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Coming in the Front Door

A History of Three Canadian Physiotherapists Through Two World Wars

Suzanne Evans

On a fall day soon after the First World War ended in 1918 General John Fotheringham of the Canadian Army Medical Corps (CAMC) was inspecting the white-uniformed graduating class of the Military School of Orthopaedic Surgery and Physiotherapy at Hart House, University of Toronto. He said to the supervising masseuse, Enid Finley, "I hope if there is another war, you will see to it that your girls come in the Front, not the Back Door."¹ Finley was motivated to discover where that front door was,

with all its connotations of respect, and to avoid the experiences of earlier in the war when masseuses were dismissed as little bits of untrained fluff.

The devastation of industrialized warfare provided an abundance of patients needing help to re-educate wasted muscles or learn to use prosthetic limbs. Gradually realizing the usefulness of "functional re-training" for wounded soldiers during the First World War, the Canadian military medical establishment established physiotherapy schools in 1917.² A majority of the students were women. After the war the schools closed and working women throughout society were expected to return to domestic life. If not for the promotional efforts of Finley and others in creating the professional organization (the Canadian Physiotherapy Association) in developing standardized training and in liaising with officials, the military would have had nowhere near the number of physiotherapists it needed in the Second World War nor would the physiotherapists have been able to demand the changes in professional status they achieved.

The stories of three Canadian women of successive generations, Alice Britton Schuyler (1867-1949), Enid Finley Graham (1894-1974)

and Elizabeth Harpham Orford (1923-2008), serve to highlight these changes. Alice Britton was born in Kingston, Ontario and served as a masseuse during the First World War. Enid Finley, from Montreal, studied massage and physiotherapy in Heidelberg and Philadelphia, and worked as a teacher and organizer of physiotherapy in Canada through both world wars. Elizabeth Harpham,

Abstract: The devastation of industrialized warfare of the First World War provided an abundance of patients needing help to re-educate wasted muscles or learn to use prosthetic limbs. The Canadian military medical establishment gradually realized the usefulness of "functional re-training" for wounded soldiers and set up schools to train physiotherapists. Not thinking ahead, the schools were closed at war's end. However, in the interwar years some far-sighted women developed a university training program and a regulating organization so that by the Second World War physiotherapists were in a position to significantly contribute to the war effort. The wartime development of this female-dominated profession will be shown through the stories of three Canadian women of successive generations.

Résumé : La dévastation provoquée par la Première Guerre mondiale, véritable conflit industriel, a laissé une abondance de blessés qui durent apprendre à remettre en fonction des muscles abîmés ou à utiliser des prothèses. Graduellement, les autorités médicales militaires canadiennes se rendirent compte de l'utilité de la rééducation fonctionnelle chez ces soldats et mirent sur pied des écoles destinées à former des physiothérapeutes. Sans se préoccuper de l'avenir, on ferma les écoles à la fin de la guerre. Toutefois, dans les années de l'entre-deux-guerres, des femmes, prévoyantes, développèrent un programme de formation universitaire et créèrent un organisme de réglementation de sorte que les physiothérapeutes de la Seconde Guerre mondiale puissent être en mesure de contribuer à l'effort de guerre. Le développement, pendant la guerre, de cette profession où dominait un personnel féminin, est illustré par l'histoire de trois femmes appartenant à trois générations successives.

born and raised in Toronto, studied for her two-year physiotherapy diploma at the University of Toronto and worked overseas at the rank of lieutenant during the Second World War. All of these women, like many other early trained masseuses, came from financially well-off families which allowed them the opportunity to study and travel.

This essay builds on the work of historian Ruby Heap's examination of the professionalization of physiotherapy. Themes she analyses as central in this process – the role of medical sponsorship, the importance of university certification programs and the significance of self-organization – provide a backdrop to the experiences of these three women.³

The history of the “back door,” referred to by General Fotheringham, extended all the way to Britain. Metaphorically speaking, this door had a red light over it. In 1894 accusations of prostitution occurring in the massage houses of England were in all the papers. Similar concerns existed in Canada and the United States. *The Report of Social Survey Commission of Toronto* of 1915 indicates that the association of prostitution with massage was well known in Toronto as well as Chicago, Detroit, and New York. The report stated that for many years women had advertised their massage services in newspapers. When members of the commission investigated these businesses in Toronto they found “the operators were wholly ignorant of scientific massage” and were involved in “nefarious practices.”⁴ Women who were trained in therapeutic massage were forced to defend the reputation and quality of their work and distinguish themselves from prostitutes. In England they did so by creating an organization, the Society of Trained Masseuses, with the intent “to regulate the education, training, registration and practice” of



Alice Britton Schuyler (in front) in VAD uniform, Farnborough England.

