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To Take Us Lands Away  
Essays in Honour of Margaret R. Hunt



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## Leaving Virginia: Human need in the shadow of war

Jan Lambertz

In the century since it was first published, *A Room of One's Own* has been invoked with staggering frequency in the most diverse and even trivialising contexts imaginable.<sup>1</sup> The taxing, sometimes claustrophobic circumstances of Covid-19 have probably eroded some of our affection for Virginia Woolf's 1929 meditation on the room that women need to produce innovative writing. Yet I may be excused for taking yet another excursion into her text: two years of pandemic restrictions have forced us again and again to confront how we share space and navigate proximity to loved ones, to friends and strangers. My visit will be brief, just long enough to collect one of *A Room's* many walk-on characters and flee the text into an entirely different story, a space far more treacherous than Woolf could ever have envisaged.

Matching Woolf's fictional characters to their flesh and blood counterparts is a guilty pleasure. I am hardly the first to play this game. The clearest case in point is surely Mrs Dalloway, widely seen as modelled on Margaret (Madge) Vaughan, née Symonds. As biographers have concluded, Virginia had a bright-burning youthful passion for Madge, who later married Woolf's first cousin, William Wyamar Vaughan.<sup>2</sup> As a collateral benefit, we can follow Woolf as she scrutinises the Vaughans' elder daughter over the years, first as a bright, inquisitive girl and later as an earnest and driven medical student in London.<sup>3</sup> The writer weighed up Janet's resemblance to Madge at many points in her diaries and occasionally acerbic letters, and remained in touch with the younger woman as she embarked on a career in clinical pathology in London in the 1920s. Woolf had Janet to dinner and corresponded with her long after

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<sup>1</sup> The views expressed here are my own and not necessarily those of the United States Holocaust Memorial Museum. I am grateful to Annette Igra and an anonymous reader for the press for their incisive comments. This essay is for Margaret Hunt, who gave me a room.

<sup>2</sup> See, for example, Eileen Barrett, 'Unmasking Lesbian Passion: The Inverted World of Mrs. Dalloway', in Eileen Barrett & Patricia Cramer (eds.), *Virginia Woolf: Lesbian Readings* (New York 1997), 151, on Quentin Bell's 1972 biography of his aunt.

<sup>3</sup> For example, Virginia Woolf, *The Diary of Virginia Woolf*, i: 1915–1919, ed. Anne Olivier Bell (London 1977), 88.

deciding that Vaughan's mother had become disappointingly 'ordinary'.<sup>4</sup> Woolf's enthusiasm for her young relative wanes and waxes, moving from 'Good dull Janet Vaughan' to the slightly later and far less damning 1928 diary entry in which Janet seemed 'rapid, decided & lustrous, all in gold for Karen's party with Madge's gold necklace, & something very like Madge now & then; but tempered with the Vaughan decision. She is an attractive woman; competent; disinterested, taking blood tests all day to solve some abstract problem.'<sup>5</sup> The watchfulness continued, and a year later Woolf observed of one visitor, 'She gives her opinion precisely & methodically, rather as Janet Vaughan would do on a case.'<sup>6</sup>

Janet Vaughan's cameo appearance in *A Room of One's Own* occurs in a slightly jarring, much-discussed passage in a story within a story about women working together in a scientific laboratory. In an extended riff on her encounter with a novel by an imagined author named 'Mary Carmichael', Woolf finds that the novice novelist unsettles readers' expectations in a range of ways.<sup>7</sup> Thus, for instance, reading 'Chloe liked Olivia' in this work pulled from a shelf in the British Museum, Woolf bluntly enjoins readers,

Do not start. Do not blush. Let us admit in the privacy of our own society that these things sometimes happen. Sometimes women do like women.

'Chloe liked Olivia,' I read. And then it struck me how immense a change was there. Chloe liked Olivia perhaps for the first time in literature.<sup>8</sup>

Woolf's exegesis of the fictitious 'Life's Adventure' by Mary Carmichael continues with a range of musings about the rareness with which women in fiction have been represented as one another's friends, but the erotic teasing of the initial passage is suddenly much reduced and then wholly suspended. The imagined novel continues: 'Chloe liked Olivia. They shared a laboratory together', and Woolf, reading on, discovers that 'these two young women were engaged in mincing liver, which is, it seems, a cure for pernicious anaemia: although one of them was married and had—I think I am right in stating—two

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<sup>4</sup> Virginia Woolf, *The Diary of Virginia Woolf*, ii: 1920–1924, ed. Anne Olivier Bell, with Andrew McNeillie (London 1978), 121–2, entry for 2 June 1921. On their correspondence see, for example, Woolf to William Vaughan, 18 Apr. 1930, in Virginia Woolf, *The Letters of Virginia Woolf*, iv: 1929–1931, ed. Nigel Nicolson & Joanne Trautmann (New York 1978), 158.

<sup>5</sup> The damning verdict came in a 13 May 1926 diary entry, the more positive appraisal on 8 Nov. 1928: Virginia Woolf, *The Diary of Virginia Woolf*, iii: 1925–1930, ed. Anne Olivier Bell, with Andrew McNeillie (London 1980), 85, 205–206.

<sup>6</sup> *Ibid.* 250, entry for 2 Sept. 1929. Woolf noted that Vaughan had visited the previous weekend, and she also took note of Vaughan's engagement announcement in *The Times* a year later, 20 Aug. 1930, 312.

<sup>7</sup> Virginia Woolf, *A Room of One's Own* (1929; New York 1957), 85–8.

