

Revising a Thesis Statement through Writing

Crafting the Nightingale narratives

The opening narrative episode is in two parts, both about Florence Nightingale. It begins at the Establishment for Gentlewomen during Illness on Upper Harley Street. I settled on a meeting with Mrs. Clarke, the establishment's Matron, for this imaginative scenario. No written evidence documents such a happening on this day. But it seems historically probable that these two women would have met at some point to discuss how the establishment should function while Nightingale put in some time at the Middlesex Hospital.

The tone of the narrative reflects my sense that there was nothing untoward or underhanded in Nightingale's decision to double her superintendence responsibilities (as Smith, 16, suggests there was). Although two rooms at the establishment were set aside for her, she was under no contractual obligation to live there, or even be on premises every day. The establishment's general council as well as the Ladies' Committee, with whom she communicated directly, knew that she had a refuge in St. James Square, Pall Mall, and used it regularly; she shared the rent

with an aunt who lived outside London but used the rooms when she came to the city (Bostridge 2008, 193).

Nightingale was superintendent from late April 1853 until mid-October 1854, although she did not take up residence in London until the establishment, formerly at 8 Chandos Street, formally moved to 1 Upper Harley Street in early August 1853. She wanted to select her own matron; the committee agree on the condition that Nightingale paid the matron's salary. She chose Mrs. Clarke and gave her responsibility for daily domestic matters, maintaining housekeeping accounts, and control of the petty cash account (the following letters in Goldie 1983: FN to Lady Canning, 29/4/53; Add.MSS.45796.f.17, 3_681, 29/4/53). Mrs. Clarke worked tirelessly beside her boss at first but apparently became less reliable thereafter (Bostridge 2008, 194); she seems to have become homesick. Nightingale wrote her mother at the end of July 1854 that Mrs. Clarke wanted to leave the establishment and return to Sheffield after completing their joint contractual obligation of serving twelve months at Upper Harley Street (Goldie, 3_789 26/7/54).

Three nurses, one for each floor, handled routine care of between a dozen and a score of temporarily invalided patients. Stays were supposedly limited to two months, but they could be extended at the discretion of the Ladies' Committee, and often were. Two medical men gave gratis service to the establishment: Mr. William Bow-

Revising a Thesis Statement through Writing

man, assistant-surgeon at King's College Hospital with a residence in Golden Square; and Dr. Henry Bence Jones, physician at St. George's Hospital with a residence in Lower Grosvenor Street. Either medical man could be called in an emergency (Bostridge 2008, 194). I confirmed their affiliations by checking listings for "Metropolitan Hospitals & Medical Schools," *Lancet* (17 September 1853):265-66 and (16 September 1854):234-35, and I found their residences in the *London Medical Directory 1846*, 17, 85. If an emergency did occur at the establishment while Nightingale was at the Middlesex Hospital, she could have come at the end of a shift since less than a kilometer separated hospital from establishment.

Other details in the imagined scenario between Nightingale and Mrs. Clarke were taken from Bostridge 2008, 188-98; Vicinus & Nergaard 1990, 65-68; and FN to Lady Canning, which contains Nightingale's specifications for rehabilitating the private residence at Upper Harley Street into a bona fide care-taking establishment (Add.MSS.45796.f.39, in Goldie 1983, 3_690 6/1853).

Besides Mrs. Clarke, three nurses, a cook, a male servant, and at least one female servant assisted Nightingale at the establishment. Of these, only Mrs. Clarke and the male servant would have been involved in Nightingale's departure for the Middlesex Hospital. I thought the male servant deserved to be mentioned by his full name, but I did not have access to the establishment's archive. However, Bostridge (2008) quotes

from an 1853 letter in which Nightingale mentioned retaining "John, the Cook & Nurse Smith" from the Chandos Street staff (194), which I confirmed by consulting Goldie; FN to father and mother, (Add.MSS.45796.f.50, in Goldie 1983, 3_713 8/53). If this "John" had been employed at the establishment in March 1851 and present when the enumerator appeared at 8 Chandos Street, then his full name could be in the 1851 England Census.

I used the online Ancestry Library Edition via Michigan State University Libraries. If you are unfamiliar with this resource, here are the steps I took to navigate it to a successful outcome:

- On the home page, I selected U.K. Census Collection, then 1851 England Census.
- Since I did not know the surname, I had to find the particular enumerator's page containing 8 Chandos Street, which meant that I had to "Browse this collection."
- In the drop-down menu for county, I selected Middlesex.
- Next one must select a civil parish. The simplest way to narrow the list is to locate the address on a contemporary map. I consulted London Sheet 61 of the Ordnance Survey (Alan Godfrey, 1986); Chandos Street was in the parish of St. Marylebone, situated just north of Cavendish Square.
- The drop-down menu offered six possible sub-registration districts, one of which was Cavendish Square, which I selected.

