**Title: How the late Ottoman Empire’s wars shaped modern nursing in Turkey**

**Abstract**

War had a dramatic impact on the nursing profession and gender issues in the Ottoman Empire. Until the Balkan Wars, men provided nursing in the public arena inTurkey, while wives and mothers did so in intimate circles like the family. This study examines from a new angle the unique way in which Turkish military nursing emerged from a traditional society. It focuses on nurses’ function during wartime and how this significantly shaped the development of modern nursing in the Turkish Republic. It also examines Besim Ömer Paşa’s efforts to foster its development and the gender perception change needed toward women in the nursing labor force. The study draws on archives sources of the Turkish Red Crescent, History of Military Medicine Museum, and the Gülhane Faculty of Medicine, Health Sciences University in Ankara, as well as other material on military nursing in the late Ottoman period.

Keywords: military nursing, Ottoman Empire, Red Crescent, war, Turkish nursing

**Introduction**

The emergence of modern nursing in Turkey is rooted in the Ottoman Empire’s Balkan Wars of 1912–13 when female nurses were recruited for the first time to care for wounded soldiers on the frontlines.[[1]](#endnote-1)

Why did Turkish women become nurses of the wounded only in the late Ottoman Empire wars? At the end of the sixteenth century, Sunullah Efendi, the religious leader of the Empire, proclaimed that women had no role to play in governmental and sovereignty issues.[[2]](#endnote-2) This attitude toward women’s public activities continued nearly until the Turkish Republic’s foundation in 1922. Ottoman society strictly controlled relationships between the genders in a way that meant men controlled the public arena while women’s activities mainly lay in the private sphere.[[3]](#endnote-3) This view is controversial among scholars, with some arguing that women mainly from the lower socio-economic strata were more visible in public as traders and shoppers than high society women, who were hidden from the public eye. Nevertheless, Ottoman Turkish women were part of an Islamic society with traditional characteristics of polygamous, extended families, patriarchal relations, and gender segregation.[[4]](#endnote-4)

The education system between 1898–1924 was a gender-conservative institution with regard to girls’ education, in which they learned modern approaches to traditional tasks from home economics textbooks. In this way, women enhanced their traditional gender roles in education for the private sphere.[[5]](#endnote-5) Şemseddîn Samî (1850–1904), a reformist writer and women’s rights activist in the Ottoman Empire, published his ideas on gender inequality and advocated the integrating of women into public life, spreading his views about women’s contributions to Islamic and Western societies through his pioneering books and most remarkable Ottoman encyclopedia. He argued that Muslim women’s intelligence, intuition, and sharpness of mind might be considered superior to that of males.[[6]](#endnote-6) Foreign institutions, like the American Missionary College, also acted as agents for change, influencing public opinion, raising awareness about feminism, and advocating women’s empowerment.[[7]](#endnote-7) Women slowly and gradually began to enter the labor force as midwives from 1845 and as teachers from 1873.[[8]](#endnote-8) Gender issues became a key focus for debate about the cultural change in late Ottoman society. The introduction of legal, bureaucratic, and educational reforms had a positive impact on women’s status. Women’s education was enhanced when they were first allowed to enter universities in 1914.[[9]](#endnote-9) The emergence of women’s organizations, journals, and other publications focusing on women’s issues between 1908–14 encouraged women to become activists and advocates for social change.[[10]](#endnote-10) Despite these seminal changes on gender issues, the debate on the traditional role of women in reproduction as mothers and wives continued to interest the Western world into the 1970s and Turkey into the 1980s with the emergence of feminist organizations.[[11]](#endnote-11)

**Military health services in the Ottoman Empire**

The emergence of Ottoman military medicine dates back to 1447, when the Janissaries – elite Ottoman infantry units – trained certain soldiers to surgically aid the wounded. However, military physicians had entered the army earlier during the Çelebi Sultan Mehmed’s time (r. 1413–21).[[12]](#endnote-12) In those days, military physicians primarily based their treatment of soldiers’ injuries and illnesses on herbal medicine and phlebotomy.[[13]](#endnote-13)

