

Carol Acton

Dangerous Daughters
American Nurses and Gender
Identity in World War One
and Vietnam

“What could a woman possibly have to say about war, especially the Vietnam War.”¹ This was the response given to Lynda Van Devanter when she first approached a publisher about writing her Vietnam War story. Placed in the context of Van Devanter’s subsequent account of her tour in Vietnam, *Home Before Morning*,² it presents us with the gap between the largely unspoken and therefore private women’s experience of war, and the public voice that lays claim to that experience as part of the official war story. Gilbert and Gubar define this gap as a “classic case of dissonance between official, male-centred history and unofficial history.”³ Elshtain further explains the absence of the female voice as a direct result of our definition of war: “Part of the female absence has to do with how war gets defined (where is the front?) And who is authorised to narrate.... Because women are exterior to war, men interior, men have long been the great war-story tellers.”⁴ Although much recent feminist criticism of women’s war writing has narrowed this gap, women’s writing from Vietnam has received little critical recognition and the women’s story has largely been ignored in accounts of the war.⁵ Mark Baker’s *Nam*, and to some degree Bernard Edelman’s edition of *Letters Home from Vietnam* which includes some of Van Devanter’s letters, are exceptional in collapsing this “dissonance” and integrating the nurses’ story into the story of Vietnam as a whole, but popular culture as well as most historical and critical writing on Vietnam still focuses on men as “the great war-story tellers.”⁶

Commenting on the tradition of war writing to which male combatants can lay claim, the Vietnam veteran poet W.D. Ehrhart makes the important connection between the lack of such a tradition and the marginalisation of women's war experience: "No such tradition exists for women. Because they have been excluded from war in our cultural imagination, they have also been excluded from war literature."⁷ Such cultural and literary exclusion is, of course, directly linked to the official exclusion of women from the war zone as it is defined by the military. In her examination of women and identity in World War One, Sharon Ouditt concludes that the role of the military nurse offered a marginalised identity—one in, but not of, the war.⁸ When Lynda Van Devanter and Winnie Smith⁹ came to tell their Vietnam War stories, they were conscious that they were speaking from the margins. Their autobiographies, like that of an earlier American nurse, Mary Borden, writing of her experience in World War One, are an attempt to integrate the woman's voice into the narrative of war.

Establishing links between women writers can go some way toward collapsing the idea that women have nothing to say about war. It is important to note that reading Van Devanter's *Home Before Morning* gave Winnie Smith permission to write her own war story: *(American) Daughter Gone to War*. Smith makes this point clear by interweaving Van Devanter's text with her own and presenting this connection as central to the beginning of her own story telling and subsequent psychological healing.¹⁰ To forge such connections—historical as well as contemporary—is to defy the notion that women have "no war story" because they have no tradition of war writing. It also shows the extent to which historical boundaries fall away in the context of women's war writing. As Elizabeth Norman asserts in her collection of Vietnam oral histories, there is a timelessness to a nurses' recollections of war.¹¹ Such timelessness presents us with more than just a vague sense of common experience; it reminds us that there are important literary and historical connections between American women's war autobiographies.¹² Thus when Mary Borden's account of nursing on the Western Front during World War One, *The Forbidden Zone*, is read beside Smith's and Van Devanter's Vietnam autobiographies, we find a powerful intertextuality, in spite of there being no evidence that either Smith or Van Devanter were aware of Mary Borden's writing.¹³

As women writing from the margins, establishing a place where traditionally they have been denied space, these women's writings are centrally concerned with the question of identity: the constructions of the female identity they bring with them to the war; their identities as nurses in a war zone, stressed to fragmentation by the daily trauma of their working environment and by their relationship with the wounded soldiers they nurse; and their identity

as writers of the war story, usurping the place traditionally reserved for men and defying the identities prescribed for them by the military.

If we consider women's war autobiography in the context of theories of women's life-writing in general, we find that Chodorow's claim that "Feminine identification processes are relational"¹⁴ is enacted *in extremis* in women's experience of combat nursing: the woman's identity is necessarily defined—and fragmented—in the context of the male combatant she nurses. More specifically, as Jane Marcus asserts, "The fragmented bodies of men are reproduced in the fragmented parts of women's war texts, the texts themselves a 'forbidden zone' long ignored by historians and literary critics. Writers of war produce pieces of texts, like parts of a body that will never be whole."¹⁵

While Sidonie Smith finds that women autobiographers perceive themselves to be "speakers at the margins of discourse,"¹⁶ these war narratives show women who, for the most part, accepted the gendered identities that were prescribed for them by their place in time and space, whether pre-World War One or 1950's and 60's North America. It was not until their war experience fragmented these identities that they came to perceive themselves as marginalised. Thus their perception of marginalisation arises out of their traumatic war experience as nurses, rather than because they are women *per se*. Even if they defied some prescribed gender norms by going to war, they did so in a role that was quintessentially female: the nurse. The war autobiographies are concerned with the unmaking or shattering of an already perceived identity: in particular those gendered, and often idealised, identities each woman brought to the war and which were often instrumental in her going: Red Cross nurse, dutiful daughter, happy-go-lucky-all-American girl. These identities are challenged in the context of combat nursing, while at the same time the women must confront the restrictive and confusing roles prescribed for them as women in the military and as nurses in military hospitals.

The official war zone was no place for women, the British military at the outbreak of World War One told women like Mary Borden, an American heiress from Chicago, who responded by setting up her own unit as part of the French Red Cross and publishing her experiences under the title *The Forbidden Zone*. Two generations later, when American nurses found themselves in an environment surprisingly similar to their World War One predecessor they, too, were denied an official place in the war zone: they literally did not count. Neither the military nor the American government kept accurate records of how many women served in Vietnam.¹⁷ Official exclusion from the war zone also worked against women on their return home: the unofficial nature of their role in war forced them into a no-woman's-land where the experience that shattered the identities they had left be-

hind was not officially recognised and yet, as Winnie Smith's title suggests, they had "gone" from, were lost to, their pre-war selves.