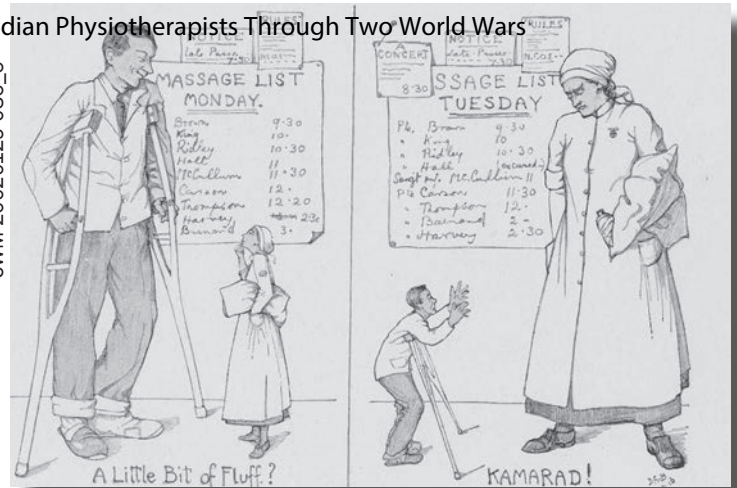
massage.⁵ In the years to come this lesson on the value of regulation and medical supervision would not be lost on Canadian masseuses.

Massage was a primary skill of what we now consider physiotherapy. During the First World War however, electro and hydro therapies along with medical or remedial gymnastics were added to massage in the newly developing field. Another aspect of this development was deciding on a name both for the practice and the practitioners. Terms for the former included physical reconstruction, functional re-education, physiotherapeutic work, or sometimes the therapies were referred to individually. Americans called their war-time therapists “Reconstruction Aides”

but in Canada, Australia and Britain the term “masseuse” was used. Although “masseuse” only refers to one skill it was often used to describe women who practiced some or all of these therapies.⁶ Later in the war the term physiotherapy was used by Canadians although not universally. Because of the term’s comprehensiveness this paper will use the term “physiotherapist” unless the individual was specifically called a “masseuse.”

Whatever the name, together these therapies were designed to stimulate muscles, nerves and circulation. As the war progressed they were also used to help men suffering from what was described in the medical poetry of the time as DAH – disordered action of the heart, or shell-shock.

It was recognized early on that none of these therapies would have a significant impact without the patients’ voluntary input. An outline of a short course given for instructors of medical exercises in 1917 at Granville Canadian Special Hospital in England makes this clear.⁷ There were three guiding principles. The first, “Mind,” stated that it must be impressed upon the patient that no matter how serious the injury some progress can be obtained if the patient will help himself. The second principle was entitled, “Movement,” although it might have been more to the point if it had been called “Improvement.” The aim was to increase the range of motion rather than focusing on achieving pre-wound action. The last principle was “Discipline.” Much is involved in this last point but in this course outline it refers to how control is to be exerted over the patient – preferably through personality. Physiotherapists were counselled to be firm yet respectful of what the soldiers had gone through in France. A visual depiction of the control a masseuse could have over her patient is humorously shown in the 1916 cartoons of British masseuse



Two cartoons by British masseuse Dorothy Bliss show the control a masseuse could have over her patient.

Dorothy Bliss.⁸ The power over a patient and the pain a masseuse could inflict are also alluded to in a poem by Private C.P. McCathy, one of the patients of Canadian masseuse Irene Layman:

I shall forgive you all the pain
you've
Caused me with your twists
and yanks.
To prove your work has not
been vain
My right hand pens my hearty
thanks.
I know my poetry's not "Jake"
But please forgive for old time's
sake.⁹

Alice Britton Schuyler likely brought this discipline and humour to her work as a masseuse in the First World War. She was described by her goddaughter, the comedic opera singer Anna Russell, as extremely clever and amusing, very peppery and inclined to be sarcastic, with a tongue like an adder when it suited her, and she had guts. She would have a go at anything, no matter what. She smoked like a chimney; she drank, sometimes a drop too much. She was a total person.¹⁰

This 1914 postcard shows Belgian patients posing with staff outside Farnborough Court Hospital.