Military medical knowledge, especially in relation to surgery, such as the removal of arrows from the body, was influenced by the illustrated books of Abu al-Qasim Khalaf ibn ʿAbbas al-Zahrawi, a renowned Muslim-Arab physician who lived until the early eleventh century in what is now Spain. Şerefeddin Ali. b. al-Haj Ilyas Sabuncuoğlu wrote a surgical textbook inspired by al-Zahrawi in Ottoman-Turkish, which was used by the army during Sultan Mehmed II’s reign between 1451 and 1481.[[14]](#endnote-14) Moreover, Jewish physicians exiled from Europe to the Ottoman Empire between the fourteenth and seventeenth centuries contributed to the Empire’s exposure to Western medical literature and techniques.[[15]](#endnote-15)

Despite this, military medicine was less than popular in the Ottoman medical community, as is reflected in the paucity of publications on the subject. Military medical training itself was not instigated in Istanbul until 1768.[[16]](#endnote-16) Until the nineteenth century, the Ottoman army did not have a permanent medical unit. Male physicians, surgeons, medical assistants, and other such personnel belonged to the Sultan’s palace medical corps and were only joined by the combat force equivalents during military campaigns.[[17]](#endnote-17) The lack of an organized military medical corps in the Ottoman army and a general shortage of health personnel meant poor medical outcomes for those treated.[[18]](#endnote-18) The Crimean War (1853–56) between the Ottoman and Russian Empires exposed the former’s medical support deficiencies, lack of staff clinical experience, and outdated medical knowledge about pre-surgical antiseptic techniques and the use of painkillers like morphine in the field. Moreover, Ottoman medical personnel did maintain proper medical case records. This limited the army’s abilities to monitor the nature of the injuries and the causes of soldiers’ deaths and produced informative statistics.[[19]](#endnote-19) As a result of these organizational, medical, and sanitary failures, a quarter of Ottoman military forces died from infectious diseases like typhoid and cholera, as well as starvation due to poor food supplies.[[20]](#endnote-20)

A similar story was documented during the 1877–78 Ottoman-Russia War. For each single soldier dying from firearm wounds, 17 soldiers died from disease.[[21]](#endnote-21) The shortage of qualified military medical personnel continued throughout the nineteenth century. The fact that medical education was not conducted in Ottoman Turkish barely affected the finding of appropriate student candidates.[[22]](#endnote-22) To be able to place two physicians and pharmacists in each regiment, the army had to recruit a high-salary medical contractors from places outside of the Empire, like Hungary, Austria, and Britain.[[23]](#endnote-23) Each one of these was sent to one of the 85 military hospitals established between 1785 and 1884 across the Empire.[[24]](#endnote-24) Although these hospitals were established, the army suffered vast numbers of soldier fatalities and casualties in the Ottoman-Russia War due to the lack of a proper network of medical organizations and a shortage of medical workers.[[25]](#endnote-25)

The shortage of physicians and other healthcare providers was also manifest in the 1911–12 Ottoman-Italian War fought in Libya. Given a lack of medical equipment, the Ottoman War Office’s Health Department decided to obtain help from the Ottoman Red Crescent, which sent a medical team, including 15 female nurses, to the battlefield.[[26]](#endnote-26) This organization, the equivalent of the Red Cross in its aims of caring for wounded and disabled soldiers, was founded in 1868, though it obtained international recognition only in 1912, and played a significant role in military medicine during times when the Ottoman Empire was at war.[[27]](#endnote-27)

The problem of a lack of medical organization and inexperienced medical servicemen was further observable in the 1912–13 Balkan Wars. The army had only rudimentary wound-dressing equipment and many field hospitals fell into enemy hands. This led to dire consequences, with many injured and sick soldiers left to lie on roadsides or in open carts with dirty clothing, and their wounds infested with shrapnel.[[28]](#endnote-28) The mortality rates of wounded and ill soldiers among those who managed to arrive at military hospitals were 6.8 percent and 7.3 percent respectively. The shortage of nurses was met through the urgent training of high school students for the task.[[29]](#endnote-29)

The Ottoman Military Health Services organization in World War I (WWI) was enhanced by recruiting physicians and medical staff, including civilian physicians, pharmacists, and dentists aged 20–45 and embedding them in each regiment alongside the establishment of additional mobile and permanent hospitals. Communication between medical staff on the frontline and those in the home front evacuation stations improved and medical records for statistical use were much improved.[[30]](#endnote-30) Those positive developments came about in the Ottoman Empire under the influence of very significant Western technological and administrative developments in engineering, military, and medical techniques.[[31]](#endnote-31)

**The shaping of military nursing in the Ottoman Empire**

Military nursing’s origins date back to the Crusades, when monks and priests provided nursing services alongside the fighting to pilgrims and the sick in the Holy Land and Jerusalem during the eleventh century.[[32]](#endnote-32) Although the Crusades saw pioneering work in military nursing, the most well-known and famous breakthrough contribution to nursing during wartime was that of Florence Nightingale very much later.

