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# Humanitarianism (Norway)

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Compared to Sweden and Denmark, the humanitarian contribution by the Norwegian Red Cross during the Great War was uneven and, overall, limited. There were two main reasons for this. One, from the early 1900s there had been a shift in the organization from concern with the wounded soldier to social needs in Norway, in particular the lack of hospitals and trained nurses. Two, when war broke out, the Norwegian Red Cross was heavily engaged in its own internal affairs of restructuring the organization. However, towards the end of the war the organization became engaged in tracing, sending parcels and receiving prisoners of war.

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## Introduction

On 15 August 1914, [Gustave Ador \(1845-1928\)](#), president of the [International Committee of the Red Cross](#) (ICRC), issued a statement to all the national [Red Cross](#) societies: "From today, the Red Cross is called to an intense labor of a kind never seen before. The needs will be immense, but the International Committee is firmly convinced that the charitable zeal of all our societies will rise to the

necessary devotion.”<sup>[1]</sup> However, in [Norway](#), Ador’s call met with mixed response. Initial enthusiasm and aid mobilization soon gave way to other, domestic priorities.

This article explores the humanitarian contribution by the Norwegian Red Cross (NRC) during the Great War.<sup>[2]</sup> The Norwegian Red Cross’ involvement in war relief was uneven and, on the whole, limited, although activities picked up in 1917. The article will furthermore attempt to explain the organization’s engagement at a time when many other countries in Europe, including Norway’s neighbors [Sweden](#) and [Denmark](#), were heavily engaged. Reasons for this partly introverted attitude can be found in the organization’s own priorities, which must be understood in a context of a general lack of interest in foreign affairs in Norway at the time. We should also bear in mind that from its founding in 1865 and until the early 1920s, the Norwegian Red Cross was a small association.

Membership grew slowly, from a few hundred in the late 1800s to 9,000 in 1920.<sup>[3]</sup>

Ador’s plea for a charitable zeal did strike a cord in Norway – at first. The autumn of 1914 saw the mobilization of several hundred women in the capital Kristiania (today Oslo), who came together in order to produce medical equipment. The Norwegian Red Cross and the Norwegian Women’s Public Health Association (*Norske Kvinnens Sanitetsforening*, NKS), both well respected [humanitarian](#) organizations, created a joint committee. With the aid of leading politicians, production facilities were organized, first in the Town Hall, later in the Parliament. The two organizations were widely trusted. Similar women-led production units appeared in several places all over the country. Individuals and associations donated money to the cause, as well as medical equipment and sanitary supplies such as shirts, towels, stockings, and bed linen.

By the end of 1914, the women had made more than one hundred thousand medical kits, each containing bandages, compresses, wadding, and handkerchiefs. Depots were crammed with all sorts of equipment – clothes, sheets, towels – that might be used to alleviate suffering in war. However, initial enthusiasm soon waned. The work continued into the beginning of 1915, then ceased. The products were apparently never sent anywhere. When a fire devastated the Norwegian town of Bergen in January 1916, most of the medical supplies and sanitary items were handed out to the fire victims.

Annual Norwegian Red Cross reports paid little attention to the war, mentioning it only briefly in short paragraphs. Apart from the early mobilization, there was not much Norwegian Red Cross activity to report anyway. Twenty Norwegian skiers in [Vogesen](#) in [France](#) assisted the French Red Cross in transporting wounded soldiers on sledges in areas with no roads. The Norwegian Red Cross announced that all requests to the NRC for information about dead, missing, or wounded soldiers would be forwarded to the Red Cross information bureau in Denmark.<sup>[4]</sup> A few Norwegian Red Cross [nurses](#) served at war hospitals in [Germany](#) and [Britain](#). These were, however, individual initiatives; the majority of these nurses were already working abroad when war broke out, and offered their services.<sup>[5]</sup> Not until the early months of 1917 did NRC interest in the war again pick up. There were several reasons for this lull. We will need to backtrack a bit to understand this reticence.