<sup>8</sup> *Ibid.* 86.

small children.<sup>9</sup> But Woolf is not done with the two friends or content to leave readers in the rather off-putting proximity of minced liver; she restores a frisson of excitement, even eroticism, to the scene:

For if Chloe likes Olivia and Mary Carmichael knows how to express it she will light a torch in that vast chamber where nobody has yet been. ... And I began to read the book again, and read how Chloe watched Olivia put a jar on a shelf and say how it was time to go home to her children. That is a sight that has never been seen since the world began, I exclaimed.<sup>10</sup>

In his reconstruction of the manuscript drafts of the 1929 essay, literary scholar S. P. Rosenbaum discovered that Woolf in the end chose to take a few steps back from the entrance to 'that vast chamber'. The earlier version toys with her audience: '<I read> She—said "Chloe liked Olivia; they shared a —"/<the words came at> the bottom of the page; the pages had stuck.'<sup>11</sup> Woolf continues, but now on a far more sinister path than the final published essay offered:

while  
fumbling to open them there flashed into my mind  
the inevitable policeman; the summons; the order to attend  
the court; the dreary waiting; the Magistrate coming in  
with a little bow; the glass of water; the counsel for the  
prosecution; for the defense; the verdict; this book is  
called obscene; & flames rising, perhaps on Tower Hill,  
as they consumed <that> masses of print paper. Here the  
pages came apart. Heaven be praised! It was only a  
laboratory. <Chloe & Olivia> They were engaged in mincing liver  
which is  
apparently a cure for pernicious anaemia.<sup>12</sup>

Rosenbaum reminds his audience that at the time Woolf composed her essay, the shadow of the November 1928 obscenity trial in the UK and banning of Radclyffe Hall's *The Well of Loneliness* loomed large.<sup>13</sup> Woolf's own 1928 *Orlando* or the short story 'Slater's Pins Have No Points' (also titled 'Moments of Being') escaped the fate of Hall's novel, but her draft reference to Tower Hill, infamous as the execution ground by the Tower of London, lent the passage a

<sup>9</sup> Ibid., 87.

<sup>10</sup> Ibid., 88.

<sup>11</sup> S. P. Rosenbaum, *Virginia Woolf: Women & Fiction: The Manuscript versions of A Room of One's Own* (Oxford 1992), 114, quoting from the Monks House manuscript. I retain his transcription of Woolf's holograph insertions and excisions here.

<sup>12</sup> Ibid.

<sup>13</sup> Ibid., xviii-xix.

spectacularly ominous cast. (Woolf, it would appear, had caught a case of the Sapphic jitters.)

The impression that Woolf modelled some piece of this interlude invoking female scientists on Janet Vaughan is inescapable. Indeed, later in life Vaughan herself—with some apparent pride—confirmed the connection, and recalled that her Bloomsbury relation had lent her kitchen equipment to carry out her research on liver extract.<sup>14</sup> We can verify that the young scientist worked to replicate clinical experiments first carried out in the United States on the diagnosis and treatment of pernicious anaemia—then a hotly debated subject in medicine that had also caught the attention of Britain's Medical Research Council (MRC).<sup>15</sup> Her liver extract work first appeared in a leading British medical journal in the spring of 1928, followed by many subsequent publications (including a book surveying the entire field).<sup>16</sup> We do know that Vaughan initially experimented on dogs (probably bled to produce some form of anaemia). She then evidently tested her laboriously produced liver extract on herself—self-experimentation remained in the repertoire of British medico-scientific experiments well into the interwar years—before receiving permission to conduct a trial on actual patients at London's University College Hospital, where she worked.<sup>17</sup> Pernicious anaemia remained an often fatal illness, still poorly understood.<sup>18</sup> Vaughan's research at the hospital demonstrated that other forms of anaemia and their treatment remained puzzles, and she continued this work in part for the MRC.<sup>19</sup> We also know that she did not yet have a husband and two children at home in 1929, but are left in the dark about

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<sup>14</sup> 'Janet Vaughan', Polly Toynbee interview in Leonie Caldecott (ed.), *Women of Our Century* (London 1985), 112–13. Vaughan also recalled, 'She was very kind to me when I came to London, always interested in what I was doing ... she was always fascinated by facts and information.'

<sup>15</sup> Pernicious anaemia is a blood disorder characterised by a decrease in red blood cells. The pages of *The Lancet* attest to the widespread investigation of the disease on both sides of the Atlantic in the late 1920s. See, for example, 'An Inquiry into the Results of the Liver Treatment of Pernicious Anaemia', *The Lancet* ii (28 April 1928), 872–9, with contributions by a group of clinicians working at various hospitals, including Vaughan.

<sup>16</sup> Janet Vaughan, 'Twenty-five cases treated at University College Hospital, London', *The Lancet* i (28 April 1928), 875; Janet Vaughan, 'Investigation of a Series of Cases of Secondary Anaemia Treated with Liver or Liver Extract', *The Lancet* i (26 May 1928), 1063–6.

<sup>17</sup> Caldecott 1985, 112–13. On self-testing, see Wellcome Library, London (WL), GC/110/1, I. M. Gaddum & Sir John Honour, notes and reminiscences on Sir Thomas Lewis.

<sup>18</sup> For a critical account of the role of technologies in shaping the discourse around diagnosis and treatment of this and other anaemias, see Keith Wailoo, *Drawing Blood: Technology and Disease Identity in Twentieth Century America* (Baltimore 1997).

<sup>19</sup> Vaughan, 'Investigation', 1063–6. See Maxwell Finland & William B. Castle (eds.), *The Harvard Medical Unit at Boston City Hospital, ii: An Autobiography* (Boston 1983), 111; Maureen Owen, 'Dame Janet Maria Vaughan, DBE, 18 October 1899–9 January 1993', *Biographical Memoirs of Fellows of the Royal Society* 41 (1995), 486.

whether there was ever an 'Olivia' in her London orbit.<sup>20</sup> Woolf arguably came up short in imagining the pathology laboratory of the late 1920s, concocting an idealized and relatively safe space devoid of patients, test animals, or the obstacles imposed on young female researchers who resided on a low rung of the hospital ladder.<sup>21</sup> But it hardly matters. Olivia survives as a teasing literary device for Woolf: it prompts us to think about what we can and can't say, and serves as a kind of pleasing puzzle for thinking about interwar scientific communities and incubators for female friendship. And we know that Janet Vaughan left the text to write her own, lighting a torch in a chamber that was indeed vast, albeit far from empty and far from benign.