Schuyler trained as a Volunteer Aid Detachment worker (VAD) in England.¹¹ This general nursing and First Aid training only lasted a few weeks.¹² Considering the specific record she kept of her work in the early months of the war as a masseuse – meticulously listing in her scrapbook her patients and what parts of their bodies she worked on – it is possible she had previously studied massage.

In the autumn of 1914 she worked in Farnborough just outside of London at the 25-bed British Hospital of Farnborough Court. She lived with friends, her goddaughter's parents, about a mile away. Her patients were all wounded Belgian soldiers. The usefulness of her massage work is evidenced by comments written

by others in her scrapbook, from the most basic "Vive la masseuse!" to longer letters of the kind Mrs. Guise Moores, the lady superintendent of Farnborough Court hospital, wrote. After Schuyler had returned home in December 1914 – she was then living in New York – Moores wrote thanking her for her "great kindness for coming to the aid with the men. The poor things would have been sadly in the lurch if you had not been kind enough to help... I am most truly sorry you could not have carried on with them to the end."

Schuyler went back to England and France the next spring. Anticipating this trip and hoping to get her back, Mrs. Moore wrote her on 23 April 1915, "When are you coming to us? We have plenty



of men needing massage." After explaining that the number of beds in the hospital had increased from 25 to 45 she added, "you can imagine there are many more now just crying out for massage." Schuyler took up her massage work again but this time she worked at Connaught Military Hospital in Farnborough. She took photos of her patients. Two of them, Eustace Milligan and F.G. Purser, wrote her after they were moved to other hospitals. Milligan addressed her as a nurse: "Dear Sister, I am feeling better every day and my wounds are healing up at last...A man comes every day to massage my legs, needless to say, not half as well as you did them." F.G. Purser wrote "thank you very much for your work on my 'stick' it is now almost straight." Alice may have appreciated Purser's turn of phrase as much as his letter of thanks.

Even far from the battlefield the value of massage was touted. A Toronto magazine clipping in Schuyler's book states:

It is said that eighty percent of the men being cared for in Field Hospitals in France are suffering from rheumatism, sciatica, and lumbago. Think of the water-filled trenches and you will not wonder that this is the case. English hospitals are beginning to be crowded with sufferers of this malady [sic], invalided home, and the need for massage is becoming correspondingly great.¹³

Schuyler may have initially considered working in a Canadian hospital in England but in the fall of 1914 hospital staff and equipment were just in the process of being gathered up in Canada and transported for set up in England and France.¹⁴ Still, she would not have been able to work in any of them until December 1915 because of restrictions placed on masseuses by the military medical establishment. One of the most vocal opponents of having

volunteers (VADs) and masseuses in her hospitals was Major Margaret Macdonald, nursing matron-in-chief of Canada's overseas nursing services in the First World War. Macdonald linked masseuses and volunteers because neither had nursing nor military training and in her mind attendant with their lack of training was their lack of discipline.¹⁵ She was not willing to risk the hard-won reputation of her professional nursing service by having it associated with masseuses whom she said were on a par with "carpenters, cooks and charwomen."¹⁶

However, as the war dragged on Matron Macdonald became increasingly aware of the usefulness of massage. By 1916, in spite of her resistance, civilian masseuses were on the payroll at three Canadian military hospitals in England. In August of that year Macdonald relented on the issue of massage to the extent that she agreed to allow some of her nurses to take a course in it. The massage work of one of her nurses had come to her attention. Ebba de Merrall was born in Denmark and trained in nursing and massage at

