“A French Appreciation of Miss Florence Nightingale.” The Lancet (4 January 1902):42-43 (Review of Les Gardes-Malades) 42: first French work on nursing, does justice to FN 43: FN gave up herself for 9 years to exhaustive study of subject, 3 heads, needs of the sick, qualities and requirements of sick attendant and essentials of hospital construction. “It is n wonder, therefore, that she should have proved herself capable of completely transforming the British ambulances in the Crimea and of thereby reducing the mortality from 60 to 2.21 per cent. A member of the French Academy (Maxime du Camp La Croix-Rouge de France. Paris: 1902, p 20) ... credited French chief medical officer for her success but this utterly unjustifiable. She improved the hospitals. Dr Uytterhoeven on hearing of deaths of 67,000 French soldiers while under treatment said “‘These hospitals are but ante-chambers to the cemetery.’” then reformed in own country, started nursing. Praise also for Notes on Hospitals. And SH (but no Sutherland, or commissions)

“A Criticism of Miss Florence Nightingale.” Nursing Times 3,89 (February 1907). Address by Archbishop

“A Sacred Spot” British Journal of Nursing 7 August 1909:117 Hibbard and Cuban delegates, Senorita M Nunez and Senorita M Monteagudo invitation of Bonham Carter to FN’s “They carried a Spanish lace mantilla to give to her, and Miss N. wore it the same day.” Miss Bosanquet, Miss Nightingale’s secretary, has written a kind letter for the Cuban delegates to take home with them.” “have gone to Paris, to return to Cuba. Also took party over hospital ship Maine, with Take Hagiwara, Japanese delegation, president of the Nurses’ Dept, imperial Japanese Red Cross Society, hopes a National Council of Japanese nurses will be formed before long;

“A Well-deserved Honour” British Journal of Nursing 7 August 1909:117 members of Congress, Dr Lande, from Bordeaux, “Has used his influence to encourage the inst of nurse training schools in the Gironde.” before leaving for Bordeaux, heard nom for commander of the Legion of Honour


“Correspondence.” British Medical Journal (8 October 1864):4238. Anon letter vs FN and nurses, Dr Mapother has always had good care of sick, nuns RC and Prot. Never had to complain.
“Editors’ Table.” *Godey’s Lady’s Book* 62 (1861):78 FN with Eliz Fry and Dorothea Dix, in US publication
“Miss Florence Nightingale, represented by the figure at the bottom of this page on the right. Who has not heard of Florence Nightingale? Who does not know her story in all its details? Without expatiating upon her angelic charity to the wounded and the dying, to? every American woman is familiar with the picture of the noble English heroine, and her tender sympathy as she went from bed to bed in those horrible hospitals where lay the wounded and suffering soldiers of the bloody Crimean war--we would observe that those hours of pity and patriotism were, and are, but a small part of Miss Nightingale’s claims to the love and honor she has seen throughout the world.

War is not forever, but the past will always be with us: sorrow, sickness, disabilities and death.

“Et Cetera.” Tablet 20 August 1910. On FN’s death goes back to 55 years ago when Irish Sisters of Mercy, English Sisters of Mercy and Nuns of the Faithful Virgin speeding from Carlow, Bermondsey and Norwood for horrors of the “Scutari cholera hospitals.” Doyle. Irish sisters tended by Edward Lucas, some survived, Mother Mary Joseph Stansislas Jones helped found and ruled as superior at Gt Ormond St for 22 years. Grant recruited the Norwood sisters (when could not get enough), sent word to the superior “to have five sisters ready by seven o’clock tomorrow morning to start for Constantinople.” 22 October 1854, by next day embarked at Portsmouth, one, Mother St George, still at Norwood; from November at Scutari: recalled FN “very gentle in her manner, but very capable, a wonderful nurse,” is the way in which she summed it up in a conversation which recalled not long ago those stirring times.” still prejudice against RCs; Sister Elizabeth Butler died, FN asked to see picture of a woman who bore her name, but no relation; tribute paid to FN by Major General Luke O’Connor VC, who wrote a morning newspaper enlisted at 17, at Alma, where won VC Welsh Fusiliers. Sergeant O’Connor snatched up colour from Lt Anstruther, who fell morally wounded, carried to end of day, given commission on the field; in both attacks on the Redan. “I received the greatest kindness from Miss Florence Nightingale when I was wounded and in hospital at Scutari after the Alma. She again visited me and I received many comforts from her, and from Catholic nuns who were with her, when I was dangerously wounded at the Redan.” [reputation: Norwood sister said gentle, and a good nurse]

“Et Cetera,” Tablet. (20 August 1910):22. On death of FN, recalls 5 nuns from Norwood of the Faithful Virgin, sent by Grant, Mother St George stepped in to answer summons, filled in until February. Though never seen nursing. Vivid impression of FN: “Very gentle in her manner, but very capable: a wonderful nurse,” in conversation; days of ingrained prejudice against Catholics in
general and the religious habit in particular. Major General Luke O’Connor, VC, wrote to a morning paper: “I received the greatest kindness from Miss Florence Nightingale when I was wounded and in hospital at Scutari after the Alma. She again visited me and I received many comforts from her, and from Catholic nuns who were with her, when I was dangerously wounded at the Redan.” Won VC at Alma, Welsh Fusilier was sergeant at Alma, given commission on field.

135: Pray accept my warmest thanks for your kindness in remembering me, and in sending me those valuable Notes and Ambulance Recollections--by one, of whose brave doings I have, you may be sure, already heard so much during the War. I need hardly say that I shall read your Recollections (which are also the recollections of so many whom you have benefited) with the most eager interest. And perhaps when I have done so I may trouble you with another note. Excuse this brief acknowledgement. I am overdone with business and illness as to have some difficulty in writing. 21 June 1871.

“Florence Nightingale.” Daily Graphic. New York June 15:3. 1889, her last days, has her riding out with Queen Victoria.

“Florence Nightingale.” The Hospital. July 27 1889:259-61. says August/Sept. issue will have bio on FN. in bundle misc

“Florence Nightingale Shore.” Queen’s Nurses’ Magazine. 17,1 (February 1920):7-8. ref from Paskiewicz


1 anon. The Lancet (22 April 1876); 610-11 On FN’s letter to Times of previous week on district nursing. “The noble example which Miss Nightingale set the ladies of England some twenty years ago is very superior to the somewhat rambling and incoherent precepts which during the past week she has put forward in The Times. Miss Nightingale’s literary style sadly lacks conciseness and clearness, and it is really no very easy task to be sure of the exact nature of the scheme which she advocates at such length.” wants “homes” for women of superior educ for nursing sick poor at home; but wd offend the poor; her letter is “wonderfully vague” wish had “some particulars” of the society, income and expenditure of the society, to form conclusions “as to the feasibility of the scheme, but Miss Nightingale’s very shadowy
statements afford little ground for useful argument.” 611: poor shd not be encouraged to stay in own homes during sickness. “Removal to a cheerful hospital, where they may receive not only the best of nursing, but many a hygienic lesson as well, which they may carry home with them, seems to us to be the best course.” No wish to throw cold water on her charitable schemes

“Florence Nightingale.” American Journal of Public Health 100,9 (September 2010);1586-87. Pic and excerpts from Suggestions.

“Florence Nightingale” in Chambers Encyclopedia. 1890 cites Stanmore, credits FN with helping to found the Red Cross

“Florence Nightingale’s Lamp brought into the Light.” Journal of the Royal Society for the Promotion of Health (1 March 2005):

“Florence Nightingale--The Lady with the Lamp.” Goteborgs Universitet. Projektet Nationella prov I frammande sprak. Seems to be an exercise for learning English


“Florence Nightingale,” in The Canadian Nurse 6,10 (October 1910):433-48. UCSF Nutting collection


“Florence Nightingale.” The Ladies Repository vol 18: 358-63... 18: u.s.a. electronic, not available to UG

“Florence Nightingale: Hospitals and Schools of Nursing, Istanbul.” Medical History 14,3 (1970):319 doi:10.1017/S0025727300015659 Selimiye Barracks rebuilt to house a School of Higher Nursing Educ, a Training Hosp and a Teaching Health Center in FN’s name. Barracks built in 1800, used 1854056 “laid the foundations of modern nursing in Istanbul. The new Nightingale Centre is a non-governmental organization planned in 1957 and official est in 1956.” coop of Turkish Mi n of Health and Social Welfare, to raise standards
June 1872 FN sent a copy of *Introductory Notes on Lying-in Institutions* to him with inscription of half-title: To William MacCormac, Esq, &c &c, now that we are, thank God, arrived at peaceful times--this little book (though not much in his line) is offered by Florence Nightingale.

“Funeral of Miss Florence Nightingale.” *Morning Post* (22 August 1910). On train traveling with body, Dr S Shore N, Mr W Shore N. Mr and Mrs Louis SN, Mr and Mrs Vaughan Nash, Mr and Mrs H.L. Stephen, AHC, Miss B.A. Clough, Mrs Perrott, Mr and Mrs T.L. Coltman, Col Bonham Carter ED, Miss Joan BC, Sir HV, Fred V, Mrs Nixon, plain oak coffin, with a creamy white cashmere shawl such as she wore, a few wreaths, bearer party from Brigade of Guards; carried 4 miles through old familiar streets, blinds down and men, women and ch in doorways, to East Wellow Churchyard, through Embley Park, thrown open by current owner, Rev S.M. Watson, vicar and T.G. Gardiner, chapl to Archbp of Canterbury, 4 or 5 labourers who had been members of Miss N’s class when taught, soldiers bearing coffin; hymn Son of God.... “On the Resurrection Morn” Now the labourer’s task is o’er” orchids from Queen A. QAIMN
At St Paul’s over 3000 inside, thousands more applied; US ambassador there; Luke O’Connor attended, rep of Japanese Red Cross Society Mr T Sano; Crimean veterans, nurses’ reps; lists music played, sang “The King of Love my Shepherd is” Gounod’s Marche Solennelle; letter of Jane Wilson pres, Incorporated Midwives’ Institute to ed of Times, reviews FN’s efforts on


“I Knew a Man: Florence Nightingale” July 4 1937. 7 pp typescript LMA H1/ST/NC12/16

“In Honor of Florence.” *Primarily Nursing* 13,2 (March 1994):5 said to be excerpt from a speech “which nurse Florence Nightingale gave to students and nurses in Saint Thomas in 1867"


“Miss Nightingale and the Nurses for the East,” part 2, newspaper

“Miss Sellon applied towards the middle of that week. Miss Nightingale saw her several times, and after long consid, she consented to send out her sisters under Miss Nightingales auth. Between sixty and seventy nurses applied for engagements, thanks to the active kindness of friends, who searched London for the purpose. Out of this number 11 were selected with great difficulty, owing to the very low calibre of many who offered. By Saturday 21 October, the band was completed as follows:

10 R.C. Sisters of Mercy
8 of Miss Sellons
6 from St John’s House
3 selected by the lady who commenced the plan
1 selected from among the applicants
33 [does not add up]

Neither chaplain nor priest accompanied them... Mr and Mrs B....A third name has since been added. Miss Nightingale expressed a strong desire, on leaving England, that any future nurses shd be trained in hosps and also in communities, so as to learn to work together. For this object the insts of St John’s House and of St Saviour’s, Osnaburgh St., offered to receive cands to board and lodge while they were learning at the hosps. These houses represented respectively high church and very high church opinions. The celebrated inst founded by Mrs Fry and conducted under evangelical auspices, in Devonshire Sq was obliged to decline doing the same on the ground that they had no room.

These are the plain facts of the case. No party feeling has had anything to do with the appt of Miss Nightingale....

[ends:] Thirty-eight nurses on their way to Scutari are truer successors of the Apostle shipwrecked at Melita than an equal number of cardinals. May the war teach men many such lessons! We rely on the fairness of the Record to make known the facts exactly as we have stated them.

“Miss Nightingale and the Nurses for the East,” newspaper clipping, Wellcome Ms 5484 f2, probably by the Rev Orlando Watkin Weld-Forester, brother-in-law of Lady Maria, presumably from the Morning Record

Goes over record of how FN went. Oct 8 paper, “one lady, the widowed daughter of a nobleman, loved and honoured by every Protestant, was the first to take any decided step. She engaged three nurses, and on 11 October, went to Miss Nightingale to request her to go out with them to the East, or to recommend someone else, failing which, she was ready to go herself...SH and FN exchange. “The lady who had the merit of first urging the plan upon Miss ‘Nightingale left London on 17 October, saying that she felt that her part of the work was over, and her liberal offerings were returned to her as not needed when government undertook all expenses. In all her letters to Miss Nightingale
and her family she has expressed cordial interest in the success of the work, and joined with them in regretting that her name shd have been used for controversial purposes."

"Though every day’s delay was to be deprecated, it was thought desirable to attempt to procure a larger staff of nurses, and therefore Miss Nightingale’s departure was deferred for a few days. She at once appointed two other ladies to assist her in the selection of nurses, whose first step was to advertise for candidates in the Record and the Guardian. While they dealt with individuals, she dealt with insts and communities, and her communications and success were as follows.

The chaplain of St John’s House, Westminster, applied to the bishop of London on the 13th ult, saying that he was ready to go out and to take seven nurses. A Roman Catholic bishop in the metropolis on the same day made a similar applic to the War Office. No definite answer was given to either till Miss Nightingale was appointed, with full authority to form her own band, that band being subject to her in all matters relating to the hosp. The Roman Cath bishop agreed at once to these terms and signed a paper to that effect.

Rules were issued to the Sisters of Mercy for the special service....shd never enter into disc....St John’s House demurred to the severance from their own society and the subm to Miss Nightingale, but they accepted the terms, after two or three days’ consideration.

Miss Nightingale’s first interview was with the head of the Devonshire Sq inst, to whom she stated her great need of good nurses, and the terms offered by govt., i.e., their not being, for the time, in connection with any to her inst. It was at once replied, that none of the nurses wd consent to go under such conditions, and the proposal, therefore, at once fell to the ground.

“Miss Florence Nightingale.” The Lancet (21 March 1908):868-69. Re City of London honour on Monday City of London did itself honour by adding to its roll of Freemen FN, doubt the impartial historian in future days will find in the list one more worthy of commem, “her just title to be called the founder of modern institutions for the training of nurses” nice praise, but nothing new


“Nightingale and Netley.” 335,8663 (1990) announces exhibit on Lancet
“Nightingale’s Environmental Theory.” Wikipedia. Short article, not great.

“Notes on Hospitals.” The Builder 22,1094 (1864):53-54. Long and positive review of 3rd ed....efforts made in these pages to set forth a good system of hospital construction were ably followed up by Miss Nightingale and the publication of that lady’s excellent “Notes on Hospitals” settled the question. Enlarge ed. Goes through systematically, 54: We may not now continue farther our notice of Miss Nightingale’s admirable book. Suffice it to say, in conclusion, that all who are concerned or are likely to be concerned in the erection of hospitals, or in their management when erected, should obtain and master this new edition of the “Notes.” now for governors and directors of existing insts to take steps for their speedy re-arr and if not re-erection...

“Nova et Vetera: Florence Nightingale and Nursing in Fever Hospitals.” British Medical Journal (27 October 1928):763 Goodall article notes that saw at appointed hour, “upwards of an hour” and tea. fully dressed but on her bed; wall behind and head of bed had shelf full of books, to which she referred. “almost plump little woman” not like the slim “lady of the lamp” and she “was not conversant with and therefore did not understand the attitude of the nursing profession at that time (1893).” looked wistfully back to a woman taking up as “sacred duty towards suffering humanity”. She gave “some excellent counsel on the general question of hospital nursing” but did not help much in respect of the feasibility of my scheme. Also has letter in publelett


“Researchers from University of Guelph Detail New studies and Findings in the Area of Nursing Research.” Health & Medicine Week (May 30 2014) 893. New study, to correct inaccurate info about Sea ole and FN.

“Reviews and Notices of Books.” Lancet (4 November 1871):640-41. Review of Intro Notes; 640: FN has earned a title to be heard. Positive review of work, Rigby, Liverpool wkh; but 641: “appears to us to fail to estimate the influence of infection and contagion, as understood by medical men, aright.” “Animal poisons”; army doctors kept zymotic disease out

“Royal British College of Nursing.” The Lancet 189,4875 (3 February 1917):194

“Six Chinese Nurses Win Florence Nightingale Medal.” News of the Communist Party of China 26 August 2013. Awarded in Great Hall of
the People, Beijing by a professor and leader of International Red Cross. For “outstanding contributions to healthcare,” 32 nurses from 16 countries won the Florence Nightingale medal this year, “the highest international honor for nurses” begun 1912. 68 Chinese nurses have won. ICRC International Committee of the Red Cross.


“The Nightingale Memorial and Lying-in Hospitals.” Medical Times and Gazette (1 February 1866):121-2 in Cup401.k3 microfilm; 121: closed at end of 1867 after 6 years; purpose was a memorial to FN; Priestley quoted that if in own homes, would likely have been spared; gives mortality data; “What is it that is charged against them? Rate of mortality, greater than amongst poor women confined in their own homes. Is this true? After considering carefully 122: “lying-in hospitals, as they are at present conducted, are almost unmixed evils.” Yet may be favourable circumstances, separate pavilions, for 2 or 3 patients, Priestley quotation

“The Influence of Florence Nightingale on Nursing Education in America.” Notes and Abstracts British Journal of Nursing Feb. 1925:27 has photo of statuette at Guildhall Art Gallery, as ”Free Sister of the City of London” AN 0817 brief bios [not useful]

“The Herbert Memorial.” Lancet (12 Aug 1865):192. “The committee have purchased a piece of land at Bournemouth, situated on a high cliff facing the south, at a short distance from the town, as a site for the erection of the ‘Herbert Convalescent Home.’ The plan, prepared two years ago under the direction of Miss Nightingale, has been placed in the hands of Mr Wyatt, and it is proposed to commence the building during the ensuing autumn.” It has been determined to unite the “Home” to the Salisbury Infirmary, the terms of union being that, tho both are to be under one trust, namely, a royal charter, each will be independent in respect of funds.

“The Profession of Nursing.” Victoria Magazine. 28 (Sept. 1876):418-31. BL conducted by Emily Faithfull. most article anon. God-given tenderness about women in every rank and age which makes profession of nursing particularly attractive to her (418-19); a calling for educ women. 419: “One great enemy of the
modern professional nurse is to be found in the medical man whose scientific, social and moral views are strictly conservative.” looks on trained nurse as an extremely orthodox rector looks on a churchwarden who is intelligent and well read in current theology. [This is a rather sweet if silly article] 420: give and take between old-fashioned doctors and old-fashioned nurses; old system winked at idleness and neglect and a deplorable amount of intemperance and no little immorality; 421: except under protest educated women are never allowed to earn their own livelihood; re sisterhoods, allowed privations, but not as nurses; 422: with difficulty that Miss Nightingale in 1854 selected a band of educated women who had recd sufficient tech tr to enable them to render efficiently the services they offered so heartily [little does she know]; Kai; “Indeed, Miss Nightingale may be said to be one of the few reformers who have had the rare privilege of being appreciated during their lifetime.” but her efforts slowly responded to; 1859 St T; Una article; few Unas; 426: “Matrons or sisters who have been governesses are not, as a rule, clever women. They are apt to be tyrannical. They are nearly always narrow minded...”; 428: re special, lady probs; RIE; 430 altho 3 year reqd of St T at RIE, no payment for specials and are not bound by apprentice rules of St T; at liberty at end of year to apply for any institution; “To conclude, tr schools for nurses are springing up with great rapidity in every direction. Every provincial hospital trains, or professes to train nurses.” 431: cram, re inquiry as to opportunities

“The Nightingale Fund.” The Lancet 1 January 1856 p 84 re its article of 14 December re Nightingale testimonial, but seems funds will fall short. “The nation, by the voices of its most influential and noble members, declares its earnest wish to render to Florence Nightingale an appropriate tribute of love and reverence. It is determined to place in her hands the means of benefiting humanity, and for that purpose the business of collecting funds is entered upon. At present what is the result?” unworthy... Hall and Bracebridge. “The wealth that we place in the hands of Florence Nightingale, as being pre-eminent a good woman, we ought to bestow without any misgiving that it may be expended in a bad way. to bestow power on virtue, for the sake of humanity, and at the same time to annex to the gift conditions that it shall not be employed for the purposes of evil is simply ridiculous. If Florence Nightingale had taken as long to make up her mind whether the sick in the hospitals deserved her care before she stirred from home, as we have in debating whether we ought ‘freely to give as we have freely received,’ she would never had found her way to Scutari and her benevolence would have wasted away in dreams and not yield the fruits of action.”

“Miss Nightingale told subsequently how for the first seven months of her stay in the Crimea, the mortality was at the rate of 60 percent per annum from diseases alone, a rate in excess, she added, of that which prevailed among the population of London during the Great Plague. By May, however, the position of affairs had so far improved at Scutari, thanks mainly to the untiring energies and devotion of Miss Nightingale, that she was able to proceed to Balaclava to inspect the hospitals there....”

“The Metropolitan Asylum Board.” The Lancet 90,2305 (2 November 1867):568


184: “from a modern perspective, it is difficult not to see Nightingale’s principled reticence as an instance of repression, as a tactic for avoiding psychological formations too painful to be confronted. But it must be stressed that Nightingale articulated her situation in the somewhat different terms of a desire to integrate all areas of her life.” “From Nightingale’s perspective... “ compartmentalized anathema. “This conviction was something of an intellectual prejudice in Nightingale and helps explain her resistance to germ theory. It was in keeping with her notion of a benevolent nature to believe that disease ensued from disorder, from pollution, filth and the mismanagement of noxious fluids discharged from the body- rather than from organisms that had a life of their own. Disease was, as she termed it ‘a reparative process’ the symptoms themselves indicated that nature was already setting right an imbalance between the body and its immediate env.” re fresh air. Good grief!


104: “Health visiting originated in 1852 through the dev of the Manchester and Salford Reform Association and Florence Nightingale was instrumental in setting up national health visitor training in the 1890s. End9.

121: “her book” NonN, no recognition that more, social env, variety also’ Nightingale “schools” on in America;
122: Table summary of Nightingale’s Environment Model good.
123: influence of it.
Lists FN at head of 21 theorists, 17 American has “global view” of nursing theory, Greece, Japan, Sweden,
England, Scotland


Sam Goodman “Lady amateurs and gentleman professionals: emergency nursing in the Indian Mutiny.” 18-40. Summer of 1857, 19: mutiny began 10 May 1857 in Meerut; high female presence at Lucknow; asst surgeon Joseph Fayrer there; 26: Administering angels, Julia Inglis wife of Brigadier Inglis, late diary on; 29: “nursing” between domestic and professional; 30: Emily Polehampton diarist; 30: care of Henry Lawrence 31: given arrowroot and champagne, probably had delirium; physicians prescribed champagne in hot weather, lack of clean water 31: “it is further well documented that the doctors at Lucknow made extensive use of alcohol as part of their treatment of cholera, and in place of pain relief from amputations; Robinson states that the usual dose for the amputation of a limb was ‘a single bottle, taken at one draught immediately before the operation began’” Polehampton did nursing 34: had example of FN; Polehampton referred to as the “Florence Nightingale of Lucknow” by Katherine Bartrum. Inglis’ report mentioned patient endurance and Christian resignation by women of this garrison, Polehampton, Barbor, Gall “after the example of Miss Nightingale constituted themselves the tender and solicitous nurses of the wounded and dying soldiers in the hospital.” endn53 (Chick, Annals of the Indian Mutiny, 870). 35: FN wrote Lady Canning, but rebuffed, nothing in her line of business (Robinson, Angels of Albion p 236). Lots of rewriting of history on the mutiny; 36: accounts of nursing reflective of the post Cr perception and popularity of nursing frm FN, “but also suggest again that the Br provision of medical care in either battle or civil emergency was still sorely lacking. They illustrate that although women were encouraged to effectively ‘pull their weight’... “ “no systematic means to enable them to do so.” lack of organization.


Charlotte Dale “The social exploits and behavior of nurses during the Anglo-Boer War” 60-83

60: reveals weaknesses in org of mil nursing and disciplinary problems; 61: Rafferty on, inexperienced naive nurses who wanted adventure; 62: importance of mil nursing from FN in Crimea, and re of Army San Commission after it that female nurses shd be introduced into army hospitals; cites Subsid Notes on; 14 nurses in Anglo Zulu war of 1879; but not until 1881 that formal service revived; Code of Regs for Female Nursing Service published in 1884; no ref to Hawthorn: 76: Queen Alexandra’s Imperial Military Nruisng Service, regs QAIMNS

Odette Best. “Training the ‘natives’ as nurses in Australia: so what went wrong?” 104-25. cites FN papers on; racism revealed in
her report; 105: FN, Strachan suggests that prior to 1860s nursing in Australia a lowly occ, untrained men and women
106: widow of chief justice of NSW in 1863 wrote FN asking for nurses, deaf ears (cites Godden); 1868 6 arrived; 1871 Annie Miller macron at Brisbane; 1899 Australasian Trained nurses Assoc formed; 107: FN research on aboriginal health “The responses that Nightingale received from Australia were highly racist and showed gross ignorance.” abor people described as savages, uncivilised; “Within Nightingale’s writings, there is no acknowledgement of the efficacy of Aboriginal trad medicines. Only one person who responded to Nightingale hinted at the value of trad medicines. Bishop Salvadore noted:... “
also plague in Hong Kong, nothing on Nightingale nurses there


A Regimental Officer. Our Veterans of 1854: In Camp and Before the Enemy London: Charles J. Skeet 1859. No index. 88: commendation of doctors. 331: animal food now almost uninterruptedly salt pork. Vegetables scarcely ever reached “the front”; lime juice has been unaccountably forgotten; ergo, scurvy, from this cause, many men had teeth so loose and gums so tender that it was pain and grief to them to gnaw their flinty biscuits.” Zouaves had bread. Sometimes rice; 332: rum the luxury; pork occasionally gorged raw, indigestible; clothing; blunder separated men from knapsacks
334: “At mention of Scutari, names which ought to be graven deep on English hearts rise up before my mind’s eye: Nightingale, the two Bracebridges, Stafford and Macdonald. It was chiefly the masterly business habits, the untiring assiduity, the sweet loving-kindness practised in most discouraging circumstances by these admirable persons that changed a pest house, shameful to humanity, into a hospital, not unworthy the civilization and benevolence of England.


A.L. Florence Nightingale: Her Aims and Ideals for the Nursing Profession. typescript September 1917. 6 pp. H1/ST/NC12/8 interesting, gets it right. poss ALP?

Abbott, Pamela and Claire Wallace, “Health Visiting, Social Work, Nursing and Midwifery: a History” 20-53. Amazing stuff on FN 42: “While Florence Nightingale recognized the need for trained nurses, she trained them in obedience, so that in the division of labour between and doctors, nurses were seen and saw themselves
as subordinates of the doctors and as under medical control. Furthermore, she stressed that nursing was a vocation, not a profession, and accepted the prevailing ideas of a nursing hierarch with a stress on strict obedience....’ live in hosp, “no set hours of work”!! “Nor did Nightingale challenge the link between womanhood and nursing.” like a Victorian family, husband doctor/....good grief. 43: struggle, Fenwick a “professionalizer” and FN a vocationalist; [but Fenwick had doctors controlling reg] Fenwick for “parity of esteem with the medical profession.”

Abbott, Maude E. Seymour. *Florence Nightingale as seen in her Portraits.* Boston: Boston Medical and Surgical Journal 1916. (was 3 articles)

Abbott, Ruth Duncan. A Comparison of the Health Beliefs of Florence Nightingale and Ellen G. White and the Incorporation of Them into their Respective Schools of Nursing. PhD thesis Medical Missionary Training School for Nurses. Battle Creek Sanatorium, Battle Cr, Mich CD. Cf with Ellen G. White and their respective schools of nursing. Abstract only; phil beliefs of each woman underpinned her health beliefs, similarities in cleanliness, water, nutrition, sunshine, ventilation and rest; but disease, exercise, temperance and trust in divine power different. “Florence Nightingale ‘s source of reform was her passion, personal obs and educ. She reformed nursing by using her pol influence and money. Ellen G. White’s source of reform was her belief in messages from God. Her reform was built on utilizing these principles. The influence that both women played in the role of nursing and health care is still evident in today’s schools of nursing.”


Abel-Smith, Brian. *A History of the Nursing Profession.* London: Heinemann 1960. Reprinted. Paperback 1975 seems same 290 pp. -- interview with. “I don’t think Florence Nightingale took much interest in mental hospitals. If she had, she might have seen mental and general nursing as a common type of activity, and tried to spread her influence by getting well-educated people in to the psychiatric hospitals.” 122: Local Govt Act 1929 transferred the control of the poor law hosps from the boards of guardians to the counties and county boroughs. “The plan which Miss Nightingale had outlined for London 65 years earlier was implemented all over the country, though some of the bodies which had become resp for the poor law hosps were not large enough to
be able to provide proper services.”
41: “Although Miss Nightingale’s attempts to secure a complete reform of workhouse admin failed, the pilot nursing scheme at Liverpool proved eventually a spectacular success.” friction, 41: new Highgate in 1869 repeated Liv experiment; 41: “Workhouse nursing would not be altered all over the country without far-reaching changes in the whole system of workhouse administration. Thus she evolved a comprehensive pilot scheme for London. Miss Twining had suggested in 1861 the provision of separate insets for the different categories of ‘inmate’. Miss N saw that this was unlikely to be achieved without a separate admin for London foi by the general system of rates. Small authorities cd not afford separate insets nor would they see the importance of appointing qualified nurses let alone qualified matrons. She sent her plan straight to the top of the Poor Law Board and induced the president, Mr Villiers to visit her at home.’ went to Cabinet and sold her ideas to Ld Palmerston, then hopes dashed by Palmerston’s death in 1865 and fall of gov a year later. Similar scheme tho less far reaching by Assoc for Improving Metro Workhouse Infirmaries (founded Feb 1865), London to be divided into 6 adm unions for tr of sick poor, governed by elected ratepayers and financed by a gen fin rate equalized over the metro area, each union to build an inf for care of 1000 acute cases. FN supported. “Although Miss Nightingale’s attempts to secure a complete reform of workhouse admin failed, the pilot nursing scheme at Liverpool proved eventually a spectacular success.” friction between Jones and governor, 42: governors converted to tr nurses, Liverpool experiment repeated at new Highgate Inf 169, difficulties but; then Daly
49: 19: FN not the only influence or the first. 1848 St John’s House. “Nevertheless it remains true that Florence Nightingale was the most influential of the reformers and in many ways her influence was the most wholesome.” She saw dangers of religious groups and rivalries, her own practical experience gave her a greater insight into the problems of hosp admin. CBX.41 all refs to FN are positive, some glowing. 5 July 1948 NHS est The community had accepted full resp for the care of the sick, and nearly all the hosps in E and W became publicly owned....” planning delegated to 14 regional hosp bds. “The large planning unit which Florence Nightingale had recommended 80 years earlier had been set up.” sympathetic to FN on reg also.
49: conflict between less eligibility and good medical care philosophical battle between discouraging idleness and relief of pauperism and duty of treating illness, fought within the 1909 Royal Commission on the Poor Laws, joined 40 years before. Louisa Twining had seen from the start that much pauperism was caused by sickness rather than wickedness. She had advocated the breakup of the poor laws and the est of public hospitals supported by taxation to run parallel to the voluntary hospitals supported by
subscription. FN had devised the admin structure within which the plan cd have been put into immediate operation. The two ladies shared the same values" so long as.... “Eighty years later, what had been the philosophy of a few pioneer women of the upper class became the rationale of the National Health Service Act.”

“The Battle for Registration” Chapter 5 61-80

66: most vigorous opposition to reg in the 2 hosps where Fenwick had nursed, London and Bart’s (Sydney Holland and Moore); fee too high, 1 guinea, wd not add a trained nurse

67: “thirty years’ war” no cit.

68: Burdett’s contribution over 50 years, meeting at his house re having a nursing section of Hospital Assoc, fight with Fenwicks started then; 69: lawyers and threats; Hosp Assoc had its own register and gave a badge, had to work 1 year to get on (BNA 3 years tr, but not enforced, 76: list not well maintained)

General Council, pres, vice presidents, 100 doctors, 100 matrons, 100 sisters or nurses, 70: but power in hands of doctors and London matrons; 71: Princess Christian, FN “a nurses’ republic with a princess at head”

72: BNA applied for Royal Charter, req Privy Council inquiry;

73: list. Dr Fenwick resigned as treas in 1894; Miss Barlow case;

Fenwicks did best to damage the assoc Incorporated Medical Practitioners Assoc, of gps, provincials, vs.

76: list not well maintained, 2-3000 names, had to pay 1 guinea to get on; neither list had many names

Abel-Smith, Brian. The Hospitals 1800-1948: A Study in Social Administration in England and Wales. London: Heinemann 1964. has coverage of midwifery and workhouses, lots of credit to FN, even Poor Law Amendment Act of 1867 “an important step in English social history. It was the first explicit acknowledgement that it was the duty of the state to provide hospitals for the poor. It therefore represented an important step towards the National Health Service Act which followed some eighty years later” (82); Dickens and JS Mill on Assoc for the Improvement of the London Workhouse Infirmaries, secy Hart after Lancet report of 1865; FN influence on Farnall; his “report was strongly influenced by the views of Miss N....for he was in frequent contact with her. Indeed, the similarity of the style suggests that large sections of it were written by Miss N...herself.” (76); plan of Farnall “similar to Miss N’s ‘ABC of Workhouse Reform’ which she sent to Mr Villiers in December 1865. But she wanted to go further and hand over the care of London’s sick poor to one central management” (76); govt fell on 18 June 1866 and with it FN’s hopes of a bill; sent copies of her plan to Chadwick and Mill who was on a Select Committee on Local Govt in the Metropolis (76); Mill argued case for one board for London; 46: 11,000 in hosps compared to 50,000 in workhouses in 1861; 1: cites FN that the first req in a hosp was that it shd do the sick no harm. “The
early hospitals failed to meet this requirement. Not until the late nineteenth century were hospitals of positive benefit to a substantial number of patients.” cites T. McKeown and R.G. Brown “Medical Evidence”... Population Studies 10, Nov 1955, p 125 119-41 online UG. 125: “The decline of the death rate during the nineteenth century was almost wholly attributable to env change, and owed little to specific therapy, preventive or curative.” (Smallpox vaccine an exception), hosps isolated inf patients; fever hosps after 1875 Public Health Act; believed inf and non-inf cases cd be mixed in ratio of one to six, as recently as 1854 cholera patients adm into general wards at Bart’s. Risk of inf contd to second half of 19th cen. “This risk existed until the second half of the nineteenth century, when FN found civil hospitals ‘just as bad or worse’ than mil hosps, and...” shd do the sick no harm. “This objective was certainly not realized during the eighteenth century; it was not until much later that hospital patients cd be reasonably certain of dying from the disease with which they were admitted.” [not clear on timing]


17: North American nursing has had no one outstanding personality such as FN, nevertheless capable hands of Dock, Hampton and Adelaide Nutting (Johns Hopkins); Nutting started AJN in 1900
52: Anna Hamilton start in 1901 in Florence
Chapter 7 Italy 57: The Nightingale Influence nursing controlled by priests rather than by physicians, hospitals staffed by cheap labor, social roles for girls more confining than in France, so attempts to establish a secular nursing profession met with great resistance. ; 1895 Amy Turton
Ch 23 Nigeria, UK training common
“The Nightingale Reforms” 14: reduced death rate from 400 per 1000 to 22 per, “a rate never before known in the army even in peacetime” soldiers loved her; St T
16: motherhouse influence; “The Nightingale influence was felt in most Prot countries, and parts of Germany. In Holland a secular nursing order started in Amsterdam in the 1880s and a Dutch Assoc for Sick Nursing was est in 1892.”
17: US had no one influence like FN, had Dock, Hampton and
Nutting;
18: influence most felt in Prot areas such as Holland and Scand countries and parts of Germany. In Holland a secular nursing order started in 1892.
210 map of influence from London
52: France Nightingale system in France from Anna Hamilton; laicization of French hospitals
209: FN’s St T in 1860 “Florence Nightingale’s creation of St Thomas’s Hospital School of Nursing in 1860 was the beginning of what is now known as ‘modern nursing’—modern meaning the progress of nursing in the context of its marked phase of development and period of time. The contribution of Florence Nightingale was the founding of a profession based on scientific innovation and medical knowledge. Thus an independent, self-supporting profession for women of education, culture and social standing was founded on a secular, humanitarian and strictly feminist basis.” "The contribution of Florence Nightingale was the founding of a profession based on scientific innovation and medical knowledge. Thus an independent, self-supporting profession for women of education, culture and social standing was founded on a secular, humanitarian and strictly feminist basis.”


Acland, Maureen. Letter to ed 3 May 1999. Chairman FN Foundation. “Happily one does not need to knock one icon down before installing another.” “There were many others, including Mary Seacole and Elizabeth Fry, who contributed significantly to the development of nursing and who have been insufficiently regard by history and the nursing profession itself.” FN achievement was to bring efforts and inspirations of many other people into sharper focus and for better training. “Legacy of ideas and principles continues to serve us well.”

151: Pavilion hospitals, Boston City Hosp, Episcopal Hosp, Philadelphia; Shattuck like a Chadwick in US sanitary movement
150: surgeon general W.A. Hammond, appointed spring 1862, led creation “of a hosp system which became one of the wonders of the medical world. During the four years of the war, the general hosps cared for 1,057,523 white men, with 8% mortality, lower than ever recorded for mil hosps and lower than many civil insts. No ref; Outdistanced hosps of Europe, Prussians in 1870-71 seemed dirty, 20 years behind us. But hosps new, J. Pringle warned against; FN “showed what the cleaning of hospitals cd accomplish, had reopened the argument.” French bad in Napoleonic Wars, and similar tragedy in Crimea, used lazarets in 1859 in Italy,
gratifying; "surgical fevers' lowered; numbers concentrated
poisons, but admin advantages
use of pavilion hospitals widespread in US army, tent hospitals
and sheds, 154: 150 ft long, 25 ft wide, 12-14 ft ceiling good on
ventilation, but not cleanliness
160: problem with nurses, first ones not trained at all, then
semi-trained, nurses disobeyed doctors' orders on food and
medicines;
164: food, not enough veg, had to add special foods
168: FN accomplishments with soap and whitewash. US did air! But
not cleanliness; 176: new profession of nursing Dix, anti-
Catholic, only over 30, lost battle with surgeons; 178: short
courses for nurses; 162: nurses ignored FN’s silent obedience
instructions, disregarded instructions; 196: no theory of
bacteria then, but knew “malarial miasms” of swamps and effluvia

Adler, David A. Wallner, John and Wallner, Alexander. A Picture

Col. John F. Adye, D.S.O., grandson. Adye loyal to Raglan; good
on lack of preparation, expectation of not staying the winter,
lack of reserves (5); when 20,000 left England the country almost
drained of soldiers; 6: SH told com of House in memo of 27th Nov,
army in the East created by discounting the future, every
regiment at home or within reached been robbed to complete it;
21: Cabinet confident of success; Ld Aberdeen thought Sebastopol
wd fall almost immediately; duke of Newcastle thought army, after
capturing Sebastopol, wd winter there, or else, after destroying
the fortress, wd return to winter on Bosphorus; James Graham sure
expedition at right time Adye 21; 22: Raglan reply to Newcastle
est Russian forces in Crimea 30,000 men; British guarded convoys,
French ships not fit for battle; French embarked 24,000 men, with
all ranks 30,000; Turks 6000;
34: landing 13 Sept 1854 at Eupatoria, took days, Russians did
not interfere; 38: Raglan brought every cavalry and infantry
soldier available, so cd not embark baggage animals, or tents;
55: attack from south side, taking of Balaclava;
77: defences of Sebastopol, Malakoff tower the key position;
90: Sebastopol a great entrenched camp, army of 15,000 to 20,000
men,

Adye contd
100: Battle of Balaclava, enemy had been observed hovering ca.
Balaclava; Menschikoff’s army arrived, Liprandi 20,000 infantry;
Turkish troops evacuated w/o attempting defence, retreated; so
Russians possessed 4 forts, fiasco described 102;
115: assault decided upon for 7 Nov, but enemy anticipated plans, immense reinforcements, made another attempt to raise the siege, and fought 5 Nov a battle, which, although unsuccessful in great object of driving allies into the sea, caused change in views of allied commanders, postponed idea of assault, gave time for completing defences of Sebastopol, and city able to hold out for 10 months longer;
119: Inkermann, Russians recd large reinforcements, General Dannenberg; Russian attack morning of 5 Nov of Soimonoff, foggy, English surprised; 137: Minié rifle, 1500 paces, Russians guns cd only kill at 1000
202: fate of Sebastopol sealed when Pélissier, rude, rough, assumed command, did not take advice, became duc de Malakoff, 8 Sept 1855 planted heel on ruins of Malakoff, 20,000 wounded; Inkerman 140: so many fought in so small a space; valour and perseverance, exhausted Br, 8000 men maintained themselves against large attack; 141: Br brought 25,000 infantry to Crimea, only 8000 available for Inkerman;

Adyeb contd
142: 25,000 originally landed in Crimea; 17,000 lost (3000 at Alma, Balaclava and trenches), 5000 left army sick, 3rd div had only small part in, and others in trenches, so only 8000 in battle; French had 6000 in; Russians had 47,000; 143: but no speedy fall of Sebastopol, nearly 100,000 Russians in the city; 145: for Raglan, 8 generals fallen, 2500 men lying on field, hospitals full, cholera still in camp, no reserves, winter had arrived; 152: loss of transports, Prince, winter clothing, drugs, ammo, and Resolute, ammunition, horses, forage; 154: army had not made provision for winter campaign with open trenches, numbers inadequate, and transport inadequate; 158: Filder in September wrote to England for 2000 tons of pressed hay, but demands did not receive prompt attention, and only a small portion arrived; 159: about 42% of horses died in first winter; Adye critical of Tulloch’s report; 168: sick in Crimea 4000 in January 1855, at Scutari and elsewhere 8000; effective for duty less; Winchelsea in House of Lords defended Raglan from Times criticism


Agnew, Robin A. L. The Life of Sir John Forbes. Bramber, West
52: acc to Innes Williams, 1999, an estimated 50,000 patients in
workhouse wards compared to 11,000 in voluntary hospitals.
66: apptment same time as Sir James Clark to royal household,
both advised Albert on Great Exhibition of 1851; “it is clear
from her corr with Forbes that they respected one another’s
opinions on matters of the bedside observation of sick patients.”
69: other book she referred to in letter was Notes on Hospitals
1859 ed. Friends with John Conolly
British and Foregin Medical Review; mesmerism, found no
influence; 43: homeopathy

Agnew, Robin. “Florence Nightingale (1820-1910) and Sir John
Forbes (1787-1861): Neighbours in Old Burlington Street,
Forbes, Scottish physician, never met, exchanged copies of each
other’s books; 95: Forbes’s opinions clashed with the London
medical establishment and contributed to the failure of his
Review in 1847. Son Alexander Clark Forbes
her letter from Crimea, army doctors regarded her as arrogant and
interfering, but prepared to work 12 to 15 hours a day in the
wards, preserved sense of humour, Clark had a holiday house at
Birk Hall, 95: neuropsychiatric symptoms;

Agrippa Nelson Bell, MD 1820-1911 wrote on quarantine with Toner;
the Sanitarian: A Monthly magazine Devoted to the Preservation of
Health, mental and Physical.

Aiken, C.A. Lessons from the Life of Florence Nightingale. New
York: Lakeside 1915.

Akid, Matthew. “Reputations: Dimming the Candle We Hold for
Florence.” Nursing Times on BBC doc Reputations (July 2001):
Reports on film, prurient, using Jehanne Wake “She was very
attracted to her cousin Marianne Nicholson” Small on deaths, also
“her provision of political leadership for the public health
movement in 50 years; includes misinfo: “But later in life, Ms
Nightingale opposed the professional registration of nurses and
signed a petition against women’s suffrage--proof according to
the documentary-makers at least, of her hatred of women.” then
Bostridge cited that “she really disliked women” and FB Smith
also said she was vs women; Florence Nightingale Iron Maiden
However ends with quotes from McGann and Attewell. That the prog
“barely hints at her remarkable legacy to public health, nursing
and modern-day health services....pity that not a single nurse or
nurse historian was interviewed....” (Not the worst!) Cites
Elizabeth Anionwu: “What fascinates me is her personality and the
depths of depression to which she sank. She was a driven woman
and a very sad woman at times, but also very influential. Her contribution has been distorted, which is not her fault, of course, but I think her contribution to statistics and public health has been overlooked.”

Kofoworola Abeni Pratt (née Scott). Lagos born, “turn of century” but must be about 1910 (d. 1993)
Xn, Anglican, taught at mission school in Nigeria
21: son baptized at St Martin in the Fields
40: like FN opposition of parents
46: started 1946 at St T, N School
67: got grant from Nightingale Fund grant to sisters course from RCN; was FRCN
79: University College Hosp Ibadan, Nigeria’s premier teaching hosp. Bell started new school of nursing, recruited from St T; after taking sisters’ course of RCN she was prepared for appt to a ward sister’s post in Br, but not in own country; but Bell wanted her; matron Miss Morrison; segregation of staff practised; in an African block;
84: Pratt refused the African flat and Morrison supported, they redecorated for her; professor liked qualifs on paper 87: but then realized black, preferred status quo, kept inadequate white sister; but Morrison supported Pratt; got her to an all-white section, and male med ward; (first as black in white ward) Adeoyo Hosp; 88: raised standards; 90: more reforms in wards; 91: student nurses supported; 93: corrupt ward servants to deal with, bribes for bedpans and personal services; training and supervision poor; 93: Pratt brought in professional discipline approach; 97: the nasty professor won over;
98: ward admins post, 100: Pratt first Nigerian to head Premier Teaching Hosp in Nigeria;
105: in 1956 return to Br to take nurs admin at RCN, 1 year (so 10 years now 1946-1954, then 1956-57); got 6 months in US, and Europe
111: 1961, or 5 months after Nigeria’s ind, promoted deputy matron; 114: got WHO prog based at Ibadan
80: Pratt 9 years in Br by 1954, left by boat and returned to Nigeria
116: 1965 first group of undergraduate Univ of Ibadan begin nursing as an academic discipline in Nigeria, 3 year course for BSC hons in nursing, male and female students, altho UCH strictly excluded male students; univ had full control of curriculum,
117: Pratt elected to ICN, attended ICN bd meetings in Geneva 1963 for first time; Nigeria became ind in 1960; in 1964 Pratt promoted to post of matron, UCH Ibadan, pass over; Pratt counselled, encouraged and supported nurses through difficult personal and prof dev;
118: period of Nigerianisation; Pratt became first Nigerian to be chief nursing officer of Nigeria, appointed 3 May 1965; but outbreak of civil war slowed devs.

Akiyama, Yuriko. Feeding the Nation: Nutrition and Health in Britain Before World War One. London: I.B. Tauris 2008. 288 pages; lots on FN; National Health Society 1873 organized in London; FN for lectures and practical training; 52: supported cookery and nutrition in schools; Lea; Rathbone, district nurses; Chapter 4 “Nightingale, Lückes and Feeding the Sick” 71-90


Allan, Peta and Jolley, Moya, eds. Nursing, Midwifery and Health Visiting Since 1900. London: Faber & Faber 1982. FN “Miss N” okay on; 252-3 influence on U.S. 1st 3 Am tr schools: Bellevue was FN infl with Schuyler, and 1st matron Sister Helen Bowden, All Saints; at New Haven Hosp (Nutting and Dock 1907) opened 6 October 1873; 253 then Boston Tr School for Nurses, but they did not follow FN fully. 1 Nov 1873 Boston Tr School opened

Allan, W. My Early Soldering Days, including the Crimean Campaign. Edinburgh Press 1897. One brief mention of FN, no Seacole. Prospect of peace at an end, govts may be stirred up to act with decision and vigour with European Conf broken up. If
Austria will act with us we will give our foes in the Crimea a good drubbing before next winter. “I have just heard that strong reinforcements have arrived in Miss Nightingale, Soyer the cook and Lola Montes, so perhaps all may yet be well! Our casualties lately have been more severe than usual, owing to Russ having thrown up a trench in front of our attacks, from which they keep u a heavy musketry fire; we have also been making advances against them.” [Lola Montes 1821-61, stage name for an Irish dancer and actress, mistress of Ludwig I of Bavaria who made her Countess of Landsfeld]

113: letter 18 June [1855] on sick list, announces my safety, “for it has been far from a second Waterloo. I have not the spirit to enter much into details tonight, and I am very tired after last night and today’s work; it is enough to say we have all had a most terrible licking, the French are supposed to have lost about 5000, and we ourselves over 1000, having gained nothing. The Russian loss is trifling in comparison.”...“How the Russians must crow?”


17: Agnes Jones found out FN at Kai was “tenderly remembered thre not only for her wonderful skill, but for the earnestness with which she had tried to win the souls of her sick people to Christ” then Sisters, St Vincent


review of Nightingale’s environmental theory. 86: “Nightingale’s
theory in practice today fits well with the use of the nursing process. The nurse assesses the patient situation, identifies need, implements a plan of care, reevaluates the situation and finally changes the plan to better serve the patient. This is done as often as necessary until the main goal of nursing (improved health state) is accomplished. At each phase of the process, documentation occurs to allow other caregivers to follow the plan of care” cites Selander. No mention of doctor, or shift changes of nurses.

13 canons essential in FN’s nursing
87: FN’s 13 canons (from Selander) these are the chapter!
88: Nursing care of Debbie with n’s theory, assessment of home env, water purity, ventilation


FN: recognition of nursing as a professional endeavor distinct from medicine began with Nightingale (Chinn and Kramer 2008: 30)
4: History of Nursing Theory. “The history of professional nursing began with Florence Nightingale. It was Nightingale who envisioned nurses as a body of educated women at a time when women were neither educated nor employed in public service.” Scutari, St T, “birth of modern nursing” founder of modern nursing;
5: vision, “an academic discipline with a substantial body of knowledge” distinct, “a nurse’s proper function as putting the patient in the best condition for nature (God) to act upon him or her. She proposed that care of the sick is based on knowledge of persons and their surroundings—a different knowledge base than that used by physicians in their practice.” Only 100 years later that the profession “began to engage in serious discussion about the need to develop, articulate and test nursing theory”, emergence of nursing as a science in the 1950s, apprenticeship
9: Chapter 6 71-90, factual errors, but positive

71: “After her return to England, Nightingale was employed to examine hospital facilities, reformatories, and charitable institutions. Only 2 years after completing her training in 1853 she became the supt of the Hospital for Invalid G... in London. Has Herbert as “family friend” Cr War. “She arrived there in November of 1854, accompanied by 34 newly recruited nurses who met her criteria for professional nursing—middle-class women with a basic general education.” [hardly] but okay, needed “to address the env problems that existed, inc the lack of sanitation and the presence of filth...” Ref to Thomas 1993
74: “family’s aristocratic status” “Stanley Herbert” as family friend, “reared as a Unitarian” NO belief that action for benefit of others is a primary way of serving God NO
FN theory of environment [okay on]
use of empirical evidence; ref to Matters affecting
“Her Unitarian religious beliefs would support this view of
God as nature.” Makes nature to be synonymous to God NO
germ theory “Although Nightingale has been maligned or
ridiculed often for not embracing the germ theory, she very
clearly understood the concept of contagion and contamination
through organic materials from the patient and the environment.
Many of her observations are consistent with the concepts of
infection and the germ theory, for example, she embraced the
concept of vaccination against various diseases. Small (2008)
argues that Nightingale did indeed believe in a germ theory but
not in the one that suggests that disease germs cause inevitable
infection. Such a theory was antithetical to her belief that
sanitation and good hygiene could prevent infection. Her belief
that appropriate manipulation of the env wd prevent disease
underlies modern sanitation activities.” [Small!, not bad on germ
theory, w/o the needed info]
Acceptance by the nursing community “Nightingale’s nursing
principles remain the foundation of nursing practice today. The
env aspects of her theory (ventilation, warmth, quiet, diet and
cleanliness) remain integral components of nursing care.”
Monteiro cited
McPhaul and Liscomb 2005 have applied N’s env principles to
practice in occ health nursing
FN’s role in suffrage movement, cites “several writers have
analyzed Nightingale’s role in the suffrage movement, esp in the
context of feminist theory development.” crit “for not actively
participating” but told JSM “could do work for women in other
ways” cites WS no page! [so, gets it wrong]
“Although her rejection of the germ theory and her inability
to recognize a unified body of nursing knowledge that is tenable
(rather than relying only on personal observation and experience)
have subjected her to some criticism and ridicule, other parts of
her theory and her activities are relevant to the professional
identity and practice of nursing.”
Pet therapy, good on, had 60 cats!
“It is only right that Nightingale shd continue to be
recognized as the brilliant and creative founder of modern
nursing and its first nursing theorist.” why say today?
A. Johnson (1919–99) US behavioural nursing theorist,
influenced by FN, from FN that nurse’s first concern is patient
and env, not illness
Allshorn, F. Florence Nightingale: Pioneer of Nursing. London:
Sheldon 1928. 32 pp.
Alper, Colonel Tatim, Poem in Florence Nightingale Museum
Barracks, Scutari, from Florence Nightingale Museum The Lamp No.
Hey Devoted, Faithful, Beloved Nurse, You,
You symbolize Virtue, you are Honourable, you are exalted.
In the history of humanity, you are glorious as the sun,
Maybe there are no flowers now on your grave, no roses,
Yet, all hearts are full of your holy statue,
Sleep well in your grave, you devoted nurse,
Each year, we commemorate you with more and more respect
Appreciation to you from the people, my people always admire you
Our endless gratitude to you,
We are endlessly indebted to you.

Altimier, Leslie. “Florence Nightingale: Neonatal Leaders, Take
Notes!” Newborn and Infant Nursing Reviews 12,1 (March 2012):40-
43. Leadership, Florence” cites Bostridge.... etc, ltd FN

Amico, Eleanor B., ed. Reader’s Guide to Women’s Studies 978-1-
884954. 439-41. Short articles only

An Address in Aid of the “Nightingale Testimonial.” Guildhall.
Poem. Saint of another creed, in distant lands.

ANA code 2015 ANA adopted its first in 1950,
ANA begins “Florence Nightingale believed that a nurse’s ethical
duty ws first and foremost to care for the patient.”

ANA. Florence Nightingale Pledge. Retrieved from
http://nursingworld.org/FunctionalMenuCategories/AboutANA/WhereWe
ComeFrom/FlorenceNightingalePledge.aspx December 13, 2016

and Bishop, Anne H., et al. Nursing Ethics: Therapeutic Caring
Presence. 1996.

Anderson, Christine Ann. Progress and Limitations in the
Professionalization of Nursing in the United States, 1890-1920.
1990 117 pp; dissertation

Anderson, Alison A. “Florence Nightingale: Constructing a
Vocation.” Anglican Theological Review. 78 (summer 1996):404-19.

Anderson, J. Wallace. Lectures on Medical Nursing. Delivered to
the Royal Infirmary, Glasgow. 1882. 2nd ed. New York: Macmillan
1883. lecturer on medicine, and physician to the RI Dispensary
Glasgow. Wayne State. storage. 224 pp
preface to 1st ed. 5 years ago managers of Glasgow RI resolved
that a course of systematic lectures on nursing shd be added. he
did. questions added. Mrs Strong, matron.
[quite a bit of similarity with FN, but no mention of hand
washing]
Lecture 1. history of modern nursing. Fry, Fliedner, deaconesses.
N Fund (6); Wardroper, 8: Mrs Wardroper was allowed to put her ideas into practice, and what is known as “the new system” of nursing was introduced into St Thomas’ Hosp in 1858.” FN recognized when started school in 1858 (so, gives credit to W before)

19: observation of facts
10: nature endeavours to effect return to a safe position, the sound basis for all care of the sick
healing power of nature
12 quotes FN on putting patient in favourable conditions
duty to doctor, to patient;
lecture 2 temperature, pulse
admin of stimulants
lecture 3 cough, expectoration
46: air, carbonic acid, extinguishes light, destroys life
quotes Parkes: Proper ventilation is clean air displacing foul air constantly and steadily, without chilling the patient.
re room for private nursing
lecture 4 digestion of food, cooking
73: quotes Lees Handbook for Hospital Sisters, use of Condy’s fluid for washing mouth
75 quotes FN re food
lecture 5 care of special diseases, diarrhea, scurvy,
lecture 6 urine exam
lecture 7 infectious fevers, typhus, enteric, scarlet, measles, hooping cough, diph
tenteric 123: disease not conveyed directly but through the discharges from bowels, practically in contaminated water
128 excreta, rules to prevent spreading, disinfectants (ok)
133: rules to prevent scarlet fever, separate the patient completely from other inmates, hang sheet with carbolic acid outside door, wash cups etc. in carbolic acid; sheets, nurse’s clothes washable (ok)
lecture 8 prevention of bedsores, poultices, cold compress
lecture 9 baths, cold pack
lecture 1 conc
188: tact, order, punctuality, cleanliness and neatness, no favouritism,
192: ignorance, scrap of info
appendix: invalid cookery...poisons and antidotes, glossary

Andres, Mary Raymond Shipman, A Lost Commander: Florence Nightingale. Garden City NY: Doubleday 1929, 299 pp a pop book on FN; Kai started 1833, tr school for nurses 1836; p 70 entered the Maison de Providence de la Charité, 5 rue Oudinot, Faubourg St Germain, had 200 orphans and a creche, a hospital for sick old women, 30 May 1853; SH descended from sister of Sir Philip Sidney, “Sidney’s sister, Pembroke’s mother” was great great etc. grandmother of SH. SH went to Oriel. knew Manning and Gladstone at Oxford. not a bad bio!; Nutting AN 0409; review in
Andrew Combe, *The Management of Infancy: Physiological and Moral*. Rev. and ed. James Clark 1860, pb 2009, quotes from NonN; “Introduction by the Editor,” xi: “It is to women that we must look first and last,” says Miss Nightingale, “for the application of sanitary knowledge, as far as household hygiene is concerned.” To carry out objects of this association, must instruct the women of England on means of preserving the health of their family. Ftnote quotes. In “Introduction by the Editor.” Xi; Combe for physiology and constitution of infant frame being made an essential part of female educ (xiii)

Xix “For originating this school, we have to thank Miss Nightingale, who, had her long and persevering efforts effected not... 206: “No family should be unprovided with Miss Nightingale’s comprehensive and very judicious “Notes on Nursing,” which apply even more to children than to patients in general.”


Andrist, Linda C. and Patrice K. Nicholas and Karen A. Wolf, eds, *A History of Nursing Ideas*. Sudbury Mass: Jones & Bartlett 2006. several refs to FN section 98-100 egocentric ideas, homocentric and eccocentric ideas; 4578049 Nightingale as Opinion Molder and nurses as change agents; includes refs to FN’s later writing;

Anionwu, Elizabeth. “A History that Lives on,” *Nursing Standard* 26,5 (5 October 2011):18-19. Author is emeritus prof of nursing at Univ of West London and vice chair of the Mary Seacole Memorial Statue Appeal. Seacole “a nurse who died 130 years ago” “Her contribution, as well as that of Florence Nightingale”, she was a “doctress” and hotel keeper. “With her knowledge of infectious disease she felt she could contribute a great deal” so went to England to offer her services. Even though she was armed with glowing references from senior personnel, she was rejected five times.” FN and she “first met” in the Crimea (they met only once, and not in the Crimea). Both committed to holistic nursing practice and importance of sanitation and nutrition and care at death.

28: Wm Becket Denison, benefactor and member of bldg com, corre
ted with FN in April 1862, and read her Notes on H; they followed her
dvice re north-south axis, with windows facing east and west;
ward size; Scott informed that the wards were to hold about 30
patients and have a height of 16 to 18 feet, giving about 2000
cubic feet per patient; fireplaces etc. FN est hosp wd cost £100
a bed but this based on block system, and cost was 4X as much;
total £122,329; Sept 1862 plans approved; he had built the St
Pancras RR station in pseudo-Gothic style (nice pic); 29:
foundation stone laid 29 March 1864; “noble bldg” central hall,
genial sunshine;
vol 2 The Second Hundred Years has pic of Louisa Gordon. Refs to
arrs for Miss Dinsdale to be trained at St T, but she did not
like, and Wardr did not like her; HBC corr; Leeds withdrew; in
fact Dinsdale went to Middlesex instead but resigned on marrying;
next matron was Clara Jones and appointed;
2:14 when new inf opened in May 1869 supt of nurses had small
efficient staff of 1, some old; new system of nursing,

Anon (or Thomas Turner, chair of meeting) “Statistics of the
General Hospitals of London.” Journal of the Statistical Society
of London 25 (September 1862):384-88

anon. note in Books Received. Introductory Notes on Lying-in
Institutions. 28 October 1871:516.
“kind womanly heart.”

anon. review of Michael D. Calabria and Janet A. Macrae, eds.,
about one tenth of its woolly, repetitive, strident three
volumes...re errors on Descartes, Hume and Laplace, “It appears
that Nightingale invoked their writings without having read
them”; The editors’ hagiographical approach is resolutely
innocent of recent revisionary writing about Nightingale.” so
there!

anon. review. “Miss Nightingale on ‘Lying-in Institutions’”
Medical Times and Gazette (18 November 1871):625-27.

Anon. M.D. “Hospital Mortality.” Medical Times and Gazette (5
March 1864):264-65 surprise to see Farr’s support for FN, could
reduce hosp mortality by taking in slight cases and rejecting
serious. Main cause overlooked and trivial cause, ventilation,
“paramount” to FN; Bristowe and Holmes will no doubt address.

Aravind, Maya S. and Chung, Kevin C. “Evidence-based Medicine and
Hospital Reform: Tracing Origins back to Florence Nightingale,”
Plast Reconstr Surg 125,1 (January 2010):403-09. Recognizes FN
work on evidence based. Not Sackett and Cochrane but “Florence
Nightingale was applying the concepts of evidence based interventions to the medical profession more than a century before.” Aravind Mayo BA MA MD, Kevin C Chung MD MS; doctors credit Nightingale


Kralova, Paulina. Miss Florence Nightingale Kniha o osetrovani nemocnych. V. Praze. J. Otto 1874. 188 pp. 4 ledna 1874. No index, no biblio

Arden, Peter. When Matron Ruled. London: Robert Hale 2002. Sec sources, not very good, lots of small errors on FN and St T; lots of pics; 61: new Adelaide Hosp opened in Dublin in 1858 (first was 1839), Miss Bramwell appted lady supt, rec by FN, had been “one of the successful nurses at Scutari in the Crimea” only on post at Dublin 8 months, est basis for nurse tr, succ by Mrs Ruttle in 1859, who went to Kai; but no such name in data base!


Armstrong, Karen. The Gospel According to Woman: Christianity’s Creation of the Sex War in the West. London: Elm Tree 1986. 147: “Of all the Victorian viragos we have considered, Florence Nightingale, who hated women and wanted co-operation only of men, was a neurotic all her life.”


148: virtues based may seem prudish and old fashioned “is because of the history of nursing especially the influence of Nightingale who wanted nurses to be good, with high moral character. The pivotal virtues in Nightingale’s era included obedience and subservience because the nurse’s role consisted in following doctors’ 149: orders. In contemporary nursing ethics, the pivotal virtues are caring virtues such as compassion and benevolence;
this dramatic difference in emphasis helps to demonstrate how candidates for the status of virtues change over time.” [no idea of historical context]


Arnold, Carrie. “Rethinking Sterile: Hospital Microbiome.” *Environmental Health Perspectives* 12,7 (July 2014): freelance sc writer, Jack Gilbert data, env microbiologist at Argonne National Lab HAIs

“Back in the 1860s, Florence Nightingale knew that just opening a window can drastically change the microbes around us in the air, and this might just influence our health in the long run.” citing Meadow, J.W. “Indoor airborne bacterial communities are influenced by ventilation, occupancy and outdoor air source.” *Indoor Air* 24,1 (2014) 41-48 DOI 10.1111/ina/12047.


Ashley, Jo Ann. On women’s leadership in nursing 1976. U.S.

Asububel, Herman. *In Hard Times: Reformers Among the Late Victorians*. New York: Columbia University Press 1960. [has scattered, frequent refs on FN, original] sources

Attewell, Alex. Tweets on FN tatoos! 27 June 2013. Notes on Nightingale. And blog 9 May 2013, refers to FN came to sit in WA in 1879 for memorial service for JL

Attewell, Alex. “Greetings from Scutari.” *Nursing Standard* 24,36 (12 May 2010):64 took group to Selimiye Barracks, “Br soldiers injured fighting the Russians in the Cr War were brought via the Black Sea to the Barrack Hospital....” used for 18 months. Scutari museum. “Miss Nightingale”. Quotes Bostridge, “only on seeing the site of Scutari that the challenge faced by Miss Nightingale and her colleagues can be appreciated.” Museum, first winter, mortality peaked at 40%. “four miles of beds, 18 inches apart”. “pristine marble tiles where once there were rotting floor boards.” ad for his tours!

Attewell, Alex. *Illuminating Florence: Finding Florence Nightingale’s Legacy in Your Practice*. Sigma Tau Theta International 2012. 82 pp. 16° size; endorsements by Selanders, Selanders, Bostridge; Attewell has an MBA from Kingston Univ; Table of contents: Vision, Management, Leadership, Theory, Legacy, Letters to Probationer Nurses. Alex is hon member of Sigma Tau Theta International! Intro by David C. Benton, CE ICN, 2009 ICN and sister foundation FNIF produced a modern version of FN’s *Notes on Nursing*. This a pocket guide. Includes 1883 address to nurses, quotes from Sick Nursing and health Nursing 1893 on marching forward; nice selection, visually nice

Aubrey-Fletcher, H.L. *History of the Foot Guards* 1922. FN made Scutari hosp “a place where sick and wounded bodies could find real rest and physical and moral recreation,” and so army began “to resume its normal strength and vigour”


Austin, Anne L. *History of Nursing Source Book*. New York: G.P. Putnam’s Sons 1957 480 pp. FN 283 289 291 296 298 418; 257 263-73, 22-55, 263-6; 213 215-20; 271-81; lots on her writing; Chapter 6 “Some References to the Life of Florence Nightingale Before 1860” 213-56; excerpts from letters; Chapter 7 Selections from the Literature of the New Profession of Nursing 235-90 from Crimea, Lees, Una, Wardroper; has AHC letter of 1860 Rules; good book

Notes on Hosp


Ayers, Gwendoline M. *England’s First State Hospitals and the Metropolitan Asylums Board 1867-1930*. London: Wellcome Institute of the History of Medicine 1971. [was PhD, good source on FN and public health]; start of Metropolitan Asylums Board, 22 June 1867, from Hardy’s act, 3 millions, first chair Dr Wm Henry Brewer; Gathorne Hardy intro 8 Feb 1867, state’s resp for destitute sick, ack that aged, sick and infirm had become the main occupants of workhouses when originally designed for deterring able-bodied (18); necessity to build hops under Poor Law mgt, with resident MOs, matrons and paid nurses, and medical instr; start with fever and smallpox; the bill said asylums, but in speech he said hosp; 23: Brewer, a churchman, got Anglican Soc of st Margaret’s, from E. Grinstead, founded by Neale, for temp care of fever cases in 1869; 49: infectious disease hosp; Stockewell and Homerton opened in 1871; but cd not function
because cd not recruit staff at rates given;
7: Villiers sent Farnall to see FN in early Feb 1865, outcome was
a draft “Form of Enquiry” drawn up by FN and Farnall to use in an
investigation of every workh inf and sick ward in London;
Villiers approved and questionnaires sent out at end of Feb; in a
few weeks Villiers directed that a circular shd be sent to all
metr boards of guardians calling on them to appoint tr nurses and
discontinue employment of untrained inmates, but little effect,
not at order but suggestion; July 1865 Ernest Hart and Wakley
appointed special commission to investigate all of metropolis,
Hart, Anstie and Carr; report weekly in Lancet; “bleak and ugly
picture of insanitary conditions, inadequate nursing, defective
appliances and insufficient ventilation and overcrowding”; Nurse
Matilda Beeton of Rotherhithe Workhouse Inf included” absence of
night nurses; many sick patients were dirty, their bodies
crawling with vermin: no waterproof sheets, ... but one bed pan;
sheets changed once in three weeks, soiled sheets washed in inf
at night; bad supply of towels; maggots crawled, sick diet
mockery, milk not heard of; also by Nurse Beeton of Strand Union
and Nurse Jane Batemen of Paddington Workhouse; at 1865 annual
conf, BMA supported initiative of Lancet and followed with
another committee of enquiry, 8: included Anstie and Griffin; Jan
1866 Hart, Anstie and Rogers.... of mobilizing public support for
reform; 3 March 1866 earl of Canarvon; Health section of NAPSS a
forum for workhouse reform, for workhouse doctors (Richard
Griffin esp)

Ayers, Kathi. “How Did Florence Nightingale Survive Being a
Trauma Coordinator?” Journal of Trauma Nursing 9,4 (October
2002):93-95 guest editorial. MSN CFNP EN, Nightingale pledge,
took 33 years ago, ceremony that remains in my memory, continue
to revere “Liaison. Ms Nightingale respected the chain of command
and believed in doing things quietly, working behind the scenes
on conflicts, rather than airing them in the presence of many
others.” 95: after serving country in Cr War “it is believed she
suffered from Post Traumatic Stress Disorder. In spite of being
bedridden most of her later life, she always seized the
opportunity to use her influence and writings for change.” cites
Clendening, and NonN

Ayliffe, Graham A.J. and Mary P. English. Hospital Infection from
gives good points on FN but 81: “Despite her efforts to improve
general hygiene, she still continued to believe in miasmas and
never accepted, even in later years, the germ theory or the value
of antiseptics.” 81. quotes her “absurdity” statement. good on
Hotel Dieu, described in 1788 as having 550 beds on a single
floor with direct atmospheric communic; whole hosp had 1200 beds,
each with 2 to 4 patients; one in four patients died, and
mortality after amputation was 60% (82). again on 65-66 “Florence
Nightingale never accepted the germ theory of disease, although she did believe in contagion as well as miasma,” achieved her remarkable results in the Crimean War by fanatical attention to cleanliness, space and fresh air. Good on Intro Notes on Lying-in. (Ayliffe Dept of Microbiology, Univ of Birmingham, b 1926, medical microbiol, emeritus, doctor, MD Babini, Esabetta. Doct cand at Wellcome Sept 2010 conf. PhD thesis of “The Boundaries of Illness” in cinema “Florence in Film” on Neagle’s Nightingale.

