

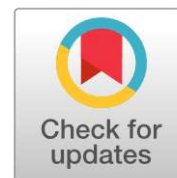
THE DUTIFUL DAUGHTERS OF THE BRITISH EMPIRE: PSYCHOSOCIAL TOPOLOGY OF THE BRITISH HOSPITAL IN SMYRNA

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Abstract

Scholarship on the accounts of the Western travellers about the Ottoman Empire focuses on some commonly known writers only, and *Ismeer, or Smyrna, and its British hospital in 1855, by a lady [M. Nicol]* remains neglected. It is a diary written by a lady-nurse, Martha Nicol, who worked in the British hospital in Smyrna, during the Crimean War. She is tightly bound in with the imperial ideology and by reconceptualising the space in the hospital, the lady-nurses help the British soldiers achieve a sense of continuity between their home back in England and the host culture about which they know very little. By playing a formative role to transpose this hospital to a homely space in a foreign territory, the lady-nurses function as psychic and cultural stabilisers. This essay aims to decipher how the hospital space functions as an ideological heterotopia of deviance, and how the lady-nurses contribute to its power to inspire the idea of “at-homeness” in the soldiers and retain the ideological structuring mechanisms in this distant location by exploring the textual evidence in the book. This essay will also explore how power and ideology are contextualised in the psychosocial topology of the hospital.

Keywords: topology, Smyrna, travel literature, Martha Nicol, heterotopia

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The scholarship on the accounts written by the Western travellers about their experiences in Turkey or the Ottoman Empire focuses on some commonly known writers only (like Frederick Burnaby, Alexander Kinglake, Lord Byron, Lady Mary W. Montagu, and Julia Pardoe) and the majority of these accounts still remain neglected. *Ismeer, or Smyrna, and its British hospital in 1855, by a lady [M. Nicol]* (1856)¹ is a good example illustrating the latter case. It is a diary written by a lady-nurse, Martha Nicol, who volunteered to work at a hospital in Smyrna in the Ottoman Empire, during the Crimean War. She starts her trip on March 3, 1855; arrives in Smyrna on March 28, 1855; and stays there until December 1, 1855. Scholarship on Nicol's *Ismeer* is rather thin. One of the possible reasons for this narrowness seems to originate from small-scale scope of its publisher. The text was published only once by a small London based publishing house, James Madden which, back then, was not considered to be having access to a wider audience. In addition, this text is the only published material by Nicol, who could not establish herself as a travel writer by writing other accounts of the East. In fact, the critics cannot fully agree on the identity of the writer and whether the text was really written by Martha Nicol: "though the authorship of *Ismeer* has yet to be confirmed, consensus is that it was written by a nurse, Martha Nicol" (Kocabıyık, 2023, p. 51).

One of the earlier secondary texts that mentions Nicol's memoir dates to 1856. This review can be accepted as the first informative writing on the conditions of the nurses and the British hospital in Smyrna and the anonymous writer of the review claims that Nicol's text "should at least be made acquainted with the name of 'A Lady'" (Review of *Ismeer, or Smyrna, and Its British Hospital in 1855, by a Lady*, 1856, p. 501).

¹This memoir *Ismeer, or Smyrna, and Its British Hospital in 1855 by a Lady*), which might also be accepted as a travel account, is thought to have been written by a nurse. However, in her own text or the other sources, one cannot find a clear proof that this account was written by Martha Nicol. In his study on medical history, Shepherd (1991, p. 432) points out that "one of the lady nurses published her recollections *anonymously* but the domestic details she gives are not very informative [in terms of the conditions of the hospital]". Philip Mansel (2010, 366) too reinforces the anonymity of the mentioned nurse in his research on the Levantines and the Ottoman lands, but in his research on Muslim women in Izmir he cites the above-mentioned account as Martha Nicol in his bibliographical notes. In her article "*Cumhuriyet Öncesi Dönemde İzmir Hastanelerinin Mekansal Gelişimi*" (Spatial Developments of Izmir Hospitals before Republic), Didem Akyol Altun (2014) relies on Martha Nicol's account as a proof of her historical analysis. Despite this acknowledgement of the anonymity of the memoir, there seems to be common agreement among the scholars to refer to the writer as Martha Nicol. In this essay, we will follow this consensus and take the narrator as Martha Nicol for the sake of textual coherence.

Among the other secondary sources that mention Martha Nicol's *Ismeer* is Anne Summers's doctoral dissertation, "Women as voluntary and professional military nurses in Great Britain. 1854-1914", which refers to Nicol while covering the English nurses not only in Eastern hospitals but also in other parts of the world. The central focus of this thesis is mostly on the sisterhood movement of the nurses back then.