Smith's and Van Devanter's accounts of their tours of duty in Vietnam demonstrate the confusing undermining of the identities as women and nurses they brought with them to the war. Even outside their role as nurses women were simultaneously denied and prescribed places: the PX stores carried condoms but not tampons; women's latrines were placed as far as 1/4 mile from the nursing stations; the order to fasten a flak jacket and crawl under their low beds had forgotten that women's breasts would not allow them to fit. On duty, as well as fulfilling their patients' medical needs women had to be warm fuzzies. They had to be a wounded soldier's mother, wife, girlfriend.¹⁸ Similarly, off duty, women were constantly expected to make themselves available as part of male R and R, if not as sexual partners, at least as mother or sister surrogates, changing out of the combat fatigues and boots that camouflaged their sex, into dresses and high heels. Nurses who broke out of such prescribed roles were refused official recognition. Thus, when one of the nurses in Van Devanter's *Home Before Morning* rescues a patient from a burning helicopter after everyone else has run away, her head nurse recommends her for a Bronze Star with a "V" for valor. The medal arrives—but without the "Valor" award "because they didn't award things like that to nurses."¹⁹ "Things like that," one assumes, were reserved for the official realm of combat, forbidden to women. In particular, perhaps, this act subverted the military male ideal of physical bravery (some of those who ran were men) and challenged the binaries set up in wartime, whereby women were the protected, men the protectors. In the military mind a female nurse rescuing a male combatant was a clear reversal of the natural order of things, and therefore could not be acknowledged, let alone rewarded, with a medal.

While women were marginalised by a military who, as Cynthia Enloe puts it, needed them but did not want them,²⁰ at the same time the identities of the women themselves became intimately bound up with the men they nursed. At the heart of these autobiographies, whether Borden's series of disconnected images or Van Devanter's or Smith's more conventionally ordered writing is the degree to which the fragmentation of their own identities is intimately tied to the fragmented bodies they nurse.

Griffith's poem "The Statue", a vision of the proposed Vietnam women's war memorial, presents a literal and metaphoric image of this intimacy which shows in an extreme form in accounts of combatant nursing:

... a young woman
Standing by the side of a green canvas litter.

Lying on the litter
 is a man
 a young man, badly wounded
 her right hand clutching his.

Though I recall our hands were too busy to do that,
 our hearts did it
 till they became numb. (4-11)²¹

The writings of Smith, Devanter and Borden demonstrate the extent to which this intimate link between their identities as women and the men they nurse is central to their writing and to their perception of themselves. But the two connected themes of the poem, an idealistic vision of their role on the one hand and the guilt at being unable to completely fulfil such an idealisation on the other, present one aspect of the identity crisis inherent in such an intimacy. By extension, the intimacy itself is fraught with a sexual tension that further challenges the women's gendered perception of themselves.

In place of the real experience of nursing in a combat zone, culturally inscribed gender roles and expectations were imposed on the nurses in both these wars. The First World War approximation of the images in the Vietnam era poem is the poster of "The Greatest Mother in the World," the Marian figure cradling her dead or dying son, or the nurse caring for the wounded soldier. "The Statue", written by a Vietnam combat nurse, shows the extent to which the women internalised these expectations. In World War One, in Europe and in the United States, the image of the Red Cross Nurse was raised to an icon that most nearly approximated the heroic image of the soldier ["The Best Dressed Woman in the World"].²² Yet underlying such idealisation was moral unease surrounding the intimate relationship necessary between the nurse and the wounded combatant. In the Preface to *Visions of War, Dreams of Peace*, Lynda Van Devanter found it necessary to address the public perception which is the source of this unease: "women, if



thought of at all, were usually thought of as saints or sinners.”²³ Like Van Devanter, Borden’s image of the Red Cross nurse makes clear that she, too, was perceived, paradoxically, as both nun and whore:

Her delicate body dressed in the white uniform of a hospital was exposed to the view of the officers and the regiment.... A red cross was burned on her forehead. She was a beautiful animal dressed as a nun and branded with a red cross. Her shadowy eyes said to the regiment, “I came to the war to nurse you and comfort you.”

Her red mouth said to the officers

“I am here for you.”²⁴

Behind Borden’s objectification of herself in this image is the need to juxtapose the actual experience of nursing in a combat zone with the culturally in-



The Best Dressed Woman in the World

scribed gender roles and idealisations. Rather than deny the sexual element in the intimate relationship between female nurse and wounded male combatant, Borden examines the degree to which the nursing experience presented her with a crisis surrounding her own sexual identity as a woman that is far more complex than the public unease about nursing and sexual pro-

priety.²⁵

While Borden’s Red Cross Nurse preserves a calm distance between herself and those who objectify her, her account of her experience continually demonstrates the extent to which the physical act of nursing transgresses the boundaries that separate self from other, in particular, the female from the male. For Borden, the military machine has robbed the men she nurses of their separateness, (their bodies, whether alive or dead, are given no meaning except as part of a group) nor is the hospital a place where individuality can be restored; it merely continues the violations engendered by the war machine. When wounded male combatants and female nurses meet within the hospital, there is both the collapse of appropriate

separateness and a reversal of gendered norms wherein the man's body rather than the woman's is defined in terms of passive surrender to penetration and violation.

Thus sexual anxiety surrounding the collapse of appropriate boundaries of selfhood and gender constantly disrupts Borden's perception of her nursing identity. In the perverted context of the war, gender roles are both inverted and perverted: her healing ministrations becoming acts of rape on helpless bodies: "We peel off his clothes, his coat and his trousers and his boots.... We stare at the obscene sight of his innocent wound. He suffers us to do as we like with him.... We dig into the yawning mouths of his wounds. Helpless openings, they let us into the secret places of his body. We plunge deep into his body."²⁶ He is passive; she is powerful: "You flaunt your perfect movements in the face of his mysterious exhaustion... You rub his grey flesh... and then stick the needle deep into his side."²⁷ Eric Leed comments: "...such violations of the closed and integral male body are abundant in war with its pollutions and penetrations, wounds and dislocations. The conditions of violence which set apart women and men also create the conditions of a promiscuous familiarity"²⁸ and, he writes, "With the wound, the mysterious interiors of the male are revealed, the mask of masculinity is penetrated."²⁹ When this happens the dear boundaries between what is feminine and masculine become confused or even obliterated altogether. Thus we find that Chodorow's theory of "relationality" is taken beyond the boundaries of normal human interaction in the context of Borden's World War One hospital. Nursing brings about a complete collapse of identity borders, both physical and psychological, and, with it, a collapse of Borden's own sense of self, perpetually besieged by the traumatic conditions that surround her.