Nightingale, a British nurse, was sent with other 38 volunteer nurses to care for the British soldiers in Scutari (modern-day [Üsküdar](https://en.wikipedia.org/wiki/%C3%9Csk%C3%BCdar" \o "Üsküdar) in Istanbul) Military Hospital during the Crimean War. She significantly reduced soldier mortality rates by improving sanitary conditions, reorganizing health services, and efficiently managing medical statistics and records.[[33]](#endnote-33) Nightingale emphasized the need for organization in caring for the wounded on the battlefield. That same conclusion was drawn more negatively from the 1859 Battle of Solferino in Italy, when many casualties from both fighting sides faced shortages of medical care. As a result, an international organization, the Red Cross, was launched in 1864 in Switzerland, later spreading to a total of 165 nations.

The Red Cross aimed to give medical and nursing services to soldiers and civilians during wartime and disasters.[[34]](#endnote-34) The American Red Cross was also founded due to lessons derived from the professionally inadequate nursing services provided by otherwise enthusiastic women during the 1861–65 Civil War.[[35]](#endnote-35) This war was the first arena in American civilian or military life into which women entered to meet the demands for nursing, feeding, and tending of injuries. These nurses won army officers’ confidence, paving their way to working on the frontline.[[36]](#endnote-36)

The Ottoman Empire was open to the ideas emerging from the Red Cross and, after the establishment of the 1864 first Geneva Convention, an international agreement which regulated, among other things, care for the wounded in warzones, signed up to the agreement in 1867, with Dr. Abdullah Bey chosen as its official Ottoman representative. Following this, Red Cross aid was supplied to Ottoman soldiers wounded in the 1876–78 war against Serbia and Montenegro. The poor conditions these soldiers experienced and the inability of the Ottoman army to meet its nursing and medical care needs prompted the head of the Red Cross into seeking a solution.[[37]](#endnote-37)

On April 14, 1877, the Ottoman Red Crescent (*Kızılay*) was established and its branches spread across the Empire.[[38]](#endnote-38) This was the same year that the Ottomans went to war with the Russians, the first time two signatories to the Geneva Convention had done so. At this time, the Ottoman Red Crescent founded its first 27 permanent hospitals, with nine more mobile surgical hospitals also set up.[[39]](#endnote-39)

The American Red Cross supported its Ottoman counterpart by sending additional medical staff to care for wounded soldiers and refugees during the Balkan Wars and WWI.[[40]](#endnote-40) The Germans also helped the Ottomans to develop its military medicine and nursing capabilities. On December 30, 1898, the Germans inaugurated a military nurse training program at the Gülhane Seririyat Hospital in Istanbul.[[41]](#endnote-41) The Ottoman army relied on those graduate nurses and a few foreign volunteer ones to help the Ottoman wounded during wartime.[[42]](#endnote-42) Dr. Besim Ömer Paşa (Akalin; hereafter Besim Ömer), a physician and founder member of the Ottoman Red Crescent, introduced systematic nursing training in Turkey in 1912,[[43]](#endnote-43) [[44]](#endnote-44) encouraging women to become nurses between 1913 and 1914 due to lessons learned from the shortage of them during the Balkan Wars. Three hundred of these graduates served as military nurses during WWI.[[45]](#endnote-45)

**Besim Ömer’s role in developing female nursing, despite his conservative views**

Besim Ömer is the undisputed foundational leading figure of nursing and midwifery in Turkey.[[46]](#endnote-46) [[47]](#endnote-47) [[48]](#endnote-48) [[49]](#endnote-49) [[50]](#endnote-50) He qualified as a military physician in 1885 and acquired expertise in obstetrics and gynecology in Paris in 1889. During his time abroad, he was impressed by French and British nurses’ care for patients and high standards toward and devotion to maintaining hospitals’ organizational integrity. The lack of professional personnel in Turkey with nursing knowledge during the 1897–1911 Ottoman Wars signaled to him that there had to be change in his own country.[[51]](#endnote-51)