Dimitrios Kassis (2018) also devotes an entire chapter to Nicol in his book on British women travellers; he underlines her role as a representative of the British Empire among the rival Christian nations in Izmir.

Our discussion of Nicol's text departs from the previous discussions as it attempts to decipher how the hospital space functions as an ideological heterotopia of deviance and explores how power and ideology are contextualised through her account of the psychosocial topology of the hospital rather than the text's relation to the wider social context of her time. Our discussion concerns itself basically with topological implications in the text and goes into other perspectives only as much as this topological discussion allows.

During the Crimean War, an increasing number of losses and wounded soldiers necessitated the British side to establish new hospitals in and around the region. Allied countries (Britain and France) chose the strategic spots for their new hospitals where they could easily have access to İzmir, Çanakkale, and Istanbul. The Crimean War was crucial in terms of the development of modern nursing, especially due to the contributions by Florence Nightingale; however, the fact that these nurses were working in the overseas hospitals implied many hardships for both the hospital staff and the soldiers. William Howard Russell, *The Times* war correspondent from 1854 to 1856, described the terrible neglect of the wounded and pointed at the differences between the facilities provided for the British and French soldiers. He asked: "Are there no devoted women among us, able and willing to go forth to minister to the sick and suffering soldiers of the East in the hospitals of Scutari? Are none of the daughters of England, at this extreme hour of need, ready for each a work of mercy?" (Brimacombe & Waters, n.d.). The narrator in the book seems to be one of these "devoted women" who responded to Russell's call.

Martha Nicol, the narrator, gives in her memoirs an account of what she goes through as an English lady-nurse in Smyrna. She is also the focaliser in the book that is integral to establishing the ideological coordinates of the space both in and outside the hospital. Therefore, it is the focalizer that will be put under scrutiny in this essay to reveal how the psychosocial topology of the imperial ideology is retained in a far distant hospital. Her account masks the “problematic production and reproduction” of the social space and “its contextualisation of politics, power and ideology” in Edward Soja’s (1989) words (p. 12). It functions as an ideological mechanism under the guise of an observational account, and this essay will explore how power and ideology are contextualized through her account in the psychosocial topology of the hospital.

Our second focus in the essay will be the formative role the lady-nurses play in the hospital, which is turned into a little Britain, in exile. The hospital offers the soldiers the sheltering qualities and the normalcy of the home through the mediation of the lady-nurses. This is a transposed home to them. By reconceptualizing the space in the hospital, the lady-nurses help the soldiers achieve a sense of continuity between their home back in England and the host culture about which they know very little. By playing a formative role to transpose this hospital to a homely space in a foreign territory, they function as psychic and cultural stabilizers. They also become mediators for the soldiers between the maternal space and the cold walls of the old Turkish hospital to achieve a sense of belonging and nurturing. Therefore, this essay also puts under scrutiny the constituent and constituting dynamics between the soldiers and the lady-nurses. Interestingly enough, the paid nurses have a more professional standing in their treatment of the soldiers and are distant from them. Their conduct remains within the limits of their job description without any emotional involvement.

Smyrna as a space of the heterotopic cultural cacophony

Her diary focuses mostly on her experiences in the hospital as she has limited access to host cultures in Smyrna, which accommodates a bunch of ethnic heterotopias that are not in touch with each other. In fact, during her stay, there are ethnic conflicts in the social background, but the narrator in the book seems not to be fully aware of them, or she doesn’t offer any insight into social conflicts or social specificities. She gives these details with a clinical detachment.

Like the other lady-nurses, the narrator shows unquestioned obedience to male authority figures in the hospital and never problematizes their decisions. What she is lacking in her account is the subversive attitude to be found in a Mary Shelley to the British mainstream discourse. Without an unquestioned submission to the practice of the authorities, Mary Shelley would have found many points to turn on their heads. However, the narrator's observations are a far cry from a subversive vantage point. She is blind to the imperialist motivation behind their existence in Smyrna. She genuinely believes that they are there to help the destitute and the oppressed. Her unquestioned and blindfolded acceptance of and submission to the Imperial ideology assumes farcical overtones at times as in the following quotation:

Our country, I am proud to say, always takes part with the oppressed; that her actuating motives are always and all right, I cannot undertake to say –I hope they are: but of all the titles Britain has earned, to my mind, the proudest and the best is, “the refuge for the destitute and friend of the oppressed.” (Nicol, 1856, p. 313)

Mary Shelley or another alert mind would have found to say other things about the locals, too. Such a questioning mind would have definitely caught the resonances of cultural, social, historical, and ethnic diversity surrounding her. However, the lady-nurse, the narrator, in the book acts as a dutiful daughter of the British mainstream discourse and willingly refrains from the substantial material lying beyond the observational truth. She cannot see the Frankensteins in her discourse, likewise, she remains blind to the Frankensteins of Smyrniote heterotopic spaces, too.