The situation that allows Borden literally to enter men's bodies makes for a paradoxical response: she can exult in her own power and yet, once she sees it is predicated upon the powerlessness of the men she nurses, experience extreme guilt not only about her participation in a situation that reduces men to this condition, but also about the inversion of conventional male and female roles. When she confronts this collapse of a prescribed order and perceives her ministrations as rape, she can only retreat to a desexed, dehumanized automaton. Thus, observing the fragments of bodies that surround her, Borden questions "There are no men here, so why should I be a woman?"³⁰ Her question negates the ideology that equates combat and the wounded combatant with masculinity, with the result that she is left unable to identify herself as a woman. This is a place where the gender identities polarised by war break down, or are lost completely as a result of it. Men have become parts, ("heads and knees and mangled testicles") the women who nurse them machines: "She is no longer a woman. She is dead already... Blind,

deaf, dead—she is strong efficient,... a machine inhabited by a ghost of a woman—soulless.”³¹

While the anxiety surrounding Borden’s sexual identity derives from her traumatic intimacy with the men she nurses, Winnie Smith’s anxiety is defined in the context of a necessary retreat from her own sexuality as she nurses wounded combatants in Vietnam. Her account of Nancy Sinatra’s visit to her ward in Saigon demonstrates the connection between such a retreat and the anxiety that surrounds her sexual identity. Like Borden, she cannot be a woman where there are no men, and the intrusion of Sinatra’s blatant sexuality is a disruptive force that for Smith has no place in the ward. But Sinatra’s presence also forces Smith to consider the relationship between her own sexual identity and her role as a nurse, caring for men whose sense of their own maleness has been damaged physically and psychologically. In the following scenario Smith achieves a necessary distance by objectifying her sexual identity as it is represented by Nancy Sinatra, and retreating from it by vilifying Sinatra’s presence on the ward. Thus Smith retreats to the asexual image of the nurse-nun while Sinatra is rejected as the whore. When Nancy Sinatra steps down the ward in her high-heeled boots “bending at each bedside to kiss a cheek, with her long hair tumbling down and her miniskirt hiking up”³² Smith is enraged at the hyper-charged sexual consciousness forced upon her and the men she nurses, especially when it is exacerbated by Sinatra’s inability to handle the tense situation: “She’s starting down the third row when, eyes brimming, she turns and makes a hasty retreat through silver swinging doors. Now I’m really pissed. If she couldn’t handle it she shouldn’t have come. The last thing these guys need is more worry about how their mothers and sweethearts will react when they get home.”³³ Smith’s anger is nominally aroused on behalf of the men, but the continuation of her diatribe demonstrates the extent to which her own gender identity, and the way it has become bound up with the men, is threatened by the sexually charged femininity represented by Sinatra.³⁴

Smith lists the necessary denial of comforts that prevents her from participating in Sinatra’s sexualised femininity, but at the same time affirms her nursing role as the far superior female role: “I want her to stay for a year, to climb six flights of steps everyday and sleep in one-hundred-degree weather, to wash her hair in a trickle of water... to walk through mud puddles in those boots, wear that makeup while sweating it out on the ward.” This description is deliberately juxtaposed with the images of the soldiers she nurses and through whom she defines herself: “...I want her to see wounded straight out of the field with pussy wounds or blood pouring, expectants behind the yellow-curtained screen, the body of a soldier you’ve tried hard to save ready for the graves. Then, if she still could, she might have cause to cry.”³⁵ Nancy Sinatra can return to her air conditioned hotel and cry, (and

presumably also repair her makeup) but for Smith, Van Devanter and Borden tears, like the more superficial trappings of female sexuality, makeup, clothing, long hair, are a luxury. The right to mourn is only given, paradoxically, to the one whose knowledge of the horror allows her no time or space to grieve.³⁶

Sinatra's weeping, moreover, points to a central tension in all of these autobiographies: a further assault on the female identity whereby the woman's traditional role as mourner for the dead warrior is incompatible with the "soulless" automaton she must be as a nurse. The conflict between these two roles leads to a further fragmentation of the self. Smith's anxiety and anger over her sense of herself as a woman as it is defined through her role as a nurse, concludes with the paradox wherein the need to weep, to mourn these broken young men, is the culturally prescribed role for women in wartime as well as being a "normal" emotional response, but professional combat nursing is incompatible with mourning. The nurses must be "strong" as Van Devanter keeps telling herself, or as another nurse puts it: "If you lose control, they're going to die."³⁷ There is no place here for those who, like Sinatra, "can't take it."³⁸ For the nurse to weep is to reveal an unprofessional weakness and yet, throughout these narratives, these two roles struggle for supremacy. Fragments that both Borden on the Western Front in World War One and Van Devanter in Vietnam choose to place at the very centre of their respective narratives develop dramatic intensity by maintaining exactly that tension between the need for absolute control and the point at which the control snaps. The writers, with their texts, are in continual danger of collapse into fragmentation, what Borden describes as "breaking to pieces."³⁹ In each instance the woman has reached a point where she can no longer stand her own control or position of power. Moreover, underlying both these narratives is the implication that to enact this prescribed female role and break down is to awaken to the horror of the masculine arena of war. Such realisation becomes the point where both women recognise that their denial of emotion, a stereotypically male response to military demands, makes them complicit in the act of war.

For Van Devanter, this incident is a crucial catalyst in the collapse of the conservative political and religious identity, as well as the nursing ideology, she brought to the war. The following scenario becomes a recurring metaphor for the futility of the Vietnam War and, by extension, for the collapse of her own identity confronted by that futility.

Entitled "Hump Day," referring to the mid point of her twelve month tour of duty, Van Devanter begins her fragment as an unwelcome intrusion into an exhausted sleep. The "young bleeder", face partially shot away, begins as another faceless, nameless boy who pumps blood out as fast as she can pump it in. For

three pages he remains literally and metaphorically faceless until Van Devanter accidentally kicks aside some of his clothing and

a snapshot fell from the torn pocket of his fatigue shirt.... The picture was of a young couple.... On the back of the picture was writing, the ink partly blurred from sweat “Gene and Katie, May 1968.” I had to fight the tears as I looked from the picture to the helpless boy on the table.. Gene and Katie, May 1968.... This wasn’t merely another casualty, another piece of meat to throw on the table and try to sew back together again. He had been real. Gene. Someone who had gone to the prom in 1968 with his girlfriend, Katie. He was a person who could love and think and plan and dream.

