

## International Conference on Nursing History

**Veranstalter:** Institute for the History of Medicine of the Robert Bosch Foundation Stuttgart

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The theme of this second international conference on the history of nursing organised by the Institute for the History of Medicine of the Robert Bosch Foundation was the history of every day nursing. The organisers along with many historians of nursing were of the opinion that the history of nursing care has been neglected in favour of the history of professionalization. So the conference provided a timely opportunity for a focus on this significant topic. And with twenty papers over three days and the discussion generated following each paper, the area was thoroughly explored.

The conference was not about the 'great names' of nursing instead there was a celebration of 'ordinary' nurses doing core nursing work in different settings and under diverse circumstances.

One such setting was nursing **in the community, delivered directly in the homes of patients**. According to national terminology this was variously described as district, visiting or parish nursing in UK, US and Germany respectively. As with other subject areas presented at the conference, after taking into account the national context, there were more similarities than differences across geographical boundaries. Much of this nursing work was for people with long term, chronic conditions. Thus as SUSANNE KREUTZER (Leibniz University Hannover) illustrated in her paper on parish nursing in Germany post 1945 nurses built up relationships with the patients and their families. In her oral data the nurses felt that they saw the patient as a whole person when looking after them at home. As these nurses were protestant deaconesses of the Henriettenstiftung, religious conviction underpinned their work which also involved officiating at children's religious services. For the nurses this was a counterpoise to their heavier work with elderly people. They reg-

retted that holistic nursing was lost after changes in the 1960s which led to a more functional nursing service. The cognitive dissonance that nurses from religious orders experienced was demonstrated in KAREN NOLTE'S (University Würzburg) paper on care given to the body and soul in 19th century Germany. For the deaconesses of Kaiserswerth the care of the soul was as important as physical care, so they were disconcerted when those patients they referred to as 'faithless' did not welcome their spiritual ministering along with nursing care and Rumford soup. Yet home nursing gave young middleclass women a more realistic and sympathetic knowledge of the lives and home conditions of the poor.

This was a theme in STUART WILDMAN'S (University of Birmingham) paper on 19th century home nursing association in the English Midlands. The interventions of home nurses, including the provision of nutritious meals, allowed members of the 'deserving poor' to regain their health and return to the workforce. This prevented the worker and his family from sliding into poverty.

As ARLENE KEELING (University of Virginia) demonstrated in her paper on the role of American visiting nursing in the 1918-19 influenza epidemic it was nursing care that saved many victims of the disease. The nursing response to the emergency was rapid and organised. In the decentralised response to the epidemic it was visiting nurses who coordinated the services of several branches of community nursing to give multi faceted care including hygiene advice and the provision of the ubiquitous soup.

RENATE LUNDE (University of Bergen) in her paper on the work of the Church Missionary Society in Egypt showed how these skills were exported to '**colonial**' settings. Working in the Old Cairo Hospital British missionary nurses established a mother and baby clinic which later became the model for Egyptian government welfare centres. In a contemporary film we saw the health education posters, songs and activities employed to teach mother craft. Again the through their interaction with local women at the clinic many nurses modified their judgemental views on the life styles of their clients.

HELEN SWEET (University of Oxford) gave

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us a paper on mission nursing in KwaZulu Natal a space of nursing she described as located at an institutional crossroads where mission meets nursing. Medical provision was one way of getting the Christian message accepted. As teachers of skills and employers the mission hospitals also played a role in the nurturing the careers of black nurses. Initially they were managed by less experienced white head nurses, but women like Duduzile Byela were influential and prestigious women in their own communities. And with the defeat of apartheid they were ready to take up key positions in South African health provision.

Another aspect of **race and culture in nursing** was covered by two papers on the contribution of South Asian particularly Korean women to the German health care system. ULRIKE WINKLER'S (Berlin) paper dealt with the recruitment process of the German Evangelical Hospital Association and its partner the Diaconic Association of Korea. Nursing work in Korea was more technical than in Europe; relatives carried out tasks such as washing and feeding patients. Highly qualified Korean nurses were shocked to find that these tasks would be part of their duties, which led to aspersions against the Koreans that they were not behaving in an expected manner. In her paper YOUNG-SUN HONG (State University of New York) was keen not to see these nurses as victims, archival evidence she cited shows that they organised a protest as early as 1963. But their presence in the story of health care has been erased from the discourse. She reminded delegates that it is important to consider other images of the 'global' woman migrant worker than the mail order bride.

**What actually constituted nursing tasks** may have been in contention in the context of Korean nurses in Germany, but it is a subject that has exercised nurses across time. This was demonstrated by JULIE FAIRMAN in her paper on the development of the role of the nurse practitioner in the US. Although physicians and nurses had different perspectives on the direction the role should take they managed to work together and the nurse practitioner role has been accepted by patients, nurses and physicians because of its positive impact on health care.

