Surviving survival: nursing care at Bergen-Belsen 1945

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KEY WORDS

history, holocaust, Bergen-Belsen

ABSTRACT

Objective

The purpose of this paper was to explore the previously little known contribution of nursing care at the liberation of Bergen-Belsen concentration camp.

Setting

Bergen-Belsen concentration camp

Primary argument

The liberation of Bergen-Belsen concentration camp became a widespread symbol of suffering when it was liberated by British forces. Films of the liberation and the appalling condition of the survivors were widely disseminated in the western Allied countries. Despite the earlier liberation of Majdanek and Auschwitz in Poland, Bergen-Belsen became fixed in the minds of the British public as an icon of the holocaust. Due to the catastrophic conditions found in the camp, doctors, nurses, medical students and aid organisations were quickly drafted into the relief effort. The work of doctors has been well publicised, however little has appeared that details the contribution of nurses. The diaries and letters of Muriel Knox Dougherty, the Australian nurse who became chief matron of the camp's nursing services have been published only in recent years. No other material has been made public; consequently the work of the nurses has yet to be fully detailed.

Conclusion

This paper presents the reflections and recollections of several nurses who served in the liberation nursing services. Primary sources for this paper include relevant literature, archival material including correspondence, diaries, testimonies and personal correspondence. The conclusion formed on the basis of these documents is that the work of the nurses during the liberation period was life-saving for their patients and life-changing for the nurses.

INTRODUCTION

The purpose of this paper is to explore the little known contribution of nurses following the liberation of Bergen-Belsen. This exploration brings to light the heroism and humanity of the nurses under horrifying circumstances. Primary sources of material have been gathered from archives and include letters, diaries, and eyewitness accounts. Secondary sources include literature published about the camp, the findings of physicians, and eyewitness accounts incorporated into the literature.

METHOD

A literature review was conducted. While considerable literature has explored the history of Bergen-Belsen and conditions at the time of liberation, few sources make mention of nurses involved in the rescue efforts. The most detailed literature related to nursing was found in the publication of the diary and letters of Muriel Knox Doherty who was appointed chief matron in the camp at that time. Pertinent Australian archives such as the Australian War Memorial, Sydney Jewish Museum and College of Nursing were contacted but no further material was located. The Royal Australian Nursing Corps was also contacted. A number of nurses responded who knew of colleagues who had been at Bergen-Belsen but who had subsequently died. A brief article appeared in Australian nursing journals asking for any nurse who had information on the topic to contact the author. This resulted in one nurse in New Zealand who had been at the liberation and email contact was established.

As sources in Australia failed to provide any further information, overseas archives were contacted. These included Yad Vashem in Israel, the United States Holocaust Memorial Museum and Archive and a number of archives in the United Kingdom. Those that contained information included the Imperial War Museum, the British Red Cross, St. John's Ambulance, the Society of Friends, and the Wellcome Institute. Having established that several nurses had lodged documents with these institutions, it was necessary to travel to the United Kingdom to view the materials.

A fundamental difficulty was locating nurses who might agree to speak about their experiences in Bergen-Belsen. One example is the account of Ethel Bardsley, a nurse from Queen Alexandra hospital in the United Kingdom who, like many women, decided to enter nursing because Britain was at war. As a state registered nurse, Ethel Bardsley volunteered in July 1944 and was posted to military hospitals, first in Britain and later, in Belgium. On 18 May 1945, a month after the liberation of Bergen-Belsen, she was posted to that camp. Like many others, she was horrified at the condition of the survivors and refused to discuss what she had seen with her family (BBC 2004). Similar to many survivors, nursing and medical personnel may have chosen never to speak about their experiences, finding their recollections too painful to share. The paradox of attempting to learn more about caring practices following the liberation and causing distress to any nurse who could recall the experience was a serious ethical dilemma. It was made clear that any nurse who could be located would not be forced to answer any questions and that interviews could be ended at any time to avoid distress. The fragility of memory after so many years was also a concern however only one nurse was located and she was amenable to the project's goals and willing to discuss her experiences.