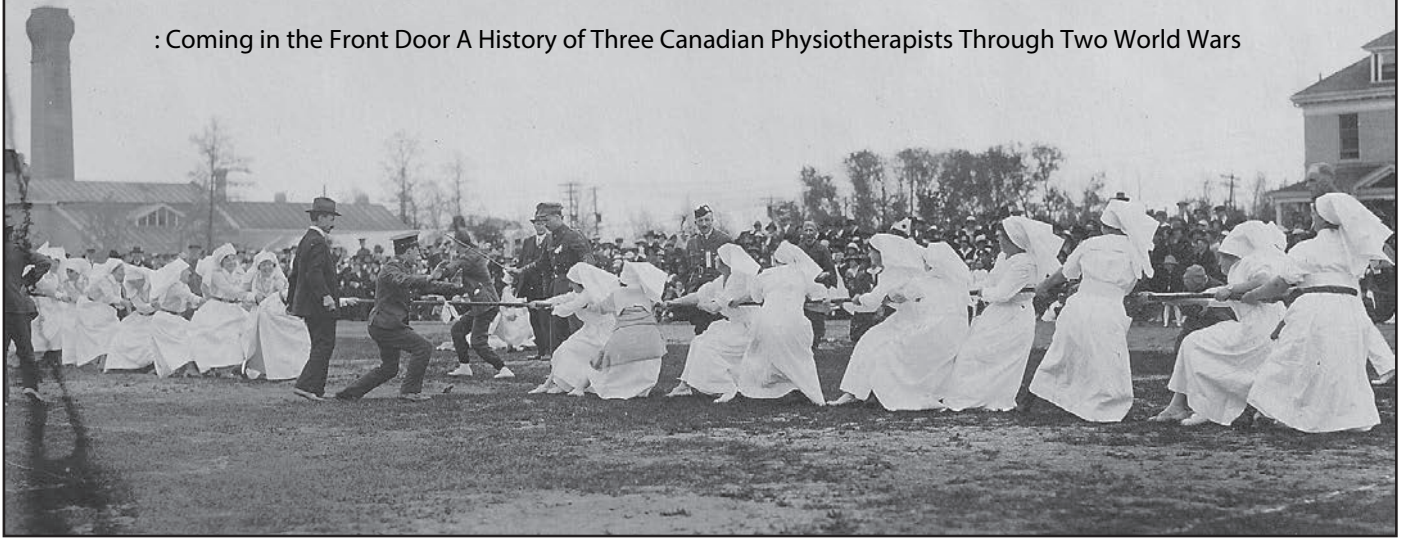


Enid Finley Graham, 1917

the City Hospital in Copenhagen. She immigrated to Canada in 1906 and when war came enlisted and began working in January 1916 at the Duchess of Connaught Canadian Red Cross Hospital, Taplow, England. There she gave massage to 25 cases a day and was so overwhelmed with the work that she decided to train others to help her. These courses eventually developed into a school of massage for nurses at Granville Hospital which had 88 graduates by March 1919.¹⁷

Alice Schuyler worked as a masseuse in the summers and autumns of 1914 and 1915 in British hospitals. It was a time when rehabilitation treatment was expanding so rapidly in new directions that people did not know what to call it. The main clientele, soldiers wounded in mass industrialized warfare, presented new medical challenges and brought a loosely organized, female-dominated occupation into direct contact with the overwhelmingly male medical establishment and the hierarchical world of the military. Both despite these challenges and because of them much was learned about the usefulness of physiotherapy, but the institutional commitment to it was short-term as was Schuyler's. There is no record of her practicing massage again after 1915. It may be that at age 47 she found the strenuous work too much or it may be that she felt her time would be more profitably spent raising money for French refugees, which is what she did.

Enid Finley, a generation younger than Schuyler, was just starting her career at this time. Like Alice Schuyler she was in Europe when war was declared. She had just completed her final three years of education there, two in Geneva and one in Heidelberg where she studied massage and medical gymnastics. Again like Schuyler, she trained as a VAD at the beginning of the war. She furthered her physiotherapy studies at the Pennsylvania Orthopaedic Institute and School of MechanoTherapy and



“Happily strained relations” – A tug of war match between physiotherapists (right) and nurses (left) at Tuxedo Park Hospital, Winnipeg, 1917.

returned to Montreal to work. In 1918 when she was just 24 she was hired as supervising masseuse at the Massage Training School and Treatment Department at the newly-opened Military School of Orthopaedic Surgery and Physiotherapy at Hart House, University of Toronto.¹⁸ After the war the school closed and in 1920 the *Report on the Physiotherapeutic Work in Canadian Military Hospitals* stated that because the hospitals were being evacuated “the necessity for further teaching disappeared.”¹⁹