... I wouldn’t cry, I told myself. I had to be tough.⁴⁰

But two days later, remembering how she had once planned a life that met the typical female stereotype of “nice houses and loving husbands and kids,” she realises that the war has destroyed that ideal. In place of it

...all I could see was Gene, ... Gene and Katie, May 1968. Then... I began seeing all of them—the double and triple amputees, boys with brain injuries, belly wounds, and missing genitals... all the images came crashing back on me. I lost control and became hysterical—I became a wild person, sobbing and shaking uncontrollably. “I want my father, I scream, I want my mother, I want to go home, Vietnam sucks, we don’t belong here. This is wrong.”⁴¹

The “All-American-Girl” identity that Van Devanter describes in an early chapter as having brought her to the war has, ironically, been destroyed in the context of the boy whose own American dream has been shattered. Because the image of Gene and Katie dressed for the high school prom, an image of secure Middle America, has been destroyed, Lynda Van Devanter can never go home, back to the safety of daughterhood with her own mother and father. Nor can she recreate their safe world for another generation. Her beliefs, a combination of a Catholic upbringing where “martyrdom was the Catholic girl’s equivalent of growing up to be Babe Ruth,” and of Kennedy’s “Ask what you can do for your country,” are shattered in this one scene.

“After I awoke I felt numb,” she writes, “I threw away the rhinestone flag I had previously worn on my uniform and found myself feeling nothing.” And the very next line: “Christmas in Vietnam. They say the star in the east is only a flare over Camp Enari.”⁴²

Sharon Ouditt’s observation on World War One nurses is equally applicable to Van Devanter’s and Smith’s experience of Vietnam:

They found themselves, then, at an ideological junction between a traditional, idealised value system and a radical new order of experience: a complex and ambiguous subject position that was frequently the source of breakdown.⁴³

and:

The trauma of the daily experience of nursing...destabilised for some women what had come to be their way of identifying themselves. The complexity and ambiguity of these women’s experiences was largely owing to the violent clash between the conservative ideologies that enabled them to get out to the war and the failure of those ideologies to mediate or account for the trauma that later beset them.⁴⁴

The psychology of trauma needs to be underlined here. This experience was not played out on just an ideological level, but the ideological level was directly affected by the intensely physical experience of nursing: seeing and treating appalling wounds, often, as in the case of Gene, with a realisation of how completely ineffectual the medical treatment was, in an environment that was short of supplies, overcrowded, with medical staff suffering from sleep deprivation and exhaustion and constantly aware that, however much they gave of themselves, they were often powerless to save lives.

While Van Devanter presents this collapse of identity in dramatic form—the desperate attempts to save the boy, her own collapse taking us through the emotions with her—Borden’s account of a very similar incident is written with a restraint that reflects the extreme control she had to maintain over her emotional response, until finally, at the end of the section, the control fails to operate and she “falls apart.” For both women this moment of recognition is, importantly, defined by an awareness of “relationality.” The nurse’s consciousness of the humanity of the apparently inhuman “pieces of meat,” and her attendant “relationship” with the wounded soldier, is initiated by the soldier’s relationship with another woman:

“Gene and Katie” or the mothers who wait for Borden’s men in the following fragment.

Like Van Devanter, Borden sets her real experience beside an idealised and gendered stereotype. Thus the collapse of the stereotype is rendered ironic in the context of her experience as a combatant nurse. She begins with the idealised poster image of the Red Cross Nurse-mother, as she describes being “awoken” by a boy whose voice breaks through the barriers of her professional control:

The little boy who had been crying for his mother died with his head on my breast.... How many women, I wondered, were waiting out there in the distance for news of these men who were lying on the floor? But I stopped thinking about this the minute the boy was dead. It didn’t do to think. I didn’t as a rule, but the boy’s very young voice had startled me. It had come through to me as a real voice will sound sometimes through a dream, almost waking you.⁴⁵

A blind man, who takes the dead boy’s place on the floor, does speak: “Thank you sister, you are very kind.’ He had a beautiful voice.” Her account continues with a series of fragmented images. In each instance she is completely, if numbly, in control: admiring her new needles; calmly placing half a man’s brains in a bucket on the floor; returning to the job that demanded absolute professional control over emotional involvement—triage: “it was my business to sort out the dying from the nearly dying... I didn’t worry. I didn’t think. I was too busy, too absorbed in what I was doing.” This controlled, matter-of-fact narrative carries through for seventeen pages, though with the undercurrent repetition “I didn’t think” alerting the reader to the tension building under the superficial control. At times the imposition of control removes her from herself completely and she sees herself in the third person as “that woman” who “moves ceaselessly about with bright burning eyes and handles the dreadful wreckage of men as if in a dream... three knees, two spines, five abdomen, twelve heads...” In the midst of this the voice of the blind man calls to her “Sister, my sister, where are you? I thought I had been abandoned here, all alone.” But in responding to him she loses the professional control she has been holding onto so tenuously:

I seemed to awake then. I looked round me and began to tremble, as one would tremble if one awoke with one’s head

over the edge of a precipice. I saw the wounded pack round us, hemming us in...

“You are not alone,” I lied. “There are many of your comrades here...”

My body rattled and jerked like a machine out of order. I was awake now, and I seemed to be breaking to pieces... “No,” I managed to lie again “I had not forgotten you, nor left you alone...”

At that I fled from him. I ran down the long, dreadful hut and hid behind my screen and cowered, sobbing, in a corner, hiding my face.⁴⁶

Borden builds to this final giving way as her fragment—itsself a collection of fragments all held together only by the necessity of grammatical structure, it seems—shatters with her own fragmentation. The piece ends a few lines later with the old orderly offering her coffee: “He didn’t know of anything else he could do for me.”