### *The voyage out*

The flesh and blood Vaughan literally put an ocean between Woolf's England and her own story at almost the exact moment that *A Room* appeared in the autumn of 1929.<sup>22</sup> The young doctor and junior clinical pathologist, competent and 'disinterested', had secured a year-long fellowship—bankrolled by the Rockefeller Foundation—at an elite medical research facility in Massachusetts, the Thorndike Memorial Laboratory at Boston City Hospital, which had ties to Harvard Medical School. She set sail from Southampton on 28 September on the SS *Samaria*, arriving in the port of New York on 7 October.<sup>23</sup> Her voyage out was inauspiciously sandwiched between the late September crash of the London Stock Exchange and the Wall Street collapse in late October. The effects of the growing economic crisis on her life and work remain unclear, for what Vaughan chose to recall of this year was the brilliant mentoring she received, particularly from the lab's long-time director and future Nobel laureate, Professor George R. Minot. Minot and Vaughan remained close friends in the decades that followed.<sup>24</sup>

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<sup>20</sup> Monks House draft in Rosenbaum, *Virginia Woolf*, 117, included the parenthetical remark, '(Olivia was a medical student before she married, & has now come back to some form of research work)'.

<sup>21</sup> See Owen 1995, 488; Polly Toynbee, 'Appreciation: Janet Vaughan', *The Guardian* (13 Jan. 1993), 7. One could probably have counted the number of female science researchers in this field on one hand. They included Lucy Wills, who after a long period of work in Bombay (Mumbai) returned to London; she was not strictly speaking a pernicious anaemia specialist.

<sup>22</sup> The book was issued at roughly the same time by the Hogarth Press in England and the Fountain Press or Harcourt, Brace & Co. in New York.

<sup>23</sup> U. S. National Archives, Washington, DC, T715, Passenger and Crew Lists of Vessels Arriving at New York, New York, 1897–1957.

<sup>24</sup> The celebratory accounts of the Thorndike laboratory skate over any particular difficulties that may have risen from the world financial catastrophe. Minot's 1934 Nobel in Physiology and Medicine was shared with two other American men in the field, Minot's co-author of an influential 1926 paper, William P. Murphy, and George H. Whipple in Rochester. On the creation of the lab, see Francis Minot Rackemann, *The Inquisitive Physician: The Life and Times of George Richards Minot, AB, MD, DSc* (Cambridge, MA, 1956), 162–3, 168. (Rackemann was George Minot's cousin.)

In Boston as in London, Vaughan would have crossed paths with few rising or eminent female scientists. If our knowledge of her own experience of lab culture remains sketchy, we learn from histories of the Thorndike that about four hundred young male doctors had been trained at the lab, chiefly under Minot's guidance and tenure, from the autumn of 1923 to his resignation in 1949—and just three women.<sup>25</sup> She undoubtedly encountered the lab's long-time assistant research physician (from 1923 to 1933), Gulli Lindh Muller, a Swedish native, or the chemist Mrs Ouida C. Montague, an expert in blood examinations.<sup>26</sup> But Vaughan's later recollections left the skewed sex ratio unremarked upon and instead gave every indication that she found Thorndike to be what historian Keith Wailoo has described as a liberating environment, uniquely conducive to scientific research and discovery.<sup>27</sup> Her account of that year—written in 1983, half a century later—makes clear how heady and exhilarating her stay at the elite research facility proved to be. 'It was a time of intense activity and discovery in many aspects of clinical medicine', she recalled, 'more particularly in the Thorndike on the underlying causes of different types of anaemia and of their treatment. Experimental techniques and quantitative methods were being employed in the ward, as well as in the laboratory. Clinical science was in action ... to me George Minot will always stand as *the* great physician.'<sup>28</sup> She makes no mention of the backdrop of the growing Depression or what must have been a male club atmosphere at the lab, instead punctuating her account with some affectionate levity.

It was first proposed that I should do some experimental work using rats. The rats, though ordered, did not arrive.... So I turned my attention to pigeons. The pigeons were always escaping, and I chased them up and down the long Thorndike corridor with a broomstick. Looking back on my Thorndike year, I don't think the pigeons produced any significant results.... but what a training in the relatively new methods of clinical science I received!<sup>29</sup>

Janet returned to England nearly eleven months later, arriving home on the RMS *Mauretania* on 19 August 1930.<sup>30</sup> Rather than remaining at the Thorndike

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<sup>25</sup> Rackemann 1956, vii, 246–7. A handful of further women contributed to a symposium volume honouring Minot's lifetime work—including Lucy Wills in London—but it remains unclear how many had spent time at the Thorndike.

<sup>26</sup> For Muller, see Finland & Castle 1983, 23; on Montague, see Rackemann 1956, 130–1.

<sup>27</sup> Wailoo 1997, 118–20.

<sup>28</sup> Vaughan, in Finland & Castle 1983, 111. Vaughan echoed these sentiments in a letter she sent to his wife Marian upon his death: 'I count it always as my greatest richness that I worked at the Thorndike in its most active days, and that I was trained to work by such a scholar as George Minot.... Whatever we have done since then has instinctively been measured against his standards' (quoted in Rackemann 1956, 249).

<sup>29</sup> Vaughan, in Finland & Castle 1983, 111–12.

<sup>30</sup> The National Archives of the UK, Kew (TNA), Board of Trade: Commercial and Statistical Department and successors: UK and Ireland, Incoming Passenger Lists, 1878–1960.



for an additional year, she chose to get married in London and soon bore two daughters. Yet her research on anaemia continued, and she penned an authoritative overview of the field that was published in 1934 and updated in a 1936 edition.<sup>31</sup> She accepted a staff post as a clinical pathologist at the new British Postgraduate Medical School in Hammersmith, where she built up the haematology section of the pathology department.<sup>32</sup> The ties she had forged to Minot remained strong; apart from maintaining a correspondence with him over many years, she greeted his travel party at the port in Britain when he was en route to Sweden to collect his Nobel. But she had by then found mentors and collaborators closer to home, including the eminent pathologist Gordon Wilkinson Goodhart, who had advised her even before her American sojourn and to whom she dedicated both editions of her first book, *The Anaemias*.<sup>33</sup> She also began to receive an education in the medical demands of war.