Enid Finley disagreed. The criticisms levelled at masseuses during the war – their lack of training and discipline – would continue to haunt them if they did not organize and set up their own educational programs. After the war Finley worked as a supervising masseuse at the Dominion Orthopaedic Hospital in Toronto commonly known as the Christie Street hospital.²⁰ In 1920 she negotiated with the Medical Advisory Board of the Toronto General Hospital to have a course of instruction in remedial gymnastics instituted in the hospital wards.²¹ In doing so she helped broaden the awareness of physiotherapy among the civilian population. That same year she became a founding member of the Canadian Association of Massage and Remedial Gymnastics (CAMRG). The organization was

incorporated by Dominion Charter and in 1935 was renamed the Canadian Physiotherapy Association (CPA). Among the key professional requirements CPA physiotherapists had standardized university training, did not advertise except in medical journals, and only worked under medical supervision.

As for training, she was a driving force in establishing a two-year diploma program at the University of Toronto that opened in 1929, the same year she married Dr. Duncan Graham and became Enid Graham.²² Through force of character and some of her own money she kept the program going through the Depression. When war came again in 1939 she began chairing the CPA’s military affairs committee (MAC) which she had helped form only days after the outbreak of war. Within the year the rank, salary, uniform allowance and age limit of all serving physiotherapists was confirmed by order of the minister of national defence.²³ Graham took a proactive stance to organize young physiotherapists and made sure that only CPA members with university training would be enlisted by the Royal Canadian Army Medical Corps to serve in Canada and England. She then tackled the Department of Pensions and National Health (DPNH) which controlled military convalescent hospitals in Canada.

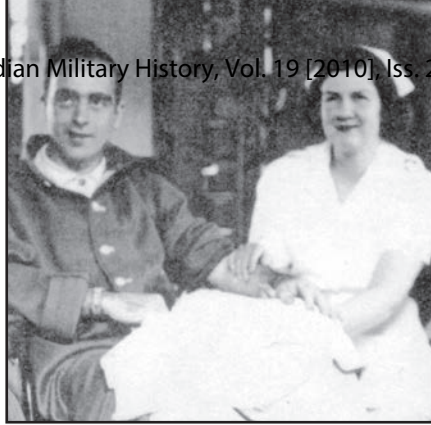
Through a concerted campaign of letter writing, meetings with ministers in Ottawa and a gradual gathering of allies, she was eventually able to convince Dr. Ross Miller, chief medical Officer of the DPNH, to appoint only CPA members in convalescent hospitals.²⁴ The story of the hiring of the Christie Street hospital head physiotherapist clearly shows some of the difficulties she negotiated to achieve her goal. This hospital, where Graham had worked after the last war, was a coveted place of employment for physiotherapists who lived in the area and had taken their diplomas at the University of Toronto. Enid Graham was told, however, that Dr. Miller favoured hiring First World War veterans who were masseurs rather than physiotherapists and that he wanted a man to head the department.²⁵

Graham wrote to the CPA’s president, Miss Margaret Finley in Montreal, to tell her of the situation. She hoped that the president would be able to concisely convey to Dr. Miller the lengthy arguments in her letter. One of Graham’s more interesting comments was that “in England and in Scandinavian countries the training of men has been discontinued” because “nearly all men, when trained, consider themselves the equal of the doctor, and proceed to diagnose, and

prescribe treatment without the direction of a medical man."²⁶ She concluded with an argument that she often relied on: returning men who would be going to convalescent hospitals deserved the best treatment available and that would be from university-trained women working under the supervision of doctors.

Enid Graham was confident that the CPA would be notified when the Department of Pensions and National Health held civil service examinations for the position of head physiotherapist of Christie Street. The notification did arrive but only one day before the scheduled examination and interviews. The CPA did not have enough time to contact any of their members who might have been interested in applying for the position. Graham went straight down to Ottawa to meet with Miller. The doctor said he was very surprised that none of the CPA girls had turned up for the interviews even though three weeks advance notice had been given.