Smyrna, despite its local cultural polysemy, is part of the “East” for the narrator, and right from the beginning there is an implicit sense of hierarchy between the narrator and the people of the “East.” In such a context, one should also be aware that this intercultural encounter takes place within a Eurocentric frame of thinking. Although her Eurocentrism is not foregrounded in her voice, her account reproduces many of the dichotomies in Western thought, and a subversive reading of her account tells that this Eurocentric mode of thinking is at the centerpiece of her account. In this context, it can be said that western norms are integral to the perceptions of the narrator, and the West and what it stands for are taken as the measure of everything. At this point, it can also be asserted that there is an asymmetrical voicing of the Western and non-Western

perspectives as the members of the local community are not allowed to speak in their own voice.

The narrator's conception of the city space is characterized by detachment, indifference, and, as stated above, Eurocentrism. The Smyrniotes are called a 'motley crowd' (Nicol, 1856, p.139) by the narrator as they are rather heterogeneous in nature: they are composed of the Orthodox Armenians, Catholic Armenians, the Jews, the Greeks, the Turks, the Levantines, the Croats, the missionaries, etc. There are tensions between them:

These Romish Armenians are a very small body in Smyrna; but the Armenians belonging to their national church are very numerous, though not so much as the Greeks; and the different sects all hate each other with a bitter hatred. I have heard Greeks call Roman Catholics "dogs," as they passed each other on their way to their respective churches. The inhabitants of Smyrna who are neither Turks, Jews, Greeks, nor Armenians, call themselves "Catholiques," and are from all parts of the world, French, Austrians; Prussians, Italians, Spaniards, Hungarians etc.; but many of them have been so long resident, that they seem quite to have forgotten their origin, and know nothing except that they are Smyrniotes. (Nicol, 1856, p.175)

As she doesn't have the desire to penetrate into their cultural reservoir, she cannot fully understand these conflicts, and these cultures remain as a closed book to her. She cannot go beyond her psychosocial boundaries as the exotic other in these heterotopias and cannot merge into the other side of the polarity. The following quotation illustrates the unbridgeable gap between the subjective and the social in the narrator's case in Smyrna:

I felt as if I was walking "in the Arabian Nights," and should hardly have been surprised if I had been asked to step into Aladdin's palace, or met the African magician at any moment: and this feeling I had whenever I went into it, and up till the time we left. (Nicol, 1856, p.18)

Imperial ideology establishes its surveillance mechanisms when the lady nurses have the chance to penetrate into the host culture through certain ways like the dress code, and at times through obligation to walk and pay visits in groups (Nicol, 1856). External threats from the Greek highlanders also force them to live and act within the confinement of the hospital or the house provided by the hospital authorities. They can rarely take walks on their own, they are usually accompanied by their friends or superiors. This too acts as a barrier to their unmediated contact with the host cultures in Smyrna.

Still, being a woman, the narrator has better access to the domestic sphere of the ethnic heterotopias, but even in these sections of the book, she remains aloof to what she observes. Her lack of emotional involvement in these scenes triggers questions about her superficiality in her account of what she sees. Is it because she is scared of being judged if she is involved? Is it because of an implicit sense of hierarchy to be found in all such encounters between the East and the West? Is it simply because she cannot see beyond the surface reality? Is it because she has to repress such emotional involvement even if it is there in these encounters? Her narrative account mostly revolves around the medical and religious services offered to the patients. This might be the only material she is allowed to speak about by the dominant discourse she comes from.

Another reason for her inability to read the host cultures might be tied in with her gender. Being a woman, she hadn't had a university education, or she seems to be without any access to classical literature. Although she is in the cradle of ancient civilizations in Smyrna, and she is exposed not only to the cultural/ethnic heterotopias but also to historical ruins from ancient times, she is unable to see their Classical resonances. Compared to the accounts in the travel literature that developed around the Grand Tour, her account sounds rather superficial and monolithic. In such a context, in her depiction, she cannot benefit from the rich reservoir of Classical allusions, an opportunity that might have been employed better by her contemporary male counterparts or by other intellectual women like Mary Shelley. If it were an intellectual observer in her shoes, we would hear the multi-layered and polysemic account of the cultural genealogies surrounding her in the form of ruins. However, these ruins remain as ruins for her, and she cannot penetrate into them. The following account gives an idea about the superficiality of her reaction to these culturally and historically significant places:

On the hill, and amidst the Jewish tomb-stones, are evident remains of a ruined temple; some marble pillars are still to be seen, and many of the monuments seem also to have belonged to the building, which is said to have been a temple of Cybele.