Baer, Ellen Davidson, D’Antonio, P., Rinker, s. & Lynaugh, J.E. [Eds.] Enduring Issues in American Nursing. New York: Springer Publishing 2000. Numerous refs to FN, US, Johns Hopkins Joan E. Lynaugh, “Isabel Hampton and the Professionalization of Nursing” 42-84; ref to Tarbox, FN and sisters of Mercy; Weeks’s Textbook of Nursing 1885, authors of section: section 1, Contemporary issues in his context; Section 2 Joan E Lynaugh, Identity, the meaning of nursing 1-: Hampton; Section 3, Patricia O. D’Antonio; Section 4, Lynaugh, the nature of nursing knowledge; Section 5 Concl Sylvia Rinker, and D’Antonio Hampton assumed title principal of the tr school, in addition to supt of nurses; 12 hour day on wards; 2 hour off duty in aft and one free aft a week; few regular weekly classes, 2 a week; Hampton taught; with physicians a weekly lecture in evening; Hampton used visual aids (object teaching) used a skeleton, manikin for visceral anatomy, charts, specimens, pics; 20 medical texts in library (58); notes had to be written out and handed in a compendium; got notes from Hampton’s lectures got cooking taught by graduate of Boston Cooking School, with lessons in food chemistry; Hopkins’ wards headed by graduates and Hampton spent much time supervising and teaching: humanitarian sympathy for all sufferers, importance of thoroughly clean surroundings and pure air; insistence that system and method prevail throughout; infant with gonorrheal conjunctivitis in isolation back room; did not touch; explained dangers and resp to self and to child; then watched as did first dressing; talked to baby’s mother; Dr Hurd in 1891 highly complimentary about the school; 1st graduation; Hampton spoke, Osler gave main address and provided bouquets of roses presented by Mrs Gilman to each of the 18 young women rec’d diploma from Dr Hurd; successor to Hampton was Nutting; Osler addicted to stereotypes of garrulous nurses Nursing Ethics 1912 Hampton’s second book; concept borrowed from doctors and then devalued; Journal Club formed, for talks; District nursing, first dev in England, introduced in some US cities in late 1880s; in Chicago in Hampton’s last year there; hoped to introduce in Baltimore; visited district nursing centres in England when on vacation; then Lillian Wald invented term
“public health nurse” at social settlements; Hampton had paved the way; then Chicago congress, International Congress of Charities; Hampton shared platform with Billings and Henry Burdett, delivered “Educational Standards for Nurses”; did not use FN’s name but advocated a return to N system of clear separation of medical and nursing authority; and military organization; “absolute and unquestioning obedience” and chain of command

Dock paper also; but she and Hampton disappointed at timidity of other nursing papers; paper sent by FN “denounced the modern tendency to make nursing a profession, instead of a calling, and dismissed ‘examinations, public reg, graduation’....

Louise Darche supt of New York City Tr School at pauper hospital on Blackwell’s Island; described a school registry as an American alteration in N plan;

Society of Superintendents proceeded briskly; Billings and Darche rounded up names of 71 supts to approach (72);

King visited FN after Hopkins’ death, 1875, and N school ref to Mona G. Wilson (1894-); on PEI... got Florence Nightingale Award; OBE, WWI, Toronto born? Back in Toronto 1922;

lots of applications for supt position; 50: King, Billings, Gilman and Osler interviewed 4 leading candidates


notes in Makeover


526: Southwood Smith, dir of London Fever Hosp, patients isolated; “hyperquarantinist Koch advocated water purification as the solution to Hamburg’s cholera problem.” But not invariant connection between prophylactic consequence and etiology

“Florence Nightingale, as so often, was being overly dogmatic when she insisted that ‘Quarantine follows logically and inevitably on ‘contagion’ as sanitary measures on ‘non-contagion.’” ftn8 (cites Eyler on Farr, p 188). [Eyler gives 43399 f19 as source, dates 1869 rather than 1861, which arch. Did]


Registration and Nursing Organisations 153: first state exams in 1925

154: problem, of 67,000 nurses and midwives in 155: 1901 Census, less than 10,000 had received the requ training;

162: “In many ways the ‘Thirty Years War’ for registration was a
Pyrrhic victory. The standard required, when the smoke of battle subsided, would have satisfied neither Miss Nightingale nor Mrs Bedford Fenwick, nor did it the College of Nursing: it was all an expedient compromise. By its own folly the profession had handed over the control of the standard of entry and requirements for the basic training to the government, and of course to the ultimate control by people who had the responsibility for keeping the hospitals staffed as cheaply as possible.” General Nursing council

Chapter 9, “The Influence of Florence Nightingale” 113-30. cites no ms sources, uses Woodham-Smith; cites one letter to Farr, gives no source;

127: “Had Miss Nightingale’s advice on the Poor Law been taken and her plans accepted there might have been a universal health service before 1948 and had health been taken out of the ‘hideous system’ preventive medicine would not have been tarred with the Poor Law brush. Besides all this she was a prime mover in the reform of midwifery services.”

* 3rd ed. 1995. same chapter 9. 119: “The first ten years of the school were disastrous. Mrs Wardroper selected working class girls who came and went with amazing rapidity; there was no rush of candidates in spite of the advertisements. Analysis of the register shows that comparatively few probationers were nursing at the end of their four years....the fact that so many were dismissed for glaring defects like drug addiction, phthisis, syphilis and insobriety suggest that either Mrs Wardroper’s judgement was at fault or that there was no choice. Nevertheless the Fund’s publicity continued to be good and members of the Council wrote authoritative articles on ‘reformed nursing’; 121: “For all its vaunted publicity the Nightingale system was not a break with the past....We do nursing, and particularly nursing education, a great disservice by pretending that nursing suddenly became homogeneous and educated. Believing the myth, we have clung like a drowning man to a raft. Those who came after Miss Nightingale for the most part lacked her willingness to experiment and they emphasised obedience and discipline long after hospitals had ceased to be the lawless places complained of by the early pioneers.” 122: “Under the Nightingale system undoubtedly nursing and hygiene improved. There developed a career structure for nurses...” and says FN disappointed.

Baly, Monica. “The Nightingale Nurses 1860-1870.” Bulletin of the History of Nursing Group at the Royal College of Nursing 8 (Autumn 1985), re probs sent to Netley

provided it was done “reluctantly and against Miss Nightingale’s own convictions” 25. [even 2nd ed has exactly the same sources as PhD thesis! for primary sources]

She was “classless” and “hated snobbery” She reformed nursing not to give women a career but to give the sick a service. The £40 a year earned by a ward sister compared well with the £30 a year for an agricultural worker (133). Chapter 4 65-81 on midwifery nursing; General Lying-in became Queen Charlotte’s; 66 lying-in hosps of 18th cen plagued by puerperal sepsis and so charity hospitals often refused to have maternity wards; FN realized govt financing necessary, few candidates wd do 6 months, cost; result was “on the whole disappointing” took ¼ of income of Fund and doubtful whether trained more than 40 women.

refs to FBS polite, vs hagiography (1-2); but disagrees with him occasionally (16) and (71) on Jones being spiritual head; conclusions of books say “very little” achieved at N School in first ten years (219); gives FN credit on workhouse “Perhaps of greatest importance, and least recognised was the effect of the Fund on Poor Law nursing, first in Highgate, then at St Marylebone, from whence the ripples spread across the pond of Poor Law nursing in general” and district (220); Fund brought in secular nursing earlier than otherwise would (22); ends “For 50 years with a very limited income it managed to achieve a great deal in different spheres and because of its prestige and publicity its influence on nursing was probably out of proportion to the actual achievement in terms of nurses trained” (224);

biblio cites LMA GLRO H1/ST, at BL

Baly, Monica. “Shattering the Nightingale Myth.” Nursing Times 82,24 (11 June 1986):16-18. came back from Crimean War acc to myth with desire to reform nursing and had clear ideas “She had not and she regarded the Nightingale Fund as a millstone round her neck.” chose Wardroper (but she never says where the legend came from). “The harsh facts indicate otherwise. St Thomas’s was in the doldrums and about to be demolished. Florence Nightingale hardly knew Mrs Wardroper” and “far from wanting refined, educated ladies, Florence Nightingale thought that intelligent working class girls were best for this ‘coarse, servile, work.’” (but no source given, and it is wrong. her aim to give the poor sick a better nursing service, not to give women a career, although later realized value as a career; choice of St T not because well managed but interest in architecture and wanted to see St T build in new style outside London. “During what can only be described as a Machiavellian intrigue, with the resident medical officer, Mr Whitfield, Miss Nightingale agreed to lend her name to the ‘Blind in the Suburbs’ faction at St Thomas’s.” and he persuaded governors to accommodate the N School; tried to get Blackwell as supt, but Whitfield insisted on keeping matron; compresses Wardroper material (no recognition of process of breakdown); 17: in first 10 years 188 probs signed contract, of
which 66 did not complete the year; 4 died in tr, most ill at some time and some off sick more than on duty; half of those who left were dismissed; incl phthisis, syphilis and drug addiction; many unable to write notes or keep records; better in district work than general; why? “Sir Edward Cook...was anxious to produce a panegyric and make the rough places smooth, partly because the nursing material has been underresearched.” political motives; 18: “To face reality one has to forget what one has learnt, or indeed taught, and start on the trail of primary sources.” vast and scattered and no one can read and digest them all. first essential to read all the sec material (bad strategy); LMA HBC papers, cites Dick, Short History.


Baly, Monica E. and H.C.G. Matthew, “Nightingale, Florence (1820-1910).” Oxford Dictionary of National Biography. 40:904-12. ODNB (2004. 61 vols.) trashy, corr on, has gratuitous insults, errors, uses F.B. Smith as a reliable source, sexist naming. limits FN to “reformer of Army Medical Services and of nursing organization” inside dopester “known as Fanny” (904) and “W.E.N., as he was known to friends” handsome and cultivated (904); “distinctly radical manifesto” (904)

re Crimea: cites Smith “F.B. Smith argues that she was lax about preparing her witnesses and gave the impression ‘that she did the work while Herbert played the dilettante figure-head,’ when the opposite was in fact the case; moreover, ‘behind Herbert’s back she was envious and disparaging’ (Smith, 83)” (907). But neither Smith nor Baly seem to have read the primary literature; “Brought up by parents basically Unitarian” but a born-again Xn (910), and doesn’t ack mother def C of E and grandmother evangelical; FN never attended a Unitarian church with her parents or on her own, but the few times did was when staying with Unitarian relatives;

“She considered them [women] selfish and though she adulated a chosen few, she preferred working with men” (910) She made no common cause with women claiming the right to train as physicians. “Her attitude to women was patrician” praises Smith “Barry Smith’s striking study (1982) stripped away the iconic aspects of the Nightingale legend to examine the remarkable network of manipulation (mostly by letter) by which she sought to impose her will and achieve her objectives” (911). even bibliography of Ms sources, repeats errors of NRA, which one would know were errors if used;

“The thin, waspish woman who sent mordant, aphoristic letters to ministers now metamorphosed into a stout, benevolent old lady” (909).
Baly, Monica and Muriel Skeet. London: The Middlesex Hospital Nurses’ Benevolent Fund. 167 pp not in Br Lib


“The Nightingale Nurses and Hospital Architecture.” Bulletin of History of Nursing No. 11 (1986):1-6. paper given to Wellcome Inst 25 April 1986. concerns re nurses being molested. “Miss Nightingale was convinced, and again not without reason, that hospitals were lawless and corrupting places.” to reform nursing had to get hosps orderly and free from taint of immorality, not asking for a corps of educated young ladies as for working class girls who wd practise hygiene and be morally earnest; “As it happened, the new sanitary ward of her dream fitted well with the germ theory when it was validated. It was easier to practise asepsis in a clean, airy, tiled ward than in the old style ward with closed windows, wooden floors and porous walls.” 4 essential points: economy of attendance, ease of supervision, convenience as to number of sick in same ward and floor; avoid waste of time and strength on stairs; nurses to have meals on ward, prevent wandering “and possibly being molested”; FN and Fun fighting for a comfortable nurses’ home and deploiring the architect’s decision to put the dining room in the basement, below the water line, and the bedrooms in that attics; women need to repaired to their bedrooms, needs proper sitting room with cushions, flowers. “secure nurses’ home” “Old hospitals were, for the most part, built in unsavoury areas where violence was rife; mugging and rape are not peculiarities of the late twentieth century.” parents wd not allow daughters to live there, if not on war and near by. a fair complimentary article.

Baly ODNB contd

“she often used relatives ruthlessly to help her with her with various projects; several were coerced into acting as secretaries or guardians in the house that her father purchased for her” (908)
gives only one paragraph, it with factual errors (909) to workhouse inf nursing, surely one of her most important reforms; oddly warns of errors and limitations of Woodham-Smith’s biography ( ) but cites F.B. Smith routinely as if it were a reliable source.

other quotes: re grievances of the ordinary soldiers and she wrote, time and again: “I stand at the altar of murdered men and while I live I will fight their cause.” (where?); quite good on India; also published “Still, Dame Alicia Frances Jane Lloyd- (1869-1944),” Oxford Dictionary of National Biography. 52:

Baly, Monica E., ed. A New Approach to District Nursing. London: Heinemann 1981. chap 20 has FN material; brief, not hostile; 265
Baly, Monica E. “Florence Nightingale and the Development of Public Health Nursing. Humane Medicine 5, (autumn 1989):38-45 7 pp. FN “a mid-Victorian radical who distrusted orthodox medicine and put their emphasis on cleanliness, hygiene, clean air and water (cites Bynum and Porter) Indeed there was much to distrust at a time when much medical practice was still in the grip of Aristotelian theory of the balance of the humours.” FBS criticizes Barry Smith for his crit of FN “for clinging to the theory of miasma when the new thinking was pointing to germ theory. However, Koch did not discover the tubercle bacillus until 1880, so in the 1850s, Nightingale was in good company when she insisted that disease was spread by foul drains and contaminated water, which of course she associated with smell and ‘miasma.’ Like Chadwick, resisted germ theory (Baly wrong here, also has FN a Unitarian); NonN mainly about hygiene. Rathbone, district nursing; Merryweathers; Lees’ study [good article with a few exceptions]; MOHs appreciated value of health visitors; early ones distinct from nursing, later, 1962, had to have nursing tr; “In 1978, the World Health Organization, like Miss Nightingale, looked forward to the year 2000, and the prospect of health for all through primary health care, envisioning “essential health care based on practical, scientifically sound and socially acceptable methods and technology, made universally accessible to individuals and families in the community” affordable> WHO said nurses’ potential through primary health care. FN would agree. “One might argue that of all Miss Nightingale’s contributions, her emphasis on public health and sanitation brought the greatest benefit to the England of her day. “ post Cr “passionate desire to prevent unnecessary suffering. Cites 59786 f93 68887 in 6:587-89, shows FN onto to germ theory; cites Bynum and Porter Medical Fringe and Medical Orthodoxy. 1988 FN better than on miasma than Aristotelian 4 humours

Baly, Monica E. A History of the Queen’s Nursing Institute. 100 Years 1887-1987. London: Croom Helm 1987. 153 pp Wellcome. Rift with Liverpool (68) cites FBS in biblio. 51: Malleson was a Victorian, after birth of 4th child, “like her friends Harriet Martineau and Miss Nightingale, she took to her bed or her couch.” U Wat. cites FBS and WS, not Cook. but a good source.


Baly, Monica E., Barbara M. Robottom and June M. Clark, District Nursing. 2nd. ed. London: Heinemann [1981 entitled A New Approach to District Nursing

Baly, Monica E. “Florence Nightingale and ‘Her’ Schools of
Nursing.” *Humane Medicine* 4,1 (November 1988)

Baly, Monica E. “Florence Nightingale: Founder of Modern Nursing. Part 1. The Crimean Experience.” *Humane Medicine* 13,4 (winter 1997) personal background, SH sent party of High Anglians under Stanley, verge of conversion; her hectoring letters brought out Soyer; possibly had typhus; of 98,000 soldiers to field, 22,000 died, 17,000 of disease; losses lower than French; “Miss Nightingale and her nurses went out to emulate the French Sisters of Charity and, by administrative skill, had surpassed them.” Got Royal comm; training must be nonsectarian; ends “Florence Nightingale is regarded as the founder of modern nursing” but remarkable contribution to san in India and reform of Poor Law, hosp architecture and public health. “Many facets of her contribution to the foundations of modern health care.”

Balyb (3)

Baly, Monica Eileen. *The Influence of the Nightingale Fund (1855 to 1914) on the Development of Nursing*. thesis for PhD Univ College 1984. Br Lib microfilm. 372 pp. "Miss Nightingale” Abstract. “Special attention is paid to the claim made by biographers and authors that Miss Nightingale and the Fund always achieved their aims. The study shows that the fund was associated with St Thomas’ Hospital and that the early experiment was less successful than is supposed and that there was a desire to break the association and launch schemes elsewhere. Primary sources suggest that the fund was more successful in promoting nursing in Poor Law institutions and in district nursing than it has been given credit for. Authors have overstressed the importance of the Nightingale system on the development of general nursing and have often ignored the changes in women’s education, the emancipation of women and the advance in medical science which wd have called for a new type of nurse.” 13 chapters and 9 appendixes; Appendix

Balyh (10)
Baly’s numbers for the first ten years of the school were that 188 signed the contract, of which 66 did not complete (more than half dismissed); four died in training. My count from the probationers’ registers has 60 incompletes (including 29 dismissed, 27 resigned, three died and one no information); of the 133 who did complete 67 had there first appointment at St Thomas’, 38 at other British hospitals, 25 at workhouse infirmaries, 3 at hospitals elsewhere in the world, for a grand total of 193.

33: Fund of £45,000 over £1,000,000, collected in 20 months; prob the first fund appeal aimed at all classes; highest gift £300 chap 11: Fund Council and Nursing Politics; fund in good hands, Lord Monteagle had been a ch of the Exchequer, Marjoribanks a banker at Coutts (but died bankrupt); income from trust remained roughly the same £1,500 while expenditure on nursing rose, offset by contribution from special probs; in 1871 Fund supplying St T with 31 probs, 1901 up to 58 but by then 1/3 were paying bd and lodging and no salary; never considered another appeal to public (282); FN and council thought govt shd pay to tr nurses in public hosps; 286: FN did not think to appoint women or educationists; although metro asylums bd did; 287: “The short answer to the absence of women on the governing body was that Miss Nightingale preferred working with men.”; chap 8 Nightingale Nurses Abroad; Osburn. 216: In spite of being virtually disowned by the fund, Miss Osburn contd as supt for 25 years; Osburn dismissed 3 sisters with the authority of the col sec (Bessie Chant married, Barker returned and had successful career at Edinburgh), did not want replacements; scandal and dismissal do not appear in Wardroper’s report; and dismissed nurses found posts in other colonies; Mrs Arthur Onslow, cousin of Sibella BC, lived nr Sydney; FN and HBC felt fund let down; FN condemned as an utter
failure, did not want Williams to go to Sydney (219); Montreal:
220: Charles Alexander, vice-pres of Mtl Gen wrote HBC, definite
arr with Machin, 4 nurses; Machin approached directly, FN wd not
have wanted to lose her from home, the one person who cd keep
peace with Wardroper (221); vast amount of corr on plans of hosp;
Emma Randall nurse deteriorate, neglect Martha Rice when ill, and
left to marry; Maria Sealey too little educ to cope; Helen Blower
valuable; 2 replacements Ann Marsh had typhoid and Jane Masters
failed to conform to discipline; Machin refs to Redpath; Jack
Cline (prob knew before); on his death Machin was being censured
for excessive use of staff and raising costs of hosp; dispute
between med bd who supported Machin and lay admin, in papers;
Jane Styring and Laura Wilson arrived; (Baly, sarcastic ref to FN
not believing in germ theory in 1877!); contract renewed but
pyrrhic victory; of staff Machin brought from England dismissed
at least 3 and Maria Sealey said to have led a rebellion (225);
but story similar for Machin at Bart’s 3 years, also failed to
start a tr school, which Ethel Manson did;

Balyi (11)
226: Machin said to have returned to Canada when left Bart’s in
1881, but returned to England because went with Williams to Egypt
in 1885 (but did she?) later married a Mr Redpath and went to S
Africa and est a hosp at Bloemfontein, subsequently nursed at
Kimberly during siege in Boer War, cont to write FN, was later
setting up private nursing when joined RBNA; 227: neither Osburn
nor Machin had much tr at St T, Machin on wards only 3 months
because of poisoned hand; both chosen for ladylike qualities and
moral earnestness, both very religious; 227: after that the Fund
did not send teams abroad, nor is there evidence asked to; other
orgs were Indian Nursing Service and Colonial Nursing Service.
poss try E. Desjardin, History of the Nursing Profession in
Quebec.

chap 5 Poor Law Nursing. FN to Rathbone: Before you decide what
to do with the land wd it not be better to decide what to do with
the Poor Law which is rotten at the heart and wants cutting down
to the root. 1867 (where?); 137: seems Rathbone made deal with
vestry before sure that Fund cd find a team and inadvertently
misled Fund into thinking vestry wd meet all their conditions;
wary of Agnes Jones; 140: death of another inmate Gibson at St
Giles workhouse Feb 1865, led to James Wakley of Lancet to set up
commission, with Earnest Hart of St Mary’s, Anstie of Westminster
and Dr Car of Blackheath; govt fell 18 June 1866 and all hope of
reform; 145: one of first unions to take advantage of new bill
was St Pancras, had been censured by Bence Jones in 1854, had
improved and been partly rebuilt, had 16 paid nurses; however
recently censured by coroner on a case of a child death and lack
of pd med attendants; Wyatt decided to build a new inf in Upper
Holloway (later the Whittington Hosp), appealed to Fund for help
with staff; Gathorne Hardy soon departed, allowed to continued
with plans but inf transferred to Central London sick asylums; the Local Govt d replaced PL Bd; Agnes Jones dismissed 3 of the nurses sent out with her and two of them dismissed from the Middlesex where they went; HBC Notes on Establishing a Good Training School for Workhouse Nurses; 151: Torrance and 9 nurses took up residence in Highgate, Torrance said wd have to train nurses to get over having pauper nurses; 152: nurses who went with Torrance stayed and did well; Hill had been governess to Shore’s children, but unknown to FN, did good reports, Hinks considered too old to take over after Hill altho her assist; appt Miss Suckling, but she dismissed by bd; Hinks resigned and HBC, consulted FN but withdrew Fund’s nurses (Baly does not mention inability to train); 1879 Twining formed Assoc for Promoting Tr Nursing in Workhouse Asylums, Wm Bowman on; when workh nursing failed to improve; 166: Boulnois, ch of St Marylebone, expl building a new inf in Ladbrook Grove, later the St Charles’ Hosp, Vincent chosen, team of 9 went; 5 year contract signed with Fund and bd; 159: when Vincent retired in 1899 she was admitting 20-30 a year, and school successful, succeeded by Lucy Ramsden of St T, retired in 3 years from illness; arguable that fund’s infl on nursing in workhouse asylms in the period 1880 to 1900 was greater than its influence on nursing in general hospitals.

Bamfield, Veronica. On the Strength: The Story of the British Army Wife. London: Charles Knight 1974. 223 pp FN refs. Crimea. Fanny Duberley; 151: FN appointed 2 soldiers’ wives as nurses Mrs Evans and Marx? Box; ref to Seacole; 150: Lock Hospital for Infectious Disease at Aldershot admitted women for vd, prostitutes, report 1870; Ft Pitt at Chatham the only hosp that admitted families, then closed its female ward; not useful

Banks-Smith, Nancy. “When a Good Flush Proved a Much Better Cure than a good Flo.” The Guardian (26 July-1 August 2001):18. re Reputations film, irreverent but positive


256 “Drawing on perspectives provided by F.B. Smith and J.G.
Widerquist, I argue that the chief factor influencing this supply [of nurses from St Thomas'] was the quality of the ‘spiritual’ relationship established between Florence Nightingale and the Infirmary’s first two superintendents,” B and P.

259: “Feeling Smith’s distinctive brand of revisionism went too far, Widerquist has read Nightingale’s nursing achievements as part of her Unitarian-inspired religious quest for spiritual perfection in a far from perfect Victorian world.”

260: w/o consultation Barclay committed Fund to staffing more wards, got censure from HBC and FN, number of St T trained nurses rose to 18 within a few months, from illness, moral disorder and personal conflicts, hence shortfall; equality between Barclay and FN;


Barnham, Kay. Florence Nightingale: The Lady of the Lamp. Lewes: White-Thomson 2002. 48 pp. Large pics children’s book. “Florence” chaps on Seacole. 24: “Florence Nightingale was not the only nurse capable of organizing hospitals in the Crimea. As Florence became better known, another nurse who struggled to help the British troops was all but ignored.” Seacole, Jamaican “doctress” and expert in tropical diseases, Jamaica and Panama and Nicaragua, “a respected nurse” from over the years. She was “turned down by Sidney Herbert’s wife--because of her race.” “She travelled to the Crimea using her own money, setting up a hospital in Balaclava near the battlefields. She was on the scene to help treat and care for the soldiers as they were injured, or fell ill, saving many lives.” 25: pic of white nurse: “Many nurses worked with Mary Seacole on the battlefields of the Crimea. This nurse is giving a wounded soldier a drink.” “Despite all her good work, Mary Seacole was penniless and unknown by the end of the war.” at last in 1867 QV supported a new Seacole Fund to thank her. No mention of British Hotel.

Barnsley, R.E. “Miss Nightingale and the College.” Journal of the Royal Army Medical Corps 111 (1965):67-73. re AMC, includes letters to Sir James Clark, our typed copies in 45772; letters from son of Longmore; a few not in 45772, in publetts; includes ref to “Florence” and a few insults; 72 “the enigma of the dual personality of Florence Nightingale” but recounts Miss Verney, her god da saying how kindly she was; 73 “It is difficult to realise that this is the same woman who later in life, ruthless, intolerant and often unreasonable, would summon viceroys and cabinet ministers to her side and keep them awaiting her pleasure on the threshold, who would stop at nothing to attain her ends,” but not for own advantage; suggests they wd work with her because she wd use her immense prestige to cut through red tape, cites
Woodham-Smith as helpful source

Barnsley, R.E. “‘Teeth and Tails’ in the Crimea.” *Medical History* 7 (1963): 75-79. On experience of Wm Cattell, 5th Dragoon Guards, gave worm’s eye view of Crimean campaign, trunk full of docs of John Hall, notebooks; Devna. 1st report of cholera 12 July, 10 miles north of Varna. “Hall had visited and roundly condemned this well-known plague spot. Cattell records this visit and tells how Sir George Brown, the divisional commander, had ignored the report on account of the beautiful view, warning his doctor that it was his duty to treat sickness and not to try to prevent it.” (76); Stafford one of Parl deputation sent out to investigate conditions, Hall’s doubts as to his veracity (77); FN on gifts, Baudens; this article is very pro Hall


letter 7 May [1855] letter of Roger Barnston; church on Sunday, bishop of Gibraltar. After, “I went to the Monastery, where we are commencing a new hospital est on a large scale. The men began to work today. The expedition is to disembark tomorrow morning and I have been at Balaklava this evening arranging about it.” Col Straubenzee, very nice; road crowded, 83: Lady Raglan; ships arrived, “The Robert Lowe today with Miss Nightingale.” country looking beautiful, perfect mass of flowers; peonies; 156: armistice; 158: a fair sprinkling of ladies, at least for the Crimea. Lady Fitzroy and Mrs Dalrymple, 163: all the Canada regiments off at last;


Baron, Jessica L. Reforming the Raj: Florence Nightingale’s Biomedical Liberalism in British India. University of Notre Dame 2013. Dissertation PhD Phil. Abstract. Broadly interested and influential in social reform, particularly India. Expertise so well known that nearly every viceroy serving between 1857 and end of cen consulted her. Science history. Abstract only Christopher Hamlin, dir

Introduction 4: 3rd para: “When first thinking about leaders in health care, we may identify people like Florence Nightingale (1820-1910), famous for her work at Scutari hospital in the Crimea, collecting data (the beginnings of research in nursing) in order to improve practice. Mary Seacole (1805-1881), another nurse, was refused an interview to go to the Crimea. Such was her belief that there was a real need for her talents there, she paid for herself to go and went on to be known as “Mother Seacole.” she is now held up as one of the first black women leaders.” then on to JFK Nelson Mandela, Obama...11

FN: 4:
“Florence Nightingale, who worked so hard to get nursing practice recognized for the good it did,
18: citation of lamp light on, Stanley and Sherrat
21: “Passion. If, as Nightingale, Seacole and Millar demonstrated, you have a passion for your profession, it is usually met with a positive response. The impossible might become possible. Passion is contagious...”


Barritt, Evelyn R. “Florence Nightingale’s Values and Modern Nursing Education.” Nursing Forum 12,1 (1973):7-47. Marks 100th anniversary of FN nursing in U.S. but, 8: myth of FN superseded the reality. Cook cited; stats and all; father a “wealthy Unitarian liberal” (11); 12: friendship with Julia Ward Howe and Margaret Fuller, but “no evidence that she contact any key persons in the universities or the trades to urge them to end discrim against women”


Barth, Ramona Sawyer. Fiery Angel: The Story of Florence Nightingale 1st ed. Coral Gables FL: Glade House 1945. Preface by Cary Chapman Catt. 1 page. No school of sc nursing in the world. “Millions of men died who might have lived had there been proper hospital and nursing care.” ”War has become more terrible than ever before, but nursing has evolved with it and this last great thing the author has shown in this book.”blessed enlightenment it shed. “Florence Nightingale was one of the greatest of the great.” uses first name for her, surnames for men.
Scutari, but 38: The death rate in the hospital despite cholera, typhus and dysentery, was reduced from 60 percent to 1 percent. Kinglake cited: “Had it been preceded by mummery, instead of ventilation and drainage and pure water supply, it would have passed for a miracle.”

Chapter 3 A Stubborn Sanitarian
Chapter 4 The Conquering Heroine Returns
Chapter 5 Florence the Gadfly 56. Ill,
Chapter 6 An Insatiable Invalid
Chapter 7 Florence the Feminist 84
Chapter 8 Florence the Religious Liberal 91

8: healthy body throws off poisons into the air.
10: house cleanliness. closely connected with the subject of ventilation is that of house cleanliness. The air, bad as it is which has been spoiled by much breathing, is probably less unwholesome than those in which any vegetable or flesh have been putrefying. Such air, however, we frequently find in the rooms of careless or dirty housewives, who, after a time, get used to the smells and discomforts of an ill-kept room.” most unhealthy.
14: bodily cleanliness. until of late it has been much our habit to wash with care those parts of our persons that, being uncovered, are visible to our neighbours.” neglect others.
17: value of light.
92: bandaging hand. bandaging the dead.

Lecture 6. 98: now come to “nursing,” that is the watching beside the bed of serious sickness, ministering tenderly and skillfully to all his wants.” women make better nurses than men, undoubtedly true, “but the woman who supposes that she is born a good nurse will never become one.” vanity unfitting at bedside,
99: “All one’s attention must be fixed upon the patient; to learn how to aid in his recovery, or to diminish his sufferings, must be to us a far dearer object than to show how much we happen to know of the disease and how valuable our services may be to the invalid or to his friends.

A good nurse must possess the most untiring patience, the calmest temper, joined with a rapid perception, great power of undergoing fatigue, a strong but well directed will, and a firm but tender hand.....She must learn to look upon all, even upon the most hideous and dangerous diseases, with neither disgust nor fear; she must teach herself, too, to consider illness not as an
unmixed evil, nor as a punishment sent upon the particular sufferer under her charge.” re 1848-49 cholera. 100: drainage of London. 102: praise for “Miss Nightingale” to show how, gifted by Nature, she yet worked at and practised a vocation which she chose from love. Years before she was known to the public she was studying the art of nursing among the sick poor; she then left her home to practise it in the Institution for Sick Ladies in King William Street.” hard experience.
112: bedsores;
147: appendix. receipts for Sick Cookery, strong fever,
156: macaroni, common rice pudding. 157: bread pudding; 158: vegetable soup without meat; 159: strong broths, 161: mutton broth, 162: essence of meat, a means of giving wine; 168: to mull wine, wine whey, fish...

FN ref to Barwell book in 1882, that it “good” 47760 f51

Basford, Lynn and Slevin, Oliver, eds. Theory and Practice of Nursing: An Integrated Approach to Caring Practice. Edinburgh: Campion 2005 [1995] on FN in Crimea. No Seacole reff. FN 17-19, on nursing reform, ok start, then hostile. 18: at Scutari, clean up (gets the priorities right, cleaning). N Fund “Traditional historians contend that Florence Nightingale gave birth to modern nursing, a public portrayal that was readily and unquestionably accepted until recent writers began to reinvestigate her life. The result of this research clearly illustrates a different view. Contemporary 19: writers point out that her nursing principles were influenced by her religious pragmatism and archaic models of sanitary implications that have served only to hinder the development of nursing. Study Activity 1.4... “What were the contributions to nursing care made by Elizabeth Fry and Florence Nightingale? * On reflection, has the influence of Florence Nightingale been of benefit to modern nursing? * The medical model followed a reductionistic approach to care....” cites Have 1983 and Van Peet 1995, citing Baly 1969.

Study activity 1.5 A soldier in the Cr War.... [odd example, of failure of wounds to heal]

Bashford, Alison. Purity and Pollution: Gender, Embodiment and Victorian Medicine. Houndmills: Macmillan 1998. St Deiniol’s U 37.5 77. “Despite Florence Nightingale’s opposition to the idea of women doctors, discussed below, she nonetheless invited Elizabeth Blackwell to direct the Nightingale Training School at St Thomas’s Hospital.” (88) offer referred; when Garrett opened her St Mary’s Dispensary for poor women in London 1866, left out childbirth, as easier dept. for midwives. (88) this book better on women doctors, not good on FN

Bass, W.A., letter to editor, The Lancet (29 April 1876):657, defends FN on district nursing, gives example in Northampton of
district nursing.


Wilts 533 acres 573 g. an. val.
Derby 1381 acres 2216 g. an. val
Hants 2413 acres 1502 g. an. val.
[total] 4327 acres 4291 g. an. val.


78: first pic of first graduating class of Mack Tr School for nurses St Catharines 1878. 6 nurses; 76: nice pic of Kerriesdale window; 77: FN by no means alone, cites Fry 1840 and St John’s House 1848, Kai; “nor were her graduates directly responsible for transporting the Nightingale system overseas. True, a few Nightingale nurses did travel to points in the Br Empire, but their numbers were small and their influence questionable.” 16end, cites Baly Nursing Legacy; Nasty on Osburn; wrong on Machin also in Montreal; 77: evidence mixed also on influence of Nightingale system, “alumnae themselves had little direct effect in North America”; most Cdn hosps instituted ind authority of matron, but no Cdn hosp had N Fund;

Battiscombe, Georgina. Shaftesbury: A Biography of the Seventh Earl 1801-1885. London: Constable 1974. 247: She said it was Doctor Hector Gavin who suggested to me the San Comm. I urged on Panmure the appt of such a com. He assented, and desired me to draw up the instructions. I did so. 248: It is not impossible, however, that these instructions were based on letters from FN describing the state of affairs, though no such letters survive (and not likely, except if went through SH)

74: “The attendants discharged their duties with zeal, under the impulse of active and intelligent female hospital assistants, at
the head of whom was the celebrated Miss Nightingale. Beautiful, young and wealthy, she sacrificed everything to the noble mission of alleviating suffering. This delicate young woman, mounted on horseback, might be seen passing from one hospital to another, looking after her sick of the three allied armies with a pious solicitude; and at the time of the typhus she sent to the French and Sardinian field hospitals a large present of port wine and preserves of every kind.

The field hospitals of the English were extremely clean, which cannot be said of ours. The difference was in part due to the higher and more independent portion of the English military surgeons, who exercise more authority in the enforcement of hygienic measures. Their allowance of food was better than ours. Tea, roast meat and puddings had an important place. 75: gave meals of English soldier (but no specifics as what year and changes),

75: Sardinian field hosps like the French; had Sisters of Charity; distr of food and med and supervised attendance; went daily to the market at Balaclava to purchase provisions, pauly yard; visited the Russian field hosp at Belbec, well arranged, good furniture, with double beds separate mattresses, sheets and blankets, economising space but not without danger to the sick. More than half a century ago this unhealthy practice was discontinued in France.

77: Russians had female attendants, Sisters and widows of 202 typhus, Dr Pincoffs proposed a medical society

251: Appendix. XII The necessity of breathing a pure and continually renewed air. To prove how necessary pure air is to men, as well as to all organized beings, we shall ....


Baumgart, Winfried. The Crimean War 1853-1856. London: Arnold 1999. On hosps, also Russian and French. 143: “Throughout the Allies’ stay in the Crimea three were always tens of thousands of soldiers hospitalized. The majority of the patients were in hospital due to sickness, mostly cholera, scurvy and typhus. Those wounded in battle were in the minority. It may be said that roughly half of the patients died in hospitals on all sides, a high proportion of which was due to the low standards of hygiene and of the medical service. About 80 percent of the deaths during the C War occurred in hospital, the balance on the battlefield.” First winter Br worst of the 3. Public outcry; FN 144: for Br war ended too soon. Despair and exasperation. Much blood had been spilt and much money had been spent. And the result? Russia’s power was not reduced substantially, but had recd only a scratch on the surface. The antagonism between the two countries remained as strong as ever; it was now merely transferred from the Near to the Middle and the far East.” turned
her back... Robert Morier described the Cr War as ‘the only perfectly useless modern war that has been waged’; Disraeli: a just but unnecessary war;
French total losses 95,000, 75,000 from sickness;
Panmure gave deaths 8 May 1856 as 20,000
216: John Wyatt May 1856 statement of deaths in hospitals;

Baylen, J.O. “The Florence Nightingale/Mary Stanley Controversy: Some Unpublished Letters.” Medical History. 18. 1974:186-93. good coverage; 46 women (15 nuns, 9 ladies and 22 nurses) FN offered to abdicate her position to Stanley, and when refused proposed that Stanley take charge of General Hosp; general compromise arranged towards end of Jan 1855 when FN changed convalescent hosp at Koulali into a general hosp, to be admin by Stanley and party Baylen 187 (using W-S and O’Malley); Baylen blames Stanley, “failed to maintain discipline among her charges, permitted Mother Bridgeman to flagrantly proselytize among the patients, and refused to recognize the overall jurisdiction of either Florence Nightingale or Dr Cumming.” (188 (W-S, O’M); Stanley’s plan a “spiritual flirtation between the ladies and the soldiers”; Stanley asked that 20 of her party be assigned as “female ecclesiastes” to the hospital chaplains; FN refused, but offered them money (187); Norwood nuns refused to be relieved; finally Stanley agreed to take charge of Gen Hosp and Emily Anderson...Stanley took charge of Koulali 24 Jan. Stanley “failed to maintain discipline among her charges, permitted Mother Bridgeman to flagrantly proselytize among the patients, and refused to recognize the overall jurisdiction of either FN or Dr Cumming” (188)

BBC Online News. “Nurses Ditch Florence Nightingale Image.” 27 April 1999. Public sector union Unison voted unanimously to ask nursing’s international body to move International Nurses’ Day from Florence Nightingale’s birthday to another date. They said the Lady of the Lamp, famed for her work during the Crimean War, was white, middle class and Protestant, had set up her hospital with family money and had a reputation for a hierarchical approach to nursing. This was not in keeping with the multi-cultural nature of modern nursing. Health visitor Wendy Wheeler said “we must, as we enter the new millennium, start to exorcise the myth of Florence Nightingale. She said Ms Nightingale was not a bad person, but ‘the impact of her legacy’ had held back the nursing profession. Ms Wheeler added that Florence Nightingale believed nurses shd be subordinate to doctors, was against the registration of nurses, opposed the three-year formal training of nurses, did not see mental health as a field for nurses and had ‘questionable success’ at her hospital in the Crimea. She added that Ms Nightingale was against lay women healers and opposed women speaking in public.” Marie Ingle said “she was a woman who not so much kept her nurses under the thumb as under the boot.”
Wheeler thought E Fry’s birthday better.

BBC1 media release “Florence Nightingale” 1A Productions release, “a moment of crisis, doubt and failure” “bent on vengeance, Florence badgered the authorities into allowing her to investigate....What she failed to anticipate was that this investigation would reveal her own shortcomings--both to herself as well as to others.”

Bean, William B. MD “Florence Nightingale and the Doctors.” JAMA Internal Medicine 103,3, 1959 512-13. Review of Cope, presents her as a tense, high strung, frustrated, mother-dominated woman who finally broke away; devoted life singlemindedly to her God given mission, illness used skillfully, ruthless, ferocious


Bell, Mayor. A Common Council holden in the Chamber of the Guildhall of the City of London on Thursday the 9th day of April 1908. Freedom of City.

Bell, Louise M. “Kofoworola Abeni Pratt: Third Vice-President, International Council of Nurses.” International Nursing Review 14,5 (October 1967):7-10. 7: Bell was principal, School of Nursing UCH Ibadan 1952-59 knew Pratt well, met her at St T in 1947 when she a 2nd year student nurse. She a teacher first, taught at St Anne’s a leading sec girls boarding school where she had been a pupil; married a pharmacist, to UK where she wd become nurse and he a doctor. To open a private hospital She had learned in history lessons “of Miss Nightingale’s pioneer nursing work in so many fields. However, at the time she made her choice it was not considered a suitable career for well educated Nigerian girls, either by their parents or by the headmistresses of their schools.” Father unhappy, wd have paid for her to take medical studies. But she “determined to nurse and if poss to enter the
Nightingale School founded by Miss Nightingale herself.” passed with honours in 1950. Small son when arrived, another born there; 8: to Ibadan sister of medical ward at UCH Ibadan; 1956 returned to England to take nursing admin course; 8: also got international experience, travelled; 9: deputy matron at Ibadan. 10: Pratt chief nursing officer of Federal Min of Health, assumed national leadership

Bell, Enid. Storming the Citadel: The Rise of the Woman Doctor. London: Constable 1953. Good book, but no lists. Has India section FN Englishwoman’s Journal began pub 1858 March, to make know reasons for women’s discontent and suggest remedies, series on FN, Rosa Bonheur etc.; 103: 1878 Senate charter to admit women to all degrees, Wm Jenner protested, 20 years after FN! 44: 1889 Hosp moved to Euston Rd near London School of Med for Women, cost £20,000 by public appeal, launched at Mansion House, with FN’s blessing and £0, an then drawing room meetings;


Scurvy is now prevailing in our ranks. The gums get soft and spongy and sore, the teeth loosen. The men, unable to eat their biscuit, try to soak it in water, which has all along been very scarce. A want of vegetables and lemon judice together with salt meat, creates this diseases. The unhappy PMO was not aware that there were oceans of lemon or lime juice in store at Balaclava, until this horrid disease had gained a victory!” wrote letter to Times 268: mud, red tapeists. Diary entries 279: invalided home excerpts from journal. Early, February 1855; Chap 19 Red tape, neglect and misery; 253: sinking of the Prince 253: 14th “our camp ground for twenty miles boundless in desolation, gloom and deep mire. Officers and men sat looking at each other in a sort of despair, shivering in wet rags. I see no help, but hope on, hold fast, cling to life and am thankful we are not at sea.” ration of green, raw coffee berry served out to men and officers “mockery in the midst of all their misery. Nothing to roast coffee, nothing to grind it, no fire, no sugar” eat as horses do barley? 254: 17th. Everyone building mud walls around their tents; changed ground; 235: “Nine of my good men lay stretched an dead this morning outside one tent, rolled up in their blankets waiting to be carried home! We have given up the old funeral firing parties long ago, hardly time now to bury the dead.” Surgeon said no medical restoratives and they snuff out.
“So it is, they die from 236: overwork, privation and neglect. The regimental surgeons do what they can, make continual demands on the chief of the medical dept, but get nothing. ” staff surgeon Pine “Look into this tent and observe the household. see it is in rags all about the skirting, and the floor is a thick paste baked nearly dry by the heat of the fevered patients. That bundle of a dirty, wet blanket rolled up contains a living creature, once a comely useful soldier’s wife, now waiting for death to release her from such misery. The nice-looking youth is one of my band, hear how well and cheery he talks of Christ and his true recovery... Those other men lying about....; 257: Raglan visited 238: 8th. Frost last night, very cold and no fires; did letter to ed of Times 12 Dec 1854 267: Soldiers sent from Balaclava hospital in shipload, to die at Scutari. Hundreds are thrown into the Black Sea. They arrive without clothing; a wet blanket covered with vermin, a ragged coat and trousers, with an old forage cap, is the extent of their kit. 1473 were buried from the hospital in January 1855. Their graves were close to the general hospital. Dead dogs, horses and vermin lay all about increase disease. The floors of the hospital were wet and would not dry. The whole plain was untrained and the men were poisoned with animal matter.... deaths. With 22 shirts! “Miss Nightingale issued from her private stores 16,000 shirts.”

Bellevue Hospital used Nightingale’s Notes on Nursing extensively in its nurse training. Its Manual of Nursing, 1878, revised in 1882, substantially repeats Nightingale’s ideas from the age of nurses to be selected to the care of the ward, importance of sunlight, feeding patients, disinfection, etc. (Bellevue, 1878). cf Harmer Textbook 45-49 and Hampton Robb 253-69

Bellevue Hospital. A Manual of Nursing prepared for the Training School for Nurses attached to Bellevue Hospital. New York: G.P. Putnam & Sons. 1878 at BL (23-35 on Observation); online 1882 rev. ed. Very similar to NonN.

Qualifications, truthfulness, honesty, temper, reticence, age 25-35 personal cleanliness, a bath a day, and a sponge bath, always clean hands, disinfectant solution after dressing any wound; regular meals and sleep, open air, instruction 2 years (1882) probation or a month, superintendent each ward to have a head nurse and assistant nurses, care of temp and ventilation, nutrients; cleanliness of wards, beds, light iron bedsteads, pure air, cold air not dangerous, night air, prejudice “too much cannot be said of the value of sunlight in purifying the atmosphere, acting as a direct remedial agency in disease, and also in promoting cheerfulness, contributing indirectly to the physical welfare”; ventilation; carbolic acid; sulphurous acid gas for disinfection, chlorine gas prevention of spread of contagious diseases, measles, scarlet fever, diph, smallpox, keep from other children, isolation; nurse
not in communication with other patients; puerperal fever “one of the most malignant of contagious diseases” most complete isolation necessary, disinfectants shd be freely used, no contact with other lying in women; all articles of clothing
Chapter 3 observation of the sick; habits of correct obs; ... list given
Feeding Patients. FN says there are four cases of starvation among the sick... Timing of food.

32 Hall, unhelpful. exaggeration perhaps. includes post-Crimea work, witnesses, seeing army hospitals

Belt, Elmer Dr and Mrs. Florence Nightingale: The Wounded Soldier’s Friend. UCLA. Eliza F. Pollard

Benjamin, Martin and Curtis, Joy. Ethics in Nursing. 4th ed. OUP 2010. Refs to FN but odd:
83: FN’s scorn of medical attendants, but quote is on plague lazaretos! From Notes on N vs “true nursing” misses the point
96: Nightingale plan for n school used in US training schools from 1973, used inexpensive student labour, given little formal instruction, from 1873 until 1930.
96: “The relegation of nursing to the subordinate position in the nurse-physician relationship limited collaboration between two professions. Empirical studies showed that physicians were at the center of the decision-making process and that nurses carried out those decisions.” I guess!

Bennett, Vanora. Review. Television. Times 18 July 2001 27. “As we found out in Reputations, Florence Nightingale (BBC2) she was more of a Grim Reaper than a sister of mercy. This harsh documentary bills her as a scary control freak who killed off most of the soldiers she could have saved.

It wasn’t all her fault. The hospital she took over at Scutari in Turkey was built on a cesspit.....” “pigheaded, Florence Nightingale had no time for new-fangled notices of sanitation. She was too busy waging a personal war against the male military bureaucrats at her hospital.” “Wrote nightly denunciations” to SH. then pushed govt, only then “that she took a hard look at the facts and realized that bad hygiene, not generals, had caused all the deaths.” only then, “steely precursor to Margaret Thatcher” “After a nervous breakdown and a decade as a recluse, she devoted her final half century to campaigning for better public sanitation, the most practical way to atone for her past mistake.” no wonder Thatcher admired.

Benson, E.R. “Some Thoughts on F.B. Smith’s Florence Nightingale:

Benson, Evelyn R. “On the Other Side of the Battle: Russian Nurses in the Crimean War.” Journal of Nursing Scholarship 24,1 (Spring 1992):65-68. Good, cite, short. After war order stayed on, did civil work, charter discontinued 1894, absorbed by Red Cross; Bakunina last to leave; by end of war 101 had served, 17 died (67) from Pirogov

Berghs, M., Dierckx de Casterié, B. and Gastmans, C. “Nursing, Obedience and Complicity with Eugenics: A Contextual Interpretation of Nursing Morality at the turn of the Twentieth Century.” Journal of Medical Ethics 32,2 (February 2006). Berghs: “Firstly, we examine Nightingale’s nursing theory against the background of the Christian ethos of the Victorian era.” 2006. Credits FN’s NonN; complicity with eugenics, in nursing; Margaret Urban Walker

An all encompassing commitment of care. For Nightingale, nursing was a religious calling of an all inclusive character, requiring a total commitment of body, mind and soul. Nurses had to see a patient as a person in a holistic sense, with intellectual, emotional, social and spiritual components, a person with whom one was required to form a relationship. Why morality crucial to Nightingale’s nursing theory.

Eugenic and the morality of a nurse. From around end of 19th cent and beg of 20th, “eugenics came to be seen as a necessary part of nursing. Numerous bulletins about... “ obedience to practice of eugenics. Nurses Social Union, negative eugenics: BJN.

Berkeley, Reginald. The Lady with a Lamp. A play in 4 acts. programme LMA H1/ST/NC11/1. 1929. his notes: “”She deliberately sacrificed her inclinations rigidly suppressing her physical nature, in order to be unfettered for her work.” “This nun-like ascetism [yes, mis-spelled] bred a ruthless disregard for the disabilities of other people and of herself, and when her shadow fell across the life of Sidney Herbert perhaps the most brilliant of the younger Statesmen of the early Victorian times--she drove him, through successive stages of ill health and over work, to an early death.

Berns, Gregory. Iconoclast: A Neuroscientist Reveals How to Think Differently. Boston: Harvard Business School Publishing 2010. 251 pp. “Florence Nightingale and the Perception of Death” 42-44, an iconoclastic feminist, nursing, and 45: math stats an iconoclast, on war casualties, learned to change her perception of death. Believed deaths were due to poor nutrition, prevailing expl and the soldiers were malnourished, but FN learned to see the deaths in a different light; barracks flushed out and death rate began to fall, a key event for her, caused her to change her perception
of what was killing people, began to systematically collect info on causes of death and their rel to injuries, nutrition and hygiene. It was her math prowess, however, that led to the culminating shift in perception, letter to Queen Victoria, used polar diagram similar to a pie chart [not quite]; 57: it took the realities of war to trigger the imagination of FN to change the san conditions that were killing soldiers [flattering, but variously wrong or simplistic]; author is chair of Neuroeconomics at Emory. No sources.


Bihelet, Mlle. *Histoire du Nursing*. Liège: Editions Desoer 1947. Wellcome. Belgium. has chap on FN 141-55. pics; Scutari; 152: enquête; Fond, but zilch on effect of her reforms on France or Belgium; ch Le Nursing en France 223-28. 1862-1909 efforts made by Assistance Publique, esp Dr Bourneville, went to England to study system of FN, but did not und spirit of system depends on matron; then Anna Hamilton went to UK to study nursing, after doing med degree, got an English tr nurse Catherine Eston to direct the nursing school; another Fr woman Mlle Luigi, Bordeaux educ head of Hôpital Civil de Bézier and later Hôtel-Dieu de Reims; (224); 1918 name of Ecole de Florence Nightingale; 208: Nursing in Europe; Prot pays, adoptent méthodes de FN, catholiques, religieuses, plus lents a adopter le nursing laique; also has section on infirmière-visiteuse. Rathbone. FN influenced French nursing

Biley, Francis C. and Freshwater, Dawn. “Spiritual Care and the Environment: A New Paradigm for Nursing.” *Complementary Therapies in Nursing & Midwifery* 4 (1998):98-99. “In pre-Nightingale times, nursing was predominantly spiritual and involved caring and meeting the hygiene and nutritional needs of people. From the mid 19th century onwards, and owing to the increasing dominance of modern Western medicine and possibly the misinterpretation of Nightingale’s work (Meleis 1991), reductionist medical model nursing emerged as the dominant paradigm. This regarded the patient as little more than a receptacle for disease and disorder to be cured at all costs. More recently that view has changed. Civil and human rights. Zen style gardens. Ends “Perhaps if hospitals and health care environments were nicer places to go, perhaps even if people wanted to go to these places, then there might be an improvement in healing, care and cure. The environment might, just one day, become the dominant paradigm in nursing.” cites FN misunderstood Abraham Ibrahim Meleis. (PhD

Billington, Mary Frances. *In Memoriam: A Short Biography of Florence Nightingale OM.*” Upper Norwood October 191. FN Mus 0317. poss. BLC

Bingham, Stella. *Ministering Angels: A History of Nursing from The Crimea to The Blitz*. London: Osprey 1979. 224 pp. FN in. Has some archival work. Chap 3 32-63. Nurses go to War; at Boulogne “the sisters refused to sit with the nurses and so she waited on them herself.” Cumming refused to accept Stanley party; 51 Stanley cd not go on with the nursing, cannot stand the fatigue; complaints of proselytizing by Koulali nuns (very sympathetic account); 57: US civil war; chap 4 The First Nightingale 64-90 73: the N Home at St T the first purpose built nurses’ home; pic of Private John Keller whom FN nursed for 3 months in Crimea; chap 5 Spreading the Word 77-90 spread of Nightingale nurses 77: Rathbone made first request for full staff, found poor reluctant to enter workhouse inf because of nursing; 80: Manchester Training Institute sent staff; 1868 to Netley (looks accurate but refs not given for particular statements); 89: in Britain nurses classed as “domestics” by 1901 appeared under heading “medicine” in census; chap 6 Health in the Home 91-102 district nursing, 96: East London Nursing Society amalgamated with new body, renamed Metropolitan and National Nursing Assoc for Providing Trained Nurses for the Sick Poor; chap 7 Getting Organized reg; chap 8 Call to Arms mil nursing, calls FN “Miss Nightingale” women referred to correctly; by Boer War nurses ranked with officers

Binney, Capt 1858. “Report on Hutting made by the Board of Officers Assembled in the Crimea and Observations and Suggestions on the Subject.” *Professional Papers of the Corps of Royal Engineers* new series 7 1858 53068 cited in Taylor 1660.


Georgits, Julia Marie and Barbara Brothers. *British Travel Writers 1837-1875*. Detroit: Gale Research 1996; 437 pp

The first Irish women to be trained in Ireland for Poor Law work 1888, by Pirrie in Belfast 45808 BL


Blacklock, Mark. “We Need a Florence Nightingale to Beat the Superbugs.” Express 27 April 2007. On death of woman with broken arm, infected by C difficile. South Cumbria. Coroner said” It takes us back to conditions Florence Nightingale had to deal with 150 years ago. There is still a basic need for how things were dealt with during the Cr War that still applies now.”

Blackwell, Elizabeth. *Pioneer Work in Opening the Medical Profession to Women: Biographical Sketches*. London/New York: Longmans, Green 1895; new ed. Intro Amy Sue Box, intro, New York: Schocken Books 1977. has letters; had to work for several years to earn money for medical studies; went to Philadelphia to apply; 65: dean Charles A Lee, letter, asked students, who replied 20 October 1847, 65: “That one of the radical principles of a 66: Republican government is the universal education of both sexes; that to every branch of scientific education the door shd be open equally to all; that the application of Elizabeth Blackwell to become a member of our class meets our entire approbation, and in extending our unanimous invitation we pledge ourselves that no conduct of ours shall cause her to regret her attendance at this institution.” 74: treated her like an “elder sister” 108: in London, to St T, met South; 176: “One of my most valued acquaintances was Miss Florence Nightingale, then a young lady at home, but chafing against the restrictions that crippled her active energies. Many an hour we spent by my fireside in Thavies Inn, or walking in the beautiful grounds of Embley, discussing the problem of the present and hopes of the future. To her, chiefly, I owed the awakening to the fact that sanitation is the supreme goal of medicine, its foundation and its crown.” 186: decided to go back to US in 1851. May 5. “I gave the day to Florence, who is about leaving uncertain whether she will see me again. We heard Mr Ellis lecture at the National Association on
Political Economy. We also visited the Verral Hospital, but were not favourably impressed by the judiciousness of the exercises. Dined with her at the Bracebridges’ and parted from her with tears.”

217: February 1859 letter to Emily, returned from interview with FN at Malvern, re her school for nurses, but EB on way to Mentone to meet with csse de Noailles; FN cant work on for 6 months; 218: wants her to consider if can give up America

218: first lecture 2 March 1859; 219: then Manchester, Birmingham, Liverpool, led to meeting to consider proposal of women’s hospital;

247: lecture at Sunday Lecture Society led to National Health Society

Blackwood, Alicia. Narrative of Personal Experiences and Impressions during a Residence on the Bosphorus throughout the Crimean War. London: Hatchard 1881. In chap 18, “A few days after we persuaded Miss Nightingale to accompany us on our second visit to Sebastopol, which she did, and I believe this was the solitary ‘outing’ she took during the whole time of her sojourn in the East.” then to St George’s Monastery.


794: FN, short, 1 col. Cassandra began to effect nursing and hosp reform at Hospital for Gentlewomen. BH, influential re RC, compiled evidence, collapse; N School “sent nurses all over the world to establish training schools.” And other public concerns. Ok. A bit shorter on Seacole

Blake, R.L.V. French. Crimean War, 1853-1856 181 pp. “Into this chaos on 5 November, 1854, came Florence Nightingale with 38 nurses. At first the doctors refused to accept her help....”FN 111-12, 148, 159. No Seacole


Blogs H2g2 blogs has FN entry
blog: samizdata.net

Blomfield, J. St George’s 1733-1933. London: St George’s 1933. Bit on FN 62-63. Public appeal in 1860 for funds. QV supported. Nurses at St G had own rooms and took meals there (63), others were scrubbers; uniforms not until 1869; discipline tightened up; superior class of women taken, matron, etc., probs; board elected FN hon gov in 1880; 65: St G increased cubic feet, added wards
but only increase of 1 bed

Boase, G.C. “Sutherland, John (1808-1891), rev. Mark Harrison. ODNB. Used W-S. Worked with FN to oppose closing the Army Medical School; 1862 BHI reconstituted, JS as prominent member; ASC name in 1865; investigated cholera in 1865 in Gibraltar and Malta and Algeria; retired 30 June 1888; both commissions “most of Sutherland’s recommendations were carried out.” BHI, 1863 Med Stations, incl Ionian; JS on RC rec by FN; he served w/o compensation; inspector for first Board of Health, Liverpool; terrified of FN

Bogaers, A. Mr. Florence Nightingale Door a poem, Johns Hopkins 23 pp Archive. Dutch


Bolster, Evelyn. The Sisters of Mercy in the Crimean War. Cork: Mercier 1964. 338 pp. [Mary Angela, RSM] lots of detail, dates, actual letters, much negative; referencing usually no page #; even to Kinglake 9 vol work and no vol or page!

Whitty to Yore letter, transmitted by him to War Office

Bolster on St Vincent’s, but St Vincent’s Hospital founded 1834 on St Stephen’s Green by Mother Mary Aikenhead, now St Vincent’s Univ Hosp at a different site; founded after the Dublin cholera epidemic; Sullivan p 179 in Corr book in letter, with Doyle and McAuley, two, “Doctor Murray gave his most cordial approbation and visited frequently--all was done under his direction from the time we entered the house, which was erected for the purposes of charity.” 1839 letter to Eliz Moore, Limerick from Baggot St.