FINDINGS AND DISCUSSION

History of Bergen-Belsen

Located south of Hamburg near the town of Celle, Bergen-Belsen became infamous in the immediate post World War Two era as an icon of human suffering. The camp was created in 1940 as a prisoner of war (POW) camp. It was transformed in 1942 to a concentration camp under SS command (SS stands for Schutzstaffel meaning special security personnel) and was intended to be a detention camp for prisoners who held foreign passports and who could be exchanged for German citizens held in Allied internment camps. In March 1944, the camp was designated a 'recovery camp' to which prisoners from other concentration camps who were too sick to work were transported. In 1945 with Russian troops advancing, prisoners were evacuated from other

concentration camps and thousands of prisoners arrived at Bergen-Belsen which had no capacity to take such large numbers of people. Compounding the problem, the camp was in the war zone and in close proximity to Allied bombardment. This catastrophic situation worsened when typhus broke out in February 1945 killing many of the sick and weakened prisoners. Anne Frank and her sister Margot both died during this epidemic. At least 50,000 people died in Bergen-Belsen before liberation Bardgett and Cesarani 2006: Walker 1945).

Liberation of Bergen-Belsen

In the last days before liberation, up to 600 people were dying each day from hunger and sickness. The Germans alleged that Allied bombs destroyed a water pump and therefore many of the inmates were dying of thirst, having been without any water for six days. Facilities existed to bake 60,000 loaves of bread daily, but only 10,000 loaves a day were provided for inmates, the rest was sent to feed German soldiers. British forces discovered that inmates had been without any food for six days and that no medical supplies existed in the camp (Hardman, 1958).

On 15 April 1945 the camp was surrendered to British forces. As a result, Bergen-Belsen became the first camp to become widely known to the public despite the earlier liberation of camps in Poland. When British forces entered the camp initially they saw nothing to cause alarm but deeper in the camp they were confronted with an estimated 10,000 unburied naked bodies. The stench was so horrendous that it could be smelled up to ten miles from the camp (Introduction to Bergen Belsen, 2002).

Major medical relief efforts began immediately. A body of literature has served as a testament to the work of physicians and medical students but little reference has been made to any nursing contribution. Nevertheless, a number of nurses were actively involved in the physical and mental care and rehabilitation of the surviving prisoners. Over sixty years have passed since the liberation but the importance of the nursing contribution has not diminished. One possible explanation for why so little attention has been paid to the nursing

contribution revolves around the existing gender issues of that era.

Gender: men and women at Bergen-Belsen

Reilly (1998) has published an extensive study of Bergen-Belsen including its liberation. She purports that while one might presume traditional male and female roles would have broken down during the war, this was not the case. The nurses in the British forces were officers but did not receive officers' pay. Army officials decided that conditions at Camp I (the designation for the area of the camp where the dead bodies were found and a typhus epidemic was raging) were so awful that women were not permitted entry. All of the rescue personnel who entered Camp I concur that the situation remains a nightmarish memory.

Reilly (1998) maintains that the decision was a reflection of the prevailing paternalistic attitude of the time, to protect women from the horrors of Camp I. Strongest in British society, this attitude seemed to be directly linked to the social class that produced officers. Nevertheless, Reilly concludes that most of the women were probably grateful not to have to work in Camp I (Reilly 1998). Despite her conclusion, a paradox has emerged. Shortly after the liberation, a team of British Red Cross workers led by Sisters Silver-Jones and Beardwell arrived in the camp. They were horrified by the conditions, yet the male medical students who were already working in the camp, resented their horror, since the nurses had not seen Camp I.

It is likely that most of the women did not enter Camp I and it is doubtful if it can be ascertained exactly how many nurses may have entered Camp I due to conflicting findings. British nurse Muriel Blackman's pass to enter Camp I is dated 1 May 1945, indicating that entry was possible (Blackman 2000). Lyn Brown, another British nurse who was part of the team from St. John's Ambulance, took a number of photographs including the burning of the camp (Brown undated) however it can be assumed that for the most part, women did not enter Camp I. Dr Vella's recollections note that initially there were thirty-three nurses in Camp I and fifty in Camp II on

17 April 1945, two days post-liberation (Vella 1984). This suggests nurses were within Camp I however a precise figure cannot be confirmed.

The resentment of the male medical students however underscores the paradoxical attitude highlighted by Reilly. On the one hand, the male officers felt obliged to 'protect' the women from the horror of the camp, while the male students resented the protection given to them.

In her ensuing discussion, Reilly concludes that in post liberation Belsen, women's roles were primarily as cleaners, carers and dance partners. While it is apparent that a considerable amount of sanitation was required in the camp, both men and women would have been required to take part in these activities. It appears that the role of carer is not well understood in this analysis. The classification of caring with other activities that carry little value, denigrates the importance of care. This may be due to a failure to understand that care and caring practices, rather than curing, are the heart and soul of nursing and it is these behaviours and practices that are valued by recipients of care.