## An Inward Looking Organization

Adore's appeal reached the Norwegian Red Cross at a time when the organization was in the midst of a demanding reform period. Discussions about the need for organizational changes had been going on for several years. The institutional structure of the organization was unclear. The Norwegian Red Cross had since the 1890s consisted of the original association in the capital, often referred to as the "main society" (*Hovedforening*), and smaller branches elsewhere, with no defined relationship between the entities. Were the branches subordinate to the original association in the capital? Were they equal to it? What exactly was the role of the "main society"? The structure was clearly outdated and had little relevance to current demands, but any attempt to alter it created disagreement. The NRC executive board did not want to deal with the matter, and therefore established a special committee in 1912, leaving it to suggest a reform.

In 1915, after several years of discussions and disagreements, and on the basis of the committee's suggestions, the General Assembly voted in favor of sweeping reforms. The Norwegian Red Cross was turned into a full-fledged modern organization, with its headquarters in the capital and subordinate branches in other parts of the country. The reforms marked the end of the old association. Thus, both before and during the war, the Norwegian Red Cross was preoccupied with internal reforms. Europe's battlefields did not receive much attention. But there was also an ideological aspect that contributed to this introverted attitude.

## Preparedness for War or Social Work in Peacetime?

Since the early 1900s, leading actors in the Norwegian Red Cross had disagreed about the very nature of its national association. Should it save money in case of outbreak of war, in Norway or elsewhere, in line with traditional Red Cross preparedness thinking, or should it spend money on humanitarian work in peacetime and in Norway?

From its very foundation in 1865 and until the early 1890s, the Norwegian Red Cross had been a small association, marginal and keeping a low profile. The founders' main task was to manage a slowly growing fund. The organization's laws stipulated that money should be saved, not spent. This, in effect, meant doing little, because doing anything cost money, and since there was no war in Norway, there was no need to drain the funds.

By 1890, partly because of a request from the international committee in Geneva to find out what exactly the Norwegian Red Cross had been doing for the first twenty-five years of its existence (there was not much to report), the association decided to break out of passivity and engage in humanitarian activities on the domestic front. In 1892, the laws were changed to allow for spending money in peacetime.

These legal changes signalled a stronger concern with domestic issues. The organization began to educate nurses as part of a crisis preparedness scheme, which itself was prompted by a national lack of nurses, rather than to the need for nurses in war. There was little interest in what was going

on outside Norway. Significant spokespersons raised cries of alarm, and pointed out that the Red Cross' introverted attitude meant that it was deviating from its basic mandate. By concentrating on national tasks, it was no longer true to its original ideology: the rescue of wounded soldiers on the battlefields. These spokespersons called for a stronger and clearer Red Cross integration with the national military medical service, and even more so after the outbreak of war in Europe in 1914.

Two prominent Red Cross personalities in these debates were Hans Daae (1865-1926) and Hans Jørgen Darre-Jenssen (1864-1950). Daae held no formal positions in the Red Cross, but he was head of the army medical corps, as well as a Red Cross member and enthusiast. It was obvious to him that now that war had come, it was time for the Red Cross to act according to its mandate and origin and show its solidarity with the war victims on the battlefields of Europe. The NRC was, after all, part of an international organization and movement, founded after Henry Dunant's (1828-1910) experiences of providing unconditional help to wounded soldiers in Solferino in 1859. As Daae saw it, the NRC ought to be an integral part of the army's medical service, and offer its services through this institution. The fact that Norway was neutral and had no role in the war was of no importance to him, since Red Cross ideas transcended national borders.

Darre-Jenssen, president of the Norwegian Red Cross, saw things differently. He did not think the Norwegian organization should have any commitments outside of Norway. When war broke out, the Red Cross in Kristiania (the original Red Cross society or "main society") was in the midst of completing a major construction project, the building of a large urban hospital. The completion of the hospital illustrated an important ideological shift which had been evident since the 1890s: Increased emphasis on domestic humanitarian tasks. As the Red Cross directed energy and resources to activities in Norway, more specifically to providing better hospital service and educating nurses, the original defining idea of preparedness for war receded into the background.