### *Blood and war*

A politically engaged socialist while also watchful for new developments in haematology, Vaughan lent support to the Committee for Spanish Medical Aid and used these contacts to learn from Republican doctors how blood had been stored and deployed to treat casualties in the Spanish Civil War. The pioneering doctor and haematologist Federico Durán-Jordà had set up an effective wartime blood transfusion centre in Barcelona to treat the wounded, and Vaughan and some of her colleagues could draw on his expertise after he fled to London. With a new European war looming on the horizon, the group created a medical committee in 1938 to explore a national blood storage and transfusion system, which the MRC agreed to implement in 1939 after an initial cost analysis.<sup>34</sup> During the war years Vaughan herself took charge of the North West London Blood Supply Depot, collecting and storing blood supplies for London hospitals, air-raid casualties, and the military, also testing new blood

<sup>31</sup> Several contemporaries wrote similar overviews, since the subject had become very topical, including Edinburgh physicians (Leybourne) Stanley Davidson and George Lovell Gulland in their *Pernicious Anaemia* (London 1930), and one by some of her old colleagues at the Thorndike: William Bosworth Castle & George Richards Minot, *Pathological Physiology and Clinical Descriptions of the Anemias*, ed. Henry A. Christian (New York 1936).

<sup>32</sup> 'Obituary: Dame Janet Vaughan. Vital nuclear detective', *The Guardian* (11 Jan. 1993); Vaughan, in Finland & Castle 1983, 112.

<sup>33</sup> Oxford University Press published the book in 1934 and a second edition in 1936; a colleague, Hubert M. Turnbull, penned a section of notes for the volume. On Vaughan's medical training in London in the 1920s and posts in London in the 1930s, see Owen 1995, 485, 488–90.

<sup>34</sup> *Oxford Dictionary of National Biography*, s.v. 'Vaughan, Dame Janet Maria (1899–1993)' by Richard Doll (Oxford 2004), 183–5; Vaughan, in Finland & Castle 1983, 112–13; Sybil Oldfield, *Women Humanitarians: A Biographical Dictionary of British Women Active between 1900 and 1950* (London 2001), 254–5. Oldfield writes that Vaughan and her husband gave refuge to the former director of the Barcelona blood bank.

plasma products.<sup>35</sup> Set up in a social centre next to its bar in Slough, the industrial town just west of the capital—with Wall's ice cream vans requisitioned to transport blood and transfusion equipment—her new workspace was less than ideal, but provided a source of volunteers and drivers at short notice.<sup>36</sup>

While conducting research on how better to preserve the shelf life of blood reserves, she and her colleagues and staff at the blood depots also demonstrated heroic improvisation in a London under siege, rushing through darkened streets to help injured bombing victims.<sup>37</sup> The war brought additional professional recognition and responsibilities; she served as a consultant on a host of studies and committees assessing the challenges of caring for repatriated POWs and the state of civilian health under wartime rationing. She was sent to India in November 1944 as part of a team to evaluate medical education there, and late in the war was appointed to the Royal Commission on Equal Pay (1944–1946). Vaughan continued publishing for the medical research community throughout the war, now in part reflecting her new work in blood transfusion, products, and storage.<sup>38</sup> Her next major assignment would demand even more wherewithal. Shortly before the end of the war, the MRC at the behest of the 21st Army Group induced her to cross the Channel to assess treatments for starvation cases among liberated POWs in Belgium. (She and her colleagues were meant to gauge the effectiveness of various substances for their later use on British soldiers released from Japanese camps.<sup>39</sup>) In particular, they were asked to test a new therapy for extreme starvation cases, protein hydrolysates.<sup>40</sup> Vaughan arrived with a team consisting of the respected

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<sup>35</sup> Douglas Starr, *Blood: An Epic History of Medicine and Commerce* (New York 1998), 81–7. Men such as John Freeman Loutit and Patrick Mollison, also active in administering and conducting research at the wartime Sutton Blood Depot, went on to test emergency feeding methods for starving populations across the Channel in the spring of 1945, Loutit with a team in the Netherlands and Mollison at Belsen.

<sup>36</sup> Caldecott 1985, 116–18.

<sup>37</sup> Details emerge in Owen 1995, 491–2; Starr 1998, 90–1; and cf. Alan W. Craft, 'Patrick Mollison CBE, 17 March 1914–26 November 2011', *Biographical Memoirs of Fellows of the Royal Society* 68 (2020), 319–20.

<sup>38</sup> Janet Vaughan, 'War Surgery of the Extremities: Blood Transfusion', *British Medical Journal (BMJ)* 2 (4 July 1942), 19–21; ead., 'Transfusion of blood and blood derivatives under emergency conditions', *Journal of the American Medical Association (JAMA)* 123 (18 Dec. 1943), 1020–5; J. Vaughan, M. Thomson & M. Dyson, 'Blood picture and plasma protein level following injury', *Journal of Pathology & Bacteriology* 58 (Oct. 1946), 749–65.

<sup>39</sup> TNA, FD 1/6995, Note and press release [F. H. K. Green]. The press release issued by the MRC in early June 1945 declared, 'The results of their work, in conjunction with the experience gained in the application of the F. (famine) treatment in liberated Holland, will be of great value for the treatment not only of the remaining occupants of European concentration camps and other persons suffering from malnutrition in liberated countries, but also of those who may be recovered from concentration camps from the Far East.' Another mostly British medical research team had been deployed to the Netherlands at the close of the war.

<sup>40</sup> One version of protein hydrolysates had been used in the Bengal famine, but 'a carefully controlled investigation was not possible'. See oral report of D. P. Cuthbertson (of the MRC), in

biochemist Rosalind Pitt-Rivers and Charles E. Dent, a rising young chemistry researcher with a medical degree.<sup>41</sup> We now find ourselves a long way from Mary Carmichael's 'Life's Adventure' or Woolf's serene laboratory room.

*The torch drops: Belsen as laboratory*

Vaughan's MRC team failed to find the extreme starvation cases they expected among former POWs recuperating in army hospitals in Belgium and decided in short order to continue on to the recently liberated Bergen-Belsen concentration camp in northwest Germany.<sup>42</sup> The scenes that followed the freeing of the camp by British and Canadian forces have been described a hundred times, recounted publicly and privately by the soldiers present, their officers, by war artists commissioned to accompany the military to record the battlefields of 1945, and by members of the medical teams hurriedly deployed across the Channel (including nearly a hundred volunteer medical students from London).<sup>43</sup> Discovering thousands of unburied dead and a severely emaciated population of camp prisoners close to death on 15 April, army and volunteer medics and relief organization staff worked for months on end to keep survivors alive in the face of raging typhus epidemics and extreme debilitation.<sup>44</sup>

Confronted with masses of desperately ill and starving prisoners shortly after the camp's liberation, Vaughan declared privately, 'I am here - trying to do science in hell' to a friend back in England. 'A stench of faeces & rags, rubbish heaps & dead bodies hangs heavy in the air - Dead bodies of men, women & children lie about in heaps along the road side & among the fine trees - In the huts the dead & the living lie in heaps together - from such heaps my patients come - Poles & Russians, French & Dutch, Czechs & Hungarians, men & women, children & pregnant women & infants.' The horror unspooled further and further: 'At night a cart comes round in the sunset to collect the nameless

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<sup>41</sup> 'Discussion: The Physiology and Treatment of Starvation', *Proceedings of the Royal Society of Medicine* 38 (May 1945), 388-98, here 392.