The site of the ancient church is supposed to be within the enclosure of the Genoese fort.

The upper part of the town is full of remains of antiquity, cornices and entablatures built into the walls of the present houses; and not far from the fort, in a Turkish cemetery, are some very old pillars, with part of a wall still standing, which seems evidently to have belonged to a Christian church. But considering the former grandeur of Smyrna, there are

wonderfully few remains of ancient splendour to be found, nor are there apparently many tumuli. In a field near the Caravan-bridge there are a few, some of which have been opened. I saw one or two sarcophagi which had been found there, and which the possessor assured me were upwards of two thousand years old. (Nicol, 1856, p.193)

When some of their friends have the chance to go to Ephesus, the lady-nurses want to hear about the place. The exchange between them is interesting to show the lady nurses' inability to penetrate to the historical resonances of the location: "as we found the general reply was "We saw some broken pillars, cornices, and blocks of marble, evidently the remains of great temples and buildings,' we consoled ourselves, for these were also to be seen near Smyrna" (Nicol 1856, p.263). This shallowness also shapes the way she depicts her immediate surroundings. Without resorting to Classical allusions or symbolism, without benefitting from the cultural, historical, and philosophical resonances of these historical sites, she feels content with her observational empiricism.

She conceives the social space as fluid and mobile, and cannot map it due to her outsider position. Therefore, her depiction of the space remains amorphous. There is no interpenetration between the subjective and the objective, the social and the private in her account in the wider context of the city. Even if there is such a penetration, it is not given voice in the text. except for a few details about her involvement in the trivialities of life like his visit to Boudja² where she spends a few weeks with a British family in their enclosed garden, her conceptualization of the social space in the city tells that she is interested in the rationalistically accountable data.

The lady-nurses vs the paid nurses

Right in the beginning, one of the things that is emphasized in her memoirs is the fact that she is not a *vouée*, but 'an English lady, who goes of her own free will, and without any vow' (Nicol, 1856, p.3). She goes to Smyrna with the other lady-nurses who don't have any medical training to be able to work at a hospital and who are without an official job description/contract, that is, they are not *vouée*. This difference between the lady-nurses and the paid nurses seems to be very important, particularly from the perspective of the soldiers. She pays special attention to differentiating their own position from the position

² Boudja was in the outskirts of Izmir at that time. Levantines called this district 'Paradiso.'

of the paid nurses who keep their distance from the soldiers and do their professional duty without any emotional involvement (Nicol, 1856). They get close to the soldiers only as much as their medical tasks require. However, it is not the case for the lady-nurses who cannot remain emotionally indifferent to the soldiers, and who can go beyond the professional constraints. In fact, there are no professional limits in their case, as there is no job description (doing what the doctors and the nurses tell them is the only job description to them) or any official contract. Officially they don't exist because they don't have a place in the hierarchical chain. Their outsider position in the hospital, however, makes all the difference in their relationality with the soldiers. They go into not only intersubjective but also intrasubjective involvements, in which unconscious mechanisms are at work, with the soldiers.

She doesn't define herself in the way the others see her, not as part of a charitable foundation, a Sister of Mercy, etc. but as 'a British woman, who had little to do at home, and, having no fear of disease, was willing to be of what use [she] could to our poor soldiers wished to help our poor soldiers' (Nicol, 1856, p.19). She also says: 'I carried with me a great amount of enthusiasm for the work I was to be engaged in and looked forward with immense heroism to the privations I expected to endure' (p.19). She opts for this 'new and exciting work' rather than 'pursue the uneventful monotony of daily doing good at home' (Nicol, 1856, p.27). She is not there for religious reasons, for her 'religious teaching had been very small' then (Nicol, 1856, p.79). Once she vaguely hints at her loneliness when she sees there are no letters to her: 'it really seemed as if I had been ill-used by all the world, both by the world who had not written to me, and by those who had written to others' (Nicol, 1856, p.119). We are given no biographical background about the narrator, about her motivation to go to Smyrna other than the above explanation, which is given in rather restraint terms. This explanation might not sound convincing given the amount of discomfort she suffers during her journey to and her stay in Smyrna. Whatever the real motive is, in between the lines we feel that working as a lady-nurse provides an empowering space for her, particularly in her interaction with the soldiers and the Levantines of the city. This space assumes some ontological significance for her, as will be explained in the following pages.