In the recurring image of Gene the bleeder, Van Devanter presents both a real image and a metaphor for the futility of the war she witnessed. Gene, breaking through her professional distancing, becomes a synecdoche for the Vietnam War which Van Devanter begins to see as a futile exercise, draining the life-blood of its participants. Thus her own role as a nurse itself becomes an exercise in futility. Likewise, Mary Borden’s images of one continual, constantly changing but never changing world of breaking and mending reveals the conspiracy behind Elaine Scarry’s dictum that “The main purpose and outcome of war is injuring.”⁴⁷ In a fragment entitled “Conspiracy” the image of fragmentation exists beside the deadly control imposed. Here Borden’s domestic metaphor of laundry and mending makes a direct link between the woman’s world and the military conspiracy of which she has become a part:

It is all carefully arranged. Everything is arranged. It is arranged that men should be broken and that they should be mended. Just as you send your clothes to the laundry and mend them when they come back, so we send our men to the trenches and mend them when they come back again. You send your socks and your shirts again and again to the laundry, and you sew the up the tears and clip the ravelled edges again and again just as many times as they will stand it. And then you throw them away. And we send our men to the war again and again, just as long as they will stand it; just until they are dead, and then we throw them in the ground.⁴⁸

Such an image of utter futility, couched in domestic metaphor, directly challenges Borden's own role as nurse and woman: healer and nurturer. The same sense of futility pervades the Vietnam nurses' accounts, seemingly precipitated by a lack of closure in the nurse-patient relationships: the slightly wounded patients were returned to combat, and the seriously wounded who did not die were shipped back to Japan or the United States, thus denying the nurses the satisfaction of seeing their role as healer fulfilled. As one Vietnam nurse writes: "Our military mission as nurses was 'to preserve the fighting strength.' That meant we were supposed to fix them and send them back to get shot at again or to get killed—and to me that was immoral."⁴⁹ A more extreme guilt attends the practice of triage which made them, as they saw it, complicit in individual deaths. Nurses attempted to alleviate such guilt by making sure the individual they labelled "expectant" did not die alone.⁵⁰

As the above fragments show, the woman's claim to the validity of her own experience, her affirmation of a physical place in the traditionally male arena of war often, paradoxically, means placing the wounded soldier at the centre of her narrative, forcing her already unstable and fragmented identity to the margins of its own text. Such a position leaves writers like Borden, Van Devanter and Smith open to the accusation that they have been colonised by the military ideology that marginalised them in the first place: the belief that the war "story" belongs to the combatant. But it would be too easy to dismiss their work as supporting the mythos of the wounded combatant as the victim-hero behind whom the woman is always partly hidden. In fact, by playing a kind of narrative hide-and-seek and at times retreating behind the image of the combatant, all three writers successfully undermine the mythology of the warrior by exposing "injury" as the outcome of war.

The following fragments by Smith and Van Devanter respectively show the extent to which the focus on the combatant can be used for ironic effect, whereby the nurses' initial marginalising herself to the role of bystander allows her to re-enter the narrative in the role of revealer. In both instances we move from the immediate heroic image of the soldier to a complete undermining of the myth inherent in that image:

The soldier's face is deeply tanned, not discoloured like so many in death. The dirt of battle gives him the air of an athlete at rest after a workout. Sweat streaks outline helmet straps along his jaw. He could be a high school football player after a scrim-

mage in the mud—*except for the misshapen form under the sheet, flat where there should be arms and legs.*⁵¹

The close-up of the soldier's face allows Smith to conceal, until the very end, the real situation. She moves us from the conventionally heroic image of the dead warrior as sleeping soldier, to football game, to the travesty the war has made of the boy's body. The attention to detail—tan, dirt, sweat streaks—is intimate, almost lover-like. Although she takes a cinematographic approach, panning in on the soldier's face before revealing the rest of his body, she also takes us beyond the visual confines of a screen image—asking us not just to look, but to touch. Once there, she brings the warrior ideal into an ironic juxtaposition with the related image of that officially sanctioned arena on the home front where manhood is tested—the football field: “He could be a high school football player.” But war, the nurse's experience reveals, can only test manhood by unmanning.

Like Smith, Van Devanter's fragment also begins with intimate details of the boy's body that suggest the warrior at rest after physical action, but the details combine to convey not strength but vulnerability: sandy brown hair, sweat marks, closed eyes.

His sandy brown hair was pressed down where the sweat-soaked straps of his helmet had been. With his eyes closed he might have been just another tired soldier, resting. *However, the bloody mess that was once his body told a different story.* (emphasis added)⁵²

Both Van Devanter and Smith take us on a “tour” of the soldier's body, introducing us to the “different story.” The soldier preserves his identity as a “warrior,” the image of helmet and straps lending the narrative a timeless quality, only to have it ruthlessly stripped away as the nurse moves from the combatant story to her own story: the fragmented body. The woman's job is to reveal what lies below the helmet and the sweat—common images in male combatant writing—to trick us into looking at her world, the forbidden zone that others would prefer not to see.⁵³ Such revelation is only possible because of her intimate association with the soldier, and her identification with him is central to the emotion of these passages. This fragment from Van Devanter's autobiography Smith chooses to work into her own writing.⁵⁴ Her response to Van Devanter's images clearly shows the extent to which Smith's own post-war trauma was bound up in her identification with the wounded and dead combatants that “*told a different story.*”

I can smell the blood now, the stench of Vietnam in its humid tropical air. I see the dazed stare in the haggard face of a young soldier. I hear the choppers, the sound of more wounded on the way; taste the dust.... Feel the fear, the sick dread of death in the air all around me.

...

For the next year these ghosts of my past are my constant companions, and the past is more real than the present.⁵⁵

While fragments like the above demonstrate the interdependence of the nurse's identity with that of the fragmented body of the soldier, Smith's and Van Devanter's autobiographies also demonstrate a need to find a wholeness to combat that fragmentation. The structure of both narratives, wherein the fragmented experience of war nursing is controlled in a form that provides for closure and wholeness as the inevitable ending of the story, demonstrates an ongoing desire to defy the fragmentation.