His first step was to become the principal of a nursing and midwifery school in Kadirga, Istanbul in 1895, teaching women to become professional midwives.[[52]](#endnote-52) In 1912, Besim Ömer was appointed to the Ottoman Red Crescent Society’s vice-president. After traveling that year as a delegate to the ninth Red Cross conference in Washington DC, he returned home highly inspired by the advanced abilities and quality of the American and European Red Cross organizations’ healthcare. His key insight from that conference was about the need to immediately promote the establishment of nursing schools to train staff for military hospitals[[53]](#endnote-53) in the field, on hospital trains, and at sea via Red Crescent medical ships and vehicles.[[54]](#endnote-54) Due to his efforts, six-month nursing training programs began in 1913–14, with the graduate nurses sent to serve in military and civilian hospitals.

Besim Ömer himself taught the nursing fundamentals of preventive medicine, midwifery, and caring for wounded and ill soldiers. He believed nursing was a combination of art and science.[[55]](#endnote-55) One of his major achievements was outlining the basic principles of day-to-day military nursing work. His 1915 book *Hastabakıcılık* (“Nursing”) describes and defines in detail nurses’ clinical and managerial responsibilities.[[56]](#endnote-56) According to his approach, those who had good manners and had also acquired years of experience would become chief nurses in charge of hospital nurses and administration, including the responsibility for patients’ laundry and personal hygiene.[[57]](#endnote-57) Military nurses were charged with caring for the patient, including keeping bed areas clean, feeding, dressing wounds under physician’s supervision, supplying medicines, toileting and ablution, sterilization of surgical devices, and even writing and sending patients’ letters to their families.[[58]](#endnote-58)

Besim Ömer stated that the nurse: patient ratio was a key healthcare standard, advocating one of 1:10. The nurse is also responsible for preparing the patient and the ward before, during, and after the physician’s rounds,[[59]](#endnote-59) [[60]](#endnote-60) taking the doctor’s apron from him at the end and escorting him to the exit. She had to avoid expressions of sad or sorrowful emotions in front of patients so as not to lower their morale.[[61]](#endnote-61)

These professional guidelines defined and described the nurse’s roles for the first time. From them, we may observe a clear gender division in roles and the professional relations between female nurses and male physicians in the Ottoman army. Besim Ömer did not hide his views on gender or about women being exclusively fit for nursing: “In the past, a devoted and careful woman was thought to be enough to take good care of a patient; whether this woman was ignorant or stupid, this aspect was never taken into account. For this reason, every mother was considered the best nurse for her children.”[[62]](#endnote-62) He argued that feeling, compassion, mercy, patience, perseverance, gentleness, and fortitude were more manifest in women than men. Since women are mothers, they are naturally inclined to care for and comfort the weak and relieve their suffering. He claimed that their status as mothers elevated and glorified women in society and that maternal feelings make women more compassionate. His opinion was that this was why nurses should naturally be women and the nursing profession female.[[63]](#endnote-63) He argued that only female nurses were suitable to care for the war wounded, to provide relief, and to manage their pain with delicacy, meekness, and a high degree of patience and attention.[[64]](#endnote-64) His rigid attitudes on gender were consistent with his conservative assumptions derived from women’s reproductive responsibility for bearing many children, helping to build the new Turkish nation, and of deeming abortion a serious criminal act.[[65]](#endnote-65)

However, he did not only make conservative assumptions about female nurses. He saw beyond them to a degree and knew that nursing was a calling far beyond traditional patient care; he saw a nurse as having spiritual abilities to affect patients’ morals.[[66]](#endnote-66) He thought that by turning women into competent nurses, the whole nation would benefit: “Nursing is the most important and essential duty of the Red Cross and Red Crescent. The duty of the Red Cross and Red Crescent societies not only cover war and the difficulties created by war, but also its activities will cover the public health issues.”[[67]](#endnote-67)

Figure 1. Dr. Besim Ömer Paşa (Akalin) with nurses, Beyoğlu hospital, Istanbul, 1913. TK 93/24, Courtesy of the Turkish Red Crescent Archive

Besim Ömer understood the importance of nurturing nursing for building a healthier society. He emphasized the importance of nurses participating in international professional conferences[[68]](#endnote-68) and the fact that it was a matter of national pride to be a trained nurse.[[69]](#endnote-69) He was also determined to fight for nurses’ rights to fair wages and to not accept “national honor” as an alternative to that.[[70]](#endnote-70)