Ack: xi: “if the end justifies the means, there can be no criticism of Florence Nightingale. If, on the other hand, one believes that totalitarianism is never justified, there is much in Florence Nightingale’s administration which calls for criticism.” for new approach, “for a vindication of the Sisters
of Mercy.”
Intro xv: SH letter 5 March 1855 to FN refers to real mistake, they are Irish Stanmore 1:412 and Wilt;
xvii: McAuley’s three-fold plan, visitation of the sick, instruction of youth and protection of poor girls of good character
xix walking nuns; ministering in other Dublin hosps, Sir Patrick Dun’s Mercer’s and madam Spencer’s, McAuley’s wish to have a hosp adm entirely by her own sisters not realised until after her death
xx: “Her continental experiences included an observation of the renowned Roman hospitals of Trinita dei Monti and Santo Spirito, a period under the Lutheran Pastor Fliedner at Kaiserwerth [sic] on the Rhine, and a close study of the organisation of the Sisters of Charity in the Maison de la Providence, Paris.... The year 1852 saw her in Dublin where she hoped, through the influence of Henry Edward Manning, to be accepted by the Sisters of Mercy and be given the training of a nursing sister. Her idea—a secret shared only by Manning and the superior—was to assume the habit of the sisterhood and follow the routine of convent life while still remaining a Protestant. This she made clear to Manning when she asked him to inquire ‘whether they would take me in the hospital of St (sic) Stephen’s on the Green of Dublin (which is served by the Sisters of Mercy) for three months as I am.’” [she had name wrong; Irish Sisters of Charity]
1: Cr War ref to FN [not bad description, unnecessary war, inconclusive, intro of chloroform, modern journalism. “It produced Florence Nightingale and the idea of a military nursing service just as the battle of Solferino....”
7: defects of Scutari [okay on]
Chap 2 appeal for nurses 13: old prejudices forgotten needed Catholic sisters

Bolster, Evelyn. The Sisters of Mercy part 3
86: did not do much nursing at Scutari, “sometimes” dressed wounds.... [takes as conclusive she did little]
87: “Miss Nightingale’s usual hour for visiting special cases was in the dead of night, when, lamp in hand, and accompanied by a lady or a nurse, she made her way through the gloomy wards and corridors...” Fanny Taylor “her frequent companion on these rounds” she was tender and kind; became legendary
94: never once visited Koulali, placed under Lady Stratford, with Stanley as supt; solution to problem; Manning Jan 1 grieved to learn FN had not desired a second set, slow to accept her ruling; Chap 8 mother superior FN saw Bridgeman and M Bernard;
100: Norwood nuns dismissed, humiliating fashion Dec 23; “also dismissed were a number of Sellonites for whom Florence Nightingale entertained a certain antipathy.” Wheeler “who disapproved of her methods, had written to England....” published; FN “had seen to it that a number of her own supporters were
elected to the Board of Enquiry." [but Cumming-Maxwell report]  
107: jobs of various sisters 
109: death rate in Scutari “was alarmingly high” insanitary conditions; “though Florence Nightingale is credited with restoring a measure of cleanliness in the wards, her anti-contagion complex virtually nullified all that was so otherwise commonsense in her particular gospel of sanitation. Outbreaks of erysipelas and gangrene became common. Men stretched on filthy straw beds or low uncomfortable trestle developed suppurating bedsores... They had seldom a change of bedclothes. Very few had pillows....” cd only get with req, but FN insisted on rules being followed of counter signing. “Such castiron adherence to outdated regulations was the main source of weakness in Florence Nightingale’s whole idea of hosp admin.” Crisis in Scutari called for flexibility, did not have; [FN blamed for unsanitary conditions; why did the doctors let her do harm?]  
113: SH apologized to FN and Bridgeman 12 Jan 1855, Kinsale; Cook and WS credit FN with having recd auth to send entire second party back to England, but no copy of SH letter to her known extant;  
[no mention that death rate higher at Koulali; FN made responsibility for no pillows and no bedclothes, when she organized laundry to wash]  
Chapter 10 on Koulali 134-65; good facts on; opened Jan 27 1855, deplorable state; filthy; Dr Tice sr MO, Stanley supt; FN nominal until April; in Feb mortality higher than Scutari acc to Kinglake (no page ref to 9 vol work), 52% to Scutari 42; cites Stanley in F Taylor,  
135: a miniature Scutari Gen Hosp, quad, formally opened Feb 2 under Dr Hamilton, replaced by Dr Guy; Bridgeman supervision, given official status; 136: disputes Jesuit and nuns, Cuffe’s loyalty to nuns;  
137: sisters had 3 rooms for use, a small community room, a dorm and a closet for oratory; 5 sisters went daily to the nearby BH; all 10 resided in Gen Hosp [?]  
138: req system whittled down to a minimum; Robertson, purveyor gave control to Bridgeman; Croke managed, good accountant; 139: Storks said ‘the cheapest of the four hospitals is Koulali”, of Scutari, Koulali Smyrna and Balaclava; good economy;  
139: after describing food served, barley water, etc. “By degrees, the death rate began to subside: by the first week of April it had dropped to one-twentieth of what it had been when the hospital was opened on Feb 2” F Taylor 1:178 (as if the food had influenced the decline)  
treatment different, 140: pre Lister and Pasteur had just begun to revolutionize; night duty undertaken, esp when opiates given; did everything under doctor’s sanction; FN system on diets cf; FN did rounds at night but objected tonight duty; opposed Koulali system “The superiority of that system is attested to by the fact that she began to revise her own methods to such an extent that
the scheme for mil nursing which she submitted to the War Office after her Cr experience was in many ways identical with that introduced by Mother Bridgeman.” every detail carefully supervised; [no ack that patient/nurse ratio different); 141: Bridgeman reformed the orderlies, re stimulants; 141: comparatively little drunkenness at Koulali; Stanley implemented Bridgeman’s changes at the BH; 142: Stanley left after 2 months, disillusioned, upset by flea on dress; 143: Sabin asked to have the sisters removed for proselytism; 144: Dr Hamilton defended (Frederick Gustavus Hamilton), also Beatson, lots of praise of Stanley; 146: FN thought Koulali wd break up; 147: F Taylor became in effect supt of BH at Koulali; 148: superiority of Sisters of Mercy; admirably managed; “We used to call it ‘the model hospital of the East.” but we is the ladies and nurses Chapter 11 The Model Hospital: horror, Commissariat and QMG references; for FN only NonN; does have reports, Hospitals commission, Roebuck, Supplies, but not Sanitary commission!; nothing of FN’s Matters affecting or evidence; 151: ops at Koulali by Drs Humphrey, Guy and Beatson, better facilities than Scutari; sisters assisted doctors; 152: arrival of new party of nurses 19 April brought up nursing personal at Koulali to 42 (32 nurses and 10 SM), with Woollett SJ; Taylor converted; became Mother Magdalen Taylor; Cardinal Newman sent his Dream of Gerontius; Bolster, Evelyn. The Sisters of Mercy part 2 17: not enough volunteers for FN party; Grant got Norwood sisters to go to fill up numbers; 18: before leaving England each nurse had to sign agreement; “absolute power was the keynote of her attitude all through the war. She pursued it ruthlessly” honoured 19: authority claimed by FN over the nursing personnel taken by her to apply to the Catholic sisters as well. Grant did not object as Anglican had. Grant drew up doc, religious superior of own through whom the lady supt wd communicate....; 5 sisters of Bermondsey signed no contract; 24: CHB letter | Nov 28 dispelled SH’s remaining doubts, suggested that FN’s position secure and further assistance would be welcome; Mary Stanley’s letters have tone and temper a refreshing contrast to those of FN, and probably truer; public opinion at home wanted more nurses 25: “Previous to Florence Nightingale’s departure it had been agreed that no other nurses were to be sent to the mil hosps except at her request and upon her recs.” His organizing a second band “could obviously be construed by her into a breach of this agreement” [what else?] great dismay when got FN’s letter; Chap 3 Irish response 28: Whitty to Yore 18 October 1854, Yore forwarded to WO 20 Oct, with own letter that proposal had his hearty concurrence, and would help, 29: no more than ten to twenty nuns; 20 October Yore
brought copy of letter to Baggot St and requested Vincent to organize a group; Whitty wrote superioresses, mentions 5 sisters from Bermondsey have gone
30: govt had asked Manning to find nurses
31: 24 October 1854 feast of St Raphael, patron saint of travellers visit of bishop to convent
38: Bridgeman group arrive in London Nov 3;
38: code of rules drawn up; shall attend to spiritual and material needs of Catholic soldiers, to material needs only of non-Catholics.... silence ordered to be strictly observed; spiritual exercise and horarium to be arranged by superior; “any notable difficulties which the sisters may experience I the discharge of their hosp duties are to be mentioned to the superior, who, if she deems it expedient shall refer the matter to the admin of the hospital.” No mention of FN; all to be under 1 superior, Bridgeman;
41: cholera ep of 1832, Joanna Reddan applied themselves unflinchingly to care of sick in their homes and in hospitals, just 19, attractive; “Close observation of choleraic symptoms during these months enabled Joanna Bridgeman to evolve a system of treatment which, with but slight variation, still obtains today. Her method was the application of hot stupes or poultices to the patient’s abdomen in order to relieve the severe muscular spasms which are the greatest torment of cholera. In modern times hot water bags and hot blankets have replaced the old time consuming method of poulticing, but he basic pr underlying the treatment is unchanged. Joanna Bridgeman introduced her own system into the Cr hosps, where with the concurrence of the med officers it was adapted to the new chloroform treatment being applied there.”
Chap 5 War Office 49: 30 October 1854 Manning to Newman re sisters asked to take to Baggot St; lists conditions. iii That in all matters (except the details of nursing by the bedside of the sick where direct communication may be necessary) the supt shall communicate with the sisters only through their own superior.
52: SH and Bridgeman reach agreement re chaplain
54: stayed at Chelsea; Stanley meanwhile organizing and enlisting extra nurses; Belgrave Sq meeting
55: “As a participant in the Cr nursing experiment, Mary Stanley’s position was far less spectacular than that of Florence Nightingale, but for all that she stands out as one of the ablest and most disinterested persons who appear on the scene.” selected personnel; accused of ambition and jealousy, not in good faith;
56: transition to RC gradual and rational
63: agreement presented to nurses; Bridgeman emphatically refused to allow her sisters to sign any docs individually; her duty alone to sign a community doc, the one agreed by her ecclesiastical superiors, but no other, no compromise;
65: 1 Dec assembled at 49 Belgrave Sq, haberdashery, boxes; SH spoke; utopian for nurses to be on equality basis with ladies;
Bridgeman sceptical, Jocelyn Percy and Dr Meyer, 2 couriers
67: Fanny Taylor did not respond to first appeal, but did to second, young, to St George’s Hosp with Bridgeman and Mar Bernard; very pro Bridgeman;
Chap 6 Scutari; Manning letter 1 Dec
81: FN’s methods; men in her life “With women on the other hand, she was singularly unsuccessful, finding them in general devoid of sympathy, and she summarily dismissed them all as “females”. The fact is that she does not appear to have had the capacity for winning womanly confidences or for arousing female sympathy, which possibly explains her inability to make any hand of the Scutari nurses.” Vitriolic; fanatic; no interference;
82: highly efficient; worked hard;
83: FN probably knew more about hospitals than anyone else in England of her day; sanitation [okay] but visited hospitals, not a ’trained nurse” “had little actual experience.” Did not continue long enough in any hosp “to qualify for recognition as a nurse even according to the limited requirements of her day. Kaiserwerth (sic) was the one exception.” Did not equip [actually, no place would have]
85: “Generally speaking, Florence Nightingale got little support from the medical staff in the Crimea.” exception of McGrigor. Smith and Hall “the two most outstanding personalities of the AMD” [but!]

Bolster, Evelyn. The Sisters of Mercy part 4
152: Emily Hutton, selected by Paulet as lady supt to succeed Stanley; Br retained supt of Gen Hosp Koulali; 154: in spring drop in number of patients sent, lessening of disease; Hutton a friend of Br; more proselytizing charges; 157: did night duty;
Chapter 12 Sebastopol; 171 2 Koulali nuns leave; 172: doctors did not want FN back at Scutari! Bracebridge attack on army authorities; 175: Br said Prot patients also preferred the nuns; 178: bishop gave permission to proceed to Crimea; Ronan forced to leave; Hall asked Br to offer her services in writing, using Woollett as intermediary with Dr Hall !!
Chapter 13 army chaplains; shortage of RC; none in navy;
Chapter 14 Balaclava; Hall only one visit to Scutari, after Alma; 196: “Br withdrew sisters from Gen Hosp Scutari;
201: Bridged ‘felt that co-operation was no longer due when the sisters were originally rejected by Miss Nightingale.” Matter of principle; ack resp only in “nursing details” not deployment
204: ref to San Comm re Balaclava; 206: rats; 207: kitchen problem, nursing arrs “the same inefficiency” 208: set to work on extra diet kitchen, Fitzgerald deputy purveyor, won over; kitchen enlarged and ovens built; 210: Beatson reported to Hall that worked in Koulali with May to Oct 1855, unremitting care, did not deviate from orders, gave equally good tr to Pros and Catholics, and a Scotch presbyterian,
Chapter 15 Crimean graves 211; outbreak of cholera a week after
arrival at Balaclava, Br introduced her stuping remedy, “which, modified by the adm of chloroform, had saved so many lives in Koulali.” Needed vigilant care with chloroform; Br had night duty only with written wish of doctor; in pairs; S Winifred died; 212: “Miss Nightingale sat by the bedside and joined in the prayers and, while praying, she killed with her umbrella a huge rat which every now and then made towards the bed on which Sister M Winifred lay dying.” (From Grant bio); 216: food, got personal attention by sisters; 217: bad food, crowded, no daily mass; 219: Br cleared letter to FN through Hall; Br’s undelivered letter destroyed from his archives; 220: “The transformation of the Gen Hosp at Balaclava into Mercy Hosp was but one of many glorious incidents in the great saga of Mercy” from 1831; McAuley founded 12 in ten years, by 1855 31 in Ireland, 14 in England, 1 in Scotland, 12 in American and 3 in Australasia; 1840 JH Newman in Dublin, and still Anglican, called for order like the S of M, Sisterhood of the Holy Cross, based on rule; 1848 Sellon founded at Devonport another order, amalgamated in 1856, so influence on CofE;....

Chapter 16 227 The Confidential Report, of 4 Parl commissions none gave details of “experimental scheme of female nurses” in Dec 1855 Fitzgerald deputed to make such a survey, did “a detailed and exhaustive study of the systems” forwarded to WO but pigeon holed, not even FN permitted to see it; Fitz gave a copy to Br, and preserved at Kinsale; mentions only Shaw Stewart and Cough as even relatively efficient; 229: Fitz agitating against FN being lady superior of all nurses; FN wrote to SH re move for papers; liquor at Balaclava; eulogy to Br “superiority of an ordered system” 231: again, the rejection by FN, except 5, then FN’s Observations;

233: pic of FN letter to WO but not her hand; 235: pub of McNeill Tulloch report January 1856; board of in, FN emerges as heroine; 236: public meeting for Fund; but not for SofM; 240: new cholera outbreak at LTC; 241: defence of Hall over FN re deployment of nurses;

Chapter 17 General orders; 246: FN did not expect resignation of sisters; 247: on FN’s second visit she kicked at the door; Br referred her to Hall; 248: Br would submit her final decision to him and to him alone; so resigned; “your accepted our services”; 249: FN’s third attempt to woo Br, Br said had already resigned; and would not delay; 230: FN took notes of our manner of nursing (so, at 3rd) only one further brief encounter on day of departure; 251: Br kept material at convent until all dead in it; 252: Notes on Nursing, 1859, caused a sensation. “The most remarkable feature of the pamphlet was its complete revision of Miss Nightingale’s earlier ideas on nursing— a revision which, in part, stems from the notes taken at her last interview with Mother Bridgeman.” did not acknowledge “any similarity between her new system and that of Mother Bridgeman”; people continued to pray for her; Br dignified; 252: The Lamp 12 April 1856 repeats
praise of sisters from Hall; 254: while at Balaclava 1358 patients passed through their hands; Hall told wife “the only real nurses we ever had, for Mrs Bridgeman, a very superior and conscientious person, .... “re FN authority; “perfect satisfaction” wrote Hall; 256: Codrington praised them; Panmure regretted ceasing rather abruptly, but expressed satisfaction; 257: Br informed FN through Hall of departure; 258: row over keys, Br gave to Hall who gave to Fitzgerald, and asked for info on cases; 265: Bridgeman letter of what did;


Boon, T.C.B. “John Smithurst.” Church Messenger 16. Date?


Bornstein, David. “The Fixed Determination of an Indomitable Will.” In D.B. How to Change the World: Social Entrepreneurs and the Power of New Ideas. OUP 2004 40-46. FN cites sec sources only, Strachey, WD and Cohen. But no ref to wkhs 45: 1800s in 4 decades number of nurses increased from 28,000 to 64,000 and more telling, by end of 19th century reclassified in British Census from the list headed “Domestics” to “Medicine.” cites Kopf or Cohen on. 46: Cites Machiavelli on opposition to change. In The Prince. “New order of things,” because makes “enemies of all who profit by old order and “only lukewarm defenders in all those who would profit by the new order.” FN an “ethically driven social entrepreneur.”

Borsay, Anne and Hunter, Billie, eds. Intro 3: “Britain’s most famous nurse” chapter 1 develops themes raised in 2006 Monica Baly Lecture and article 2009 in Nursing History Review 4: vs Tooley whitewash 4: “Until the late 1990s, however, Nightingale’s performance at the Scutari Military Hospital during the Crimean War remained untarnished. Mark Bostridge destroyed this orthodoxy in a pungent
piece on the BBC’s history webpage. Historians, he argued, were only just “waking up to the shocking truth that the death toll at Nightingale’s hospital was higher than at any other hospital in the East, and that the lack of knowledge of the disastrous sanitary conditions at Scutari was responsible. 4,077 soldiers died at Scutari during Nightingale’s first winter there, ten times more from illnesses such as typhus, typhoid, cholera and dysentery than from battle wounds. Conditions at the hospital were fatal to the men that Nightingale was trying to nurse: they were packed like sardines into an unventilated building on top of defective sewers.” endnote 27 (M. Bostridge, “The Lady with the Lamp” BBC Online history). Also cites Small endnote 26; then “his seminal bio “more restrained, where acknowledges “dramatic decrease in mortality...directly attributable to her” 5: “only while preparing evidence for the Royal Commission on the Health of the Army did Florence herself realize that she had helped soldiers ‘to die in cleaner surroundings and greater comfort, but she had not saved their lives.’” endnote 39 is Abel Smith History xi.

5: critical biographies bring people to life “enabling neglected figures to rise from obscurity. Exemplary in this respect is Jane Robinson’s rehabilitation of the black nurse, Mary Seacole (endnote 30] quickly forgotten after her death, but greeted with ‘rapturous enthusiasm’ at the public banquet held in London to honour Crimean soldiers. Endnote 31 is “Mary Seacole 1805-1881" Medi Theme 25, 3 (2006) 98.

Borsay, Anne and Hunter, Billie, eds. [both] “Nursing and Midwifery: Historical Approaches.” Nursing and Midwifery in Britain since 1700. New York: Palgrave Macmillan 2012 RT11 N87 2012; notes also in Seacole; FN 3-4, 21, 50, 52-3 55, 60-1, 129, 134; 4: sarcastic ref to “Florence’s departure to the Crimea”; critical biographies emerged, personality whitewash as in Tooley; “Until the late 1990s, however, Nightingale’s performance at the Scutari Millary Hospital during he Crimean War remained un tarnished. (Ftnote to Hugh Small) Mark Bostridge destroyed this orthodoxy in a pungent piece on the BBC’s history webpage. Historians, he argued, were only just. 5: cites Bostridge on blaming “Florence herself realize that she had helped soldiers ‘to die in cleaner surroundings and greater comfort, but she had not saved their lives.’” credits San Com with improvements; Chapter 3 by Hallett. Nursing 1830-1920: Forging a Profession. FN 50-

Borsay, Anne. “Monica Baly Lecture. Nursing History: An Irrelevance for Nursing Practice?” Nursing History Review 17 (2009):14-27. Online (pub of AAHN). Refs to “Florence’s departure to the Crimea” Tooley, 1904 book, nasty; even Cook official bio though eulogistic flagged less favorable qualities, Florence’s domineering personality...cavalier treatment of friends. Also on
Seacole; Strachey. 100% negative about FN, brief on Seacole but uncritical; a non-nurse. Hit on FN on p1, praise of Seacole p2. 15: But “biography is able to challenge biography. Witness how Jane Robinson’s recent study has rehabilitated Mary Seacole--quickly forgotten after her death though greeted with ‘rapturous enthusiasm’ at the public banquet held in London to honor Crimean soldiers. Now she has been featured on a postage stamp....” 3rd Monica Baly Lecture given at 3rd annual conf of RCN History of Nursing Society, held at RCN 14 November 2006. Boschma, Geertje. “The Meaning of Holism in Nursing: Historical Shifts in Holistic Nursing Ideas.” Public Health Nursing 11,5 (October 1994): 324-30.

Boston Training School for Nurses at Massachusetts General Hospital, Boston, est 1873


Bostridge, Mark. Florence Nightingale: The Making of an Icon. London: Farrer, Straus, Giroux 2008. 647 pp. London: Viking 2008. Octavia Hill toured Scutari in 1880 216; 223: Hall saw BH before overcrowding, and never returned to Scutari to reinspect for remainder of war, yet said ok; 243: despite criticisms of Koulali, for ventilation and san, its mortality rates to March 1855 no worse than for Gen and BH at Scutari; 243: in Jan 1855 at Raglan’s wish, female nursing corps extended to Crimea itself, Langston and Sellonites took Gen Hosp and in April newly opened Castle Hosp on Genoese Heights above Balaclava; 244: by Feb 1855 FN asking for more nurses, Presbys; Stanley received into church at Constantinople April 1855; 247: idea of san com from Lord Shaftesbury, Palmerston’s son-in-law; 250: FN visit to Crimea only as almoner of free gifts in Br Hosps not as supt of nurses Bostridge 250; 24 Feb 1855 Illustrated London News did image of FN as lady with the lamp; 270: count of nurses, of 229 women, 11 died in hosps and buried at Scutari, Balaclava and Smyrna; only 17 incl FN served for whole war; 49 dismissed (18 of them intoxicated), 40 resigned; so about 3/4 acquitted themselves; 281: Aunt Mai arrived mid Sept 1855; 286: good on Hall and Bridgeman connivance; 288: 6 weeks in Crimea 12 Oct 1855 on, extra diet kitchen; death of sister Winifred; purveyor’s report 290; 294: N Fund first national appeal aimed at all classes; Jenny Lind gave concert at Strand’s Exeter Hall, raised £1872; 295: FN did 3rd trip to Crimea to oversee LTC hospitals, Karani, Dr George Taylor;, cart, Col McMurdoo of LTC got hooded baggage car, but Fitzgerald tried to starve nurses, denied rations; 297: FN sent home spoils of war: William Jones, young sailor who had lost a leg; Thomas, 12 year old drummer boy; Peter Grillage, Russian orphan; on Seacole 271-3, in Makeover


Bowd, D.G. *Lucy Osburn (c1838-1891) Founder of the Nightingale System of Nursing at Sydney Hospital*. Windsor NSW: Hawkesbury Press 1968. 24 pp; conditions at Sydney Inf, report of a subcom in 1865 said bldgs in filthy condition, food inferior, untrained women then patients locked in at night, squalor, dirty clothing, rags (4-5); Parkes appealed to FN and 13 months later they arrived; Osburn allotted a room formerly used by wardsman, cd not sleep because of bed bugs, moved to unoccupied MOs quarters, until new quarters complete in Sept; Nightingale Building a substantial stone and brick bldg, view over harbour (5); only a week after arrival O’Farrel incident, Prince Alfred taken to Govt House; subscription for Prince Alfred Hosp but took years, argument over whether site in town or out, opened out of town 1882; fever and dysentery prevalent, lack of WCs (7); nurses in all colours, brought in uniforms, Macquarie bldg, plastered ceilings cracked and infested, water supply short; Osburn ill from dysentery from filthy drain (7); divided authority with supt. problem of title: sister used, Belmore advised against matron, not respected, and man was supt; bd changed title of supt to manager, and she revered to lady supt, and sister became head nurse (12); Bible burning, old books, infested with vermin (12); petty interference (18); Cupid, Bessie Chant and Annie Miller; Blundell; govt sub com had meeting with nurses, did not appoint any of the sisters again, but Osburn for another 3 years; Baker stayed, Turriff became matron of Alfred Hospital in Melbourne, under married name Murray; exoneration of Osburn at inquiry, manager useless, given full mgt of wards, patients, nursing, cooking; so 6 years of opposition, then 10 years to consolidate the work; got new house committee elected in 1874, but still the antiquated bldgs (21); stone laid for new bldg, but work not completed until 1884, and next govt stopped, not completed until 1894; after 16 years and 8 months Osburn resigned, new Sydney Hosp 2/3 erected, her methods spread, succeeded by own protégée Miss McKay 1884, returned to England, 1885 visited hosps in Europe to see Lister’s work on antiseptics; 1886-88 district...diabetes:

Appendix lists main centres where person trained by Osburn took charge: 1870 Mudgee (Shorter); 1873 Tarban Creek (Bland); 1877 Orange (Davies); 1979 Parramatta (Pearson); 1880 Adelaid (Wilmott); 1880 Children’s Glebe (Holden); 1881 Brompton (Abbot); 1881 Hobart (Bland); 1881 Launceston (Windred); 1881 Bathurst (Keyes); 1885 Ballarat (Rucher); 1885 Young (Neyler)
Bower, C. Ruth. “Another Portrait of Miss Nightingale.” *American Journal of Nursing* 27,11 (November 1928):1099-1100. has pic in Western Pennsylvania Hospital Tr School for Nurses, by George Paul Chalmers, the gazing one. Scottish painter (1853-78); painted 1872.

Bowman, Gerald. *The Lamp and the Book: The Story of the RCN 1916-1966.* Queen Anne Press 1967. FN 1-3, 5 8 10-14 16 19 21-3 27 35 43 31 22-3, 31 98; Chapter 2 The Nightingale Tr School 5-10 10: “Florence Nightingale ‘w work therefore is the first great practical stride from superstition and prejudice to sc prs which was made it the care of the sick since the Middle Ages.” conditions had daunted many who tried their best “but lacked her clear reasoning and indomitable fighting spirit.

Ch 3 The Reformers, not Red Cross, yes. 12: Rathbone okay; 15: spread of Liv district work to East London Mrs Stuart Wortley and Robert Wigram 1868; Lees, Metro; 20: good description of hosp conditions, no disinfection; FN understood need for gradual progress, yes; good on other nurses; good book.


Boyd, Julia. *The Excellent Doctor Blackwell: The Life of the First Woman Physician.* Stroud: Sutton 2005. 314 pages, good bio. 104: at La Maternité, FN 124, 129-31, 159-61 172-7 185 220-1; Moral Purity League, social purity movement; rivals; EB slow to get onto CDA; 121: prof of midwif and diseases of women and ch told Bl he entirely disapproved of women in med; 129: friendship with Barbara Leigh Smith, but forbidden to introduce, Julia Smith did, late 1850 (129; EH not in index). Lady Byron vs women doctors; 130: “vastly different

130: EB at Embley “The laurels were in full bloom. Examined the handsome house and beautiful grounds. Walked much with Florence in the delicious air, amid a luxury of sights and sounds, conversing on the future. As we walked on the lawn in front of the noble drawing room, she said “Do you know what I always think when I look at that row of windows? I think how I should turn it into a hospital ward and just how I should place the beds!” She said she shd be perfectly happy working with me, she should want no other husband.” (Pioneer Work 120). EB had been at Bart’s 6 months, had to go back; 131: last weeks in England, visited Dalston, her own hosp similar; has FN seeking “medical training” at Kai WRONG; paid farewell call to Bart’s; Paget said sorry to see her go;

137: Marion Sims most famous Am 19th cen gynecologist, founded his women’s Hosp in New York, 1855.
159: Barbara Leigh Smith encouraged Emily Blackwell to go to the Crimea, but she discovered wd not get professional work; asked FN’s advice, got reply; 172: return to England, saw FN at Malvern after 7 year break “Each woman wanted something from the other.” Fund, “Farr convinced her that the nursing op in the Crimea had made little impact on the mortality rate of the army. In fact more soldiers had died in her hospital during the war than in 173: any other.” no ref. Hugh Small in ref list; 174: EB changed tack, hoping to find way to benefit her own mission from N fame and Fund, but EB wanted women to do nursing, then move on to medicine; cites FN to JSM on (175) 175: by March 1859 clear to both “that any working relationship between them was impossible.” told Bodichon, she would absorb me in her nursing plan, which wd kill me; FN tried; 172: met at Malvern; re N Fund “Dr William Farr convinced her that the nursing op in the Crimean had made little impact on the mortality rate of the army. In fact, more solders had died in her hospital during the war than in 173: any other. Farr’s statistics produced divesting evidence to show that no amount of good nursing could have countered the appalling overcrowding and lack of sanitation and hygiene that were the real causes of so many deaths at Scutari. As a result of this shattering discovery, by the beginning of 1859 Nightingale was more interested in improving hospital construction and mgt than in the training of nurses.” NO, had found out much earlier and started work on hosp reform; 176: BMJ article anti women doctors 9 Feb 1859; 178: before meeting Blackwell, Garrett had no idea of medicine as career; attended lecture, convinced; 178: Medical Council, doctors holding foreign degrees were allowed to register if had practised in the UK, which she briefly had; loophole changed; “Florence Nightingale’s disapproval of women doctors had not prevented her from writing Elizabeth a letter of intro to the liberal-minded Sir Benjamin Brodie,” pres of the Council; 183: EB invited 50 women to inf 23 April for war effort, but FN mania; started Women’s Central Relief Assoc 184: but Dorothea Dix appointed to head nursing; 185: EB absorbed many of FN’s ideas, but criticized her, NonN 1860 her “little nursing book” how impossible for her, no vocation for nursing; “It is a capital little book in its way and I shall find it very useful.” but “It has great faults. It is ill tempered, dogmatic, exaggerated. It will not at all increase her reputation,” some excellent practical sense, readable. “Florence cannot write a book in the usual meaning of the word. She can only throw together a mass of hints and experiences which are useful and interesting, but she is not able to digest them into a book which will remain as a classic.” it was welcome, however, “because I expected nothing higher.” 25 April 1860, In Col. 234: National Health Society May 1871, Ernest Hart promote health in all classes;
235: National Health Society, 1879, gave lectures, did pamphlets
Princess Louise the patron; “Prevention is better than cure.”
something for EB to be in charge of, but
237: against birth control; all forms of chronic disease are so
many disqualifications for marriage and particularly injurious
are any scrofulous or consumptive tendencies or any danger of
insanity. Two persons, both possessing one of these diseased
tendencies, shd be forbidden by law to intermarry, for the
offspring are certain to be either idiots, cripples or defective
in organization.” EB;
245: Florence Blackwell a niece, da of her brother.
251: attended International Congress of the Abolition of Govt Reg
of /Pros in Geneva; book;
255: Paget on women’s sexuality; for EB “self abuse” 154:
masturbation an unmitigated evil; 255: but women as capable of
men to enjoy sex

Boykin, Anne and Dunphy, Lynne. “Justice-Making: Nursing’s Call.”
Policy, Politics & Nursing Practice 3,1 (February 2002):14-19.
15: “Her compassion was all embracing. It extended beyond
humankind to the universe and conveyed an understanding of
interdependence and connectedness.” embodiment of a transcendent
God.
17: Caring Actualized: Nightingale and the Crimean War.
18: Justice-Making: Nursing’s Call. “Florence Nightingale remains
as the exemplar par excellence. She leaves a legacy rich in
caring, laden with compassion and manifested through justice-
making.”

Boykin, Anne and Schoenhofer, Savina O’Bryan. Nursing as Caring:
A Model for Transforming Practice National League for Nursing
Nightingale Songs. Aesthetics pub. No mention of FN it seems

Boyle, Kay. Plagued by the Nightingale. 1986. U Ed cat

Bracebridge, C.H. “British Hospitals in the East” Times (16 Oct
1855), lecture at Coventry by CHB, and letter 20 October. Cook
2:459

Bradbrook, Muriel Clara. “That Infidel Place”: A Short History of
10 note that JS Mill’s Subjection of Women heavily marked by FN
in Girton College Library.

Bradshaw, Ann. The Nurse Apprentice, 1860-1977 contd:
chap 3 nurse registration 188-1925; raised as early as 1874 by
Acland in preface to Lee’s nursing text; FN corr with Acland; 58:
debate about reg can be set in context of Max Weber’s thesis of
the routinization of charisma; 64: arguments for re, Dr Bedford
Fenwick the 1st witness, did not mention FN’s role in nursing; Crichton-Browne, Norman Moore; Mrs Bedford Fenwick refuted Lückes’s argument; Sidney Holland; L argued reg wd make nurses more like doctors, and lead to mechanical uniformity; 74: pro-registrationists succeeded and Nurse Registration Act passed 1919; concl 76: “This chapter has revealed two important pieces of historical evidence. The first is that by the late nineteenth and early twentieth century, Nightingale’s principles and the ideals of nursing leaders whom these ideals influenced had become a normative living reality in hospital nursing. The second piece of evidence is that the moral significance of the nurse was regarded as quintessential to all views on registration, and was not disputed. All agreed on the vocational ethos as being fundamental to the health and well-being of the profession.”

chap 6 100 years after N School every indication that N’s principles still dominated British nursing; ward sister controlled the ward; then change, to be less rigid; 152: Titmuss commended Nightingale’s Notes on Nursing and her insight into how sick suffer mental pain almost as much as bodily pain, like Goddard that patient needed to be saved from worry by nurse anticipating his needs Essays on the Welfare State 29; 158 Baly essays, apprenticeship involved cheap labour and suppressed critical questioning, for blind adherence to routine “Reform on Nursing Educ” 1976; 161: 1972 October report publ Asa Briggs, chair Report of the Committee on Nursing, single central body, Central Nursing and Midwifery Council to be resp for professional standards, educ and discipline for nursing, midwifery and health visiting; colleges of nursing, midwifery and poss health studies to be est; 18 month intro period; more research, under educ standards; underlying assumption of the report that N trad outdated, little sympathy with N trad of dedicated vocation; hierarchical authoritarian structure; 162: fashionable to denigrate Nightingale at time of Briggs Report; Dr Wolstenholme, lecture to Royal Soc of Medicine in 1970;

Bradshaw, Ann. The Nurse Apprentice, 1860–1977. Aldershot: Ashgate 2001. 267 pp. RCN source, uses pr sources, but only printed sources, uses Wake, critical source a lot. has Quain 1st ed. Rafferty chap 1 The Nightingale Trad, fitting the nurse for her purpose; 2: “Nightingale had a strong Christian faith, although her technical theology was amateur and less than coherent.” cites Sugg and her own previous book 3: has everything starting at Kai, although she went there because already concerned. Quain has 3 editions 1882, 1894 and 1902; cites 1st ed mainly and a bit from 3rd; good library of professional books important; PD James did review of Notes on Nursing!!? 8: character training re register opp; 9: not because she undervalued theoretical proficiency; ideal into practice; Wardroper’s instructions to ward sisters in Seymer appendix; Baly’s critical views and opp to Cook; Cicely
Saunders, who founded the hospice movement, trained at Nightingale School beg 1940, attention to detail and courtesy to patients invaluable in palliative care (22); chap 2 Voices from the Nightingale Nursing Trad 1874-1982, nursing books; Alice Dannatt, lecturer on dom hygiene and hon supt of district nursing, former lady supt Royal Inf Manchester etc, pub nursing book 1893, from an article 1888; M.H.A. Voysey, Nursing: Hints to Probationers on Practical Subjects. London: Scientific Press 1905, rev 1911. A. Millicent Ashdown, A Complete System of Nursing 1917; J.K. Watson, house surgeon at Essex and Colchester, wrote Handbook for Nurses 1899, rev 12 eds to 1940; P.G. Lewis... M.N. Oxford, A Handbook of Nursing. London: Methuen 1911; Wilfred J. Hadley (at London Hosp) lectured to nurses and wrote texts from lectures, Nursing: General, Medical and Surgical. 1st ed London: J. & A. Churchill 1902, 2nd d 1907. H. Morten, Sketches of Hospital Life. London: Sampson, Low 1888; concludes that moral qualities concern over long time; 49: “It is clear from these textbooks that Nightingale’s principles of nursing as practical care prevailed as an aspiration for nursing, and in the training of nurses.”

Bradshaw, Ann E. “Gadamer’s Two Horizons: Listening to the Voices in Nursing History.” Nursing Inquiry 20,1 (March 2013):82-92. From Abel-Smith and Baly, Celia Davies, Anne Marie Rafferty have influenced direction of Br nursing policy. race, class and gender, crucial omission, but Gadamer says historical interpretation shd be a mutual dialogue of then and now. But in modern nursing history writing the present horizon dominates. To allow past to speak to present, this study examines textbooks of Br nursing matrons and tutors 1873-1971, shows nurses taught to develop Christian virtues to become good nurses. Online UG 84: development of moral character from FN 86: religious motivation, missing horizon of nursing history; cites Judith Moore study of King’s, Guys and St John’s House 88: Croft’s reading list included Lees book; [covers a number of early matrons; FN cited only on addresses 88: FN good nurse must be a good woman “Nightingale (1873) saw religion as the essential background to nurse training: ‘Life is a shallow thing and more especially hospital life without any depth of religion.”


Bradshaw, Ann. Lighting the Lamp: Spiritual Dimension of Nursing
225: 1979 Nurses, Midwives and Health Visitors’ Act provided legal mechanism for change, based on Briggs Report of 7 years earlier conclusion: 233: “The first major system of nurse training, which began at St Thomas’s Hospital in 1860 and spread worldwide, developed from what were perceived as Nightingale’s principles. It was understood and accepted that nursing was a vocation, a moral activity, dependent on the character of the nurse and her high ideals. The system embraced technical, practical and scientific knowledge....” 236: 140 years after N’s model began in Br implications for quality in patient care, nurse educ and future direction have yet to be fully realized. History will judge whether rev rather than ref was the right way forward.

Brand, Jo. New Statesman 21 September 2009 138,4967 p 62


Bressan, Valentina, Tolotti, Angela; et al. “Perceived Barriers to the Professional Development of Modern Nursing in Italy: A Discussion Paper.” Nurse Education in Practice 17 (March 2016):52-5 doi 10.1016/j.nepr.2016.02.007 cites Fealy 2006; UK Nightingale model primarily influential; nursing in Europe increasingly becoming an all-graduate profession, EU requirements: (% compulsory graduation: ethics committees: medical dominance: nurse specialist and nurse prac do not formally exist initially: need for pol active nurses; internationally nurses more assertive and pol active: continual educ required in some: evidence based practice: lack of nursing authority:

Bridges, D.C. “Florence Nightingale Centenary.” International Nursing Review 1,3 (April 1954). ICN UG online

Brighton, Terry. Hell Riders: The Truth about the Charge of the Light Brigade. London: Viking 2004. 9780805077223 [exagg claims] Its Chapter 19 “The truth about Scutari” has an unusual array of errors, and routinely first names Nightingale and some women, while men have surnames and titles, in the case of Sidney Herbert boosted to “Sir Sidney,” a title he never had. He asked “Was Florence Nightingale--or Mary Seacole--the true nursing heroine of the Light Brigade?” (303). Oddly, he credited Nightingale was keeping mortality figures, “meticulously,” although she collected none (she used the army’s official statistics for her analysis after the war). But then he charged
her with not believing that there was any connection between the faulty sewers and disease (306), although her reports go on at great length about this terrible problem. She continued to refuse to believe in the connection, the author stated, even after the death rates were brought down by the renovations carried out by the Sanitary Commission (307), which work she lauded in her reports and for years afterwards. Instead, the author explained, “she did not believe in germs,” although at the time of the Crimean War germ theory was still a long way off.

After the war, Nightingale did not settle “for the life of an invalid, offering advice only from her bed,” although she was ill most of her life post-Crimea, but worked around it. Trivial errors: he makes Mr Sidney Herbert into “Sir Sidney,” although leaves his wife “Mrs Herbert,” Nightingale’s Notes on Nursing was not “the very first textbook for nurses” but predated the founding of her school and was directed to women looking after the health of their families—it was later also used in her school; Nightingale did not settle “for the life of an invalid, offering advice only from her bed,” but sometimes described herself as a “prisoner to my bed,” sometimes to her “room,” and sometimes she went out; As well, the author routinely first names Nightingale and Seacole, but never any of the men. The author uncritically cited the “biographies” of F.B. Smith and Hugh Small, which were undisguised assaults of her work, not organized as biographies

304: “On 14 October 1854, Florence wrote to Mrs Herbert, whose husband Sir Sidney was by then Secretary at War.”... meanwhile his letter (okay) [FN did write Mrs Herbert then, 304: “Florence set up her headquarters in the Herberths’ house in London’s Belgrave Square with the intention of recruiting forty nurses. She found most of the applicants unsuitable and accepted only thirty-eight, including twenty-four nuns.” [FN did none of the interviewing, but met with officials and heads of organizations with nurses; the screening was done by Elizabeth Herbert, Selina Bracebridge, Lady Canning] Left...

306: “Her own mortality figures, meticulously kept and charted” [but FN collected no data--too busy working--after the war she analyzed data collected by the War Office]

306: She [did not believe there could be a connection between the sewers and the diseases rampant among the patients housed above them [her massive report, evidence to the royal correspondence and correspondence all show concern about sewers and drains, and nauseam]. “She did not believe in germs” [in 1854 germ theory was a long way off: Joseph Lister’s pioneer paper of in is dated 1867]

Brightonb

307: “With the death rate above 40 percent and rising, the War Office in London sent out a sanitary commission to inspect conditions in the hospital” [all the hospitals and camps]....
“and immediately ordered that the sewers beneath the hospital be flushed out. The death rate began to drop and by June had fallen to just 2 percent. Florence refused to accept that this had been brought about by the cleaning of the sewers” [she frequently cited this important reform; her charts flag the “before” the sanitary commission and “after” the commission difference].

307-08: (Now after the war) “She was profoundly shocked to find that the death rate at Scutari had been far higher than elsewhere, and came to a most painful conclusion--one which she had previously refused to accept--that most of the soldiers who died at Scutari while under her care did so because of diseases rising from the sewers” [this is Hugh Small’s case, and it is contradicted by examination of the official data, which he failed to do--the highest death rates were at Koulali, a hospital not under Nightingale’s management, because it had the worst sanitary conditions; Nightingale was well aware of this from Dr Sutherland, who reported the Koulali rates in his Sanitary Commission Report; Nightingale’s own (later) analysis stressed sewers and drains, and noted the higher rates at Koulali; she also showed how all the high death rates went down drastically after the Sanitary Commission’s reforms were made].

309: Unison...cites Wheeler. “Unison gave some thought to who might replace her. The name that attracted most support was that of Mary Seacole.” [father probably not an officer, and husband probably not godson of Nelson]

Brindle, David. “Nurses snuff Nightingale image.’” The Guardian 27 April 1999 8. “Union votes to ditch ‘outdated’ lady with the lamp model.” Wendy Wheeler, a nurse and health visitor from the union’s London health committee, said the profession had to start to “exorcise the myth” of Nightingale. Her legacy, or its interpretation, had held nursing back too long. Once Miss Nightingale had saintliness conferred upon her, she had set about ‘turning out her robotic acolytes’ from St Thomas’s school of nursing in London.” Br est sought from very origins to sanitise nursing and ensure that its heroine wd be acceptable, a white, English, middle class Prot woman,” she said. “Speakers argued that others deserved at least as much credit as Miss Nightingale. Joanna Bridgeman, an Irish Roman Catholic who also worked in Crimea, was said to have been the real inspiration of ‘Nightingale nursing.’ Mary Seacole, a black nurse who paid her own way to the Crimea after her services were rejected, was said to have matched--if not exceeded--Miss Nightingale’s exploits.

Elizabeth Fry, A quaker... had 100 years ago been recognised by the BMA journal as the true founder of nursing.” Delegates voted overwhelmingly for a resolution asserting that the image of Miss Nightingale represented ‘some of the most negative and backward thinking elements in nursing.’ It called on the International Congress of Nurses--members of which were present--to cease celebrating international nurses’ day on her birthday
May 12.

Brindley, Madeleine. “How Betsi Fought for the War Wounded.” *Western Mail* 16 May 2005. History has elevated Mary Seacole, recently voted the greatest Black Briton, to Florence Nightingale’s ranks.” now Prof Donna Mead argues time for Wales’s nursing heroine.


Bristowe, J.S. “Miss Nightingale on Hospitals,” letter from Dr J.S. Bristowe Medical Times and Gazette (20 February 1864):211. Further on Farr distinction between Farr and him at end; both Farr and FN have brought accusations against. Farr enumerated as one of FN’s merits that she probes.... words which “insinuate a very grave charge against existing hospitals,” a particularly serious matter for someone in Dr Farr’s position (he was superintendent of statistics at the General Register Office);

Bristowe, J.S. “How Far Should Our Hospitals be Training Schools for Nurses?” Cup401i(7) opens: “Introductory. Probably the greatest advance in the practice of medicine in recent times is the full recognition of the fact that it is at least as important that patients in dangerous or critical diseases shd be tended by well-trained nurses, as that they should have the benefit of the advice and care of well-trained medical practitioners. The respective duties of the nurse and of the medical man supplement one another. Without the information which a skilful and observant nurse can always impart with respect to the patient under her change, and the feeling that any directions he may give will be faithfully and intelligently carried out, the medical man’s relation to the patient must always be unsatisfactory.” St T. Gives brief account, was student 38 years ago, “our nursing, like that, I believe, of all other London hospitals, was on the whole of a very unsatisfactory character. Each ward was presided over by a head nurse or ‘sister’ under whom were two or three...” inferior nurses. Some self taught, but no training; widow of a publican, governess, most respectable, but actual nurses “of a very inferior stamp,” most little more than ordinary charwomen, recd small wages, bought and prepared own food, scrubbed floors of wards, slovenly in their attire, dirty in their persons and habits, and quite untrustworthy. Mr Baggallay and Mr Whitfield, and Mrs Wardroper, put a stop to. About 30 years ago.... Then testimonial to FN:.... teaching by the medical men [so, Bristowe saw before and after at St t]

summary: about 30 probs, post of matron at Sydney Netley, Edin, St Mary’s, Westm, Putney, Liverpool Royal Inf, Liv Southern Hosp, Maryle WI, Salisbury Inf, Lincoln co, Leeds Inf, Huntingdon
Co Hosp, Cumberland Inf (Carlisle) M&N; North London District Nursing (Holloway), Paddington and Marylebone Distinct. Demand for skilled nurses will be numerically larger than for medical men, hence facilities for teaching them, being educated for substantial livelihood, some primary sacrifice on their part shd be incurred; expenses of nursing est shd be made as moderate as is compatible with efficiency, provision of home mt be dispensed for some cases; let probs live with friends;


Regs. Of Training of Hospital Nurses under the Nightingale Fund.


Brooks, Richard [arts editor]. “Nightingale’s nursing ‘helped kill soldiers.’” The Sunday Times (8 July 2001):14. announces BBC doc “in fact a manipulative, neurotic and sexually repressed woman. Under her nursing supervision during the Crimean war, hundreds of wounded soldiers died unnecessarily...10 times more men perished at her Scutari hospital near Sebastopol from illness than from wounds.” [mixes up places] cites Hugh Small. Bostridge bio said to be next year. FN like a Thatcher, “had an unsatisfactory love life” spurned as a youngish woman by a social climber; “had just one passionate romance in the Crimea with a soldier” said Small. “Nightingale was not really a nurse.”


Introduction: “Much modern nursing can be dated to Florence Nightingale, who promoted the idea that to be a ‘good nurse’ was also to be a ‘good woman.’ end2 [Gamarnikow, Sexual Division of Labour, in Kuhn, Feminism and Materialism 1978] Klaus Theweleit
Male Fantasies, I 1987 p131-2 describes this ideal vision of the female nurse as the ‘white nurse’ end3, a pure ‘caring mother figure, who transcends sensuousness.’ end4.

“Florence Nightingale was a strong advocate for both women and nursing, and considered traits such as nurturance, gentleness, empathy, compassion, tenderness and unselfishness to be essentially feminine and essentially nurse-like. Not surprisingly, in the present, this position has been increasingly challenged by those who argue that these attributes exist also in men, and might not necessarily be found in all female nurses! End5 [Wright and Hearn, paper, Nursing, Women’s Hi conf 1993. Nightingale herself believed that men’s ‘hard and horny’ hands were not fitted ‘to touch, bathe and dress wounded limbs, however gentle their hearts may be’ end6 [Summers, Angels, no page ref]. Her opposition to men in nursing caused her to denounce male asylum nurses especially, because she considered their duties more akin to those of prison warders than to nurses in general hospitals. Her hostility, allied to that of her fellow campaigner, Mrs Bedford-Fenwick, was partly responsible for increasing divergence in training, philosophy and sex ratios between psychiatric and general nursing during the nineteenth and early twentieth centuries. [Bedford Fenwick, fellow campaigner, hardly]

Following Nightingale’s experience at Scutari, she devoted forty years of her life to the dev of nurse education, hospital design and military reform end7. Carpenter has pointed out there ‘are different ways of being a nurse’ end8 [Carpenter, M Asylum Nursing before 1914, in Davies ed Rewriting Nursing History 1980 as a brief study of the history of caring suggests.” FN began formal educ of nurses at St T...

Men in nursing, early, ancient, medieval
Not one reference to FN’s writing directly! End 5:

“Meanwhile, as the late nineteenth century developed, medicine itself was reforming as a discipline that originated not in the surgeon’s craft but in the laboratory.... It is significant in this regard that Nightingale herself never believed in germs. NO Thus, because of its rudimentary intellectual and sc content, the Nightingale formulation of nursing could coexist quite comfortably with Victorian beliefs that education was bad for women and harmed their reproductive organs.


Browne-Wilkinson, A. They Made History: Florence Nightingale.

Brunton, Lauder, intro to Printed Report to Bucks County Council 1892, with prefatory note by Sir Lauder Brunton, and preface and introduction by Frederick W. Verney. London: P.S. King & Son 1911. preface 3 pp. credits FN with work effected after war, “with marvellous organising power and system of sick nursing which has lessened the pains and smoothed the weariness of millions of sufferers, and has even robbed deathbeds of much of their terror.” clear intellect, “recognised that prevention is better than cure, and that the instruction of mothers was one of the best means of preventing disease.” health visitors, now more people topic up. object of National League for Physical Education and Improvement est, same goal, boys and girls to grow up strong and healthy; preface 2 pp by Frederick Verney, since FN’s death, new work for Nat League for Phys Educ., January 1911, then his earlier intro 1892, then FN printed letters Oct 17 1891, in 68887, Dear Hardworking Friends” 10 October 1892, Hints for Health Visitors by MMV: letter by De’Ath, Health visitors diary

Buck, Albert Henry, ed. A Reference Handbook of the Medical Sciences: Embracing the Entire Range of Scientific and Practical medicine and Allied Science. New York: William Wood 1886. 3:698 Hospitalism. “The long controversy, in which Sir James Simpson bore so prominent a part, was but an outgrowth of the discussions raised by Florence Nightingale’s work in the cause of hospital reform after the Crimean War. The doctrines advocated by her created the general feeling in England that the old hospitals should be abandoned and new ones built. Counter to these views, an elaborate but conservative report was made by the Medical Officers of the Privy Council in 1863.


Tarbox, Mary P. “A Fierce Tenderness: Florence Nightingale Encounters the Sisters of Mercy,” in Bullough.... 274-87. Refs to Sisters of Mercy, no FN

275: sister “besides attending particularly to their own perfection, which is the principal end of all Religious Orders, should also have in view what is peculiarly characteristic of this institute—that is, a most serious application of the instruction of Poor Girls, Visitation of the Sick and Protection of Distressed Women of Good Character.” 275: “The training of young sisters with an aptitude for nursing became the basis for early education in a service that had not yet seen formal education in any other form.” [no ref]; Catherine McAuley; Irish sisters and British FN; penal laws [good on background] but errors of fact

277: “Their philosophy of nursing was stated in the Rule and Constitution in the words of Catherine McAuley:.... ‘Great tenderness should be employed and when there is not immediate danger of death, it will be well to relieve the distress first, and to endeavor by every practical means to promote cleanliness, ease and comfort of the patient.” 4 (cits Rule)

278: “Although Miss Nightingale actually attempted to gain some instruction in nursing from the sisters early in her efforts to become a nurse, the...” [no, from Sisters of Charity, who ran a hospital]

281 [no ref to doctors not wanting more nurses, or imbalance of RCs] second party; “not compiled by Miss Nightingale” and without previous knowledge; “and before questions of authority had been settled.” [no, Bridgeman signed]

282: “The Mother Superior of the sisters from Ireland had made no agreement to abide by Nightingale’s authority nor was she about to give up her own. She had come at the request of the Archbishop of Ireland and would heed only his command.” 20. Cit Goldie p 54

284: “The circs of Mother Bridgeman’s defiance of Nightingale was eased only when Mother Bridgeman and five of her sisters were sent to Balaclava to work in the Genal Hospital. There, though they remained under Nightingale’s formal authority, they escaped being under her watchful eye!” [no, at Koulali were not under her]


108 “The first real recognition of her efforts for better army medical services came from the United States during the Civil
War. The northern states consulted her for help in organizing hospitals and in caring for the sick or wounded. She sent evidence to the United States to back up her suggestions, which received wide publicity and had much influence. Following her recommendations the Union forces appointed a sanitary commission and provided for the inspection of camps. Women were also utilized as nurses. Unfortunately she had no channel of communication with the Confederate states, although she wanted very much to help them also.” (108). 112: opposition to FN on charter. good coverage, short on FN.

15: Kai, Fry, religious infl
74: nursing theory. “Historically, the first nursing theorist was probably Florence Nightingale, who emphasized the env of the sick person as all important. She viewed disease as a reparative process, an effort to remedy a previous proves of ‘poisoning and decay’; Nurses were all important in this because health could be restore by the ‘proper use of fresh air, warmth, cleanliness, quiet and the proper selection and admin of diet.”.... 75: however FN writing before “bacteriological revolution” idea of env modified to include measures designed to avoid the spread of infection, to ease patient’s suffering and est.... “Such was the charisma of Nightingale that her definition of nursing was not challenged until well into the twentieth century and it remains the key element in most contemporary theories of nursing.” then Harmer....
101: ethics and oath.

Instructions to the nurses “sound strangely unhygienic today: ‘The nurse should have a warm dark gown that from time to time will wash and which they do not fear to soil’ and again ‘It is possible to be far too clean and respectable for the work that has to be done.’ Florence Nightingale had something to say on this subject; one of the Mission’s treasured possessions is a letter which she sent to Mrs Ranyard with a cheque for £20. It reads, ‘A small gift for the Biblewomen Nurses with Florence Nightingale’s deepest sympathy for the noble attempt to provide nursing and cleanliness for the very poor; with gratitude to God and fervent prayer for its extension and progress. And if she might hint a wish it would be that this little sum should be expended in waterproof cloaks or washing gowns for summer and washing lien sleeves to take on and off, and washing aprons or washing money for two or three of the nurses in the very poorest district, where there is no local lady to look after these 11:
things for the nurses.’ That was in 1875 and showed the progress which had been made for, in spite of her shortcomings, the Biblewoman nurse had come to stay. Soon she was acting as an unofficial sanitary inspector and many reforms in housing the poor could be traced to these humble women who strove to take cleanliness and godliness into places where men feared to enter. 189 Mrs Ranyard died and Council asked her niece Mrs Selfe-Leonard to succeed. Had worked in all branches


Burke, John P. “Infection Control: A Problem for Patient Safety.” New England Journal of Medicine 348 (2003):651-56. 651: “Nosocomial, or hospital-acquired infections (more appropriately called health care-associated infections) are today by far the most common complications affecting hospitalized patients.” Harvard Medical Practice Study 11 found a single type, surgical-wound infection constituted the second-largest category of adverse events. “Long considered the greatest risk that the hospital environment poses to patients, nosocomial infections abruptly became the province of public health officers” at time of hospital based staphylococcal infections 1957 and 1958. “Currently, between 5 and 10 percent of patients admitted to acute care hospitals acquire one or more infections, and the risks have steadily increased during recent decades” table. Adverse effects affect approx 2 M patients each year in US, some 90,000 deaths. Can rank by frequency, associated mortality rates, costs, and relative changes in frequency; catheter assoc urinary tract infections the most frequent, 35% of nosocomial, but lowest mortality and cost; surgical-site infections second (20%) and third in cost; bloodstream and pneumonia less common at 15% each but higher mortality and costs; bloodstream and methicillin-resistant staphylococcus aureus infections share notoriety for being to the highest cost infections and the most rapidly increasing in frequency, three times the incidence now as 1975. 654: Patient-Safety Movement antibiotic resistance as special type of adverse drug event; looks at Salt Lake City Dept of Clinical Epidemiology and Inf Diseases in LDA Hosp devised “clinical triggers” to facilitate detection and surveillance
Burkhardt, Margaret A.; Nathaniel, Alvita K.; Walton, Nancy. *Ethics & Issues in Contemporary Nursing*. 2nd Cdn ed. Toronto: Nelson 2010. Walton is assoc prof at Ryerson, and chair, Research Ethics Board. Several refs to FN Chap 1 7: quotes FN, “even Florence Nightingale wrote every woman...” a nurse, “Gender stereotyping has been both a blessing and a curse to nursing.” [no ack that no profession then open to women!]

13: “women such as Marguerite d’Youville (founder of the Grey Nuns), Ethel Bedford Fenwick, and Florence Nightingale, all had important roles in the development of Canadian nursing.” Fenwick presumably, but what role?

13: “The Modern Era” about a page on FN, positive, holistic cited, model for all nurses, statistician, sanitarian, social reformer and scholar.... but exaggerates what she did in the Cr War. Correct that soldiers died from poor living conditions and ailments from sanitation. “Nightingale, on the front lines, recognized the importance of clean conditions in which to eat and provide nursing care, with separation between the clean and dirty areas of the soldiers’ camps. What is basic knowledge to us today, when introduced and operationalized y Nightingale (her nurses went to work rearranging the camps and cleaning) remarkably decreased the mortality rate of soldiers on the front lines. Nightingale provided clear support and evidence of what eventually became known as the germ theory of disease. Having strong opinions on women’s rights...” did not hesitate to challenge the established male hierarchy.” Cites Simkin 2001.

“Nightingale has been criticized, however, for situating the moral agency of nursing within a gender specific context. Her belief that a good nurse is both qualified and signified by being female has been described by some as furthering the ‘gender essentialism’ (LeVasseur 1998 286) that is apparent.... “Some go on to argue that Nightingale was not a feminist....”

14: Snively

40: trustworthiness. Focal virtues for nurses. Measured by others’ recognition of the nurse’s consistency and predictability in following moral norms., reputation among co-workers.; integrity; conscientiousness; 40-41 Nightingale pledge refs include V.A. Miracle, National |Nurses Week and the Nightingale Pledge. *Dimensions of Critical Care Nursing* 28,3 145-6.


Button, Marilyn D. And Sheetz-Nguyen, Jessica A., eds. *Victorians*

164: Ranyard influenced by Fliedner, infl by Fry, and influenced FN passing mention in several places, no thorough treatment

episode 264: RC religious in partnership with nursing luminary FN and her supporters made lasting changes in the nursing profession worldwide;


2 refs to FN. Left Folkestone for Boulogne. With the Ottoman Army. 53, after Kertch, saw a lady in a riding habit crossing plain of Balaklava, 54: later learned it was FN escorted by Raglan and some Eng and Fr staff officers; 179: saw Mother Seacole, a “dark sutler” who kept a store at Kadikoi, 2 or 3 miles from Br hq, in emergency cd obtain some kind of a meal. Okay bio


Bynum, W.F. The Western Medical Tradition: 1800-2000. Cambridge University Press 2008. 232: ref to FN and army in Cr War, AMD suffered from chronic underfunding and low morale, Cr War services “came under heavy criticism, both in the wake of Florence Nightingale’s exploits and the serious logistical difficulties that had been encountered. Getting medical supplies and personnel to where they were needed had proved almost impossible to achieve.”

volunteer army

C.R. Backus, William R. Backus Hospital, Norwich

Winston Backus has lamp

Amanda Backus, 19th Century Medicine Connecticut. Middlesex Hospital. Chaplain blessed the hands of hospital caregivers at a special “Blessing of the Hands” ceremony, dedication ceremony for a new Healing Garden, inspiration of Critical Care Unit


Sept 9 1839 Birmingham. 1873 at St T and 8 months at Highgate, and district nursing home Bloomsbury under Mrs Dacre Craven, district nurse at Manchester; the lady supt Liverpool Parish Inf. they met but no description of meeting. after Liverpool had appointment as matron at West St. Hosp, Sheffield for 6 years; in 1890 became matron at Queen’s Hosp Birm, died 1896 in harness; 4 letters included


Calkins, Beverly M. “Florence Nightingale: on Feeding an Army.” *American Journal of Clinical Nutrition* 50 (1989):1260-65. Good article on FN role: FN responsible for “the first known recommendations in modern literature for feeding military personnel.” ref to “condensed version of her recommendations was requested by and published for the Army of Virginia in 1861. Directions for Cooking by Troops. JW Randolph. Rates FN food, low of fibre but good on nutrients generally. Appendix 1265 as a “verbatim presentation” of FN recipes in ref 1. No. 1 Coffee for 100 men; No. 2 Fresh beef soup for 100 men; No. 3 Soyer’s stew for 100 men; No. 4 “Suet dumplings.” No. 5. Meat cooking. No. 6 for salt beef or pork. No. 7 Salt beef or pork with mashed beans. Sounds like FN; P 1265 has part of FN Directions for Cooking by Troops.

Calwell, H.G. *The Life and Times of a Voluntary Hospital: The Royal Belfast Hospital for Sick Children 1873-1948*. Belfast: Brough, Cox & Dunn 1973. lists lady supts: 1873-91 Miss Lennox; 1891 Miss May Stopford: 1891-93 Miss Winder; 1893-94 Miss Moriarty; Lennox the first matron, selected by the ladies’ com; was at Netley; hosp opened in 1873; 2 letters of FN to Lennox not preserved; that of 21 April 1879 photostat only; gave £5; country branches Queen Victoria Convalescent Home for Children, opened by marchioness of Dufferin 19 Sept 1889; opened for children in 1890 (126)

Cambridge, duke of. *Life of Miss Nightingale (The Heroine of European Philanthropy)*. 1855. pamphlet 16 pp. LMA H1/ST/NC12/1

Cameron, Donald and Jones, Ian G. “John Snow, the Broad Street Pump and Modern Epidemiology.” *International Journal of Epidemiology* 12,4 (1983): 393-96. Modern awareness of Snow’s work begins with “Snow on Cholera” in 1936, Wade Hampton Frost; 1955 centenary RSM 393: Snow used way of life, ec system, educ, etc. not epidemiology; no FN connection 394: “It seems, to us, that Snow here carried the germ theory of
disease as far as anyone did before the advent of the science of bacteriology, at last as far as Henle and with more supporting evidence. The agent only remained to be visualized by Pacini in 1865 and cultivated on a plate by Koch in 1883.” Snow used stats to help confirm a theory he had already est. Snow: circs, propagated by the morbid poison which produces it being accidentally swallowed; that this morbid poison becomes multiplied and increased in quantity on the interior surface of the alimentary canal, and that it passes off in the ejections and dejections to produce fresh cases of the disease in those who happen to take the morbid matter into the stomach.” accidental swallowing in crowded habitations of poor,” saw as living cell; “most likely” [but no mention of heroic medicine, use of heavy metals!]

394: Simon and Farr prepared material for Gen Bd of Health report of 1856, polluted water implicated in 1848-49 and 1854-54 outbreaks, doe snot mention Snow
395: Simon and Farr merely showed an association with water, not concerned with materies morbi, believed culprit an effluvium produced by rotting animal and vegetable matter, not necessarily specific to cholera but predisposing to it;

Cameron, H.C. Mr Guy’s Hospital 1726-1948. London: Longmans, Green 1954. ref to FN letter to hosp asking that Shaw Stewart be allowed access; sister of Michael Shaw Stewart MP, and James Shaw Stewart a gov of hosp; (so FN got her the London hosp experience); when Dr Steele made recs for reform 6 months later “it wd seem likely that some of them at least had originated with Mrs Shaw Stewart and her friend Miss Nightingale.”; 203: in 1879 newly appointed matron, Miss Burt took up duties, treas Mr Lushington, unfolded scheme for reform and improvement of the nursing arrs. “The work of Florence Nightingale was everywhere having its effect and nursing was beginning to be adopted as a vocation by educated women.” if hosp to serve as tr school, nurses must be moved about for experience; staff did not like; 205: lady pupils in 1880 beginning to arrive; Burt had been in St John’s order; matrons Margaret Eliz Burt 1879; Miss Victoria Jones 1882; Burt had done good work at Leicester before; good on attack of Lonsdale;


Cannadine, David. History in Our Time. Yale University Press 1998. chap 21 FN 45 100; 5: on QV “One of the reasons why she clung so fervently to her reclusive widowhood may have been that (in the manner of Florence Nightingale and her post-Crimea ‘illness’) it gave her extra leverage and control in dealing with the politicians, who were so much better educated than she was....” intimated her.
“Florence Nightingale” 199-207 legendary nursing achievements established as popular heroine, a secular and spinsterly saint. Reputation for greatness and goodness, courage and compassion, “beyond reproach” in company with Boadicea, Eliz I and Victoria, and now Mrs Thatcher. Cook’s bio

202: “Nightingale made many enemies. She wd not acknowledge those nurses who were not directly under her control, there were endless squabbles with military officialdom, about jurisdiction and authority, she needlessly antagonised Dr Hall, the Insp Gen of Hospitals in the Crimea, and she even subjected Sidney Herbert to frequent scoldings and denunciations by post.”

203: She “scarcely noticed that Sidney Herbert was collapsing under the strain.” Then India

204: “imperiously telling newly qualified nurses where to take employment, shamelessly promoting her proteges and then feeling personally affront if they dared to get married.” incr out of touch. 204: “She had never accepted the germ theory of disease, nor placed much confidence in vaccination. She was opposed to the Professionalization of nursing, to public exams and to state registration.” “Florence”

205: F.B. Smith “so cogently argued” not clear what her motives really were.

“Florence was calculating, ungenerous, vindictive, the self-dramatizing creator and jealous guardian of a misleading public image....” But a reformer of genius, relates her to Chadwick, Rowland Hill “to use underhand means to achieve admirable ends--bullying and traducing opponents, lobbying for..., packing royal commissions and committees of inquiry with their own friends and supporters, and slanting the evidence to justify their own policies and recommendations. In the company of these messianic manipulators 206: Nightingale seems far less exceptional, in both her virtues and her shortcomings, than she is habitually made to appear by her biographers. She was 206: a woman who set out to crusade and conquer in a man’s world, loved public business

206: "The essential difficulty in understanding Nightingale may thus be succinctly stated: she was (and is) too bossy, too interfering, too governessy for many men, and she was (and is) too uninterested in women’s issues and women’s rights to be embraced as a feminist role model.” solution. “Long before Thatcher, Nightingale was congenitally incapable of understanding any point of view which differed from her own. And long before Thatcher, Nightingale took up men, used them for her own ends, and then cast them aside with little regret or...”

207: “The Thatcher era, then, is a particularly propitious time for a full-scale re-evaluation of Nightingale’s life and work. For she still awaits the biographer and historian who can simultaneously do her justice and take her measure. But what a task he (or she) is going to have! To work through the elephantine mass of relevant archival material will require
stamina of positively Florentian dimensions. To decode and interpret her letters correctly and convincingly will demand judgement and intuition of the very highest of an artist and the expertise of a psychologist. And to do full justice to the astonishing range of her interests and achievements will take a scholar of uncommon versatility and expertise, not just in political history, military history, administrative history, intellectual history and religious history. Eighty years after her passing, Nightingale remains a daunting and intimidating adversary. But until her biography is properly accomplished, these brilliant yet baffling letters provide the most vivid picture available of this eminent but abidingly enigmatic Victorian. In death, as in life, Florence Nightingale herself remains emphatically in charge. But not, we must hope, for too much longer. Refs: Vicinus and N

Cantlie, Neil. *A History of the Army Medical Department*. 2 vols. Edinburgh: Churchill Livingstone 1974. Sir, late dir gen Army Medical Service. 2 vols. Cr War in vol 2 has section on FN. 3 chaps on Cr War, v positive about Andrew Smith, somewhat snarky on FN; biblio of Longmore; good pics: Andrew Smith, Longmore, Parkes. Netley, Evatt 92: Menzies gave FN a formal but not unfriendly reception; no furniture in quarters, small kitchen flea and bugs; after Inkerman arrivals Menzies complimentary, but strain because no one seemed to want their services; enforced idleness; 93: arrival of Osborne and Augustus Stafford; Menzies knew nothing of their arrival, 94: then Macdonald of *Times*; Menzies not a good admin; Maxwell legal member, contradicted Osborne; 101: Paulett replaced timid Sillery; 108: losses of Prince; 113: Lawson re 197 on board Avon, deficiency said to be known to Lawson; reprimand a shattering indictment, mt easily have unseated Hall, but did not occur; author says conditions on Avon no worse than on others, Hall said 100 a day dying in camp from cold, exposure, want of clothing an fuel and food; neither Lawson nor Hall saw evidence or got copy, no medical officers represented in inquiry, Hall said dept made scapegoat; Hall had already asked for systematic way of transporting; Cantlie pro Hall, saw FN’s privileged access to SH as against all military tradition; 181: says FN sent polite letter of congrats to Hall on KCB Cantlie also has sections on Egypt and Sudan; Garnet Wolseley also went back to Crimean War; chap 8 Egypt and Sudan 1882-98, Egypt 1882-83, exped force under Wolseley was 2 Br infantry divs and 1 cavalry brigade, reinforced by some Indian Army, total strength 17,000; provision of 18% bed cover, 12% in field hosps and 6% in base hosps, 4$ in excess of regs, but ops in hottest period of year; therefore 2060 hosp beds; Carthage to be floating base hosp, dieted, filed hosps not; Courland 60 beds mainly transported Invalids overseas; base hosps 1 in Cyprus, 1 at Gozo near Malta, distant, but healthier; 318:
PMO Hanbury, with 163 MOs; comprehensive memo drawn up by Crawford re equipment, san, water, disease prevention, heatstroke and ophthalmia; body belts; waistcoats, gaiters; 320: Cyprus nixed; health excellent, 172 deaths of 7590 admissions to hosp, 74 deaths due to disease, annual adm rate of 583.3 of 1000 strength and mortality rate of 13.2; ophthalmia largest admissions, but strict cleanliness, segreg, separate towels, no loss of eyesight; (evidently fewer amps); 323: a mistake to site base hosps so far away, rather than in Egypt, so many slight cases transported to England; govt considered Med Dept did not perform well, committee of investigation; Morley chair, Crawford on and McCormac; 325: complaint of inattention and lack of discipline of AHC orderlies, steal food and wine, be drunk or absent; esp No. 2 Bearer Co, no practical tr in nursing existed before recruits posted to hosps; rec 3 month attendance at course, and supervision of nurses; nursing sisters shd be employed in all hosps of over 100 beds; better cooking, to est schools of cookery at Netley and Woolwich, inst certificate of proficiency; re org of AHC into 3 sections: nursing, stewards, general duty (so, not much on, but corroborates other sources on AHD)

Cantlie, Neil. *A History of the Army* part 2 (Sir Neil Cantlie 1892-1975), Lt Gen, mil surgeon was dir gen of Army Medical Services KCB, KBE, MC, HHB, FRCS, late FAMC 327 Eastern Sudan; 328: Nile exped force 1884-5, Following Mahdi’s success, decided to withdraw Eg garrisons from central Sudan, Gordon sent to Khartoum to carry out, but it surrounded by end of May 1884 and isolated by Mahdi’s forces; after much indecision Gladstone sent exped for relief, Wolseley, 10,000 Br and Egy troops, but not until Sept 1884 that Wolseley felt able to take the field, up Nile; 330: embarked 5 Nov 1884 at Gemai, 870 miles from Khartoum. Bowel diseases

346: India nurses, Loch; seems nothing on FN and Zulu War 422-24: SH Instructions for FN and Rules for Nurses; uses Hall diary at RAMC, 180: sarcastic on her packing up August 1856; has lots on reform after; SH’s commissions; 211: Netley, Smith dissatisfied with Ft Pitt as had been stationed there; 212: chose Southampton Water because of ships bringing invalids back; opted for detached blocks, re spread of sickness by effluvia, hence ventilation. “The germ theory was still unknown and it is said that Florence Nightingale never believed in it” [wrong on germ theory]; but committee ruled detached blocks imposs and alternative plan drawn up, approved by sec of state for war and queen; FN got memorial signed by doctors at Middlesex, a friendly MP sent to Panmure, he got com to reassemble, and JS added to it; new com decided on changes, and nurses’ quarters; queen laid stone May 1856, but her faction not defeated, March 1858 when walls already 5 ft up, Sh, JS Burrell and Galton tried to have it completed as a barrack and hosp constructed elsewhere; failed;
Smith insisted wards be ltd to 10 patients for disciplinary purposes, made it outmoded; FN’s fears that Netley unsuitable for invalids “had no foundation”; 215: new hosp at Woolwich to have own design; 219 FN got AMS under sec of st for war, not the dir gen; 4 profs chosen; Longmore...Aitken a fine scholar; Alexander Maclean prof of mil med; 31 March 1860 school actually came into being, official opened at Ft Pt, an unsuitable venue but no other choice poss, for invalids landed at Chatham; 222: SH spoke at opening, purpose of school was prevention of disease; 223: equipment problems, FN blamed dir gen, 10 students arrived; when Netley opened in 1863 invalids from abroad sent there instead of Chatham and AMS moved there; 225: in 1876 govt attempted to abolish the school, but sec of state forced to agree with schools’ case, profs wd have to be compensated if dismissed and wd cost govt to have work done elsewhere; FN played part; Parkes got school Eur and world reputation; 226: on de Grey’s retirement school’s difficulties reappeared, he had given personal attention, visited, and Jas Clark a personal friend, but duke of Cambridge supported and Lord Roberts; 229 Haffkine visited Netley when working at Pasteur Institute, on way to India to carry out first big human experiment on preventive inoculation against cholera; typhoid bacillus identified by Eberth in 1880 and micro-organism cultured in 1884; 1st inoc 1896

Chapter 15 The Physical Environment in Health Care 215-210: 15.1 Introduction FN most know for her “radical innovations in nursing care.” besides, was statistical, epidemiology and humanitarian, a hospital designer. Her NonH provided details recs on the proper physical env for civilian health-care insts. 215: recs remain valid even today. FN felt patients needed fresh air circulation for infection prevention and sunlight and windows with outside views to raise patient spirits and quicken healing.”


