

Nature of Nursing

- ✧ Nursing began as the desire to keep people healthy and provide comfort, care and assurance to the sick. The general goals of nursing have remained relatively the same over the centuries, the practice of nursing has been influenced by societies changing needs, and nursing has gradually evolved into a modern profession.
- ✧ Nursing is as old as medicine. Throughout history, nursing and medicine have been interdependent. During the era of Hippocrates (*Greek medical practitioner regarded as the father of medicine*), medicine was practised without nursing, and during the Middle Ages, nursing was practised without medicine (Donahue, 1985).
- ✧ In ancient cultures, religious beliefs and myths were the basis for health care and medical practice. Religious leaders assumed the responsibility for diagnosis and treatment, and many cultures believed that illness was caused by the god's displeasure. In these cultures, nurses usually had a role of the subservient. Human life was not valued in the same way we do today, so the caretakers of life were less respected.
- ✧ Nurses delivered custodial care and depended on physicians or priests for direction (Kelly 1981). Under the direct supervision of a physician the nurse tended to the hygiene of clients in the home. Nurses did not participate in activities to promote health and teach families how to care for the sick.
- ✧ Under the influence of Christianity, nurses began to gain respect. One of the earliest records of Christian nursing detailed the formation of the Order of the Deaconesses (Rom. 16:1, 3, 12; Phil. 4:2, 3; 1 Tim. 3:11; 5:9, 10; Titus 2:3, 4). The Order's goals included to meet the following basic needs of the society (Dolan et al 1983; Donahue 1985) and to mirror Christian doctrine.
- ✧ The entry of women into nursing can be traced to approximately AD 300 when women entered nursing because

the social position of Roman women improved before God (Shryock 1959; Donahue 1959).

- ✧ The Benedictine order, founded in the 6th century, increased the number of men entering nursing. Although the Benedictines were scholars, librarians, teachers and agriculturists, nursing the sick eventually became the chief function and duty of their community life (Donahue 1985).
- ✧ After the Crusades, large cities began to develop and grow with the decline of feudalism. The extensive population growth in cities led to certain health problems and an increased need for health care. Some of these problems still exist in urban areas today (WHO 1992), although the mortality rates associated with them have greatly declined.
- ✧ The lack of hygiene and sanitation and the increasing poverty in urban centres resulted in serious health problems in the 15th to 17th centuries. Societal factors, such as laws punishing the poor and the Window Tax (which led to decreased ventilation because landlords bricked in windows to avoid paying the tax), created conditions and health needs to which nurses responded.
- ✧ The Sisters of Charity was founded in 1633 by St. Vincent de Paul. The sisters cared for people in hospitals, asylums and poorhouses. The sisters became widely known as visiting nurses because they cared for sick people in their homes. The first supervisor of the Sisters of Charity was Louise de Gras, who entered the order and was later known as St. Louise de Marillac.
- ✧ St. Louise de Marillac, established perhaps the first educational programme to be associated with a nursing order. She recruited intelligent, refined, and compassionate women (Donahue 1985) and offered a programme that included experience in the care of the sick in the hospital as well as home visits.
- ✧ In the 18th century, the further growth of cities brought an increase in the number of hospitals and a larger role for

nurses. Smallpox epidemics in the French colonies and during the Revolutionary War in the English colonies increased the need for nursing services.

- ✧ During the 19th century, the Deaconess Order was revived by Protestant churches. The Deaconess Institute at Kaiserwerth, Germany was established in 1836 by Pastor Theodore Fliedner. The regeneration of this nursing order was stimulated by the recognition of the need for services of nurses.
- ✧ In October 1846, Florence Nightingale received the Yearbook of the Institution of Deaconess at Kaiserwerth & in 1847 she went there to work with the Deaconess (Woodham-Smith 1983; Donahue 1985).
- ✧ In 1853 she went to Paris to study with the Sisters of Charity & was later appointed Superintendent of the British General Hospitals in the Crimea. She brought about major reforms in hygiene, sanitation and nursing, reducing the mortality rate at the Barracks Hospital in Scutari, from 42.7% to 2.2% in just 6 months (Cohen 1984, Donahue 1985).
- ✧ In 1860, Nightingale wrote *Notes on Nursing: What It Is & What It Is Not*. She saw the role of nursing as having 'charge of somebody's health' based on the knowledge of 'how to put the body in such a state to be free from disease or to recover from disease' (Nightingale 1860). Her thoughts reflected the changing needs of society. During the same year she developed the first organised programme of training for nurses, the Nightingale Training School for Nurses at St. Thomas' Hospital in London.

✧ Ideology

It can be thought of as being an "abstract thought" (Williams 1976)

Beliefs, attitudes and opinions that are bound together either loosely or very tightly (Abercrombie et al 1984)

- ✧ At first sight Ideology simply seems to be a system of beliefs or values, the complexities of this are copious (Taylor 1997).
- ✧ Nursing Ideology is depicted in a neutral or even positive sense – encompassing concepts of humanism and holism which is centred on the nurse – patient relationship (Rafferty 1991). Whilst there are hidden agendas in nursing the reality is to reinforce the positive values and beliefs – those of patient centred care
- ✧ As long as international, national & local organisations and governments define nursing and nurses differently, and as long as nursing personnel are prepared for their work differently and accorded different rewards and roles in health services, we will continue to discuss the concept (& nature) of nursing (Henderson 2006)
- ✧ It is possible that the privileged members of society under-rate nursing and the status of the nurse and the underprivileged over-rate nurses and nursing (Simmons & Henderson 1964) but it is safe to say that each person is influenced by whether he or she has had a good or bad experience with nursing...
- ✧ *“It is often thought that medicine is the surgery of functions, as surgery proper is that of limbs and organs. Neither can do anything but remove obstructions; neither can cure; nature alone cures. Surgery removes the bullet out of the limb, which is an obstruction to cure, but nature heals the wound. So it is with medicine; the function of an organ becomes obstructed; medicine as far as we know, assists nature to remove the obstruction, but does nothing more. And what nursing has to do in either case is to put the patient in the best condition for nature to act upon him (Nightingale 1860).*
- ✧ *“Nursing is primarily helping people (sick or well) in the performance of those activities contributing to health, or its recovery (or to a peaceful death) that they would perform unaided if they had the necessary strength, will, or knowledge. It is likewise the unique contribution of nursing to help people to be independent of such assistance as soon as possible...The nurse is temporarily the consciousness of the*

unconscious, the love of life of the suicidal, the leg of the amputee, the eyes of the newly blind, a means of locomotion for the newborn, knowledge and confidence for the young mother, a voice for those too weak to speak, and so on” (Henderson 1968).

- ✧ Caring as a concept is the therapeutic use of self in an intentional process that involves the awareness of another’s need and the knowledge of how to respond to that need.

Caring – Requires Knowledge of:

- Human behaviour and human responses related to health
- A person’s need and how to respond to that need
- The meaning of the situation for the person
- How to offer comfort, compassion and empathy
- Actions that allow people to solve problems, grow, transcend and go beyond the here and now
- Our own and others’ strengths and limitations