

CHAPTER 1

History of Nursing

LEARNING OBJECTIVES

After studying the chapter, the students will know:

- ➡ The stages and growth of nursing care.
 - ➡ The various foreign influences that shaped nursing.
 - ➡ The contributions of various religious orders in development of nursing.
 - ➡ The transition from traditional to modern nursing.
 - ➡ The progress made in nursing education after Independence.
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CHAPTER OUTLINE

- ➡ Introduction
 - ➡ History and Evolution of Nursing Profession
 - ➡ Nursing in India
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KEY TERMS

Evolution: Continuing process of change or progress from one state to another.

Monastic order: A group of persons living under a religious rule, i.e., nuns, monks.

Nursing: The practice of providing care for the sick and infirm.

Profession: Any type of work that requires special training or a particular skill.

Reformation and Counter-Reformation: Catholic response to the Protestant Reformation is known as the Counter-Reformation.

Renaissance: A French word meaning “rebirth”, time of the great revival of art, learning.

INTRODUCTION

One of the oldest professions, nursing has come a long way from the ancient times when ailing and injured persons were provided care at home by family members and friends. The responsibility of caregiver was assigned to female members in most communities as women, who took good care of children and family members, were traditionally considered more suitable for the task. There was no formal education or training for caregivers and they learnt the art of giving care from the elders through oral transmission of knowledge and their own experience.

Nursing evolved into a profession rather early. Some nurses received payment for the services they provided when nursing was at a nascent stage. For instance, services of wet nurses were desperately required to nurse babies whose mother either had died or were not in a position to breastfeed. Wet nurses mostly stayed at the home of their employer.

In fact, in those days safest care was provided at home where family, friends and members of the clan took responsibility of looking after the ailing person. Home remained the center for all types of nursing and medical care for centuries. Only those who had no family and friends were forced to go to hospital for treatment. Traditionally, nursing has always been characterized by caring, nurturing and supporting the sick, infirm and needy and the caregivers provided service without any formal training. In the current modern era, it has become a highly technical job due to advances in medical science. Nurses have to handle sophisticated equipment and continuously update their knowledge to keep abreast of the latest developments in healthcare.

HISTORY AND EVOLUTION OF NURSING PROFESSION

Origin of Word 'Nursing'

Originally, the word 'nurse' was not used in the sense it is used today to describe a person who takes care of the sick. Initially, it was used for the women who came forward to breastfeed the hapless infants whose mothers had died or were not in a position to do so. The word was first used in the 13th century for wet nurses. It came from the post-Classical Latin root word 'nutricia' and was used for a wet-nurse. 'Nutricia' itself is derived from the Latin verb "nutrire" which means 'to nourish', 'feed' or 'cherish'.

The word acquired the figurative meaning only toward the second half of the 14th century to refer to anything that nurtures or fosters a quality or condition. It had several variations in English dialects like norce, nors, norsse and, noarse, before taking the final form. Spelled as 'nurse' the word was first used in the early 15th century for referring to a 'wet-nurse' or a woman hired for looking after young children. Subsequently, it acquired a more generalized meaning to indicate any person who takes care of, educates or counsels someone. The term was not used to refer to someone, who takes care of patients, until the 16th century. The word 'nurse' was used strictly in a medical sense in Shakespeare's Comedy of Errors (1616).

Looking after the sick and injured persons has been an integral part of community living. Societies and groups have been taking care of the ailing and injured members from ancient times. Parents bringing up their children is the first example of nursing, which was driven by maternal and paternal instincts. Nursing was being practiced all through in one form or the other throughout recorded history, depending on the culture and requirements of the communities. Healthcare practices varied across communities as every social group had its own system for looking after the sick and infirm members. For example, life in many ancient cultures was nomadic and the communities, which kept on moving from one place to another in search of food, required a different kind of healthcare.

The form of nursing kept changing with the advancement of the healthcare system. In the medieval period, nursing was instinctive and motivated by compassion for others. Women served as the caregivers without any kind of training. They learnt the art of nursing by experience. Nursing was driven by religious values and ethos like devotion, service before self and hard work.