Carnegie, M. Elizabeth. *The Path We Tread: Blacks in Nursing*. 3rd ed. Sudbury MA: Jones & Bartlett 2000 [1995] much wrong on Seacole; small FN section 2 “A famous letter from Sir Sidney Herbert, secretary of state for war, to Florence Nightingale, printed in the *Daily News* on October 28, 1854, contained a plea for Nightingale to supervise the military hospitals in Turkey. (From Cook) 3: to Scutari. “Although there may have been other black nurses in the Crimean War, Mary Seacole is the only one documented in the literature.” has Seacole writing British govt “asking to be allowed to join Florence Nightingale in the Crimea as a nurse, but her request was denied.” “Mary Seacole sailed to England with
a letter of introduction to Nightingale, but her attempts to join the group of recruited nurses were blocked because she was black, even though she had personal credentials written by British army doctors.

4: “Mrs Sidney Herbert, wife of the secretary of war, petitioned on her behalf but the Crimean Fund would not reverse its decisions.” “Seacole still hoped to secure a position as an army nurse but when she met with Florence Nightingale, the response was the same, no vacancies. However, each night at 7:00, after having worked in her provisions store on the outskirts of the camp, she made her way to the hospital and worked as a volunteer side-by-side with Nightingale. Seacole attended not only the British casualties, but French, Sardinian and Russian soldiers as well. She saved the lives of countless soldiers, both those wounded and others with cholera, yellow fever, malaria, diarrhea, and a host of other ailments.”


4: How history progresses, very similar to FN’s views, possibility of progress, no guarantees; 7: widening horizons
15: fetishism of facts/documents
21 facts never pure,
22:
26: study the historian before the facts
29: 31: facts nothing? Integral enquiry; or Nietzsche
32: warns about
34: precarious, his as objective compilation of facts and as product of mind of historian; tension between\history not the slave or master of facts
71: first collect your facts, then interpret them;
78: quotes Burckhardt; history not factual but a series of accepted arguments;
warns of Eurocentric history; rues loss of language requirements; notes how little of other continents’
201: universal history

Carroll, Patricia. Nursing Leadership and Management: A Practical Guide. Thomson 2006. Seen Kelowna, no FN or Seacole in index


Cartwright, F.F. “Antiseptic Surgery.” F.N.L. Poynter, Medicine and Science in the 1860s. London: Wellcome Institute of the History of Medicine 1968:77-103. crack at FN, believed “that hospital diseases could be ended by surrounding the ward on all sides with clean air.” Notes on Hosps 1863:56. (88). argues hosp design did not affect disease. and pavilion inconvenient; 92: when Lister publ his first paper March 1867 his technique a method of wound dressing and nothing else, and not new, Lemaire, only 5 months later that addressed principles: The Antiseptic Principle in the Practice of Surgery, and his technique known as the carbolic treatment and outweighed antisepsis pr. Lancet 1867 ii, 353: Germany only country to accept Lister’s prs wholeheartedly; Lister claimed a 2/3 reduction in mortality from amputations, 40-45 % to 15T


FN: 154: need for reform recognized in 1820 by London physician Dr Gooch, unsuccessfully tried to introduce some kind of disciplinary training. 1833 Fliedner started school; 155: Fry visited Kai in 1840 and started her Institute of Nurses, ltd success, used in private nursing after some hosp tr; hosp wards “filthily dirty and teeming with vermin” many diseases not seen to England now, dt, typhus fever and pulmonary tb; surgical infection; FN for sisterhood; St John’s; Mary Jones started tr ; “Delegations form all over Europe studied her nursing methods throughout the next decade. The Russian Orthodox nursing sisterhoods, which did excellent work until the 1917 revolution, are said to have been instigated by a report of the del sent to KCH BY Tsar Alexander II. By 1866, St John’s nursed the two London teaching hospitals of King’s and Charing Cross, besides a hosp a Nottingham, the Leicester Inf and the well known English or Galignani Hosp in Paris.” N Fund; 158: voluntary hosps
hopelessly insufficient in number to care for sick; Parliament failed to implement full proposals of Chadwick, never envisaged aged and sick shd be in repressive workhouses. Some attempts made to alleviate sick paupers by outdoor relief and parish doctors, but most Bds of G found it cheaper and more convenient to admit them to a workhouse; in 1834 about 10,000 workh inmates needed medical care, to over 50,000 in 1861. Pressure on vol hosp beds increased the prob. Vol hosps became selective in patients, “By 1861 the majority of ‘general’ hosps wd not admit ch, the chronic sick, patients suffering from epilepsy, mental disorders, syphilis, advanced tb and skin diseases. The Fever Hosp, Islington, and two workhouses, were the only London insts willing to accept patients suffering from inf disease.” 1862 Rathbone; Liv: “They found the wards unspeakably disgusting, far worse than in any London vol hospital. Miss Jones intended to train pauper nurses as assistants, but they proved hopeless. The master had favoured a new system but found himself faced by a furious Miss Ones, who roundly blamed him for all deficiencies and demanded that he carry out her orders.” bd backed the master; FN got her to be more tactful; by 1888 all London infs under charge of a medical 160: supt; 161: 1905 another Royal commission, reported in 1909, minority report by Mrs Webb, George Lansbury and Prebendary H Russell Wakefield, “These urged a state medical service on the lines of the compulsory ins scheme which had been introduced by Bismarck and 162: had operated in Germany since 1883.” called into question the official attitude to poverty, not a crime but consequence of defective social and ec organization; 169: nurses proved their worth. “The doctors recognized their merits, asked for more tr nurses, demanded that the female wards be also placed under their charge.” Reduced cost of inf, despite all her improvements. Worked herself to death, 1868 typhus fever, caught it; martyrdom, paved way for general reform of wkh and its inf, or so it seemed. In 1865 James Wakley, owner of the Lancet, got investigation, admirable report, showed faults, also said “The state hospitals are in the workhouse wards,” first occasion on which anything in nature of a state hosp service acknowledged to exist. Villiers, “bill largely drafted by Miss Nightingale” but govt fell before had the opportunity; Hardy, omitted to consult Miss Nightingale, who angrily tried to arouse opposition.” Bill had many merits, aimed to remove all ch, lunatics and fever patients from two workhouses, made provisions for erection and improvement of inf bldgs and payment of staff from general rate, not the parish; only for metro, “is generally regarded as the first step towards s Nat Health Service.” Census of sick poor in 1896 showed of 58,550 sick, only 22,100 in separate infs, the large majority being in general workhouses. Exactly half the inf patients in 27 metro insts, on the whole well equipped and run; 169: ref to FN re inspiring Dunant NHS 172: of hi interest that the medical profession outlined the first plan, or conglomeration of plans, accepted as a basis for
discussion by the BMA in 1942. Passed res by a small margin that “a free medical service ought to be provided, for the whole community, but that anyone shd have the right to contract out.” Large majority voted against salaried employees; later in 1942 a group of younger doctors proposed a free health service for the whole pop as part of a comprehensive social security scheme. to be administered by a national corp 173: through regional bodies; CP Liberals, Labour, with Socialist Medical Assoc, evolved own schemes for a NHS; Labour plan of importance; fear of hospitals under local authorities; meanwhile Beveridge and committee of civil servants working on; famous report Dec 1942; as in educ system, free, but parents cd opt for fee paying; In Feb 1943 council of the BMA agreed to the scheme, 2 conditions, negotiate terms and conditions and fee paying patients not be debarred from hosp tr; Parl accepted the report; by end of Feb 1943 both govt and med prof had committed themselves to the pr of a NHS; min of health Ernest Brown, secret discussions; 174: Bevan, but had predecessors, Chadwick, John Simon, David Lloyd George, Lord Dawson of Penn, Lord Addison and others; also Thomas Beddoes, Robert Philip and Pendrill Varrier-Jones who first conceived curative, preventive and social medicine to be one and the same; Bevan not the architect, but the plan 28 years in the making; 175: but he succeeded where others failed; published white paper in March 1946, had thrown overboard many doctrinaire socialist ideas 176: hosps not to local authorities but regional boards; special tr for teaching hospitals bulk of preventive and social medicine remained in local authorities, maternity, child welfare, health visiting, home nursing, ambulances; compromises made

Carvel, John and Michael White. “New Chief Nursing Officer to Lead Superbug Fight.” Guardian (20 October 2004). John Reid, health sec, appt Chris Beasley, new chief nursing officer for England, gave resp for stepping up drive vs MRSA. Said contracting out of cleaning work by last Conservative govt. FN said how can provide that right thing always be done. HAI have affected 9% of patients for 50 years, difference now is danger posed by MRSA superbug.


Castagna, Maria Elena dirigente assistenza infermieristica. author of article on FN school in Rome.

Regina Elena. 151: first constituted of 13 English and 12 Italian pupils, Prof Bastionelli. Queen Helen’s Training School. article describes govt support of and lists focal points from Nightingale. 151: ceremony 31 marzo 1913 with people from ministry, med sc. matron Dorothy Snell (1868-1932) with pic. seems school lasted 1910-1975? or? initiative from 1900 from Marchesa Maria Maraini Guerrieri Gonzaga (figlia dei Marchese Carlo Guerrieri Gonzaga and sposa di Clemente Maraini) and Principessa Emily Pelham Clinton Doria Doria Pamphili (della più alta aristocrazia inglese and sposa dei principe omano Alfonso Doria)


Author Prog consultant, Okla. FN refs. Not UG, UT el only

Chapter 2 Historical Perspectives

22: sanctity of life, Christian
24: U.S. nursing Civil War. Caused more death and injury, paved way for African American nurses. 1914. Vietnam (the history if backwards!)

Unit 1. The Growth of Nursing.

26: symbol. Lamp from FN, injured soldiers, took 38 nurses “to try to improve the squalid, filthy conditions she found in the primitive Br field hospitals. As Nightingale and her nurses made their night rounds, caring for the wounded in unlit wards, they carried oil lamps to light the way....” Not Quite.

27: nursing pin. 28: FN at Kai. Cap
29: nursing leaders.

30: FN (1820-1910) “Universally regarded as the founder of modern nursing, FN dedicated her long life to improving health care and nursing standards.” highly ed for time; health care reformer. OM

“School of Nursing and Midwifery opened in 1860”
“Got permission to take 37 volunteer nurses into the battlefield area.”initially refused assistance. Admitted. In just 6 months “mortality rate dropped from 42 percent to 2 percent.” endn3, FN bio retired. [exagg]

Robb: first pres of Nurses Assoc, alumnae. Lillian Wald; Dock Loretta C. Ford 1920- founding nurse pract practice, NYC; New Brunswick training

Chapter 3 Theories and Models of Nursing.


Chambers’s English Dictionary has entry for Nightingale, “a kind of flannel scarf with sleeves, worn by invalids when sitting up in bed [From the famous Crimean hospital nurse, Florence Nightingale, born 1829 [incorrect].] 620. London: W. & R.


FN on Notes on N, picture of the home; Anna Jameson, Maurice and Mary Maurice and Queen’s college; Lectures for Ladies by Rev J.S. Brewer, “District Visiting”; 132 every woman a nurse, domestic role; refers to Notes on Nursing as a pamphlet, Martineau’s analysis of; FN wanted both, “deepening of responsibility thrust upon the housewife, the opening of work for middle-class women, both were confirmed by the mobile Nightingale” (140); “The act of writing Notes on Nursing constitutes Nightingale’s refusal to opt for the exclusive professionalism that was attractive to her in many moods: there at the end of the 1850s she simultaneously worked to ensure that nurses would be professionally trained and that ‘every woman is a nurse.’” [but the school not even open when she wrote it!]; ambidexterity of Nightingale (140), and call to action [yes]; cites Showalter

Chaska, Norma L., ed. The Nursing Profession: Tomorrow and Beyond. London: Sage 2001. 1014 pp. 3, 17 18 21 22 42 65 156 289 302 311 339 423 509 729 156 289 302 311 339 423 509 729 868-9. 3: lost are virtues of purpose, community, as FN espoused. 17: JoEllen Koerner, “Nightingale II: Nursing the new Millennium” 17-27. Nurses are scientists. And social action. Meaning of health and role of healing disciplines redefined as Vatican II redefined the Catholic church. “At the turn of the 20th cen, Florence Nightingale predicted that a new nursing paradigm would emerge by the year 2000 because of improvements in technology, pharmacology and medical science. She called for nurses with a social imagination and a social conscience” cites Dolan 1969 32, 43. (Dolan is an ed of NonN. 21: FN as model, God’s laws and stats, mystical experience of good. David Bohm saw her example as a form of ‘process science’ 1990 xvii. Wholeness and the Implicate Order. Anne J. Davis “Ethics in International Nursing” 65-. 65: “Ethics has been a central concern of modern nursing since the time of Florence Nightingale.” Good on nursing ed. 287 Peggy L. Chinn, “Toward a Theory of Nursing Art” 289: taught using excerpts from NoN, music 302: Jean M. Watson “Postmodern Nursing and Beyond” nursing covenant tied to FN’s assumptions about accessing the natural healer within. Order and discipline. Nice
integration of FN’s views with those of other theorists. 423. “Martita G. Titler, “Research Utilization and Evidence-Based Practice.” “Research utilization began with Florence Nightingale who used data to change practices that contributed to high mortality rates.” 628 “empowering nurses. Use repetition. 868: Donna L. Boland, “The Future of Nursing Education” 867-. 868: cites Margaret Newman that FN’s vision equated knowledge of nursing with knowledge of health (in another NonN). This books uses FN creatively, slips in good points.


Table 1-1 Important Events in the Evolution of Nursing
1751 Penn Hosp first hosp est in America
1851 Florence Nightingale (1820-1910) attends Kaiserwerth to train as a nurse [NOT QUITE]
1854 The outbreak of the Crimean War: Florence Nightingale transforms the image of nursing; Mary Seacole nursed with
Nightingale in the war
1861 The US Civil War begins
1872 First schools of nursing open in the US...
9: FN: positive, Cr War.
9: FN 3 month tr prog at the Institute of Deaconesses in Kai. “In 1854 she began training nurses at the Harley Street Nursing Home and also served as superintendent of nurses at King’s College Hospital in London (Kalisch and Kalisch 1995). NO. Cr War. SH wrote, FN accepted
10: okay on bad conditions, no beds, lice, maggots. And resistance to FN by doctors; wives of soldiers hired to manage and operate laundry. FN assigned soldiers to make repairs and clean up the building. “Weeks later she initiated social services, reading classes and even est coffeehouses for soldiers to enjoy music and recreation (Kelly and Joel 1996).

“Nightingale worked long, hard hours to care for these soldiers. She spent up to 20 hours each day caring for wounds, comforting soldiers, assisting in surgery, directing staff and keeping records. Nightingale introduced principles of asepsis and infection control, a system for transcribing doctor’s orders and a procedure to maintain patient records. By the end of the Crimean War, Nightingale had trained as many as 125 nurses to care for the wounded and ill soldiers (Dolan 1978).

Nightingale is credited for using public health principles and statistical methods to advocate improved health conditions for Br soldiers. Through carefully kept stats, Nightingale was able to document that the soldiers’ death rate decreased from 42 percent to 2 percent as a result of healthcare reforms that emphasized sanitary conditions. Because of her remarkable work in using statistics to demonstrate cause and effect and improve the health of Br soldiers, Nightingale is honored for her contributions to nursing research (Swanson and Nies 1997).”

Demonstrated also pol activist; got Crim fever from “visiting the frontlines and hospitals in Balaclava” “taken to the Castle hospital. There she recd intensive care from the doctors and nurses she trained. NO Mrs Roberts. She remained in poor condition for several weeks. Soldiers wept.... recovered.
11: first tr school. By 1873 in Us; Seacole 11: in back

Chiguer, Linda and Inborr, Sara. dissertation, Swedish on handwashing.

1-6 FN 34-5, 45-46 ISBN: 0801679478
1: Nursing’s pattern of knowing. “Although empiric knowledge is valuable for nursing practice, each of the patterns of knowing is essential. Each is a distinct aspect of the whole, every pattern makes a contribution to the whole, and each is equally valid.”
Diagram empirics, ethics, personal, esthetics
2: Since Nightingale first established formal education for nurses, nursing has depended on formal knowledge as a basis for practice. The type of knowledge used in nursing has changed over the decades since Nightingale. Before 1950, nursing was viewed as a technical art that emphasized principles and procedures coupled with a spirit of unselfish devotion. By the 1950s the phrase ‘nursing science’ began to appear in the nursing literature. Today nursing theory and research are seen as an important means of achieving sc kn for nursing practice.... How do we know? Various ways of knowing...

45 Theoretic ideas about society and environment Table 3.3
FN 1860 Environment is the central concept. It is viewed as all external conditions and influences affecting life and the dev of the organism. The major emphasis is on warmth, effluvia (odors), noise and light.
Joyce Travelbee 1966.
Myra Levine 1967
Sister Callista Roy 1976. Env constantly interacts with the individual and determines, in part, adaptation level. Stimula originate in the env.

46:

Hall, Eleanor Frances. Florence Nightingale. London: S.P.C.K. 1920. 84 pp. Ded to Elsie Maud Inglis, whose Crimea was Serbia. Nice bio, debt to Cook. V: “grave, grey Lady – as unheeding of the flood of traffic flowing round her feet as she was of the streams of melting snow between the blocks of the hospitals of Scutari” still absorbed face, absurd trailing skirts, “beloved Master” beside her. Statues. Legend in her lifetime. Afterlife. Waterloo Place vi: “I have tried to show her as the Patient Preparer, the Woman in the Gap, the Public Idol, the first pre-YMCA champion of the soldier’s rights to recreation vii: the Unrelenting Fellow worker, the Sanitary reformer, the ‘Passionate Statistician’ the Founder of Scientific Nursing, the Inspirer of the Geneva Convention, the Plead for the Poor Law Victims at Home, the Friend of the Indian Peasant and not least, the Loving Heart, the Adored Friend and the humble self-analysing self-mortifying Mystic.
Chap 5: reform at home (2) sick nursing 6 reform in India, sanitary and political; 7 lamp within her 1 Unconscious preparation; 2 Conscious preparation; 3 the lady with the lamp; voice In the press... 4 reform at home (1) health of the Army; simplicity in relations to nurses, God
56: Poor Law 57: thinks FN wd consider the episode one of the most exciting fights of her life’s campaign, Whigs and Tories,
wallowed in stats; HB Farnall
61: registration, Princess Christian, royal charter, standardised exams; 82: never lost a friend except by circumstances


Christianson, Scott. 100 Diagrams That Changed the World: From the Earliest Cave Paintings to the Innovation of the Ipod. New York: Plume 2012. Includes Priestley, A New Chart of History (rectangular), Playfair exports and imports, and FN colour chart, with exaggerated claim as “first”

Chung, King-Tom, “Florence Nightingale (1820-1910) Founder of Modern Nursing,” Women Pioneers of Medical Research: Biographies of 25 Outstanding Scientists. Jefferson NC: McFarland 2010 16-23. [exagg claim] Cites 3 sources only Cohen, Monteiro and Pickering! Refs to “Florence” not bad on Cr War, and its predating germ theory, but exaggerated statement on deaths, 60% per annum from disease alone during the first months of Cr campaign (19), FN changed, and ridiculous on p 20: “She banned all other women from the wards” and seems to give her sole credit for decline in death rate! (20); after war, Farr, Notes on Matters affecting, sub-coms, hosp stats, model hosp stat form; 22: form never put into use, “overly complex” idiosyncratic system, of Dr Farr, strongly opposed by many pathologists; infl of Quetelet; wrong also 22: “Nightingale never thought that women should seek to be physicians”; 23: “Even though Nightingale at first had no knowledge of microbiology, her endeavors were precisely an application of microbiology to human welfare.” her san measures are fundamental requirements for any medical facility.
“Microbiological knowledge is mandatory for all nurses in developed countries. Florence Nightingale’s vision has influenced the nature of modern health care.” yes.


Clark-Kennedy, A.E. *The London: A Study in the Voluntary Hospital System*. 2 vols. London: Pitman Medical Pub 1963. vol 2 has FN and Luckes, only 24 when appointed matron in 1881, went ahead with prelim training, Tredegar House; has chap on Luckes 2: 94-126; 2:105 Yatman case. When Luckes matron 11-10 years, Lord Sandhurst moved for a select com of House of Lords to inquire into the work of the metro hosps, inc a Mr Yatman whose da was a prob under L; and Bedford Fenwick; (rivalry between Luckes and Manson, Mrs BF) 2:106 Yatman claimed had to resign on health breakdown, from bad treatment, overworked, underfed, blood poisoning due to sewer gas (makes Luckes look very bad); 2:109 Luckes gave evidence 4 days, once for entire day; (Luckes still only 34) 2:94: resignation of Miss Swift, matron for 12 years in 1879; new matron, a night sister, appointed; da of a country gent in Gloucestershire, visited sick in parish (2:94) completed training at Westminster under Merryweather, was night sister for a few months, then lady supt at Pendlebury Ch’s Hosp Manchester (95); training for 2 years; private nurses; scandal, Lords London a death trap for nurses; Pall Mall Gazette: Does the London Hosp sweat its nurses? Panmure in Lords (Dalhousie) described Woolwich Hosp as “all glass and glare” and only a fraction of the acc at his own hosp at Netley (196); E.J. Whitelaw [prob John Sutherland] gave Cl-K advice on what to see in Paris (143); FN letters in publett2; 141 is prob Sutherland to Clark-Kennedy March 1856, in response to his question as to how to proceed; so, it seems that Sutherland and he in corr; 143: seems another Sutherland letter to Clark-Kennedy on how to proceed (lots of mistakes in) refers to FN will advise; 143 FN to Whitelaw (prob Sutherland): There are two new convalescent homes in Paris, of which the plans have not yet been seen in England, one at Vincennes for men and one for women at St Germain. If Colonel Kennedy would see them, and bring home the following information, it would be of great use: the plans of each floor, the length, height and breadth of the wards with number of inmates, the kind of attendants and their number, his impression of the freshness of the wards and halls, the stage at which patients are admitted and their average length of stay, and any published plans and reports, although these generally tell little compared with an intelligent personal observation. M Ballel [Husson] 46 Boulevard de l’Hôpital, will give Colonel Kennedy the entrée to them if he will mention Miss Nightingale’s name. M Ballel [Husson] was for forty years chef de la première division in the Assistance Publique. He is reckoned one of the ablest administrators. (All the civil hospitals in France are, as Colonel Kennedy is perhaps aware, under the Assistance Publique.) A point, too, which could only be brought out by personal inquiry is: does the number of patients in each ward (said to be thirty-one) answer practically or does the administration prefer any other number? Are patients only admitted to convalescent hospitals when they want no nursing and, if so, what is done to
nursing if increased illness should occur? Any expense in preparing plans (according to scale) Miss N “would be glad to incur.” (No date given!)

144: FN to Clark-Kennedy April 23 []; 147: Clark Kennedy asked by SH to chair com on regs, on which Sutherland, Robertson, Mapleton, Fyffe; 149 SH and Woolwich Hosp old Woolwich inspected by B and HI, built for 300 patients, there were then 579 patients crowded into and in huts; SH ordered rebuilding on a new site, later the Herbert Hosp, for 620, 10% of garrison, pavilion; old hosp to be converted in meantime into gen hosp with female nurses; Clark Kennedy wrote FN re Col Evelyn (in RAMC, here paraphrased); 152 letters (Galton); Kennedy died Alexandria Dec 18 1867, at 50, of acute dysentery; 161 Clark Kennedy appt for volunteers, permanent transport corps Military Train, was QMG where? 167: Trent affair, 2 battalions of the Mil Train sent, 12,000 men, he with 1862; 171: war did not come, Canada not invaded


Clark-Kennedy, A.E. *A Victorian Soldier: His Life and Times*. Cambridge: John Bluff (privately printed) 1980. NAM 140 Clark Kennedy appointed QMG; royal commission, 141 Cl K began to take interest in hosps. Whitelaw [mis print for Sutherland] gave advice, RMO Boudon [wrong], conv hosp nr Vincennes, and he forwarded not to FN, she replied to Whitelaw [no]. chap 10 Aldershot, Hospitals and Miss Nightingale. Before war Prince Albert got govt to purchase 10,0-00 acres of heath nr Aldershot for div training, 1000 huts put up. Cl-K fresh from Crimea appalled by what saw, sanitation lousy, ordered to make official inspection with Dr Gibson dept insp of hosps, horrible 1856; 140: same month Cl K appointed QMG FN back from Crimea (August) to Balmoral, he got interested in hosps;

Clarke, Alison. “*Born to a Changing World: Childbirth in Nineteenth-Century New Zealand*. Wellington NZ: Bridget Williams Books 2012 41: “Miss E Ward, newly arrived from England, could boast prestigious modern qualifications when she advertised in Auckland in 1870. She was a ‘certificated midwife and monthly nurse, trained in the F.N. W. King’s college Hospital, London, with first-class reference, of seven years’ practice.” Florence Nightingale Wing

Clements, Paul T. PhD APRN, and Averill, Jennifer B. PhD, RN
“Finding Patterns of Knowing in the work of Florence Nightingale.” Nursing Outlook 54,5 (2006):268-74. Cites multiple patterns of knowing, identified by Barbara Carper 1978: empirics, aesthetics, ethics and personal knowing, as well as sociopolitical and unknowing; how she applied; poss allies. Old Dominion, and New Mexico

Clements, Paul T. PhD APRN, and Averill, Jennifer B. PhD, RN
“Finding Patterns of Knowing in the work of Florence Nightingale.” Nursing Outlook 54,5 (2006):268-74. Cites multiple patterns of knowing, identified by Barbara Carper 1978: empirics, aesthetics, ethics and personal knowing, as well as sociopolitical and unknowing; how she applied; Old Dominion, and New Mexico; goes over the 4 ways, uses WS and O'Malley, NonN, Cassandra, Sugg (Calabria, Stark), not CW, Cook, no later FN writing, nothing on science; 269: “Congruent with the critical qu for the empirical pattern of knowing, ‘what is it and how does it work?’ Nightingale established a foundation of facts and actions that remain critical... “While at Scutari she wrote Notes on Matters affecting end20 (cites Gorrell the Story of Florence Nightingale 2000, a children’s book! “almost a thousand pages, bolstered with tables and flurries of stats. End20: “this article seeks to extend the scholarly discussion by exploring the possibility that Florence Nightingale also recognized and engaged all of these patterns in her practice and writing over a century before formally identified by Carper and other scholars. As such, this would suggest support for the patterns of knowing as inherent foundational facets and underpinnings of the nursing profession, offering holistic insight and guidance to educators, researchers and practitioner with impact care to clients, families and communities. FN and knowing went to workhouses etc, thought cd improve conditions for poor, empirics “defined as the science of nursing ’based on the assumption that what is known is accessible through the senses: seeing, touching and hearing.” end7, cites Chinn; re her beliefs cites 18,NonN
273: “Although not definitively viewed as a nurse theorist, Nightingale contributed to the values that nursing has placed on theory development and implementation into practice. Her practice and writing clearly positioned nursing within a social and health context distinct from medicine.” end7 cites Chinn
273: “The context of unknowing is apparent in her comments, as well.” skeptics may posit that N and nurses only functioning in mode of empirical sc because the ways of knowing were only recently articulated by Carper. But, “multiple patterns of knowing were brought to bear during her practice, research and social reform efforts.” hardly!
274: ends “Perhaps the Lady with the Lamp would support the
multiple patterns of knowing as a cornerstone of nursing experience." good grief

Clive, Mary, ed. Caroline Clive From her Diary. London: Bodley Head 1949 2 July 1846, p 270 re Bracebridge and Shakespeare, p 250 re visit to Nightingales at Lea Hurst


Coakley, Mary Lewis. “A One-woman Revolution.” JCN 6,1 (1989):20-25 first names her, and Flo, “Fanny and William” (22) men all get surnames and titles, 23: “the cardinal” 22: 21: she “revolutionized hospital method sin England - and indeed through the world. During the Crimean War, she served in the first field hospital ever run and tended by women.” NO “She established schools for training nurses and she introduced procedures that have been benefiting people ever since. She also wrote reference books to guide future generations.” “Moreover she reversed the British govt’s policy toward India.” Behind the scenes sec of war, “setting up a system of health adm that was without precedent.” Insisted that agric dev, be priority; suffering challenged her, “She even set up a system for extending nursing cafe to the poor and the criminal underworld in the slums of English cities.” On [exagg] stamina “When she was young, she sometimes worked twenty-two out of twenty-four hours.” NO, genius, cd assimilate info, retain it NO, she wrote it up; “Dr Farr said that Florence found stats ‘more enlivening than a novel.’” 24: has crown prince of Prussia asking her for advice; and Queen Victoria a friend!; 24: friend said she was virtually the sec of state for 5 years; but positive on FN, she “revolutionized


FN 9: Annie Swynnerton ARA (1844-1933) an artist signatory of the Declaration in Favour of Women’s Suffrage of 1889, painted FN and Fawcett.
39: Watts unfinished portrait of FN 1864, due to her illness FN nurse’s uniform of Crimean War depicted on triptych by Ernestine Mills’s “Peace, war and famine” (but not, it has blue, and red cross on);
"No doubt the selfless heroism of self-appointed Crimea front-line nurse Mary Seacole also was celebrated in the New Dawn pantheon of great women. Whilst the high standard of nursing care advocated by Florence Nightingale, and advances in medical science, prolonged life in the twentieth century, ironically Fate was to even the score with unsurpassed carnage in two World Wars."

Codman, Ernest Amory (1869-1940) possibility of standardizing care, Spiegelhalter, Boston doctor, cards for patient outcome, founder of "patient outcomes management"; Mass General, Harvard; A Study in Hospital Efficiency as demonstrated by the Case Report of the First Five Years of a Private Hospital. Boston: privately printed 1916. Also 1995. MhosC records errors in cases; founder of American College of Surgeons and its hospital standardization program; "Codman’s Exercises" and public health pioneer;

Cohen, Susan. “Miss Loane, Florence Nightingale and District Nursing in Late Victorian Britain.” Nursing History Review. 5 (1997):83-103. author at Middlesex Univ Sch of Hi and Politics


164: Br govt sent San Commission, with power to act, more than FN had. They cleaned latrines, etc. "A month later, the hospital death rate had dropped sharply, all owing to accurate calculations Nightingale had systematically collected. And the mortality continued to fall: later she wrote that during the first seven months of the campaign (September 1854 through March 1855), mortality among the troops was 60 percent year from disease alone, a rate exceeding that in London during the Great
Plague. But during the last six months of the war (April through September 1855), deaths among the troops dropped to only two-thirds of that among the troops at home. end 12 Cook 1:316, which does not mention 60%].... so 164: “Neither the causes of disease, or the way sanitation prevented it, were understood in the 1850s, but the evidence of the 165: numbers was clear and indisputable. The health of Br soldiers in hospitals depended on clean water and fresh air. Ergo, early Crimean mortality rates had been preventable and thousands of British soldiers now lay ‘in their forgotten graves’ who should not have died. Without reform, history would repeat itself.” FN recognized all over, “all corners of the Empire cried out for reform.”

Cohen, I. Bernard (1914-2003) (Victor S. Thomas Prof of history of science, founded Dept of Hi of Sc at Harvard) “Florence Nightingale.” Scientific American. 246 (March 1984):128-33, 136-37. 133: learned from Quetelet. “At Scutari, apart from the important sanitary reforms she instituted, she also systematized the chaotic record-keeping practices, until then even the number of deaths was not known with accuracy. When she returned to England in 1856, she met William Farr, a physician and professional statistician. Under Farr’s guidance, Nightingale soon recognized the potential of the statistics she had gathered at Scutari and of medical statistics in general, as a tool for improving medical care in military and civilian hospitals.” [but did not keep stats] ...”“In January, 1855, the mortality in all British hospitals in Turkey and the Crimea, measured in relation to the entire army in the Crimea but not including men killed in action, peaked at an annual rate of 1,174 per 1000. Of this number, 1023 deaths per 1000 were attributable to ‘zymotic’ disease (a category introduced by Farr including epidemic, endemic and contagious disease). This means that.... [no ref] Nightingale’s various methods of calculating mortality dramatized both the impact of disease and the effects of improved sanitary conditions. Calculated on an annual basis as a percentage of the patient pop, the death rate at the Scutari hospital reached an incredible 415 percent in February 1855. In March, however, Nightingale’s sanitary reforms began to be implemented and mortality among the patients declined precipitously. By the end of the war, according to Nightingale, the death rate among sick Br soldiers in Turkey was ‘not much more’ than it was among healthy soldiers in England, even more remarkable, the mortality among all British troops in the Crimea was ‘two thirds only of what it [was] among our troops at home.’” comparison.... [no ref given, 415 percent; FN’s reference to different counts of deaths is clearly noted as different sources among the official stats, 133: pioneer at graphical presentation; “At Scutari, apart from the important sanitary reforms she instituted, she also systematized the chaotic record-keeping practices.” The point...
that “until then even the number of deaths was not known with accuracy,” is not right either. Nightingale pointed out, after the war, that there were numerous “discordant” methods of reporting deaths, from the adjutant general’s burial rolls, to the medical officers’ reports. Rates could be stated per “sick population,” the mean of hospital numbers per month, or per “cases treated.” She gave one table in Answers to Written Questions with six columns of death figures. Cohen is misleading, as perhaps the original table was, in noting an “incredible” rate of 415 percent deaths in February, 1855. Ibid. (answer to Question 23.)


Collins, Nick. “Florence Nightingale Approach ‘Could Help Fight Infection in Modern Hospitals.’” The Telegraph 20 February 2012. [DATE 28 June 2016] By Science corr in Vancouver. Cites Dr Jack Gilbert, head of an international project to categorise all known bugs, said modern hospitals cd lower rates of infection by being slightly less sterile; open windows and allow fresh air in, and boost populations of “good bacteria” help to keep harmful bug pops under control, cites NonN, at AAAS. Jack Gilbert, U of Chicago. Microbial biologist


Concannon, Helen, The Irish Sisters of Mercy in the Crimean War. Dublin: Irish Messenger 1950. 27 pp; p 13. (Mrs Thomas Concannon)

Connon, John R. “When Florence Nightingale’s Lover Lived and Preached in Elora, Ont.” short article at end of “The Love Story of Florence Nightingale and John Smithurst”


36: Raglan expelled the Greeks. Thought would be pro-Russian. Locals left, Tartars fled. Or were diseased and died

37: describes breakdown FN faced when arrived
76: FN’s “far reaching and beneficial attentions”
148: “With the passage of time, the Crimean War is seen as more and more to be a turning point in military history. For the first time the Army was seen as something more than a body of trained fighting men. It needed properly organized services. The re-organization of the medical services as a result of Florence Nightingale’s activities is the best known” also LTC, which fathered the Royal Corps of Transport, and Army Works Corps.

Cook, G.C. “What can the Third World learn from the Health Improvements of Victorian Britain?” Postgraduate Medical Journal 81(2005):763-64. brief ref to FN re reform of hospital design, ventilation, point otherwise is that third world countries can learn from this earlier experience

Cook, G.C. Victorian Incurables: A History of the Royal Hospital for Neuro-Disability, Putney. Spennymoor Durham, Memoir Club 2004. Wellcome, has 7 FN letters, copies of which provided by the author, Dr Gordon Cook, retired professor at Hospital for Hygiene and Tropical Medicine, has chap on FN’s advice on hosp at Coulsdon Surrey 1861; Andrew the sec, south of Croydon; Andrew wrote to FN (90), also to T. Roger Smith (1830-1903) hosp architect; Reed plan for hosp in country, wd have appealed to FN; FN wrote back and Andrew replied again; bd of mgt agreed on 1000 cub ft for bedroom, and 400 for day room for each patient, Jan 1862 letter from HBC said FN willing to ex rough drawings (96); 106: bd again wanted opinion of FN; so it seems FN consulted; 115: Melrose Hall becomes home of RHI 1863; 1864 female patients moved to Melrose Hall from Putney; 1867; great extension 1879-81

Cook, Rosemary. “The Murder of the ‘White Queen,’” The Bulletin of the UK Association for the History of Nursing 1,1 (March 2012):21-23. On “Florence Nightingale Shore.” relative and goddaughter of FN; parents separated and FNS left to be governess in China, on return to RIE 1894; then Rotunda,... Mabel Rogers, friends for 25 years. Called the “white queen” by soldiers in WW I.

Cook, G.C. and A.J. Webb, “Reactions from the Medical and Nursing Professions to Nightingale’s ‘Reform(s)’ of Nurse Training in the late 19th Century.” PMJ online. Wellcome Trust Centre for the History of Medicine at UCL, London. 96: in light of comments of FN and T Roger Smith com rec for 1000 cubic ft for bedroom and 400 for dayroom accom per patient; and HBC advised FN wd see drawings of selected plan

381. “Nursing and Nurse Training at the Dreadnought and ADH:
Establishment of a School on Nightingale Lines,” FN infl on Guy’s. Cook has mixed up HV and Capt Edmund Verney advice on merchant seamen. SHS began tr nurses in 1877
346: 10 South Street [printed address]
   Park Lane W.
   Dec 17th 1901
Dear Madam
    Many thanks for your very kind letter. I am delighted that Bertha Sutcliffe has passed for South Africa. And I trust, God willing, that she may fulfil her duties as nurse should do. It is very kind of you to ask to see me--and I shall be most happy. I am sorry that I am engaged all this week, but I could see you next Monday if that would be quite convenient to you, at five (5) o’clock.
    With kind regards
    yours very faithfully
    Florence Nightingale
Miss Alice Mary Hall


128: “The woman credited with the creation of the nursing profession was Florence Nightingale. She subscribed firmly to the doctrine of ‘separate spheres’ stating that ‘nursing and medicine must never be mixed up’ cited in Rafferty [but no und of state of nursing then, and dig at “credited”] [is in 1869 Acland letter 8:50; and quoted in Rafferty]
129: “If Florence Nightingale were carrying her lamp through the corridors of the NHS today she would almost certainly be searching for the people in charge” (Griffiths report 1983 12).
   “Ironically, Griffiths used the Nightingale myth to justify axing nursing managers and putting nurses under the control of ‘general’ managers. More recently, Nightingale’s ‘passion’ for statistics has been highlighted to claim her as a founder of the ‘evidence-based practice’ movement” cites LM 2001. But seems not to know FN wanted nurse managers and no understanding of what she did for NHS.
   “If the story of Nightingale is riven with contradictions then so also is the dev of nursing from its earliest origins to the present day.” Nursing as women’s work.
Get 127-9.

Lt Gen Balthasar Otto von Tunzelmann was married to Baroness Sophie von Bülow, so contact with Bunsens in England.


Cooper, John. *Fort Pitt: Some Notes on the History of a Napoleonic Fort, Military Hospital and Technical School*. Maidstone Kent: Kent County Library 1976 [1974]. Pamphlet (my copy has no page numbers on it) building started 1805 because of threat of Napoleonic invasion, but became hospital in 1814 with exile of Napoleon, casualties from Nap Wars. Ch 3 The Hospital first director 1814 set high medical standards, “He insisted...that a mortuary be built and a full autopsy be carried out on all deceased patients.” Ch 4 The Crimean War, remembered for charge and FN, royal visits; Ch 5 Army Medical School “Nightingale was certainly an extraordinary woman. Although she had boundless sympathy for sick and wounded men, she was far from the meek and gentle creature that history would have us believe. She worked in a world openly dominated by men and in order to succeed her greatest strength was a heart as cold and as unsentimental as steel.” got AMS reformed, red tape. “She was determined that the health and diet of the private soldier should receive as much attention in peace as well as war.” got stats, went first to Fort Pitt Nov 1856 on a fact finding mission; named people, but in 1863 transferred to new Victoria Hospital at Netley; first professor of surgery Longmore, Parkes was prof of hygiene, also profs of pathology and military medicine; but Panmure slow, did not confirm FN’s appointments, his successor made appointments, school a hoax when students arrived, bare walls, no instruments.

Cope, Zachary. *A Hundred Years of Nursing at St Mary’s Hospital, Paddington*. London: Heinemann 1955. refs to where matrons installed. chap 4 birth of the Tr School, Williams; FN testimonial for; has letters not in CW; covers problems in School: Miss Rachel Williams (Matron) First Period (1876-1879) 55-72 and “Discord: Miss Rachel Williams (Matron) Second Period 1879-1885 73-89; complications re salary, £225 offered; FN a life governor of St Mary’s; 16” What is perhaps more important is that these apostles of the Nightingale creed kept in close communication with their Mentor and asked for her advice on every subject of importance. In this way was the Nightingale tradition fostered and strengthened, and owing to this that tradition persisted for more than fifty years.” only in last 10-15 years any appreciable modification in strict disciples (i.e. before 1955); 1905-14 many private members’ bills to get a nurses reg bill passed, none successful; 10: the “Nursing Sisters” were Fry’s; 36: St Mary’s Padd opened doors for patients June 1851, year of Great Exhibition; 21 Nov 1856 FN rec to next quarterly bd
to elect FN as hon life governor; no evidence attended; W-S says visited wards November 1856; corr with Alicia Wright; matron 1851, first matron, younger da of Dr Wright of Greenwich Hosp, prob no training; she age forty, retired 1876 at age 65; rules gave full board, any acceptance of gift of patient reason for immed dismissal; possibly used for brief training of Mary Stanley group; when advertised for new matron, and decision to start tr school (47747 for ms); 45: Alicia Wright fell seriously ill, substitute lady visitor Mrs Ellen Anderson in her illness; decision for distinctive uniform; 48: approach of A.J. Lawrence, chair pro tem of London Training School for Nurses, to inquire if wd allow probs to be trained there;

Cope, Zachary. “The Early History of District Nursing.” Nursing Times (12 August 1955):884-87. SA/QNI/p.10/7 death of Mrs Rathbone 27 May 1859, nurse Mary Robinson, visited sick poor in own homes. Rathbone hon sec to tr school; Manchester and Birmingham each founded a district nursing assoc, London only in 1868 with the East London Nursing Society; 1868 Ms Ranyard started nursing scheme in addition to Bible Mission, which had started in 1857; Ranyard nurses had only 3 months’ tr at first, in 1893 lengthened to 1 year, in 1901 to 2 year and 1907 to 3 years; at Liverpool initial tr 1 year as at St T

15: Snow and contagion, fallacy of cholera conveyed by water, Snow “perfectly right 16: JS and she “could ot or would not accept his demonstration as proof” 1861.... but later
20: “At the time when her Notes on Hospitals was published no one was able to explain the frequency of hospital gangrene and the almost constant suppuration in wounds. Lister’s classical paper which paved he way for the banishment of sepsis did not appear until 1867, and the views he promulgated, were, so far as one can gather from her writings, never adopted by her.” Lawson Tait...
27: Sympathy letter; has “most wonderful of all, a man without a soul like Undine --all these elderly men.”
48: on J Hall (very keen on him)
28: JS, No soul (uses WS source)
54: Hall and Bridgeman; Hall replied to FN’s complaaint
103: says Farr destroyed her letters at her request, he told in late 1859, via Mrs Smith
104: FN told Farr SH wanted him to write up his new Army Med Sch in Lancet, Farr replied next day had sent off the article, with an additional sentence or two;
104: re her paper at Berlin on surgical outcomes.
Lawson Tait admired her character and agreed with her views in the main, which, until pub of Lister’s famous paper in the Lancet in 1867 were not easy to counter;
106: Farr made little impression on her. She too noncompromising;
but Cope gives no sources for his statements
148: re Johns Hopkins. No record at JH Hosp of FN pages sent to
Billings; BL said their copy of the book containing the 5 plans
for the JH Hosp destroyed by enemy action in WW II
90: on directors general of AMD
chapter 14 on FN’s invalidity
158: “she had no serious organic disease.” but “highly strung”
160: her “breakdown”

Cope, Zachary review, A Bio-bibliography of Florence Nightingale,
compiled by the late W.J. Bishop and completed by Sue Goldie.
got her antipathy to the idea that “germs” were the cause of
disease from Sutherland, so her views in Notes on Nursing
misleading and date the book. “Strange to say there is no
evidence that Miss Nightingale ever accepted any modern view on
infection, though before the end of the nineteenth century it had
been accepted everywhere. Hence it was that when a fatal outbreak
of puerperal fever broke out in the newly built and well-
ventilated St Thomas’s Hospital, equipped with the latest
sanitary devices, Miss Nightingale was broken-hearted and could
not imagine how it could have occurred. Though she had written on
puerperal fever and obtained info....” did not know about
Semmelweis; her views on cholera were also formed by Dr
Sutherland’s teaching for he even wrote to her concerning ‘Snow’s
fallacy about the destruction of the propagating fluid of
cholera,’ and she did her best to spread that misleading doctrine
in India.” 92; Cope adds a new charge, of an outbreak of
puerperal fever at St Thomas’ Hospital, although

Cope, Zachary. “John Shaw Billings, Florence Nightingale and the
Johns Hopkins Hospital,” Medical History: News, Notes and Queries
1,4 (October 1957): 367-68.

Cope, Zachary. Six Disciples of Florence Nightingale. London:
Pitman Medical 1961. On A. Jones, Osburn, Rebecca Strong,
Pringle, Williams, Alice Fisher [sec]
-- “Miss Florence Nightingale and the Doctors.” President’s
Address to Royal Society of Medicine, Proceedings of the Royal
Society of Medicine 1,49 (November 1956):907-14

Cordery, Cheryl. “Another Victorian Legacy: Florence Nightingale,
Miasmic Theory and Nursing Practice.” New Countries and Old
Medicine, ed. Linda Bryder and Derek A. Dow. Auckland NZ:
299: Contagion was the basis of what later became germ theory—a
theory which Florence Nightingale, and many other social
reformers, found unpalatable because it conflicted with their
social agenda. Nightingale had still not accepted germ theory at
the time of her death in 1910 despite its widespread acceptance,
particularly among the medical profession. (cites Poovey on); 300
FN did not take to Listerian ways, “she attacked ‘the germ hypothesis’”. “The benefits of the use of Listerian methods were not really evident until the mid 1880s which coincided with the introduction of germ theory.” [and when FN accepted germ theory]; 302 “Her Notes on Nursing, first published in 1859, was a prescription for the nursing of middle class (moral) patients in their homes. However, her perception of the (im)morality of the poorer classes is obvious in her writings about the establishment of military hospitals where both patient (male) and nurse (female) are seen as sexual time bombs waiting to explode. 302 cites Poovey, “Nightingale was still very influential in determining nursing’s place in the nineteenth century and, as Mary Poovey argues, in supporting the illusion about her own role in nursing’s development.” FN preoccupation with immorality of lower classes, to “both monitor and effectively punish indiscretions by staff and patients”, [no examples] “To assist in these endeavours she advocated the use of wards designed around the modified pavilion plan—the panopticon.” (cites Foucault) 303: “Nightingale could not readily move away from miasmic theory because it put into question too many of her other beliefs—beliefs imbedded in miasmic theory, in class relations, and to a lesser extent, in gender relations” (cites Poovey again). no FN citations except Subsidiary Notes 1858. good grief, one of the worst.


Coren, Stanley. The Pawprints of History: Dogs and the Course of Human Events. New York: Free Press 2002. (UBC psychologist) 12-13 on FN, Cap, and shepherd Roger, at Matlock; working sheepdog, to be destroyed because hit by stones by boys, shepherd to hang him, but clergyman and FN went by; 13: “the clergyman examined the dog’s leg. He explained to the young woman that the injury was not a break in the bone, as Roger had assumed, but merely a bad bruise. He predicted that hot compresses would cure the dog in a few days. Then, under his direction, Florence tore up some old flannel for bandages, lit the fire...boiled some water. She then applied the bandages, wrong out in hot water, to the injured leg....The very next night, on February 7, 1837, Florence Nightingale had a dream—or perhaps it was a vision—that caused her to believe she had heard the voice of God informing her that she had a mission. Perhaps it occurred simply because she was still bathe din the warm feeling from having saved Cap’s life. Into her mind sprang the belief that this whole incident was a sign from God to tell her that she should devote her life to healing others.” then to Kai. cites Baly 1986 (FN and Nursing Legacy) and Sandy Dengler 1988 (Florence Nightingale 1988), her
dream from Calabria 1987 (Diary and visions); however the call was at Embley, and clergyman Giffard had been a doctor and was close to FN, she wd not have been traipsing around with a clergyman at Matlock anyway.


2: American Civil War, “since 1854, the sick of the Austrian army have been largely treated, during 8 or 9 months of the year in well-ventilated tents in preference to field hospitals.” very satisfactory results.
3: compare annual mortality from disease of the Br Army in the Crimea which was 23.2% of strength, compared to French Army at 30%; War of the Rebellion,
6: “Florence Nightingale has comprehensively stated the whole matter in the first words of her ‘Notes on Hospitals,’ in which she says, ‘it may seem a strange principle to enunciate as the very first requirement of a hospital, that it shall do the sick no harm.’ These propositions may be taken as the axioms of hosp construction.... Errors of past, Hotel Dieu, St T
7: the old system prevailed at Cr War “and the disastrous events of that war may be said to be the staring point from which followed the great changes wrought by modern hospital reform. The extraordinary results that have been obtained in the treatment of
the sick and wounded, in temporary hospitals, have given forcible
demonstration of the superiority of tents and barracks over
hospitals of complicated construction." “Crown poisoning”
“hospitalism”

Cox-Davies, Rachel. Isla Stewart: Her Life and her Influence on.
London: National Council of Trained Nurses of Great Britain and
Ireland. 1912.

Craven, Florence. “Servants of the Sick Poor.” The Nineteenth
Century (April 1883):667-78; quotes FN at opening: “Sickness is
everywhere. Death is everywhere. But hardly anywhere is the
training necessary to relieve sickness, to delay death. We
consider a long education and discipline necessary to train our
medical man; we consider hardly any training at all necessary for
our nurses, although how often does our medical man himself tell
us, “I can do nothing for you unless your nurse will carry out
what I say.” (Craven, “Servants of the Sick Poor” 667; defines
private nursing for rich or poor, care of sick in own homes,
where the nurse can herself reside; district nursing where care
in a room “where it would be impossible for anyone to sleep who
was not a member of the family” (667); in London generally only
one room for a man, wife and 3 or 4 ch; argues higher educ
required because have to be “real aids” to doctor (668); can’t
send to hosp because wd break up family; Rathbone, 1874 Order of
St John of Jerusalem, Rathbone became chair, district nurse must
know how to purify foul air of room, disinfect; “The result of
the inquiries above referred to was that nurses taken from the
same class as the poor among whom they had to work, wd not
generally undertake the task of contending against dirt and
disorder in rooms destitute of the proper appliances” (670), gave
relief; pseudo doctoring, cd not apply dressing; Craven makes
point of lives lost because of untrained women (670-72), inquiry
from death, provision of supts after and for getting nurses from
educated classes (672); Craven says the poorer women wd not do
the work ladies would; describes quarantine of nurses, “carefully
following all disinfecting rules for themselves and everything
they have worn near the patients, and changing their dress before
coming into contact with the other nurses or anyone else. No supt
or nurse is allowed to visit other cases while on fever duty.”
(675);

Crawford, Elizabeth. The Women’s Suffrage Movement in Britain and
Ireland: A Regional Survey. Brief mention

Creighton, Helen and Lopez, Frank. A History of Nursing Education
in New South Wales: A Comparative Analysis of Australian and
International Influences and Developments. 2nd ed. Typescript
1982, priv pub Lopez. FN 5 7 8 13 32 121 154 144 219;
political correctness both on Eliz Davis and Seacole


Cullingworth, Charles J. *The Nurse’s Companion: A Manual of General and Monthly Nursing*. London: J. & A. Churchill 1876. 16° 134 pp. good. he surgeon to St May’s Hosp, Manchester. practical advice. infections, injections. bedsores. Intro: nice on improvement of nursing. ends with: “Every nurse shd possess a copy of Miss Nightingale’s *Notes on Nursing*, a book most clearly and pleasantly written, and containing an immense number of hints as to the mgt of the sick, which can be found nowhere else, and are of the utmost value.” chap 1 sick room, ventilation (he evidently read FN); sick foods.


Cumming, Kate. *Hospital Life in the Confederate Army of Tennessee*
from the Battle of Shiloh to the End of the War: with Sketches of Life and Character, and Brief Notices of Current Events during that Period. Louisville KY: John P. Morton c1866. 200 pp UG el
11: ref to FN “What one woman has done, another may do. We need not aspire to be Miss Nightingale’s....” 29: “Miss Nightingale went to the Crimean War, the whole world resounded with her praise and here I have been nearly two months and have scarcely heard Mrs’s N’s name mentioned.” 49: Miss Nightingale had any of the hardships to endure that we have. I have another kitchen and the chimney of it smokes as badly as the others. ’ “ 17: cleanliness and neatness visible on every side. The Sisters of Charity have charge of the domestic part and, as usual with them, everything is parfait.” recd kindly. 51: cleanliness, food... not on sanitation, antiseptics

Cumming, Kate. Gleanings from Southland: Sketches of Life and Manners of this People of the South, Before, During and After the War of Secession, With Extracts from the Author's Birmingham AL: Roberts & Son 1895; author also of Hospital Life in the Confederate Army.
37: “I had never been inside of a hospital and was wholly
38: ignorant of what I should be called upon to do, but I knew that what one woman had done another could.” much opposition from brothers in law, altho father okay, not for refined lady. “But am I not excusable in drawing a parallel between our army and the one at the Crimea? As a rule” standing armies. Sister and mother to Crimean with FN in family , but our position would be different , for they under the auspices of a powerful government, ours too poor to assist. “All of this made me more determined than ever. If our government was too poor to assist us, there was the more need of assisting it. And, as to the plea of its being no place for a refined lady, I wondered what Miss Nightingale and he hundreds of refined ladies of Great Britain, who went to the Crimea, would say to that!”
87: women “whose deeds would, were they all known, would make what Miss Nightingale endured at the Crimea, sink into insignificance.”
273: ref to “our Florence Nightingale”

Cumming, Kate. Kate: The Journal of a Confederate Nurse. Ed., Richard Barksdale Harwell. Baton Rouge 1987 [1959]: Cumming (1835-1909) also Cumming, Gleanings from Southland. Birmingham AL: 1895 Introduction xii: family did not want her to go to front. “I had never been inside of a hospital and was wholly ignorant of what I should be called upon to do, but I knew that what one woman [Florence Nightingale] had done another could.” cited from Gleanings, 38. She overcame opposition from family, not work of a “refined lady”. “The pioneer work of Florence Nightingale was still fresh in the public mind and particularly
in the Cumming household. The mother and sister of one of the sons-in-law had served with Miss Nightingale in the Crimea. But the young Southerner pointed out that Miss Nightingale had served a rich and powerful government and that the Confederacy could not give such assistance as she had been given.” this made Cumming more determined. “And, as to the plea of its being no place for a refined lady, I wondered what Miss Nightingale and the hundreds of refined ladies of Great Britain, who went to the Crimea, would say to that.” cited from Gleanings 38.

Xiii the South slow in recognizing the desirability of women as regular members of the med dept of the army. For a year women worked in hospitals only as volunteers and few had undergone any but home training. Not until Sept 1862 that Congress granted them official status.


hosp with newer infrastructure demonstrated that 7 bed days lost over 3 month period, compared with 512 bed days lost by hosp with older Nightingale-style infrastructure, wards, ltd isolation

Currie, Margaret. Fever Hospitals and Fever Nurses: A British Social History of Fever Nursing: A National Service. London: Routledge 2005. Foreword by Rafferty, notes fever nurse Edith Cavell. FN author is RCN His of Nursing com member, Luton Intro. quotes Farr 1872 “The zymotic [infectious] diseases replace each other, and when one is rooted out is apt to be replaced by others which can ravage the human race indifferently wherever the conditions of healthy life are wanting. They have this property in common with weeds and other forms of life, as one species recedes, another advances. By improving the hygienic conditions in which men live, you fortify them against infection and further by isolation the infected the chances of attack are diminished. “warlike metaphors”

3: “By 1860, Florence Nightingale had recognised that epidemics in children originated in schools.”

6: Development of the fever nurse’s role “Florence Nightingale believed that observation of the sick by nurses was essential, but deplored the fact that it was “little exercised.””

26: staffing. setting up isolation hosps difficult, staffing them even more of a problem. “Before the Metropolitan Poor Act, 1867, was passed, Florence Nightingale had recommended that the proposed new MAB fever hospitals in London shd be used for training nurses as well as for medical instruction) as there were no trained nurses ready to assume the care of fever patients. Her advice was ignored and plans to establish the new insts went ahead without this provision. Nursing nuns and assistant nurses, previously domestic servants, were used in the early epidemics.”

endnote 44 (Ayers)
FN recognized that schools intensified problem of fevers, measles, etc. Chap on Edith Cavell as fever nurse, night sister, St Pancras Inf 1901-03; da of clergyman, 4 ch, next child was Florence; Cavell was fever nurse at Fountain Hosp; 41: FN and Bedford Fenwick on reg, fever nurse leaders involved in the acrimonious debates
chapter on Edith Cavell in 1890s. St Pancras Infirmary, Archibald Clark Kennedy tribute; da of clergy, sister a Florence; artist 152: knew of Fry, Twining, Hill, esp FN [but supposition only] 166: brief ref to reform of, FN and Twining only in passing....
194: cites on NonH; and 198: also, on patients better off at home 211: conclusion, lack of quantitative data, [so, occasional refs to FN but seems not to know her major role] no ref to Rosalind Paget

69: saw need for 2 types of nurses; uses WS (no obvious statement on Cr War and her nursing)

Curtis, William Eleroy. One Irish Summer New York: Duffield & Co. 1909; ref to FN relieving thousands, but “her work did not compare in peril or privation or fatigue with the almost daily experience of some of these noble women.” pub by the Library of Alexandria.


Curtiss, Russia’s Crimean War: 460 Raglan died of cholera; Simpson his replaced resigned command shortly before fall of Seb, went home with sever case of dysentery, then Codrington; 461: Gorchakov had medical system organized for Silistria; with Allied landing tho, no steps taken to prepare; in mid Sept Petersburg ordered prep in Simferopol for 6000 wounded, but late arriving, and not enough; at Seb no chief surgeon and no med organ; Bala produced relatively few casualties, but Inkerman terribly costly; civilian doctors, incl Americans; sisters; 462: Pirogov entrusted dispensing of wine, vodka and dressings to sisters, who issued proper amounts on med orders; 464: death of 17 of 160 in Russian order of nurses; then Ekaterina Bakunina led convoy assistance; 467: Russians 10 of 11 doctors sick; 468: death rate in hosps remained high until warm weather permitted ventilation; 2 hosps in Nikolaev had 9682 of 22774 patients die 1 Nov 1855 to 1 May 1856; “Thus for months after the end of hostilities in the Crimea, and indeed after the ratification of the treat of peace at Paris, Russian soldiers were still dying as unnecessarily as those who had been led into the hopeless battles of Inkerman and the Chernaia river.” 469: Russian mil system improved after that;
470: Totleben’s figures for deaths do not include disease; Curtiss using army figures ests 406,156 men loss of killed, wounds or disease, and....(no good); Med Dept gave total of 450,015 died, but only for army; 471: Curtiss est of over 450,000, more than any other war 1815 and 1914; chap 20 peace; Pelissier, the conqueror of Seb, opposed any attempt to drive Russia out of Crimea; costly to get out of Seb; 474: Br did not want peace, wanted another year of war, “the British hoped to weaken Russia so it could no longer be a threat to Europe, and at the same time to restore the military glory of Britain, which was at a very low level.” 475: France had sent 300,000 men to Crimea, but from cholera, typhus and scurvy, little more than one third would return. Debidour 2:143. Napoleon’s ambitions to redraw map of Europe; 479: Austrian ult presented at Petersburg; 491: Bourqueney and Count Buol agreed Nov 1855 on 4 points, abolition of Russ protectorate over principalities; freedom of nav of Danube; revision of treaty of 1841 to eliminate Russ preponderance on Black Sea; Rue supervision over sultan’s pledges of rts and immunities of Greek Orthodox subjects, instead of purely Russian guarantees; memo of preliminaries of peace adopted in Vienna; 501 1 Feb 1856 Vienna, protocol signed by powers; 530: social effects of the ar on working class; impact on Russia slight, only gave up mouth of Danube and small strip in Bessarabia, no indemnity; 548: Baron A. Von Haxthausen essay warned about peasant revolt, tsar concerned, Alexander may have determined to free serfs to get new and modern army in place of serf army; 564: Emancipation of 3 March 1861; if Russia had won Inkerman highly unlikely wd have freed serfs in 1861, or granted liberal court reform 1864; or zemstvos for local self got and press reform;

Curtiss, John Shelton. “Russian Sisters of Mercy in the Crimea.” *Slavic Review* no. 25 (1966):84-100. Online, paper. Good article. Shows how tough things were for Russian women, range of social class, unpaid, sent by Grand Duchess Helena, who did not go, provided fund for their expenses. Order of the Exaltation of the Cross, got women to join for 1 year of service a nurses; first group of 28 headed by Aleksandra Petrovna Stakhovich, directress went, had infl in court; 85: the Russian nurses did not get as much opposition as did those under FN. Old school did not want, saw wd hamper insatiable thievery of hosp admin; they had no FN, but Pirogov; One mother superior, but most not nuns. Training 4 days to 2 weeks. Not experienced. No railroad south of Moscow, took 1 month travel, oxen, horses, wagons, arrived, began work (first group) 1 Dec 1854. Hard work, terrible conditions, under fire at times (Raglan kept Br women away from front). Russians not prepared. Expected battle in the Balkans. Almost 6000 casualties from the Alma, no transport organized, many lay for days on battlefield, needed space for 6000 wounded. Pirogov and Giubbenet, civilian doctors, and German and American surgeons;
sisters helped combat corruption, ran dispensaries, did convoy duty, dressings, greatly appreciated by men; no sex problems, but fighting among the women serious. 92: by Dec 1855 out of 160 women nurses, 17 had died. (Gives dates in O.S., 12 days behind West); complimentary to FN

Curtiss, J.S. Russia’s Crimean War. Durham NC: Duke University Press 1979. 328-29 on FN, 460, good source on background, Silistria, to the Crimea, the Baltic, peace negotiations 299: landing in Crimea to attack Seb, 13 Sept 1854; destruction of Russian Black Sea Fleet called for by annihilation of Turkish squadron at Sinope Napoleon also demanded capture of Seb, altho less openly; 301: Menshikov satisfied with arrival of a div, cd prevent Allies from succeeding, decided wd probably not attempt a landing, since good weather too short to permit success; 302: emperor shd have sent 3 divs to the Crimea, with full powers to c in c, if had, Crimea prob wd not have been lost: Gorchakov called Col Totleben, engineer who had taken command of siege at Silistria after death of Gen Schilder

304: emp prob had no idea of how little done to defend Seb; sea fortifications good, Totleben said imposs to take from sea; but landward defences weak and exposed; 305: Menshikov was wretched administrator, with no system of staff work, distrustful of subordinates; made no regular provision for supplies; Wunsch his lt col acted a s one-man admin; Menshikov asked for a gen intendant for supplies and a QM, had left army 30 years before, but when army sent an old fat man, refused; 307: Menshikov held no conferences with his admirals on tactics, had ample time to prepare for battle when Allied fleet passed Seb; mad no attacks on allies while getting their troops ashore; 308: did not evacuate stores at Eupatoria, which allies took; no written orders for troops; commanders acted acc to best judgment, with no coordination; some regiments saw no action at first; Fr and Br also badly co-ord, Turks under Saint Arnaud; British hoped to drive Russians out of Crimea and Caucasus, not just take Seb; Nap III more modest; 309: Fr had been in Algeria for decades, had veteran army, working system, several capable generals, had Minie rifle, powerful artillery, but no cavalry, Br had effective artillery, but 1000 cavalry, Br commanders Napoleonic, did not understand modern campaign, no wagon train, almost no tents for soldiers; “the Br govt had never provided a workable military system for its army, with suitable provisioning, transport, medical and hosp care, and other needed services. The Turks had almost no mil organ, and most of their commanders were corrupt and cared little for their men, who died of disease and privation in great numbers.” Allies had never seriously planned strategy, landed at Varna to protect Turkish army in Bulgaria, but when Russians retired to Bessarabia in July 1854 then decided, had no maps of interior of Crimea, cd only guess at size of Russian force;
323: Inkerman, the decisive battle; Balaklava had little significant effect, but wakened Br to weakness of right flank; then Russians got reinforcements, Southern Army, gave temporary numerical superiority, 90,000 to 71,000 for Allies; Menshikov attacked, but had to change plans because of emperor’s instructions; confusion between Dannenberg and Menshikov, who hated each other; 324: British had superior musketry fire, Minie balls deadly at 2000 paces, Russian muskets sixty paces; 327: Inkerman the crucial encounter, for Russians made no other major attack after it until hopeless battle of Chernaia River in August 1855; Allied attempt to storm Seb in June 1855 never had a chance; Allies decided not to try to attack fortress but siege and Russians strengthened defences; Russian Army never recovered from Inkerman, losses frightful; Br and Fr with deadly small arms killed Russian commanders and gunners, put out almost all re and batt officers; of 55,000 Russian soldiers in action outside Seb, 11,959 killed missing or wounded, 328: roughly 40%; Allies lost fewer but prob more than official figure of 4338; Br prob lost 5000; incl 9 general killed or wounded; wounded suffered. The Russian military system failed completely to deal” only a field hosp of 1200 beds for 10,000 sufferers, lack of bandages etc. hosps crowded; even before Inkerman wounded at Alma had caused hosp system to break down, with 8486 men killed wounded and missing, too few med personnel; Inkermann almost 12,000 casualties; 329: French had more effective mil org, provided better care for casualties, system to move from battlefield; Br and Russians introduced civilian volunteers; 329: FN mention; Inkerman a shock to Russians, had numerical superiority over Allies and veterans divisions with good generals, on terrain of own choosing, almost complete tactical surprise, expected success;

Curtiss, Russia’s Crimean War: Inkermann was the decisive battle of the war. The Russians had numerical superiority, thanks to large recent reinforcements, were fighting in the place of their choice, with tactical surprise (Curtiss 328-29). Russian losses were terrible, an estimated 12,000 killed, wounded and missing. Field hospitals had beds for 1200, so that thousands were left on the battlefield. Bandages and medicines were scarce. Those taken to hospital were met with filth and stench from the overcrowding. After the battle analyses point to the lack of co-ordination among generals, and the arrival of a detailed map of the area the day after the battle (328-30). 332: Russians fought bravely, but uphill; neglected advantages of troops and guns on McKenzie Hill; did not use manpower effectively; Bosquet sent almost whole force to rescue Br, did much to decide outcome; in last stage; Russians ran out of ammo, at 1:00 pm Dannenberg gave orders for retreat; 333: Menshikov did little, as at Alma gave no effective leadership, had plan for Inkerman, but not explained well to commanders; neglected to have Gen Liprandi use infantry and
artillery to prove for weak spots in Allied flank; blame assigned to Menshikov, somewhat less to Dannenberb and Gorchakov; Russian Army ad more than its share of incompetent generals, and tsar; 334: emphasis on massed bayonet attacks, scorn of accurate musketry, distrust of mil scholarship; Allies lost illusions, defeat so close; on Nov 7 Br Army cd not take offensive action, grand council of war met, Raglan still wanted to go ahead, but Canrobert against, too few, Raglan had to accept; English army now reduced to little more than 16,000 bayonets; some Br officers wanted to evacuate; 335: Br not sure had won, so close; then logistical problems, Br cd not supply troops in trenches, harbour at Bala small; road bad; horse transport impossible; 336: terrible conditions, desertions to Russia; Bala a pest hole, filled with dead an dying, Turks in hovels, scurvy, typhus cholera; 3500 Br sick in Bala; strength of regiments “greatly reduced.” in Jan railroad built from Bala to army lines; 337: before Allied landing in Sept Russians under 50,000 in Cr; a small provisions commission but little authority and no official with auth to act, locals did not expect Allied invasion, did not accumulate provisions; Cossacks looted; 339: when Allies landed Russians had only normal peacetime facilities; in late Oct almost 18,000 patients in Seb and around, great shortage of bldgs; 340: lack of powder; Russians had trouble supplying, over land; Allies had railroad from harbour; chap 14 struggle for Austria; 432: Br gave financial assistance to get Cavour a Sardinian army of 15,000, although saw little action; last Russian offensive; 425: Russian successes against Turks in Anatolia and Georgia, victories over Shamil and Chechens, and repulse of Br Fleet at Sveaborg; 427: 8 March 1855 Prince Gorchakov arrived to take charge of Cr Army, with staff;

Curtissb, Russia’s Crimean War
431: Br Navy did expedition through Kertch Strait into Sea of Azov May 25, forced evacuation of Russian shore batteries, destroyed wheat and provisions, wreck Russian means of supplying Crimea, but cd not hold the forts; June attack of Allies, repulsed, 438: but Russians realized situation desperate, evacuated southern side of Seb; 442: McKenzie Hill, costly for Russians, lost at least 8000 men, or 10,000, Allies 1800; 444: Battle of Chernaya last Russian offensive in Crimea, manpower depleted, and soldiers no longer had confidence 16 August 1855; Allies superiority in artillery, no poss of counter attack; 446 end of siege; Allies increased arms, Russian built up defences, built new batteries, but not in right places and lacked cannon, projectiles and powder; floating bridge across bay to north to facilitate withdrawal; 447: after Tchernaya Allies started furious bombardment, cost defenders 1000 men a day; 455: Totleben’s Description of the Defense of the City of Sevastopol stats: Allies 55,700 troops for attack, used 40,900; Russians used 24,500 to defend...Korabelnaia; Allies made 12 attacks, only
one on Malakof successful, Russians repelled others (Sept 8), not a victory for allies; Russians thought they had won on Malakof, not French; 456: Allies not sure of success; 457: Gorchakov gave orders for evacuation, Pellissier did not expect; Allies cd not enter until after fires over, 10 Sept 1855; 458: by 8:00 am crossing complete, generals crossed bridge, remaining ships and steamers burned or sunk, bridge dismantled, city given up; Russians now in secure position on high ground overlooking Seb, with heavy guns dominating by and lower reaches of Tchernaya; 460: of 95,000 deaths of French during war 75,000 from disease. LaGorce cit; Sardinians also had cholera epidemic, 2000 deaths, only 28 from battle LaGorce; in 1855 Br had 12,000 men in hosps in Turkey but only 11,000 in camp in Bala; FN cited; “It was many months after the arrival of Miss n and her nurses, however, before the hospitals at Constantinople were really cleaned up, and those in the Crimea, over which she had no authority, continued to have high mortality rates until late in 1855. When she visited the Crimea in May....” cit WS;

Cusack, Frank. Lister House: The Story of the Northern District School of Nursing. Melbourne: Hawthorn 1976. cites FN briefly. Bendigo Creek. 1852. 1st matron did not do nursing, as FN expl; Ballarat Hosp inaugurate a School of Nursing in 1887; the Sandhurst experiment was inspired by the Nightingale School at St Thomas’ Hosp; 6: It was a pattern of nurse training that stemmed directly from the system initiated by Florence Nightingale, retaining much of the spirit of that system, its trappings and underling philosophy....became general throughout the state, for next 50 years.