As a woman too she remains a closed book to the readers. This tells that she learned her lesson in the mainstream discourse to repress her emotional and irrational

side. She never loses her psychological unity or is never overwhelmed by emotional outbursts. The only emotional reaction that comes from her is her empathy for the patients or her reaction to the dead bodies in the funerals of the local ethnic groups. Somewhere in the text, she refers to a “handsome” soldier who lost one of his legs, but she goes no further. We don’t have ample evidence about her amorous attachments or inner conflicts or depressed or ecstatic moments. In this sense, although she is among her co-patriots, she refrains from any intense intersubjectivity that might be possibly experienced in this social context.

The text opens with an apologetic tone of voice for two reasons: first, this is her “only authorial attempt.” She demands tolerance for her authorial shortcomings, which was a common habit among the women writers at the time due to lack of self-esteem and anxiety about their reception as a writer. Second, being a lady-nurse, they are not given any acknowledgment by the other nurses with official training and position, and by the hospital authorities. She always speaks with the awareness of her marginal position. A case in point is, when they arrive in Smyrna, although the paid nurses are offered lodging in the hospital, the lady-nurses find that there has been no attempt to provide lodging for them. They benefit from the hospitality of a Levantine family, the Zipcys:

We literally had not a hole to go to, the hotels could not have taken us in; and we should have been in the streets under the pelting rain, if it had not been for them. I cannot tell whether the British consul was aware or informed of our position; for during all the time I was in Smyrna I never saw him, nor, so far as I am aware, did any of the others.

On our arrival we had been told that General Storcks had received such vague instructions about us, he did not know whether we were to be provided with furniture, or to provide ourselves, or, in fact, anything about us; and it was also reported to us that the Purveyor had said, when applied to for the requisite articles of furniture, “These women came out to put up with barrack fare; and if there is not a house for them, let them live in tents.” (Nicol, 1856, p.78)

They stay with the Zipcys for some time, and then, are transferred to a local house that doesn’t have any amenities except for a bed and room to be shared with other lady-nurses. In fact, this house is full of all sorts of bugs and is poor in terms of basic hygienic standards. What happens to one of her friends illustrates their discomfort:

... on getting up she found, as she described it, her bed absolutely peppered with bugs of no ordinary dimensions, who scampered hither and thither with amazing velocity; but in five minutes, upwards of fifty were captured, and such things were not uncommon. They were terribly annoying to the patients in the hospital, and so were the mosquitoes by night, and scarcely less so the flies by day. (Nicol, 1856, p.234)

Moreover, this house is outside the hospital compound, they walk to/from the hospital as a group due to security reasons. Another interesting example of their marginal position in the medical world is that in the forthcoming months when they want to offer their service under the supervision of Florence Nightingale, she declines their service saying that “she had no occupation *for ladies*” (Nicol, 1856, p.177).

In the hospital, both the doctors and the nurses look at them with a sense of superiority and reservation as the following quotation reveals: ‘I had frequently heard, from many of the doctors, that they did not, at first, at all like the idea of ladies being employed at the hospital. They thought we should be a mere useless encumbrance, and always in the way’ (Nicol, 1856, p.86). Despite their marginal position at the hospital and their ‘placeless place’ in it, their workload is inestimable at times:

The one which fell to my lot had from sixty to eighty patients; and I must say, I felt a little strange just at first, on finding myself the only female, save my nurse, among so many sick soldiers. But how soon self is forgotten, when you are in the midst of sickness and suffering, and know that people are depending on you for relief! The fear, horror, and disgust which would probably affect an inactive spectator, have not smallest place in your mind, and you have but one feeling left—pity, and a desire to alleviate pain. (Nicol, 1856, p.34)

Their sacrifice comes with a cost. They risk their lives in the dire conditions of the hospital, which is understaffed, and which tries to operate in a limited number of wards: ‘Death Seemed very near to us then; we have already lost two orderlies, and many of the nurses were lying at the gate of death. Miss A--- had made an almost miraculous escape, and was not yet out of danger from relapse’ (Nicol, 1856, p.55). However, in the course of time, their contribution to both the organization and running of the hospital is appreciated by the doctors, if not by the paid nurses.