We will never know if the letter of notification had been intentionally delayed but we can assume Graham suspected as much, particularly after she learned that Dr. Miller "had had a great laugh at my expense when none of the U. of T. girls turned up in Toronto for the examination."²⁷ Whatever the temperature of that meeting between Graham and Miller, Enid Graham managed to keep her focus and worked out another time for examiners to come to Toronto to interview CPA members. After a few more bumps along the administrative road Miss Audrey Coleman was hired as head of the Christie Street physiotherapy department on 1 April 1942.²⁸ Like Matron Margaret Macdonald in the previous war, Enid Graham was tenacious in positioning



Top: Harpham with a patient at No.24 Canadian General Hospital, England, April 1945.

Middle: Lieutenant Elizabeth Harpham Orford, 1943.

Bottom: A massage class at Hart House, University of Toronto, ca.1918-1925.

her professionally trained charges so they could walk in the "Front Door."

The wartime experiences of Lieutenant Elizabeth Harpham Orford, Physiotherapy Aide (PA), clearly illustrate what Graham was

able to accomplish. A generation younger than Graham, Elizabeth Harpham was born in 1923 in Toronto. In June 1943 she graduated from the University of Toronto's physiotherapy program that was the result of Graham's tireless work and influence and became a member of the CPA of which Graham was a founding member. The details of her wartime experiences were recorded in 1991. She was the only physiotherapist to be interviewed by Margaret Allemang, University of Toronto, in her oral histories of wartime nurses.²⁹

In August 1943, when Elizabeth Harpham was working in Montreal on the first of two three-month internships mandatory for her diploma, she received an informal questionnaire from the military affairs committee (MAC) asking if she would be interested in enlisting and if so where she would like to serve and to provide her biographical and professional details. The MAC had been contacting University of Toronto graduates in this way since October 1939. Harpham was interested but concerned that she would not be old enough. However, as the war progressed and shortages of physiotherapists became more severe, age restrictions became more flexible.³⁰

Enid Graham, as chair of the MAC, sent Harpham a formal invitation to enlist as a physiotherapy aide in the Royal Canadian Army Medical Corps. To encourage Harpham and other young physiotherapists like her, Graham made a number of offers, which she said provided "a marvellous and unprecedented opportunity" for them to serve their country.³¹ The first enticement was the chance for Harpham to do her final internship in the military



The graduating class at the Massage School Buxton, 1918. Nursing Sister Annie Maude Stirling (back row, ninth from left) was the recipient of the Royal Red Cross medal. Nursing Sister Ebba de Merrill is seated fourth from the left.

thus speeding up her entrance into the work force. Most students would have appreciated this chance but importantly it meant more physiotherapists for the military. The CPA was now in a tight spot. Having pressed to have only their members hired for military positions, they were now responsible for finding them.

Harpham was offered \$4.25 per day and the initial rank of 2nd lieutenant moving up to 1st lieutenant at a pay of \$5 per day after six months.³² If Harpham agreed to these terms she could immediately become a full member of the CPA, mandatory for enlistment, instead of having to wait until she finished her interning. She was asked to respond “now” and did so.

She began her military work in Canada practicing in Oakville, Petawawa and Portage la Prairie. In September 1944 she sailed to England on a hospital ship, the only physiotherapist aboard. Being in the military her travel and room, although completely lacking luxury, were covered. She worked at two Canadian hospitals in England treating a wide range of injuries: burns, shrapnel and nerve injuries, amputations and fractures.

Through the war *The Journal of the Canadian Physiotherapy Association* published letters from therapists working in England and included a MAC report keeping all members informed about who was overseas and what they were doing. The committee also provided support for professional updating. Harpham remembered “We all felt that we had somebody that we could write. If we wanted to have a book sent to us, or more information about a certain type of condition that we felt we hadn’t learned enough about, then [they would] send it along.”³³

The speed and efficiency with which Elizabeth Harpham Orford was recruited is striking in comparison with the situation for Canadian masseuses of the First World War. By the end of the Second World War 30 percent of the CPA membership were working in the military either in Canada or overseas. Although a large proportion of the membership, it was still a relatively small number – just over 100.³⁴ Harpham had no doubts about the significant role they played. When interviewed by Margaret Allemang, Harpham commented,

I don’t feel that anything that’s written or said about medical military history could possibly leave out the part that physiotherapy played in rehabilitation. It had advanced so much and I often think that if the soldiers of the First World War had had the advantages that the ones in the Second World War had, that there would have been many more survive and able to get around for a longer period of time.