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60: other deaconess/nun places: St Luke’s, Kai model for Episcopalians; Tr Sch for Nurses opened 1888; Jones, African American nurse 1923;

Xv: FN’s “emphasis on sanitary knowledge as that shared by all women, I argue, only reproduced the claims of class and social status of white middle-class mothers.

23: “the allure of the Nightingale iconography” newly arrived. Philadelphia

D’Antonio in Chesnay, *Nursing Research Using Hi Methods*:

234: FN

235: Bostridge’s bio. “Neither a heroine nor a harpy” NonH and Cassandra; Goldie’s Cr War;

235: “Lynn McDonald’s project to publish all of Nightingale’s writing, personal letters, professional reports, formal books and scribbled notes is both more ambitious--and more contentious--than these other collections. Eleven of a projected 16 volumes have been published. McDonald and her collaborators have organized Nightingale’s writings thematically rather than chronologically. These volumes allow a reader to trace Nightingale’s evolving ideas around such themes as spirituality, the role of women, public health and India reform. But they assume discrete boundaries around particular concerns that may or may not have been apparent in Nightingale, and one

249: in “Essay on Sources.” “Jane Robinson’s *Mary Seacole: The Most Famous Black Woman of the Victorian Age* (New York: Caroll and Graf, 2004) brings the work of this Jamaican healer out from the glare of Nightingale’s lamp.”

“We can finally look beyond Florence Nightingale if we seek fully developed stories of individual nurses and important work. Judith Godden’s *Lucy Osburn, A Lady Displaced: Florence Nightingale’s Envoy to Australia* (Sydney University Press 2006) helps wean us as we make the transition.”

Cites FBS and Hugh Small uncritically

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Has Barbara Mann Wall article on Catholic nurses; but not on Irish sisters
D’Antonio, Patricia. “Essay on Sources.” In Chesnay, Mary de. *Nursing Research Using Historical Methods: Qualitative Designs and Methods*. Write a review

113: “The reform of hospital nursing commenced with the foundation in London in 1848 of the ‘Training Institution for Nurses in Hospitals, Families and for the Poor,’ of St John’s House... a collegiate inst, a community of women, Church of England, for instruction
114: probationrs started at age 18, 2 years at Middlesex or Westminster, at end of 2 years, became “nurses” by 1856 took over whole of nursing at KCH.
“It was a war which led to the most sweeping reforms, however,. In 1854....” [gets name wrong Inst for the Care of Sick gentlewomen in Distressed Circs” Scutari, took party, made drastic changes. Arm’s PMO thought a soldier had no need of a toothbrush. Fund
117: despite opposition of medical profession, training scheme proved a great success and slowly led to the complete reformation of hospital nursing. careful planning of FN and work of Mrs W during 27 years she was supt.
“Florence Nightingale’s Notes on Hospitals revolutionised the whole theory of hospital management and hospital construction. Instead of massive single buildings, she advocated the pavilion type of structure, where there would be better light and ventilation, and the number of people under a single roof would be much less, thus diminishing the risks of cross-infection.” St T;
118: Poor Law, pauper nurses by day, at night locked up, no care. Jones found not unusual for bedclothes to be used for months without being washed and the men to wear the same shirts for 6 or 7 weeks. “The inf was very crowed and sometimes there were two or even three patients in a single bed.” 119: but impossible to train pauper nurses.
120: other reforms. 121: mixing up of patients typhoid and operation cases or fractures; |The doctors and nurses were themselves often carriers of infection to others suffering from non-infectious ailments.” mortality in amp cases of a leading surgeon in 1870s was 25 %. Lister: carbolic spray
Chapter 8 on changes made to get to NHS 129-39
139: royal assent for bill November 1946

Dalrymple, Theodore, “Bringing Nightingale Down to Size” online March 28 2012 *British Medical Journal* and print; also Dalrymple. T. “Bringing Nightingale Down to Size.” *BMJ Clinical Research* 344 (March 2012):2317 online DOI 10.1136bmj.e2317 debunking, when a child “Florence Nightingale was an untouchable heroine, like Elizabeth Fry” before her, nurses were Dickens’s Mrs
* Dalrymple, Theodore, “The Truth About Nightingale,” British Medical Journal (31 March 2012): online as: We all love heroines, the greater the height, the more delicious is the debunking when he a child FN an untouchable heroine
“One of the great works of historical debunking is FB Smith’s Florence Nightingale: Reputation and Power “Consume mate liar” re Middlesex Hosp Invalid Gentlewomen’s Institution in Harley St. [wrong name] “Good clean knockabout fun” SH in his last days [the point 1st made in a drama, not history] “She insisted to the end of her days on dirt and miasm as the cause of disease” rejecting contagion.
First names her a “spin doctor” “Smith chronicles her manipulations, deviousness, evasions and lies” but admits she did a lot of good, vs the idea that the good must be good cd not bring herself to destroy her letters, like Nixon Agnes Jones, “want of character” when sought admission to N School [but ignores fact first contact 1861, and good reason to be concerned, her anti-Catholicism; she changed]

Daniels, Doris Groshen. Always a Sister: The Feminism of Lillian D. Wald. New York: Feminist Press 1989. Bio. ISBN: 0 935312-90.0 18: Wald entered NY Hospital Tr School in 1889; first nursing schools in US in 1873, gave women independence 19: Crimean and American Civil Wars and medical advances of late 19th worked to bring a close to the dark period of nursing of Dickens; dominant figure was FN; for women; majority of medical men hospitable to N system; liked having nurses on plane of domestic servants, nurse a confidential servant 20: system exported to US in 1873 when Bellevue in NYC opened despite objections of many doctors; a success, led to est of other schools, incl New York Hospital Training School, 1877


Davico, Rosalba, ed. The Autobiography of Edward Jarvis (1803-1884), ed Rosalba Davico. London: Wellcome Institute 1992 162 pages; 140-41 140: went to 3 breakfasts at FN’s home, Hilary Bonham Carter hosted, 20 guests each; he invited to sit at her right; 141: “Miss N. had for him the great report on the Sanitary Condition of the Army. Then she sent him all her writings.” missed appointment, FN invited him, but he got a day late as away and when he available, she was sick, heart;

listed in Supplement to Alibone’s Critical Dictionary

David, F.N. Games, Gods and Gambling: The Origins and History of Probability and Statistical Ideas from the Earliest Times to the Newtonian Era. New York: Hafner 1962. In chapter on Graunt, ref to FN and quotation, as “passionate statistician”. The earlier workers in the demographic field--and their successors over several centuries--believed that this stability was a direct manifestation of the purpose of God. For instance Florence Nightingale, after some lengthy calculations, wrote: The true foundation of theology is to ascertain the character of God. It is by the aid of Statistics that law in the social sphere can be ascertained and codified, and certain aspects of the character of God thereby revealed. The study of stats is thus a religious service.” inverse of Graunt.

599: U.S. nurses first appeared in 1860 as classification, alphabetical list; in 1870

Davies, Celia. ed. Rewriting Nursing History. London: Croom Helm 1980. articles: Christopher Maggs, “Nurse Recruitment to Four Provincial Hospitals 1881-1921.” 18-40 no refs to FN; Katherine Williams, “From Sarah Gamp to Florence Nightingale: a Critical Study of Hospital Nursing Systems from 1840 to 1897.” 41-75. no FN mss, only printed sources, some hosp records, Guy’s article, uses anon hostile article “The Nursing of the Sick under Queen Victoria.” British Medical Journal 1 (19 June 1897):1646-48. Margaret Breay, “Nursing in the Victorian Era.” Nursing Record and Hospital World (19 June 1897):493-502. ref to J.C. Steele, “Report of the Nursing Arrangements of the London Hospitals.” British Medical Journal (28 February 1874):285; Protestant Nursing Sisters began Whitechapel 1840, 49: E. Fry the real pioneer Institute of Nursing Sisters 1840 and Sisters of St John when got into KCH in 1848; 49: Fry acc to Breay the real pioneer, for providing useful nurses for sick in their homes, but Fry did not try to reform hosp nursing but to learn from it; so FN the real pioneer, even using Breay’s criteria; but SJH had to practise nursing as already understood by doctors (52); Fry’s inst an inst of philanthropy; 66: describes SJH, all candidates had to furnish certificate of baptism, work separate from domestic; 68: but did not create a written theory of nursing; and rel between ward sister and doctor continued; Hints for Nurses 4 page pamphlet produced; 69: no source of nursing knowledge exterior to the ward, and all subordinate to medical control; St T est status of hosp nurse as pupil in practice; removed control
of ward nursing duties to exterior; HBC article 1867, 71: review of instruction; 72: Breay called FN the chief pioneer (ok article, cd cite);


Get

Davies, Celia. 2005 Monica Baly Lecture. Plea to ditch concept of professionalization in favour of professional identity

48: but Am nursing “no carbon copy of the Nightingale system.” quickly diverged from Br patterns and Am nurse leaders also developed interesting and distinctive features
50: 1893 marker, congress. Isabel Hampton Robb. 53: Darche
54: Bedford Fenwick
56: Nutting later confessed abandoned a plan to write a book on FN given the ‘hornet’s nest’ of nursing in England. Bedford Fenwick did not openly criticize FN but plain the 2 women at variance.


Davies, Kate. The Rise of the U.S. Environmental Health Movement. Lanham: Rowman & Littlefield 2013. FN on 130-31: 130: American Cancer Society and Canadian Cancer Society, ACT has consistently downplayed the role of env factors in cancer, while supporting corps that manufacture pharmaceuticals, pesticides and other chemicals. But CCS is a “staunch supporter of env health.” for safe alternatives.
130: “Working with Caregivers--Nurses” “Florence Nightingale is often credited with introducing env health into the nursing profession. Her book, Notes on Nursing, first published in 1860, describes how air quality, water quality, noise, light and nutrition affect health and well-being. Its discussion of air quality is among the earliest modern thinking about the relationship between the environment and health. Commenting that coal used for home heating contributes to poor air quality, the book drew attention to indoor as well as outdoor pollution. Indeed, Nightingale was so adamant about the
importance of indoor air quality and ventilation that she prioritized it in *Notes on Nursing* as the ‘first canon of nursing.’ note 17

As a result of Florence Nightingale’s work, preventing environmentally related disease became part of the nursing profession. In addition to Florence Nightingale herself, other nurses who were advocates for environmental health include Lillian Wald (1867-1940), Josephine Baker (1873-1945), Frances Perkins (1880-1965) and Harriet Hardy (1905-1993). But over time, its role declined as nursing became increasingly specialized and treatment oriented. Fortunately, in the mid-1990s this trend was reversed and nurses became leaders in environmental health once again.”

Davis 1956- was Toronto’s Env Protection office manager, UG RA566.3 D38 2013 and Laurier, out UG 251: cites NonN

25: quotes FN from 1877 “The more one hears about this famine”
43: In England, “old Indian hands and radical reformers” Wedderburn, Cotton, John Bright, Henry Hyndman and FN kept Times letters cols full of complaints of Calcutta’s callous policies.
45: FN snubbed when asked for figures
54: Famine and Nationalism. Allan Octavian Home, secretary of agriculture under Lord Lytton. Hume odd man out in Tory govt (Hume’s father a radical MP) sympathetic to Muslim and Hindu elites, saw rumblings of poor, Wedderburn; Famine Insurance Fund advocated by Lord Northbrook, Liberals did not want famine in India to be election issue; Lytton aware radical members of House favoured financing fund through wealth taxes and reductions in mil expend; forced Hume to resign; for modest income tax; wanted to tax the victims; Lytton and Strachey for regressive tax; after purge Hume joined “the small but influential chorus of opposition to Lytton that was led by Wedderburn, Cotton and Nightingale (whose campaign for Indian sanitary reform had been snubbed by the viceroy). Salt tax
Deaths in the “golden age of liberal capitalism”. Per capita income in India did not increase between 1875 and 1947, while per capita income in Britain rose enormously. reformers for “civilizing” India, as FN said, rather than imperial strategy, corresponded with parallel shift by JS Mill and converged with platform of moderate nationalists like Naoroji and Dutt, wanted Indian home rule within the empire, collab with humanitarian English Liberals. Laid foundations for the “theory of underdevelopment” of a hundred years later (56); Dutt, *Famine in India* 1900,
149: overcrowded slums. Health officials warned of “epidemic apocalypse” if no spending on slum sanitation; “Florence Nightingale, in addition, had repeatedly crusade against the city’s ‘phantasmagoria’ of disease conditions,” but Europeans
332: pro irrigation lobby led by Cotton and FN in 1877 famine, magnificient works... “Now we have before our eyes the sad and humiliating scene of magnificent works (railroads) that have coast poor India 160 millions, which are so utterly worthless in the respect of the first want of India, that millions are dying by the side of them.” End93

Naoroji read paper 1876 to Bombay Branch of East India Assoc, “The Poverty of India” and printed as pamphlet;

Lytton pushed through salt tax; “famine insurance” a cynical facade for raising taxes (56),

57: from 1877 to 1881, whole accumulated fund used either to reduce cotton goods tariff or for Afghan war, Tory deceit, exposed by Gladstone in his Midlothian campaign: “The money has been used. It is gone. It has been spent upon the ruinous, unjust, destructive war in Afghanistan.” (57) endn 118

cites FN on 1876-77 famines; major chapter 1, “Victoria’s Ghosts”, of Part 1, The Great Drought, 1876-1878, env related, el nino; missionaries reported, pics; Lytton the worst; Temple started generously, switched; Stracheys defended;

[page #s wrong: history of Br rule in India, no increase in per cap income from 1875 to 1947, while per cap income Br rose...when empire at peak income in India actually dropped by an est 50%, 1872-1921 ave life expectancy fell by one fifth, Br re-engineered India’s ec to cash crops for export--opium, cotton, wheat, not local consumption: “Grain exports went up from 3 to 10 million tons [tonnes?] between 1875 and 1900. These were also years that included the “worst famines in Indian history.” Forests were felled to build a railroad infrastructure vital for the new, crude, extractive economy. Cash, too, was a major export as the empire’s merciless demands continued to bleed the country for taxes, even during times of famine. And famines there were, aplenty.” 76

differences in wealth minimal between the major civilizations of 18th cen; av standard of living in Europe a little lower than rest of world 77]

from book; p 44 reprints table of Sabha Estimates of Famine Mortality; p 27 reprints table of Indian Wheat Exports to the UK, 1875-78, shows great increase in famine


De Marco, William J. Performance-Based Medicine: Creating the High Performance Network to Optimize Managed Care Relationships. Productivity Press 2011. Author MA CMC (certified mgt consultant, MA in Org Dev from DePaul Univ, CEO pres Brief ref to FN and Codman 74: “Florence Nightingale and Ernest Codman were pioneers
in this field. In 1863, Florence Nightingale (1820-1910) published the third edition of *Notes on Hospitals* that detailed her experience in managing wounded soldiers during the Crimea War. She attempted to apply these same guidelines to the commercial population. In 1855, six months after arriving in Scutari, Turkey, at Barrack Hospitals, she cut hospital death rates from 42.7 to 2.2%. (cit IB Cohen) [exagg claim]

‘Accurate hospital statistics are much more rare than is generally imagined,’ wrote Ms Nightingale, ‘and at best they give the mortality which has taken place in hospitals with no cognizance of those cases which are discharged in hopes of learning of the condition progress or, to die immediately afterwards, a practice which is followed to a much greater extent by some hospitals than others.’ Early American physician....

Codman, Harvey Cushing, tracked in anesthesiology 75: “Both Codman and Nightingale were tracking not just the incidence of illness, as many of our claims systems and utilization management systems do today, but rather looking at why some patients were healed and others were not. They then found a root cause and determined what could be done to reduce the likelihood of a poor outcome.”

One principal reason Academy Health formed in 1960 was joining of 2 research foundations...


Florence Nightingale became a legend for her nursing work during the Crimean War in Russia. She visited Scutari hospital in 1854 and reported back the terrible conditions...

1. The men can lie in filth for two weeks before being seen by a doctor.
2. The men are lying on unwashed floors.
3. The floors are crawling with vermin and insects.
4. One visiting priest left covered in lice.
5. Few men have blankets or pillows...
6... they rest their heads on their boots and use overcoats for blankets.
7. Operation are carried out in the ward in full view of everyone.
8. The screams of the men having limbs cut off is terrible.
9. I had screens put around the operation—but they couldn’t shut out the sound.
10. There are 1000 men in one hospital, many with diarrhoea.
11. There are just 20 chamber pots between them.
12. The toilets overflow onto the floor.
13. Men without shoes or slippers must paddle through this.
14. Amputated limbs are dumped outside to be eaten by dogs.
15. Men are surviving the battles and being killed by the


Delgado, Alan. Florence Nightingale: The Nurses with Florence Nightingale Tell Their Stories. London: George G. Harrap 1970. 143 pp. Pic of FN frontispiece, soft charcoal. Miss Florence Nightingale at Embley December 28th 1857. 11: the summons. Sister Goodman, got summons from Sellon, recuperating a small fishing lodge nr Dartmouth, after nursing in cholera epidemic in Plymouth; da of Bedfordshire farmer, had been primary school teacher before becoming Sellonite; Terrot had orphan ch in her care at Stoke Damerel Church, Devonport; to return to Plymouth, to go to London; also Bertha Turnbull and Amelia Warren; Sister Clara Sharpe; went to Sellonite convent at Osnaburgh St off Euston; Sellon ill and exhausted, said wanted 8 nurses, strict life: all year rose at 3:00 for chapel until 4:30, then cells for private prayer; at 6 back for 30 minute service in chapel, then 30 minutes private med; then occupations; not many moved from their cells, worked in silence; 9:00 a 15 min service; sister read rules, for meditation, then work; then prayers; then breakfast, wh included dinner (meat, veg, tea) until 11, on fast days rice pudding or bread and cheese instead of meat; after breakfast 30 min recreation (with conversation); 12: more prayers and med; work until 4; then vespers, tea and reading; another hour rec, then prayers and bed at 7:30;; 1 undergarment rough, bare legs, sandals; brown alpaca serge dress, black bonnet and veil; 15: Margaret Goodman and other Sellonites nurses from hovel to hovel cholera sufferers, but RC bishop advised sufferers to reject their services; 26: Sellon advised departing sisters to observe strict silence on the trip, reply shortly but courteously if spoken to, do no converse with anyone excepting Miss Nightingale, and not with her during your silence time; be careful of directions of the medical man, but never converse with him; speak soothingly to the patients, but do not talk unnecessarily; be reserved and courteous in manner, eat and clean
in person; exercise extreme self-control; think of wounds of our Lord; 27: Sarah not happy about uniform; Includes material of Eliz Wheeler, Mary Stanley, Eliz Davis. 56: Forty Rice Puddings. Wheeler “Day after day she struggled for extra diet for her patients and what brought matters to a head was her demand (of all things) for forty portions of rice pudding.” not available, she stormed and raged, wd not take some, all or nothing or some wd feel cheated; Rev mother tried to manage more, brought, but told her to clear out of the ward and wd not distribute any; next day, 10 Nov Eliz complained to FN, and not for first time; 57: on 11 Nov wrote letter to relative (long quote from letter); 59: posted w/o showing to FN or anyone, recipient sent to Times. 60: Resident at 45 Baker St XYZ, Lt Col Henry John Daniell of Coldstream Guards, who had a relative married to a sister of Eliz, may be assumed to her; 61: Terrot records Eliz’s ordeal before the commissioners, honest generous, trusting heart and incautious tongue, before 3 doctors and a lawyer, had no copy of her letter; 23 Dec hearing before com; on 24th sent home with Norwood nuns; Wheeler refused to sign confession; FN said of Norwood nuns “excellent, self-devoted women, fit more for heaven than a hospital, they flit about like angels without hands among the patients and soothe their souls while they leave their bodies dirty and neglected.” also Sister Clara Sharpe “good and gentle” but “awkward with her hands” on Candida; 63: nice trip back, visited Gibraltar; Elizabeth went to Plymouth, Clara to Bristol; 90 31 Jan 1855 too much for M Stanley, cd not go through the nursing, cannot stand the fatigue; cannot eat the stringy meat and sour bread served to us (wd have starved except for Lady Stratford); left under Bridgeman “and possibly crated more problems than she had solved” had expected to be welcome, but was rebuffed; 91: had audience of Q V, asked what soldiers wd like, don’t know, plenty of flannel shirts, mufflers, butter and treacle; 92: chapter 12 Eliz Davis at Balaclava, got her way, with Langston to Balaclava, 93: spoke to Raglan, asked his protection because came against FN’s will; Shaw Stewart


24- Chapter 3 Nursing in the Crimean war with Florence Nightingale
in second party, age 22 with Stanley; St George’s experience.
Send off end of November, 1854; 1 December meeting at SH’s house
from memo, not new material.
42: Father Woollett did not convert Miss Taylor. The work of
conversion had already been done by the sick and dying Irish
soldiers, by the nuns and by the utter inadequacy of the Church
of England to satisfy the spiritual needs of a woman who saw life
for the first time stripped of its accustomed conventions and who
had the courage (and the intelligence) to face reality.

DeYoung, Lillian. Dynamics of Nursing. St Louis: C.V. Mosby 5th
ed. 1985. Contributors Barber storage WY16 D35 1985
FN 1, 13, 33, 38, 40-44 73-76, 78, 83; no Seacole in index; Cr
War 74-75 121-2
Part 1 opens with quote from FN Nursing is an art...
12: FN era Sick Governesses’ Home at 1 Upper Harlem Street in
London [sic] fresh air for patients and raised pay of nurses,
still, mainly domestic, found conv homes, jobs; war; authority in
hosp reform; no nurses before 13: Sir Sydney Herbert, England’s
Secretary of War. [sic] sailed, solved problems; est reading
rooms, recreation, care for wives of soldiers, wrote to families
of sick and dying, changed image of nurse and paved way.
“Difficult to understand Miss Nightingale’s retreat from society”
period of retirement, then... NonN, Rathbone; 14: set up whole
new field of endeavor for women
14: “Over the years little or nothing was known about nurses
other than Miss Nightingale who served in the Cr War. Jamaica’s
national heroine in that war was Mary Seacole, who died in London
in 1881.... “ honoured. “With her own funds went to the Crimea to
serve. Florence Nightingale kept her waiting 40 minutes, so Mary
Seacole went about visiting the sick and wounded. Miss
Nightingale rebuked her as one who was 'interfering'. A historian
of the war wrote in 1902, ‘Even in an enlightened century Mother
Seacole stands out preeminent and cannot be passed over.”... Mary
Seacole was of mixed heritage and suspected she was deprived of
services because of her color. However, because of her heritage
she was able to ‘respond to the prejudice’ and moved forward in
her service to the sick.” San Comm of US asked for FN’s advice at
beginning of Civil War because no organized nursing groups.
Author ignores Lees; Robb gets 48-9,
14: Louise Schuyler’s experience as a nurse in the civil War prob
stimulated her interest in Bellevue Hosp when returned to NY.
Organized New York Charities Aid Assoc. Did study of conditions,
found squalor, degradation and lack of nursing 15: recommended
training; (does cover some US nurses)

Diamond, Marion and Mervyn Stone. “Nightingale on Quetelet.” Pt.
1 “The Passionate Statistician.” Journal of the Royal Statistical

Foreword Linda H. Aitken. Xix-xxi; xix: “More than 150 years ago, Florence Nightingale inalterably influenced the evolution of the modern hospital and the establishment of the profession of nursing through outcomes research. Nightingale meticulously used statistics to demonstrate to British officials that more soldiers in the Crimean War died because of unsafe care environments in military hospitals than of wounds received in battle. She then demonstrated a dramatic reduction in deaths following the introduction of nurses whose roles included making the care environment safer (Cohen, 1984). Despite such an auspicious beginning, nursing policy research is still in its formative phases, having experienced little development between Nightingale’s research and the 20th century.”... lessons from Nightingale’s research to guide. “First her topic, preventable deaths in govt insts, was a problem that mil and govt representatives had already identified as needing attention. Policy research is more likely to have impact if framed in the context of a social problem that policymakers or health care leaders have already agreed is necessary to address.” ... First step id of a problem policy makers seeking to solve [not quite what FN did] read the policy lit, “and to have collaborators from other disciplines” interdisciplinary team [this is what FN did, but that not mentioned] second lesson from FN, presentation, charts xx: social stats only evolving in FN’s time [exagg claim, that deaths reduced after introduction of nurses. They declined after San Comm, went up after nurses arrived] Uses Cohen, no page ref)

Chapter 1 Back to the Future: From Evidence to Policy, Geri L. Dickson 3-3: “Nightingale developed and used her coxcomb diagrams, which are credited with having spawned the use of pie charts, to identify the differences nurses’ care made in the lives of British soldiers during the 1854-1856 Crimean war. However, what was most unusual and unique was how she presented her data to demonstrate the number of preventable soldier deaths before and after the advent of nurses’ care. Trained nurses, indeed, did make a quantifiable difference in the lives of the British soldiers.” NO
4: “Accordingly the death rate of soldiers, resulting from
disease and infections, decreased from 47% before the
introduction of trained nurses to 2% after their arrival.
(Florence Nightingale Museum 1854-1856). [note is of Florence
Nightingale’s Statistical Diagrams retrieved February 20 2008
from Hugh Small]. Nightingale used her evidence to support a sea
change in nursing by identifying a problem--the lack of nursing
care--around which the public, interest groups, media and others
could rally. She provided the evidence for a policy change in
1860 that has had an impact on health care ever since--the first
organized program of training for nurses.” YES
5: ref to thesis, Grippando 1977; US got nursing from Civil War,
3 schools 1873 from FN
342: Ch 18 Linda Flynn, Charlotte Thomas-Hawkins, Sandra M.
Bodin, “Using Research to Influence Federal Policy: The
Nephrology Nurses’ experience.”... nurses the largest sector of
health care professionals, so occupy a front row seat where
policies impact patients; here an example of policy change,
Kingdon’s model of policy dev, 2005. Coalescence of 3 steams;
“Dating back to when Florence Nightingale first used a pie chart
to illustrate the impact of nursing services on soldier
mortality, nursing research, when utilized, has been effective in
influencing health policy.”.... NO, [repeat of exagg claim]

Dietze & Lehozky, 1963 cited on exagg FN, see:

Dietze, Lena D, Lehozky, Aurelia R. History and Modern Nursing.
Philadelphia PA: F.A. Davis Co. 1967. no Seacole in
63: SH got FN to go, “in danger of losing his office”
64: school opened 1860, Wardroper; brown dress, white cap and
apron

only on Norfolk, only 1 odd ref to FN.

Diggs, Elizabeth. “Saint Florence.” play 1988, reviewed in NY
conceal the character’s failings, including her abrasiveness and
her arrogance, both of which were obstacles to the advancement of
her causes.” again, has her mean to SH. “Florence.” no humour.
Collage treatment.

Dillon, Brian. Tormented Hope: Nine Hypochondriac Lives. London:
Penguin 2010 “Florence Nightingale and the Privilege of
Discontent” 98-124 cites Strachey, Bostridge, Stark’s Cassandra,
Cook and W-S, BMJ, the usual “passive-aggressive” and “studied
enfeeblement” and “hypochondriacal character” “insistently
valetudinarian” (101); “the most ambitious of the high Victorian
hypochondriacs”, she “retreated from the world the better to
engage and control it” (102), ref to “Florence”; 108: remittent
fever isolated by Bruce in 1887 and named brucellosis, or Mediterranean or undulant or Malta fever, 110: seems compelling, but she thought it was heart and “took to her bed”. “If her illness, on the other hand, was imaginary, she may have cosseted a healthy body and mind into morbidity.” as “Da Costa’s syndrome” a malignity of the imagination identified by J.M. Da Costa in Am Civil War, “soldier’s heart” nervous heart; 111; “a psychosomatic response to trauma” similar to FN, or today “post-traumatic stress disorder” the somatic expression of what she saw at Scutari or “what she had been unable to achieve here”; 119: “ill health afforded the only respite from domestic responsibility” sickroom paradoxically contained “a kind of freedom” invalid fled into an interior world, a secret garden, as she had had daydreams; male version a dandy; 123: FN’s illnesses “caused her real suffering; they expressed somatically the frustrations of her domestic position as much as they did the trauma she suffered at Scutari,” forced her to diagnose her familial disorder, allowed her to widen horizons of imagination as she “retreated to her bed”; 124: “She was in many ways the saint that Victorian sentiment wanted her to be, and in other respect a monster of self-belief, self-delusion and expertly deployed enfeeblement.” but late in life health began to improve, risked drive and outing (good grief)

Dinc, Gulten, Naderi, S., Kanpolat, Y. “Florence Nightingale: Light to Illuminate the World from the Woman with the Lantern.” World Neurosurgery 79,1 (January 2013):198-206. Peer-reviewed. Dept of Deontology and Hi of Medicine, Istanbul University, Cerrahpasa School of Medicine. Ottoman-Russian War of 1853 to 1855 significant not only as a war, but as response to a reflex from West brought novel approaches to patient care under severe health conditions. FN and her associates were instrumental in the emergence of a hitherto unknown profession. small print. Selimye Barracks. Ottoman state “undertook certain initiatives to achieve Western standards, esp in the areas of medicine, engineer and military techniques.” Selimye Barracks one of hallmarks of modernization, built in early 19th cen, “imposing architectural edifice, one that contributes to the silhouette of the city and one that engages interest of travelers approaching Istanbul from the sea.” Partially timber, then extensively repaired, in 1850 finally turned into a fully stone and brick bldg, on sloping plot, large quad, 7 storey tower at each corner. FN, “noble English woman who is now recognized throughout the world for her contributions in the area of care of the infirm. The most significant event that led to her achievement of pioneering status in this field was the Crimean War.” Britain, France and Italian state of Piedmont; Balkans, Cr and Caucasian Front. 199: In “advanced disrepair” when assigned to the British; 201: bad conditions; pics, nice article, get author contact; 204: sultan; life of FN after;
205: poem by Turkish colonel:
Hey Devoted, Faithful, Beloved Nurse, You!
You symbolize virtue. You are honorable. You are exalted.
In the history of humanity, You are as glorious as the sun.
Maybe there are no flowers now on your grave. No roses.
Yet all hearts are full of your holy statue.
Sleep well in your grave, you devoted nurse.
Each year, we commemorate you with more and more respect.
Appreciation to you from the peoples. My people always admire you.
Our endless gratitude to you, we are endlessly indebted to you.
Tahsin Alper. Commander of the 53rd Infantry Reg

205: “Due to the organized care that she applied at the hospital, the initial mortality rate of 42% was reduced to 2% (note 25). At the base of this drastic decrease in mortality rates lies improvement in hygienic conditions, separation of patients into different wards regarding their diseases and establishment of a standard nursing service.” “Removed burden of health care from the doctors and allowed them more time to achieve their proper duties.” Effect in est by foreign physicians practising in Istanbul the first Turkish med association in 1856, Royal Medical Society and pub of its official pub. Gazette Médicale d’Orient; school of nursing named after FN; N. Taskiran. “Florence Nightingale and Some Related Documents from the Turkish State Archives” in Turkish! Uses W-S.


Dingwall, Robert, Anne Marie Rafferty and Charles Webster, An Introduction to the Social History of Nursing. 14 Oct 1854 FN to EH re quitting post at Harley St., went to Belgrave Sq. to catch her, offers to go to Scutari, her and 1 nurse, notes Lady Maria Forester giving £200, and three others, consent of parents being sought by uncle, asks what SH thinks of, 43396 f10 Cook 1:150 15 October 1854, long letter of SH to FN from Bournemouth, asks to see her, re Bracebridges going with, asks her to write him at WO to let know, Cook 1:151-54, Claydon Bundle 288/289; shorter but strong letter of EH to FN from Bournemouth, on behalf of SH, asks when he can see her, no difficulty in getting a substitute at Harley St.: I do feel that if you refuse, you will have lost the most noble opportunity of doing the greatest possible amount of good, just the sort of good which you alone can do.... It is a great & national work to which you are called & it is God’s work besides. I will say no more.” Bundle 288, also 10/319/34; FN letter asks mother and sister for blessing on “our undertaking,” 8994/114; 42 on Forester;
Chapter 3 The New Model Nurse 35-47; Chapter 4 Making the Myths 48-67+; very pro FB Smith, very hostile, cites of FN work only Notes on Nursing, no primary sources; has Seymer History of Nursing 1954 in refs, but not the 1960!; accepts FBS uncritically, pro Parthenope, William N and Fanny. Chapter four is “Making the Myths”: 50: Action appears to have been precipitated by another move from outside FN’s control; Dec 1859, Mrs Baines, of Ladies San Assoc asked fund to support their plans for a nurse tr scheme, threatening public questions re mgt if refused; FN dismissed threat; 51: final agreement not signed until May 1860; “Some of Florence’s cruellest comments were reserved for her older sister, Parthenope, whom she caricatured in letters and diaries as vain and trivial. Parthenope may have taken more pleasure in London society but she was also the author of five novels, essays on agricultural reform and a history of her husband’s family.” “the sensitive and autocratic Florence” (36); refs to her “Unitarian upbringing” (39); minimizes contribution, not original, lots of others.... and mis-states: “As with other philanthropists, she thought the answer lay in personal work rather than through large-scale social reform” (37); on germ theory: “Although she clung ferociously to miasmatic theory...long past its discrediting in the medical world” (37); at Harley St. “She was not a deliverer of care but an organizer of others’ labour” staff productivity (40); “Part of the conflict between Florence Nightingale and her family seems to have revolved around her reluctance to share in caring for her sister during a period of poor health in the 1840s” (33); KCH break of Jones misdescribed: “to take open religious vows and set up their own altar with an exposed sacrament” (28); Lady Maria Forester, Protestant Inst of nursing (of Fry), “Florence Nightingale appears to have become aware of the Forester initiative and taken it over by going directly to politicians with whom she was acquainted and through them to the head of the Army Medical Department. More importantly, she also mobilized an old friendship with Elizabeth Herbert, wife of the Secretary at War, Sidney Herbert....” (42) [obviously using FBSmith, where he is wrong]; she “mobilized an old friendship with Elizabeth Herbert, wife of the secretary at war...” cites FBS shows a “carefully orchestrated and apparently simultaneous crossing of Florence’s offer to serve and Sidney Herbert’s offer of appointment” (42) citing FBS 26, chronology of primary sources shows Elizabeth Herbert was urging Nightingale, that initiative of Lady Forester openly acknowledged, that any co-ordination of letters might have been between Sidney and Elizabeth Herbert, that writing through EH appropriate given that she was member of mgt com at Harley St., which Nightingale had to resign from without giving notice. One of the worst mistakes of Dingwall et al’s revisionist An Introduction to the Social History of Nursing is the assertion that Nightingale was a “philanthropist” who “thought the answer lay in personal work rather than through
large-scale social reform.” Yet most of her life was given to system reform, beginning with *Notes on the British Army*, which moved from a solid presentation of the facts of what was wrong to detailed proposals for a better system.

Dingwalla An Introduction contd
16 Oct 1854 EH letter to FN from Bournemouth, noblest Flo I knew you would do it, God be thanked that he has put His thought into yr heart to go to do His work as you alone can. Sid longed to go to you last week, but he came down to consult me first & I persuaded him to write to you at once as he did yesterday. Bundle 101; copy of SH letter from War Office to FN, has just left Newcastle, who will call at Harley St. tomorrow early before she goes to A. Smith, asks what his servant can do for her tomorrow bundle 288;

“She refused to accept any leader from the insts she approached to supply nurses” (42); boycotted by Fry’s group; Mary Stanley--lit not even handed, praise of Shaw Stewart; “The picture of filthy and squalor drawn by the journalist Russell and by Florence Nightingale is almost certainly exaggerated” (44) citing Cope; after Cr FN “their most astute self-publicist” (47); “Her talents as a publicist did as much as ever to focus attention on her own contribution and idealizations of nursing” (48); “George Bracebridge” in Crimea (50) factual error; then on nursing after “The first recruits were neither pioneers nor heroines” (why should they be?) (52); (but early nurse sent out to Liverpool Royal Inf died in 1863 of typhus) The nurses who went to the Highgate Workhouse Infirmary in the early 1870s were surely both heroic and pioneering (the second workhouse to be nursed by trained nurses, by with the unhappy examples of difficulties at Liverpool, and Jones’s death). Lucy Osburn and her nurses had a three-month sea voyage to get to their destination in Australia, where their quarters were abysmal (Osburn was ill). Maria Machin and the four nurses who went with her to Montreal also faced deplorable conditions there; one nurse died on the job, as did Machin’s fiancé. Those returning to England, disappointed and frustrated, were shipwrecked on the way home. (these critics have high standards indeed!);

Dingwallb et al An Introduction contd:
FN damned for dismissing nurses at Harley St., and not at St T (when Wardroper matron); Royal Cornwall Inf, Truro, got nurses trained by A. Jones at Liv (this is used to say nursing developed w/o FN!); FN method of nursing: “Indeed it is unclear how far that model ever existed outside the mind of Miss Nightingale” (60); not clear how many FN nurses went to Liverpool WI [but corr says a lady and 8 nurses], cites FBS on difficulty getting a supt (64); FN “refused to support Agnes Jones in her lifetime” tho did eulogy (64); lots of class analysis in, servants; very hostile on Liv work; “Once again it is hard to resist the conclusion that
the Nightingale Fund successfully appropriated the credit for developments which were occurring in many localities throughout the 1860s, while making only a limited contribution of its own” (65); midwifery, “Miss Nightingale herself was more closely identified with a second group of reformers whose prime interest was in the provision of better maternity care for the poor and saw the midwife as a low-cost alternative to doctors” (154) no cit; on district nursing, Rathbone tried to get Sisters of Charity and St John’s House, then turned to FN for advice. “She gave him an interview and recommended that he should approach the Liverpool Royal Infirmary, a voluntary hospital, to accept women for training. A School was set up there in 1862” (174); “To the extent that Florence Nightingale supported district nursing and health visiting, this reflected her basic hostility to hospital-based health care and the priority she gave to the reconstruction of Victorian society on sanitary principles “ (177); cites Baly quote from FN re district nursing not FN directly (178); “Florence Nightingale’s vision of the district nurse is that of a COS caseworker, a supervisor of the poor rather than a provider for them” (179); Lee’s survey, friction between them on class; chapter 4 “Making the Myths” N Fund, used her reputation “with skill, ruthlessness and cunning” (48); re Bence Jones’ proposal, “No reply to Bence Jones survives but further evidence of the seriousness with which his proposal was received can be found in Florence Nightingale’s letter to SH of January 1856” rec him as member of council (cites Baly) (49); nursing a secondary consideration to physical structure of the hosp bldgs; Whitfield struggles; results: Fund’s report for 1900 stated that 1645 candidates had been admitted since foundation, 982 completed tr, high wastage (54); only 6 nurses from St T became supts before 1871 (56); re Crimean decision, they take FB Smith that crossing of letters contrived. [but exchange with Bence Jones Feb-March 1856 is available]

Dock, Lavinia L. A History of Nursing. vol 4 Thoemmes Press ISBN: 185506-638-6 reprint, excerpts of letter of Amy Turton 17 April 1910 from Rome recalling: 4:112 “It is difficult to give details of the work--of what is being reformed, for we are, in a way, guests in a foreign land. We want to help, not to criticise. Years ago Miss Nightingale wrote me, when I returned to Italy after my year at the Royal Infirmary, Edinburgh: ‘Patience and prudence, as, e.g., not extolling English things to Italians, or saying, ‘I do so and so in Great Britain.’” Another saying of FN’s, a year later, when going to Naples, leaving our first Roman pupils to the nuns at S Giovanni, FN wrote to me: “I am sure you will remember it is only personal work that can do things. Stand your ground and kiss your enemy’s nose is one of the secrets of life....A large tom cat of mine came into the room and ran at my two little kittens. The larger and handsomer kitten ran away. The smaller stood her ground till the big tom cat came quite close,
and then she kissed his nose and made peace. Now take up your
ground, my dear Miss Turton, and stick to it....Go on
perseveringly and prosper.”
4: Chapter 5, India, Dufferin 4:232 the first to promote nursing;
missions, zenana mission gave assistance to the poorest, low
caste; much on how hard to start, resistance to menial work;
Eurasians better; 4:241 Edith Atkinson 1886 lady supt, from York
Rd Hosp; 19 years to 1905; Cama Hospital. Training 1 year, then 2
years. S Grace Tindall, English; 4:244 All Saints’ sisters took
European General Hosp, Bombay and later St Geroge’s to be a
centre;
4:256-77 Japan, myth, empress; Linda Richards; Sept 1885 first
nurse tr school opened in Japan, by Richards; 4:259 1909 ICN had
Japanese reps Miss Hagiwara; 260 later in Japan as Buddhist did
not take on sickness as Xns had, poverty; 1887 Japanese Red Cross
joined international; 4:277 FN revered, taught;
China 4:277-85, missions, as in India, the first to do hosp work
and train nurses; Sister Ethel Halley, Australian the first, Oct
1910 in Una, in Shanghai, worked alone for 15 year; St Luke’s
Hosp, Shanghai, numbers increased in early 1900s. Cruelty of
treatment of patients before trained nurses; 4:280 Robb’s book
translated, in part, into Chinese, at David Gregg Hospital for
Women in Canton; 4:282 Nurses’ Assoc of China; 4:285 Corea, also
used Robb’s book, and Kimber and Pope’s Textbook on Nursing;
4:289-305. After war with Spain, mother houses withdrew their
sisters from hospitals; awful places, unsanitary; 289 nursing had
been more religious than professional; Lucy Quintard, “Nursing in
Cuba” Transactions, Third International Congress of Nurses,
Buffalo, 1901. Cites Hibbard 1904 article; Quintard moved from
military to civil; 4:292 Dept of Charities under Major E St John
Greble, schools opened, 1900
4:208 “The American nurses gave admirable service in
the reformation of the Cuban hospitals. It was their first piece of
work on a large scale outside their own country, and many made
brilliant records.” Close to 75 altogether, 1901–, many SpAm war
nurses, 299 trained at Blockley, Bellevue, St Luke’s’ 4:300
“Preventive social work now received the attention of the urban
patiros and war heroes, and Miss Hibbrd was selected to organise
a corps of visiting sanitary nurses which she constituted a special
service under the Dept of Health” 3 Am sps, O’Donnell, Byers,
Pearson...

Dock, Lavinia L. A History of Nursing: The Evolution of Nursing
Systems from the Earliest Times to the Foundation of the First
English and American Training Schools for Nurses. New York: G.P.
Putman’s Sons 1912, vol. 3
3:86: cited by Meehan on nursing by Irish Sisters of mercy.
Founded in Dublin 1831, “early attain brilliant prestige in
nursing. Its foundress, Mother Catherine McAuley (born in 1787;
died in 18410 was a beautiful, benign and highly cultured woman
of great gifts for leadership. From this order went, in all, sixteen nuns to the Crimean hospitals, one or two of whom outlived Miss Nightingale. The Sisters unite the contemplative and the active life, and though they take perpetual vows, maintain a vivacious and unaffected intercourse with those of the laity to whom their work relates them. They must have had hospital training at an early date, for they had skilled nurses when the Crimean War broke out, and in that same year, 1854, we find them taking over the nursing in the Jervis Street Hospital, while in 1857 they assumed that in the Mercy, of Cork, under Mother Josephine Ward. It was housed in a substantial old mansion, once the mayor’s residence....” one paragraph. So, a few lines in one para, of a 4 volume work, not one detail, but a surmise that they had had hospital training.

3:97 Sisters of Mercy tr school opened 1891;
98: training schools were opened by the Sisters of Charity in 1892 in the Children’s Hospital, Dublin, now in Temple St, and in 1895 in North Infirmary in Cork;
3:100 Mater Misericordiae opened by Sisters of Mercy in 1861, classic style, funds raised in honour of Mother Aloysius Doyle, after the Crimean War (got RRC only in 1897)
3:101 1883 Mater Infirorum in Belfast founded, by Sisters of Mercy, new Mater Inf in 1902 opened (Mother of the Sick) admitted; first patients 1 Nov 1883, by Sisters of Mercy
3:101 1902 new Mater Infirorum opened on pavilion style, new school 17 February 1902, St Philomena’s
3:102 Pringle organized worked for 5 years on. “Arrangements were made for the training of nurses on the most approved methods, and on the 17th of February 1902 a new school was opened, known as St Philomena’s Tr School 102: for Nurses. To organize it came a Nightingale nurse of unusual ability and talents, Miss Pringle, whom Miss Nightingale had once called ‘a regular general,’ and who had previously occupied the post of matron in St Thomas’ and in the Edinburgh Infirmary. The new undertaking was an arduous one, and Miss Pringle gave five years to it. Miss May, an Englishwoman succeeded her, and followed closely on her methods. In 1909, Miss Hannan, an Irishwoman trained in St Vincent’s, Dublin, was appointed matron.... succeeded in making the mother superior a trained and certificated nurse.


Chapter 4. “Rewiring a Brain with Light: Using Light to Reawaken Dormant Neural Circuits.” 114- 114: chap begins with quote: “It is the unqualified result of all my experience with the sick, that second only to their need of fresh air is their need of
light; that, after a close room, what hurts them most is a dark room, and it is not only light, but direct sunlight that they want. People think that the effect is upon the spirits only. This is by no means the case. The sun is not only a painter but a sculptor.” Florence Nightingale, Notes on Nursing 1860.

discovery of nurse that preemies recovered from jaundice when exposed to the sun. Sunlight gets into the brain.

Neuroplasticity. Known in Roman times. Pagans took phototherapy seriously, and heliotherapy after Greek god Helios; ancient buildings designed to capture as much pure sunlight as possible. 116: “Light Enters Our Bodies Without Our Knowledge” light does not require fiber optics or surgery to pass deeply into the brain. Skin not a barrier. “The energy from normal sunlight passes through the skin to influence the blood, for instance.”

117: cures neonatal jaundice, Sister J. Ward, post WW II, Essex, sunlit courtyard facing south, took preemies from incubators; 117: experimental results

118: “Not until Florence Nightingale, the founder of modern nursing, were hospitals designed to expose patients to as much sun as possible. But that brief, sunlight-friendly period in the nineteenth century ended with the invention of the artificial lightbulb, which was believed to contain the same full spectrum of light as direct sun. (Unfortunately, artificial light was neither full spectrum nor equivalent to natural light.) Hospital designs no longer favored natural light, because science could not explain Nightingale’s insight that sunlight a

119: 2002, second pathway from retina to brain discovered, light-sensitive cells found that send electrical signals on a separate neuronal pathway; biological clock.

119: Egyptians, sun god, Ra, worshipped, protect and heal.
120: Dr Norman Rosenthal discovered some depressions cured by sun exposure:
121: extraordinary sensitivities to color in individual cells. Charge transfer, “Thus human encounters with light are more than skin-deep, and our bodies are not darkened caverns; within cells, photons flash and energy is transferred, giving rise to colorful cascades of change. The question was, had anyone to use Florence Nightingale’s beautiful metaphor, found a way not only to ‘paint’ the surface of the head with light and color but to use it to sculpt the circuitry of the brain?”

Doidge, Norman. The Brain That Changes Itself. 2007, but no FN in Healing power of laser light. Extent to which people deprive themselves of natural light and its benefits. “Hospitals often seem recklessly indifferent to the role of light in healing—they no longer have the sunlit courtyards inspired by Florence Nightingale’s observation, during the Crimean War, that more patients died in the hospital buildings than in the temporary field hospitals, where they were exposed to natural outdoor
sunlight and air. Hospital wards influenced by her work—called Nightingale Wards—had multiple windows strategically placed so patients were exposed to light throughout the day. Today, a hospital patient is “lucky to have a window with direct sunlight. Increasingly windows in enclosed spaces.... are coloured to screen out the full spectrum of natural light in order to save money on air conditioning. Cars, etc.”


205: Mack was familiar with FN’s work, followed. In 1873 sent Miss Money to England to bring out a staff of nurses trained in the “Nightingale system”, got 3 from Guy’s and several probs. So trained nursing “practically simultaneous with that in the U.S.” Montreal Gen founded 1821; 1875 applied to FN for help to est a school, she sent 5 “but they were not successful” hardly!; finally got under Nora Gertrude Livingston, NY Hosp grad; 204: Linda Richards matron at Hartford Hosp Tr School 1895-97; was 4th matron/supt; introduced system of ward maids to relieve nurses of cleaning and dining room work; got home built; 2-4 Canada 1874 nursing ed initiated at St Catherine’s, name change to Mack Training School; corr with Lavinia Dock and Dr Howard Dittrick at Cleveland in history; Dr Mack got her plan only 4-5 years after started at St T. Joseph Grancher barrier system of nursing D.L. Richardson aseptic nursing Charles Chapin advocacy of individual cubicles.


Chapter 9 Mid-Nineteenth Cen FN 211-23, followed by Civil War
315: Cr War, bad conditions, no basins, etc. [Exagg claim]
216: “In two months she had transformed the hospital into an efficiently managed institution. In six months she had reduced the death rate to 2 percent, and had won the respect of most of the surgeons.” Raglan gave support. “Because of her sanitary improvements and the provision of good nursing care for patients, Miss Nightingale reduced the mortality from 427 per 1000 in February 1855 to 222 in June 1855. She utilized the scientific method of gathering data and was skilled as a statistician, presenting the factual evidence in a most graphic way. Dr C.W.E. Winslow referred to her as the ‘Lady with the Slide Rule,’ as well as a lady provided with the lamp of compassion and the broom of efficiency.” Ability recognized by RSS. ASA 1874; got new profession for women
218: Nightingale School for Nurses; 219 rec refresher courses; good chapter on, but this the source used for exaggerated credit to FN; Dolan was first professor of nursing at Univ of Conn School of Nursing

Dolan, Margaret B. Preface to the Dover edition of Notes on Nursing New York: Dover 1969 v-ix (Prof head dept of Public Health Nursing UNC) for families, after 14 years of observation and thought; vi: admin smoother today, but her plan “to have hospitals designed jointly by architects, nurses and hospital administrators has yet to become a reality.” physical env of the patient of primary importance; vii minute observations, epidemiological; ix: Delta Omega, honor society of public health profession proud to endorse the reprint of this classic [short, okay intro]; foreword, Virginia M. Dunbar 1946 (dean, Cornell) xi-xviii


Donald Graeme, Loose Cannons: 101 Things They Never Told You about Military History.

Donnison, Jean. Midwives and Medical Men: A History of Inter-Professional Rivalries and Women’s Rights. New York: Schocken 1977. Scottish surgeon Wm Smellie improved forceps; taught William Hunter; whose pupil introduced to America; in Catholic countries female midwives for female modesty


5: “The Irish Sisters of Mercy were the best prepared nurses in the nineteenth century. By the time of their service in the East, they had a twenty-seven year corporate tradition of nursing care. Then, each sister had built her own nursing experience as she visited the sick which was a central task of being a Sister of Mercy. Prior to the war, they had nursed starving people dying from scurvy, cholera, typhoid and typhus, the same diseases that inflicted their soldier patients. (Endn 9 is a statement of care for cholera victims of 1849, 12,000 died in Dublin alone and victims of potato famines 1845-49)) And for ten months before arriving at the Balaclava Hospital their nursing system at the Koulali Hospital in Constantinople made it the ‘model hospital in the East’ (endn 10, Taylor, Eastern Hospitals p 262, no recognition of highest death rates). In a sense, when they arrived at the Crimea, they hit the deck running.”

supreme supt was FN and sub-supts were Langston, Shaw Stewart and Wear. FN furious, attacked nuns as proselytizers.

“Order, morality, requisition and religious affiliation were Nightingale’s criteria for evaluation.”

10: “Nightingale’s evaluation of Crimean nursing won the day at a terrible cost to the profession for which she would become an icon. The War Office replaced…” general order. [no comment on English Sisters of Mercy. “The Sisters of Mercy were British citizens but prejudice prevailed against them because of their race and religion. They and their nursing expertise were expunged from celebrations of Crimean War nursing. Nurses at the millennium live in a more tolerant time. It is their duty to reclaim nursing’s rightful inheritance of calm soothing and mild commiseration that too long has been obscured by fanciful images. (End 13). A Critical evaluation of Crimean nursing is long overdue. The terrible suffering of those first patients of modern nursing demands no less. Only by reclaiming this nursing care of the past will the profession be able to design its future.

Dormer, Ernest W., ed. The Story of the Royal Berkshire Hospital 1837-1937. Reading: Poynder 1937. No ref to Baster, matron or FN.


Recognizes FN’s philosophical foundation and legacy, healing and healing res, meta paradigm in nursing theory. Written on by Shea
and Frisch. Not seen.


Dossey, Barbara M. Florence Nightingale: Mystic, Visionary and Healer. Philadelphia: Springhouse 1999. ch 18 on India “The Birth of Indian Nationalism” ref to “Florence” has madre dying in 1860 (244); has Chadwick actually presenting copy of Sugg to Mill (242) and only 6 copies printed, but very positive in coverage; has map p 392, says by 1910 20 countries had training programs based on her system (an understatement): lists Boston 1873; New have 1873; New York 1873; Baltimore 1889; Havan 1900; San Juan 1904; London 1860; Edinb 1872; Copenhagen 1900; Oslo 1910; Stockholm 1866; Amsterdam 1890; Berlin 1886; Brussels 1907; Dublin 1879; Bordeaux 1901; Rome 1894; Athens 1899; Beirut 1906; Bombay 1886; China 1903; Manila 1906; Kyoto 1885; Sydney 1868; Letters from a Mystic: Florence Nightingale’s Legacy for Postmodern Nursing. PhD thesis. Union Institute and University Graduate College. April 2002. Wellcome. 194 pp. ILL Marquette Univ WI; uses 13 letters to Fund nurses], not Boston; has excerpts, argues the letters show FN as a mystic, also source of postmodern nursing tenets! a lot of jargon; argues the 13 formal letters or addresses supported by her other major pubs, Notes on Nursing, Sugg and Sick Nursing, “masterpieces written by the mature mind of a practicing mystic to her followers” (115), refs to Catherine of Siena, Catherine of Genoa, Teresa of Avila and Thomas a Kempis; also “she was familiar with translations of Kabalistic writings in early Judaism (c. 1300 BCE), the Upanishads of Hinduism (116) © 700-500 BCE, Buddhist teachings (c573-483 BCE), Socrates (c470-399 BCE) and Plato (c429-348 BCE) (117) [but no sources! patterns identified: spirituality, meta paradigm nursing theory--nurse, person, environment (society) and health; knowing in nursing--empirical, ethical, aesthetic and personal as identified by Carper 1978 (117); “Nightingale’s recurring message is one of spirituality and the lifelong journey and process of healing in order to understand the wholeness of human existence. Her emphasis was on high-level values and the nurses’ commitment to the philosophy, calling, and character of the nurse, and thus, nursing. To her, healing was the blending of the nurse’s inner and outer life; this blending facilitated and conveyed the creative expression of unconditional love. This inner peace then allowed the person receiving care to feel safe and more in harmony with self and others. These qualities show an authenticity of unconditional presence that is essential in the healing process. She reminded her nurses that healing occurs when they embrace and transform what was feared or most painful in their lives.” (119)

Duckinck, Evert Augustus. Portrait Gallery of Eminent Men and Women of Europe and America. 2 vols. New York: Johnson, Wilson. 2:532-36. Highly inaccurate, respectful account. 534: Kai gave educ to qualify her; entered 1849 NO and for 6 months under founder in a regular course of training in the care and tr of medical and surgical cases and then visiting a number of the hospitals and asylums for the poor in Germany, France and Italy (534); Crimea with Bracebridges and “42 competent nurses, some ladies of rank and fortune”! Got to NoN and ventilation.

Dunbar, Virginia. “Florence Nightingale’s Influence on Nursing Education.” International Nursing Review. 1,2 (October 1954):17-23. dean, Cornell Univ, NY Hosp School of Nursing. systematic prep, instruction, recording student’s progress; clinical methods; admin; position of matron at heart of N plan. (21) asks how stress on authority of matron has perpetuated autocratic admin of schools of nursing and delaying dev of school faculties; personal qualities
-- The Origin and Early Development of Two English Training Schools for Nurses: the Nightingale Training School, St Thomas’ Hospital and the Guy’s Hospital Training School. 1936. FN Mus 0881 thesis


Dunne, L. A Trip to Constantinople...and Miss Nightingale at Scutari Hospital. London: J. Sheppard 1862. Cook 2:462

Dunphy, Lynne M. “Florence Nightingale and Barbara Leigh-Smith Bodichon: A Tale of Two Cousins.” AAHN conf 2001 Charlottesville VA

of VA School of Nursing.

Durand, Roger and Jacques Meurant, eds., *Prélude et Pionniers: Les précurseurs de la Croix-Rouge 1840-1860.* Geneva: Société Henry Dunant 1991. From a conference 26-27 Oct 1988 has article Sue Goldie Moriarty, “Florence Nightingale in the Crimean War: Private Truth and Public Myth.” 143-57. starts with Strachey quote; CHB did pr, on behalf of SH; good article, includes newspaper stories of Crimean War re FN; Goldie 138 refers to FBS sugg that FN instigated the letter; 149: it was Herbert, intention establishing a strong unified command in the nursing dept who laid such emphasis on the importance of auth being vested in the one supt.; 150 “Florence had one further supremely important qual in Herbert’s eyes: her religious inclinations coincided with Herbert’s own.” cd cite. Also Barry Smith, qv, and Jean Guillermand, “La vision de la guerre de Crimée du médecin inspecteur Lucien Baudens” 159-76.

**Ecole Florence Nightingale. Bordeaux:** Ecole Hospitalière de Gardes-Malades de la Maison de Santé Protestant de Bordeaux. fondée en 1863. 28 pp H1/ST/NC15/28. with help of doctors courses organized in 1884, free, in theoretical inst and practical for gardes-malades. Founded in 1901 under direction of Mlle Hamilton, une école instruction technique pour les personnes gardes-malades. In 1918 name Florence Nightingale approved by LH Shore Nightingale; used for soldats in WWI; Hamilton designed the uniform, pale blue in 1901 (pic); concern with bien-être matériel et moral at school (20); since 1901 has inscrit 194 pupils, of which 120 obtained the diploma and 24 en cours de stage; 22-25 lists hosps where they are practising; ends with French trans of Longfellow.

**E43:** “For Florence Nightingale, the focus of nursing was health. She subscribed to health both in the medical sense, as the absence of illness, as well as in a developmental sense—the notion of becoming. Nightingale believed that human beings had the ‘power’ to promote and restore health and to prevent ‘Dis-ease’ by ‘working’ with human nature and circumstance. As Nightingale wrote: “Health is not only to be well but to be able to use well every power we have ... Man has to learn how circumstances regulate and modify human nature, to learn what circumstances develop and exercise human E44: nature aright.” 5(p33).

Nightingale clearly differentiated the roles of medicine and nursing in bringing about health. As she, in Notes on Nursing, wrote... “not the curative process. ... law of life “In this article, we propose a Developmental/Health Framework (DHFW) within the McGill Model of Nursing (MMN) that extends Nightingale’s work by identifying some of the ‘laws of life’—the principles and mechanisms rooted in biological and
developmental processes. By identifying the laws, we can explicate Nursing’s role in promoting, supporting, supplementing and restoring an individual’s capacities and ‘natural’ healing processes to adapt to and meet challenges arising from current circumstances illness, injury and other disruptions.”

Easton, John Alexander. *Hints on Medical Ethics. An Address on Medical Ethics*. Glasgow: David Robertson 1862. forgotten book, in US Surgeon-General’s library. Ref to FN as “ministering angel” kindness. Easton was professor of Materia Medica and Glasgow [not seen]

Eddy, Mary Baker. *Science and Health*. 1887. 514-15: It is proverbial that Florence Nightingale, and other philanthropists who engaged in hurricane labors, have been able to undergo, without sinking, fatigue and exposure that ordinary people could not have endured. The explanation lies in the support they derive from divine law, rising above the human.


FN: 127: “Nightingale refused to believe in the existence of germs because she had spent three days caring for cholera victims in London and had not contracted the disease, but she did demand cleanliness and conditions improved dramatically under her demanding regime.”

159 gives too much credit to FN and not enough to San Comm for reduction of death rates; uses Woodham-Smith; also exaggerates on Seacole on cholera and hospitals


Editor, “F.N.” *American Journal of Nursing* 37,11 (Nov 1937):1198-1200. grand council of International Council of Nurses paid a “visit of homage” to grave of FN at East Wellow, flower tribute, and shown through Lea Hurst by Shore Nightingale, gave them tea.

editor. *Medical Times and Gazette* (13 February 1864):187-88. Reply to Farr of 186-87: “187: We thoroughly endorse every word of Farr’s commendation of Miss Nightingale--nay more, we hold her entitled to this special praise” in reform, “she is not only protecting the poor and helpless from falling into the very snares of death in the places where they go for health, but she is consummating a reform which the members of our profession, to
whom it rightly belongs, have not yet been able fully to carry out." but faults Nightingale for asserting “startling facts’ not proved, re London 24 hospitals and country; on contagion and infection: “would lead to hazardous practice and they are marred by a rhetorical artifice,” to which Farr gave his approbation. Lots of ridicule of her position.

188: “Now we leave it to Dr Farr to decide how far Miss Nightingale’s views are consistent with his own of the existence of specific zymotic poisons, and whether he will take the responsibility of advising hospital committees to follow her dictum, and not to isolate ‘infectious’ cases.” can’t prevent all. Even if hospital well ventilated. “Human carelessness” cannot be ignore; R.D. Thomson called for better means of isolating; If our reviewer attacked Miss Nightingale, he would sign his name, but what he attacks are the fallacies which disfigure a valuable work--fallacies which may lead to the loss of many a life, if anyone shall be found rash enough to treat scarlet fever as not infectious, because Miss Nightingale has said that ‘no diseases ought to be considered infectious.’...All this fight has been about one or two incidental matters on which we conceive Miss Nightingale to be wrong, and to have been justly criticised. As regards the whole aim and scope of her labours, and the immense value of “Notes on Hospitals,’ there cannot be two opinions. She is too plain spoken herself to object to fair criticism of its few maculae.”

Editorial “Errors Today and Errors Tomorrow.” New England Journal of Medicine (2003):2570-72. At least 100 patients will die in hospitals in US today because of injuries from their care, not from their diseases, if Institute of Medicine is right


248: issue, study in France on, cf with British, better; St Thomas’ site; “No one has studied this great subject.... Miss Nightingale has given her life to the study of hospitals and hospital organisation, nursing and the govt and teaching of nurses.” Notes on Hospitals. French authorities Husson and Blondel, FN handles more deftly, “Miss Nightingale’s ‘Notes on Hospitals’ is the most instructive and complete treatise on hosp construction which has yet appeared” can hardly put down when take up. Gives tables 249: Farr quoted, re differences by hospital. Dr Guy.