As a historian, Reilly and others share a common characteristic with nurses. Anne-Marie Rafferty (2005) points out that both historians and nurses enter into an intimate space of the 'other' in an attempt to better understand his or her world. While historians use evidence from the past through archival material and interviews, nurses protect and defend a patient with whom they are engaged in an intimate way. Thus each brings to light an understanding of the past through different professional guidelines and codes of practice, both of which combine to provide a broad picture of events at Bergen-Belsen.

Immediate medical needs of the survivors: early days post liberation

Eyewitness accounts agree that approximately 60,000 people were found at liberation, 30,000 of whom had arrived within the previous week. Prior to liberation, it is estimated that 37,000 people died at Bergen-Belsen. Camp I contained 45,000 people who were barely alive together with 10,000 unburied

bodies. The 15,000 people found in Camp II were in better condition, although they were starving and suffering from dysentery (National Army Museum 2006). Typhus, tuberculosis, and other infectious diseases were so rampant that 23,000 of the 28,000 women and 9,000 of the 12,000 men in the camp required immediate hospitalisation (Reilly 1998). So severe was their condition that despite efforts, many died and many of the doctors and nurses contracted illness from their patients. Hygiene was appalling and inmates had received so little food that evidence of cannibalism was noted at the initial liberation (Lavsky 2002). Aid was desperately needed and accepted from all sources.

Medical Students

The medical students who were drafted into working in the camp found it difficult to identify the inmates as human beings; it was beyond their scope of understanding. Dr Eric Trimmer recalled that as a final year student at Westminster Hospital Medical School, he saw a notice that students were needed to treat starvation cases in Holland. He learned after volunteering that he would be sent to Bergen-Belsen. No briefing was provided and Dr Trimmer described his emotions of fear, loathing and compassion at his first sight of the newly liberated prisoners. So shocked was he at the condition of the prisoners that he was incapable of any concerted action, working more by instinct (Trimmer 1984).

Andrew Matthews, a medical student from St Mary's Hospital in London, also volunteered. Unlike Dr Trimmer, he knew he would be sent to Bergen-Belsen but felt completely unprepared. He described his reactions as alternating between inadequacy and despair (Matthews 1991). With little to no preparation for work in a concentration camp, it is not surprising that few could come to terms with the victims as human beings. To the students, they were "a herd of animals" (Reilly 1998 p.41). One can speculate that perhaps if there the medical students had been prepared for their work at Bergen-Belsen, their attitudes may have been different. The de-personalisation is often apparent in the medical literature; survivors' conditions are described as

interesting case studies, such as in Vella (1984) and Collins and MacClancy (1946). Conversely, many survivors have expressed the opinion that nothing could prepare anyone for the sights and smells that existed at Bergen-Belsen.

Considerable literature has been devoted to the horrific conditions by a number of authors including Reilly (1998) and Lavsky (2002), supported by eyewitness reports from the British Army, medical units and survivors. All reports mention nurses who were involved in rescue efforts in the initial days.

Nurses: the contribution of British and Commonwealth nations

The nurses who were involved during the liberation period were British or came from British Commonwealth countries and represented a variety of organisations, including from the Queen Alexandra's Imperial Military Nursing Service and the British Red Cross. Other personnel were contributed by the Friends Relief Society. Particular mention has been made of Sisters Silver-Jones and Beardwell of the British Red Cross who cared for the first 600 patients transferred to the hospital. Despite Reilly's claim that nurses were little more than cleaners, Vella (1984) a medical doctor, observed that the nurses were in close contact with the survivors and that their willingness and initiative merited the highest praise. The considerable skill and attitude of the nurses was instrumental to the mental and physical recovery of their patients.

Lyn Brown was one of the first nursing personnel to enter Belsen. Her recollections as published in The Helensburgh Advertiser United Kingdom and reprinted on 29 April 1966 stated that:

What she saw there made her change her mind about not being able to hate anyone. Despite all the atrocities revealed in the press so far she thinks they have not been emphasised strongly enough (Brown 1966).

Lyn Brown described in detail 'the human laundry' where survivors were initially washed and disinfected against the prevailing infectious diseases and epidemics of lice and vermin. The work was gruesome

and could be referred to as 'horror nursing' ..."no one could have visualised anything like Belsen" (Brown 1966).