The early era of Christianity was significant for nursing as it brought about a positive change in the attitude toward nursing. The Christian belief that selfless service to humanity without any reward was the greatest virtue, changed the way of thinking and people became more compassionate, helping toward the sick, and needy. Throughout the middle ages, from 500 AD to 1500 AD, the religious values and ideas of Christianity inspired people to serve the suffering humanity and women entered the nursing profession in a big way. The stature of nurses was raised as many charitable institutions came up to take care of the sick, aged and poor people.

The benevolence of the church was not limited to treating the sick, it also took care of the hungry, needy widows, children and homeless people. Monasteries saw additions to wards, primarily meant for spiritual sustenance but also served the needs of the sick and infirm. Even in the middle ages, nursing care was continued to be provided by caregivers without any formal education or training but they worked under the supervision of experienced nurses. The situation changed as the monasteries emerged as centers of education and medical care and monks and nuns dedicated their lives to service of the sick and needy. Nursing, particularly, midwifery flourished under the new nursing system that came up under the patronage of the Church.

However, nursing suffered a big setback due to the turmoil caused during the Reformation and Counter-Reformation in northern Europe. It turned out to be the “darkest period of nursing” as monasteries, where the sick and needy took shelter and received care, were closed down. France, politically and culturally the strongest country at that time, was at the center of bloody religious wars between Protestants and Catholics. The repression of the monasteries, particularly ban on Catholic organizations in Protestantism dominated areas, led to closure of churches and sudden dismantling of the bulk of nursing infrastructure and there was little provision for the institutional care of the sick that had evolved over the years. Nursing sank to the lowest levels and there was a huge shortage of caregivers. The suffering people, particularly the sick and infirm, were left to fend for themselves.

The growing demand for healthcare forced authorities to open hospitals but nursing received further setbacks as these institutions were run by laypersons with no training. The profession lost its social status as nurses were mostly recruited from the lower strata of society. It was not considered honorable to work in hospital. The Protestant church had little concern for freedom of women and the nursing services. The women lost the freedom and opportunity to move about in the world available under Catholic Church. Miserable conditions at work places and low salaries made nursing a low status menial job.

Advances in the Field of Medicine

Advances in the field of medicine during the Renaissance period from 1500 to 1700 AD also led to revival of nursing. Many medical and nursing schools came up during the period, which saw both women and men, providing nursing care to people of all ages. The Daughters of Charity, was founded by St. Vincent de Paul and St. Louise de Marillac in Paris in 1633, to help mitigate the suffering of the poor and sick. It played a significant role in laying the foundation of modern nursing. The caregivers were also imparted systematic training in the theory and practice of nursing, in addition to spiritual knowledge. The main responsibility of the Daughters of Charity was to provide care to the sick in their homes, it was a new concept on which modern nursing practices developed. In 1638, the Daughters of Charity started extending its footprint and set up establishments of sisters dedicated to giving nursing care in the home in many places.

The training in nursing was comprehensive. Besides hands-on experience in both home nursing and hospital services, the sisters were also taught about medicines. They were provided training to grow, process and utilize medicinal plants to treat patients and conduct various therapeutic procedures like application of leeches. General skills like cooking, housekeeping and gardening also formed part of the training module. Besides providing home nursing services, the sisters worked in various institutions like schools, hospitals, children's homes, old age homes, prisons and lunatic asylums.

There was not much change in nursing practices from the late 1700s to 1853. Nursing got a boost in 1836 with the establishment of the first Protestant hospital. Pastor Theodor Fliedner and his wife Friederike Fliedner set up the healthcare facility at Kaiserswerth in Germany as a counterpart to the Catholic nursing congregations. It proved an important milestone as deaconess movement soon spread to other Protestant countries in Europe. Subsequently, deaconesses played a major role in taking care of the suffering sick, elderly persons, needy and prisoners. Pass outs of the Kaiserswerth program provided services across the world.

Demand for nurses increased as industrialization led to rapid urbanization and hospitals were set up to cater to the healthcare needs of the growing urban population. However, the quality of nursing varied and the health facilities run by monastic orders generally provided better care. Other hospitals did not have trained caregivers.