Cites FN that ‘the most delicate test of sanitary conditions in hospitals is afforded by the progress and termination of surgical cases after operation, together with the complications which they present.’” but liable to error to rely on tables as she does. Cites Holmes and Bristowe.

250: Guy attributed increased death rate at KCH to celebrity of
inst; Simon on pyemia; cites FN comparing Scutari with Balaclava
Castle Hosp; “Miss Nightingale is more than justified in laying
the greatest stress on internal and external sanitary conditions,
and we may well require that the character of cases shall be
satisfactorily explained.” Asks hosp surgeons to furnish us with
what they possess; Farr; in addition to surface crowding, FN says
unhealthiness... light. Errors (systematic here re her coverage);
need for hosp stats. ISC. Elsewhere in book discusses infection
and contagion, a few pages, altho a volume wd be needed to do
them justice; “Her doctrines are not stated in a manner which
admits easily of discussion; we cannot accept them; and no effort
is made to place them in a form which can convince.” “The subject
is of great interest and intricacy and the medical advisers of
Miss Nightingale must express their views here at length, and in
a more argumentative form, before they can expect to get converts
amongst our ranks, even though they can claim so illustrious a
deliverer.

Miss Nightingale would distribute fever patients over well-
ventilated wards. Dr Murchison has shown that practically
contagion is disregarded by the physicians of London, who
distribute fever patients through the wards as a less evil than
that resulting from their concentration. They are bolder than
Miss Nightingale.

Pregnant with a great truth--that health in hospital, as out,
depends upon the strictest sanitary regulations, instinct with an
earnest purpose, rich in the results of manifold experience, and
warmed with the vital usefulness of incomparable practical
energy, these notes by Miss Nightingale must henceforth be
studied by everyone who would build, modify or administer any
hospital for the sick.” 30

so, more measured on isolation issue;

Edward-Rees, D. The Story of Nursing. London: Constable Young
Books 1965. Not seen, fake illness

Egan, Moira E. “Nurses, Nuns and Ladies: A Study of Class,
Ethnicity and Religion in the Crimean War,” in Alan Hayes and
Diane Urquhart, eds. Irish Women’s History Reader. Dublin: Irish
sisters had sense of mission, like FN; “Unlike Nightingale,
however, all of the sisters had previous nursing experience”
“Their order had been established amongst other things, to care
for the poor and the sisters from Ireland had ample experience
dealing with cholera and typhus from their earlier work in famine
hospitals, diseases which they also encountered in their work in
the Crimea.” Those sisters from England possessed similar nursing
experience, having worked during cholera epidemics in the 1820s.”
62: “The Sisters of Mercy and Florence Nightingale had different
views of nursing. Nightingale believed that only surgical cases
needed nurses, while the sisters felt that fever patients also
needed attention. In addition, they differed on the question of night work. Nightingale did not want nurses to be in the wards after 8:00 at night and the sisters thought that it was important....” make rounds. Uses Fanny Taylor. Religious controversy, 65: has Mary Stanley recruited by Nightingale.

Egan, Moira E. Nurses Challenging Subordination: Gender, Class and Religion in Britain’s Crimean War. New York. City University of New York 2009. 360 pp. Adviser Bonnie S. Anderson CUNY. Uses nurses’ correspondence other than FN, news articles and docs. Allowed them “to contravene the usual strictures on genteel female behavior and work against anti-Catholic bias.” Concern re Catholic and high Anglican sisters in wards. 191 pp. (Published thesis 360 pp) write a review)

Ehealth Toolkit. Health for Every Nurse. RNAO. Ebook. 4: reproduces polar area colour chart, and says FN founder,


84: Florence Nightingale and Louisa Schuyler (the moving force)
86: the behavior of a ‘better’ class of women.) But the Nightingale nurse
88: male doctors skeptical about the new Nightingale nurse.
89: the doctors at first ignored them all, Nightingale refused to be
Florence Howe 4, launched Feminist Press, first women’s studies programs in U.S.
Hampton, Schuyler and FN “oppression as upper class Victorian women.” Dorothea Dix heiress, “FN and Schuyler”genuine aristocrats” refugees from enforced leisure of Victorian ladyhood. “Nightingale and her immediate disciples left nursing with the indelible stamp of their own class biases. Training emphasized character not skills. The finished products, the Nightingale nurse, was simply the ideal Lady, transplanted from home to the hospital, and absolved of reproductive responsibilities. To the doctor, she brought the wifely virtue of absolute obedience. To the patient, she brought the selfless devotion of a mother. To the lower level Bl hospital employees, she brought the firm but kindly discipline of a household manager accustomed to dealing with servants. But despite the glamorous ‘lady with the lamp’ image, most of the nursing work was just low-paid, heavy-duty housework.” more nonsense; the Nightingale nurse “was not just the projection of upper class ladyhood and the working world: she embodied the very spirit of femininity as defined by sexist Victorian society - she was Woman.” Julia Ward Howe. Woman is the mother of the race.
“Doctoring and nursing arose as complementary functions, and the society which defined nursing as feminine cd... see doctoring as intrinsically 'masculine.' If the nurse was idealized Woman, the doctor was idealized Man – combining...” but no sense of history. Doctors had a profession long before. Did not emerge in the Victorian era as complementary professions.

Eisler, Riane and Potter, Teddie M. Transforming Interprofessional Partnerships: A New Framework for Nursing and Partnership-Based Health Care. Sigma Theta Tau International 2014, has Seacole preceding FN 106-08, FN 108-11 106: The Chalice and the Blade in Nursing: Partners in Healing. ‘Selections from autobiographies, guiding influence “The autobiographies also provide evidence that these early nurses considered practice and listening to narratives to be important parts of their care. Even though the work that nurses do has changed over time, the medicine of nursing is timeless.” notes in makeover

108: FN... “Florence Nightingale is recognized for her work in the Crimea, where she was able to dramatically decrease the death rate of British soldiers by efficiently managing the hospital environment. In many ways, Nightingale was an expert hospital administrator. In addition, she was well trained in stats and used this skill to demonstrate the effectiveness of her interventions. Cites Bostridge, NO Page. “While Nightingale believed that nursing was different from--but equal to--medicine, the medical est was very pleased with her model of nursing care.” did not threaten their territory. “Despite Nightingale’s work, public and medical establishments were sill unable to break free of the domination paradigm’s rigid hierarchies.” classic work NonN, “N realized, however, that attention to the env, including air, cleanliness, light, warmth, food and levels of noise, is essential to healing (Nightingale 1860/1969 NO PAGE Ref). Aware of subjugation p 124: “Nightingale believed hat the only way nurses cd overcome this oppressive barrier was through acute observation, careful documentation and clear communication. NO PAGE REF. Stress on obs okay. 11: ends: Nightingale’s brilliance lay in her innate understanding that, when nature and nurses collaborate, healing is possible.” bullshit!


Elizabeth Breeze, Toronto Hosp for Sick Children grad, 1910 moved to Vancouver, first school nurse, then first director of Public Health Nursing there; 1938 publ text for high school stuent, Health Essentials for Chaadian Schools; 1913 Jean Gunn became
supt of nruses at TGH

Harmer, grad of TGH 1913, taught at Vassar, Yale and McGill, long
shifts of work in hospitals

Ellis, H., “Florence Nightingale: Nurse and Public Health

Elsevier is Dutch, part of Reed Elsevier Amsterdam, also UK, USA,
Mexico, Brazil Spain and elsewhere, Lancet.

Emory, Florence H.M. Public Health Nursing in Canada: Principles
and Practice. Toronto: Macmillan 1945. not good for my purposes.

Emrys-Roberts, Meyrick. The Cottage Hospitals 1869-1990 Arrival,
after FN. Appendix lists, but no mention of Herbert at
Bournemouth. Uses W-S as source.

Enloe, Cynthia. Maneuvers: The International Politics of
Militarizing Women’s Lives. Berkeley: University of California
went to Egypt, endnote 6
200: Cr War turning point; p 40 for Seacole
201: FN, and SH, impressed with her dedication to Xn virtue, her
charitable work and her administrative capacities, Herbert was
asking for her assistance in waging the Crimean War. She would
have an official appointment.” cites Strachey, “38 handpicked
women” “Despite her avowed Christian devotion, Nightingale did
not see her objective to be the reduction of militarism; rather,
she sought to make militarism more efficient and humane. She did
not question Britain’s attempts to use its military might to
expand its empire. Nor did she doubt either the natural fit
between masculinity and soldiering or between femininity and
caring. Endnote 8. What Nightingale did challenge--with energetic
persistance and the strategic acumen of a consummate political
insider--was (1) the authority of male military surgeons; (2)
their prevailing assumption that hygiene, nutrition and
administrative order were irrelevant to wounded and ill. He
produced the first permanent photograph.
soldier’s recovery; (3) the common notion held by military
surgeons and their civilian male superiors....” And only
marginalized women, camp followers, shd be allowed near a
battlefield. “The presence of professionalized women military
nurses in the famed MASH tents on the Korean battlefields one
hundred years later testifies to Florence Nightingale’s success
in partially dismantling that military culture..”
201: “Nightingale and her contingent of nurses, mostly unmarried
young women from the English middle class, arrived at Scutari on
November 202:4, 1954..... Seacole
Then more on FN and hospitals, hell, corridors. Sewers. FN brought supplies. Quite good on FN. Need endnotes.


Evans, Doris Heale. The Story of Florence Nightingale. London: Thos Nelson & Sons 88 pp. Pop book, illus, no index, no refs. Nice colour pics. 32: Scutari BH, not clean. 37: Every night she used to walk round all the wards, and pause beside every patient to make sure that no one’s needs had been forgotten.” must have been 4 miles. No. Stanley group p 39; 50: awaiting FN were Peter, the Russian boy brought in as a prisoner, no parents or friends, big puppy called Rousch, 3 adopted children. “Florence” and “Mr Sidney Herbert” not bad book

Evans, E.P. “Nursing in Australia.” International Nursing Review. 12,260 (1936):260-64. And translated into Fr and German; notes hostility of the medical staff to the first nurses (261); lady supt had entire resp of nursing, also by “wardsmen” and internal mgt of wards, and to est and supt tr school (all along FN lines)


on Hosps wrote Notes on Nursing, a best seller, although short, most known of her works. For care in families, ventilation and heating, noise, arrs, bed and bedding, light, cleanliness and sauberkeit in room and place, personal cleanliness and observ of the sick. Infection, cleanliness, fresh air, hand and finger washing, and more in Sick Nursing, hospital hygiene. Influence of Scutari lazarett, 202: FN had bereits eine holistische durchstrukturierte, alle Aspekte umfassende Konzeption der Krankenhausthygiene entwickelt.... good coverage, hygiene as preventive discipline. 203: nosokommiale Infektionen London hosps mortality and mortality of nurses 16%


fact/value distinction. Esp in Hume empiricism, that knowledge can only come from sensory experience, dated particularly to John Locke’s Essay concerning Human Understanding


Farmer, Alan. The Experience of Warfare in Britain: Crimea, Boer and the First World War 1854-1929. Abingdon: Hodder Education 2011. 59-65. Lots of good points on FN and war, but has Seacole section, and feel for Hugh Small line “highest death rates” in her hosp, and opposed vote for women
59: her work long recognized, others not. Bridgeman (Crimea in Dec 1854, Eliz Davis, “Mary Stanley, a convert to Catholicism, took out a predominately Catholic group of nurses to work at the hospital at Koulali” yes, but left!
60: 52 % of patients at Scutari died in Feb 1855. At this stage, she had no better und of the hazards of polluted water, overcrowding, lack of ventilation and poor hygiene than army doctors.” but became heroine and lady of the lamp. Good on improvements she got in. Stats
63: “According to historian Hugh Small, she effectively presided over ‘a death camp’. While she helped her patients to die in greater comfort, she did not save their lives. Not until a San Com was sent out by the govt in March 1855 was there a marked improvement.” flushed... “Once she realised her mistake after 1856, she worked incessantly to improve matters in army and civilian hospitals.” role model, but “she did not assist, nor was interested in, the 61: cause of equal rights. (She opposed women’s suffrage.’) no respect for women in general...

Farquhar, T. Dr Farquhar’s Notes on Miss Nightingale’s Questions Relative to Sanitation in Algeria and India. B.P.1/8.(1) April 1867. Sec to viceroy, 16 pp. 1: FN on report of Fr admin of Algeria, cf India. Report on the Mortality in Algeria July 1866. Fr govt saw nec of stats. FN comment on cf of mortality of troops in India and in Algeria 1859-66. FN: The Algerian report shows that the 21.25 includes 415 men killed and that the actual death rate in hospital from all causes was 14.43 The additional 2.19 being the amount due field service and valuable in showing the field service does not necessarily entail an enormous mortality. Farquhar in text 14: In para 6, Miss Nightingale asks what can be done by the executive in regard to an outbreak of epidemic cholera in a native city under the present san system; this volume also has Govt Life Insurance; Report on the First Census in Mysore.


Farr, William. “Miss Nightingale’s ‘Notes on Hospitals.’” Medical Times and Gazette (18 February 1864):186-87. Followed by rebuttal by editor. 187: “She probes all the defects which hospitals ways of death to their inmates. She collects plans; she consults engineers; and she brings the whole of the facts together in a clear, practical form, and holds out hopes that general hospitals may yet benefit mankind directly, and not merely as pathological observatories and medical schools.” Her new edition, in his
opinion, was “the most judicious, complete and masterly treatise that has recently appeared on any subject.”

Farr, W. “Mortality in Hospitals,” Lancet (9 April 1864):420-22. Dispute with Holmes on St T. 452: “While this was going on, the third edition of Miss Nightingale’s "Notes on Hospitals" appeared, and she was immediately attacked in a review with unwonted severity, and told that she was only let off easily by her magnanimous critic because she was ‘a lady’. Now I have that respect for Miss Nightingale which all of us feel for an English lady who devotes a noble life to the service of her country, but should not on that account have interfered, as she is well able to defend herself against such attacks. But the reviewer assailed a method of calculation which she had, after careful examination, adopted, which he did not understand, and for which I was responsible. The method is that generally employed in determining the rate of mortality and is perfectly applicable to hospitals.”

Holmes, T. “Mortality in Hospitals.” Lancet (26 March 1864):365-66. re its leading article in Feb 27th, Farr

Holmes, T. “Mortality in Hospitals.” Lancet (16 April 1864):451-2. 451: “Dr Farr goes on to insinuate that I am the writer of a review which has displeased him, on Miss Nightingale’s "Notes on Hospitals," which is not the fact. I neither wrote that review, nor have the least idea of who was the author of it.”

Holmes, T. “Mortality in Hospitals.” Lancet (23 April 1864):469-. Dispute with T. Holmes on


Farrar, Frederic William, Rev. “The People of England, a Lecture.” vol 7, 7:23 “The bravery of womanhood is no less than that of manhood, and the names of Sarah Martin and Anne Chisholm, and Florence Nightingale deserve as bright a record in the annals of courage as those of Wellington or Williams. All this too is by God’s blessing a portion of our Saxon heritage.” A Lecture delivered before the Harrow Literary Institution October 13th 1857. London: Longman, Brown, Green, Longmans, & Roberts. fellow of TCC, and asst master of Harrow


13: Conservatives opposed intro of NHS but changed mind in 1950;

Fawcett, Mrs Henry. Some Eminent Women of Our Times: Short Biographical Sketches. New York: Macmillan 231 pages. BLC 28 chapters, includes Americans, Lucretia Mott; Sister Dora in; Fry, Carpenter, Caroline Herschel, Sarah Martin, Somerville, QV, HM, Chapter VII is FN 69-78; focus on public work, because she shy; 70: req of training, a young woman put in charge of a dispensary and hosp for women after studying 2 years med, wd not do this with a man; 71: Kai; FN studied 10 years before nursing before considered herself qualified to undertake direction even of a small hosp; 73: Justin McCarthy, History of Our Own Times on hospitals at Scutari being in absolutely chaotic conditions; medical stores left to decay at Varna and found lying useless in Balaklava Bay... stores; frightful mortality; Mackenzie, History of the Nineteenth Century gives figures on losses in Crimea [not seen] deaths on ships; 74: “Ont he 21st of October 1854, Miss Nightingale, accompanied by 42 other ladies, all trained nurses, set sail for the Crimea.” not quite; proved fully equal to the task; known to stay 24 hours at a stretch in order to see the wounded provided with every means of easing their conditions. Not just nursing but “removing the causes which had made the camp and the hospitals so deadly to their inmates.” “Fact that a few months after her arrival ten thousand sick men were under her care....” 75: attack of illness; fund, schools; 76: Geneva Convention, red cross, sick, adviser of govts, army on proper sanitary arrangements; contributed valuable state papers to govt; India, irrigation, NonN NonH; lives of women to lift up and improve, give a higher conception of their duties and resp. “She supports the extension of parliamentary representation to women generally, however, putting in a word in what she writes on the subject to remind people that reps will never be better than the people they represent. Therefore the most important thing for men as well as for women is to improve the education and morality of the elector, and then Parliament will improve itself. Every honest effort for the good of men or women has her sympathy.”


Fawcett, Jacqueline and DeSanto-Madeya, Susan. Contemporary Nursing Knowledge: Analysis and Evaluation of Nursing Models. 3rd ed. F.A. Davis 2012, 479 pages; only FN ref is to NonN
FN refs 56: System model Johnson, human beings who are ill, not diseases.
57: FN ack as source by Johnson in behavioral model
114: FN and Conservation model. Ref to Levine, parameters of conservation of energy; person can only be understood in the context of env
136 232 260 435
232: Rogers 1978a traced env concern to FN; Rogerian science of irreducible human beings.


Fealy, Gerard M. “‘A Place for the Better Technical Education of Nurses’: The Dublin Metropolitan Technical School for Nurses, 1893-1969.” Nursing History Review 13 (2005): two large Catholic hosps in Dublin, Sisters of Charity founded St Vincent’s at St Stephen’s Green in 1834, followed by the Sisters of Mercy, Mater Misericordiae, Eccles St 1861, In 1854 Sisters of Mercy took over the mgt of nursing at the Charitable Inf, Jervis St., a Prot hosp; (i.e. to supervise the nursing)


“Nightingale rejected the doctrine of the germ theory, writing that there was no end of the absurdities connected with it,” citing Ayliffe and English 2003:81. She was one of the many opponents of the theory. Sceptic also.

11: by 1851 63 wkhs with total pop of 200,000+ for relief of
destitution, but became an important mechanism for medical relief; each had an inf; 13: wkh reform in England, Twining and Rathbone; 14: Sisters of Mercy had 30 years of exp, took over mgt of char inf in Dublin 1854, Limerick etc.; 15: vol hosps; 17: deficiencies in nursing tho’ med school good; 21: Dublin Hosps Commission, a Parl comm set up in 1885; in 1874 the Dublin Hosp Sunday Fund as fundraising; high patronage, got collection on a designated Sunday, intended to be Cath and Prot; got support of Archbp Trench, Prot but not RC Cullen; 22: com on nursing, Dublin Nurses Tr Inst already existed; 31: inquiries in various years; Bd of Superintendence of Dublin hosps. DHSF; 41 2 case studies of nursing reform, City of Dublin Hosp, Baggot St.; 58: lady supts under new system; (impressive); incl Helen Shuter, succ Susan Beresford at City of Dublin Hosp; Jane Eleanor Hughes, trained at Brownlow Hill was first lady supt at Whitworth Med Hosp; 58: “While nursing reform was initiated by Anglican social reformers of the Dublin middle and upper classes....” lady supts implemented the reforms. 59: had same views on health and san, morality and educ and deference. “It is unsurprising that they should take the Nightingale model as their model for nursing.” 1. Intro l. while nursing origins by Catholic sisterhood, in early 19th cen. “the modern secular professional nurse emerged as a result of an Anglican social reform movement in the late nineteenth century. Conducted initially in the Protestant voluntary hospitals in Dublin, nursing reform was led by “...In common with the reform of nursing in England, an integral part of the reform process in Ireland was the introduction of nurse training schemes based on the Nightingale model of hospital apprenticeship training.” Sioban Nelson says FN influenced by Bridgeman, took notes! Mena Drew. Hints on Nursing. 1889 as “Lady Twining” and Rathbone, Twining in 1853 visiting Strand. By 1895 63 bds of guardians placed wkhs in hands of nuns but “only partial” reforms compared with the voluntary hospitals in the 1890s. C Helmstadter “From the private” Nursing History Review 9 (2001):127-40. Cites Scanlan, Irish Nurse 66: Dr Steevens’s Hosp first hospital in Dublin to receive nurses for training in its wards; both it and Sir Patrick Dun’s hospitals est own tr schools in 1879 and 1883. Sisters of Mercy est tr schools for lay probs at the Charitable Infirmary and the Mater Misericordiae Hosp in 1891; tr school for probs at St Vincent’s in 1892, so 1890s; author also of Adelaide Hospital School of Nursing 1859-2009 2009, on ed board of JCN

Fee, Elizabeth and Garofalo, Mary E. “Florence Nightingale and the Crimean War.” American Journal of Public Health 100,9 (September 2010):1591. 1 pager. “Brought a team of 38 volunteer nurses” [paid mainly] but serious coverage. Fee at NLM Bethesda. 4 pp. Good pic with lots of soldiers NIH.

Felder, Deborah G. The 100 Most Influential Women of All Time: A
Ranking Past and Present. Secaucus NJ: Carol 1997. 76-79. Florence Nightingale 1820-1910. 76: cites William Richmond, The Richmond Papers, “Miss Nightingale did inspire awe, not because one felt afraid of her per se, but because the very essence of Truth seemed to emanate from her, and because of her perfect fearlessness in telling it.” her seminal work Notes on Hospitals, 1859, cites preface, do the sick no harm. (wrong date). 77: FN quote “illustrates the state of medical care as she found it in the 1840s when she abandoned her expected role as a society wit and beauty to single-handedly raise the standard of hospital and nursing care in Great Britain, which was eventually modeled worldwide. As a pioneer in nursing, with a genius for organization and innovation, Nightingale completely changed the profession, which had been dominated by uninformed and socially disreputable women....” family, call. family let her “train as a nurse at the Institute of Protestant Deaconesses at Kai”. 1853. 78: made the Institution for Gentlewomen “a model hospital of the time.” NO. practical improvements. and “She also undertook to train nurses, ensuring their professional competence as well as their moral habits to attract respectable women to the profession.” NO then; then legend, Crimea, no bandages. 78: “On call twenty-four hours a day, it was not unusual for her to be on her knees bandaging patients for eight hours at a time. She contracted almost every illness offered by the war, including dysentery [sp], rheumatism and a fever that nearly killed her. W-S cited. heroine. but est school. exaggerated praise

Fenne, Jennifer J. “Every Woman is a Nurse:: Domestic Nurses in Nineteenth-Century English Popular Literature. PhD thesis Univ of Wisc-Madison 2000. cites FN printed material only

Festini, F., Giusti, F. “The grandest hero who has ever lived: an unpublished letter written by Florence Nightingale about Garibaldi.” Prof Inferm 65,1 (Jan-Mar 2012):11-13. On 150th anniversary of unity of Italy Italian nurses cannot forget that FN herself, was a fervid supporter of Risorgimento and of Italian unity.


Fields, Willa Lee. “Menotring in Nursing” A Historical Approach.” Nurs Outlook 39,6 (1991 Nov-Dec):257-61 author RN DNSc FN’s mentor gave her opportuntiy to work as anurse during the cr Ear; Linda Richards, Nutting and Goodrich all encouraged by their respective mentors to develop professionally; term “mentor” friend of Ulysses, trust with son; mentor “Sir Sidney Herbert” met in 1847 in Rome; had a great influence on her; relationship of “mentor and mentee” NO. Also her “closest partner”; Isabel Hampton Robb was Nutting’s first mentor

Figes, Orlando. “What You Might Not Have Known about Florence Nightingale,” boldly in his emphasis Facebook 12 April 2011, Metropolitan books. From Orlando Figes, *The Crimean War: A History*. New York: Metropolitan Books/Henry Hold c2010. 2011. 576 pp Appt of FN by SH. Domineering, dictatorial. “Her selection criteria were ruthlessly functional [but she did not do the selecting, but spent the brief week she had meeting with heads of organizations she hoped would send nurses, and with War Office officials]: she favoured younger women from the lower classes, who she thought would buckle down to the hard work and conditions that lay ahead, and she took a group of nuns with experience of nursing to supervise their work [but the nuns had already left and she only met them in Paris], regarding them as a practical concession to the Irish Catholics who made up one third of the army’s rank and file, but she rejected hundreds of applications from well meaning middle-class women whose sensitivities she feared would make them ‘less manageable.’ By the end of December Nightingale had a second team of nurses at her disposal [but she did not even know they were coming, they upset the religious balance, the doctors did not want any more nurses, and there was no space for them] and control of the Times Crimean Fund....” death rates in hosp. Cesspool, FN unaware [she was very aware of the cesspool problem as is clear in her reports after the war; on the spot, she supervised the removal of tubs of excreta from the wards], “The soldiers in her care [she did not run the hospital, but only the nursing at it; doctors had reported the sewer and drainage defects before her arrival, but the War Office did nothing to correct them] would have had a better chance of survival in any Turkish village than in her [War Office] hospitals in Scutari.” Fr


301: FN inspired by Xn faith; but wrong on Kai “where she observed Pastor Theodor Fliedner and his deaconesses care for the sick. Graduating from Kaiserswerth in 1851, Nightingale brought back the principles of nursing to the hospital in Harley Street, where she took over...” “It was these principles--basic 302: cleanliness and good housekeeping on the wards--that Nightingale would take to the Crimea. There was nothing new in her ideas.....” [but her idea that men should have soap, and would
use it and wanted it was very new] main problem was lack of manpower and resources, a problem FN wd only partly overcome [yes] SH: appointed, okay on; “Nightingale was domineering by nature but she needed to assumed a dictatorial control over her nurses if she was to implement her organizational changes and gain the respect of the military est. There was no recognized body of professional nurses from which she cd draw her team in Turkey, so with the help of Mrs Herbert she had to establish one herself.” selection.... arrival.... “The French had already taken over the best buildings for their hospitals and those left for the British were badly overcrowded and in a dreadful state.” wounded an dying lying together....

304: deaths....govt sent san com. “It found that the main Barrack Hospital was built on top of a cesspool, that the sewers were leaking, with sewage spilling into the drinking water. Nightingale was unaware of the danger, for she believed that infection came from contaminated vapours, but the sanitation in the hospital was clearly inadequate. The soldiers in her care would have had a better chance of survival in any Turkish village than in her hospitals in Scutari.” “Her hospitals” [Small not cited, but in biblio; A. Smith not in, or any of her books/confid report]

Figes, who had not one report by Nightingale in his bibliography, but Hugh Small’s denunciation of her work, echoes his views, without citing them explicitly. Thus while he correctly reported the findings of the Sanitary Commission sent out by the prime minister in March 1855 about the Barrack Hospital being “on top of a cesspool,” with the sewers “leaking and “sewage spilling into the drinking water,” he blamed Nightingale for being “unaware of the danger,” although it was one reported by medical doctors to their superiors months before her arrival, and yet not acted on. He then quite incorrectly (giving no source) held that she missed this because she “believed that infection came from contaminated vapours.” That the “sanitation was clearly inadequate,” which he thought she missed, is a major point of her three major works on the war after in 1858 and 1859, which he apparently did not read. The hospitals which were so bad then became, he said, echoing Small’s frequent accusation: “her hospitals” (304). The principal medical officer, Dr John Hall, who as inspector general of hospitals had inspected and passed the hospital, got not a word of blame.

Fillmore, Genevieve M. “Florence Nightingale by Ruth Fox Hume.” American Journal of Nursing 61,10 (October 1961):32. Florence Nightingale by Ruth Fox Hume. Review by Fillmore of book, 184 PP. Bio, Landmark Series for young readers. 10-15, life, Cr War, professional. “There is no doubt that she was gentle when the situation demanded. But her views on nurses and nursing were practical and completely down to earth.” not sentimental. Good for high school.


323: "The death rate at Scutari was forty-two percent, in the Kululi Hospital it rose to fifty-two percent. Four patients out of every five who underwent amputation died of hospital gangrene." patriotic fund; cites letters, no sources; Longfellow poem, [Koulali]
Macdonald of fund
332: "The miracle wrought by this band of nurses--this entrance of woman into the hell of British hospitals in the East--is capable of being expressed in cold statistics. They found the death rate in the great hospital at Scutari 52 percent; they brought it down to 2 percent!" [contradicts earlier point, but stats wrong]
so: even in 1898 known that the death rate higher at Koulali


Fitzpatrick, Joyce J. “Reflections on Nightingale’s Perspective of Nursing.” Commemorative edition 18-22. [author dean Case Western Reserve] Laws of health relevant; v positive; challenged s.q. Laws of health; 19: empiricism, consistent with her view of science, wellness paradigm; 20 holistic env factors 21: knowing in nursing, a calling [short but okay]


Fletcher, Ian and Natalia Ishchenko. The Crimean War: A Clash of Empires. Staplehurst: Spellmount 2004, 557 pp tribute to Hugh Small! Chap 15 Angels of Mercy 311-21, Russian nurses and “Florence and her nurses” but acknowledges the problems not of her creation; 318: Mother Seacole; 321: endnote FN controversial, cites Hugh Small “One of the better modern accounts of her work and the myths and legends surrounding her reputation”; book has lots of research, but not good on FN; Ian Fletcher and Natalia
Ishchenko, in *The Crimean War: A Clash of Empires*, dismissed the "saviour" of the British Army "legend," and while they acknowledged that the "enormous problems were no fault of hers," they repeated, citing Small--never her own reports--that "her hospital was easily twice as lethal" as the Crimean hospitals (317).

Has section on Russian nursing. FN "Florence and her nurses" another rude book. 316: Women long allowed to march with army, Peninsula 6 per company; "Amongst those who brought nurses to the Crimea was Miss Mary Stanley, who arrived after Florence Nightingale and immediately found herself at odds with the somewhat egotistical nurse, so much so that she did not remain long at Scutari but took her group of twenty nurses to work in the hospital at Kulali [Koulali], also on the Bosphorus.

Elizabeth Davis was another nurse who clashed with Nightingale after applying to work in the Crimean - for hands-on approach, "unlike FN" 317: legend of saviour of Br soldier, but not, altho "The enormous problems were no fault of hers, of course, and were largely to do with the tremendous number of casualties that resulted from the Battle of Inkerman."..."Despite Florence's efforts at Scutari the men contd to die in droves." high death rate in "her" hospital "her hospital was easily twice as lethal even without the voyage." citing Hugh Small. 317-18: FN "blinkered" and to extent doctors; (but FN did recognize overcrowding) this book botches expl badly; no explicit credit to san com, but vaguely to govt vs army; 318: Seacole, "Mary" 319: Seacole left with promissory notes by officers, not honoured and virtually bankrupt. This book relies entirely on Hugh Small on FN, and no citation of her reports!

FitzPatrick Mary Kate and Hartsock, Robbi. "The Evolution of Trauma Nursing," 219-31. 219: "Trauma Nursing Roots in Military Conflict" beginning in era of FN 220: in US also, General George Washington requested at start of Rev War at Second Continental Congress to provide for est of “female nurses to attend to the sick” 1901 Army Nurse Corps permanently established, restricted to women; 1904 American Red Cross had provision for a flexible nursing serve; 1908 US Navy Nurse Corps est

Trunkey, Donald D. |Trauma Care and Trauma Systems: Past, Present and Future." 3-9: Dominique Larrey, Napoleon’s surgeon, systematic, intro “flying ambulance” sole purpose to provide rapid removal of wounded from field; and hospital as close to front as possible; “wound shock”
10: Civil War deaths
10-11, 219-20

Florence Nightingale: The Lady with the Lamp. Video recording 77
min VHS, Athens Ohio Helene Fuld Health Trust c1990. Uses own words, producer David Wallace; director Thaddeus Coberg; script Irene Palmer not seen, may be okay


Florence Nightingale: Kvinne I Krig. 1 woman paly. Bergen Norway 1990. FN Mus 0963


Florence Nightingale School of Nursing and Midwifery, DJ Newham Centre for Applied Biomedical Research, School of Biomedical Scs and CDA Wolfe,


Florence Nightingale’s Beliefs and Primary Health Care. Online. Not seen

Florence Nightingale Window, Sage Chapel, Cornell University. “St Florence Nightingale”
To the Memory of Mary Bartlett Hill 1818-1887, this window is erected by her classmates and fellow students. Nice window, Chapel, non-denominationanl, opened 1875

FN’s tribute to Dr Sutherland, in the Times, echoed her praise of Sidney Herbert on his death, judging by comparing “the vital statistics of the Army prior to the time of the Crimea War and those of the present date,” for Herbert, a simpler judgment “from a comparison between the vital statistics of the Army before the Crimean War and after that critical and unfortunate period.” e: Nightingale, “Obituary: Dr Sutherland,” Times 24 July 1891 8D. Nightingale either sent in similar obituaries to other
publications, or they used her words, Illustrated London News 1 August 1891.

Obituary in Lancet 25 July 1891; quite different, long. Drs Gavin and Milroy assisted; Sydney Herbert! Sanitation the occupation of his life” Reports beneficial, “change they brought about was enormous, and will be best understood by a comparison between the vital statistics of the army prior to the time of the Crimean War and those of the present date.” Algeria; contributed, with Douglas Galton “some excellent papers on hospital construction to the Lancet.” deafness prevented taking part in discussion, but public services rendered.


Ford, Irene A. "The Florence Nightingale Memorial Service.” The Canadian Nurse 504-11. service held at St Paul’s Bloor St. 30 Sept. 1910, Reginald Heber’s hymn, The Son of God Goes Forth to War, sermon by Archdeacon Cody etc. service described

Forster, Margaret. “Florence Nightingale 1829-1910,” in Significant Sisters: The Grassroots of Active Feminism 1839-1939. Penguin, London: Martin Secker & Warburg 1984: 93-129. Shows some nuance, but repeats errors and comparison with Eliz Blackwell rude: “Florence Nightingale rejected absolutely any suggestion that women should enter men’s spheres and compete to be as good as they were” wanted own sphere. “Therefore she was not interested in women becoming doctors and would do nothing to help them along.” at first friendly to EB, “she nevertheless sneered at her in private and said she had ‘only tried to be a man’” sounded like contempt for own sex, won’t work bit, however wrong again: “Nightingale’s equally famous refusal to become a member of the first Committee of the London National Society for Women’s Suffrage”, acks did have a feminism, (all on p 94); cited sympathy letter, “brutal indifference” statement shows she was concerned. Florence, Fanny and William; p 102: strain of conforming to parents “led her to a nervous breakdown” so to Rome; 104 has meeting with RMM 1842 at Palmerstons; sources mainly published, uses Woodham-Smith, also BL; 107 uses W-S “Institution for Sick Gentlewomen in Distressed Circumstances”; 109 states 24 of 38 original nurses were nuns; Parthe and Hilary, but men get full names: 125: The cornerstone of Florence Nightingale’s feminism was her refusal to admit that women were discriminated against, that all that was wrong was the women themselves....Success blinded her to realities of the situation even though she was so proud of her clear-sightedness. 127: bitterly disappointed that floodgates open but no hordes. But credits p 128: “made paid employment a thing to be desired. She herself was rich but she understood the significance of money for services rendered.” admired E Fry and various sisters of charity,
but “she did not want nursing to be founded on notions of voluntary contribution.” but 129: Florence Nightingale had laid down too firmly the need for self-abnegation. It was a curse called down on feminism”, choice between marriage and children and career; but nothing on CDA, workhouses, work style, stats

Fortier, Paula Anne. Crescent City. Nightingale: Gender, Race, Class and the Professionalization of Nursing for Women in New Orleans, Louisiana. Univ of New Orleans 2014. FN and Clara Barton PhD urban studies Urban history; chair Dr Robert L Dupont, Connie Z Atkinson as editor; Mikie Pfeffer women in New Orleans 283 pages; Charity Hospital School opened; Darlene Clark Hine, Black Women in White: Racial Conflict and Cooperation in the Nursing Profession 1890–1950 Indiana Univ Press 1989; 5: FN started first modern school of nursing in 1860, a reaction to the inexperience of female volunteer nurses who served the Br army during the Cr War. Her school became the role model for the first Am schools of nursing that opened during the Reconstruction. “civil war, Clara Barton developed triage, after war founded Am Red Cross 6: segregation biblio has FN NonN only


7: subjugated knowledges, not blocks of hi knowledges that were present in the functional and systematic ensembles, but which were masked and the critique was able to reveal their existence by using... the tools of scholarship.” No. “A while series of knowledges that have been disqualified as nonconceptual knowledges, as insufficiently elaborated knowledges, naive knowledges, hierarchically inferior knowledges, knowledges that are below the required level of erudition or scientificity.” then reappearance from below, “of these unqualified or even disqualified knowledges, it is thanks to the reappearance of these knowledges: the knowledge of the psychiatrized, the patient, the nurse, the doctor, that is parallel to, marginal to, medical knowledge, the knowledge of the delinquent....” common sense,

vs historical, meticulous, precise technical expertise; and these singular local knowledges, margins; 2 forms of knowledge, the varied and the disqualified. “A historical knowledge of struggles.” “A meticulous rediscovery of struggles and the raw memory of fights.” “The removal of the tyranny of overall discourses, with their hierarchies and all the privileges enjoyed by theoretical vanguards.” Genealogy of this coupling together of scholarly erudition and local memories, “which allows us to
constitute a hi knowledge of struggles and to make use of that knowledge in contemporary tactics.” not contrast of “the abstract unity of 9: theory with the concrete multiplicity of the facts. “ not a scientism that disqualified speculation by contrasting it with the rigor of well est bodies of knowledge. not an empiricism that runs through the genealogical project, nor doe sit lead to a positivism in the normal sense of the word. “It is a way of playing local, discontinuous, disqualified or non-legitimized knowledges off against the unitary theoretical instance that claims to be able to filter them, reorganize them into a hierarchy, organize them in the name of a true body of knowledge, in the name of the rights of a science that is in the hands of the few.” Genealogies are antisciences; insurrection of knowledges, “against the centralizing power effects that are bound up with the institutionalization and workings of any sc discourse organized in a society such as ours.” “Genealogy has to fight the power effects characteristic of any discourse that is regarded as scientific.” Marxism as a sc. 12: a battle. “The battle knowledges are waging against the power effects of sc discourse” does not want, last thing I want “is give them, superimpose on them, a sort of theoretical crown that would unify them” but identify what at stake when knowledges begin to challenge, struggle against and rise up against the inst and the power and knowledge effects of sc discourse.” 
13: collapse of Nazism and retreat of Stalinism, Marxist conception of power.
15: “Power is essentially that which represses. Power is that which represses nature, instinct, a class or individuals.” Hegel. “Power is indeed the implementation and deployment of a relationship of force, rather than analyzing it in terms of surrender, contract and alienation....” But conflict, confrontation and war.

_Foundations of Basic Nursing. Study Guide. 3rd ed._

Fowler, Marsha Diane Mary, et al, eds. _Religion, Religious Ethics and Nursing_. New York: Springer Publishing 2012, Reverend. 4 Authors. Sally Thorne review and Sioban; Barbara Mann Wall on Am RC nursing 151 Hinduism and nursing 197 Janice Clark Christianity and Nursing 213 Islam and... FN 12, 21-2, 49, 63, 80 152 no Seacole Chapter 1 Religion and Nursing. Marsha D. Fowler 12: “Nursing’s Interaction with Religion.” FN had religious sensibility, 4 experiences of call; cites Sp Journey, and Theology Ebook 2011. UBC, UofT el; 22: Marsh D. Fowler Chapter 1 “Religion and Nursing” 1-26; 9: cites Hampton Robb for rigorous nursing educ (end 49, Nursing Ethics)’ 12: call. 14: nursing schools to be based in sc, but Nightingale tied religion and science together, fixed laws God had ordained, but
railed against positivism, in Fraser’s article: science meant observing God’s laws of nature and cooperating with them to prevent disease and promote health; “For Nightingale, education, specifically nonsectarian education and science were the soil of nursing, but faith was its bedrock.”

16: FN holistic, 21, Xn faith and lifelong student of theology; travels, writings on Zoroastrianism, Manic, Socin, Jansenism, Muh, Judaism, Sufism and more; religion of surpassing importance to her but “she saw fit, however, to move nursing both into formal educ and into formally secular educ.” did not preclude study of religion for improvement of patient care. But nursing has neglected religion for the past 150 years. 22: greater self-und of the profession would result, time “that today’s nursing educ, research an practice take from Nightingale a measure of her intellectual commitment to the exploration of religion.”

24: cites FN: Spiritual Journey [author, Azusa Pacific University, Azusa, PhD, Mdiv, RN FAAn, Haggard School of Theology, Azusa CA]

Frances Payne Bolton School of Nursing. Shaping Nursing Knowledge and Practice. Western Reserve.


33: Wortley Montagu on inoculation Byzantine

39: “The name of Florence Nightingale sent a thrill of joy through the hearts of the brave men who lay writhing in agony on the wretched beds and damp floors of the hospitals of Balaklava and Scutari. No wonder is it that they kissed her shadow, when it fell upon their mangled forms, as she passed either in or out of the miserable wards..... guardian angel “She was their best and truest earthly friend - she was mother, sister, wife to them. They knew it, and those who were to leave the dreary rooms only for the still drearier grave..... [good grief] 40: got proper food, clothing, beds, comforts and efficient washing, dressed their wounds, prayed with them “supported them in her arms when dying” 41: to FN in debt for knowing that superior hygienic regime can be maintained than was generally supposed possible. Dr Marion Sims.

Francis, Robert. Press release on First Report. “It is appropriate to echo a statement made by Florence Nightingale 150 years ago, It may seem a strange principle to enunciate as the very first requirement in a hospital that it should do the sick no harm. Unfortunately, this requirement has not been met at Stafford Hospital.”

Frank, Sister Charles Marie. *Foundations of Nursing*. 2nd ed. Philadelphia: Saunders 1959 [1853] nihil obstat. Sister of Charity of the Incarnate Word. small bit on FN, 97-109, mainly uses Woodham-Smith, Sir Sidney Herbert. has good pic from Parke-Davis, in Crimea, nursing; 167 says Mack founded St Catherine’s Tr School and Nurses’ Home 1874, a Miss Money brought 2 N nurses and 2 probs (from Gibbon); 168: Blockley, the Phil General Hosp, brought in by Alice Fisher, when 4000 beds and in a deplorable condition: Fisher da of a minister, literary career until father ill, nursed him, “hand-picked for the task by Miss Nightingale” opened 7 Jan 1885, Fisher died at the hosp age 49

Frankel, Lee K. Letter to Editor, “Memories of Miss Nightingale.” *American Journal of Nursing*. 15, 1 (October 1914):58


Freshwater, Dawn. Transformatory Learning in Nurse Education. Thesis PhD Nottingham 1998. Refs to FN online

Fried, B.M. “Pirogoff in the Crimean Campaign 1854-1855.” *Bulletin of the New York Academy of Medicine* 31,7 (July 1955):519-36. Cite. 1/3 Russian pop were serfs, more than half the army, beasts of burden and cannon fodder; US physicians in Paris volunteered, but all died or ill; backward medicine in Russia, Pirogov trained in Estonia and Germany; excerpts from his
letters to his wife, appalling neglect; 524: arrived Sebastopol 12 Nov 1854;
Good on French origins of mil medicine. 526: Henry IV built a mil hosp and staff with surgeons, then Richelieu developed by instituting sedentary hospitals and training mil surgeons; Louis XIV made advances, copied by Frederick the Great;
Pirogoff shd be 1 physician for every 107 men; a division of 16,000 men shd have at least 77 physicians (529); 531: triage in 4 categories: 1, hopeless, to priests and nurses; 2, urgent ops; 3, postpone op 1 or 2 days, evacuate to nearby hosp; 4, slightly wounded, get back to unit; practice was to get bullet out, but surgeons used fingers, unwashed, 532: Pirogoff stressed care, not to investigate with fingers, refrain from attempting to extract splinter and “generally to abstain from any insult to the wound; amps done far too much; 533: plaster of Paris; Pirogoff inspiration for Dunant; 535: divided nurses into 3: surgical assts, housekeepers and apothecaries


Funning, Ben. “An enduring legacy.” Interview with Professor Christine Hallett. RCN Bulletin 2010 6-7. Ref to CWFN. Also short not nice comment by Peter Carter. Good on FN relevance for today.

Furuki, Yoshiko. The White Plum: A Biography of Ume Tsuda, Pioneer in the Higher Education of Japanese Women. New York: Weatherhill 1991. Section on meeting with FN 96: from her London Journal, meeting March 20 1899: “There on a large snow white bed, with a red silk quilt lying at the foot, propped up by pillows and all dressed in snow white, a white wrap over her shoulder and a cap on her head, lay a bright-looking woman, with eyes full of life and intelligence, a face not so old or wrinkled, with a remains of its former beauty on it. (LM, March 20). FN asked about Japan and Japanese women, she talked about the state of nursing and the future prospects for women in Japan; they shared both problems and hopes. When leaving FN gave her a large bouquet of violets, preserved at Tsuda College Archives, with date. Journal says she had wished to get FN autograph but refrained from asking. “I shall not soon forget my glimpse of that bright intelligent invalid face, whose clear mind and youthful activity seemed strange in that sick room of a woman far past her seventieth year.” Mrs Bickersteth, her hostess said Ume “would rather have seen [FN] than royalty itself] journal; Tsuda wrote back but her letter not in BL.


Galton, Douglas. An Address on the General Principles which
should be observed in the Construction of Hospitals. Delivered to the BMA at Leeds 29 Jul 1869, with discussion. London: Macmillan 1869 56 pp for paper, total 95 pp, no index. Ward offices, nurses' rooms etc. v much as FN wd want. 28 cites FN Notes on Hospitals. Preface relates to Report of the royal Commission on the San State of SH. Address 1 pure air, water, sites. Cites FN 7, and on Cubic Space, ward size 20-32, cit FN 11; new hosps HH St T HD and Leeds; 18: superficial area, cubic space; 22: statistics go to show that special hosps, where a number of fever cases are brought together, afford a higher death rate than is due to the disease. These expensive structures cannot therefore be said to have secured the rapid recovery of the sick. But shd be in hosps, “Wd it not be better to separate them amongst other patients in an ordinary hosp?” Mortality high in special hosps, but low in sheds and no bldg at all, so make special provision in small hut wards attached to ordinary hosps, but separate from each other and hosp proper; Parian cement; 37: shd not be more that 2 floors in pav; FN cited in 38; Am war, pav hut hosps 2000 to 3000 beds, stats of recovery not particularly fav, but no analysis of the cases; 45: King’s, principles “eminently disregarded” with wards placed back to back, open into each other instead of open air (good diagram p 56); Netley, Queen Charlotte’s; 47: pavilion system but pavs to be arranged to ensure circ of air between, if close together “stagnant gloomy courts formed” and not proper for recovery, as at Marine Hosp at Woolwich, pavs project from a central corridor, any of north, 48: wards on 3 floors, central corridor same height as pavs, distance bet pavs is not twice the height of pavs, so no free circ of air and poss of sunshine entering everywhere, but pav system can be on almost any site, 49: Royal Hants at Winch, Bucks at Aylesb, new hosp for 100 at Swansea by Graham, 50: Lari, if more than 1 storey, corr shd not extend above ground floor, so each pav must have its own staircase, 5 pav x 2, middle 3 for sick but no end windows and ward offices not sufficiently cut off from the wards, pavs on 64 ft apart while walls are 54 feet high; 51: Leeds for 350, 2 floors of wards, admin in basement, Gilbert Scott, no expense spared in construction, glass roof however prevents free circ of air in central court; Vincennes; 53: HH; costs HH for 650 patients £320 per bed but £150 for peculiar site wh required earth removal; Hants for 108 beds at £229; Swansea at £142 per bed or £109 if outpatient cost not; James Simpson in discussion said not opposed to hosps but as at present constructed, size of hosps, stats on limb amp affected by, Leeds, shd use cottages not just for extreme cases; Rumsey of Cheltenham, ref to Dr Oppert re Alexandrow Hosp at Petersburg, pav from polygonal corr

520: “I cannot do better that quote Miss Nightingale’s graphic words written on this subject, more than fourteen years ago: ‘Your cities are in a condition which, in the finest temperate climate of Europe would be --have been the causes of the Great Plague--of half the population being swept off by disease.....”


Gandhi, Mohandas K. “Florence Nightingale.” Indian Opinion (9 Sept 1915) in Dossey 415. (hagio)


Gardiner, Juliet. “Nightingale, Florence (1820-1910) Nursing Reformer,” Who’s Who in British History. Collins & Brown 2000. 601. Father a well-known abolitionist [no, her maternal grandfather]... Harley St., learned admin. SH sec for war; “to lead a contingent of nurses to the battlefront. When they arrived in Scutari, they found that the ‘hospital’ was a barracks with no beds, just straw mats, and nowhere to prepare food, and with polluted water and stinking sanitary conditions, vermin and dysentery were endemic. Through a combination of ruthless efficiency and Herculean hard work, and above all because she had the money to pay for medical stores and equipment on the open market in Constantinople, rather than petitioning for supplies through the incompetent, sometimes obstreperous official purveyor-in-chief, she appeared to work miracles; in a few months the death rate had dropped from 42 percent to 2 percent.” [no] At Scutari, fights with Hall, “a fossil” “But she saw her primary role as nursing, sitting with the dying (“her nerve is wonderful...she had an utter disregard of contagion”) supervising medical procedures, administering medicines. “Invalided home”[no] rc, ams, stats, 1860 NS, Notes on N and Notes on H; “explicate many of the rules of hygiene, technical competence and professionalism that were to raise nursing from its former menial status: within a couple of decades most of the voluntary and
large workhouse hospitals were employing trained nurses, and several had set up their own nursing school." rejected sentimental image of herself as lady of the lamp, her pol power. "She could be a bully, was often misguided and increasingly isolated, narrowly focused and self-dramatizing as a result of her long, self-imposed seclusion. But she was a heroine." first O, "although her theories of medical non-intervention, the originality of her ideas and the extent to which her achievements were hers alone have subsequently been questioned, she remains the most famous British woman of the nineteenth century after Queen Victoria." only a few trivial errors, gives FN credit for san com

Gardiner, A.G. Prophets, Priests and Kings. London: Alston Rivers 1908. Has short chap on FN, "Florence Nightingale" 11-17. From obit of FN by HM for Daily News. "She is one of those rare personalities who reshape the contours of life. She was not simply the lady with the lamp: she was the lady with the brain." (15). 16: made nursing a science. Crimea only an incident in her career.


Garofalo, Mary E. and Fee, Elizabeth. "Florence Nightingale (1820-1910): Feminism and Hospital Reform." American Journal of Public Health 100, 9 (September 2010):1588. First names FN. Cites Strachey, WS and Myra Stark, centennial of death. “After the war, Nightingale returned to England, became an invalid and remained bed-ridden well into her sixties.” produced...."It was only when her mother died that Nightingale got out of bed and reentered the world. Freed at last from the suffocating influence of her family, she focused all her energy on her work. She reformed civilian hospitals....” only after mother died!! nuts!


Garrison, Fielding H. An Introduction to the History of Medicine. Philadelphia: W.B. Saunders Co 1913; part, author (1870-1935) 400: Tenon, memoirs; Russian hospitals Moscow Hospital Czar Paul. “The real angel of purity and cleanliness was Florence Nightingale, and there was no such thing as surgical cleanliness before the time of Lister.” treatment of insane worse. 600 Public Hygiene... Kay-Shuttleworth, Chadwick, Simon, Rumsey, 772: idea of training nurses to attend the sick in a special school originated with Fliedner and his wife Frederike, 1833, NO
E Fry came; FN Lord Sidney Herbert NO, Scutari, support of Raglan and army surgeons, “within 10 days was feeding nearly 1000 men from her diet kitchen. “ providing 10,000 men with clothes an other necessities from her own supplies. NO N Fund 773: N School opened 15 June 1860; also cites Fry, Fenwick, Rebecca Strong, Margaret Huxley, A Jones, Margaret Bray and Isla Stuart; then Geneva Convention 773: FN’s Notes on Hospitals 1859 and NonN 1860 “are true medical classics, distinguished by the rarest common sense and simplicity of statement. She defined nursing as ‘helping the patient to live,’ introduced the modern standards of training and esprit de corps, and early grasped the idea that diseases are not ‘separate entities which must exist, like cats and dogs.’ but altered conditions...”

Garrison, Fielding H. Notes on the History of Military Medicine. Washington DC: Association of Military Surgeons 1922. Has death rates and numbers of doctors, etc., for many wars. 166: Peninsular campaign. Walcheren, in April 1809 39,214 men conveyed to isl; and of Walcheren, by Sept 14 8000 sick and by 22 oct only 4000 fit for duty; total mortality 217 from battle casualties, 4175 from disease; Pringle had warned about this ground 60 yrs earlier; so, lower % than Crimea; 171: Cr War, cites Longmore and Smith, for Fr P. Myrdacz, Sanitats-Geschichte des Krimskrieges. Vienna 1895; reports slightly different Br figures, greater diffs for Fr from Chenu; of Fr effectives 500 med officers, while Br had 448 med officers; 172: Russians had twice as many killed and wounded as allies; French mortality from disease higher than Br; French still in tents in 1856 when Br were in huts, so French deaths went up, Br down in 2nd year; telegraph meant orders from London hampered decisions in field; 176: US Civil War dead Union Army 304,369 or 359,598 (so, 2 ests); Confed killed in action 94,000, died of disease 59,297, losses in prisoners and deserters 188,372, out of 781,192 men; source Surgical vol Part 1. Medical and Surgical History of the War. 1870. Xxxiv-cxl. From 18 May 1861 to 26 May 1865. 178: FrPr gives a different picture; total mobilization of Fr 800,000, of Germans 1,113,700. French med as in Cr War, 1020 med officers; Prussians had a much larger medical personnel, 2853 med officers; Prussian War Dept med adm directed by Surgeon General H.G. Grimm; describes procedures for evacuation, but no % dead of disease, or % in hosp; cites Chenu: 131,000 wounded and 339,421 sick out of 609,961 total, of whom 136,540 killed, missing and died from wounds and disease; Germans lower mortality from disease than wounds; typhus and typhoid, smallpox and dysentery the most common; Germany troops had been vaccinated and revacc; his of Fr med dept pub

system had been amply tested by Miss Nightingale’s experience, and in our own Civil War, but the true principles of hospital construction had not been officially adopted in our Army prior to the Surgeon-General’s Circular of April 22, 1867.” much of US army hosps were “how not to do it” acc to Billings; lots on ventilation; 199: Johns Hopkins, question of female nurses, Billings gave drastic critique of the Nightingale system and in particular of idea that the lady supt shd be independent of the supt of the hosp and responsible only to the trustees, the ideal of “an independent female hierarchy” to be “independent of all males” the natural enemies; St T hosp fell short of Nightingale ideal of refined educated women, rather more of the domestic servant class; adds denunciations of attempts to govern women by men not worthy considering except as indicating that those who utter them are not desirable persons to be associated with in such an inst; he rec New Haven system, supt of nurses and matron, subordinate to hosp authorities, and also experiment of a few male nurses;


General Orders Issued to the Army of the East from April 30 1854 to December 31 1855. London: John Parker & Son 1856. 215 pp. Lots on diets, fuel, battle outcomes, queen’s messages, not go on Worozoff Rd., not use herbs don’t know, winter clothing, medals, wives and families, tickets for soldiers in transport; Russian prisoners in hosp will receive hosp diet, wearing tartan trousers, supply of veg, black flag at burials, employment of deserters; 13 Dec 77-78 commander of forces, that 297 sick and wounded on board steamship Avon, under orders to proceed to Scutari, had not recd that care and attention to which they were entitled, a ct of enq met on board that ship 2 Dec; Col Cameron of 42nd Highlanders, tool note of several deficiencies, “want of a sufficient number of medical men and hospital attendants for the service of the sick and wounded on board.” deficiency known to Dr Lawson, PMO at Balaklava, but that he took not steps to have it supplied. Commander of forces fully concurs. 78: “Lord Raglan has seen with pain and sorrow the apathy and want of interest which Dr Lawson exhibited, as appears by the evidence, with respect both to the due care and the sufficient supply of what was requisite for the comfort and well-doing of the suffering men who were placed on board the “Avon,” and he is compelled to visit such conduct with the severest censure.
The inspector general of hospitals will take immediate steps to relieve Dr Lawson from his present charge.

The commander of the forces is unable to exonerate Dr Hall, the inspector general of hospitals, from all blame in this matter, as it was his duty, either by personal inspection or by the reports of his subordinates, to have ascertained that the ship was furnished with everything necessary for the comfort of the many sick and wounded on board, which the public service could by any possibility afford.

General Council of Medical Education & Registration. Minutes of Meeting, Wed April 2 1873 Cup401g7
Paget in chair; attending includes Quain, Gull, Christison; for education of women for medicine, re midwifery, mgt of medical insts, dispensing and nursing; on first, concluded no power to determine education, obligation to register women if qualified; re midwifery, examined usage in Germany, France and Russia, reviews courses; in Br, several schools of midwifery where women trained, Queen Charlotte’s Hosp, until lately KCH: Obstetrical Society considering; Dublin instruction in 3 hosps, Dun’s Rotunda and Coombe; 94: “Miss Nightingale has examined into the deficiencies of instruction in England and has pressed the ‘organizing a Midwifery School of the highest efficiency in both science and practice,’ adding ‘let no one think that real Midwifery Education can be less complete and thorough for a woman than it ought to be for a man. There must be, first, of course, the Lying-In Institution, the deliveries conducted by fully qualified head Midwives, of whom enough perhaps exist already for the purpose, who will give practical instruction to the pupil Midwives at the bedside. There must be a staff of professors to give scientific instruction in Midwifery, but also in Anatomy, Physiology and the like; in Pathology and Pathological branches; above all—in Sanitary Science and practice.’” Notes on Lying-in p 105. and Parkes
95: 3rd As to Nursing. 1. The systematic training of nurses at Kaiserswerth are too well known to be more than alluded to. FN red und
2. In some parts of Germany, as at Carlsruhe, and at Hesse-Darmstadt, there are government [FN red und] regulations and opportunities for the instruction of trained nurses. There is theoretical and practical instruction. The former is given at lectures during the winter months, the latter by training in the German hospitals....
either to annihilate the whole race or to instruct them. Unless this is done, it is useless to provide for their examination, licensing, registration and supervision. [FN red und] FN comment: The only words worth reading in the book. Midwifery schools must be established in London and other large towns.


Geoghegan, Tom. “The Lady without the Lamp.” BBC News Magazine. 11 May 2010. FN one of the first victims of media thirst for crating celebrities. ILL story 24 February 1855 with lamp okay story, a bit on Seacole and Russians

George, Julia B. Nursing Theories: The Base for Professional Nursing Practice. 4th ed. 1995 Woodward WY86 N878 1995


11: built Environments. “The humanmade or built env has been shown to affect the healing process. Florence Nightingale (1863) recognized this when she discussed, among several other specific items, the importance to hospital patients of low ward densities, circulation of fresh air, adequate light, good drainage, clean laundry rooms and kitchens, and good accommodation for nursing staff. The hygienic standards that she introduced in her work in London, Scutari (during the Crimean War) and India during the nineteenth century saved thousands of lives.” Env psychologists on effect on nerves: Bagley 1975 (Peter)


Foreword, Charlotte Macleod, first chief supt of VON, cited Grey Nuns (Sisters of Charity Mtl) and Sisters of Providence the first in district nursing, visiting in pairs, non-cloistered, founder of Grey Nuns Mme d’Youville; in England FN “helped to organize the Central Home for the Metro and Nat Nursing Assoc in 1875. Then came the gift of £70,000 donated by Queen Victoria, on the occasion of her first jubilee in 1887” for QVJIN, now Queen’s Institute of District Nurses called Queen’s Nurses. FN “helped to draw up the Const and Rules, which are still in force. She advised on the special training to be given to these nurses, and the teaching and service they should give.” Scottish Branch est 1889, Irish later; by 1890 Queen’s Inst had 91 nurses, this inspired Ly Aberdeen to start her campaign in 1897 for a memorial fund to celebrate queen’s diamond jubilee in Canada;

1: Ishbel Aberdeen, district nursing suggested to her in Vancouver 1896 by 2 ladies when she was helping to organize the Vancouver Local council of Women, hardships suffered by sick women and ch in isolated settlements, urged to her to est cottage hosp, and had head of in Kaslo 1895; 2: VON had motherhouse in Rideau Hall, hon sec Professor James Robertson; 4: Ly Aberdeen admirer of FN, the 2 Vancouver ladies, Mrs James Macaulay and Mrs Duncan Gavin, asked them to write her at Ottawa as pres of Nat Council of Women; they did; got meeting; 1896 Halifax; 14: criticism of medical men; 16 visit of Worcester from Waltham, 1886 hosp starting, first supt had been trained by a pupil of FN, and FN agreed “to coach Charlotte Macleod for a period of study in London and Scottish nursing schools, so as to equip her for the position of supt at Waltham” (18), got leave of absence for 5 months to do this; 19 conversion of medical men at Ottawa and Toronto, great hostility; 23: Lord Aberdeen intro Worcester, reported in Toronto Globe 25 Dec 1897, he paid salary of Charlotte Macleod for first 2 years. finally got medical men to agree; 2 Cdn hosps built because of Cr War, fear of Russian attack in west, Esquimalt; and Citadel; 113: Bellevue led way to reformed nursing in US; 114 Gill Wylie went to Europe to get into on tr schools, they used pauper nurses then, March 1873 house rented near Bellevue for nurses, 6 pupils, with supt Sister Helen of All Saints Sisterhood, American nursing training

Gibbon, John Murray. *Three Centuries of Canadian Nursing.* in collaboration with Mary S. Mathewson, RN. Toronto: Macmillan 1947. (first comprehensive book on Cdn nursing hi); Charlotte Macleod brought with her 5 nurses, grads at Waltham and 3 from other schools to begin (253)

106: See the frail, lovely lady with the lamp Flitting about the cots, through the dim spaces, Where, sheltered from the piercing frost and damp, The soldiers lie with worn, untroubled faces!
They see her light shine on, 
Her shadow fall 
With healing over all. Duncan Campbell Scott, from his Ode on the 
Centenary of Florence Nightingale, for the VON, 1920; 
111: 2 Cdn hosp built in 1854 because of Cr War; Citadel Hill, 
and Esquimalt, Br feared an attack by Russia on Vancouver Island; 
influence of FN on CDA through Blackwell, leader in formation of 
a Ladies’ general Relief Committee in New York, organized a 
Relief Assoc with Elizabeth Schuyler as pres, snubbed by AMD, but 
appealed to the president, 112: with result that the Sanitary 
Commission was created in June 1861 by sec for war; Blackwell 
selected and trained nurses, resp for 100 nurses: 135: Dr 
Theophilus Mack organized first Training School for Nurses in 
Canada, St Catharines General and Marine Hosp, opened 1865, 
144: Training School at St Catharines started 1874, with 2 N 
nurses brought out at his request by Miss Money from England, and 
2 probs; cites M.L. Baudens on FN. meeting at Willis Rooms, Ld 
Stanley spoke. Times 15 April 1857

Gibbs, Peter. Crimean Blunder: The Story of War with Russia a 
Hundred Years Ago. London: F. Muller 1960. Ok, FN, sentimental, 
no new material.

Gibson, Alexander George. The Radcliffe Infirmary. OUP 1926. 1 FN 
ref. Chap IX The Nursing Service. Masson 1891-97. Fisher only in 
and out in 1882. 244: FN had nominated Lees in 1874 to advise com 
on general system of nursing, after suggestion of Acland, but 
Lees “prevented from complying” and nothing further done.

Gibson, Lucy J. “Nursing.” Chambers’s Enc 1891 7:555-56. ref to 
article on FN p501, unattributed. Her Hosp article also 
unattributed, but noted in the article on her. 
Nursing 7: 555-56 cites FN. many of Irish hosps nurses by Sisters 
of Mercy, such as Mater Misericordiae in Dublin, the largest and 
finest in Dublin. Private nursing in some respects both more 
difficult and more trying than hosp nursing. army and navy--all 
must be ladies; 
Colonies follow mother country. In America nursing such as 
Bellevue Long Island Hosp in Brooklyn, Philadelphia and 
Pennsylvania Hosps in Philadelphia and Mass Gen Hosp in Boston; 
on continent use of male nurses to attend male patients is common 
and RC countries mostly Sisters of Mercy. Germany--credits 
Empress Frederick and the late Princess Alice of Hesse. The 
training of nurses on the lines adopted in Britain was instituted 
in Paris during 1877 by the establishment of l”Ecole de Garde-
malades et d’Ambulancières. Cites FN Notes, Anderson, S. Weir 
Mitchell Nurse and Patient (Phila 1877), Luckes, Cullingworth, 
J.C. Wilson Fever Nursing (Phila 1888); E.T. Bruen, MD, Outlines 
for the Management of Diet (Phila 1888)


Gill, Gillian. The Nightingales: The Extraordinary Upbringing and Curious Life of Miss Florence Nightingale. London: Hodder & Stoughton. 2004. 237 “Lizzy Gaskell”; 495 ft “In certain respects, Suggestions for Thought was a work of revenge and self-vindication designed to hurt those who loved her. I do not find it surprising that the work was never published in Nightingale’s lifetime.” Mai, Hilary and Selina all read parts of it and were enthusiastic citing Cook 1:20-21; men get titles “Pastor Fliedner” but “Sigma” “Fanny”

Gill, Christopher G. and contd 1801: Br physician said never saw a case cured (Bakewell) 1801: FN prevented cross-contamination by insisting that a fresh, clean cloth be used for each soldier, not same for multiple, boilers to destroy lice; 1802: “rampant petty corruption” siphoned off medical supplies, she sent her reps into Turkish markets to buy back; got floors replaced destroyed by a fire, an ideal habitats for fleas, flies and lice; A Smith’s 1637 page report makes not a single mention of FN or nurses (actually does say they were kind); 1803: “FN cannot claim credit for origination the sanitarian theories, but the impact of her reforms in Scutari were so obvious and well publicized that the treatment of hospitalized and infected patients was forever changed.” Proved majority of soldiers in Cr War died not of war wounds but of fever, cholera, diarr, dys and scurvy, all preventable; Finally argues that hospice medicine owes FN a debt, long before Kubler-Ross’s theories about death with dignity, FN practised it; “By her own accounts, she closed the eyes of hundreds.” wrote letters for; p? “Her experiences working on English fever wards and while volunteering as a nurse at the Middlesex Hospital in London during the cholera outbreak of 1854 had convinced her that the so-called heroic medicine of the day, which was based on infusions of arsenic, mercury, opiates and bleeding, hastened the deaths of many more patients than it saved. Endnote 12. N believed that, by keeping patients well-fed, warm, comfortable, and above all clean, nursing could solve many problems that 19th century medicine could not.” (Cites D. Cameron, I.G. Jones. “John
Snow, the Broad Street Pump and Modern Epidemiology.” Int J Epidemiol 12 (1983):393-96.