Such defiance is present even within the fragmented experience of the war. In a perverse way, fragments of text can also, paradoxically, be persuaded to collude in an illusion of wholeness, as we find in the following incident from *(American) Daughter Gone to War*. One of the most poignant of Smith's unfinished stories concerns her relationship with an infantry officer, Larry. Their relationship allows her to hold on, however tenuously, to her identity as a woman, defined by her relationship with a "whole" man. In relating their story she emphasises this need by employing the conventionally gendered narrative of wartime romance: "Larry's strong arms enfold me;" and "I long for the strength of a man's body." When he gives her his Combat Infantry Badge instead of a ring she gazes at his "badge of courage." But a few days later, when a corporal in Larry's jeep appears beside her hut, she avoids confronting him:

Whatever he has to say I don't want to hear it. If Larry's dead, I don't want to know. If he's messed up for life, lying in some hospital bed without arms or legs, I don't want to see him. I want to remember him with a light in his eye and the catlike grace of a warrior.⁵⁶

Smith's choosing to remember the whole man is a defiance of the war that constantly threatens to fragment men, women, and their stories. But here, while

she takes control of the narrative it also traps her. She can avoid confronting the grief that would be an inevitable part of the narrative and at the same time preserve the dignity of the person she knew, but her closure is artificial. It emphasises the futility of any escape into the normalcy of a relationship that is linked to the frailty of the human body. To deny Larry's fragmentation is to remain whole herself, at least temporarily, but it also involves a denial of feeling. It is the antithesis of her response to the dead soldier in the fragment discussed earlier. In her narrative of Larry, her camera veers away without confronting and revealing the real situation. The result is to sustain the image of the warrior she is so concerned to reject in the earlier fragment. While Smith is very conscious of her need to avoid confrontation, it is obvious that her personal relationship is behind her inability to play the role of revealer here. She is unable to objectify the body of one so close to her. The grief she denies herself here, and as a response to the many other deaths she witnessed, eventually becomes part of the long years of grieving after her time in the official war zone is complete.

In her Preface to *The Forbidden Zone*, Mary Borden rejects form and order as artifice. For her the modernist fragmented narrative represents her experience of the war: "To those who find these impressions confused, I would say that they are fragments of a great confusion. Any attempt to reduce them to order would require artifice on my part and would falsify them." Hers is also a perspective completely prescribed and confined by the war itself. She allows no intrusion of a before or after. Conversely, Smith and Van Devanter, telling the Vietnam story, need to place their experience in the context of their return home, since the return back to "the world" is as much a motif of the Vietnam War as was the time spent "in country." Their reception on their return home, especially their mothers' silencing of their war stories, plays a crucial role in shaping their memory and determining their perspective of their Vietnam experience as well as motivating them to break the silence and write their autobiographies. Furthermore, both these autobiographies are presented in terms of catharsis: the writing of the biography becomes an affirmation of a self that had come very close to complete fragmentation and suicide. Thus for Van Devanter and Smith the narrative of war must be presented in the context of psychological recovery and closure.

For Mary Borden "The war is the world, this cardboard house, eight by nine... my home. I have lived here ever since I can remember. It had no beginning, it will have no end. War, the Alpha and the Omega, world without end."⁵⁷ Choosing to remain always within the war, war is ever-present within the confines of her autobiographical fragments. For Smith and Van Devanter, a pivotal moment in their war experience is the return home. Yet, while geographically the narrative takes them away from the war, their war continues to trap them within its parameters as

much as Borden's. In fact, their return home forces them to realise that the war really has no parameters. It cannot be contained in time or place. Waiting in line at San Francisco airport on her way home a corporal asks Van Devanter:

"Can you hear it?"

"Nam still sucks," I answered, "But I can't hear it anymore."

"Sure you can," he said. "Everybody does. It never stops."

His comment is confirmed as she falls asleep on the plane: "An image startled me awake. It was the bloody, blown away face of the young bleeder into whom I had pumped blood six months earlier. Gene and Katie, May 1968."⁵⁸ Van Devanter is literally carrying her Vietnam experience back home on the plane. She and Smith have become, as Jane Marcus writes of women nurses and ambulance drivers in World War One, "forbidden, dangerous, polluted carriers of a terrible knowledge. Their bodies became *la zone interdite*."⁵⁹

Thus, rather than a return to the safety of family and their pre-war identities, both Van Devanter and Smith experience a profound dislocation upon their return home. One important manifestation of this dislocation is their alienation from their mothers, both of whom overtly silence their daughters' attempts to communicate their war experiences. In this context, their alienation from their pre-war identities takes on a particularly gendered complexion. Smith anticipates this breakdown in communication earlier in her autobiography, as she juxtaposes what she perceives as the trivial home concerns in her mother's letters with her *in extremis* experience as a nurse.⁶⁰ On her return home her mother, like Van Devanter's, is unable to accept, literally, the voice and language of the returning daughter. In both situations the mothers severely reprimand their daughters for their "unladylike" swearing. Asking her sister to "pass the fucking salt" and showing slides and talking about her war experience on her first evening home, Van Devanter emphasises the distance from a mother who rejects the new voice her daughter speaks in. The mother's refusal to listen not only invalidates her daughter's experience, but also attempts to make her deny it: "*I don't think you really want to show those slides. Maybe it would be wise to put them away*"⁶¹ (emphasis added). Similarly, Winnie Smith's mother reprimands her swearing because, as Smith says: "No woman in my family ever swears... I want to let loose every swearword in the book. Show them what the fuck real swearing is all about."⁶² Her mother also silences her accounts of the war: "No-

body wants to hear that stuff.... Some things are better left unsaid.”⁶³ For Smith the use of swearing throughout the book represents the dislocation of her identity: separating her pre-war self from the self that returns. It is the voice she acquires in Vietnam, and the interplay between herself and her mother, through letters when she is in Vietnam, and through exchanges like the above on her return home, enacts the title of her book. This daughter has “gone,” been lost to, war. She has transgressed the boundaries of appropriate female behaviour, seen and spoken what she should not. She has become a “dangerous daughter.”

For both these women, the war experience itself was one of marginalisation in an already marginalised zone; in the autobiographies the return home repeats and reinforces this marginalisation. Smith’s swearing is in defiance of a society that would define her through gender-appropriate language; it also takes the place of the experience she is forbidden to tell. (Women who had served in Vietnam were not only silenced by their families, but initially were refused entry into the Veterans associations that acted as support systems for male Vietnam veterans.)

Concrete events represent the closure that Van Devanter and Smith are working towards in these autobiographies. Nominally, Smith finds closure in the birth of her son and Van Devanter in her return to Vietnam in 1982. But beneath these surface closures both autobiographies show that the end of the war comes through the autobiographical act of speaking their “terrible knowledge.” Such an act validates their grief and provides a “site of mourning”⁶⁴ for their lost selves and for the men who were wounded or killed. Moreover, their post-war public portrayal of death and suffering allows both writers to claim a gendered position as the mourning woman. They can thus regain an aspect of their identities denied to them during their time in Vietnam and further denied in the enforced silence on their return home.

The question that pursues Van Devanter during the later part of her time in Vietnam and on her return home is the question posed by loss: “Why?”