Brown took a number of photographs which are held by the St. John's Ambulance. Among them are: scenes of the dead and dying outside huts; 'the human laundry'; survivors searching the debris for food; and the burning of the camp (Brown undated).

Local nurses were also drafted into providing immediate aid at the camp. Included among them were some of the inmates who were capable of providing assistance.

The most comprehensive and only work written from a nurse's perspective rather than a historian's are the letters and diary of Muriel Knox Doherty. Doherty was an Australian nurse who kept copious notes on her experiences. Supplementing her account are letters written by nurses while on duty at Bergen-Belsen that are held by several archives in the United Kingdom.

Nurses were in the hospital area from the early days, caring for their patients under difficult conditions, each in charge of a large number of patients with 500 a day being transferred into their care. The difficulties were enormous; eighty per cent of the patients suffered diarrhoea with only two bedpans per block. Food fights broke out at meal times; hoarding was universal and deaths numerous with several dead found in each bed every day. The nurses approached their tasks with skill and cheerfulness and refused to be disgusted by the sights and smells facing them. Their ability to rise to the challenge is now acknowledged as a factor in the recovery of the patients, as evidenced by multiple letters exchanged between nurses and their patients after the war, several of which are duplicated in a subsequent section of this paper.

Foreign personnel

The acute shortage of medical and nursing staff necessitated the use of 200 local nurses. The decision had a negative effect on the psychological wellbeing of both survivors and other staff. Most of the inmates were terrified of the German nurses. Dr Hadassah

(Bimko) Rosensaft, an inmate doctor who had been caring for her fellow inmates before liberation and continued doing so afterward, remarked on this situation.

We were obliged to take in German military doctors and nurses. They were in Wehrmacht uniforms, not SS, but the psychological effect was bad enough on me - imagine what it was like on the severely ill. I remember saying to Colonel Johnston: "Johnny, I just can't take these people" (Reilly 1998 p.46).

In the initial days, Reilly noted that the German nurses were professional, motivated and helped break down language barriers, in particular explaining German drugs (Reilly 1998). Doherty however, as chief matron, had a different view. When Doherty assessed the bedside nursing of the German nurses she considered it to be a very poor standard and considered that the nurses were of little help in providing care for the newly liberated patients (Doherty 2000).

Despite the enormous difficulties, the British nurses under her direction implicitly understood the dehumanisation that their patients had undergone. The nurses and other medical staff endeavoured to deliver care with dignity and respect for the survivors. The following recollections from British nurses help form a picture of their work at the camp.

Nursing recollections

Terence McQuillin

Terence McQuillin was serving with the 67th British General Hospital in April 1945 when he was selected for a month's duty at Belsen. Told that he would be given "exceptional opportunities to alleviate suffering" his unit was assigned to the Swedish International Hospital Rehabilitation Unit to examine, process and clean prisoners to be sent to Sweden for rehabilitation. McQuillin noted that as staff were to be dressed in clothing similar to that worn by the Germans, it was imperative they wear the insignia of medical assistance on their caps.

McQuillin noted: "I have never been so proud or affected before or since as being instantly accepted as a trusted friend from the recognition of our cap badge" (McQuillan 1995).

... the sheer number of patients requiring attention, many were totally emaciated; the techniques of handling and caring for them compounded with language difficulty and other unique problems had no precedence and guidance was not available. We and our charges had to learn by our mistakes and this must have caused or hastened loss of lives (McOuillan 1995).

There were special problems ... with the real risk of hysteria when they could hear the showers operating behind canvas walls; their German guards had previously warned them that they would be killed in acid showers (McQuillan 1995).

McQuillin's most vivid memories concerned the first woman he had been asked to dry after disinfection.

I was horrified to see and sense that her flesh was parting from her sternum on to the towel. I yelled, the Swedish doctor was nearby and together we finished drying her and applied a wound dressing and encased her in a warmed blanket. I was told that she died later. Other patients died on us either in relief at being genuinely medicated for recovery or as a continuing effect of earlier deprivations, but none affected me as much as the trauma of ignorantly applying inadequate experience on the first patients (McQuillan 1995).

As a result of his work at Bergen-Belsen, McQuillin developed infective hepatitis and was airlifted back to the UK ending his service.