1804: “Many of our current health care practices, such as isolation of patients with antibiotic-resistant pathogens, avoidance of cross-contamination, routine cleansing of all patient areas, aseptic preparation of foods, ventilation of wards and disposal of human and medical wastes, trace their origins to practices enacted by Nightingale at Scutari.” Cites W-S on soldiers Reason Why


1799: argues her influence today extends beyond nursing to “infection control, hospital epidemiology and hospice care” one in five men sent to Crimea died there; by contrast US Army crude mortality rate 2.6%


British: deployed 97,864 (or 13.4% of total Allied 731,610) died total 21,827 of deployed (or 22.3% of men deployed) by wounds or killed in action 4602 (or 21% of deaths) infectious diseases 17,225 (or 79% of deaths)

French deployed 309,268 (or 42.% of total) total deaths 72,415 (or 23%) (died of wounds 12,604 or 17%) died of infec 59,815 (or 83%)

Russia deployed 324,478 (or 44.4%) deaths 73,125 (or 23% of deployed) similar % of deployed died of wounds 35,671 (or 51%) of inf diseases 37,454 (or 49%)

1800: Cr War 20 years before Pasteur and Koch, and a cen before first antibiotics; with singular exception of quinine therapy for malaria, few remedies to manage infectious diseases; “In a real sense, the Scutari hospitals served more as so-called fever wards than true military hospitals, and existed largely to segregate patients with fever from their healthy compatriots. Soldiers were not sent to Scutari to be healed so much as to die.”

Doctors of day recognized several variations of fever: typhoid relapsing, intermittent, quotidian; tertian fevers of malaria; Crim Fev or Varna fever; at Scutari most patients recd diagnosis of febris continua communis, AKA “low fever” to distinguished from “high fever” assoc with typhus; extreme crowding ideal for spreading typhus, typhoid, dys and resp infections; Intest inf rampant; while only 29% of patients at Scutari admitted for tr of bowel disease or fever, dysentery contrib to nearly 50% of deaths; at least 3 outbreaks of cholera during the war; between April and Sept 1855, 2368 patients with cholera adm to a Scutari hosp, of whom 1423 or 60% died (A Smith)

FN had seen “heroic medicine” in cholera outbreak of 1854, when
infusions of arsenic, mercury, opiates and bleeding hastened the
deaths of many more patients than saved (citing Cameron and
Jones, John Snow, Broad St. pump and modern epid” in Brit J Ep
1983: 12:393-6. But not in that article!) FN the 3 things which
all but destroyed the army were ignorance, incapacity and useless
rules (Contrib)

Gill, Rebecca. Calculating Compassion: Humanity and Relief in
War, Britain 170-1914. Manchester: Manchester University Press
2013. 240 pp Dunant and FN, Dunant made a hero
14: early histories of credit FN more than Dunant, ironically
[yes] Fr-Pr War
33: Longmore had FN brief in 1864; to head off any suggestion
that civilian involvement was necessary, author FN, as witness to
failing in Crimea and advocate of WO reform;
43: FN sent blessing for Eastern War Sick and Wounded
56:” 16 nurses commissioned by NAS, 8 from All Saints Sisterhood,
UCH, others upper class, Emma Pearson, family St John’s House,
and MacLaughlin both trained nurses, on battlefields of
Saarbruch, Sedan and Orleans; Zepherina Veitch (Mrs Henry Smith)
obit 1,4, 1894]; pub Letters; Mrs H Templer A Labour of Love,
under the Red Cross during the late war, 1872; Anne Thacker, The
Narrative of my Experience as a Volunteer Nurse during the
Franco-German War of 1870-71, 1897; Florence Lees, Questions on
the Operations of the British National Society for Aid to the
Sick and Wounded in War, p. 5
Numerous refs to FN re NAS, HV, Ladies Committee,
11: “Florence Nightingale, for example, argued that the voluntary
provision of medical aid diluted the state’s responsibility to the
wounded.
33: Longmore at 18
51: establishing committees
56: Lees, request of crown princess; Z Veitch (Mrs Henry Smith
joined Anglo-American Ambulance at Sedan,
70: Florence Lees, cd not bear English ladies rushing around

Giunti, Marchesa Irene di Tariani. “Notes on the History of
Nursing Care with Special Reference to Italy.” International
Nursing Review 10 (May 1957):12-15. from Aesculapius, Jerome,
Fabiola 380 AD founded a real hospital where she and other women
card for the sick; Order of the Knights of St John the
Hospitaler; Saint Basil in 4th cen founded order named after
Saint Lazarus, and hence lazzaretti, hospitals and asylums for
lepers. Francis of Assisi, Catherine of Siena; Vincent de Paul
the greatest rational reform of nursing care; Kai; FN “real
reform in nursing” leader of profession, gave a technical and sc
basis w/o depriving it of its missionary spirit (13); parallel
with that foundation of Red Cross [this is overdone]. Ferdinando
Palasciano, Neapolitan doctor in 1848 when troops of Bourbons
besieging Messina “proclaimed that wounded enemies, when taken prisoner, shd receive the same treatment as wounded soldiers in one’s own army.” for which sentenced to jail for 1 year, traitor. (13). 14: Dunant, 1862 pub Un Souvenir de Solferino, described horrors. 1863 “Public Welfare Society of Geneva” permanent board to aid wounded soldiers appointed; 22 August 1864 Swiss Federal Council, Geneva Convention, 55 states adhering declared the neutrality of wounded and sick soldiers in war. followed by one in Berlin 1869 when preparation of nurses discussed; (then later developments). 1906 St Joseph School founded in Rome for voluntary nursing sisters, joined Red Cross in cases of emergency; Balkans wars in 1912 and 1913. 12 May 1916 Intendent Generale of Army made sisters subordinate officers and allowed to war “starts” like chaplains.


Gladstone, Mrs. “Notes on Nursing” For Artisans and Cottagers.” Home Words For Heart and Hearth 1878 9-10
Gladstone, Mrs W.E. “Notes on Nursing: For artisan and Cottagers.” 61-62 on Chapter 3 (to be contd, but seems not)


Glass, Nigel. “Florence Nightingale: Casting Light on a Disputed Reputation.” The Lancet 359 (23 March 2002):1073. Another bash, although with some praise. Twisted: “After the Crimean War, Nightingale helped the pioneering hygienist William Farr to produce statistical proof that patients were dying under her care at Scutari because of overcrowding and bad hygiene, and not the late hospitalization and lack of food she had blamed earlier.” Heroic attitude “in the face of her own disastrous failure” also snarky on FN Museum for showing too sanitized; ostensibly a review of the exhibit at the Florence Nightingale Museum at St Thomas’ Hospital as being too sanitized,

Gleason, David T. And Lewis, Simon, eds. The Civil War as Global Conflict: Transnational Meanings of the American Civil War. Columbia SC: University of South Carolina 2014
Jane Hoge compared formation of US San Commission in 1861 to Nightingale’s work as justification for women’s activism. Successfully made in Cr War, “saved thousands of lives, elevated the morale of the army and made the name of Florence Nightingale not only immortal but a household word wherever Christianity prevails, as the pioneer of female effort and relief in camps and battlefield.” Delimits icon’s influence to Christendom; cites Livermore on problem of distribution in Crimea, FN’s example,
supplies “were tied up with the red tape of official formalism until Florence Nightingale, with her corps of trained nurses and full power to do and command, as well as advise, landed at Scutari and ordered the warehouses opened. Then want gave place to abundance and through her executive skill and knowledge of nursing and hosp mgt, the frightful mortality was arrested. end
Livermore’s Nightingale is a fully realized hospital executive instead of the neophyte that her Crimean letters adumbrate. All Nightingale had o do, she believed, was to say the word, and loaves and fishes would appear.” .... YES! Mortality “heroic iconography” numerous FN refs

Livermore, Mary Ashton. My Story of the War--A Woman’s Narrative of Four Years Personal Experience as a Nurse in the Union Army, and in Relief Work at Home, in Hospitals, Camps and at the Front, during the War of the Rebellion. Hartford CT: Worthington 1890 700 pp, re Sanitary Commission, Chicago mainly 187: finally sees a hospital; 218: sisters described favourably; 225: Dorothea Dix, preference for Protestant nurses. Written late in life. Not accurate on FN

Gleeson, David T. And Lewis, Simon The Civil War as Global Conflict. Columbia SC Univ of South Carolina Press. Bodle


Glynn, Jennifer. The Enterprising Garretts: Breaking the Barrier for Women. Hambledon Continuum 2008. Refs to FN ok. 112: plans for hosp by John Brydon, foundation stone laid by princess of Wales, Queen Anne sweetness and light arch phil; “The plans gave plenty of fresh air and light, to conform to the sanitary standards of Florence Nightingale and Douglas Galton, the army engineer (cousin of Francis Galton) who was an expert on Hosp planning.” Bldg incl a medical institute were women doctors cd meet, library, Eliz refused to let her name be given, so did not until after her death; Garrett was dean of a flourishing med school; 114: survived to 21st cen, move to Huntley St only in 2000; old bldg left to decay while UCH swallows it up, but an EGA Wing. No recognition of FN on plans or contribution.


FN sent 2 teams overseas, Australia 1868. 55: by time of 2nd, to Montreal, Nightingale “had refused to write to Lucy Osburn or the five other nurses anymore.” thought of Australia as land of promise, but “a hellish pit that had destroyed her dreams and corrupted her nurses. No nurse was worse than Lucy Osburn and few places worse than Sydney.” good grief; Machin a favourite. 56: Machin 3 years later gave up, “having failed to implement Nightingale nursing in Canada” but FN “consistently and lovingly supportive, a superlative friend and mentor” Why did she “reject Osburn, who is now honored as the founder of Nightingale nursing in Australia, but support Machin, who so clearly failed in this task in Canada?” 64: Osburn a naive imperialist lady; 65: Osburn cd not take her social position for granted, ec insecurity; Few of Nightingale’s letters to Osburn have survived, but Nightingale was consistent in encouraging details and precise plans while appreciating requests for advice. Disastrously, Osburn’s letters only incidentally mentioned such matters. Osburn mistaken assumed little difference between FN’s concept of nursing and St John’s House; inflamed evangelicals; 67: Osburn keen on Wardroper; nowhere does Godden explain what Osburn did wrong; 68: “Nightingale showed her harshest side to Osburn. She effectively cut Osburn adrift--neither the first nor the last time she reacted in this way. [no refs]. Had HBC write her that she “would no longer reply to any of her letters” Osburn devastated, and no indication FN relented in the 11 years she was there. 68: “The savagery of Nightingale’s reactions” Sydney project from dream of reforming nursing to disaster to forget;

69: Canada 73: Machin and home; Montreal firm about not going w/o improvements in accom and construction, plans, but some money spent on renovations, but not 72: dream of a model hospital; “As coldly hostile as Nightingale had been to Osburn in her troubles, she was warm and loving to Machin.” stark comparison, and more on how supportive FN was of Machin at St Bart’s; 74: conclusion; Joan E. Lynaugh, “Rhetoric and Reality in America.” 76-90

15 June 1869; Mary Barker wrote Nightingale with thanks for news

Godden, Judith. “A ‘Lamentable Failure’? The Founding of Nightingale Nursing in Australia, 1868-1884.” Australian Historical Studies 32, 117 (2001):276-91. FN feared public exposure of problems at the Nightingale School at St Thomas, judgment of failure had little to do with nursing practice or care, but personal characteristics of Nightingale nurse; 276: Australia the first country to import a team of nurses from the N School; accepted judgment is that N nursing was successfully transferred from Br, but Wardroper considered it “a lamentable failure” 47716
cites FBS “Iconoclastic biography” early revision, and Baly; cited favourably; 278: Australia did not challenge Nightingale legend until 1980s, 279: arrived 5 March 1868, 6 nurses, Roberts and Parkes; 282: remorseless hostility of evangelical Prots, dominated Sydney’s charities, incl the Sydney Inf, “earned their hatred with her Anglo-Catholic views, and exacerbated the tension with actions such as her adoption of the title ‘lady superior’ in charge of ‘sisters’ and her order to burn some bug-infested Bibles.” 6 week long official inquiry held during 1870 on; then “the unshaken determination of Dr Roberts to exercise control over nursing and the nurses himself.” Resented Osburn’s claim to authority; 283: by Osburn’s retirement in 1884, had successfully est trained nursing on N principles the view; 283: but 5 years after arrival still no regular lectures to probs, only her successor who got a nurse tr school; 284: the 5 N nurses with Osburn failed to live up to idea of good nurse, and failed publicly. 286: Osburn effectively sacked most of the nurses, replaced with Australians; as early as 1868 FN losing confidence in Osburn; 287: FNM not alone in blaming Osburn, Wardroper a lamentable failure; JS FM’s “personal physician”!! 289: Sydney and St T similar; 290: Roberts repeated a private comment by FN to the Royal Commission into Public Charities, FN had to repudiate it; that Osburn had not adhered to the N System, headed by Windeyer, Parkes wrote FN in support of Osburn; Windeyer told her it wd be a pity if Dr Roberts drove Osburn away, just when had nearly achieved founding of N nursing in Australia; FN had little choice but to support her; Windeyer letter 11 July 1873 47757; 291: Osburn left in 1884, no record FN replied; Osburn left £100 legacy to Lucy Windeyer, da of Windeyer; 291: “The Australian experience confirms that Nightingale’s personal importance in the implementation of reformed nursing has been overrated.”


Godden, Judith. Lucy Osburn: part 2
150: attack; 1869 problems with sisters; Turriff, Chant; 160: Osburn got first sister prob, her version of St T specials; 177: Turriff helped set seal on FN’s low opinion of Osburn and the sisters; T wrote FN, FN forwarded to SEW, unlikely FN wrote T again;; 181: slander and scandal; 209: FN cd not condone dismissal of 3 nurses sent to Sydney in her name; Osburn defended, she was successful with Australians; HBC draft masterly; Roberts in London 1871; 215: Melbourne sent matron to Osburn to train, but no evidence matron came; Osburn had support of Parkes and Windeyer; 220: vermin in inf; desperate; royal commission 1873, Parkes apppted to inquire into Sydney Inf and
public charities; Roberts not a commissioner; Osburn a good
witness; com heard 58 witnesses in 1873; 226: petty harassment of
Osburn by house com; 233: Osburn wanted testimonial from N Fund;
235: Eliza Blundell implied Osburn incompetent, gave ev on
Nightingale nursing; Roberts testified on hospital miasmic
vapour, so in July 1873 Osburn faced destruction of her career
and reputation; 238: FN defended her; Parkes and Windeyer; 244:
majority first report 17 Sept 1873; satisfactory, relieved; 286:
Osburn left 6 March 1885; went to brother’s in St Andrews NB;
291: Xmas eve 1885 in Berlin, Osburn wrote last known letter to
FN, had visited Luise Fuhrmann (missp) Oberni (sic) on antiseptic
surgery; 292: wrote as if FN knew nothing about it, but she
supported antiseptic practice; 295: Osburn back in London when
Wardr retired, went to MNA; 297: Osburn plan to take district
nursing to Australia; for RBNA, 300: Osburn joined 3 Feb 1888;
pro Prss Xn, but doctors in charge; 302: October 1888 Osburn
apptd supt Newington and Walworth branch of MNNA, 2 nurses under
her; enrolled as a queen’s nurse; 310: Osburn “effectively
disowned by Nightingale” Osburn dictatorial, like mistress of
domestic staff or mother superior of a convent; acted alone; 312:
FN “a wonderful friend and mentor” to Machin; Osburn made matters
worse as she gave opinions she thought wd be FN’s but weren’t;
316: FN: “flawed humanity” “reclusive invalid” for over 50 years;
Sydney Inf new Sydney Hosp not opened until August 1894, after
her death, a small hosp next to State Parl.

Godden, Judith. “‘For the Benefit of Mankind’: Nightingale’s
Legacy and Hours of Work in Australian Nursing, 1868-1939.” in
Anne-Marie Rafferty, Jane Robinson and Ruth Elkan, eds. Nursing
History and the Politics of Welfare. London: Routledge 1997:177-
91.

Godden, Judith. Lucy Osburn: A Lady Displaced: Florence
Rafferty foreword ix-x; review by Sioban Nelson moderate,
comments on locals having better educ and sense of propriety
“Such comments did little to endear her to Miss Nightingale whose
response was brutal and waspish. The vast distance and intervals
between communications seem to have unleashed a florid form of
control-freakery on the part of Miss Nightingale.” neither party
comes off particularly well in PR battle.
99: public meeting at Sydney (Osburn and ladies in gallery)
decided to rename Sydney Inf the Prince Alfred Hospital, demolish
the main dilapidated bldg and rebuild, funds from subscriptions;
Alfred Roberts driving force behind the fund; Osburn fully
supported Roberts’s plans, used “Prince Alfred Hospital” title
right from first
69: germs “Florence Nightingale was one of the many who were
sceptical, insisting in 1866 that there were ‘no specific
disease’, only ‘specific disease conditions’.” but does not say
she changed her mind. ack that FN keen on antiseptic practice, 360 fnote shows how Rosenberg wrong on FN (but still does not show went over); has pic of Osburn and nurses in front of Nightingale Wing, 1881. Sydney Hosp, replacement hosp not opened until August 1894, or 3 years after Osburn’s death, small but vital hosp still located next to State Parl in Macquarie St. Nightingale Wing, built for Osburn and her staff, is home to the Lucy Osburn-Nightingale Museum.

99: Sydney Hospital renamed the Prince Alfred Hosp, decision to demolish the main, dilapidated bldg and rebuild, from subscriptions re prince’s survival; Alfred Roberts driving force behind; her first letter to FN used address “Prince Alfred Hosp” and said she left no stone unturned for name change, detests the Sydney Inf, and “infirmary” redolent of 100: destitute and chronic; she wanted “hospital” she avoided use of term altho name cd not be changed immediately, called herself “lady superior of Sydney Hosp (100) which did not exist; 101: Nightingale “wounded vanity”; 103: because of delay in mail Nightingale “could not control events in Sydney and that Osburn did not ask her for advice” FN isolated and ill “expected deference,” Osburn confided her fears and problems, 104: Osburn ill in April 1868; 119: resignation. 10 August 1868 Osburn wrote 3 letters, one a formal offer of resignation; FN abject terror, envisaging experiment ending with disgrace and failure; Osburn defended Henry and Jane Carr;; f120: FN to SEW; Osburn letter: “I have got to a prince already” had earl and countess, sits with HRH half an hour, “good friends” liked to be with him alone, in his “night shirt or dressing suit” altho the conversation innocuous, FN thought Victoria wd be resolved; Osburn gossiped about passengers on the ship; and considering coming home because Sydney climate too hot, “hot winds” wd kill her; 122: remarks about “colonial fever” like “Syrian fever”and Sydney “was the most unhealthy town in the world, and its average of mortality about the highest,” FN appalled, and judgment based on one sailor’s view; JS esp pessimistic, his letter; 123: Osburn also sent a private letter with offer, defended Carrs; 124: thought her letter “had only alluded to events ‘publicly known to everyone’” Osburn shd have “lubricated her letters with tributes to Nightingale’s nobility”but she did not (125); 125: Osburn asked FN to make the resignation as little public as possible; 126: FN did all she cd to avoid resignation, no one to replace; Parkes ok wd keep secret; Osburn vs hosp in suburbs! 132: not until late November 1868 Osburn heard her March letter to the Carrs had been suppressed and she wd not have to resign; 133: FN made last positive comment about Osburn; 136: has pic of Nightingale Wing, in effect the nurses’ home 1869; 38 room bldg, in Gothic revival style; 4 storeys? Another added 1895, lavish, magnificent views (pic Lucy Osburn-Nightingale Museum); 122 HV role in getting Carr letter back (but Godden very negative about FN’s role);
Godden, Judith. “Victorian Influences on the Development of Nursing.” Scholarship in the Discipline of Nursing. 239-54


Godden, Judith and Forsyth, Sue. “Defining Relationships and Limiting Power: Two Leaders of Australian Nursing.” Nursing Inquiry 7,1 (March 2000):10-19. Rel between nursing and medicine. Lucy Osburn, first generation of Nightingale nurses in Australia, 2nd Susan McGahey. Medical antagonists, Dr Alfred Roberts and Dr Anderson Stuart, struggle over control; house surgeon, Roberts’s idea to send for Nightingale nurses, but missing link; plan amended but not a mere oversight; 13: “Roberts acted as if he was the controlling power over the nurses and as if he viewed the appointment of Osburn as a superintending nurse as just a temporary setback.” Osburn 1868a; disliked by med officers, slow thinker, finicky, power struggle; within a year Roberts “formulated a new set of rules, said to be based on his training hospital, Guy’s in London.” Osburn asw as giving him the whip hand, degrading, said Turriff; but Guy’s did not have a lady supt; Osburn warmed to him and wife at first, but in months; incompatible models; 14: “The conflict led to the appointment of the Royal Commission into Public Charities during 1873-74 and its first report on the Sydney Inf.” Osburn vindicated, she stayed another 10 years; Roberts went to a greener field, the new model Pr Alfred Hosp, recruited as matron Susan McGahey; McGahey trained in N methods in London, at London Hosp 1884; both Osburn and McGahey embodied Nightingale nurse, respectable, respected and disciplined


Goldie, Sue M., ed. “I Have Done my Duty”: Florence Nightingale


55: Hastings sought support of FN endn178; 88: FN wrote “in customary caustic tone” to Chadwick

116: papers by women read by men at early congresses; FN sent 7 papers, beginning 1858; in 1859 women began to speak for themselves;

179: re Birmingham meeting, Farr comment 182: FN jealous of Simon’s success, and Chadwick also jealous; SSA made no contribution to the sc of disease

189: “one of the most important sanitary pressure groups of the century was the ‘Joint Committee of the Social Science and British Medical Associations on State Medicine and the Organization of Sanitary Laws.’” comprised of elite of health officers, virtually every name well known “The Joint Committee was the institutional embodiment of the so-called ‘sanitary reawakening’ of the mid-1860s, an orchestrated reaction built on popular concern over the cholera epidemic of 1865-6 and the ineffectiveness of the 1866 Sanitary Act.” Originated in 1867 at BMA in Dublin when Rumsey delivered a paper of State Medicine in Great Britain. GW Hastings then suggested, and it was accepted, that the BMA cooperate with the Public Health Dept of the SsA.

First joint committee meeting was 1 May 1868.

190: Reform, Joint Committee, chaired by Acland, and Royal Sanitary Commission, under Lord Northbrook; according to Hastings, when RC appointed under Nothbrook, his first step to consult SSA on procedure, after Liberal victory of 1868 Si Charles Adderley chairman; many members of SSA on but Rumsey, Stewart and Hastings all lost their places in recomposition, number of doctors reduced, but Acland still on; Commission recommended consolidation of san leg, and to become imperative rather than permissive, construction of a single ministry with dual resp for public health and poor law functions; centralization of san powers in towns and counties in one responsible authority; a MOH to direct local bureaucracy

193: “anti medical prejudices of Chadwick and N, perhaps under the influence of the anti-Contagious Diseases Acts campaign”; 3: cites FB Smith as source, also on 415;

Goldsmith, Margaret. *Florence Nightingale: The Woman and the*
Legend. London: Hodder & Stoughton 1937. Gives much credit but in places very hostile, only published sources used: “dislike of women” because cd not manipulate. Wellcome BZP; uses first name; 67 “Despite her assumed cheerfulness, Florence’s inarticulate bitterness, her repressed resentment towards her mother were so intense that, psychologically, she never overcame this shock.” when refused her permission to nurse; 210: “In common with many outstanding women, such as Queen Victoria and Maria Theresa of Austria, who both opposed the advancement of women, Florence Nightingale was not entirely free from vanity. She considered herself, and quite rightly so, a most exceptional woman, and she had no desire to help less gifted women to develop such gifts as they had. She had made her own career....To put in bluntly, Florence did not like women because she was never able to subject them to her wishes as she dominated men, and as she grew older her power over other individuals was the source of the greatest satisfaction to her. Men like Sidney Herbert and Dr Sutherland were completely under her intellectual domination....” (“Florence was aware that any woman intelligent enough to work with her would have been too shrewd not to see through her autocratic behaviour.”) told Mme Mohl she preferred working with men because they did as she wanted (no source but sympathy letter appears next). 215: she never bullied them in public; ch 15 on workhouse stuff: 264: When, however, one considers her incalculable achievement in connection with the sanitation of the Army, or her persistent devotion to Indian public health, it seems strange that she did not accomplish more than she did for the improvement of the Poor Law in England.” simple explanation: It would seem that to do their best work, social reformers must have personal experience; they must see for themselves the distress they hope to relieve. Florence’s knowledge of the workhouse infirmaries was purely theoretical. She had never visited a workhouse, but their statistics told a dreadful tale.” knew no organized nursing....265: “If Florence had been able to leave her rooms, if she had seen those workhouse infirmaries, she might have been so passionately concerned that she would have concentrated her energies on forcing Parliament to pass more effective legislation than the Metropolitan Poor Act of 1867,” which was mildly progressive, but did not bring about the radical changes she had advocated; 265 “Her comments on Poor Law reform show a bitterness, an antagonism towards the officials responsible, rather than a purely human pity for the pathetic creatures involved.” 266: “Actually, Florence Nightingale’s contemporary, Miss Louisa Twining, who devoted her whole life to workhouse reform, was the great pioneer of the movement.” her work familiar to Florence; gives ABCs 270; 279: “At first Florence refused to join the Society” JS Mills, then half-heartedly agreed, “But she never did anything for the Society chiefly because she never really believed in it or its aim.”

Chap 5 war in Crimea p 74
Chap 6 Hospital at Scutari 101
Chap 7 Hospital deficiencies 108
Chap 9 Scenes in Scutari Hospital 139
Chap 11 Cholera at Scutari, prodigal son 174
Chap 13 war in Crimea 201
Chap 14 Balaclava 209
57: asked by Sellon if willing to go; joined 1852
105: at this time no night nursing, but FN “lamp in hand, each night traversed alone the four miles of beds”
185: the sick officers were not ordinarily attended by nurses, but by the orderlies and their own servants.
214: superior requested that the 2 Devonport sisters may not have work assigned them at different places, so housekeeper and general servant
211 FN’s little orphan drummer named Robert, her Mercury
168: it was usual shd the nurse perceive a patient to be suffering peculiarly, to speak to the med officer of the case as he made his evening round
105: the doctor gave directions and the nurse applied the dressings and again secured the bandages. But for cleansing the wounds it was extremely difficult
165: The cholera I believe is the only disease with regard to which they are not ready to risk contagion and nurse each other, however ignorantly
174: cholera but once where she was
151: nurse must avoid the slightest puncture in her hands or she wd be
226: after peace declared, FN sent the nursing staff, a few at a time, as cd be spared, to see Sebastopol.
32: experience began nursing cholera

Goodnow, Minnie. *Outlines of Nursing History.* Philadelphia: W.B. Saunders 1916. Has Nightingale pledge; first 9 editions by her; then 10-15 by Dolan
1923 3rd ed; UofT has 1928, repr 1929 472 pp 1916; has Chapter 5 on FN and Cr War; chapter 6 on her later work, was war nurse in France; directress of nurses, Milwaukee County Hosp, supt Woman’s Hospital, Denver...
Fliedner
60: Crimea, “Division of responsibility, official red tape and lack of nurses made the condition of the wounded after a battle a national disgrace. The facts became known and public appeals were
made for help and supplies. Miss Nightingale read the appeals and
they came to her as a call from God.” Sir Sidney Herbert. Cites
SH letter.
61: nurses’ quarters small, dirty and swarming with rats and
vermin. 62: soldier’s bed of straw, on floor, few sheets were
canvas; practically no laundry, no hosp clothing; covered with
filth, no soap, etc. no knives or forks, “The death rate was 42
per cent. of the cases treated, an appalling state of affairs.”
no source. 64: what FN did bold initiative; “used her own funds”
o. Laundry, diet kitchens; cites Cook and Nutting and Dock
65: “In two months Miss Nightingale had transformed the hospital.
In six months she had reduced the death rate to 2 percent and had
won over most of the surgeons.” Raglan spoke of her as an
auxiliary general. MacDonald war corr,
5th ed. Reset; 1934. 86: problems at BH Scutari. “There was a
great deal of cholera and contagious fever. Fully as many of the
soldiers died of disease as of wounds. The death rate was 42 per
cent of the cases treated, an appalling state of affairs.” No
source cited; Cause: 87: FN’s Reforms; nurses far from being well
trained; quotes FN, no source: 88: “The flit about like angels
without hands, and soothe souls while they leave bodies dirty and
neglected.” Kept the less efficient nurses under her own eye,
putting the better ones in places of resp. Mrs Roberts. Shaw
Stewart. Drake. Moore; cites Cook, Dock and Nutting;
88: “IN two months Miss Nightingale had transformed the hospital,
In six months she had reduced the death rate to 2 per cent and
had won over most of the surgeons.” Raglan. Irish Sisters of
Mercy:

Goodnow, Minnie. Florence Nightingale and Her Work in the Crimea.
10 pp ebook. Goodnow (1876-1969)

Goodrich, Annie Warburton. The Social and Ethical Significance of
Author 1866-. Bits on FN. Some on move to universities.
316: 1860 N School in London and est of first educ prog of
nursing, 1873 the first schools of nursing in the US, first
to est university relationship made in 1893 when Royal
Inf in Glasgow reqd of the students entering the school
preliminary instruction in science at St Mungo’s College, under
the usual university requirement of the payment of tuition fees,
exam, etc.
in U.S., Presbyterian Hosp School of Nursing in Chicago with Rush
Med College in 1903; Univ of Minn first est, 1910, of nursing on
a recognized univ basis.
Robb and Nutting at Teachers College of Col Univ est some courses
in hosp economics, led in 1910 to endowment which made poss cr of
a dept of nursing and health, “the first provision of graduate
courses for administrators and teachers of nursing.”
Gordon, Richard. The Private Life of Florence Nightingale. Harmondsworth: Penguin 1980 [1978]. 222 pages. [fiction] includes favourable and not: “She was emotional, she was vain, she was complex, she was incomparable.”


Dodd, Diane and Gorham, Deborah. Eds. Caring and Curing: Historical Perspectives on Women and Healing in Canada. Ottawa: University of Ottawa Press 1994. Mostly later, some on FN, uoft online; Machin not in index 27, 38, 40 49-50 online UofG rec Eyler on FN recommended (don’t use)

38: Lady Aberdeen and district nursing
47: Charlotte McLeod
Boutilier, chapter 2 Nurses and Nursing. 1890s National Council of Nursing
27: “Beginning in the 1850s, English nursing reformers like William Rathbone and Florence Nightingale pioneered a system of urban home care known as district nursing, which they promoted as a specialized dept within the new middle-class discipline of hospital nursing. Endn22.

Evangelical sentiment informed the efforts of trained district nursing advocates with Nightingale and Rathbone, as well as the practice of the earliest district nurses. Nightingale argued that trained district nurses would introduce order, cleanliness and fresh air into the homes of the poor. As ‘health missionaries,’ they would help eradicate the env causes of poverty by teaching the poor the basic principles of sanitation and hygiene. Endn 23 (Dean and Bolton, “The admin of poverty and the Dev of Nursing Practice in 19th cen England” in Celia Davies, ed. Rewriting Nursing History 76-101,
Nursing the Sick: Practical Information by a Trained Nurse: Directions for Amateur Nursing at Home. Montreal: Davis & Lawrence 1897.
Mervyn Stuart. Shifting Professional Boundaries.
VON 51 Isabel Hampton, 52: Ishbel Aberdeen, Lord Aberdeen paid, Worcester,

Boutilier, Beverley. “Chapter 3 Shifting Professional Boundaries: Gender Conflict in Public Health 192--1925"

Gorham, Deborah. The Victorian Girl and the Feminine Ideal. London: Croom Helm 1982. [several pp on FN, cites WS on not being pro women’s movement: 129: “She gave only half-hearted support to the nascent Women’s Movement; having found her own solution to the conflict between femininity and ambition, she closed her mind to the general nature of the problem.”


Gottlieb, Laurie N. *Strengths-Based Nursing Care--Health and Healing for Person and Family*. New York: Springer Publishing 2013. No FN in index, but does cite in places.

Gottlieb, Laurie N. and Ezer, Hélène, eds. *A Perspective on Health, Family, Learning and Collaborative Nursing: A Collection of Writings on the McGill Model of Nursing*. Montreal: McGill University School of Nursing. 1997. No index. (Ezer director of nursing school) in 1980 Moyra Allen founded research at McGill. Gottlieb ed of *Canadian Journal of Nursing Research*; like FN looks at health care system as well as nursing and its place in it, and calls for nurses to provide vision and leadership, using the health orientation of nurses, which dates back to Nightingale. Like Nightingale, Gottlieb made her case by citing successful examples, what has been demonstrated to work. As for Nightingale the money expenditure is only one factor to be considered, and not necessarily key;


Gottlieb, Laurie N. And Rowat, K. “The McGill Model of Nursing: A
health, nursing, env, family, collaboration, central goal of nursing is to maintain, strengthen and develop the patient’s health by actively engaging him or her in a learning process. Health is a learned phenomenon and family the primary socializer. The nurse and patient together set goals and building on patient’s strengths and resources, devise means of achieving them. Abstract only

Gottlieb, Laurie N. and Gottlieb, Bruce. “The Developmental Health Framework Within the McGill Model of Nursing: ‘Laws of Nature’ Guiding Whole Person Care.” Advances in Nursing Science 30,1 (2007, Jan-March):E43-E57 DOI: 10 1097/00012272-200701000-00013 online developmental/health framework within McGill model provides the foundational knowledge consistent with Nightingale’s vision of working the ‘laws of nature’ to promote health an healing. DHF describes the processes, principles and mechanisms rooted in the biol, dev and nursing sciences required to proved ‘whole person’ care. Based on a strengths-based approach:
okay on FN, focus on health, but only references NonN and nothing specific; ref to Dr Moyra Allen McGill model but no specifics; leaves, petals model
E54 DHF WITHIN THE McGill Model of Nursing, original 7 features of MMN. “Allen, in an attempt to distinguish nursing from medicine and to articulate a n expanded role fo nursing that complemented rather than replaced medicine, dichotomized the features (e.g. health vs illness) that distinguished the McGill nursing approach from other nursing approaches that used the medical model as their framework of practice. End 11 (Allen, comparative theories of the expanded role in nursing” 1977), but proven artificial (no refs) and does not reflect the clinical reality;
E54 “Nursing promotes health during an individual’s life course by supporting and working to encourage the integration of regulation, attachment and coping. Nursing is also involved in preventing illness by working with inborn biological and developmental ‘laws of nature’ to minimize risk and maximize those protective forces and by developing and working with individual strengths (e.g. attitudes, capacities, competencies, skills) and resources (e.g. relationship and physical and emotional environments). During illness, nursing supports the natural repair and restorative processes by working with the mind/body domains of functioning (viz. Cognitive, emotional/affective, social and spiritual/moral), the core forces (i.e. regulation, attachment and coping) and creating healing environments.
Allen proposed that the unit of care was the family rather than just the individual because it is in family individuals learn about health
E55 Nursing-patient relationship nursing “affects development and
health by the quality of physical, psychological, moral and ethical care provided. Nursing is most effective when the nurse creates conditions where the individual and/or family is the central focus of care, and enters into a collaborative partnership.” Plan of care “Allen espoused to a strengths-based rather than a deficits-based approach to working with patients. In our conceptualization the nurse identifies and works with strengths and manages deficits, or tries to work with patient’s deficits to run them into strengths.” end 49

Gottmacher, Alan F. “Introduction.” to reprint of German 1861 Semmelweis. New York: Johnson reprint 1966. ix-xxxii: autopsies before rubber gloves, cadaveric particles clung to hands (xxix); Dr Kolletschka’s death. Description of the disease: puerperal fever: thirst, nausea, stomach pains, bowel movements scant then copious, acute fever, cold sweats, coma, vomiting bilious material (xiii).


Grant, Susan Mary. “New Light on the Lady with the Lamp.” History Today. 52,9 (September 2002):11-. not bad article.


Green, Eliza S. Craven (1802/3-66) ODNB, wrote poem 1856 on FN’s return from Crimea, acc to ODNB she ack it

Green, Carol C. Chimborazo: The Confederacy’s Largest Hospital. Knoxville: University of Tennessee Press 2004. (Battles) 11: cites FN influence on pavilion, her Notes on Hospitals and Br Parl reports, san comm, HH example 1859-1864 built, then first permanent American hospital to use pav design was Hospital of the Protestant Episcopal Church in Philadelphia, began constr 1865, contd to 1874. 44: FN example in Cr War “Recognizing the demand for good nurses and remembering heroic stories of Florence Nightingale’s work in Britain’s Crimean War, women had volunteered...”


December 1959:190-202. “Fascinating,” powerful, attractive narrative style, literary virtues, intense and graphic liveliness (192); but not given scrutiny it deserves, doesn’t add much from Cook, she adds “little that is crucial” (193); re love “main story already told” (194); re Crimea “eight quotations all of which occur in the parallel passage in Cook, a similarity which is too striking to be accidental” (194), “indebtedness is much greater than this brief indication would imply” (194) and merit “vitiates by the many errors and mistranscriptions” esp re Cr (194); where departs “one-sided” and “biased use of the material” (195), esp re Hall re chloroform and Roebuck (197), not fair on Sir James Simpson (200); “oversights” lead to a “false position” and gives sources but writes a radically different account from (200); errors of fact (201); “unsound as to details” (202)


Appendix 2. “Florence Nightingale and Dr David Greig” 219-24. Greig on same ship, Vectis as FN from Marseilles. Typos and not very good, short, coverage.

Grieve, Andrew. “Florence Nightingale: Statistician.” Wellcome 2010 conf prof of med stats at King’s, former pres of RSS


49: in 1825 Dr Robert Gooch called for hosp tr progs in large hospitals, was friend of Fry’s and possibly influenced her; Irish Sisters of Charity, they influenced by visiting in New York; good history

“*The Crimean and English Hospitals*” 153. End note 16. “In fact, one of the most influential women in the Crimea, Mary Seacole, who ran a popular canteen called ‘Mary Seacole’s British Hotel’ near Balaclava, was turned down by Nightingales’ [wrong] recruiters, probably because she was black. Seacole eventually paid her own way to the Crimea and went on to win the admiration of several high-ranking officers, who subsequently organised a music festival after the war when she became penniless. Mary was born in Jamaica in 1805 to a black mother and a Scottish soldier.” also first names “Florence”. Cites WS; Martineau-sent Matters affecting. On Netley. Errors in her polar area diagram, Small 1995 reconstruction;
154: “Indeed, Nightingale tended to be a supporter of the miasmatic theory of illness: diseases generated spontaneously from filth and were not really the result of ‘germs.’ Even when she became more sympathetic towards germ theory, she still insisted that cleanliness was critical to health.” I guess! Cassandra. [not the worst on]
141: on India. From Mutiny
142: midwifery school collapse in 2 years. NO
144: bad on FN and vote and Parl; uses WS

Grippando, Gloria M. *Nursing Perspectives and Issues*. Albany NY: Delmar 1977 470 pages. Based on thesis at Nova University, NY

Group, Thetis M. and Roberts, Joan I. *Nursing, Physician Control and the Medical Monopoly: Historical Perspectives on Gendered Inequality in Roles, Rights and Range of Practice*. Bloomington: Indiana University Press 2001. [be the first] has ref to Gamarnikow 1978 numerous refs, UG online
64: Nightingale Training School to Carry Out her Ideas

Grypma, Sonya. “Reintroducing the Pinning Ceremony.” *Journal of Christian Nursing*

Grypma, Sonya. “Florence Nightingale’s Changing Image?: Part 1 Nightingale the Feminist, Statistician & Nurse.” *Journal of Christian Nursing* 22,3 (2005):9-13; has copy 145 Upper Seymour St. Private; env, stamped, cancelled to Col Walker, CB, and 1 f of Clendening letter; 24: “Through her reforms, the soldier mortality rate was reduced from 42% to 2.2% in six months.” Endn 8 Dossey, in JholN 112. [exagg]


Grypma, Sonya. Healing Henan on Cdn nursing in China; 7: FN
Grypma, Sonya. Nightingale the Person--Not the Symbol.” JCN 23,3 (January 2006):32 cites Dossey

Grypma, Sonya. “From Saint to Fiend to Modern Mystic: Part 2 Florence Nightingale’s Changing Image?” Journal of Christian Nursing 22,4 (fall 2005):6-13 6: From saint to fiend, historical understanding of FN as a model Christian, an angel a saint. “Modern nursing practice...” vocation, “both of these understandings have been disputed in recent years.” “Historians and the popular press have 7: called into question inconsistencies between the romanticized public image of Nightingale as compassionate and nurturing and private documents that portray her as ambitious, impatient and domineering.” [but that is accepting FBS] Lytton Strachey [uncritical refs to Strachey, FBS and Hugh Small] scathing [but refuted] “while the accuracy of Strachey’s and Smith’s book have been called into question endn7 [LM CWFN no specifics, no TLS], nevertheless, their writings strongly influenced how Nightingale was subsequently viewed. 8] yes, but that is the point, what is accurate, Smith gave sources, which are wrong] 8: Canada ACC problem; not thrown out; “’This Nightingale was a far cry fro the virtuous, altruistic Lady with the Lamp.” then ack removed endn10 8: “As the twentieth century closed, fault was found with every facet of Nightingale’s personality. She was not Christian enough for some...” Avenging Angel; 29 April 2003 Washington Post had article “Good Night, Florence: With Nursing in Crisis Some Say It’s Time to Retire Nightingale As a Symbol.” Monteiro responded 9: FN as post modern mystic; typology of mystical spiritual development, 10: but labeling as modern mystic has same difficulties as ministering angel; MacRae article. “According to historian Lynn McDonald...” re Suggestions, heterodox, but returned to more conventional doctrines. [did not see Sugg as having multiple voices] 11: FN’s theology, asks if a role model for Christian living, or “mystical spiritualism that is at odds with trad Christianity?” God’s plan; 12: FN responded viscerally to situations that frustrated and angered her, Bible inspired by God, but written by humans. “Christianity was not the perfect religion, but she found it better than the alternatives she explored.” Hardly! 11: abhorrence of soul saving. 13: her views evolved. Open mind; “Contemporary nurses can learn from -- and dare I say, emulate -- her intellectual mischief, her unquenchable curiosity, her stubborn resistance to the status quo and her unrelenting search for God and his will in her life.”

Guidelines for Hand Hygiene by Centers for Disease Control. WHO in 2005 launched Global Patient Safety Challenge to improve
hand hygiene: “Clean Care is Safer Care” “Proper hand hygiene is the primary method for reducing infections.” At Scutari. “To her surprise, wounded soldiers at this facility had morbidity and mortality rates much higher than those at the front who were near death and too unstable to move. She realized that something needed to change, and quickly. Within several months of her arrival, she implemented hygiene practices--use of clean water, clean sheets and hand washing--that decreased the facility’s mortality rate to approximately that of London hospitals at that time.” [exagg] Many rejected her conclusions, if not for her pol assocs and reporters, “she may not have been as successful at implementing strategies to reduce the mortality rate. She threatened to share her findings with the general public unless a commission to review the public health issues was created.” [not quite, and time wrong]

“In 1860, Nightingale wrote Notes on Nursing...In response to the high infant mortality rate in England, strongly linking hand hygiene and cleanliness with lower patient mortality. “ quotes, skin function...

If alive today wd embark on a worldwide campaign to encourage caregivers to do their duty for the patient, and use internet


Gurney, Joseph John. “The Record” and Miss Nightingale. Remarks on two articles contained in the “Record” of February 1st and March 8th 1855, and containing strictures on Mr Gurney’s lecture entitled, “God’s Heroes and the World Heroes.” BLC. London: James Nisbet & Co 1855.


Hacker, Barton C. and Vining, Margaret, A Companion to Women’s Military History 2012. Seacole on p 182 in biblio; FN 142, re uniforms; Knightley 1975 re FN legend; second group 142: “Still other nurses came on their own, most notably the renowned Mary Seacole, “Mother Mary” as she came to be known
A grand total of 229 female nurses served...

Nightingale has recd most of the credit for the Cr Success, though she also recd her share of criticism, not all of it attributable to disgruntled subordinates (Iveson-Iveson 1964; Stanley 2007). However Nightingale’s work in the war may be judged, no one can gainsay her role in insuring that the Cr experience led to permanent nursing reforms, something that failed to happen either in Fr or Russia....”

Claire Cross 1998 on FN; did Wellcome guide to sources

US Civil War, “by far the largest group of early Nightingale imitators”


5 elements in present concept of progressive patient care, 4 in general hosp, 5th an extension into community: intensive care, intermediate care, self care, long term care, organized home care; no ref to FN evident.


Hall, H. Byng. Sayah, or, the Courier to the East. London: Chapman & Hall 1856. Cook 2:460. Obsequious, except not sure women nurses a good idea. Met FN 103-25. Ded to Lord Stratford de Redcliffe. Very delicate on FN; 110: met “She rose to receive me and extended her hand with kindness an good breeding--this was Miss Nightingale, simply attired, a small lace cap half covering her dark hair.”... 111: saw kitchens, met Soyer; 112: everything fine, store ample; 113: miseries caused by inefficiency of those selected to perform duties incompetent to perform or indolently neglected; 120: saw fellows arrive from Balaclava, other labouring under fever and dysentery. “It would be ridiculous to assert that there was anything bordering on cheerfulness in the countenances of
these poor soldiers, but having undergone the welcome ordeal of a warm bath and clean linen, and been laid helpless as children in bed, the nurses having supplied them with some fitting nourishment or temporary restorative, to which, alas! they had long been unaccustomed, there shone forth an expression of renewed hope, calm resignation and gratitude, in the knowledge they would be well cared for, which went straight to the heart. Comfort, indeed, must they have experienced, poor fellows, at being relieved from the filth and vermin in which for so many months they had actually existed. In the middle of February, the hospitals were almost entirely free from wounded men. Quite so from those who had fought and bled at the glorious battles of Alma, Inkerman 121: and Balaclava. But Miss Nightingale most justly and most touchingly observed to me that the nature of her duties was far more sad.

The wounded soldier, she observed, returning from the glories of a victory in which he has taken part may, and does not seldom suffer physical torments hard to endure, but the midst of these torments, bright feelings, cheerfulness, knowledge of duties well performed, hoped-for reward and gratitude of his


Hallett, Christine E. “Nursing, 1830-1920: Forging a Profession.” 46-73; has ref to Seacole: “Although Mary Seacole is often ‘held up’ as the ‘first black professional nurse,’ she was unique, and her example was followed by very few individuals in her own time.” refs to LM exploding myths (50); 50: acks influence of FN; 55 wkh nursing Liverpool Jones; 60-61 not bad on FN but says other schools independent; and Bart’s first for 3 years; Borsay seems only one to “Florence” FN; 5: Jane Robinson’s “rehabilitation of the black nurse, Mary Seacole—quickly forgotten after her death, but greeted with rapturous enthusiasm’ at the public banquet held in London to honour Crimean soldiers. Nevertheless, biographies.” (Note cites Meditheme). Does not say much
Anne Borsay prof of healthcare and medical humanities at Swansea; Billie Hunter prof of midwifery at Cardiff; Hallett article okay

Hallett, Christine E. Celebrating Nursing: A Visual History. Melbourne: Ausmed 2010. 192 pp. Nice pics. No refs to CWFN. Only ref to FN work Notes onN; women first named. Good on nurses other than FN and not too bad on FN, but? Ironically, the arrival of Nightingale’s party did not lead to a reduced mortality rate at the Scutari barracks hospital. Indeed, when Florence studied the statistics later with Dr John Sutherland, a member of the Sanitary Commission to the East, she was dismayed to discover that mortality rates had actually risen during her time there.”
good grief.

Halliday, Stephen, “Commentary: Dr John Sutherland, Vibrio cholerae and ‘Predisposing Causes,’” International Journal of Epidemiology Impact Factor 31,5 (2002):912-14. Historian, social and engineering; Sutherland and FN, but long quotes from his early work. Pub 1850, his MD was 1831, (BA Cambridge, social historian, Gresham College, broadcaster, Pembroke College) Koch did definitive paper in 1879. Wd be comforting to record that his discovery resolved the debate over the causes of epidemic cholera. However such a claim would be false. So resolute were some of the protagonists of the alternative ‘miasmatic’ explanation of disease causation that they were not to be convinced even by a definitive scientific explanation from a future winner of the Nobel prize for medicine. Then JS: author at Buckingham Chilterns:

Chadwick and FN “maintained their allegiance to the ‘miasmatic’ explanation of disease causation despite Koch’s discovery many years before their deaths.” NO, another wrong source on FN forever against germ theory; journal member of committee on public ethics International Ep Assoc: JS died 1891


3: “The training of nurses at St Thomas’s Hospital was made possible because Florence Nightingale used the prestige she had gained from her work in the Crimea to set up a charitable fund, amount to £45,000, to pay for it. Education, such as it was, lay in the hands of Dame Schools...”
21: “Upon her return from the Crimean War, Florence Nightingale 22: in Bucksh, where “FN was a strong advocate of this ‘miasmic’ theory and in her classic text Notes on Nursing she criticised the practice of laying drains beneath houses, suggesting that odours would escape from them, penetrate the dwellings and cause epidemics of scarlet fever, measles and smallpox.” end 7.

Page number? “Enormous sum of £45,000 to fund the Nightingale training school at St Thomas’ Hospital, but her reputation did nothing to protect her from the suspicions of doctors who were worried that trained nurses might threaten their status and livelihoods. Mr J.F. South, senor consultant surgeon at St Thomas’s, declared that nurses were ‘in the position of house-
maids’ and this ‘this proposed hospital nurse training scheme has not met with the approbation or support of the medical profession.’ Despite... opened 24 June 1860; cites Intro Notes on Lying-in; Snow, 7: “However in the absence of a germ theory of disease, Snow failed to persuade many during his lifetime. Almost ten years after his death, his diagnosis came to be accepted by some influential public figures, but others remained sceptical well into the twentieth century.

81: One of them was the redoubtable Florence Nightingale, who in 1910 went to her grave believing that disease was caused by a bad smell, not by polluted; section on JS.

115: during this visit Sutherland met Florence Nightingale


97: “Florence Nightingale said that what nurses do is to put people in the best condition for nature to cure them and she added that nature alone cures -- that neither doctors nor nurses cure (Nightingale 1969 edn.) I see no conflict between Miss Nightingale’s statement and my own attempt to describe what we are calling today ‘the essence of nursing.’ But along with this ‘essence’ or unique function of nursing (of which nurses are masters--whose method of implementation they design and prescribe) nurses also help people carry out treatment prescribed by physicians.” Chapter 8 Care of the dying

234: FN statistician. Nursing research

248: little nursing research before 1930. Ref to FN

266: cites Nutting on FN as statistician

267: "The system of nursing in our Western culture derives from the practice Florence Nightingale advocated in Notes on Nursing and other publications on nursing education written before 1900. These works and the Nightingale pattern of nursing have been widely acclaimed; few people seem to have recognized and emulated Nightingale’s ability to conduct investigations and use the
findings as leverage for social action or as a basis for nursing practice.” Fenwick... Nutting Stewart... Re research.

Rose of research in nursing, FN never went to college but “did more with her statistical studies to affect the care of hospitalized patients and the conditions under which British soldiers lived in their barracks than any nurse of today has accomplished for comparable groups of citizens through implementation of his or her recommendations based on research.” sometimes called “the first medical statistician” Nightingale could 301: “persuade the British Government to change conditions in hospitals affecting the health of military personnel because her... “showed convincingly that existing ones were harmful. Until nurses... employ research to materially affect the practice of nursing and...

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325: cites Henderson ICN Basic Principles re health care as a whole

325: Definitions of nursing from Nightingale era to present, from NonN

328: Abdellah 1960 patient-centred approaches, ... etc. between


Halloran, Edward. Notable Women and the Men Who Listened to Them: Disease Prevention During the American Civil War. Email paper. Disease mortality during American Civil War summarized in The Medical and Surgical History of the War of Rebellion, white soldiers in Union Army 5.3% blacks 14.3%
Confederate troops 16.7%
Confederate prisoners of war in Union prisons 23%
Union prisoners of war in Confederate prisons 51.6%
FN. George Rosen, ed AJPH saw FN, a “Chadwick inspired San Com” 3: at Balmoral prevailed on the queen to form a Royal Com; end7 1861 pub
5: Oliver Wendell Holmes credit as daughter of Hippocrates. “Above all, Nightingale became a sanitarian and acolyte of Edwin Chadwick during her deployment in the East.”

7: FN’s improvements at the BH began as soon as she arrived, months before the San Com, however it made the structural changes needed, cleaned out the sewers, etc. what FN sent to Jarvis

13: “Albany Medical College”? Not the Geneva Medical School?

14: Blackwell and her committee of the WCAR Women’s Central Assoc for Relief, New York, examined and approved nearly 100 women for nurse work, sent to Wash end 66

Dix not the organizer? ?? End67 No one did, irregular

15: Frederick Law Olmsted, gen sec to US San Com, organized it to send inspectors to camps to gauge fitness of troops for war, began 21 July 1861 when North lost first Battle of Bull Run. Olmsted, *American Medical Times* 10 August 1861 “The records of the British Sanitary Commission and the reforms by them instituted, which owed their existence and vitality to the plastic female element, embodied in the person of Florence Nightingale, the Saint of Sanitary Science, with the remarkable and tangible result of reducing the mortality from sixty percent to less than the Guards of London by the application of the laws of sanitary science and sound common sense, prove beyond a shadow of question that we may enjoy similar benefit without the preceding experience of an ignominious and murderous mortality. Endn73 (Olmsted, *The Sanitary Commission, Report of the Resident Secretary. 1861.*)

End74 Stat form FN sent to HM for Jarvis had 141 questions, used in India, in appendix of Royal Comm report endn75 Olmsted saw the questionnaire good for teaching more than gathering data;

16: Delafield made much of FN in report, met endn77 and 78 Mordecai to wife; Delafield visited Castle Hosp and BH end79, became head of Mil Academy West Point after;

17: inspectors had a 180 item questionnaire to evaluate officers’ knowledge and each elements of san sc re air, water, insect and vermin vector, and food borne diseases; Farr’s nosography as zymotic, considered preventable by sanitarians; but turned to relief from prevention

18: Union Army most exposed to preventive efforts of san sc WCRA of NY AND US SC mortality of US colored troops 14.3 or 3 x rate for Union in Wr of Rebellion endn87, but drop in morality 1863

19: different estimates of Confederate mortality disease mortality reductions, EB Elliott, actuary for USSC delegate to 1863 Berlin Stat Congress, did paper on Union Army experience; only 1/5 mortality of Br in Crimean (t.2 vs 22.1) FN not mentioned in any of 6 books of Med and Surg Hi of the War,
nor in Smith’s; Judith Ann Geisberg, Civil War Sisterhood for contrib of northern women
23: the only foreign person Olmsted mentioned in his 1890 reflection of the USSC was FN, among the first to militate for prevention, trumps relief.
WCAR determined to use knowledge and sc to prevent Crimean catastrophes from occurring here. Endn105, wanted san com before problems occurred. “That the British so well documented their experience and their reforms well before Lister applied Pasteur’s experiments to surgery, and that they served as an example for Americans in a longer war in an unhealthful place, is truly a tribute to Nightingale’s perseverance and the reforms of the British Army through the application of sanitary science.” endn107

Hamilton, Diane, “Constructing the Mind of Nursing,” 204-205: “Florence Nightingale and the Observation of the Sick” 205: FN carved out essential role for nursing in diagnosis and tr of conditions leading to poor health and sickness, even as physicians were increasingly claiming diagnosis and tr exclusively, dealt with what caused condition, observation 263: FN saw nursing as an art, not a science which red systematic educ and structured practical work
87: Red Cross Associate Commissioner for Newfoundland, ministered to shipwrecked soldiers and sailors of North Atlantic run, “the Florence Nightingale of St John’s” OBE for it, Mona Wilson, prov director of Public Health Nursing, until 1961;

Hamilton, Mary Agnes. Newnham: An Informal Biography. London: Faber & Faber 1936. seen at Newnham FN refs, Cassandra, gave a paper but didn’t read it.

Hamilton, Frederick William. (Sir) The Origin and History of the First or Grenadier Guards: From Documents in the State Paper Office, War Office, Horse Guards, Contemporary History, Regimental Records, Etc. 3 vols. London: J. Murray 1874. states 511 all ranks died in hosp in Cr, Turkey, Malta etc. contrary to statement of Norwich that “of the three hundred Grenadier Guards she served, not one survived.” author KCB, Lt Gen (1815-90); in Cr War, Alma, Balaclava Inkermann and siege,

carrière professionelle des gardes-malades fut Mlle Florence Nightingale." both for England and world.

137: "Elle se mit à étudier tout ce qui concerne les besoins du malade, les qualités et le savoir utiles aux gardes-malades, les conditions nécessaires à une bonne construction hospitalière.

Aussi, il n’est pas étonnant qu’après s’être consacrée pendant neuf ans à cette étude spéciale, elle ait été capable de transformer de fond au comble les ambulances anglaises de Crimée, et ait pu en abaisser la mortalité de 60 0/0 à 2.21 0/0!"

139: Quarante et un mille blessés dont 4600 succombèrent, furent soignés dans l’hôpital de Scutari, après l’arrivée de Mlle Nightingale et de ses aides. Elles y abaisserent si bien la mortalité, que ces ambulances présentèrent bientôt un contraste frappant avec celles des autres nations. (Ftn Pollard) result from extraordinary sanitary results she brought in and corr with SH, 136: ref to Kai;

139: Scutari. 41,000 wounded of whom 4000 succumbed treated at hospital of Scutari after arrival of FN and “ses aides”. “Elle y abaisserent si bien la mortalité, que ces ambulances présentèrent bientôt un contraste frappant avec celles des autres nations.”

ftn: La Croix Rouge de France, 20. Ministère de Guerre sent inspector; 156: France behind good chapter, cites her thesis. on war, St T, historical Eur background; 144 12 mai 1900 her former pupils offered to FN an album, with signatures from nurses in Australia, South America, Africa, China, Algeria, Denmark, India, Canada etc.; 157 first English nurse employed in France was 1896, Marseilles, from London Hospital, but example not followed; 157: English nurses now teaching at the Greek Hospital in Alexandria, and at Cairo, at the Athens Hospital Saint-Sophie. Hospital International Naples, and Casa di Salute Ville Regina Nationale Florence; 158: French nuns gradually replaced by nurses; 166 nursing institute Manchester, large district nursing;

-- and Mme Jule Forsans. Florence Nightingale, ou "la dame à la lampe." Bordeaux: Imprimerie Delmas. s.d.

“Lady Dame à la Lampe” Bulletin de l’Ecole Florence Nightingale 1,1 (Janvier 1922). introduces first no. LMA H1/ST/NC15/29 (looks like a pamphlet, seems to be first issue of a periodical); Hamilton as directrice de L’Ecole Florence Nightingale; has article on”soignage” by J.D., “Questions de Pratique” hygiène alimentaire. Mme Veuve Forsans listed as marrying 1921.

French doctor, in the major nursing history published in French, credited Nightingale’s nine years of study pre-Crimea, on the needs of the sick, knowledge needed by nurses and good hospital construction, for her ability to transform the hospitals, from top to bottom, resulting in lowering the death rate from 60% to 2.2%. E: Hamilton, Les gardes-malades, 137. A further remark includes the team of nurses. Ibid., 149.

--and Mme Jules Forsans, Florence Nightingale. Neuilly: 1933. 212
pp. No index, did do research but refs spasmodic. “Sir Sidney” and “Sir Herbert.” FN is “Miss Nightingale” strong on asepsis, ahead of time, excerpts from major books. Good to rec in French.

Hamilton, Lynn M. Florence Nightingale: A Life Inspired. Wyatt North Publishing. Has her as Unitarian, from first sentence! 112 pages plus; kindle edition also


Jan. Barrack Hosp. corridors or wards. 150: “Entering any of the corridors or wards, the same scene presented itself. The occupants of some of the beds sat strongly up, eating heartily their soup and meat; others, emaciated to skeletons, more like corpses than living beings, except for the large, hollow, anxious eyes, lay back on 151: their pillows, or tried with difficulty to swallow the spoonfuls of arrowroot or sage offered to them by the attendants. There seemed no doubtful class--all were broadly marked either for life or death... At some beds a woman, the wife of the patient, sat chatting with him; beside others stood the somewhat ghostly appearance of a Catholic sister of charity, upright, rigid, veiled and draped in black; the veil projecting far beyond her face threw it, as well as the white linen folded cross her bosom, into deep shadow. The thinness of some of the forms propped up against their pillows, their chests exposed by the open shirts, was absolutely frightful; the bony hands wandered vaguely about the hair and sunken temples, and the eyes were fixed on vacancy. Some lay already in the shadow of death, their eyes revealed, showing only the whites beneath the drooping lids, and others had passed this last stage, and waited only for the grave.”

151: Rebecca of the Ivanhoes, quarters of nurses. Saw “the chief of them herself, Miss Nightingale, lifting the piece of tapestry before her door for a parting visitor, stood for a moment revealed.” 152: she bid her last visitor adieu then tapestry fell and she vanished. 8 Prot ladies, rather larger number of Catholic sisters, about 40;

152: “In the great kitchen, close by their quarter, rice pudding, manufactured on a grand scale, was transferred, smoking, by an enormous ladle to the destined platters; beef-tea and mutton broth were being cooked in huge caldrons...and flocks of poultry were simmering into boiled fowls or chicken broth.”

Palace Hosp, and Coolali, where a large barrack occupied by English cavalry and artillery before army left for Varna, “All these buildings were clean, cheerful, airy and comfortable. They contained in all, at the time of my first visit, 4700 sick, increased to 5000 at the end of January, and from first to last 10,000 men had passed through, some back to the Crimea, where in many cases they had relapsed into sickness and died” [gives good
account of hosps, incl Kulali! Koulali]
312, Chapter 31 The Last Hours of Sebastopol
315: “The whole garrison withdrew unmolested under cover of the night, and destroyed the end of the bridge of rafts on our side of the harbour. The bursting mines and blazing streets prevented an entrance in the dark, and it was not till after daybreak that the Allies were within the works in any numbers, when the only Russians captured were a few--some of them wounded--who were found lurking in pits and holes, and who had perhaps remained to fire some of the mines.

The bodies of those slain in the assault were collected in the ditch of the Redan....The dead Russians were placed together at one end, and when all were collected, the earth of the slope was shovelled over, and the rampart they had fought for formed above assailant and defender a common funeral mound.”

153: burying ground

Hamlin, Cyrus. My Life and Times 334-35
When the business was finished the purveyor said to me ‘Fancy, Mr Hamlin, some women have come to the hospital! A Miss Nightingale with a force of assistants, has come and taken possession of rooms at the right of the front entrance. Was anything ever more improper than women in such a place?’

I replied, “It is time, Mr Parker, that somebody should come in here and do something, but I do not believe that any Turkish hospital since the Turks took Constantinople ever equaled this in disorder, filth and suffering.”

“I know it, I know it,” he said, “but we are soon to have surgeons and servants from England, and the things you have seen will soon be remedied. But these women will not stay long.”

Hamlin, Cyrus. My Life and Times contd
333: “It was just at this time that Florence Nightingale came, with a dozen trained nurses and forty hospital servants....” went to hosp and purveyor said to me, “Fancy, Mr Hamlin, some women have come to the hospital! A Miss Nightingale with a force of assistants has come and taken possession of rooms at the right of the front entrance. Was anything ever more improper than women in such a place? I replied: ‘It is time, Mr Parker, that somebody should come in her and do something, for I do not believe that any Turkish hospital since the Turks took Constantinople ever equaled this in disorder, filth and suffering.’

335: Menzies recalled, replaced by a doctor from England. Had been in collusion with Tom Parry and other contractors and had plundered the government enormously.”
335: Very soon Miss Nightingale transformed that hospital. From the first, she divided her forces into night watches, and there were nurses and assistant nurses walking those corridors and wards all night long. The nights were no longer lonely. Every want was attended to, every pain, if possible, assuaged. The
death rate was changed immediately. 337: Her coming was soon after I had denounced the bread contract. She knew nothing of that until she visited the hospital at Kuleli [Koulali] where my bread was still used. She expressed surprise at such excellent bread, so superior to what she had at the great hospital. Dr Tice told her the whole story. She went immediately to Lord Stratford de Redcliffe and demanded that bread. He at once ordered my bread to be restored at the advanced price of the new contract. ‘The triumph of the wicked was short.’ The conspiracy saved me every way, and 338 into the pit which they digged for me they fell themselves.”

More contracts 354: had to get bigger oven, old one repaired.


329 bread gave “such satisfaction” that contract renewed without competition, by “express orders of Lord Raglan.”

329: “The rapid filling up of the hospital by invalids and the wounded sent down from the front occasioned enormous evils that prudence and foresight should have prevented. Vessels were arriving almost every day, with fifty or a hundred or two hundred cases, and this rapid increase was not met by any corresponding increase of surgeons and nurses. The chief physician, Dr Menzies ... was a selfish, greedy, beastly fellow, who seemed to think that if the English soldier is given beer and brandy enough, he will do. The death rate was awful. The trenches were dug in the daytime, the burials were at night to avoid a panic.”

Good old purveyor, Mr Ward, made prodigious efforts to relieve suffering.

330: when bread supply became large, Rogers, the 2nd purveyor said he “must give to him and Dr Menzies a share of my profits.” He refused. Conspiracy formed, with Menzies and Rogers chiefs, and 1 or 2 other doctors. Bread over heated to make it ferment. Then made bad bread, bogus, 331: and sent as their bread, but the shape was different. Then inserted bedbugs and sent as specimens of his bread. Contract cancelled and penalty of £200, to Lord Raglan, who cancelled the penalty but got a new supplier.

332: 50% higher cost of flour.

332: “The great hospital in the meantime had reached its highest point of misery and disorder--not less than six thousand invalids, with no sufficient supply of medicine or other service and no organization to use to advantage....Such scenes of suffering and wicked neglect I never witnessed....Men were dying; some were dead and the sheet drawn over the face. The smells and sights were awful.” 333: asked what needed of a man in a half-sitting position, night watchers. He offered to Menzies, rejected.


Introduction, Isabel Stewart xv-xic; Congress not the only major event of 1893, that year Wald and Mary Brewster founded Henry St Settlement, an experiment that set a new pattern in community nursing and gave leadership to public health nursing movement; first preparatory course for nurses and first connection with a college started 1893 in Glasgow by Rebecca Strong, with surgeon Sir Wm MacEwan at St Mungo’s Medical College; first official pub, BJN started by Fenwick; and American Society of Superintendents of Training Schools for Nurses started, parent of present includes: her Educational Standards for Nurses, supt of nurses and principal of the tr school, Johns Hopkins 1-12 FN “Sick Nursing and Health Nursing” by FN 24-43 On Nursing by Mrs Stuart Wortley 43-49; with lots on FN

Kai, Fliedner Institute.


Rachel Frances Lumsden. On Nursing in Scotland. 67-72

67: before 1872 no tr, , started from St T and N school; 69: Glasgow 2 large hospitals, Glasgow Royal Inf est 1791, later than Edin and Aberdeen, Western Inf; Aberdeen from 1739; Sick Children; QVJI (descriptive article of insts)

Leon Le Fort, “Les écoles d’Infirmières annexées aux hôpitaux civils de Paris 73-78, schools at hospitals tied to expulsion of nuns, or the laicisation of hospitals (but later softened on this)

Dr Charles Krafft, dir, “La Source Normal Evangelical School for Independent Nurses for the Sick at Lausanne, Switzerland” French surgeon Ambroise Paré said “I dress his wounds, God heals him.” 16th cen. School, La Source, trains

Irene Sutliffe “History of American Training Schools” 88-92

89: 1798 New York Hospital had nurse training, Dr Valentine Seaman gave classes; 1861 Woman’s Hospital Philadelphia, exams and certificates; 1872 Boston; 1873 est Bellevue in New York, Mass General in Boston and Connecticut in New Haven; 1875 Blackwell’s Island organized

90: 1876 New York Hospital School organized and 1877 Buffalo General School; Waltham

Louisa Twining. The History of Workhouse Reform. 182-87
Eva C.E. Lückes. London Hospital Nurses’ Home. 201-03.
Louise Darche. Proper Organization of Training Schools in America. 93-102
Amy Hughes. The Origin and Present Work of Queen Victoria’s Jubilee Institute for Nurses. 111-19.
Florence S. Lees. On District Nursing by Mrs Dacre Craven 127-33. Takes in back to Hospital of St Katharine, founded 1148 by Queen Matilda, for care of sick poor in neighborhood of hosp; then St John’s at King’s, 128: Rathbone, not until 1874 National Nursing Association, with Order of St John of Jerusalem, Lady Strangford, Lees hon sec; 129: FN’s letter of 1876
Linda Richards. Mission Training Schools and Nursing. 145-48
Zepherina P. Smith, née Veitch. Midwifery as a Profession for Women. 172
Le Fort, Les Ecoles d’infirmières annexées aux hôpitaux civils de Paris.