The Red Cross had educated nurses since the mid 1890s, but had no proper hospital. The absence of hospitals was a recurrent topic in the early 1900s among the inhabitants of Kristiania, where a Red Cross clinic had been planned since the turn of the century. Thanks to public and private donations, the Red Cross could embark on a large building project, a major undertaking for a small association. Local authorities enthusiastically supported it. When the hospital received its first patients in 1916, it was an occasion for celebration and joy. The Norwegian authorities congratulated the Red Cross for its achievement.

Darre-Jenssen was not primarily concerned with the needs of the city's poor, but with the absence of proper medical care for those who could pay for it. Existing care institutions were often staffed with unqualified personell. Well-off patients asked for trained nurses, who could give them "civilized care." The new clinic would be staffed with educated nurses, who would have the latest hospital equipment at their disposal. The completion of the hospital added to Darre-Jenssen's firm conviction that the Red Cross should concentrate its energy on the capital's pressing needs rather than on the battlefields of Europe.

The president, in contrast to Daae, had a local outlook. He was not interested in linking the Red

Cross to the military medical service, nor did he want the Red Cross to have obligations to the army or to national defense. Above all, he did not think the NRC had, or should have, any international commitments. Although he might in principle agree with Daae that his organization's efforts to alleviate the situation for Europe's war victims were hardly spectacular, he argued that domestic concerns should come first. Darre-Jenssen regarded Daae's suggestion of greater Red Cross involvement as meddling in internal affairs, and pointed out that the army chief had no business in dictating the Red Cross' course and priorities.

In 1915, the NRC celebrated its 50<sup>th</sup> anniversary. The celebration was muted and barely commented upon. The organization was busy with the hospital and with internal reforms. The crux of the matter for the latter was the uncertain status of the twenty or so local branches in various parts of the country, which had appeared since the early 1900s.

Darre-Jensen, true to his local outlook, regarded other branches as independent. He did not want the original association to take on the role as coordinator or head of subordinate units elsewhere. He had enough to do with hospital building and the education of nurses in the capital. In effect, he was in favor of having several autonomous Red Cross associations in one country, an idea that was distinctly contrary to the vision of the original ICRC committee, which firmly stated that there should be only one committee or association in each country. Not only Europe, but also the rest of Norway, was far removed from Darre-Jensen's concerns. In all, several factors contributed to the NRC's non-interest in the great war: A preoccupation with internal reforms, a gradual shift since the early 1900s from concern with the wounded soldier to social needs in Norway, and a president whose main focus was hospital-building and nurse education in Kristiania.

## Women's Groups Mobilize

While Red Cross men disagreed about organizational strategies, women were to take the organization in a different direction through practical work. Their leading star was Louise Keilhau (1860-1927), the only woman on the Red Cross executive board. Largely because of her and her women associates, the Norwegian Red Cross broke out of its inwardness and did come to play a humanitarian role in the First World War. From the autumn of 1917, the NRC intensified its aid efforts, and became a small part in the giant international Red Cross machinery of tracing missing persons and providing relief.

Keilhau had become a central figure in the Norwegian Red Cross in the years after the turn of the century. She had travelled widely around the country and propagated Dunant's ideas of making preparations for war in peacetime, in order to alleviate suffering in case war broke out. Thanks to her relentless efforts, there were established, in addition to the male-dominated branches, numerous women's groups which were well-informed about the original idea of the Red Cross, and who were concerned about the plight of wounded soldiers. The women came together weekly to sew and knit medical supplies. When war broke out, women had become the backbone of Red Cross mobilization

all over the country, via a network of production units.

In 1914, the Norwegian Red Cross was a divided organization, split between two widely different approaches: one domestic and local, the other international, with a view to Europe's battlefields. Added to that was a pragmatic and practical third approach, made possible by women all over the country, who flocked to the Red Cross as volunteers, united by a common Red Cross vision. Because of these women, the president's lack of interest in Red Cross activities outside of the capital came to have limited effect. A country-wide network of groups helped transforming the Norwegian Red Cross into a national organization. Thus, in the years before the war, the contours of a new organization could be seen, an entity which transcended the previous divisive elements, and aspired to something greater, both nationwide and across national borders.