The young man came back into the dream as he had so many nights before.... There was a large hole where his belly and chest used to be. He had no arms and legs and his face was blown away. He whispered something that I couldn’t hear... I put my head so near to the spot that had once been his lips that I got blood on my cheeks. The soldier kept whispering one word: “Why?”⁶⁵

When the war ends the connection between the dead soldiers of her nightmares and Van Devanter's own burden of grief becomes clear. She must take on the mothers' role of mourning for all the sons they have lost: "I dreamed that night about Vietnam.... It was a new dream: *Thousands of American mothers were malking in the streets of Saigon, carrying the bloody bodies of their dead sons. Above the wailing, screaming, and gnashing of teeth, one word was constantly repeated: Why?*"⁶⁶

Winnie Smith carries a similar post-war guilt and grieving: "In my dream I'm shopping for clothes in Sausalito.... We go together to a shoe store, where I pick out a pair of dressy high heels. But when I open the box... for one last look before paying, I find a piece of a bloody fatigue jacket in the bottom of the box."⁶⁷ After watching a news report on the Persian Gulf War she dreams of "a long column of Iraqi mothers dressed in black robes and veils, poking poles into the blinding white sand to find their sons' bodies."⁶⁸

In the absence of public grief or memorial (Van Devanter was writing her book before the "Wall" was built) Van Devanter and Smith carry not only the burden of the war experience itself but also the traditional burden borne by women in wartime: mourning for the dead. This gendered position carries a psychological cost in the reliving of traumatic events that takes the women beyond the war itself. Thus nightmares come to include not only images of broken men, but also the women, especially mothers, who grieve for them. The private process of grieving that the writing of these narratives allows, becomes a public mourning on their *publication*. Writing the trauma, the actual telling of the war story, ultimately does become, however, a catharsis that results in closure for both these women. The closure of this story is thus to be found in its own telling and in the mediation it achieves between the private experience and its public utterance.

The woman who enters the "forbidden zone" of the male arena of war reveals the "forbidden zone" of the fragmented male body. And, to repeat Marcus, this body knowledge makes her own body a "forbidden zone." Such a revelation confirms the extent to which her war story is inseparable from the story of the men she nurses. The place she claims is with them, rather than separate from them. During her time as a combat nurse she ministers to them; on her return home she mourns them. And the war story she tells is also their war story. Mary Borden dedicates *The Forbidden Zone* "to the poilus who passed through our hands during the

war.... They know, not only everything that is contained in it, but all the rest that can never be written.” Her words claim a shared knowledge of war (and a shared silence) and imply her right to tell the collective war story. Van Devanter and Furey make a similar claim for the Vietnam generation of women in their Preface to *Visions*, asserting their right to the shared story: “These women need to be heard. They *know* what war is.”

Endnotes

1. Lynda Van Devanter and Joan Furey ed, *Visions of War, Dreams of Peace: Writings of Women in the Vietnam War* (New York: Warner Books, 1991), xxi.
2. Lynda Van Devanter with Christopher Morgan, *Home Before Morning: The Story of an Army Nurse in Vietnam* (New York: Warner Books, 1983).
3. Sandra Gilbert and Susan Gubar, *No Man's Land: The Place of the Woman Writer in the Twentieth Century*. Vol. 3 *Sexchanges* (3 vols. London: Yale University Press, 1988-94), 262.
4. Jean Bethke Elshtain, *Women and War* (Chicago and London: University of Chicago Press, 1995) 213.
5. The best known Vietnam stories, such as Philip Caputo's *Rumor of War*, or Tim O'Brien's *Going after Cacciato*, *The Things They Carried*, and *If I Die in a Combat Zone*, are combat stories in the tradition of male combatant writing. Women, if they appear at all, are marginal writers of “Dear John” letters or representative of another world from which the men are isolated. Contact with women is confined to the brief interludes of R and R where women fulfill entertainment roles.
6. Mark Baker, *Nam: The Vietnam War in the Words of the Men and Women Who Fought There* (London: Abacus, 1987); Bernard Edelman ed, *Dear America: Letters Home from Vietnam* (New York: Simon and Schuster, 1985) dedicated to “Those who served and those who sacrificed, To those who wept and those who waited, Because of the Vietnam War.”
7. W.D. Ehrhart, foreword to *Visions of War, Dreams of Peace*, xviii.
8. Sharon Ouditt, *Fighting Forces, Writing Women: Identity and Ideology in the First World War* (London and New York: Routledge, 1994), 9.

9. Winnie Smith, *(American) Daughter Gone to War: The True Story of a Young Nurse in Vietnam* (New York: Warner Books, 1992).

10. At the bottom of the page I read: "They flew him in by chopper and there were streaks of dirt along his face."

Without warning, my eyes fill with tears and overflow... I swallow hard and continue: "His sandy brown hair was uneven, with patches pressed down where the sweat-soaked straps of his helmet had been."

...

I can smell the blood now, the stench of Vietnam in its humid tropical air. I see the dazed stare in the haggard face of a young soldier. I hear the choppers.... Taste the dust... feel the fear

...

For the next week these ghosts of my past are my constant companions, and the past is more real than the present. Smith, 297.

11. Elizabeth Norman, *Women at War: The Story of Fifty Military Nurses Who Served in Vietnam* (Philadelphia: University of Pennsylvania Press, 1990), 27.

12. Lynda Van Devanter and Joan Furey are also very aware of this "timelessness," beginning the introduction to *Visions* with Florence Nightingale's repetition of the phrase "I can never forget."

13. Mary Borden, *The Forbidden Zone* (London: Heinemann, 1929). Borden's World War One account is most often read and discussed in the context of British women writers of the period.

14. Nancy Chodorow, *The Reproduction of Mothering: Psychoanalysis and the Sociology of Gender* (Berkeley: University of California Press, 1978), 176.

15. Jane Marcus, "Corpus/Corps/Corpse: Writing the Body in/at War" in *Arms and the Woman: War, Gender, and Literary Representation*, edited by Helen M. Cooper et al (Chapel Hill and London: The University of North Carolina Press, 1989), 178.

16. Sidonie Smith, *A Poetics of Women's Autobiography: Marginality and the Fictions of Self-Representation*, (Bloomington and Indianapolis: Indiana University Press, 1987), 44.