<sup>42</sup> Dent had been called up early in the war and sent to France before being evacuated from Dunkirk. Later in the war he assessed 'secret writing' for the intelligence services and in 1944 was appointed to a medical school unit in London under Harold Himsworth. See A. Neuberger, 'Charles Enrique Dent, 25 August 1911-19 September 1976', *Biographical Memoirs of Fellows of the Royal Society*, 24 (London 1978), 15-31.

<sup>43</sup> The exact chain of decision-making that led to this move is not entirely clear to me.

<sup>44</sup> Canadian artists at Belsen included Aba Bayefsky and David Alexander (Alex) Colville and the British artists included Doris Zinkeisen.

<sup>45</sup> On mortality rates at the camp complex, see Hagit Lavsky, *New Beginnings: Holocaust Survivors in Bergen-Belsen and the British Zone in Germany, 1945-1950* (Detroit 2002), 39. Her book remains a testament to liberated prisoners' own efforts to defend their interests.

dead - we bury them 5000 at a grave - Many of them in the past intellectuals of great charm ... here we have lost all sense of time.<sup>45</sup>

As notes on her research suggest, the team focused on reviving a small, handpicked group of adult male survivors suffering from advanced starvation by comparing alternative or rival therapies and scrutinizing their changing blood profiles.<sup>46</sup> That work was carried out in the midst of a rescue operation hampered by severe staff shortages, epidemic illnesses, primitive facilities, and not least the stubborn problem of only limited medical knowledge about how to revive such patients on the brink of death. 'The water supply often gave out and then the hospital depended on a cart that might or might not come. Hot water we boiled up ourselves on a rather dilapidated primus stove. For a week there was no artificial light except candles in the investigation ward.' Patients were terrified of any interventions involving needles or 'other apparatus'.<sup>47</sup> Although she would honour the research assignment given to her in London, she also voiced her elemental moral discomfort to a number of her close friends, irrespective of her designated 'goal'—a scientific investigation. Prudence Smith, writing on the occasion of Vaughan's memorial service in 1993, also recalled,

Suitable patients [at Belsen] had to be selected from the many thousands, treated, minutely observed and reported on and their cases written up into a detailed scientific report. I remember her speaking of the distress and embarrassment that her team felt upon arrival when some of the military and medical personnel who were already on the scene greeted them as though they were bringing 'help'—a magical solution of some kind, a longed-for instant or large-scale relief to the masses of the starving and the dying.<sup>48</sup>

Vaughan's friend of many years, George Minot, tried to offer some solace after she wrote to him from the camp that 'it seems so impertinent to try to get history from the former German prisoners'.<sup>49</sup> For Vaughan, the discomfort applied not only to the other medical personnel at the scene, but—most radically—the survivor-patients, who often had no language in common with the team. She regretted she 'could not explain what we were trying to do' to those chosen for the tests. 'Many of them were people who had come to regard

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<sup>45</sup> Janet Vaughan to Molly Hoyle, 12 May 1945, in Pauline Adams (ed.), *Janet Maria Vaughan, 1899–1993: A Memorial Tribute* (Oxford 1993). The original is in the Somerville College Archive, Oxford.

<sup>46</sup> Janet Vaughan, C. Dent & R. Pitt Rivers, report on the value of hydrolysates in the treatment of severe starvation, in 'Discussion', 395–7. See also Caldecott 1985, 122.

<sup>47</sup> Vaughan, Dent & Pitt Rivers oral report, 'Discussion', 395.

<sup>48</sup> Prudence Smith, 'Appendix: Belsen', in Adams 1993, 34.

<sup>49</sup> Francis A. Countway Library of Medicine, Harvard University, Boston, MA, MC 538, box 3, folder 7, George R. Minot to Janet Vaughan, 10 May 1945.

the medical profession as men and women who came to torture rather than to heal.<sup>50</sup>

Vaughan was not alone in conducting some rudimentary research on this tragic 'patient pool'.<sup>51</sup> And many others at the scene, including her own team members, were haunted by the experience and their morally ambiguous remit for decades afterwards. Among them was a former blood depot colleague—a pioneer in transfusion—and since 1943 a member of the Royal Medical Corps, Patrick L. Mollison, who arrived slightly later than the MRC team and initially intended to join Vaughan's project. She left soon after he arrived, but he stayed on to obtain further data. In mid-May he reported to F. H. K. Green at the MRC that he would investigate the blood picture of starved survivors further and the value of casein hydrolysate in treating people who could not take much nourishment by mouth.<sup>52</sup> His optimism about carrying on this work faded quickly. Three weeks later he informed Green, 'I'm afraid that I have been unable to overcome the difficulties of this place and have produced very little of value.' Under the chaotic conditions prevailing in the wards at the liberated camp, the idea of research had been 'extremely unpopular' from the outset, and met with resistance from the medical director of the camp—'and it was made clear to me that I should have to help to some extent with the clinical work.' With persisting staff shortages, mortality rates remained 'appalling'. Although he had completed several dozen blood exams on survivors, his assistants in the lab were inexperienced and his 'patients' manifested many diseases that complicated comparative work. Eight weeks after the camp was liberated, only a few cases of extreme famine remained.<sup>53</sup>

By mid-June Mollison asked to be recalled to England, complaining in a letter to Vaughan, 'I have been feeling pretty miserable about my work here.

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<sup>50</sup> WL, GC/186/7, 'Experiences of Belsen Camp', 1.