Joan Rudman

Sister Joan Rudman wrote home that the size of the camp was enormous, 25 square miles. She also described the terrible conditions of the patients, referring to them as mostly being Jewish or political prisoners. She was appalled at 'the human laundry':

...in which naked patients were taken to a room, scrubbed on tables, hair shorn if necessary, and deloused due to typhus. The German nurses were put to work at this task. These poor things have been so humiliated the last few years, they thought nothing of this. Once the process is completed, they

are taken to the hospital and placed into the care of the nurses and doctors again (Rudman 1995).

Several of the nurses make particular mention of the German personnel used in the rescue efforts and the problems that resulted from the attempt to incorporate them into the overall relief efforts. It appears their practical aid may have been overshadowed by the problems created which supports Doherty's assessment. Among the most significant of the issues related to the use of German personnel was poor professional education and preparation. This was further compounded by the patients' fear of these nurses which led to a climate of animosity that existed between patients and the German staff.

Sister Rudman's most difficult task was feeding her patients. This was tremendously challenging as diets had to be carefully monitored. Patients demanded more food than they could be safely given and subsequently many were found scrounging near garbage bins. These scenes profoundly upset Sister Rudman. Equally distressing, was the condition of the children.

The children's ward would break your heart, tiny little scraps in a bed with two big eyes starving out of a sunken face and little babies just like birds. I want to cry every time I go near the place to think that innocent little children should have suffered so much (Rudman 1995).

Muriel Blackman

Sister Muriel Blackman kept a pocket diary of her time at Bergen-Belsen. She arrived on April 22 and began duty following morning.

Her diary entry for 27 April 1945 states:

In afternoon Polish nurse refused food to Hungarian patient and when complaint made, slapped patient's face. Arranged for removal of Polish nurse from those rooms ..."The cry of 'you are an angel' makes one proud to be British and points out responsibility we have as a nation (Blackman 1945).

Sister Blackman noted in her diary that she went to Camp I on May 18, however she had a pass to

enter Camp I from May 1, a copy of which is held at the Imperial War Museum. The importance of her nursing care to the survivors is demonstrated by the postcards sent to her more than a year later. For example:

(undated note) Dear Miss Muriel

I am going tomorrow to Sweden. I didn't expect that it will happen so quickly and though I have not time enough to shake hands with you.

I have not enough words in English to tell you what I wanted you to say but in any case I must tell you, that I am really very glad that I have met you. You helped me in so many things and have thanks for all you did for me. I am sure you are one of these few people who really understood me and had commpossion (sic) with me. I hope to see you certainly in England as soon as possible.

(June 25, 1945) Dear Miss Muriel

I thank you very, very much for your kindness and all your help during the first difficult time. I owe you a great deal, I was depending you during my illness, do you know that? Always waiting for you to pop in and say good-day to us (Blackman 2000).

Lyn Brown

Lyn Brown was in Belgium at the time of the liberation and was sent immediately to Bergen-Belsen. She was one of the first to enter the camp and cared for survivors until the camp was burned (Brown undated).

Lyn Brown penned a thinly disguised autobiographical account titled: Belle's life that was found in her file (Brown 1966). In it, she describes Belle's entry into Bergen-Belsen. Among the incidents she recalls being so busy with one's own work that one could scarcely be concerned with what happened elsewhere or to go 'sightseeing' although she was filmed (perhaps for newsreels at this time) on 30 May 1945 showing some of the cases to a German nurse. She believed this film was also to be shown to the German public.

Belle was back at the first anniversary of the liberation and describes the huge mounds of grass around mass graves and the memorials that had subsequently been placed by various groups. Brown supplemented this with her photographs as a way of ensuring both a written and visual record of all she had witnessed (Brown 1966).

Phyllis Jason Smith

Phyllis Jason Smith was the only nurse that was located to give direct testimony to the work of nurses at Bergen-Belsen. She recollected that the camp had a population the size of Wellington, New Zealand where she lives. It was so big that she only saw a relatively small section of it at a time. She recalled that nurses were not allowed into the area where the killings had taken place. In her view, the nurses really did not deliver nursing as such due to the overwhelming numbers of people involved, but spent the majority of their time sorting and processing people and trying to give them a feeling of hope that they were going to receive care.

Despite the references in the literature to concerns about women being exposed to the horrors of Bergen-Belsen, Jason Smith believes that the military nurses were as prepared as possible for the conditions in the camp, if anything could prepare human beings for the sights that awaited them. Jason Smith said:

...being in the field hospital from Normandy through France and Belgium and Germany gave me gradual exposure to what for a civilian dropped into the situation would, I think, have been mentally unsustainable; by the time I was sent into Belsen it was something that we needed to do and got on with the job (Jason Smith 2003).