Contributions of Florence Nightingale to Nursing

Florence Nightingale, who transformed the nursing profession and hailed as the founder of modern nursing, had received her training at Kaiserswerth School. Her parents were not in favor of her getting into nursing; caring for strangers was not socially acceptable. Moreover, during that period, nursing was largely seen with low status menial job and she was well educated and came from a privileged background. However, driven by her passion to serve the suffering humanity, Florence went on to study nursing at the School of Lutheran deaconesses in Germany. She rose to become the manager of a hospital in London in 1853. Drawing from nursing traditions of both Catholic sisters and Protestant deaconesses, she developed her own training program at St Thomas' Hospital in London in 1860. It turned out to be a successful initiative, which changed public perception about the profession.

Born on May 12, 1820 in an affluent English family, Florence Nightingale etched her name in the history of nursing by her dedicated services to the sick and impoverished. She gave her invaluable contribution in raising the status of nursing profession.

Her acclaimed mission during the Crimean War in 1854 turned out to be a turning point for both in her own career and the evolution of the nursing profession. With her team of 38 volunteer nurses, Florence Nightingale took care of 1500 injured British soldiers fighting in the war. Serving at the military hospital it did not take long for her to realize that diseases like typhus, dysentery, typhoid and cholera were claiming more lives than the fatalities on the war front.

She compiled important statistical data for six months to evaluate the impact of the efforts put in by her team. The outcome was miraculous with the mortality rate declining dramatically from 60% to 2%. Her scientific approach, efficient management and the measures she put into practice, laid the foundation of modern nursing. She also authored a book "Notes on Nursing," which still serves as basic guide for nurses. It eventually led to creation of standards for the profession. She encouraged all the hospitals to collect important statistics to evaluate and compare outcomes, paving the way for evidence-based practice.

Nightingale shifted focus of nursing care to personal hygiene, maintaining cleanliness along with preventive measures and ensuring proper nutrition to the patients. She initiated various measures to improve patient-centered care, competence of the caregivers, and the overall healthcare environment. She identified the gaps in nursing care after investigating the root cause of problems and came up with appropriate reforms and innovations. She was well educated and had the ability to communicate fluently in French, Italian, German, and Turkish. Her language skills helped her to convince others involved in healthcare delivery about her projects.

She examined the military and medical rules threadbare and retained only those, which were sensible, and facilitated effective delivery of healthcare. The routines laid down by the military medical officers, which affected efficiency in healthcare delivery, were modified or replaced with new ones.

She carried out large-scale improvements in nursing practice and patient care, achieved outcomes and overcame barriers that hampered efficiency. The principles of good nursing delineated by Nightingale were

based on her own practical experience and is her most outstanding contribution. She made a clear distinction in training and skills of a professionally qualified nurse and knowledge essential for every woman who can be called at any time to render nursing service in some form. The principles of good nursing she founded on the basis of her own experience are still relevant. Students are amazed at the clarity with which Nightingale delineated the role of nurses. In her view, “the purpose of nursing was not merely to keep people alive but to help people to live.”

NURSING IN INDIA

Nursing in India has undergone a sea change from the early mythical times when evil spirits were believed to be at the root of all illnesses and the only healer was the exorcist who expelled the devils out using his spells and charms. The situation changed gradually with the progress made in medicine and the earliest accounts reveal that systematic healing practices evolved around 700 BC when Brahmin priests, who engaged in intellectual pursuits, took to practice of medicine.

It was the time when medical science made rapid progress with contributions from legendary physicians like Sushruta, better known as the “Father of Indian Surgery,” who developed surgical procedures of very high standards. He devised standard practices and procedures to keep operation rooms and surgical instruments clean. He developed techniques for conducting cesarean section, cranial surgery, cataract treatment and plastic surgery. He was best known for his art of plastic surgery. Besides him, Charaka, another legendary physician, also did pioneering work to lay a strong foundation of Ayurveda, the traditional Indian science of life.