Revising a Thesis Statement through Writing

("To Committee of the Institution," in Goldie 1983, 1854). She did not tell her bosses on the Ladies' Committee that she had already interviewed for the post of Matron/Nursing Superintendent at King's College Hospital (FN to her mother, in Goldie, 26/7/54). However, after completing her investigation of London hospitals early in the summer of 1854, she had informed selected individuals that she would consider leaving the institution for a post as superintendent of nursing at a major hospital willing to set up a training school under her administration.

But relations with King's staff during the interview process had turned dicey at best, nasty at worst. It occurred to me that Nightingale might have considered Middlesex Hospital an alternative if negotiations at King's fell through. Subbing as superintendent of a nursing ward at the Middlesex would have permitted hospital staff and prospective candidate alike many chances to assess each other prior to making any commitments. A win-win opportunity.

4. Revised thesis statement

Florence Nightingale had agreed to substitute as a head ward nurse at Middlesex Hospital in order to suss the set-up and staff there in the event that she decided not to pursue the proposed nursing superintendent position at King's College Hospital; shortly after she arrived, cholera broke out in St. James, Westminster, and she remained at the Middlesex, which admitted many

cholera patients, until after the local epidemic had peaked.

The revised thesis statement covers three elements: **what** I think happened, **when**, plus **how/why** it came about. I'll add a fourth, why I think the experience was significant for Nightingale, when unpacking her responses during the outbreak itself.

The second imagined scenario in the opening episode, where the Matron at Middlesex Hospital looks through a personnel folder, conveys information about Florence Nightingale from a contemporary's perspective. This approach seems preferable to third-person narration, which some readers could interpret as authoritative "objective history." Of course, the scenario is written by me, a commentator, distant in time and place, borrowing a technique used by the Swedish mystery writer, Stieg Larsson (2005). Early on, the reader receives information about the fictional journalist, Mikael Blomqvist, via a report prepared by another character, Lisbeth Salander (52-59). When Betty read the English translation, we discussed the book and she singled out this section (48-57) as a particularly interesting way to convey information.

At the time I had just begun drafting the episodes about Nightingale. I entered a square bracketed note [to differentiate between my views and the evidence] to consider informing the reader about Nightingale's background via something

Revising a Thesis Statement through Writing

being read by the Matron at Middlesex Hospital. At the time I was also experimenting with different ways to adapt James Wood's notion of "free indirect speech" to historical narratives (Wood 2008, 9; see my Historiographical Unpacking of the Prologue and Appendix D). During one writing session, I reviewed my notes about Nightingale's informal survey of nursing at metropolitan London hospitals during the spring of 1854. It suddenly occurred to me that an administrator such as the Matron of a major hospital would have expected a letter of reference before letting someone loose on the wards. My initial drafts of this scenario gave Sidney Herbert as the author of such a letter. For he and his wife, Liz, had been very interested in Nightingale's findings for several reasons, not the least being that as Secretary at War, Sidney Herbert was responsible for what treatment rendered to British troops (Bostridge 2008, 197). When I could not find documentary evidence that Sidney Herbert actually wrote something in her behalf, however, the absence of evidence required me to fabricate an anonymous letter of endorsement or drop the notion entirely. Since there is, in my view, sufficient historical probability that Nightingale would have presented such a letter, I decided that fabrication was justifiable as long as I did not attribute it to Herbert or any other person.

In the imagined letter of reference, information about Nightingale's superintendence of the Upper Harley Street institute is taken

from Bostridge (2008, 188-98), supplemented by Nightingale's letter of 5 June 1853 to Lady Canning (Vicinus and Nergaard 1990, 66-68). Additional background information came from Nightingale's letter to her father and mother, in which she says she's visited most hospitals in Paris (Goldie 1983, 3_691 6/1853; copy at the Wellcome Institute).

I did not have remote access to the archives of Middlesex Hospital that would have permitted me to locate the name of its Matron in August 1854. Instead I located the name of the Matron at the time of the 1851 English Census: county Middlesex>St. Marylebone parish>sub-registration district of All Souls>Middlesex Hospital>2 (H.O. 107, 1486, 2). Mary Jarrow is listed as Matron, and I decided to use her, even though I'm unsure if she was still matron when Nightingale was at the hospital. I did not find an entry for Mary Jarrow in the 1861 English census.