17. As Elizabeth Norman found when she began her research on Vietnam military nurses "In effect, nobody knew who or how many nurses served

in Vietnam.... Estimates of the number of military nurses who served in Vietnam range from 4,000 to 15,000." *Women at War*, 3-4.

18. Cynthia Enloe, *Does Khaki Become You?: The Militarization of Women's Lives* (London: Pandora, 1988) 109.

19. Van Devanter, *Home Before Morning*, 229

20. See Cynthia Enloe's chapter "The Military Needs Camp Followers" in *Does Khaki Become You*.

21. Van Devanter and Furey, *Visions of War*, 196.

22. Fig.i "The Greatest Mother in the World" American Red Cross Poster, 1918; fig ii "The Best Dressed Woman in the World" reproduced in *The Ladies Home Journal*, May 1918. Acknowledgements to Alan Smith, University of Waterloo, for *The Ladies Home Journal* illustration now in the author's own collection.

23. Van Devanter and Furey, *Visions of War*, xxi.

24. Borden, 35.

25. For an important and illuminating discussion of wartime nursing and sexuality see Katie Holmes, "Day mothers and night sisters: World War 1 Nurses and Sexuality" in *Gender and War: Australians at war in the twentieth century*, edited by Joy Damousi and Marilyn Lake (Cambridge: Cambridge University Press, 1995).

26. Borden, 119-20.

27. *Ibid.*, 124.

28. Eric Leed, "Violence, Death and Masculinity" in *Vietnam Generation*, special edition *Gender and the War: Men, Women and Vietnam*, edited by Jacqueline Lawson (Vol.1, Summer-Fall 1989, Nos. 3-4) 176.

29. *Ibid.*, 183.

30. Borden, 60.

31. *Ibid.*, 59-60.

32. Smith, 149.

33. Ibid.,149.

34. That Smith's reaction was not unusual is shown by a similar account in Mark Baker's *Nam*: "Miss America came to the hospital... She had all these sweet young things with her in little red, white and blue miniskirts. I'm not too jealous. Granted I haven't had my nails done and I haven't had an honest-to-goodness bath in eleven months, and these young things roll in.... In walks Miss America. She bumps and grinds over to a patient and says, all breathy, 'I bet you just never thought you'd see anything looking so pretty and smelling so sweet.' If he could have hit her, he would. Instead, he just started crying and turned his face away." 78

35. Smith, 149.

36. The idea that only those who participate in war have a right to grieve for the dead is, of course, a common theme in combatant writing.

37. Dusty, *Shrapnel in the Heart*, Laura Palmer, ed, (New York: Random House, 1987), 126.

38. "I knew I couldn't let myself cry. I couldn't allow myself to do that because if I did then I was taking the time that could have been better used to help somebody else. It was important for me not to cry in front of them because I was whole, and being whole I felt that by my presence and closeness I could help them a little bit. I'd give them a hug, trying to block out my own emotions" in Shelley Saywell, *Women in War* (Harmondsworth, England: Penguin/Viking, 1985), 150.

39. Borden, 159.

40. Van Devanter, *Home Before Morning*, 197-8.

41. Ibid., 202.

42. Idem.

43. Ouditt, 7.

44. Ibid., 27.

45. Borden, 138.

46. Ibid., 138-59.

47. Elaine Scarry, *The Body in Pain: The Making and Unmaking of the World*, (Oxford: Oxford University Press, 1985), 63.

48. Borden, 117. For further discussion of Borden's writing here see Margaret Higonnet "Women in the Forbidden Zone: War, Women, and Death." in *Death and Representation*, edited by Sarah Goodwin and Elisabeth Bronfen (Baltimore and London: Johns Hopkins University Press, 1993), 192-209.

49. Peggy Tuxen, "Helicopters, heat and holding the hands of the dying..." in *California Nurse*, November 1983.

50. During times of mass casualties it was not possible to give medical aid to all the wounded. The practise of triage meant that the nurses had to decide between those who were seriously injured and expected to die (expectant) and those who would have a strong chance of surviving surgery. This meant that they had to deny their stateside training which taught them that the most seriously injured should be treated first.

51. Smith, 121.

52. Van Devanter, *Home Before Morning*, 1-2.

53. Michael Bibby finds that GI resistance poetry similarly "articulates resistance through images, tropes, and poetics of mutilation in which the fragmented, dismembered, disincorporated (masculine) body signifies both the brutal incoherence of the war and the failure of dominant ideology's notion of the soldier body as an impenetrable totality." *Hearts and Minds: bodies, poetry and resistance in the Vietnam era*, (New Brunswick, N.J: Rutgers University Press, 1996) 8.

54. See my comment on p.1 of this discussion.

55. Smith, 297.

56. Ibid., 237.

57. Borden, 52-3.

58. Van Devanter, *Home Before Morning*, 250.

59. Marcus, 126.

60. In the following extract, for example, Smith juxtaposes her situation with her mother's letter:

Larry still hasn't appeared. He must be dead or he would have come to see Pops by now.

I'm dragging myself out of my bunk when Mary Jane walks into my room, babbling about Colleen's finding out that her fiance's plane crashed last night. Two nights ago another nurse's fiance bought it...

...

I pull out my mother's last letter.

...I don't think we have gotten all your mail—no one has heard from you for five weeks now....

It's rather dreary and depressing here with rain, and also Prissy died.... Now I really miss her so much and it really has me upset, I've been rather useless today. Pets are wonderful but it really is heart breaking to lose one.... 208.

61. Van Devanter, *Home Before Morning*, 259.

62. Smith, 252-3.

63. *Ibid.*, 251.

64. I borrow this term from Jay Winter's study of memory and mourning in the aftermath of the First World War: *Sites of Memory, Sites of Mourning: The Great War in European Cultural History* (Cambridge: Cambridge University Press, 1995).

65. Van Devanter, *Home Before Morning*, 275.

66. *Ibid.*, 316.

67. Smith, 336.

68. *Ibid.*, 350.

Carol Acton teaches English at St Jerome's University, federated with the University of Waterloo, Canada. Her research interests are in women's war writing, particularly from World War One and the Vietnam War. A further discussion of women's writing from the Vietnam War, "Bodies do Count: American nurses mourn the catastrophe of Vietnam," will appear in a forthcoming collection, *The Memory of Catastrophe*, edited by Peter Gray and Kendrick Oliver, Manchester University Press.