by the institution of the Royal Red Cross by Queen Victoria in 1883. Women, although still subordinate to male medical officers and of uncertain status in the army, could distinguish themselves in the public sphere, not by staying at home but by service in war. In 1884, Sister Louisa was awarded the Royal Red Cross, the first in South Africa, for her services in the Zulu and Transvaal wars.23 The Royal Red Cross could be conferred on “any ladies” on the recommendation of the Secretary of State for War “for special exertions in providing for the nursing of, or for attending to, sick and wounded soldiers and sailors”. The medal could also be conferred on “any Nursing Sisters” on the recommendation of the Secretary of State for War “for special devotion and competency which they may have displayed in their nursing duties with Our Army in the Field, or in Our Naval and Military Hospitals”. It is significant that Sister Louisa received the Royal Red Cross in the second category, as a professional nurse working with troops in a military hospital.

The Orange Free State, although also an independent boer republic, was not officially involved in the Transvaal war, and there seemed to be no doubt that the Bloemfontein sisters would nurse British troops. But the attitude to their adversaries was vastly different
to the attitude to the Zulu. To some extent, this was shaped by twenty-five years of living in the Orange Free State capital. Sister Louisa, on her way to Ft Amiel, stopped at the Ladysmith Dutch Reformed Church which had been the hospital in the Zulu war. She found the church ready for nagmaal: “it all looked so clean and peaceful I stopped to say a prayer. I am afraid I sympathised a little with its Puritan simplicity. An old Dutchman came in, the first of the congregation, we shook hands and then I departed” (Quarterly Paper 1881, 52:157). Unlike the Zulu, the Transvaal soldiers were not seen as brutal enemies. The sisters cited examples of their generosity to their opponents: on one occasion, after Majuba, a British officer was rescued by a boer who saved him from being crushed, tied up his wounds and helped him on the road. The community chronicle described the conflict as “sadder” than the Zulu war, “as the struggle between two White races was more like Civil War, and engendered much bitterness”. Seemingly, sisters of the community were not sensitive to the bitterness engendered by the Zulu war. The attitude to be adopted by Free State Anglicans was set out in a sermon preached in Bloemfontein cathedral by Davis Croghan:

Hostility has arisen between those who are bound to each other by many ties, upon whose union for the common good the future development of the country must in great measure depend; there is amongst ourselves much angry feeling and social division … all who have made this the home of their adoption must remember that a state composed of various nationalities necessarily imposes on the faithful citizens the duty of avoiding what may be offensive to those of another race (Quarterly Paper 1881, 52:96).

Day-to-day contact with the Afrikaner population in the Free State, and their common European heritage, clearly evoked a different response to that expressed by Anglicans in general and by the members of the Community of St Michael and All Angels in particular towards the indigenous population of the country. Whatever their differences, they had a common mission, as they saw it, to Christianise and civilise, almost in their view to humanise, the people of Africa. This is also indicated by the ease of relationships which was continued after the war. The daughters of President Brand were
educated at St Michael’s and in 1889, when President Reitz was sworn in, the community sent congratulations, “hung out their flag and illuminated the house”.26

6 THE SOUTH AFRICAN WAR 1899-1902

In October 1899, the Orange Free State and the Transvaal declared war on Britain in order to preserve their independence. By this time, the community had lived 25 years in the republic, and had established relationships with the white community, English and Afrikaner. Mrs Louis Botha (as Annie Emmett) had been educated at their school at Harrismith,27 and Abraham Fischer, member of the Volksraad, was a warm friend (Clingman 1998:7-28). In May 1899, he wrote:

What very little I have been able to do for the sisterhood in the past was undertaken, not only for the pleasure it afforded me to be of some little service, but from a sense of duty as an acknowledgement, however small, of the services and sacrifices the Sisters have so often and in so many ways rendered to Bloemfontein and the State in their noble work. 28