Physiotherapy was practiced as massage, with masseuses taking care of women patients and masseurs tending to men patients. The focus was on preventive measures not on curing the disease. Various preventive measures include inoculation for diseases like smallpox. The inoculation was used to be carried out house to house by a particular Brahmin tribe.

The rise of Buddhism during 500 BC to 300 AD saw further advances in the field of medicine. The philosophy of compassion toward all the creatures improved healthcare with monks serving the sick. The influence of Buddhist philosophy on King Ashoka led to establishment of hospitals both for humans and animals. As a result, veterinary science also made rapid progress. Many monastic universities came up with medical schools leading to all-round development in medicine. However, during the same time surgery suffered a setback as compassion for all living beings preached by Buddha virtually barred dissections of animals which hampered study of anatomy.

The decline of Buddhism and the resultant predominance of Brahminic influence proved fatal for healthcare system as Buddhist hospitals disappeared. Further, the caste system had developed strong roots and Brahmin physicians refused to touch blood, tissues or pathological material and avoided physical contact with anything that could involve pollution. The decline of medicine due to religious reasons also led to downslide of nursing profession.

The subsequent Mohammedan invasion gave a crippling blow to nursing profession due to severe restrictions on women on religious grounds and overall lower status compared to men. The Ayurvedic system also declined and toward the later part of medieval period, the Unani system, which enjoyed the patronage of Muslim rulers, gained ground. Female nurses virtually vanished from the healthcare scene during this period.

Advent of Modern Medicine

The modern nursing came to India with the arrival of the Portuguese. The invaders captured Goa in AD 1510 and they set up the Royal Hospital and introduced modern medicine and nursing. However, the credit for establishing modern medical and nursing services in the country goes to the French and British colonizers.

The East India Company set up its first civil hospital for soldiers at Madras in 1664. It remained a joint military and general hospital for almost two centuries and became a Government General Hospital only in 1871. The Bengal government started a Nursing Training Program in 1859 and also set up a Nursing Training Center at Calcutta (now Kolkata). Thereafter, nursing schools were opened across the country in collaboration with private and the government hospitals.

The National Association for Supplying Female Medical Aid to the Women of India, better known as Dufferin Fund, formulated the first National Medical Care and Nursing Plan in 1885.

Florence Nightingale, who never visited India, made immense contribution in laying a sound foundation for nursing in the country. She collected important data, like morbidity and mortality rate, sanitary conditions, age and length of service persons at the time of death, from all the military stations through questionnaires. She wrote letters to senior medical and military officers to help improve the quality of healthcare. A Royal Sanitary Commission Health was set up in 1859 and the effort put in by Nightingale provided a solid footing for the public healthcare services in the country.

Graduates from the Nightingale School of Nurses at St. Thomas Hospital, England, came to India to nursing training schools. The first Nursing Training Program for Indian girls was started at St Stephen's Hospital in Delhi in 1867. The first School of Nursing was started in Government General Hospital, Madras in 1871 with six month Diploma Midwives program for which four lady Superintendents and four trained nurses from England were deputed.

A number of training schools came up between 1890 and 1900 under missions or government across the country. Modern nursing in military hospitals got a further boost with the arrival of ten fully qualified nurses who laid the foundation of Indian Military Nursing Service. The first Lady Superintendent Miss Elizabeth Locke got her training at St. Bartholomew's Hospital, London. She worked relentlessly and successfully to raise the standards of nursing in all the military hospitals in India. She was forced to resign in 1902 due to her failing health and she died in 1904. The system to provide training to hospital orderlies introduced by Locke in 1893 brought about significant improvement in the quality of nursing services.

The nursing service really came of age only after the formation of Indian Military Nursing service (IMNS) in 1927 with a strength of 55 trained nurses, including 12 matrons, 18 sisters and 25 staff nurses. The IMNS saw steady expansion during the Second World War. Subsequently, a full three-year training course for nurses was started in selected military hospitals.