War always provides medical workers with huge challenges, terrible heartaches and an abundance of guinea pigs. This last point is acknowledged in the name given to the group of severely burnt air-force men who had experimental plastic surgery in the Second World War – “the Guinea Pig Club.” Canadian novelist and historian Rita Donovan has written about the Canadian members of this club. When asked about the use of physiotherapy for these men she said it was so integrated into the patients’ everyday recovery plan “they breathed physiotherapy.”³⁵ By the end of the Second World War not only was physiotherapy coming in the front door it was, so to speak, in the patients’ faces.

Notes

A version of this paper was presented at The West Coast Graduate Conference in the History of Medicine, University of Calgary, Calgary, AB on 2 April 2010. I am grateful for the help of a number of people and organizations including Farnborough historian Jo Gosney, The Canadian Physiotherapy Association particularly for allowing me open access to their archives, Lieutenant-Commander Clive Orford for all his help with his mother's memoirs and I thank Dr. Laura Brandon for facilitating access to Alice Britton Schuyler's autograph book and for all her support in this work.

1. In her editorial in the *Journal of the Canadian Physiotherapy Association* 22 (April 1970), p.57, Enid (Finley) Graham stated that the comment was made to "the" supervising masseuse. A biographical sketch written about her later in the same issue states that she was "chosen to be supervisor of the Massage Training School and Treatment Department" at Hart House (p.67). According to the *Report on the Physiotherapeutic Work in the Various Military Hospitals Throughout Canada* (1920), p.11, there was only one supervising masseuse at the Hart House school.
2. McGill University's School of Physical Education began a one year course in massage and medical gymnastics in 1916. A school in Whitby, Ontario opened early 1917 and later transferred to Hart House, Toronto. Although the *Report on the Physiotherapeutic Work* stated that Hart House was the first institution to teach and train "in all branches of physiotherapeutic work" in North America, the journal *The Canadian Nurse* 13 (September 1917) advertised the services of a School of Massage at The Toronto Orthopedic Hospital Devoted Exclusively to the Treatment of the Lame, Crippled and Deformed. The hospital was founded in 1899 so the school may have been running for some years. The advertisement states that it was the "Only School in Canada." The classes offered included the Weir-Mitchell System, Swedish Movements, and Lectures in Anatomy and Physiology. <www.archive.org/stream/thecanadiannurse65cnuanoft/thecanadiannurse65cnuanoft_djvu.txt> (Accessed 15 April 2010).
3. Heap has written a number of articles on the professionalization of physiotherapy including: "Training Women for a New 'Women's Profession': Physiotherapy Education at the University of Toronto, 1917-40," *History of Education Quarterly* 35 (Summer 1995), pp.135-158 and "The Emergence of Physiotherapy as a New Profession for Canadian Women 1914-1918" in *Framing Our Past: Canadian Women's History in the Twentieth Century*, ed. S. Cook, L. McLean and K. O'Rourke (Montreal, 2001), pp.295-299. Carol Miles-Tapping's article "Sponsorship and sacrifice in the historical development of Canadian physiotherapy," *Physiotherapy Canada* 41 (April 1989) focuses on the issue of physiotherapists historical deference to medical doctors.
4. *Report of Social Survey Commission of Toronto* (1915), p.17.
5. D. A. Nicholls and J. Cheek, "Physiotherapy and the Shadow of Prostitution: the Society of Trained Masseuses and the massage scandals of 1894," *Social Sciences and Medicine* 62 (2006), p.2342.
6. For example in 1926 the Ontario Drugless Practitioners Act classified Masseurs as "any person who practices therapy by means of manipulations, mechanics, hydro, thermo, helio or electrical methods, for the treatment of any ailment, disease, defect or disability of the human body." *Ontario Gazette* 59 (16 January 1926), p.77.
7. Library and Archives Canada (LAC) RG 9111 B2 Vol. 3588.