This common negative attitude to the lady-nurses, in the beginning, puts them into a vulnerable position, and the narrator needs to speak for the lady-nurses and justify their right to more respect than the paid nurses as follows:

...as these ladies were undertaking an unusual work, they ought, as it were, to lay aside their position, habits, and feelings, and descend to the level of servants. Now there would, perhaps, not have been much harm in this, although I think it would decidedly have been productive of less good, as I shall endeavour to shew afterwards. But the real evil was done to the nurses, who fancied that according to our descent in the social scale, was to be their ascent, and that by some process unknown, on their going out to the East, they were to become ladies; and this for a time produced ill-will and bad feeling in some, but many of them were too sensible not to see things very soon in their proper light. (Nicol, 1856, p.25)

Hospital space as a psychosocial topology

Space is not a vacuum to be filled in by the human agency, but is a context for the interplay between power, politics, and ideology, as in Soja's words. It is never free from different forms of relationalities which are consistently reconstituted on slippery ground. Foucault states on space as follows:

Space in which we live, which draws us out of ourselves, in which the erosion of our lives, our time and our history occurs, the space that claws and gnaws at us, is also, in itself, a heterogeneous space. In other words, we do not live inside a void, inside of which we could place individuals and things. We do not live inside a void that could be coloured with diverse shades of light; we live inside a set of relations that delineates sites which are irreducible to one another and absolutely superimposable on one another. (as cited in Soja, 1989, p.17)

Space in the British hospital in Smyrna assumes different resonances, as it is not only a hospital in the outskirts of the Turkish mainstream discourse, but it is also a war hospital in the East, in a totally foreign unmapped cultural territory. It involves both social and psychic resonances for the soldiers and the staff. The division between the host and the home cultures is never crossed over due to the confinement of the soldiers and the hospital staff within the walls of the hospital. The hospital staff has limited access to the host cultures, and these encounters take place within very short time spans. They usually mix with the Levantines in the city, not with the local ethnic groups. Therefore, the hospital can be taken as a heterotopia which, Foucault asserts, are spaces of abnormals, deviants, and in a more general sense, those experiencing a crisis by

challenging the established order of things (Foucault, 1986). Foucault also uses the metaphor of the ship to describe heterotopia. He notes that a ship occupies,

a place without a place, that exists by itself, that is closed in on itself and at the same time is given over to the infinity of the sea and that, from port to port, from tack to tack...it goes as far as the colonies in search of the most precious treasures they conceal in their gardens... from the sixteenth century until the present. (1986, p.162)

In accordance with Foucault's definition of heterotopia or ship as heterotopia, "a place without a place," the British hospital in Smyrna can be taken as a heterotopia of deviation. Although the British authorities are not in a colonial context, they are searching for "precious treasures" on an international ground. This is a war hospital whose physical structure is not mobile, but whose occupants, whether they are the medical staff or the soldiers, move "from port to port, from tack to tack." They drift from one war zone to another, and are located on the outskirts of the local mainstream discourse "as the deviants" since they belong to another epistemological background. Foucault also asserts that heterotopia either takes the produced reality to a place or alters the present reality with a created illusion (Foucault, 1986). In this heterotopic space of the hospital, the tragic reality of the soldiers is imbued with the illusion of at-homeness or alleviated by the psychic implications of the lady-nurses.

The narrator never needs to establish a contact in the true sense of the word with other heterotopic communities because it is only physically she is away from Britain, but psychically she is still located in British mainstream discourse within the walls of the hospital. In this sense, she never leaves the home territory of Britain. Accordingly, any news from Britain consolidates their connection with home:

All camp proceedings and telegraphic despatches were eagerly devoured; and any notice of the Queen, or thought and care of Her Majesty for the soldiers, was a subject of immense satisfaction and gratification...

How pleased the patients were to hear of the Prince of Wales and Princess Royal sending two of their pictures to be sold for the Patriotic Fund! They never could be done speaking of it, saying, with tearful eyes - God bless them! Her Majesty will never want soldiers while there are such princes. (Nicol, 1856, p.120)

In their reciprocity in the hospital, the traditional hierarchies in Britain are at work in the form of female subordination and male hegemony. In fact, all the lady-nurses

maintain their subordinate roles to the doctors and fathers, who are all male. The boundaries of the hospital are kept by the male members of their community while the internal uncanny space is turned into a homely place by the lady nurses.