Trained nurses formed an association; the Trained Nurses Association of India in 1908 to uphold the dignity of nursing profession. The State of Madras constituted the first Nursing Registration Council to lay down and enforce the basic standards for education and training. The first four-year basic Bachelor Degree program in Nursing was introduced in 1946 at the Nursing Colleges based in Delhi and Vellore. Health centers came up at Calcutta, Lucknow, Madras, Trivandrum, Delhi, Bangalore and Pune between 1931 and 1939 with assistance from the Rockefeller Foundation.

The demand for various categories of nursing staff, including nurses, auxiliary nurse midwives, health visitors, midwives, nursing tutors and nursing administrators, increased significantly after the country got Independence. The government set up the Indian Nursing Council in 1949. Miss Adranvala was appointed as the Nursing Advisor to Government of India in 1956.

The college of Nursing, Delhi, started the first master's degree course; a two-year postgraduate program in 1960 and School of Nursing in Trivandrum introduced the first two-year post certificate Bachelor Degree program in 1963. Today there are over 8,650 nursing institutions in the country producing over 3.2 lakh nursing personnel every year. As per official data in 2021, there were 3688 colleges offering 1,07,814 BSc, Nursing, and 13,971 MSc Nursing, seats.

There is still a long way to go. As per 2019 data, the country had 8,85,383 Auxiliary Nurse Midwives (ANM), 21,29,820 Registered Nurses and Registered Midwives (RN and RM), and 56,644 Lady Health



Visitors (LHV). The number is far less for India's size and population of 140 crore. India has only 1.7 nurses per thousand of population as against the WHO norm of three nurses per thousand population. As such, the country needs another 4.3 million nurses by 2024 to achieve the norm.

Important Milestones in the History of Modern Nursing in India

- Portuguese were the first to bring modern nursing to India, and the French and British consolidated it.
- In 1664, East India Company opened the first civil hospital for soldiers at Madras, which was renamed as Government General Hospital in 1871.
- In 1859, Government of Bengal came up with a scheme for training of nurses. A Nursing Training Center was opened at Calcutta.
- In 1865, foundation of professional nursing was laid in India when graduates from Nightingale School of Nurses at St. Thomas Hospital, England, were deputed to start nursing schools in India.
- In 1867, St Stephen's Hospital at Delhi became the first institution to start training of Indian women as nurses.
- In 1871, Government General Hospital, Madras, started the first school of nursing with a six-month diploma midwives program.
- 1890–1900 period saw many schools opened by missions or government across India.
- In 1908, Trained Nurses Association of India (TNAI) was established. Initially, it was known as association of nursing superintendents.
- The Government of India recognized TNAI as a service organization in 1950.

Add Ons

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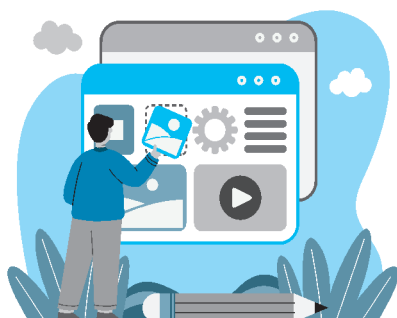


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ASSESS YOURSELF

Review Questions

1. How did the growth of Buddhism influence medical care and nursing?
2. Decline in influence of Buddhism affected medical care, explain.
3. Write in detail about the influence of Christianity on nursing.
4. Write an essay on the contribution of Florence Nightingale to modern nursing.

Multiple Choice Questions

1. **Surgery declined with the advent of:**
 - a. Jainism
 - b. Christianity
 - c. Buddhism
 - d. Brahmanism
2. **The word 'nurse' is derived from Latin word:**
 - a. Nutrition
 - b. Nourish
 - c. Nasal
 - d. Nutrire
3. **Values of Christianity _____ the standards of nursing.**
 - a. Lowered
 - b. Had no impact
 - c. Raised
 - d. Downgraded
4. **Who brought modern nursing to India?**
 - a. French
 - b. Portuguese
 - c. British
 - d. Americans
5. **The Protestant reformation movement had a _____ impact on nursing.**
 - a. Negative
 - b. Positive
 - b. Improved
 - d. Encouraging

Answer Key

1. c 2. d 3. c 4. b 5. a



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