War was declared on 12 October, martial law was proclaimed in Bloemfontein and the capital was cut off from outside communication. Four sisters were besieged in Kimberley, while two were cut off in Harrismith.29 All English people in Bloemfontein had to have permits and to swear neutrality, but St Michael’s home, where the sisters lived, was exempted.30 The archbishop’s wife wired from Cape Town, inviting any sisters who could leave to come and stay at Bishopscourt, but the sisters replied, “Grateful thanks, the crew decline to leave the ship.”31 As early as 22 September 1899, the sisters had offered themselves to the Free State government to nurse the sick and wounded, with the acknowledged ulterior motive that it would provide them with protection.32 President Steyn’s wife took ill and Sister Flora went to nurse her for four weeks: after her return, a letter of thanks from the family was sent to the mother superior.33 Sister Caroline and Sister Frances Louisa were given safe conduct through the lines to Jacobsdal to treat the sick and wounded. Here, they were asked not to wear their habits, as the voluminous clothing
was regarded as unhygienic, to which the sisters’ replied: “that we cannot do, we are ready to help you in any way possible but if you insist on change of clothing we must return home, to our great regret”. The matter was not pursued, but the incident suggests that the sisters saw themselves as religious first and foremost, rather than as professional nurses. By December, Caroline and Frances Louisa were nursing the wounded from the battle of Magersfontein, but they returned to Bloemfontein after about a month, when a nursing unit sent from Germany to assist the republics arrived. When the sisters left, the lannddrost “delayed them with an unexpected speech of thanks … and led the cheering that pursued them on their way”. In Bloemfontein itself, Sister Flora and Sister Ella nursed soldiers brought from the front. In March 1900, Bloemfontein surrendered to British forces led by Lord Roberts, and the sisters’ chronicle goes so far as to report that he was received “with enthusiasm”. At this stage, demands on their services intensified. St Michael’s home was turned into a military hospital until October with the sisters receiving over 100 wounded British troops within four days of the surrender of Bloemfontein. This involved considerable deprivation: not only did the sisters give up their convent apart from the chapel and a community room, but for two months, they had no mattresses to sleep on:

We gave up everything to the Tommies, and sheets and blankets are ruined, stained khaki colour from disinfectants. Enamelled ware, knives and forks, etc. all “expended – to use a military phrase. We shall want everything new. When they came up they had nothing with them. We lent all willingly (Quarterly Paper, October 1900:181-183).

Six sisters received British war medals for their services. The Kimberley sisters had experienced enormous hardship during the siege and had been responsible for nursing the civilian population, but had not done any military nursing. Bishop Webb (1883) summed up his view of the community’s conduct during the war:

Throughout the period of strife and unrest the Sisters have been appealed to by Dutch and English alike for ministries of mercy both when the government was a Republic and since the British Flag has been flying. God’s leading has
thus been followed in the Spirit of ready preparedness to
do the utmost that strength and preparation of resources
allowed for human need, without any distinction of Creed
or Nationality, with quiet cheerfulness and true simplicity.

7 CONCLUSION

Webb’s idealised version of events describes the sisters as dutiful,
disinterested and devout women. This essay has argued that the
reality was less bland and more complicated than this. Community
life provided the sisters with a sphere in which they could acquire and
exercise skills of government and administration. Although the sisters
themselves might not have acknowledged it, by their independent
and professional work as military nurses, they contributed to very
gradual movement towards greater independence and autonomy for
women within patriarchal society in general, and the church in
particular. In practice, as colonial women, the sisters reflected and
reinforced, albeit in a somewhat mitigated version, the racial and
class assumptions of the British imperial world: although they nursed
both Zulu and Dutch soldiers in the course of the Zulu war, the
Transvaal war and the South African war, their sympathies as
Englishwomen clearly lay with the colonial power.

WORKS CONSULTED

- Archival sources

A510 The White Book (The journal of the Community of St Michael
and All Angels 1874-1976, written by a succession of sisters of the
community)
Henrietta Stockdale Collection, University of the Free State (HSC)
Free State Archives Repository, Bloemfontein (FSA)
HSC 1/3/B1-3 Thomas Babington to Bishop Webb, 29 May 1879.
HSC 1/3/B4-6 H Comerford, Surgeon Major, 2\(^{nd}\) Division, Zululand to
Bishop Webb, 11 June 1879.
Quarterly Papers of the Bloemfontein Mission 1879-1900.

- Books and journal articles


Lewis, C & Edwards, G E 1934. *Historical records of the Church of the Province of South Africa*. London: SPCK.