The houses the narrator stays in can never assume the features of inhabited space, a home. She drifts from one house to another without feeling at home. The practice of gendering place in the traditional sense, that is, turning the space into a homely place takes place not in the house but in the hospital. Irony in her case is that the institutional public space becomes the homely place that she helps to establish. A textual detail at this point might be interesting to look at. These lady-nurses refuse to cook or do the house chores for themselves in the houses they are accommodated. However, they don't hesitate to cook for the soldiers if necessary (Nicol, 1856). Although they do almost all the tasks involving filth, bacteria, and smell like shaving the soldiers who have not washed for months (for obvious reasons), they refuse to do housework for themselves and demand that the hospital authorities hire servants to run the house. What they do at work is incomparable to house chores in terms of difficulty and cleanliness as the following account given about another lady-nurse indicates:

Her first work had been to cut off his hair, which she described as a perfect mass of vermin, as also his whiskers and eyebrows; while from off the bed they were brushed in myriads, and had to be swept up, and the floor washed afterwards. When she had finished, and made him as comfortable as she could, he looked up in her face, and said, "I believe you are not a human being but a [sic] angel!" And this was no isolated case, for there were many such. (Nicol, 1856, p.34)

Their work ethic is difficult to understand. Is it because they take whatever they do for the soldiers as part of their profession? Why is doing the same thing at 'home' humiliating, then? Or to put it differently, doing manual labor is not acceptable at 'home' [because they come from socially higher segments] but it is done willingly, without being asked, in the work environment. The only justification for their sacrifices might be a psychological explanation: they feel empowered at the hospital, so there is interesting psychological reciprocity going on in their relationship with the soldiers. The fact that the soldiers are dependent on them becomes a source of psychological gratification for the lady-nurses:

We had become accustomed to attend to their daily wants, and felt that they so entirely depended on us for their comfort, that it made us feel a painful blank when they were no longer with us, to be cared for. A most wise provision of human nature it is, which makes us lean with kindness to those whom we have befriended. I fear the converse, however, is also true –that we never forgive those we injure. (Nicol, 1856, p.157)

Protective asylum of the hospital is closely associated with the maternal features suggested by the lady-nurses as it is the lady-nurses that create the nourishing and healing maternal environment for the soldiers. In this reciprocity, the soldiers (male members) are provided for by the lady-nurses. The implications of the word nurse in English as a child carer might be referred to here as the fact that she is nursing the soldiers might also imply, that she is providing for their emotional needs. Sometimes they demand more food or medicine, which can also be taken as the Lacanian demand, which has a double function:

...because the object which satisfies the child's need is provided by another, it takes on the added significance of being a proof of the Other's love. Accordingly demand too acquires a double function: in addition to articulating a need, it also becomes a demand for love. And just as the symbolic function of the object as a proof of love overshadows its real function as that which satisfies a need, so too the symbolic dimension of demand (as a demand for love) eclipses its real function (as an articulation of need). (Evans, 1996, p.36)

Their demand for things is an objectification of their demand for more affection from the lady-nurses. Very suitably, one of the soldiers wants to stay at the hospital although he is "ordered home":

...when he recovered the use of them slightly, he was ordered home, and he entreated to be allowed to remain, saying, "that he should nowhere be so well attended to, and that his mother even, if he went home, could not do for him all the ladies were doing." Another man wrote to his mother, saying, "fine ladies and the best of doctors had come out from London to attend on him!" (Nicol, 1856, p.129)

Sometimes the soldiers 'pretended they could not eat, on purpose to be pampered' by the lady-nurses (Nicol, 1856, p.108). The text reveals many other examples of emotional attachment to the lady nurses. One day, for example, the narrator is late for the ward, and one of the soldiers "beckoned [her] to him the moment he saw [her], and when

[she] went up he burst into tears, and said, 'I thought you were never coming more'" (Nicol, 1856, p.43). This intrasubjectivity is noticed by the professional medical staff:

Dr. Meyer had a great objection to the ladies making "pets" of particular men; and, indeed, I am sure it would have had a very bad effect; for I saw, in the most trifling matters, they were particularly jealous if one received the smallest attention which the other did not. (Nicol, 1856, p.99)

The lady-nurses represent the English maternal body that gives them healing affection. Their presence signifies the uncanny feeling of at-homeness experienced with the mother:

One of the ladies, on going into a ward to attend to two poor men who had to be fed every half-hour, observed a boy on one of the beds eyeing her most wistfully; so she went up, and asked him if he wanted anything: "Yes," he replied, pointing to what she had been giving the other, "I would like some of that, I have had nothing from the hand of a woman yet, I believe if I had something from the hand of a woman, I would get well..."