8. Canadian War Museum (CWM) Archives 20020129-036. This is a series of six cartoon postcards.
9. Autograph album of Irene Layman, 1917-1918, CWM Archives 20080074-001. For a discussion on the power masseuses could exert over their male patients see Ana Carden-Coyne's "Painful bodies and brutal women: remedial massage, gender relations and cultural agency in military hospitals, 1914-18," *Journal of War and Culture Studies* 1:2 (2008), pp.139-158.
10. Anna Russell, *I'm Not Making This Up You Know: The Autobiography of the Queen of Musical Parody* (Toronto: Macmillan, 1985).
11. According to November and December issues of the local Farnborough paper, the *Aldershot News*, the hospital was staffed with two full-time nurses, two part-time nurses and VADs at the time Schuyler worked there. Schuyler is referred to as a VAD in an inscription in her scrapbook. Alice Britton Schuyler's scrapbook is owned by the Britton family.
12. Susan Mann, *Margaret Macdonald: Imperial Daughter* (Montreal, 2005), p.68.
13. The clipping is entitled "Helping to Restore Our Men to Health" and although undated it refers to Schuyler's return trip to Toronto as do three other Toronto newspaper clippings in her book which can be dated to January 1915.
14. The first Canadian hospitals, General Hospitals Nos.1 and 2, were just being set up on Salisbury Plain mid to end October 1914. <www.canadiangreatwarproject.com/hospitals/camcHospitals.asp> (Accessed 19 March 2010)
15. Mann, *Margaret Macdonald*, p.89.
16. Margaret Macdonald Fonds LAC MG30 E45 Vol.1
17. Margaret Macdonald Fonds LAC MG30 E45 Vol.1.
18. "Recollections and Reflection," *Journal of the Canadian Physiotherapy Association* (CPA) 22 (April 1970), p.68; Robert B. Kerr, and Douglas Waugh, *Duncan Graham: Medical Reformer and Educator* (Toronto, 1989), p.82.
19. *Ibid.*
20. *Illustrated Souvenir Dominion Orthopaedic Hospital Christie Street Toronto* (Toronto, 1920), p.35 lists the employees and patients at the hospital including 64 masseuses and 24 members of the muscle functional department.
21. Kerrand Waugh, p.82.
22. It is by the surname of Graham that Enid is best known but she was previously married (1920) to Dr. L. Bruce Robertson, known for his pioneering work in blood transfusions in the First World War. He died in 1923.
23. Military Affairs Committee, Canadian Physiotherapy Association (CPA) Archives 94:018; General Order 127 Article 134 (1) of the Financial Regulations and Instructions for the Canadian Active Service Force. Regulations retroactive to 1 April 1940, *The Canada Gazette* (17 August 1940), p.458.
24. As per memos and letters regarding the negotiations. Military Affairs Committee CPA Archives 94:018.
25. Letter from Mrs. Duncan Graham, Chair MAC to Miss Margaret Finley, President CPA 16 October 1941. Military Affairs Committee CPA Archives 94:018.
26. *Ibid.*
27. "Notes on Trip to Ottawa by Mrs. Duncan Graham" 13-15 December 1941. Military Affairs Committee CPA Archives 94:018.
28. Letter from Enid Graham to Audrey Coleman, 9 March 1942. Military Affairs Committee CPA Archives 94: 018.
29. Lieutenant (physiotherapist) Elizabeth Harpham Orford; Royal Canadian Army Medical Corps, 1943-1946. Margaret Allemang Oral History Program of Canadian Nursing Sisters of World War One and Two. Margaret Allemang Fonds University of Toronto Archives 0010-7 1995.
30. Report of Military Affairs 17 December 1941. Military Affairs Committee, CPA Archives 94:018.
31. Letter is part of Elizabeth Harpham Orford's scrapbook owned by her family.
32. *Ibid.*
33. Interview in Margaret Allemang Fonds University of Toronto Archives 0010-7 1995.
34. According to figures from June 1944 22 physiotherapists were working in the military in Canada and 85 were overseas. *The Journal of the Canadian Physiotherapy Association* 10 (June 1944), pp.26-28.
35. Rita Donovan, *As for the Canadians: The Remarkable Story of the RCAF's 'Guinea Pigs' of World War II* (Ottawa, 2000).

Suzanne Evans is currently a Research Fellow at the Canadian War Museum investigating the history of Canadian women and war. Her book, *Mothers of Heroes, Mothers of Martyrs: World War One and the Politics of Grief*, was published by McGill-Queen's University Press.