ENDNOTES


2 Margaret Strobel refers to this approach in her 1993 essay, which argues for a gendered study of imperialism.

3 See articles by Janet Haggis and the volume edited by Angela Woollacott. Key South African articles are by Belinda Bozzoli, Helen Bradford and Simon Dagut.


5 Allan Becher Webb (1839-1907) was born in Calcutta, educated at Rugby and Oxford, and was a fellow of University College from 1863-1867. He was bishop of Bloemfontein from 1870 to 1883, in which time the number of clergy rose from three to 35. He was bishop of Grahamstown from 1883 to 1898, and there founded another women’s community, the Community of the Resurrection of our Lord. He became an assistant bishop in Scotland in 1898 and from 1901 was dean of Salisbury. (Goedhals 1982, 455)

6 FSA A510, White Book 29 July 1871; September 1871

7 FSA A510, White Book, volume 4, pp222-3. Most of the sisters came from England: the first South African born member of the community was Ella Bramley, a clergyman’s daughter, who joined in 1892 and was professed two years later. The next, Marjorie Bisset, was professed in 1915, and then Amelia Roffe in 1930. Altogether, fewer than 10% of the total of 81 sisters of the Community of St Michael and All Angels were South African born and all were white.

8 FSA A510, White Book 29 September 1874

9 FSA A510, White Book 31 May 1887

10 FSA A510, White Book 11 June 1877, March 1879

11 FSA A510, White Book 24 January 1876, June 1876, 28 February 1879

12 Gelfand (1984) makes no mention of the work of the Community of St Michael and All Angels: either their work was not known to him, or it was not seen primarily as a medical mission, but rather in the context of philanthropic
work done by Christian women, although it was led by trained professional nurses.

13 FSA A510, White Book 1883:63-4
14 FSA A510, White Book 1911:24
15 FSA A510, White Book 1918:67
16 FSA A510, White Book 5 January 1876, 25 November 1876
17 FSA A510, White Book 4 September 1991
18 FSA A510, White Book 1 April 1876
19 FSA A510, White Book, 24 February 1876, 25 November 1876, 20 July 1880
20 HSC 1/3/B1-3 Thomas Babington to Bishop Webb, 29 May 1879
21 HSC 1/3/B4-6 H Comerford, Surgeon Major, 2nd Division, Zululand to Bishop Webb, 11 June 1879
22 FSA A510, White Book 21 January - June 1881 gives a somewhat sketchy account, tending to dwell on the commendations the nurses received and avoiding comment on the war. The letters quoted in the text - for publication - give a more graphic picture.
23 FSA A510, White Book: Copy of letter, Marquis of Hartington, Secretary for War, to Sister Louisa, 12 April 1884
24 FSA A510 White Book 9 November 1881
25 A graduate of Trinity College, Dublin, Davis Croghan was ordained priest by the Bishop of Chester in 1862 and went to Bloemfontein in 1867 in response to an appeal from the first bishop, Edward Twells. He represented the diocese at the first Provincial Synod in 1870, in the wake of the resignation of Twells, and as Archdeacon of Bloemfontein and Kimberley, was of great assistance to Webb in running the diocese, particularly during the bishop’s absences in England to raise funds and appeal for clergy and other workers. Mother Emma traveled from England with Croghan in 1874. An “eloquent and persuasive preacher”, he was dean of Grahamstown from 1886 to 1889, but resigned due to ill health and died in Kimberley in 1890 (Lewis and Edwards 1934: 90, 277, 409, 410, 418, 436; Goedhals 1982: 464).
26 FSA A510, White Book 14 July 1888; 10 Jan 1889
27 FSA A510, White Book 4 February 1878
28 FSA A510, White Book 6 May 1899 contains an extract from this letter
29 FSA A510, White Book January 1900
30 FSA A510, White Book 12 October 1899
31 FSA A510, White Book October 1899
32 FSA A510, White Book October 1899
33 FSA A510, White Book November 1899
34 FSA A510, White Book 1 December 1899
35 FSA A510, White Book December 1899
36 FSA A510, White Book 15 December 1899
37 FSA A510, White Book 14 March 1900