### **Nursing in Psychiatric hospitals**

Another facet on the doctor nurse relationship was explored by SABINE BRAUNSCHWEIG (Basel) in her paper on how nurses at the psychiatric hospital in Basel dealt with the challenges of sexually aroused patients. Junior doctors who had the arrogance to disregard the advice of experienced nurses found themselves in potentially compromising positions vis a vis female patients. Patients undergoing therapies such as insulin coma therapy needed careful observation while unconscious and one to one therapy as they regained consciousness. In her study of the Friends Asylum in Philadelphia PATRICIA D'ANTONIO (University of Pennsylvania) also covered the strategies used to bring order to the chaotic minds of psychiatric patients. Despite hopes for the success of 'moral therapy' over the first half of the nineteenth century it was replaced by a more mediated model of care. This was because it left staff with few resources with which to contain disturbed patients other than seclusion or restraint. She made the link through time and place of the constant dilemma for nurses between the commitment to a patient on an individual level and the need to uphold the therapeutic environment that is needed for his/her recovery. More day to day nursing in psychiatric hospitals at the turn of the twentieth century was illustrated (and indeed graphically by photographs and excellent maps) by CARLOS WATZKA (Universität Graz). Using the records of the main institution in the Duchy of Styria (Austria) he gave a picture of an institution where resources in terms of staff and funding could not keep pace with the demands of the service expected of it. Again aspects of this situation had had echoes across time and place.

**The socialisation of nurses** into what their superiors considered the embodiment of the 'good' nurse was discussed by ULRIKE GAI DA (Berlin/Stuttgart) in her study of the training summaries of nurses at the Protestant Social Welfare Association 1918-1933. Women regarded as 'theorists' stood out as not conforming to the more practically orientated work which was also regarded by senior nurses as 'a labour of love'. Ironically enough it was the women described as 'loners' who stayed longest in the employ of the association.

Whether nurses questioned their superiors

was raised by SUSAN BENEDICT (Medical University of South Carolina) in her paper on nurses involved in 'euthanasia' programmes of the mentally ill under the National Socialist regime. She used the trail of the nurses at the Meseritz-Obrawalde psychiatric hospital as a case study. Certainly the expectations of a nurse would be not to take life. Although some did this with zeal she argued that others found themselves involved in killing because of a tradition of obedience to doctors and senior nurses. Ultimately nurses, whether for good or evil reflect the society within which they function.

#### **Nurses 'breaking the mould'**

Other papers gave examples of how nurses could act against expectations in a more positive way. The nurses at the Colonial Women's School in Rendsburg near Hamburg, presented by SÜNJE PRÜHLEN (Helmuth-Schmidt-University Hamburg): were certainly in this category. In 1938 nurse training was added to the curriculum which already included childcare, carpentry, agricultural work and motor maintenance. A course at the school was intended to equip young women to work in the African colonies although after 1939 some graduates of the school went to the new colonies of Eastern Europe. But wherever their destination they had a training which was at odds with the National Socialist ideal of women's skills and given them at this remarkable institution under the very eyes of the regime.

JOHN C. KIRCHGESSNER'S (University of Virginia) work on the economics of health care at the University of Virginia Hospital 1945-65 gave us another example of historical facts overturning suppositions. Using Benson's monetary model he showed how nursing instead of being a drain on hospital resources as previous thought by the administration was in fact contributing to the profits of many other hospital departments. This was achieved because nursing staff stepped in and did the work of members of these departments 'after hours' at evenings and weekends. Unfortunately owing to nurses' lack of business acumen this work was never acknowledged. Could similar exercises could be used to argue for more nursing resources in a contemporary setting we pondered?

#### **The effect of their work on nurses**

Sometimes everyday nursing work went beyond heavy physical demands and brought dangers such as catching infectious diseases. In the context of Germany and Austria 1890-1930, SYLVELYN HÄHNER-ROMBACH (Robert Bosch Stiftung, Stuttgart) showed how the high tuberculosis (TB) rates among nurses as opposed to other occupational groups were initially ignored. But Roman Catholic nursing nuns provided a static research group to illustrate the incidence of TB among nurses. STEPHANIE KIRBY explored the impact on nurses of working with dying TB patients in British TB hospitals. Although nurses had their own informal support networks they were often comforted by patients and ancillary staff. She asked delegates to consider if there was less holistic care with the advent of a chemical cure for TB.

For nurses working on the battle front in World War I exhaustion was compounded by a heavy emotional toll. Using the writing of both trained nurses and volunteers (VADs) CHRISTINE HALLETT (University of Manchester) explored their perceptions of the trauma they encountered and their coping mechanisms. The nurses wrote of their experiences in private diaries while the VADs often intended their histories for publication. Again the issue of socialisation of nurses was raised in that there was more 'matter of factness' and less reflection in the writings of the professional nurses.