<sup>51</sup> Not all of the parallel investigations were staged to reach a verdict on therapies for starvation and the viability and practicality of hydrolysates. In the first few months, medical reporting on the liberated camp included (not an exhaustive list): G. Raperport, 'Expedition to Belsen: An Account of the Experience and Findings of the Eight Middlesex Hospital Students Who Took Part', *Middlesex Hospital Journal* 45 (1945), 21–4; J. R. B. Dixey, 'Belsen', *St Bartholomew's Hospital Journal* 49 (1945), 76–81; Alan MacAuslan, 'Belsen, May 1945', *St Thomas's Hospital Gazette* 43 (July 1945), 103–107; F. M. Lipscomb, 'Medical Aspects of Belsen Concentration Camp', *The Lancet* ii (8 Sept. 1945), 313–15; M. Nirembeski, 'Psychological Investigation of a Group of Internees at Belsen Camp', *Journal of Mental Science* 92 (1946), 60–74; M. H. F. Coigley & J. Stephenson, 'Starvation and its Treatment with Protein Hydrolysate: Belsen, 1945', *St Thomas's Hospital Gazette* 44 (Feb. 1946), 2–9; and W. R. F. Collis & P. C. MacClancy, 'Some Paediatric Problems Presented at Belsen Camp', *BMJ* 1 (23 Feb. 1946), 273–5. For a discussion of the 'research opportunities' at the camp, cf. Mark Celinscak, *Distance from the Belsen Heap: Allied Forces and the Liberation of a Nazi Concentration Camp* (Toronto 2015), 172–3.

<sup>52</sup> TNA, FD 1/6995, P. L. Mollison to Dr F. H. K. Green, MRC, London School of Tropical Medicine, 14 May 1945.

<sup>53</sup> TNA, FD 1/6995, Patrick Mollison to Dr [F. H. K.] Green at the MRC, 8 June 1945. A note at the bottom of the letter suggests that Green may have attempted to send him a case of 'Indian hydrolysate' to work with in response (unconfirmed).

On the whole I've made a mess of it but you've almost succeeded in persuading me that there may be something worth while to be extracted from the ruins. I've made so many mistakes that I hardly know where to begin in describing them.' He was persuaded to spend a great deal of time 'doing ordinary ward work', which hindered his further research efforts. Furthermore, he allowed medical students recruited to the project to keep the notes on cases, and these proved 'hopelessly incomplete'. With 'hosts of doctors who go round ordering new treatment every day and friends [bringing] bilberries at night... I just haven't any reliable data.'<sup>54</sup>

These difficulties notwithstanding, we learn from a posthumous biography that Mollison dutifully published his findings in the *British Medical Journal* in early 1946.<sup>55</sup> 'Although his experience must have had a profound effect upon him, he never talked about it either with colleagues or family. In later life he confided to his second wife that he was quite ashamed of the *BMJ* paper as, in retrospect, it came across as very cold emotionally.'<sup>56</sup> The second female member of the Vaughan team, the biochemist Rosalind Pitt-Rivers, was likewise ill-prepared for the challenges of the liberated camp—indeed, how was preparation even possible—and found the experience hard to dislodge. Sketching an account of her life in 1994, J. R. Tata concluded, 'On numerous occasions for the rest of her life she recounted her shock at seeing the inmates and witnessing the painful recovery of the fortunate few. She told her friends that this terrible episode turned her into a heavy smoker, for which she was to pay a high price with her health 25 years later.'<sup>57</sup>

We have an even more detailed account—albeit written after some time had lapsed—by Vaughan's team member Charles Dent. In the mid-1960s, he looked back on the awkwardness of the team's position, somewhat self-consciously reflecting on 'how standards can change in different situations'.<sup>58</sup> They were welcomed to the camp by an artillery regiment and field ambulance personnel, whose 'first joy at hearing some more doctors were coming rather evaporated when we said we were going to do research and to care for only four patients at a time. After some chilly moments they did their duty and gave us a quick tour of the camp and a description of its problems.'<sup>59</sup> An artillery officer did triage, with 'Those apparently dying who were left, those very ill who looked as if they could be saved by quick medical measures, and those

<sup>54</sup> WL, GC/186/7, P. L. Mollison to Janet Vaughan, June 1945.

<sup>55</sup> P. L. Mollison, 'Observations on Cases of Starvation at Belsen', *BMJ* 1 (5 Jan. 1946), 4–8.

<sup>56</sup> Craft 2020, 321–2. While not wholly sympathetic, the *BMJ* report indicates that he made some effort to register patients' food preferences.

<sup>57</sup> J. R. Tata, 'Rosalind Venetia Pitt-Rivers, 4 March 1907–14 January 1990', *Biographical Memoirs of Fellows of the Royal Society* (London 1994), 326–48, here 332. Pitt-Rivers went on to great success in her postwar scientific work, as did Dent. For the 'afterlives' of Allied medical personnel at Belsen, see Ben Shephard, *After Daybreak: The Liberation of Belsen, 1945* (London 2005), 177–89.

<sup>58</sup> C. E. Dent, 'Belsen, 1945', *University College Hospital Magazine* 49 (1966), 19.

<sup>59</sup> *Ibid.* 15.

who were relatively well and who we could afford to keep waiting ... The camp with 60,000 inmates, about half of whom eventually died, took a month to clear up in this way.<sup>60</sup> His account of his own team, dressed in Red Cross uniforms, quickly grows scathing, and he remembers them 'obviously not concerned with the main business on hand, for they were doing nothing useful and were only briefly examining the patients and asking a few questions.'<sup>61</sup>

Vaughan flew back to England shortly after VE day, taking charge of a planeload of casualties, and almost immediately reported on the results of her team's findings in Belsen to her taskmasters at meetings and conferences in London.<sup>62</sup> Their conclusions were also published quickly, appearing as conference summaries in major British medical journals in May and June 1945.<sup>63</sup> Even if the trial treatments of concentrated liquid protein had worked well (they did not), her team's work neither warranted a heroic narrative, nor did she offer one.<sup>64</sup>

While a variety of medical investigations were carried out among survivors at Belsen, historians have continued to discuss the ethics of human subject research in such a setting by focusing on Vaughan's team in particular.<sup>65</sup> Others have skated over questions of patient consent and exploitation, crediting Vaughan with changing the course of British military preparations for the end of the war in Asia and elsewhere. Her advocacy of simple feeding with solutions of milk powder over intravenous protein substances in the wake of Belsen meant that 'thousands owed their lives to Janet Vaughan's ruthless

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<sup>60</sup> *Ibid.*, 14.