The narrative form:

The first sentence in the opening scenario — John would soon be knocking to say the cab was waiting — is not standard fare in historical narration. Normally, one would encounter a preliminary clause indicating who was doing the thinking. For example, if there existed verbatim documentary evidence of what transpired at a meeting on that day between Florence Nightingale and Mary Clarke, it's possible I could have employed direct, or quoted, speech such as — Flor-

Revising a Thesis Statement through Writing

ence Nightingale said, “John will soon be knocking to say the cab is waiting.” If the extant evidence was sufficiently detailed but short of verbatim, it would have been historiographically valid to use indirect speech reported by myself as author, based on that documented account (sometimes referred to as authorial style) — Florence Nightingale looked at the clock and thought, John will soon be knocking to say the cab was waiting. If the evidence was only suggestive on this point, I could have made the indirect speech conditional — Perhaps Nightingale glanced at the clock and wondered if John would soon be knocking. Each of these examples flags an author as the source of the speech: Nightingale in the first instance, myself as the author/narrator in the next two (see Appendix D for Wood’s explanation of these styles, which I have borrowed).

My first sentence, however, is free indirect speech or thought. It’s neither direct speech by Nightingale (there are no quotation marks) nor regular, unquoted, indirect speech where I would state who was doing the thinking either by name or pronoun. Instead, it is indirect style free of flags to the source. The reader is immediately transported into the mind of someone yet to be identified. My purpose in the opening scenario is to convey the gist of Nightingale’s persona as the administrator of a small nursing home who lacked practical hospital and nursing experience. So I left the superintendent nameless since the mere mention of Florence Nightingale might conjure up

“lady with the lamp” images from her later work at the British army hospital in the Crimea. The remainder of the opening paragraph is in authorial indirect style to indicate that the opening sentence is from a female’s perspective as she listens to the matron’s complaints.

I begin the second paragraph in authorial style to set up what the superintendent will say thereafter via free indirect speech:

After a few moments the Superintendent began speaking calmly to the Matron. Everything is sorted. . . .

The superintendent’s instructions are presented without recurring indicators of indirect speech such as “she said” or “she continued” because the opening sentence is sufficient to identify the speaker and clarity isn’t advanced by flagging myself as the author.

The rest of the opening scenario and most of the narrative in the second scenario where the Matron of Middlesex Hospital, Mary Jarrow, reviews Nightingale’s file is presented in third-person, indirect style reported by myself as author. I shift between such authorial indirect narration and free indirect thought to suggest Nightingale’s state of mind whilst Jarrow sits opposite her.

Both of the opening imaginary scenarios featuring Nightingale are historiographical extensions of documented primary evidence confirmed in my review of the literature. The evidence decides. Follow it carefully, explicate it transparently,

Revising a Thesis Statement through Writing

and you have the makings of historical interpretation. Get ahead of it and you have the makings, at best, of historical fiction. Once Smith (1982) challenged Mrs. Gaskell's account of Nightingale's doings at Middlesex Hospital, subsequent historians are encumbered to justify using it. Bostridge (2008) found confirmation in an unpublished memoir by Parthenope Nightingale, which was unavailable to me. Stewart's report (1854a) contains details about happenings at the Middlesex Hospital during the cholera outbreak that are similar to what Mrs. Gaskell wrote she had heard from Florence Nightingale for me to believe she was definitely on one of the hospital's wards early on 1 September 1854, which made it reasonable for me to portray her as arriving the day before, as Mrs. Gaskell also stated. I then simply followed that evidence to reasonable conclusions about what had probably happened in the run-up to her first day at Middlesex Hospital. Everything in the two narrative scenarios I constructed is taken from documented evidence which could also be presented as indirect authorial style alone, without narration.

Additional documentation

Sometime in 1853-54, Nightingale sat for a photographic portrait by Kilburn of Regent Street (Bostridge 2008, xii, plate 21). I scanned a copy of Bostridge's illustration (at right) and used Photoshop to crop the portrait, eliminate the shadow



under her mouth, and simplify the woodwork of the chair for the setting — a hospital matron's office.

The map insert showing the corner of Upper Harley and Weymouth Streets comes from *Reynold's Map of Modern London* (1859), uploaded by Ralph Frerichs to the web site he created and manages (<<http://www.ph.ucla.edu/epi/snow/1859map/map1859.html>>). Part A shows the area lying between the northeastern end of Hyde Park and the southern part of Regent's Park; I selected Rows G-I, Columns 10-12 for the insert. Marylebone Road is the major thoroughfare just south of Regent's Park. Although this map was created after the date of the narrative, it precedes the unification of Upper and Lower Harley Street into Harley Street in 1866. The Upper Harley Street one finds today is Brunswick Place on Reynold's map.

The new premises for the Establishment for Gentlewomen during Illness was a three-story house, plus attic and basement, at 1 Upper Harley Street; a stable was in the rear. Today, this property is numbered 90 Harley Street (Bostridge 2008, 191).