#### **Nursing Knowledge**

For all their work in whatever setting nurses needed a knowledge base. Although much nursing knowledge was learnt at the patient's side the turn of the twentieth century saw a growth in the written dimension of nursing theory. Using two journals CAROL DEALEY (University of Birmingham) investigated the theoretical basis of the prevention of 'bedsores'. Although she found little consistency in advice for prevention, equipment such as pressure relieving mattresses featured in this earlier period of nursing, demonstrating the enduring opportunities for commercial ventures in healthcare.

So historiography finally appreciates the everyday work of nurses, and in a cost conscious climate nurses need to be able to provide

de evidence of their value to health care. They can call on the historians of nursing who are not always appreciated by their clinical colleagues for help in this task.

The conference showed the spectrum of the international historical research of nursing, in which cross national comparisons became possible. These comparisons showed both, parallel developments and national idiosyncrasies. Accordingly, there are differences in the significance of the 'gender aspect' between the German speaking world and the Anglo-American areas. Whereas the 'gender aspect' in the German speaking world has not been researched sufficiently, it is of minor importance for the Anglo-American areas, because nursing in that countries was much more feminized than in Germany over a long period of time.

#### **Program**

**Session 1: „Practice“ (Chair: Robert Jütte)**

Carol Dealey (University of Birmingham): Nursing practice in relation to bed sore prevention: review of the information provided in two nursing journals (1875-1956)

Stephanie Kirby (University of the West of England, Bristol): „You learned how to love and care for people whose life were at stake“: nursing narratives of death and dying in tuberculosis hospitals in Britain, 1930-1960

Sylvelyn Hähner-Rombach (Institut für Geschichte der Medizin der Robert Bosch Stiftung, Stuttgart): When nurses become ill – tuberculosis among nurses in Germany and Austria, 1890-1930

Christine Hallett (University of Manchester): Portrayals of suffering: perceptions of trauma in the writings of First World War nurses and volunteers

Julie Fairman (University of Pennsylvania, Philadelphia): Making room in the clinic: nurse practitioners and physicians negotiating practice boundaries, 1960-1980

**Session 2: District Nursing (Chair: Philipp Osten)**

Stuart Wildman (University of Birmingham): „Nurses for all classes“: home nursing in England 1860-1900

Karen Nolte (Institut für Geschichte der Medizin, Universität Würzburg): Caring for body and soul – nursing in poor quarters in 19th century Germany

Arlene W. Keeling (University of Virginia, Charlottesville): „The Ghetto was a hotbed of influenza and pneumonia“: district nursing during the influenza epidemic, 1918-1919

Susanne Kreutzer (Leibniz Universität Hannover): Parish Nursing in West-Germany. On the Social Practice of Christian „Charity Service“ after 1945

**Session 3: Places of Work: Rural Health Care and General Hospitals (Chair: Sylvelyn Hähner)**

Renate Lunde (University of Bergen): Preaching, teaching, healing – missionary nurses in Egypt, 1900-1950

Helen M. Sweet (University of Oxford): Race, religion and rural healthcare: basic nursing relationships and experiences in rural South Africa c. 1915-1975

Ulrike Winkler (Berlin): „Rescuers in need“: East Asian nurses in West German hospitals in the 1960s

Young-sun Hong (State University of New York): „Last help for hospitals are Asians in the Third World“. Gender and race in post-1945 West Germany nursing practice

**Session 4: Places of Work: Psychiatric Hospitals (Chair: Martin Dinges)**

Carlos Watzka (Universität Graz): Nurses at the „Provincial mental asylum for healing and nurture Feldhof near Graz“ around 1900 – conditions of work and life

Patricia D'Antonio (University of Pennsylvania, Philadelphia): Staff needs and patients' care: day-to-day life in an early 19th century insane asylum

**Session 4: Places of Work: Psychiatric Hospitals (Chair: Martin Dinges)**

Sabine Braunschweig (Basel): Sexually aroused patients: what challenges for everyday nursing in psychiatric hospitals?

Susan Benedict (Medical University of South Carolina, Charleston): „Euthanasia“ and „ordinary“ nurses in the Third Reich

**Session 5: Expectations of Nurses (Chair: Philipp Osten)**

Sünje Prühlen (Helmut-Schmidt-Universität Hamburg): „The aim are self-dependent nurses for the colonies!“ Nursing education at the Colonial Women School Rendsburg

Ulrike Gaida (Berlin/Stuttgart): Personnel reviews of Protestant nurses between 1918 and 1933

John C. Kirchgessner (University of Virginia, Charlottesville): Nurses as income generator: a financial reappraisal of nursing services at the University of Virginia Hospital, 1945-1965

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