The women's network was a significant factor in making the great organizational reform of 1915 possible. After this year, the Norwegian Red Cross became a modern organization with a defined structure, with head quarters and subordinate branches. With this structure, and with the backing of the head of the army medical corps, Hans Daae, the Norwegian Red Cross became equipped to take a more active involvement in war matters. Previous passivity gave way to a willingness to act.

## Renewed Interest in the War

The general assembly meeting in October 1916 addressed the Norwegian Red Cross' war-relief activities. The president's opening speech revealed a much greater willingness to get involved than what had been articulated two years previously. Darre-Jenssen stated that the Norwegian association was not "sufficiently rooted" among the Norwegian people. One had to acknowledge that the Norwegian Red Cross alas had not done much, compared to other European countries like Germany, France, and Sweden. It was vital that the Red Cross should make the association a natural part of people's consciousness: "It should be generally acknowledged that the Red Cross has great and human tasks to solve in war as well as in peace."<sup>[6]</sup>

This was a turning point. War-related activities picked up in the early months of 1917. The executive board established an aid committee for prisoners abroad of various nationalities. Its mandate was to function as a point of communication between the [prisoners of war](#) and their relatives in Norway. The aid committee, which received financial support from the Norwegian state, sent around 5,000 food parcels as well as 3,000 parcels containing books and magazines in a number of different languages. A large number of the books had come from private donations. The NRC also engaged in tracing, and sought information about the prisoners' location. Two secretaries were engaged to handle all correspondence.

The Norwegian government had by this time accepted that Norway should receive POWs from [Russia](#), Germany, and [Austria](#). The Red Cross arranged for their recreational stay in sanatoriums and hotels. The first train arrived in April 1917. Women from the Norwegian Red Cross met the prisoners with flowers and flags, and handed out cigarettes. Around 1,100 prisoners had a

recreational stay in Norway in various places in the southeastern part of the country. However, prominent Norwegian Red Cross spokespersons noted that the contrast to Denmark and Sweden was still considerable, and found it embarrassing. Both these countries were heavily involved in aid operations from the beginning of the war: Denmark in tracing, Sweden in the exchange of prisoners of war.

One member of the executive board had visited Stockholm and compared Sweden and Norway:

On a bright, sunlit day that whole town was adorned with flags, the cannons roared and into the harbor there came a great war ship at the cost of 18 million kroner, which had been built by voluntary gifts from all over the country. It moored just in front of the palace and was handed over to his royal majesty the king.

This of course was too much to expect from the Norwegian public, admitted the visitor, but surely Norwegians could support voluntary nursing to a much greater extent than had been done so far, so that wounded soldiers could get help.<sup>[7]</sup> However, by the early fall of 1917, another aspect had to be taken into consideration: Mounting war skepticism. Horror stories of trench warfare began to influence public opinion. A call for disarmament was heard among Europe's populations. Pacifist ideas spread both in Norway and in other countries. Why should the Red Cross be associated with national defense at all, and more specifically as an appendix to the army, when the very idea of "national defense" was being questioned? Traditional Red Cross work was closely tied up with the military; was it not time to sever this tie and re-orient Red Cross work to peacetime work?

This attitude did not deter the Norwegian Red Cross from involvement in the [Finnish civil war](#) in the spring of 1918. Both the NRC and the Norwegian Women's Public Health Association sent an *ambulance* (field hospital consisting of doctors and nurses) to [Finland](#). Although the ambulance treated both "red" and "white" soldiers, it was hardly neutral, and supported Mannerheim's "white" army both in action and deeds. The Norwegian doctors operated closely with Mannerheim's forces.<sup>[8]</sup>