<sup>61</sup> *Ibid.* If he in retrospect was critical of Vaughan's working methods, her own account of their relationship at that time appears to have been quite backhanded, suggesting he spent his time performing chemical analyses in a small lab and remained uninterested in clinical medicine: 'I don't think he ever came to see any of the patients and the effect, or rather lack of effect, of the hydrolysates'. In later years, however, she saw him change 'from the chemist to the wise physician', quoted in A. Neuberger, 'Charles Enrique Dent, 25 August 1911–19 September 1976', *Biographical Memoirs of Fellows of the Royal Society* 24 (London 1978), 15–31, here 18–20.

<sup>62</sup> WL, RAMC 792/3/4, Report concerning the treatment of starvation to the War Office and MRC, 24 May 1945; WL, GC/186/7, 'Experiences of Belsen Camp', Inter-Allied Conference on Military Medicine, 4 June 1945; WL, RAMC 792/3/4, C. E. Dent, Rosalind Pitt Rivers & Janet Vaughan, 'Report on the comparative value of hydrolysates, milk and serum in the treatment of starvation, based on observations made at Belsen Camp', Protein Requirements Committee (MRC).

<sup>63</sup> Vaughan, Dent & Pitt Rivers oral report, 'Discussion', 395–7; and cf. 'Reports of Societies', *BMJ* 1 (9 June 1945), 819.

<sup>64</sup> Vaughan largely avoided platitudes about 'courage', although after her return to England she prefaced her presentation to the Royal Society of Medicine by praising the gallantry of the men and women who provided medical aid at the liberated camp. See Vaughan, Dent & Pitt Rivers oral report, 'Discussion', 395.

<sup>65</sup> On the use of Belsen and other liberated camps for 'opportunistic experimentation' see, for example, Paul J. Weindling, *Epidemics and Genocide in Eastern Europe, 1890–1945* (Oxford 2000), 395–8. Shephard 2005, 100, oddly claims that Vaughan felt disappointment: 'The failure of the new technique [the use of protein hydrolysates] was a particular blow to the leader of the Medical Research Council team'.

determination to discover the facts about the treatment of starvation' (per one obituary in *The Independent*).<sup>66</sup> From a distance of nearly eighty years, this prognosis remains difficult to assess.

We do know that she reported clearly that the hydrolysates—despite heavy wartime investment in them—were almost unequivocally a failure, and that much of her assessment drew on her direct experiences with what she called her patients. The meeting of medical experts on 29 May at the Royal Society of Medicine in London on the physiology and treatment of starvation in 'war-starved Europe' began with a viewing of two reels of film showing the conditions at liberated concentration camps; thus, perhaps, Vaughan's account received special attention.<sup>67</sup> Following a handful of other speakers, Vaughan informed the gathering that the new substances she had tested were not truly effective or usable. It may have been a losing battle. In mid-1945 the treatment of starvation cases remained an 'inexact science', a conclusion buttressed by a whole range of the leading scientists at the gathering who were advising or connected to the MRC. It quickly became apparent that many unknowns remained about these substances. Vaughan's team gave an account of their tests of both intravenously and orally administered products, including dried milk, and focused particularly on whether hydrolysates had proven effective and practical in treating severe starvation 'under field conditions'. Their blunt conclusion: 'The answer to both questions was in the negative.'<sup>68</sup> Patients' reactions to most of these therapies—often articulated with great verbal hostility—were central to this assessment. Yet fifteen months later, the MRC's Protein Requirements Committee, which had formed in March 1944 and during the war encouraged ramping up the manufacture of protein hydrolysates, had clearly opted for a rosier account of these substances and given them a future.<sup>69</sup>

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<sup>66</sup> 'Dame Janet Vaughan', *The Independent* (London) (23 Jan. 1993), 33. Her conclusions were also reported to the Director of Hygiene at the War Office. See TNA, FD 1/6995, Notes, 'Conference on Experience with the Use of Protein Hydrolysates in the Treatment of Starvation', London School of Hygiene, 5 June 1945.

<sup>67</sup> 'Discussion', 388–98. Parallel, very similar (more abbreviated) accounts appeared in 'Royal Society of Medicine: Protein Hydrolysates', *The Lancet* i (9 June 1945), 723–4, and 'Reports of Societies', 818–20.

<sup>68</sup> Vaughan, Dent & Pitt Rivers oral report, 'Discussion', 395.

<sup>69</sup> TNA, FD 1/6346, Draft report on the work of the Protein Requirements Committee, signed by H. Himsworth, 21 Sept. 1946. The MRC, anticipating domestic cases of extreme starvation, had already invested heavily in emergency stores of hydrolysate, 'ready for immediate use of headquarters in Whitehall and in the Regional Offices throughout the country'. See H. E. Magee's oral report in 'Discussion', 390, and cf. TNA, FD 1/6346, minutes of the confidential gathering on 13 August 1945, at which Vaughan and other scientists gave a negative verdict on intravenous hydrolysates to the Protein Requirements Committee (MRC) and 'no fewer than five pharmaceutical companies'. I have not been able to research the role of these companies further at this time. Himsworth, chairman of the committee, was already giving the substances a positive spin before the liberation of Belsen, despite some of their known side effects. See H. P. Himsworth, 'Protein Hydrolysates in Starvation' (letter to the editor), *The Lancet* i (31 March 1945), 416.