However ambiguous his attitudes were, he drew on them to successfully promote the integration of women as nurses into the Ottoman Turkish workforce. Integrating women as nurses in this way was more complicated than with other jobs, given that it was within a traditional society where intimate physical contact with and exposure to men’s bodies was considered a taboo for women. To implement his plans for nursing care and to bridge the gap between the Ottoman Empire to Western countries in this regard, he defined military nurses’ roles using conservative and traditional explanations and justifications of gender characteristics to minimize objections from physicians and Red Crescent colleagues and to persuade women to become nurses.[[71]](#endnote-71)

Besim Ömer’s efforts to recruit and train qualified military nurses bore fruit in WWI when nurses proved themselves as professionals and sacrificed themselves to save the soldiers’ lives.[[72]](#endnote-72) Dr. Yahub, a physician who served at the Red Crescent Cağaloğlu Hospital in Istanbul during WWI, described his military nurse colleagues’ devotion and contribution in this way:

It is enough to see a Turkish woman at the head of a wounded person once to be convinced that she has acted with great humility and self-sacrifice. She unsparingly dedicates all her loving feelings, all her soul, to palliate and calm the most violent pains of the wounded, by caring like a mother and instilling patriotic feelings. With her soft and sweet voice, she raises the moral strength of the poor soldiers who are badly injured and gives them the strength to endure their pain. Even the most gravely injured ones, as a result of the delighting inspirations of the ladies who care for them, surrender themselves to our surgical operation with a high resignation. Even at the time of the surgery, they await the comforting voices of their savior angels, and they seek and find the courage to look with disdain at the scalpel’s pain or the burning sensation of the surgical instruments in the eyes of the compassion nurses. The steadfast and brave Turkish lady, holding the hands of her soldier brothers, inspires him with confidence and, in particular, patience and endurance. After the dressing is over, the poor sick soldiers thank their beloved nurses with sweet and contented looks, the ones who make them forget the pain of their wounds with their expressive and sometimes the words which are full of sweet hopes for the country.[[73]](#endnote-73)

Nurses diligently cared for the daily treatment of over 350 injured soldiers at a time. During an eight-hour shift at any time around the clock, they provided a comprehensive treatment, dressed the wounds, stemmed bleeding, and even administered anesthesia for operations at peak times.[[74]](#endnote-74) Beyond the nurses’ contributions to clinical care, Yahub emphasized their national contribution to Ottoman society. He also used his paper to send a message to European colleagues underestimating the level of the Red Crescent’s nursing quality:

It should not be doubted that our women, thanks to their special disposition and inclination for every auspicious work, will achieve great progress in social life in a short time, and they will soon be able to set an example for those meticulous and proud European women. Turkish women, who have an innate high personality, the feeling of loyalty, and self-sacrifice, will be able to quickly overcome their European fellows. Thanks to her modesty, good morals, and obedience, the Turkish lady will take great steps toward civilization, and then we will say to Europe with full pride that the Turkish lady is not a useful household item as you think but an essential and valuable friend in private and social life.[[75]](#endnote-75)

The integration of female nurses proved its value in war zones. By the end of the Balkan Wars and WWI, nurses had become highly esteemed nationally and received the Red Crescent Society and the Sultan’s medals of honor for their contributions to the war effort.[[76]](#endnote-76)

Figure 2. Nursing training at Kadırga hospital, Istanbul (no date). TK 93/26, Courtesy of the Turkish Red Crescent Archive

***Ottoman military nursing and the foundation of modern Turkish nursing***

By the end of the Balkan Wars and especially after WWI, nursing had become a highly respectable profession for women. More women interested in nursing courses increasingly joined military institutions and signed up to serve in cities beyond Istanbul, like Bursa and Erzurum.[[77]](#endnote-77) Working together with men in clinical wards during the war gave nurses the opportunity as women to prove themselves as valuable workers who could initiate change and make decisions by themselves.[[78]](#endnote-78) By being successful in caring for the wounded on the battlefield, nurses broke through gender barriers and paved the way for themselves and other women to take up high education in many vocational fields.[[79]](#endnote-79) Among the nurses who became renowned for their contributions in this area were Munire İsmail, Kerime Salahur, and Safiye Hüseyin Elbi,[[80]](#endnote-81) the last of these quite remarkable.