Many an expression of gratitude and kindness followed us that day, and many an exclamation of "It does my hearth good to see an Englishwoman again!" We returned from our first day at the hospital, tired and pleased, and interested...

He let me feed him in silence; and I was going way, confirmed in my impression of his sullenness, when a most fervent exclamation, in the richest Irish brogue, of "God bless you! you're a fine woman!" arrested my attention; and on turning round, I saw him looking after me with tears in his eyes. I found, afterwards, it was not sullenness, but astonishment at seeing the trouble I took with D--- which made him look at me in the way he did. (Nicol, 1856, pp.64-65)

In the context of the hospital due to this psycho-topology, the boundaries between the psychic and the social, the domestic and the anonymous are further blurred. By creating a home environment in the social space, the lady-nurses enable the soldiers to expel the external threats or the threats of the battlefield from their minds. In the context of the hospital, then, the traditional dichotomies between home and away, the known and the foreign, the West and the non-West, the domestic and the social, the maternal and the threatening outside public space are annihilated. Interestingly, the providers of this psychic dimension, the lady-nurses are unaware of the implications of their existence to the soldiers, and their psychic significance goes unnoticed.

In their relationship with the soldiers, the traditional roles are reversed at times. The soldiers are reduced to the position of the subordinate in this reciprocity. It is the nurses that are mobile, and have access to the outside world, and the soldiers are confined to the walls of the hospital which closets them from foreign society and its threats. However, the nurses are allowed to enjoy their limited freedom outside the hospital if there is no threat from the Greek highlanders. In this case, the hospital feminizes the soldiers due to their confinement and due to their reliance on the lady-nurses.

Hospital space is a space of relationality and intrasubjectivity as it offers intimacy, security, care, and affection to the hospitalized soldiers. As stated above, the hospital signifies the maternal body to these soldiers, and it becomes a little Britain for them. On the other hand, every one of them knows that what the maternal zone of the hospital provides for them is transitory. Hospital complicates the dichotomy between the private and the public as it's also characterized by anonymity. It seems to be a liminal space between the battlefield and their home country, Britain, achieved in a foreign territory. Thus, the hospital space metamorphoses into a psychosocial topology which also reveals how imperial ideology maintains itself and endures external threats outside Britain. It is also a transposed space that bears within itself double consciousness regarding its transitoriness (they can stay there for a limited time period) and its potential to transgress this transitoriness due to enduring maternal elements that are deeply buried in their unconscious. Then, the hospital is a physical but also a psychic space/ topology for these soldiers, which is a placeless place.

Conclusion

In this essay, what we have tried to analyze is the diary of a lady-nurse who is confined most of the time to the four walls of the hospital or accommodation offered to her by the hospital, and this bears in itself the risk of giving an unbalanced perspective to her views. Similar encounters in the Turkish context of the early 19th century might have taken place rather differently. Our focus on her account sacrifices diversity to specificities of this particular encounter, and as stated earlier, the question of how adequately she depicts the East is out of the scope of this essay.

In the narrator's account, Smyrna is depicted as an open space of heterotopias, but she is not disturbed by this heterogeneous space or does not try to homogenize or fix it or penetrate into any of these heterotopias in her account. Being an outsider, she cannot see beyond the objective reality of social space in Smyrna, and in the absence of any significant psychological penetration, she acts like a Cartesian viewer of the observational truth. However, as we tried to discuss in the preceding paragraphs, this clinical detachment itself is heavily imbued with an ideological standing.

She has a different conception of space within the walls of the hospital. The dynamic space of the hospital provides a context for the soldiers to recreate new relationalities which are shaped, to a large extent, by the lady-nurses. The lady-nurses offer emotional and psychological energy to survive in an estranging culture to their alienated, traumatized and displaced minds and bodies, and the transitory space of the hospital provides them with feelings of at-homeness. In the closed space of the hospital, the traditional gender hierarchy in Britain is established. That is, this transitory place is ruled by the military's heteronormative roles and hierarchies. In this context, it is left to the guardian spirit of the men to secure the safety of the hospital and the lady-nurses turn the unmapped foreign space into a British place. The lady-nurses as a metonymic extension of the British interiority in the hospital help the soldiers establish a collective psychic space where their conscious and unconscious mechanisms intersect. This intersection leads to the dissolution of the public /private division in a foreign territory, and this dissolution also hints at how the British imperial ideology maintains its structuring coordinates outside Britain. As a result, due to their being closeted in the safety of the hospital and its relationality, the hospital assumes the features of a socio-psychic topology in Lacanian sense where the internal merges into the external or the features of Foucauldian heterotopia, a placeless place.

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