Jason Smith's explanation may account for the difference in attitude of the experienced nurses compared to the unprepared medical students.

Expressions of thanks, celebrating life

Expressions of gratitude for nursing care were given to a number of the nurses by their patients. Doherty received a wreath of dried flowers and several handmade dolls. One of the dolls is dressed in the prisoner uniform and was donated by Doherty to The Great Synagogue in Sydney and recently exhibited at the Sydney Jewish Museum.

Tokens of gratitude to the nurses are housed by the British Red Cross, which possesses a collection of five dolls, all made by survivors. Two of the dolls are dressed in the blue and white prison stripe uniform of concentration camp prisoners, two are in folklore costumes and one is a kangaroo with a joey in its pouch.

Eva Kahn-Minden worked in the maternity section of Bergen-Belsen and was given a locket by one of the mothers under her care. She was given the gift because, in the words of the mother:

You have listened to me when I unburdened myself for the first time about the worst period of my life. Since that talk I feel free and am now happy to be going home with my baby (Kahn-Minden 1991 p.11.)

In December 1945, when Doherty was preparing to leave Belsen she wrote:

I shall be very sorry to leave Belsen and all my contacts here as it has been the greatest experience of my life, and with all the trials and tribulations I have loved every moment of it. In undertaking this relief work of helping others to help themselves we knew no assignment would be permanent, so that I feel, having done my best for Belsen (Doherty 2000 p.203-204).

Nurses joined their patients in learning to celebrate life and life events that for so many years had been impossible or forbidden. In joining in these significant life events, the nurses assisted in their re-integration into the normal rhythms of life that had been lost to them for so many years. Such events included births, *brit milah* (Jewish ritual circumcision), and weddings.

Doherty was invited to become godmother to a number of babies born in the camp. She observed that the life events so important to human society, such as weddings and *brit milah* continued almost daily in and around the hospital and estimated that there may have been 500 pregnant women in the camp although it was hard to tell due to the protruding belly associated with severe starvation.

Lifelong implications

Phyllis Jason Smith claims that she deliberately attempted not to remember what she had experienced and remarked that after nearly 60 years; it had become a self fulfilling prophecy, since she refused to recall some of the events. But when asked how the experience had influenced her she remembered that the few survivors who were able to communicate talked about how there had been a knock on the door and they never saw their families or home again; everything was taken from them. It emphasised to her that anyone can lose everything in an instant and that family, home, food, clothing and education are very important (Jason Smith 2003). She also supports the importance of education, the goal of many survivors today, to ensure that such events never happen again.

Jason Smith feels in hindsight that she coped with conditions at Bergen-Belsen for a number of reasons, the most important being that she had recently met the man who was to become her husband and fallen in love. Her future husband was posted within driving distance of the camp and that relationship sustained her enormously. It created a balance and she considers herself incredibly lucky to have had that source of hope and optimism. She also considers that years of experience as an army nurse in battlefield conditions was instrumental, having been exposed to difficult situations where flexibility and a positive attitude were essential.

Jason Smith's experiences had lifelong implications as well. She and her husband made a conscious decision to leave Britain and live in New Zealand to leave it all behind. In this, she was no different from many survivors who wanted to put Europe physically far away. Starting a new life in New Zealand helped her put the experiences behind her because she felt she could never describe to people what it had been like.

Doherty wrote in hindsight that her appointment as Matron of Belsen Hospital "proved to be the most worthwhile job of my life" (Doherty 2000 p.203). Most important in her view was that she had helped people to help themselves, a powerful testament to the importance of a caring relationship.

CONCLUSION

Historical events can provide contemporary nurses with a contextual perspective and assist in the development of nursing practice, not only in how nurses respond in catastrophic situations, but in a broader social context - the danger of marginalising any group of people as 'different'. While the work of the nurses and the importance of their care have not been fully explored in most historical studies of Bergen-Belsen, it is clear that the experience of nursing in the camp was profound for them and that their experiences and attitudes are an inspiration to contemporary nurses. The reciprocal nature of the caring relationship indicates it was equally so for patients who received not only the gift of life in a physical sense due to all the relief efforts, but importantly, a sense of humanity that had been negated for so many years.

There is scope for further research and it is highly likely that military and regimental archives in the United Kingdom may shed further light on the previously ignored contribution of nursing to people desperately in need of care.

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