*Science in hell*

Vaughan's own story has been told and retold many times—in short biographies, interviews, and affectionate, laudatory posthumous tributes. Her appearance as a young woman in a Virginia Woolf text is mentioned as a tantalizing sidebar, and her post-war life at the helm of Somerville College and in Oxford serves as a final bookend.<sup>70</sup> Janet Vaughan herself told and retold the story of her brush with the mass carnage of Belsen in multiple ways.<sup>71</sup> Her efforts leave us with the fundamental question of how we might best narrate instances of mass violence and mass death. How do we illuminate those treacherous chambers, which lie at such a great remove from Woolf's imagined laboratory and her tale of two women thrilling with discovery? Vaughan could anchor her account of the concentration camp in the statistics, organizing principles, passive voice, and conventional strictures of medical reporting. Yet in the spring of 1945 she also ventured into a distinctly different territory, breathless and unscripted, such as in her letters to friends back home or across the Atlantic. Her descriptions of the camp join a near torrent of eyewitness accounts produced by military liberators, medics and survivors themselves—each with a horrified compulsion to hold on to the shock of the moment, each with the challenge of remaining plausible or of finding adequate words but often failing.<sup>72</sup> (One thinks of the jarringly awkward metaphors that Charles Dent offered up in the mid-1960s: he and the team found 'Most of the dead were out of the huts, laid out in long heaps awaiting collection, like sugar beets.'<sup>73</sup>) Over seventy-five years have passed since these events. Historians rarely do better, reaching into a relatively small grab-bag of typologies to describe Nazi violence and mass atrocities.

Janet Vaughan, producing books and a hundred-some articles over a long scientific career, was never a fully fledged Mary Carmichael, pushing the boundaries of conventional scientific writing. Nonetheless, Vaughan's formal medical reporting on Belsen briefly breaks with the detachment exhibited by many of her colleagues.<sup>74</sup> She gives her research subjects a voice in these texts;

<sup>70</sup> For example, Owen 1995, 481–98; Caldecott 1985; Patricia Fara, 'Battling for Life: The Wartime Work of Janet Vaughan', *The Lancet* ii (14 Sept. 2019), 910–11.

<sup>71</sup> Historian Ben Shepard learned from one of Vaughan's daughters that she returned from Belsen full of rage and avoided talking about her experiences there until an interview when she was in her early eighties. See Shepard 2005, 184. However, Prudence Smith, 'Appendix: Belsen', in Adams 1993, 34–5, recalled that Vaughan, as the new principal of Somerville College, gave an evening address in October 1945 about her Belsen experiences.

<sup>72</sup> For an analysis of the parallel accounts by prisoners see, for example, Alexandra Garbarini, *Numbered Days: Diaries and the Holocaust* (New Haven 2006). It becomes clear from many summaries of medical work at Belsen after liberation that the British also turned to liberated prisoners who were trained medical and nursing personnel for help. For one account, see Hadassah Rosensaft, *Yesterday: My Story* (2nd edn, New York 2005).

<sup>73</sup> Dent 1966, 15.

<sup>74</sup> The report by an Irish doctor assisting the Red Cross shortly after liberation, W. R. F. Collis, was also an exception; in the face of severe staff shortages, Collis and British medical officers

she acknowledges that they and their rebukes were part of the equation: 'Patients who were brought into the ward where there was inevitably some apparatus about shouted "nicht crematorium". If a syringe was used to collect samples or an attempt made to set up an intravenous drip they again shrieked "nicht crematorium" and curled up shaking in the bed.' When it proved difficult to persuade patients to take oral hydrolysate because of its terrible taste, the team contemplated using a stomach or nasal drip to feed these men instead. 'The Belsen patients, however, regarded the tube as a new form of torture, and only two were persuaded to take it.'<sup>75</sup> One might argue that this doctor-scientist crouched on the floor of a barracks building in Germany in 1945—well-meaning yet sinister—had circled back to a central question in Woolf's essay, perhaps never left it. In peace and in the shadow of war, her work—on anaemia, blood preservation methods, the physiological progression of severe starvation in camp survivors, the effects of radiation on bone—addressed human need in the face of its gravest challenges: what do we need to survive and thrive? And here it is not at all clear that Vaughan, confronted with men teetering on the brink of death, had found an answer or quite grasped that fundamental problem.

There is more, for Vaughan's dilemma reaches back to Virginia Woolf's essay in another way: how do we tell our stories? Woolf flirts briefly with being prosecuted for obscenity, but her 'Mary Carmichael' is no Radclyffe Hall. Still, Woolf finds a teasing workaround that leaves desire between women a diminished but unmistakable presence in *A Room of One's Own*. Vaughan's dilemma is of a different order entirely. She struggles to give expression to what she has witnessed—and participated in—at the obscenity that was Bergen-Belsen in April 1945. She does more than give her Belsen subjects a voice, however. Even in the face of a formidable language barrier, she provides an unvarnished, uncensored account of their reactions to her presence. Doing so, she crosses a dangerous divide, admitting openly to the men and women gathered in the rooms of the Royal Society of Medicine on that day in late May

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worried about conscripting German doctors and nurses to help out with the survivors. The patients were 'naturally terrified of being looked after by Germans, even under supervision'. See W. R. F. Collis, 'Belsen Camp: A Preliminary Report', *BMJ* 1 (9 June 1945), 814–16, and W. R. F. Collis, 'Belsen Camp' (letter to the editor), *BMJ* 2 (1 Sept. 1945), 303.

<sup>75</sup> Of the three accounts of the May meeting in medical journals, the Vaughan, Dent & Pitt Rivers oral report, 'Discussion', 395–7, reveals these reactions in the greatest detail. *The Lancet* reporter's 9 June 1945 summary of Vaughan's contribution also offered, 'Hydrolysates given by mouth are so unpleasant that most patients seem to prefer to die rather than to go on taking them ... It could not be given by gavage [tube run through the nose or mouth] because of the dread of torture'. (Vaughan's oral report nonetheless ended on a slightly more equivocating note about the future usefulness of the products; see, for example, 'Royal Society of Medicine' 1945, 724.) For a photo of Vaughan at Belsen with a patient, see Weindling 2000, 405. Weindling has also flagged these ambiguous, uncomfortable encounters between her and the patients. Cf. his 'Human guinea pigs and the ethics of experimentation: The BMJ's correspondent at the Nuremberg medical trial', *BMJ* 2 (7 Dec. 1996), 1468.

that her Belsen patients saw her or cast her—a physician and scientist—as a killer. A Nazi killer. It remains unclear whether she had thought through this admission as ‘precisely & methodically’ as Woolf might have expected. The admission is striking, becoming an indictment of herself but perhaps, by extension, of all the scientists and medical professionals in the room—of how they interact with patients, how they pursue their research, how they compartmentalize pain and fear. It was their dilemma, too. Perhaps Vaughan was reminding them, deliberately or inadvertently: it was ‘their’ Belsen, too.

History, and journals such as the *American Historical Review* and *Journal of Asian Studies*.

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