## Conclusion: Norwegian Foreign Policy

The Norwegian Red Cross' general lack of interest in the world outside could be said to be a reflection of Norway's foreign policy. On the whole, Norwegian interest in foreign affairs was low, among politicians as well as in the general public. When Norway became independent in 1905, ending nearly one hundred years of union with Sweden, it chose an isolationist attitude, and decided to remain outside international power politics. The major concern for the political leaders was to ensure independence for the young nation, both politically and economically. The policy decided upon was no alliances in peacetime and [neutrality](#) in case of war. Declared neutrality, the Integrity Treaty of 1907, and reliance on Great Britain as protector would ensure that the country did not get drawn into war.<sup>[9]</sup>

The historian Olav Riste has called the formative years after 1905 a period of “classic neutralism.” Isolationism was combined with an effort to promote Norway’s interests in foreign trade and shipping. While commercial relations were welcomed, political relations were supposed to be as limited as possible.<sup>[10]</sup> Norway did not take part in the First World War, although its economic dependence on Great Britain gave the country a status as Britain’s “neutral ally” in the economic war against Germany.<sup>[11]</sup> Geographically, the country was far from the front lines. Norway did have extensive commercial interests in international shipping, and its fleet suffered severe losses: Some 2,000 sailors lost their lives. However, in comparison to war horrors elsewhere, Norway emerged from the war relatively unscathed.

There were few internationalists in Norway at the time, and little interest in foreign affairs. There were exceptions: Christian Lous Lange (1869-1938) and Fridtjof Nansen (1861-1930) both received the Nobel Peace Prize, in 1921 and 1922 respectively, Lange for his work for the Inter-Parliamentary Union in Geneva, Nansen for his international humanitarian and peace-promoting work. However, neither of them called the tune in Norway.<sup>[12]</sup> Red Cross enthusiast Hans Daae appears, like Lange and Nansen, as one of the few Norwegian Red Cross internationalists during the First World War. He had few followers, although women’s groups contributed to a wider mobilization for medical work during the latter part of the war.

The history of the Norwegian Red Cross during the war shows a still-immature association, with a limited membership base, uncertain of itself and its way forward. Its withdrawn and introverted attitude to international affairs must be seen against its domestic organizational development, as well as Norway’s official policy of neutrality and isolationism. However, towards the latter part of the war, attitudes changed, and the NRC did engage in humanitarian work, albeit on a relatively modest scale.

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## Notes

1. ↑ Moorehead, Caroline: *Dunant’s Dream*, London 1999, p. 178.
2. ↑ The topic has been elaborated on in Mageli, Eldrid: *Med rett til å hjelpe. Historien om Norges Røde Kors [With the Right to Help. The History of the Norwegian Red Cross]*, Oslo 2014, pp. 89-110.
3. ↑ A country-wide, week-long campaign in September 1921 increased its membership from 9,000 to 100,000. From then on, the organization became a significant humanitarian actor in Norway.
4. ↑ Annual reports, 1915 and 1916.

5. ↑ Brandal Nik / Brazier, Eirik / Teige, Ola: De ukjente krigerne. Nordmenn i første verdenskrig [The Unknown Warriors. Norwegians in the First World War], Oslo 2014.
6. ↑ Annual report for 1916, Red Cross archive.
7. ↑ Mageli, Med rett til å hjelpe 2014, p. 104.
8. ↑ Støvne, Knut J.: Finland 100 år – borgerkrigen [Finland 100 Years – The Civil War], in: Vi Menn 38 (2017), p. 55.
9. ↑ The Integrity Treaty was a pledge by Britain, France, Germany, and Russia which guaranteed the integrity of Norway. Riste, Olav: Norway's Foreign Relations, Oslo 2005, p. 80.
10. ↑ Ibid., p. 86.
11. ↑ Ibid., p. 109.
12. ↑ For Christian Lous Lange, see Tønnesson, Øivind: With Christian L. Lange as a Prism. A Study of Transnational Peace Politics, 1899-1919 (thesis), University of Oslo 2013. For Fridtjof Nansen, see Vogt, Carl Emil: Fridtjof Nansen. Mannen og verden [Fridtjo Nansen. The Man and the World], Oslo 2010.

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