Elbi, the daughter of Ahmet Paşa, an Ottoman naval officer delegate in England, was one of the first diploma-graduate nurses who volunteered to care for the wounded in the Balkan Wars, serving as a chief nurse on the Red Crescent’s hospital ship.[[81]](#endnote-82) She cared for the wounded of the Çanakkale battles during WWI, evacuated them to Istanbul, and helped assisted in surgery on the hospital ship.[[82]](#endnote-83) Elbi received her childhood education in Europe, something which broadened her educational horizons. She learned English and German and was devoted to education. In 1925, she opened a nursing school, taking on a significant role as a teacher there while also volunteering for various associations, including the Red Crescent Society and the National League for Fighting Tuberculosis. She was also one of the founders of the Women’s People Party, which fought for Turkish women’s rights. Given the nursing and managerial skills she demonstrated in her activities, she became a role model, encouraging women to integrate themselves into social life.[[83]](#endnote-84) Elbi was involved in congresses nationally and internationally that promoted the status of nursing and its role in advancing healthcare policy.[[84]](#endnote-85)

The emergence of the nursing profession in America and Europe began as a result of reforms in nursing education and improvements in the perception of the profession arising out of the Crimean and American Civil Wars.[[85]](#endnote-86) Nonetheless, nurses in America and Europe had an inferior status in their dealings with physicians and even patients. They had to defend their status, conduct themselves appropriately, and justify the value of their qualifications.[[86]](#endnote-87) Only at the beginning of the twentieth century did nursing begin to shape its own identity.[[87]](#endnote-88)

At the same time, modern nursing in Turkey was founded on the basis of Red Crescent military nursing in the late Ottoman Empire, which experienced a significant developmental leap in a short period time following its establishment after the Balkan Wars.[[88]](#endnote-89) As reflected in the literature, nurses in the Ottoman Red Crescent Society held positions of high esteem among their colleagues and were encouraged to increase their contributions to developing the traditional nursing procedures they were charged with, in contrast to the situation in nursing in America and Europe.[[89]](#endnote-90)

Upon the foundation of the Republic of Turkey in 1922, its first president, Mustafa Kemal Paşa (Atatürk), established equal legal rights for women and modern nursing schools were opened in the country.[[90]](#endnote-91) Over the years, the Turkish nursing profession developed even further. In 1954, a law regulating nursing as an occupation was enacted, which was revised in 2007. Ege University in Izmir inaugurated the first academic nursing program in 1955. Master’s and doctoral programs were also established between 1968 and 1972. Today’s nursing education includes specialized clinical disciplines and all training is given in universities and higher education colleges.[[91]](#endnote-92)

**Conclusion**

Nursing in the Ottoman Empire, emerging during the rise of feminist public discourse, also arose due to a shortage of qualified healthcare personnel during wartime. Exposing women to public activity had not hitherto been acceptable in Ottoman society. Integrating women into the nursing profession, which sometimes involves intimate male-female contact, was considered an idea with far-reaching social implications.

While armies had already had nurses escorting their combat forces in the Crimean and American Civil Wars, the integration of female nurses into the Ottoman Red Crescent’s awareness was gradual. Besim Ömer was the first to identify the benefits of nursing for military medical outcomes. As a physician and a senior Red Crescent member, he fought to integrate Turkish women nurses into the military. By defining this new role and creating the first educational body for nursing, he established the first infrastructure for the profession. At the same time, he justified it with stereotyped and gender-biased explanations to minimize resistance in a traditional society to women entering the labor market in such an area of intimacy. Military nursing was described by ascribing maternal and feminine epithets to it so as to glorify and idealize it, encouraging the public to identify warm domestic sentiments with its promotion. Yet nursing was also depicted as a profession that added value in both arts and science. Nursing as a highly organized and essential caring profession fostered national pride and respect. Military nursing during the late Ottoman wars proved itself through its superlative motivation and professional dedication to the sick and wounded. Although only a short time had passed since their first experience in the Balkan Wars, Ottoman Turkish nurses won great recognition and high appreciation, even setting an example to their experienced European and American colleagues. Military nurses, pre-eminently Safiye Hüseyin Elbi, were seen as leaders and role models for other women choosing to take up nursing and other disciplines after the collapse of the Ottoman Empire. The new Turkish Republic and itse gender equality laws endowed nursing with a greater legitimacy that was reflected in the inauguration of many nursing programs across the country.

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**Disclosure**

The author reports that there are no competing interests to declare.

**Biographical note**

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