Veitch, Zepherina P. Handbook for Nurses for the Sick. 2nd ed. Rev. and enlarged. London: J. & A. Churchill, 1876 121 pp glossary has zymotic: “those diseases that seem occasioned by poison which breeds in the body” ded to Sir William Fergusson, bart FRS KCH; ack Lloyd of St John’s House, Ogle, Derby, trained at UCH vii: nursing calls for every Christian virtue, no romantic ideas; chapters: Beds Patients, operations, 4 note tacking, war, on observation 104: “our great authority on nursing, Florence Nightingale” cites, then Ogle, chatty

Hampton: Out of the Arc Music

Hampton Robb, Isabel. Educational Standards for Nurses: With Other Addresses on Nursing Subjects. Cleveland: E.C. Koeckert 1907. 15 papers (speeches). 1: as given at Chicago 1893 International Congress of Charities, Correction and Philanthropy, Section III. 11: progress of med sc, nurse “handmaid of that great and beautiful science” can serve only in minor parts, but duty to endeavor to grasp import of teachings; more than mechanical skill; 2. Aims of Johns Hopkins Tr School for opening of school 1889 3. Distract nursing, ack UK ahead 4. 3 years’ course and 8 hour day. 1895 annual conv of Supts 65: 3 years’ course requires shorter hours of work
69: outlines specifics for 2 years, then added 3rd year, incl materia medica, human anatomy, physiology, diet
70: gyne and obst
5. Nursing in smaller hospitals 1897
6. Modern hospital nursing. Opening of Lakeside Hospital, Cleveland 1898, private hospital
98: tribute to FN, heroine of the Crimea and patron saint of nurses, light of her lamp
99: preventive medicine, for physicians and nurses. Cleanliness; “There is a deeper meaning which can only be appreciated by those who have mastered at least the broad principles of bacteriology. How hopeless and dull, not to say irritating, would be the many washings and the various aseptic precautions which are now required from the nurse by the physician unless she had learned from bacteriology to appreciate the fact that there exists a surgical, a microscopical cleanliness. For this purpose then the nurse must have some knowledge of the broad principles of bacteriology.” to appreciate effect on patient of air and food must know ventilation and hygiene, physiology, 101: character, needs moral and educ advantages, scrupulous honesty
104: at Cleveland, pupils get no payment but get thorough education for their work;
7. Aims, methods of Associated Alumnae of Trained Nurses of the United States, New York 1898, also of Canada
112: L.L. Dock, for national organization, Feb 1897 and Sept 2 1896 conventions, on 2 Sept 1896 Alumnae associations had first meeting, Manhattan Beach, bylaws drafted, for next meeting Feb 1897 in Baltimore
122: need for publications in nursing profession
8. Hospital ec course, Superintendents’ Society, Toronto 1898
9. Report on above
10. Lessons of late war, Sp-Am. New York 1899. Assoc Alumnae 150: wrote Sec of War, 28 April 1898 urging professional standards; but US gave to DAR to organize, under a doctor. Their org too late to have an effect.
11. State registration. Assoc Alumnae New York, 1900. Timing now. Not earlier, has to be state level (thought Canada cd do national)
170: need for better organization of nursing, also in other countries; New York the first
176: state registration “the next and most important step towards achieving a fixed professional standard.” cant be national. ; New York took the initiative;
177: “Only by a complete system of registration will it be possible for trained nursing to attain to its full dignity as a recognized profession and obtain permanent reforms.” As now, nurse who has full training has to work side by side with uncertified hosp nurse or one dismissed for cause or half trained nurse;
with reg, recognition as doctor or lawyer and public provided with a distinguishing mark to show whether properly trained.

Women on hosp boards

Quality of thoroughness in nurses’ work Johns Hopkins 1903, reflects on 13 years earlier at JH

Affiliation of Tr Schools for Educ Purposes. Washington 1905. Need plan, organization

The Nurse as Citizen, Trained Nurses’ Club, Toronto, 1906

257: nurses more favourable circs in Canada, dont need state by state, can have national issue one standard for all provinces. NO. Can give “a uniformly high grade of nurse and of nursing service.”

263: for home hospital, small hosp “Would it seem heresy on my part to suggest that the day of large hospitals may pass and that in the future they may be superseded by the home hospital? The large hospital has done and is doing good work, but it cannot meet all the needs.” Home hosp also teach health


Hankinson, Alan. Man of Wars: William Howard Russell of The Times. London: Heinemann 1982. FN “also used the press to exaggerate her own role in medical reform at Scutari. (100). No examples, after Chenery forced govts to take media and war reporting seriously, (so like Chenery) but no examples given.


Chapter 26 The Crimean War 1854-56. How successful was it? [nothing on FN, Seacole or hospitals]

Chapter 29 Public health. The work of individuals was important for the improvement of public health during the 1800s. Chadwick reports, Lister. “The long-term influence of Florence Nightingale transformed the nursing profession after the establishment of her School of Nursing at St Thomas’s Hospital London, in 1860. Even medical technology improved with the....”


WR went to FN, but his letter not extant; his attempts to get district nurses in 1859, St John’s House, KC, St T, Mrs Fry’s Devonshire Nursing Inst, and the Nursing Soci in Liv, but 2 latter defective, only a couple of months work in hosps, where no regular tr school (5). “I went to Miss Nightingale, who told me that we ought to train our own nurses in our own hospital, the Royal Infirmary. I went there and found that they had no facilities for training nurses...” only 3 or 4 tolerable nurses, from Rathbone, Memoranda of Family Traditions and “Facts privately printed. Royal Inf became royal on queen’s visit in 1851; Nurses’ home completed and handed over to inf May 1862 (6), when enlarged, 1870s family firm paid cost of £2500; Merryweather stayed 1862 to 1874; Rathbone visited Dublin 1887 promised he and others wd make gift of £1000 for starting district work, but “religious difficulties caused delay” (9); started Manchester 1864, Derby 1865, Leicester 1867;


vii: After the war was over, Florence was never the same again. The two years of overwork soon turned her into a permanent invalid. For nearly all the rest of her ninety years she lived in bed, working with her pen, and giving orders to her small group of devoted fellow workers....If Florence Nightingale could be called a saint, she was a reluctant one. She complained bitterly all the while she was sacrificing her life to the causes she believed in. Her barrage of self-pity drove away her friends and family, and she became a very unhappy woman.” good grief


Harmer, Bertha. Textbook of the Principles and Practice of Nursing. New York: Macmillan 1922. 695 pp. Same 1924 a reprint, same ed. Also 1926; 4th ed. rev is Harmer and Henderson 1939; 5th ed 1955; only a few refs to FN, but extensive use of her ideas; no ref evident to Robb;

Chapter I introduction, object, what it is and what it includes; elementary and advanced nursing; 3: Its object is to prevent
disease and to preserve health. Nursing is therefore linked with every social agency which strives for the prevention of disease and the preservation of health.” Nurse concerned with care of the individual and “the health of a people” day of judgment, visiting the sick. Nursing includes all of this.

4: (FN in 4th paragraph of book) disease a reparative process - cleanliness, warmth, punctuality etc. “Attractive, quiet, orderly and comfortable” bathing, feeding, assisting the physician, liaison with Social Service Dept.

5: “nursing springs from the ideals of service, love and brotherhood -of service to those in trouble, sorrow, sickness or pain and in the time of death” no one except possibly the physician and clergyman who touches so closely the inner life of the people. Sympathy, kindness and unselfishness needed, more loving and spiritual to support the patient with a feeling of strength, security and comfort. Quotes Osler “no higher mission in life than nursing God’s poor”; cheerful, optimistic spirit helpful

Chapter 2, the hospital as a home for sick people; functions, type
Chapter 3 ward hygiene, ventilation, temp, pure air, heating, lighting, 20: cites FN on natural light, from sun, sun as germ killers;
21: plumbing, cleanliness, floors, walls, ceilings, furnishing, utensil, “There can be no true ventilation, which includes the removal of all impurities from the air of a room, as long as articles or any part of that room is dirty.”
22: “Cleanliness one of the strongest supporters of good health; it affects both the mental and physical health and is a powerful prophylactic against disease. Dirt is offensive to the senses…”
24: cleaning agents

Chapter 4 hospital bed; Chapter 10 feeding the patient, type of food required, (more detail on composition than in FN) how to feed, observation of what eaten
Chapter 13 cardinal symptoms, temp, pulse, respiration, “the importance of close observation”

Harmer, Bertha. Methods and Principles of Teaching the Principles and Practice of Nursing. New York: Macmillan 1926 136 pp; 4th ed 1947 by Harmer and Henderson 1047 pp; online 15: hospital ward as a home for sick people. Importance of factors of ventilation, lighting and cleanliness, etc. in the recovery of the patient and the means of providing them, so as to get the best results,... ventilation cites FN here

Harris, J. Delpratt. The Royal Devon and Exeter Hospital. Exeter: Hospital Committee 1922. No FN in index, or Pepper. 1889 reports first supt of nurses appointed (176); Miss Miller, trained at Haslar; Aug 14 new Nurses Home built in garden of hospital; 1893
instituted system of ward sisters or charge nurses, and first and 2nd year probs; odd, don’t cite.


“Mike Barfoot’s study of nursing reforms at the Royal Infirmary, Edinburgh, which revisits some of the debates over Florence Nightingale’s ‘motivation,’ endorsing the recent tendency to interpreting her actions in terms of her strongly-held Unitarian beliefs.” also has a ref to “the ‘miasmatic’ theory to which Nightingale was so attached and her class-based world view.” in review of Cheryl Cordery


Early medical schools. Padua

18: aught humoural theory “correcting or preventing an imbalance bw=et between the humors| endured so long: when in balance the body deemed to be healthy. 4 ages of man, and 4 elements of earth fire air and water and 4 evangelists; helps to explain why endured so long;

94: anti-vacc movement in England less inclined than Continent to reject out of and, but complaint about compulsion, rather than vacc itself, had support of working class people who could not afford fines levied, saw as analogous to branding of cattle and slaves; 1871 Vaccination Act, by 1890s anti vacc more moderate, National Anti-Compulsory Vacc League, meddle class;

4: “Several prominent sanitarian – including Florence Nightingale – were amog those opposed to vaccination” end8

(Porter & Porter “politics of prevention” not in Biblio; and Baldwin, Contagion 288)

122: Listerism more popular in Germany than Br, where general cleanliness often preferred to specific anti-septic measures, “a legacy of the sanitary reform movement and the hospital and nursing reforms inspired by Florence Nightingale.

By end of century Listerian antisepsis began to merge with asepsis, New germ theories also connected with public health
from consumption to tuberculosis, Koch’s discovery of the bacillus causing tuberculosis, TB resp for more deaths in industrialized countries than any other disease, greater than mortality form cholera epidemics, worst year 1849, phthisis or consumption, Laennec conducted classic study that est confection between different varieties of TB, Koch announced discovery at a meeting of Physiological Society in Berlin March 1882, mixed reactions, many doctors saw as hereditary; 2 years later bacillus causing cholera

Hart, Ellen. Born to Live: Life and Work of Henry Dunant Founder of the Red Cross. London: Victor Golancz 1953. Good book FN influence 104-05 and 258-61; use 258 for citation on FN “it was Florence Nightingale’s work in the Crimea that inspired him to go to Italy in 1859 when he witnessed the Battle of Solferino.” his book on it led to the framing and completion of the Conv of Geneva in 1864 for the amelioration of the lot of the sick and wounded on the field of battle. “The credit, then, of the 260: Convention could be given to the great Englishwoman.” then went on to plead for a further treaty for the protection of prisoners of war.


Hatcher, P.A. Scarinzi, G.D. and Kreider, M.S. “Meeting the Need: A Primary Health Care Model for a Community-based/nurse-managed Health Center.” Nurse Health Care Project 19,1 (Jan-Feb 1998):12-19 authors Univ Maryland. Not seen. Abstract, long before Alma Ata when 113 nations agreed to incorporate principles of PHC in their health care systems (WHO 1978) nurses were practising since FN, in US in early 1900s

Hawkins, Sue. Nursing and Women’s Labor in the Nineteenth Century: The Quest for Independence. London: Routledge 2010; cites FBS; 5: FBS and supports, Bradshaw also vs. “Despite their reception, such works legitimized the critical analysis of Nightingale’s role in the development of modern nursing, to nursing history’s gain.” Summers. Introduction has some history; Chapter 3 on training, education or cheap labour? 75: FN broke from sisterhood model, no vows; saw potential for conflicts of loyalty if in orders, her plan “required applicants to be committed Christians, but stopped short of establishing a new religious order” Holcome 1973, Vicinus 1985; fell for Meehan “careful nursing” line (75) cites
Bradshaw 2000 that FN attracted by sisterhoods’ focus on dev of character and installation of discipline [but at Kai] on


Hay, Ian [Maj-Gen John Hay Beith]. *One Hundred Years of Army Nursing: The Story of the British Army Nursing Services from the Time of Florence Nightingale to the Present Day.* London: Cassell 1953. NAM. chap 2 is The Lady of the Lamp 22-34. “Florence” Doctor Manning, light weight; but Lady Shaw Stewart Army Nursing Service, lady supt Oct 30 1869, Mrs Deeble Nov 1 1869-1889, Miss Norman 1889-


Hays, Jo N. *The Burdens of Disease: Epidemics and Human Response in Western History.* New Brunswick NJ: Rutgers University Press 1998 [also later]; positive on FN effects, but wrong on significant points, no sources given. Author historian, Loyola U. 147: by 1850s sanitationism dominated. Chadwick, Simon and FN 148: on FN background has her falling ill on return from Crimea (nothing on nearly dying there); lived for 53 years“If anything her belief in the miasmatic origin of disease exceeded Chadwick’s, as she applied her energy and intelligence to sanitizing first British army quarters and then the Indian subcontinent.” 221: Kai a “nursing centre” based on Mannheim method, and her model at St T. (But did not teach nursing at all, pedagogy) “Residence in the German nursing institution at Kaiserswerth, founded by Theodor Fliedner in 1833, introduced her to disciplined professional nursing.” NO. Then Harley St. then “traveled to the Crimea in 1854 to organize sanitation and nursing for the Br army fighting the Russians there.” no Turkey, and sent to nurse; career mythic, lady with the lamp “Although in fact she was more a ruthless sanitary reformer than a compassionate nurse.” prestige, nursing school on Mannheim model at St Thomas’ 1860, “a self-proclaimed invalid, confined to a bed,” working and driving colleagues; most efforts centered on
the health of troops NO
228: FN harnessed nursing to a devout sanitationism YES germ theory
238: germ theory "When Florence Nightingale, a sanitationist who did not like the germ theory, insisted that disease was 'an adjective, not a noun substantive' she spoke for an earlier tradition, one that placed 'disease' and 'health' on a continuum." (Adjectives, not noun substantives' in lib standard, 1860, repeated "practically speaking" "For diseases, as all experience shows, are adjectives, not noun substantives." in lib standard, modified in 1893
amazing! FN discovered not to have known about germ theory in 1860 when doing second edition of her Notes on Nursing.
Cholera and Sanitation 2009. 139 FN
223: 148 sanitationism dominated, Chadwick, FN and Max von P in investigation of Hampstead Hosp, said nursing in "precise accordance with recommendations of Miss Nightingale" 2 November 1871 Times 11B

Healey, Edna. Lady Unknown: The Life of Angela Burdett-Coutts. London: Sidgwick & Jackson 1978. has work with Dickens, sending drying machine, cost £150, built by 9 Feb 1855, 6 ft sq and 7 ft high, iron with wooden covering, by Jeakes. London Illustrated News reported 1000 articles cd be thoroughly dried in 25 minutes with aid of Mr Jeakes’s centrifugal machine, took wet out of the linen before placed in the drying closet. (Pic on 117); 116: Dr Sutherland said the wet clothes give up as soon as see it. Spin dryer at extra price of 18 Gs, p117, pic of drying machine, from Illus London News 1855, Dickens helped her to design it so that 1000 articles cd be thoroughly died in 25 minutes

Healy, Kathleen. Frances Warde: American founder of the Sisters of Mercy, New York: Crossroad 1973. 535 pp From Carlow Convent, friend of Moore at Cork; started in Pittsburg; large order, many schools and hospitals founded. Midwest: Chicago had first Mercy Hospital; 174: 1846 first orphan asylum and hosp; 2 FN mentions, okay, re sisters nursing with, no details; Bridgeman wrote nasty letter about Warde; their hosps had more than half the patients charity;
443: cholera depot, 2 months after Warde received into convent;
444: relays of 4 nuns every 4 hours
445: Warde first Sister of Mercy professed by McAuley; 447: acted as confidential sec to McAuley;

Heaman, E.A. St Mary’s: The History of a London Teaching Hospital. Liverpool UP/McGill–Queen’s 2003. Refs to Rachel Williams incident and FN 114-15. Sieveking et al rallied forces when Williams lost on incident of Sarah Saunders; but in 1884 when Williams offered a position elsewhere bd offered her £250, or £100 increase; she resigned against FN’s advice [wrong, this
Heffenoger, Arthur C. “The Pavilion in Hospital Construction.” *New England Journal of Medicine* 114 (1886) 100: Herbert ward “although receiving the almost universal approval of English experts, with Miss Nightingale among them, is nevertheless by no means perfect.”


Promoters/mayor paraded empty carriage of FN around Southampton October 1856, to applaud her accomplishments in the war; her absence signaled a new leadership, of quiet determination, humility and pol strategy to improve quality of life; UG online; 22: lessons on leadership from the empty carriage story; clear vision, to improve the quality of life for soldiers whose care was deplorable during the Cr War Lessons on vigilance; mindfulness: focused concentration to increase choices and opportunities, vigilant; clarity of purpose and integrity to follow through; human becoming leading-following model, “Vigilant attending is cautiously witnessing” Parse 2008 p 371; lessons on reverence, for human life; human becoming leading-following model “revering others is honoring uniqueness” Parse 371; People need a hero in times of turmoil, create mythology to stabilize turbulence; lessons on collaboration and coevolution: partnerships, coevolution; 23: human becoming school of thought, Parse 370, continuously coconstituting patterns; Heroism focuses attention on the worker, not the work; lessons on engagement and keeping up...; 24: lessons on meaning-making; leader dispositions, list; Nightingale leadership qualities (nice list); when Abraham Lincoln called for nurses to serve wounded in Civil War requested nurses with humility (Kelly 1996); nurse’s prayer... humility; ends with Implications for teaching-learning in the nursing academy: The empty carriage story could prompt dialogue about pol strategies to precipitate social change

Hegge, Margaret. “Nightingale’s Environmental Theory.” *Nursing Science Quarterly* 26,3 (July 2013):211-19 Good on env theory, but lots of errors on Unitarianism, Kai, Harley St. (Had governesses, cooks, servants, prostitutes). Exaggerates what she did “Nightingale investigated wider causes at the battlefront to determine reasons for transport delays of wounded soldiers. She distinguished patterns by using numbered beds and captured mortality and morbidity statistics that she displayed in pie charts. William Russell, a war correspondent published these charts in the London Times, causing outrage among British readers
about military ineptitude endangering soldiers’ lives in Turkey.”
“She attended the deaths of 2000 soldiers herself,” but good quotations. Social justice concerns good.
Conclusion: “Nightingale’s environmental theory provides a basis for further theoretical development in nursing. Nurses should be equipped with precise mathematical reasoning, detailed observational senses, meticulous organizational skills and political acumen. Their commitment to a higher calling builds integrity, honesty, courage, sensitivity to suffering and persistence to withstand opposition. Nurses are in an ideal position to challenge unjust social policies and create meaningful reforms to shape a world that embraces population health.”

Hegge, Margaret J. “The Lingering Presence of the Nightingale Legacy.” Nursing Science Quarterly 24,2 (2011):152-6. Good, cites CWFN. But odd citations from Gill on use of heavy metals 153: used laudanum and curare, also opiates, heavy metals, arsenic and alcohol, “being cautious with dosages until she was convinced they were safe (Gill 2004).”
154: “She consulted with John Snow and Edwin Chadwick”; seems to mix up Crimea period with preface to Notes on Hospitals about no harm; Gill says she knew about from research, Hegge has she consulted him!
Table 1 (160)Nightingale Constructs Launching Today’s Nursing Platforms
Nightingale Tenets/Contemporary Nursing Initiatives
Respect for humanity/respect for dignity and cultural proficiency
Reparative process/patient-centred care
reverence for the suffering and dying/comfort and end-of-life care
healing env/complementary and integrative medicine
sanitation and hygiene/infection control
district nursing duties and demeanor; role delineation
scrupulous observation/quality assurance
statistical scrutiny and reasoning/critical thinking and evidence-based practice principles/standards of practice
perfectibility of human institutions/organized models of care
gentility, discipline, deportment/professional image
activism for righting wrongs/social justice
reform/innovation


Hektor, Lynne Marie. Nursing, Science and Gender: Florence


Godden, Judith and Helmstadter, Carol. "Conflict and costs when reforming nursing: the introduction of Nightingale nursing in Australia and Canada." *Journal of Clinical Nursing.* 18 (2009):2693-99. Okay, 2 places teams sent. Probs brought down the costs of nursing, but matrons had high pay; Machin did not get school started, so no probs, did not succeed and stay, but Godden eventually resigned; MGH had deficit, Machin’s position became untenable;


283: cites Baly that Anglican sisterhood of All saints took over nursing at UCH in 1862
284: professional pressure for more professional nurses. Harold Perkin
286: Todd, 287: student of Graves; collaborated with Bowman on physiology book; innovative in medicine; King’s the unused poorhouse of Saint Clement Danes, Portugal St, 1840; he instrumental in bldg of the 2nd KCH completed in 1861; residence for med students; 291: founding of St John’s House, clinical tr in hosp with relig educ and residential setting with supervision; friend of Blomfield, bishop, 293: originally called the Training Inst for nurses for Hospitals, Families and the sick Poor, then became St John’s House, insp from Kai; 294: FN found life suffocating: 295: recruited broad church men, Plumptre , married FD Maurice’s sister, Xn Socialist; Queen’s College; 297: aims f St John’s House; 299: Christian principles, elevate the character of the nurses; second aim to pen a leg field of labor to upper class women, to work w/o pay to train the nurses; each sister had to have years or more of intensive tr in nursing and hops mg;
300: Judith Moore, in *A Zeal for Responsibility* and Summers have argued St John’s House “a fundamentally religious organization.” spiritual rather than medical improvement. 301: religious commitment at core, FN and others. Minutes of sisterhood council, hosp training not new in 1848, cites Rivett, Dev of London Hosp System 36-38; 302: men only on board; 24, bishop presided; no vows, no poverty, no monastic obedience, no cloistered seclusion; no regular habit; no dowry; cd work only 3 months of the year;
303: apprenticeship system with certificate at end; had to pa 10-
women silent under men; lady supt did not even attend council meetings; 306: nursing reforms; Mary Jones’s high church vies a problem; FN supported Jones in power struggle; sisters kept on the old nurses when took over; 309: Russians visited, adopted model; requested in 11 hosps in UK, considered leading modern system of nursing; 311: FN drew on Jones; 312: withdrawal from the teaching hospitals; 313: failure to achieve the standards the council and sisters of St John’s House wanted, turbulence after Todd’s death; Jones’s secession in 1868; in June 1883 withdrew completely, lady superior Sister Caroline Lloyd, not to be under the council of men; “training inst” akin to training for teachers; requirement of paying by sisters restricted recruitment; 315: the sister’s nursing more expansive than FN’s even with no salary, insisted on better staffing and working conditions; 316: Eliz Frere had chosen the master rather than the lady supt as supreme authority in the house, Jones eroded, got reduced to a chaplain; 317: similarity with St Johns’ House and Ranyard mission; 319: promise never completely realized, the nursing service expansive and hosp admin refused to pay; (however, nothing firm on what the training was)

Todd started at KCH, a model, a lot of this article on what Todd did for medical students; 302: run by a council of 24 men; all to be members of the Church of England; started 1848; 314: a “sisterhood” they worked without pay and had to pay a sum to the sisterhood for their board; supreme authority was the master, not the lady supt; 317: Ranyard nurses like St John’s House;

-- “Florence Nightingale’s Opposition to State Registration of Nurses.” Nursing History Review 15 (2007):155-66. AAHN good article; contests view that she was “reactionary”; 155: recognized in late 1880s and 1890s nurses not educated well enough to be a profession; proponents wanted to exclude working class nurses, make if a profession for ladies only; FN believed many of the most competent nurses were working-class women; 3rd did not distinguish adequately between med and nursing, and put nursing under control of medical men 4, the proposal for credentialing inadequate; also distressed by the dishonesty and lack of professional ethics on part of the leaders; FN contd to focus on competence and expertise while reg part on improving social status of nurses; 163: vs idea that state reg the best route to professional recognition, rather only through professional educ;


sanitary science was made obsolete by discoveries in microbiology, which brought new definitions of disease and the new aseptic hospital practice, while she refused to accept the germ theory." (179) and cites FB Smith.

-- "From the Private to the Public Sphere: The First Generation of Lady Nurses in England." Nursing History Review 9 (2001):127-40. on the Anglican sisterhoods. 130-31 "Nightingale chose nineteen working class hospital nurses and eighteen ladies who were members of sisterhoods, both Ang and RC" (but she did not choose them); 131: "Mother Frances [Francis] who had 132: years of experience in hospital work and possessed a skill and judgment in nursing that few could match" Hutton liked [but did not]; Croke good


Helmstadter, Carol and Godden, Judith. Nursing Before Nightingale, 1815-1899. Farnham: Ashgate 2011. 219 pp. No ack or index for CWFN or LM. Ack Nancy’s Own Foundation. Printed Primary Sources lists CWFN vols 8 and 12

169: LM vol 1 ftn
193: LM vol 12, repeats point of 169 complaining that deemed Machin and Osburn complete training when missed

194: LM vol 12 ref

Preface gives a heavy sell vs FN, destroys straw woman. Reaction in 1980s, xiii: "'astonishing decade of revision and critique of the traditional nursing narrative'". "We examine how nursing reform culminated in, rather than began with, the Nightingale system of nursing as practised at St Thomas’ Hospital."

Xiv: “It was the Anglican Sisters, we demonstrate, who were the leaders of nursing reform for much of the nineteenth century.”

159: Jones was ? in 1868 (does not discuss why)

162: Jones on St T (critical, but does not mention Jones on unmarried mothers or divorced woman as nurse)

163-64: Jones as high church, sisters wanted to replace low church Giraud with high church, Labarre, who wd administer vows and hear confessions, wh Tait wd not tolerate

165: Jones told Tait wd sever connection, with 6 sisters and a prob sister; new sisterhood undertook district nursing and eventually est a chron care hosp, still flourishing;

166: ack Prof LM for copy of FF Cartwright

169: between 1870 and 1880 sisters trained 850 nurses (CSSJD annual report 1880), compared to only 242 in N School (and that incl Machin, citing 12:38

170: an All Saints sister Helen Bowden in 1873 est first tr school in US at Bellevue, Bowden had gone to FrPr War, nothing to
do with FN or N School; first tr sch in S Africa from All Saints sisters, but the 2 nursing sisterhoods gone by 1900


Helmstadter, Carol. “Early Nursing Reform in Nineteenth-Century London: A Doctor-Driven Phenomenon.” Medical History 46 (2002):325-50. Good article. However, intro destroys a straw man FN, her charisma and pr, “led to the popular belief that she and her lady nurses in the Crimea, and later, her school at St Thomas’s, miraculously transformed nursing almost overnight.” Role of E Fry and 379: Fry forgotten because her two daughters gave only 3 pages out of 1061 in their 1847 bio, stressing penal reform, and followed by later biographers; Pastor and Mrs Fliedner also “denied the recognition they deserve in this country.” Paget described the changes he had personally witnessed over 50 years at Bart’s, FN
337: St John’s House began nursing at KCH in 1856; other hosps began adopting some of sisters’ principles
346: Westminster Tr Sch 1873; Merryweather
328: early examples;
334: Lister as a student, UCH, 1851, paid money to get paid nurses on staff, in England

Joseph Lister, a student of Todd’s in Dublin, had
335: St John’s House, 1855 KCH moving into new bldg, Todd pub series of articles on med ed in British Mag; in 1840s turned to nursing, St John’s House est 1848, run by ladies who were lay Anglican sisters, “and who were trained nurses themselves. The sisters paid the working-class nurses whom they trained and who worked for the organization, but the ladies donated their work as an act of religious philanthropy.” 51 ref t Summers Summers, “The costs and benefits of caring: nursing charities c1830-c1860” in J Barry and C Jones, ed. Medicine and charity before the welfare state, 1991 and 1995. Aim of training “to elevate the character of the nurses” 336: sisters kept on the hospital nurses; Jones the 3rd lady supt; 337 sisters had rooms of own, the nurses in dormitories in cubicles, but superior to other hospitals

where? 378: figures show St Vincent de Paul, Sisters of Charity, Fliedner, Fry, FN with Institution of Nursing Sisters intermediate Remarkably, Bridgeman saw both their assignment to Koulali, and its closing for British use, as signs of God’s intervention on their behalf.

Helmstadter, Carol. “Navigating the Political Straits in the Crimean War.” 28-54. Good article, good on Bridgeman relationship, starting convent not far off; Norwood nuns; Stanley
and Salisbury case; Hall relationship; 46: when Stanley went home
to Salisbury, FN resigned as supt of Koula hospitals, did not
want resp for conduct and expenditure when directed by Bridgeman;
when work declined Br offered to take nuns to Balaclava and he
accepted, but Storks not informed, to whom she reported;
Fitzgerald "difficult person" Beatson head dr at Balaclava Gen
forbade him to interfere with hosp arrs; Mouat, in charge of
hosp at Sebastopol had him arrested for his acting
independently; wd question a req on spelling of a word; Hall
supported Fitzgerald; sent report on "Confidential Report" on
nursing extolled Bridgeman, vs FN; 47: one-to-three ratio of RCs;
Hall req countersignature of his own and attending doctor for
every req; 48: FN never disobeyed Hall’s orders, and was suave
and diplomatic, acc to Gill; 49: Beatson liked the Bridgemans 50:
FN said the interview with Bridgeman “the worst day of my life”
50: Fitzgerald report wrong on facts, e.g. nurses dismissed when
left because of broken health;

Helmstadter, Carol. “Shifting Boundaries: Religion, Medicine,
Nursing and Domestic Service in Mid-nineteenth-century Britain.
Nursing Inquiry 16,2 (June 2009):133-43. Prosopographical study
of 200 plus women who served as govt nurses during Cr War;
working class nurses had the greatest influence on the
organization of the new nursing.

Henderson, Virginia. The Principles and Practice of Nursing. 2nd
ed. 1955 standardized nursing throughout the English-speaking
world. Halloran rec 6th ed (3rd) 1978 the “most important work
written on nurses and nursing in the 20th century.” editions

Henderson, Virginia and Nite, Gladys. Principles and Practice of

Henderson, Virginia A. “National Health Insurance: If Not Now,
In first sentence credits FN with having “decreased the death
rate dramatically in military hospitals in the Crimea by
introducing care by trained nursing personnel.” Nursing
diagnosis. “Nurses, like doctors, have a period of investigation
to identify the patient’s problem (or problems). The evaluation
of the patient is based on the findings, or collected data, and a
nursing diagnosis is made. A plan of nursing care parallels the
medical treatment plan.” also self-care. Needs for health care
providers to meet health needs of citizenry. “Certainly it is
high time to recognize that meeting them is a shared
responsibility of the recipients and providers of care.” might
rather stress importance of making the providers available to
meet the needs of the populations they serve. “Even more
important are the signs that health care, like education, is
increasingly recognized as a right of all members of society, a
right that has been recognized by virtually every industrialized
society except the United States. A most telling argument can be
made for the cost-effectiveness of some sort of universally
available, affordable, effective national health insurance that
reduces the numbers of needlessly dependent individuals in a
given society.” So, Henderson credits FN with lowering death
rates with nursing care. (Nurse exagg)

Henderson, Virginia and Nite, Gladys. The Principles and Practice
0023535806 query, History section for earlier, was this Henderson
alone or H and Nite?
Completely rewritten, contributors added. FN not in Index, but is
cited several places and lots of her ideas are used without
attribution; Hampton Robb not in Index and not apparently cited.
6th ed. Preface and Chapter 1 History 1-
old history, Aruyvedic, India, Roman, Greek Hygiea, Islamic
8: like medicine, nursing can be traced to primitive cultures
15: defs from FN to present; doctors, Osler; W.S. Thayer,
physician 1919 (AJN) nurse’s role complementary, and without it
the proper practice of therapy inconceivable; J.C. Meakins Cnd
dr, (AJN 1948)
3: 1. “Nursing as an aspect of health care. The Goal of All
health Care: What is nursing and what is the function of the
nurse?”.... resp of women... 4: co-operation between doctors and
nurses, histories of medicine, Sigerist, Garrison, microscope,
8: in US esp organized medicine opposed efforts to distribute
health care equally; 8 Jo Ann Ashley Hospitals, Paternalism and
the Role of the Nurse 1976
9: unlike medicine, nursing schools originate in universities;
9: FN’s school the first,
1860 1st, FN religious, happiest, like the Greeks trusted in
“cleanliness, fresh air, good food, rest, sleep and (with less
emphasis) exercise as support for nature’s curative forces. She
seems to have feared the physician’s interference with nature and
to have believed both physicians and nurses ignorant about the
fundamentals of health. She decried their overriding interest
with disease and their relative indifference to helping people
achieve good health.” (Ref to NonN); a competent mathematician,
and statistician; cites WS, “She was one of the first to use
health stats as leverage in effecting health leg is England and
other parts of the British Empire. In this age, Miss Nightingale
might have been called a sociologist and economist as well as a
statistician.” women: Bedford Fenwick, Walk, Dock... Goodrich,
The Social and Ethical Significance of Nursing;
10: Medicine, Nursing, Health Educ and Social Service
11: health promotion, disease prevention
11: working def of nursing, ICN, 1960, and rev. “Nursing is
primarily assisting individuals (sick or well) with their
activities contributing to health, or in recovery (or to a peaceful death) that they perform that they perform unaided when they have the necessary strength, will or knowledge; nursing also helps individuals carry out prescribed therapy and to be independent of assistance as soon as possible.”

1919 WS Thayer, doctor in AJN “adapting prescribed therapy and preventive treatment to the specific physical and psychic needs of the individual.”

1925 Osler, doctor

1934 Effie J. Taylor “adapting prescribed therapy and prev. tr”

private pr 1946 A Definition of Nursing and in AJN

1937 ANA def

1946 Anne W. Goodrich nurse as activator of medical services, private pub

postwarJC Meakins, Cnd doctor,


5th ed of Principles and Pr

1951 R. Louise Mcmanus Col Teachers College, okay def

1960 Faye G. Abdellah et al Patient-centred Approaches to Nursing

1961 Ida Jean Orlando Dynamic Nurse-Patient Relationship process,

long def “The purpose of nursing is to supply the help a patient requires in order for his needs to be met” initiating a process

1970 Margaret Lamb also on process

1970 M Johnson and Davis, Problem solving in Nursing Practice

Lawrence L. Weed, problem solving

1972 Rozella M. Schlotfeldt: “The goal of nursing as a field of professional endeavor is to help people attain, retain and regain health.”

1972 Marjorie Ramphael, pres ANA: “The goal of nursing is to help the patient, as needed, in pursuit of his goal of behavioral integrity. Behav integrity means that the patient’s interrelated behavioral patterns directed toward fulfilling major needs result and are likely to continue to result in biological, psychological and social health.” In Nurs Outcome

1973 NZ Badonville

1975 ICN def. National Reps

1976 Shirley Chater pamphlet

15: Defining Nursing and the Function of the Nurse. Some Definitions of Nursing and Nurses by Individuals from the Nightingale Era to the Present. Nurses, physicians and others have been defining nursing for many years. “FN seems to have looked upon both physicians and nurses (if they functioned effectively) as nature’s colleagues. In the conclusion of her small volume, Notes on Nursing: What It Is and What It Is Not, she makes the following statement: “It is often thought.... condition for nature to act upon him” (uses Dover US ed); all disease a “reparative process” Henderson has “heard nurses of this era say that they thought the Nightingale definition of 1860 the most helpful. In any event, the Nightingale philosophy dominated nursing well into the twentieth century. She is
regarded as a genius by nurses and non nurses alike, and her concept of the body as self-healing is generally accepted today.” 1975 ICN def
122: Chapter 2 Value of Health and Human Life. “Human life, or capital, exceeds in economic value all other material resources of a nation. A healthy population, in its broadest sense, is the best measure of a people’s prosperity.” WHO def, Dubos cited, not FN
124: US lacks “a unified health care system ... unusual in this age among the developed nations and partially explains why, altho the country is ec favored, its system of health care and its health status are not what mt be expected.” USSR comparisons; 124: GEW Wolstenholme, Br physician, for a world Health Service a step towards a world society. World of have-nots. Andrew Malleson, Cdn physician, “right to survive” systems for delivering health, differentiates between construction and destructive health care, doubts whether quality of care and money spent on it have risen proportionately in the western world, US spends 4.6% of GNP on health in 1950, 7.$ in 1971, Eng and wales in NHS spent in 1970 over 6 times as much as 1950....
320: responsibility of nurse “Florence Nightingale, who probably saw the nurse’s function more clearly than had anyone before her, said that without the habit of ready and correct observation nurses are useless, no matter how devoted. She also pointed out that otherwise nursing becomes mechanical routine often inimical to the patient’s interests. NonN cited;
829: Environmental Health Essentials aggregate of all externals 830: nurse’s role in controlling the env, advocates for nurses to advocate on env issues generally as well as on the job; (air, quiet, sun, etc., all as per FN but does not cite her) 831: epidemics of contagious disease, set up shelters, filter water, similarity in needs for sickness and health in healthy env; lots on sun (but not FN); temp control, ventilation, purity of air; patient’s outlook, esthetics, flowers, variety, noise (as per FN but noted cited) pests, insects 879: sanitary food service 851: sanitary laundry service, disinfection 889: epidemiology of infectious disease in the hospital 890: aseptic technique, skin cleaning; ops 892: gowns gloves masks

Henderson, Virginia. The Nature of Nursing: A Definition and Its Implications for Practice, Research and Education. New York: Macmillan 1967 [1964]. Was a lecture. 84 pp. Bertha Harmer text of The Principles and Practice of Nursing okay, adds addenda; Basic Practices of Nursing Care p. 1 with FN def, later had to define so as to protect the public and the nurse. P 3 gives def: “The practice of professional nursing means the performance for compensation of any act in the
observation, care and counsel of the ill, injured or infirm, or in the maintenance of health or prevention of illness of others, or in the supervision and teaching of other personnel, or the administration of medications and treatment as prescribed by a licensed physician or dentist, requiring substantial specialized judgment and skill and based on knowledge and application of the principles of biological, physical and social science. The foregoing shall not be deemed to include acts of diagnosis or prescription of therapeutic or corrective measures.

2. The practice of practical nursing means the performance for compensation of selected acts in the care of the ill, injured or infirm under the direction of a registered professional nurse or a licensed physician or a licensed dentist, and not requiring the substantial socialized skill, judgment and knowledge required in professional nursing.


Henderson described as being to 20th century nursing what FN was to nineteenth century. Kathryn L Roberts. Contemporary Nurse


Hering, Henry, portrait of FN in 1858 (as in First Hand)


Heroines Worthy of the Red Cross: Florence Nightingale, Elizabeth Bunyan, Elizabeth Fry. London: Dent & Son [1883]. No page numbers 16o. Cites proposition of Lady Maria Forester to form a band of female nurses; engaged 3 nurses, then waited on FN and entreated her to take the direction and entire control of the nursing establishment for our sick and wounded. Lady Maria’s request,
earnestly seconded by that of the Rt Hon Sidney Herbert... coincidence; has the Norwood nuns mixed up; acc by Bracebridges a clergyman and a courier?? Eliz Wheeler incident (quoted): Osborne remarks, conversed with her on deaths of those he had visited, and never heard one word that wd not have been just what I shd have expected from most experienced and devout of our common faith; did not ask questions; like her he looked for a RC priest to attend a dying Romanist; death of Miss Smythe in April 1855, had started at Scutari then to Koulali, died of fever; in France a charitable inst Oeuvre Notre Dame d’Orient under Abbé Legendre, almoner of hospital of Bourbonne-les Bains, relief fund for infirm soldiers on discharge; Mme Goldschmidt and husband contrib £2000 plus from concert at Exeter Hall, and defrayed every expense; present to them a testimony, copy of Durham’s bust of queen

Hertzler, Ann A. “Florence Nightingale’s Influence on Civil War Nutrition.” *Nutrition Today* 39,4 (July-August 1997):157-88. 157: FN’s Directions for Cooking by Troops in Camp and Hospital pub by Army of Virginia by order of the Surgeon-General. “Adoption of her recommendations prevented many losses from malnutrition and poor sanitation.” based on nutrition science of the time. Nitrogen and carbon were recognized as nutrients contributing to health--meat and milk were singled out for their nitrogen content. 7 army camp recipes in N’s manual. Value of coffee was that boiling water helped reduce digestive disease and diarrhea. Distilled water, rain water and spring water were recognized as the purest water sources, but rarely available. The other 6 army recipes were mat based, 4 with vegetables. Manual also had 13 recipes for army hosp cooking, chiefly for use with patients with scarlet fever, typhoid and dysentery. Meat, chicken broths, alcohol, starch gruels and beverages. No recs to prevent scurvy given.....

159: part of manual on Taking Food. “Nightingale believed that caring by the nurse the nurse was as important to healing as were food and medicine. It required the nurse’s ingenuity and perseverance to attend to patient needs. Nurses were expected to supervise food preparation, provision, meal timing and feeding often in chronic cases for months and years.”

“During the American Civil War, more men died of disease caused by bad food and contaminated water (typhoid, dysentery and scarlet fever) than from all other battle losses.” endnote 160: “Florence Nightingale and her colleagues had a powerful influence on the transformation of women’s roles in the home to include the new sc of ‘cookery’ in nursing the sick. Recipes and guidelines based on Florence Nightingale’s ‘Notes on Nursing’ were promoted by Mrs Annie Wittenmyer, who was influential with the Sanitation Committee, for diet kitchen managers with northern troops during the war.” Wittenmyer, A. A collection of Recipes for the Use of Special Diet Kitchens in Military Hospitals,

11: June 1854 riot in Bethlehem RC monks given a front door key to church of Nativity, placed own silver star over manager; Orthodox monks tried to sop, and some were killed in struggle; Turkish police connived at murder, said the tsar, then Russia marched to Danube on crusade to protect Holy places from Islam, Moldavia and Wallachia, now part of Rumania then under joint protectorate of Turkey and Russia; tsar hopeful Br wd not fight; memoranda threats; by October 1853 Turkey at war with Russia, England stayed neutral; then Sinope; 12: Aberdeen not for war, Palmerston was, then queen turned on to war; 6 March 1854 Gladstone raised income tax for expenses of war; 27 March 1854 Br declared war, France had 26 March; 25: Br and Fr fighting against Russia, not for Russian independence;

Hibbert, Longmans 1961 ed. 213-4 on John Hall; 246 on flogging
247 Elizabeth Davis, 265
after improvements made at Balaclava:
260: "The food was almost as plentiful as the clothing. On 9 March Captain Campbell enjoyed a dinner of mutton broth, curried venison, plum pudding, cheese, a bottle of red Bordeaux, port and marschino. Most officers fared as well; no soldiers went hungry. Apart from the supplies issued free by the Crimean Fund agents, other goods could be bought from them at extremely low prices. Sherry, for instance, could be had for 24s a dozen bottles. By the end of the month, several shops had been opened at: Kadikoi.... Seacole
264: Dr Blake, regimental doctor, kept own records
264: FN visit in early May, with Soyer, gone to Scutari at own expense, altho with govt’s authority “to show the army authorities how to make the most of their rations. He was flamboyant, excitable and to the soldiers appeared rather absurd, but his ideas and suggestions were inspirational, and Miss Nightingale appreciated his sound sense and revolutionary
inventiveness.”

265: Dr Blake told his wife of visit of this “most incongruous party” to his reg hosp, “one of whom ‘he had long wished to see’:

I was walking up and down the camp when we saw a lady and three gentlemen ride up to the hospital and an orderly came to say Miss Nightingale sent her compliments, to know if I had any objection to her going over my hospital. Of course I had none, so I joined the party, which consisted of Dr Sutherland (one of the Sanitary Commission), Soyer, and a half-caste!!!

[Soyer’s secretary] Miss Nightingale is a most pleasing person, refined and delicate, just fitted for the very trying position she fills. She was delighted with all she saw x x Soyer was in raptures with my kitchen, built by Sergeant Desmore (the hospital sergeant) and whilst Miss Nightingale and I were discussing matters of hospital detail, Soyer rushed up and carried her off to see the establishment and his delight at the grate made of Turkoman gun barrels was beyond everything.”

Hibberta (2)
26: 28 June duke of Newcastle now sec for war, read despatch had written to Raglan authorizing invasion of Crimea; 27: Varna, Omar Pasha had said salubrity of Bulgarian coast, health, beautiful 34: 31: “generally believed that no one ever came out of this packed hospital alive, and men did what they could to conceal their sickness for fear of being sent there” Varna; 30: “a ghastly lethargy settled down upon the army”, a large barrack used as a hosp; elementary rules of sanitation disregarded; latrines filled but no energy to dig more; carcasses putrefied in sun; exhausted orderlies watched writhing, sweating bodies of sick with dazed indifference; French had large carts for the morts; Br Army had 27,000 effective men, French had 30,000 and Omar Pasha agreed to 7000 Turks; Br transport bad, Raglan did not intend to give enemy time to reinforce troops before taking Sebastopol; had asked for land transport corps; by 19 July preparing invasion with St Arnaud; French and British with cholera and weak; regiments pathetic, but left; Caradoc, Orinoco; landed at Calamita Bay, but no transport; ambulance wagons left behind as too rickety; soldiers cd not carry supplies; men dead and dying on deck; 43: Airey took over as QMG, tried to get bullocks and carts, energetic; had been in Upper Canada, had been mil sec to Lord Hardinge when c in chief, asked by Raglan to come QMG but wanted to be in field, became QMG when de Ros went home; Raglan pleaded for land transport corps, unacknowledged; Raglan gave officers leeway, they on the spot; Airey filled in with specific commands, Raglan away at vantage point watching; wore frock coat, looked like civilian, wd not ack cheers when recognized; Alma 53: captured Great Redoubt, duke of Cambridge slow and cautious; 88: Russians kept fire low, wounds different; Russians shot even after capture, wd not bury own dead, British
had to;

Hibbertb (3)
106 Sebastopol; bombardment; 129: Balaclava protected by little, 7 miles from Sebastopol; reports that Russian Army collecting around village of Balaclava, by Tchernaya River, Turkish spy brought report to Campbell, Raglan did not pay attention to it; 131: Raglan did not like using spies; Balaclava 132: 25 Oct saw enemy advancing; 142: Raglan ordered Lucan: cavalry to advance and take adv of opp to recover the Heights; Lucan did not move; Raglan called Airey to write a categoric order, Airey scribbled on scrap of paper; Lord Raglan wishes the cavalry to advance rapidly to the front, follow the enemy and try to prevent the enemy carrying away the guns. Troop Horse Artillery may acc Fr cavalry on left. immediate. Tell Lord Lucan the cavalry is to attack immediately. 145: Raglan did not immediately realize anything wrong, advance a little off, but light brigade wd swing; Light Brigade advanced, watchers cried. 147: General Bosquet murmured “C’est magnifique, mais ce n’est pas la guerre”; light brigade onto the guns, only 50 men alive to follow Cardigan charged; Prince Radzivill; Cossacks; 149: pitiable sight;

Hibbertd (5)
210: lack of forage for horses; 213: Med Dept like Commissariat had completely broken down from strain of work, unprepared; 213: “Constantly obstructed in his efforts by Dr Hall, inspector general of hospitals, who refused to agree that anything serious had gone wrong in his department,” KCB FN quoted; FN reported hosps destitute and filthy, Hall 214: “on a very creditable footing” nothing lacking; transport Avon at Balaclava for 2 weeks men on bare decks; Raglan sent for Hall; Lawson held responsible as pmo at Balaclava, dismissed, but Hall, rebuke by Raglan appointed him senior MO at BH Scutari; 15 Dec 1854 Raglan rebuked Hall in a general order; 218 Canrobert flamboyant went out with 6 or 8 staff officers and 20 Hussars, flag; 219 private war; Times; 219: Russell an apostate Irishman!

death of Raglan, taken back on Caradoc, queen greeted at Portsmouth; govt had difficulty replacing him; Simpson chosen; 298: French took Malakoff and British rushed at Redan, tri-couleur hoisted but retreat, 2500 men lost and 3 times more of French, but Prince Gortschatkoff thought cd not hold the town, arsenals, barracks and docks blown into air; war as good as over although Treaty of Paris not signed until March 1856; on Eliz Davis at Balaclava (247), Raglan visited as had asked for nurses, against wishes of Med Dept and FN sent not to disappoint him; had been neighbour of Davis in London; he visited sick 3 times a week; 265: Davis gave FN a bad time on her visit, FN fell sick 2 days later, weak and delirious for 2 weeks; 266: Raglan came alone and unannounced to visit her (Woodham-Smith his ref);
Hibberthc (4)
150: Russian artillery driven from positions by a spectacular charge of the 4th Chasseurs d’Afrique; Raglan furious but Cardigan said, “My lord, I hope you will not blame me, for I received the order to attack from my superior officer in front of the troops”. indemnification. but Raglan less forgiving of Lucan, he had discretion and shd not have approved charge; said Lucan had misinterpreted order, had taken no steps to find out disposition of Russian army, not asked for assistance of french cavalry which order had said were on his left and not made proper use of horse artillery; but order handed to him by a young officer who hated him and order not as clear as it shd have been; 151: Cardigan drank a bottle of champagne after; Newcastle removed Lucan from Cavalry and recalled, Cardigan went home at own request; 153: of the 673 men who charged down the valley under 200 returned; Russians moved by the heroism; but not a victory; Balaclava had taken but Russian now straddled Causeway Heights and lost a road; 154 winter: 163 Inkerman. Pennefather saw activity; 4 Nov orders to Russian army issued in Sebastopol, but allies had no spies there; 178: Cathcart shot; 192: seemed all lost but Russians did not pursue the French; Raglan hoped to get Canrobert’s agreement to exploit success, but he wd not; then Lord West got attack of a battery, 50 or 60 went. 194: Russians afraid of losing guns took them off; Russian commander retreated, left whole of Inkerman Ridge in hands of allies, who, on Canrobert’s insistence, refrained from pursuing; battle over, not for 50 years was Europe to be scene of another so bloody and fierce, yet sadly inconclusive; 195: Prince Menschikof sent burying the resp of those who left in possession of battlefield; 4000 Russians dead; 196: Russians told enemy wild beasts; 206: Admiral Boxer incompetent; no records; ships went back and forth without unloading;

122: small formal garden in front of Leeds General Inf; 123: pic of front gardens of Radcliffe Inf with fountain and colourful parterres. These were evidently designed to be seen by those passing by. 125: Gardens and the New Pavilion Plan. “The idea that hospitals themselves could cause disease was promoted by Sir John Pringle in his Observations…” “During the nineteenth century, the idea of hospitals as dangerous places full of miasmata became of crucial importance to the medical profession” “hospitalism” hygienic evils and system of huge and colossal hosp edifies; Builder, Godwin and FN; 126: John Howard rec gardens in Lazaretto book
127: Bristol General Hosp, colonnades for each sex, designed so patient had a view to look at while walking; 128: FN support for
pavilion style, also good for nursing; Metropolitan Public Garden Assoc founded in conj with National Health Society argued for preservation of health as central motive; green spaces in cities and inclusion of gardens within hospital design; Nat Health Soc founded 1871 by Blackwell, had Chadwick Hart, Godwin and Farr

131: pic of “Nightingale Square” at St T, gardens, nurses sitting on grass, wanted it in “leafy Surrey” but not
132: “As Nightingale strongly encouraged its design, it is not surprising that the hospital appears to have courtyard gardens similar to those at the Lariboisière Hospital, Paris, and the Bordeaux Hospital. Lari’s design was recommended by her in the first ed of Notes on Hospitals” and also repr, “The gardens at St Thomas’s appear to have been incredibly expensive.”

Chapter 3 Fresh Air and Sunshine: The Open-air Institutions of the Twentieth Century

Chapter 6 Present and Future Tends in Hospital Gardens, begins with FN quote “I have seen, in fevers (and felt)... see out of window) effect is on the body too. 213: more on views [lots of FN quotes]


Higginson, George Wentworth, Seventy-one Years of a Guardsman’s Life. London: Smith, Elder & Co. 1916. 403 pp. brief ref to FN and 1 letter excerpted; was in Cr War, left with battalion Feb 1854, involved throughout with Gordon Boys’ Home, visit of Queen Alexandra 21 June 1916, on his 90th birthday; lots of Cr War
coverage, massacre of Sinope, letters exchanged between Emperor Napoleon and Nicholas March 1854, treaty with France and England, 30,000 English soldiers, 70,000 French; 86: Raglan referred to the French as “l’ennemi” re camps; Russell ungenerous re Raglan and unfitness for post (87); Raglan allowed him to camp with them; went to Scutari on the Golden Fleece. camped outside, tents, April-June; then Varna June-September; after 3 weeks moved camp because of cholera; lost 400 men to death or invaliding; all suffered from dysentery; to Aladyn; cholera and low fever; critical of men having to do fatigues in “awful sun” (131); 165- siege of Sebastopol; 318: “One figure stands out in the softened light that falls on the memory of those far-off days...to whose resolute indifference to routine and precedent we owed the organization of the great hospital at Balaclava.” re “memoirs” (Cook presumably) “disclose the defects in our hospital system which aroused so much just indignation in England, but also reveal the sweeping changes with the patient and intelligent 319: persistence of this quiet English lady prevailed to effect in the whole of our military medical service.” pride when “I was first presented to her and established those respectful friendly relations” to late.


Hill, Signe S. and Howlett, Helen Stephens. Success in Practical/Vocational Nursing: From Student to Leader. Elsevier Health Sciences 2013. 464 pp write a review. FN 73-75 Seacole 74; positive re FN, but together!

Hinton, Mike. “Reporting the Crimean War: Misinformation and Misinterpretation.” Interdisciplinary Studies in the Long Nineteenth Century uses Ponting, Small, not CWFN; stigmatization of Dr John Hall: fair or unfounded? Cites WS; Hibbert; Ruth Cowan, Relish. Cites Herbert, used Wiltshire collection, Spence and Maxwell letters to, Baudens fav to Hall (also to FN) Hinton KCL research student?

Hinton, Mike. “The Crimean Campaign 1854-1856: From Sanitary Disaster to Sanitary Success.” paper at Wellcome conf 2010, abstract, examined records on month by month basis, very different expl suggested, “that the disease status of the British Army in the Crimea dictated in large measure the deaths rates in the Scutari hospitals, while it was the military authorities in the Crimea who were principally responsible for turning the sanitary disaster of 1854/55 into the sanitary success of 1855/56.” so FN again no good. Author at 2011 paper of Schultz, very disdainful

Hinton, Mike. “A Letter from Captain William Donald Macdonald,
93rd Regiment, together with a commentary on medical matters.”
War Correspondent 28,3 (October 2010):27-28. Says evidence that
conditions improving, as Hall said, before san com

(2002):221-43. One page on Taylor & Francis Online. Review of
Hugh Small.

Hirsch, Pam. Barbara Leigh Smith Bodichon 1827-1891: Feminist,

Hisama, Kay K. “Florence Nightingale’s Influence on the
Development and Professionalization of Modern Nursing in Japan.”
285: The arrival of Western medicine in Japan required Western
style hospitals and nurses who could care for hospitalized
patients. Physicians who had studied in England, such as Takagi,
a high ranking navy medical officer, and Sacki, Takagi’s
subordinate, were exposed to Nightingale’s school of nursing. In
1885, Takagi established the first training center for nurses.
Sacki helped Jo Niiijima, founder of the first Xn university in
Japan, to est a 2nd nursing school in Kyoto, Sacki met
Nightingale in 1890 when studying med at St T, after return,
retired from navy and devoted life to dev of nursing educ in
Japan. Japan Red Cross Nurse Training School, est 1890 most
closely followed the Nightingale trad; FN infl from info of navy
mil physicians, Xn educators and Red Cross; textbook Shushin used
for moral educ of Japanese ch 1881-1945 uses image of FN, angel,
pure and devote, 1 dimensional, not intellectual or sc aspects

History Dept., Folkestone School for Girls. Medicine Through
Time: How Did Florence Nightingale and Mary Seacole Improve
Public Health? Website.

History of Australian Critical Care Nursing.

223 pp.


Hostile

Hobson, W.F. Catherine Leslie Hobson: Lady-Nurse, Crimean War,
and Her Life. London: Parker 1888. pp 44-56, Rappaport

Hodder, Edwin, ed. Life and Work of the Seventh Earl of
Shaftesbury 496: Shaftesbury saw hand of God; czar has aimed at
“universal empire” and now sentence of God on “such fearful
ambition” promoted day of prayer, day of thanksgiving for Alma
and Inkerman (497) critical of Raglan for not mentioning God in
victories;


Hodgkinson, Ruth G. The Origins of the National Health Service: The Medical Services of the New Poor Law, 1834-1871. London: Wellcome Historical Medical Library 1967. Workhouse Improvement Assoc, Anstie 167: Nottingham, report by Henry Hancock, eminent surgeon at Charing Cross, far too overcrowded to be healthy, 3 and 4 in a bed; 441, 563-479: St Pancras in 1866 better than Bence Jones described 10 years earlier, the wkh had become the largest in London, for nearly 2000 inmates, 497: Todd, Bence Jones, Sutherland on ventilation 565, praise of Agnes Jones 569, FN mentioned twice in debate on the bill as having greatly influenced it. Farnall her chief of staff for Poor Law purposes, together had done back room work to press for greater reform in nursing; “The greatest success achieved by any Poor Law inst was when, in 1870, the large modern infirmary build by St Pancras at Highgate and sold in that year to the Central London Sick Asylums District, was staffed by nurses who had trained under the Nightingale Fund at St Thomas.” Highgate hospital remained connected with St Thomas’s until the matron of the infirmary died, and her death interrupted the scheme for est a permanent nursing school at Highgate for supplying workh inf with nurses.” Twining. 488: Strand Union alone in taking measures for bldg of a new inf I the suburbs. Credit no doubt shd be given to Rogers 512: Stand Union had in 186 nearly 1000 people in new wkh in Edmonton; 505: Holborn, Strand and Westminster Union amalgamated into a new Holborn Union and St Pancras joined them in 1869; St P the largest 598, “the increase in hosp tr for the poor and pauper was therefore concomitant with the revolution in med sc and nursing, the dev of special hospitals and the improvement of env conditons within the insts-chiefly due to the great work of Florence Nightingale, Dr Sutherland, Timothy Holmes and the Report of the Select Committee of 1861. New hospitals made adequate provision for ventilation, sanitation, accomm, and cleanliness.”St T allowed 1000 cub ft 684: FN’s admonition re no having sick in same place as able-bodied paupers. Effected.

Hoffman, L.E., Women Who Changed the World: Fifty Inspirational
Women Who Shaped History. London: Quercus 2006. FN 62-65, FN coverage largely okay, but 63: “She kept 60 cats, including three Persians called Bismarck, Disraeli and Gladstone. Her favourite pet was an owl named Athena.” has her as Sylvester’s “Most accomplished pupil.” attracted to maths, almost as important a part in her life as nursing, and she combined the two. has her training “at the Catholic-run Institute of St Vincent de Paul in Alexandria, Egypt’ and Dusseldorf.

64: got fresh water, fruit, vegs and hosp equipment; “She also collected data and organized a record-keeping system that enabled her to calculate mortality rates. By February 1855 the death rate had dropped dramatically.” wrong, exagg.

64: Timeline has 1837 QV ascends the throne and 1881 Mary Seacole dies. 1910: FN dies, and King George V accedes to throne.

Environmental Psychology. NY Random 1982
Arch Landscape BF353 H66
Reitzenstein 1982
Spencer and Blades 1986 c. Spencer and M. Blades Children and their environments: Learning, Using and Designing Spaces.

Holcombe, Lee. Victorian Ladies at Work. Hamden CT: Archon Books 1973 on FN requiring probs to be committed Xns

Holcombe, Lee. Victorian Ladies at Work: Hamden CT: Archon Books 1973; FN requiring probs to be committed Xns (not found). Nothing on Seacole, good material on FN and nursing

Holland, Norman (d. 1989) Miss Nightingale’s Mission: A Play in One Act. Samuel French c1953. 24 pp RCN. characters: Edwards, a parlour maid, Jane Bradley, Elizabeth Wheeler; FN; Selina Bracebridge; Rose Dawson; Lady Hester Markham. 49 Belgrave Sq, SH’s Oct 1854. fake interviews for Crimean war.

Holland, Sydney. Viscount Knutsford. In Black and White. London: Edward Arnold 1926. has chap on FN and quotes from interviews, in names

8: EBP evidence-based practice a process which consists of 5 stages aimed at meeting the health needs of an individual or group.
1. Asking answerable questions
2. Finding the best available evidence
3 appraising the evidence for its validity and applicability
4 applying the results of this appraisal in clinical practice
5 evaluating the performance of EBP
Australia has a Joanna Briggs Institute as a Centre for EBP

12: nursing process, importance of

111: why quantitative approaches; “the major contributor to EBP”
Burns and Grove 2009

Holland, Stephen. “Furthering the Sceptical Case against Virtue Ethics.” *Nursing Ethics.* 2012. Not seen


Holmes, Oliver Wendell. *Currents and Counter Currents in Medicine, and Other Addresses and Essays.* Boston: Ticknor & Fields 1861. Chapter 1 Currents and Counter Currents in Medical Science. U.s.a.

13: “Hippocrates stated the case on the side of ‘Nature’ more than 2000 years ago and if I name her next to the august Father of the healing art, the noblest daughter well deserves that place of honour -- Miss Florence Nightingale begins her late volume with a paraphrase of his statement. But from a very early time to this there has been a strong party against ‘Nature.’”


Accepts FBS on religion, no original sources, but did read most of the nursing lit. “mythic standing” etc. (Reprint); states FN “a dogmatic miasmatist,” rejected even that some specific diseases, and otherwise env, “dogmatic miasmatist” repeated (60); and “unsympathetic” to germ theory “remained unconvinced by germ theory until the end of her life” (64); although did ack by 1882 that nurse shd be able to apply antiseptic treatment!! emphasis on nurses’ home later, and district work; much on sex roles, concludes with “Florence Nightingale’s failure to secure an autonomous nursing profession arose not from a wrong assessment of the tenacity and strength of sexual divisions of labour, but from her failure to recognise the increasing cultural dominance of ‘scientific’ forms of knowledge. As a consequence she misconceived the direction of modern medicine, and overestimated the significance of moral authority in an increasingly
rationalised world.”

Holzemer, William L., ed. Improving Health through Nursing Research. ICN. Chichester: Wiley-Blackwell 2010. 259 pp. Only 1 cit, FN from NonN not on her actual research


Hood, “Dwelling Disparities: How Poor Housing Leads to Poor Health.” Environmental Health Perspectives (113,5 (May 2005):310. NIEHS online accessed ref to Detroit’s Healthy Environments Partnership U of Michigan; dilapidated housing asoc with exposure to lead, asthma triggers (mold, moisture, dust mites, rodents) and mental health stressors, violence, isolation; “Florence Nightingale once wrote, ‘The connection between health and the dwelling of the population is one of the most important that exists.’ But today there is renewed interest in discovering the complex pathways connecting housing factors, neighborhood factors, social factors, adverse health outcomes...” asthma, obesity diabetes. Brief mention.


188: games at Christmas party, Sir Houston running around, “We all played like so many children, the admiral the life and spirit of every game.” “Miss Nightingale was still very weak and could not join in the games, but she sat on a sofa and looked on, laughing until the tears came into her eyes.” Refers to “slave market”; battlefield visit Malakoff and Redan
26: “poor Miss Nightingale lay sick,
150: FN, Xmas dinner at the embassy 1855. Lady Stratford, Sir Houston Stewart, amb, 150: when saw her next to Lady Stratford. “At first I thought she was a nun, from her black dress and close cap. She was not introduced, and yet Edmund and I looked at each other at the same moment to whisper, ‘It is Miss Nightingale!’ Yes, it was Florence Nightingale, greatest of all now n name and honour among women. I assure you that I was glad not to be obliged to speak just then, for I felt quite dumb as I looked at her wasted figure and te short brown hair combed over her forehead like a child’s, cut so, when her life was despaired of from fever but a short time ago. Her dress, as I have said, was
black, made high to the throat, its only ornament being a large enamel brooch, which looked to me like the colours of a regiment surmounted with a wreath of laurel, no doubt some grateful offering from our men. To hide the close white cap a little, she had tied a white crape handkerchief over the back of it, only allowing the border of lace to be seen, and this gave the nunlike appearance which first struck me on her entering the room, otherwise Miss Nightingale is by no means striking in appearance. Only her plain, black dress, quiet manner and great renown (151) told so powerfully in that assembly of brilliant dress and uniforms. She is very slight, rather above the middle height; her face is long and thin, but this may be from recent illness and great fatigue. She has a very prominent nose, slightly Roman, and small dark eyes, kind, yet penetrating, but her face does not give you at all the idea of great talent. She looks a quiet, persevering, orderly, ladylike woman. “tried to give a “true pen-and-ink portrait of this celebrated lady” 152: (after dinner) “Miss Nightingale was still very weak and could not join in the games, but she sat on a sofa and looked on, laughing until the tears came into her eyes.” 153: (spoke with her, officers at games) “I said to her ‘how delighted the mothers of these boys would be to see them now!’ She replied, ‘Ah!’ the poor mothers!”


Horsley, Keith. “FN.” Journal of Military and Veterans Health 18,4 (2010)‘eviewed, Australasian) author is editor of jornal


Hospital of St John and St Elizabeth: The Centenary Story of a Famous Hospital 1856-1956. Fundraiser for project; 24 pp. Refs to FN, pics, not useful. Hosp leading figures were duke of Norfolk, Viscount Campden (later earl of Gainsborough), Lord Herries, Lord Petre, (Sir) George Bowyer and Wiseman, 2 old houses in Gt Ormond St.; opened 19 Nov 1856 by Wiseman; ms letter of FN to Sister Stanislas; patrons include Woodham-Smith. Guildhall

4: US strongly influenced by Br pattern of nursing ed. “It is interesting to speculate what might have happened if Miss Nightingale encouraged the spirit of enquiry in nursing as she did in other fields. The irony is that Miss Nightingale was an excellent statistician who made order out of a complex array of data.” yet nurses have fear of stats. AN 1982 adopted baccalaureate as minimum educ qual for entry into professional nursing practice.


1: in first half of century US physicians treated first by bleeding, purging and blistering to rid them of their symptoms and then prescribed tonics to restore to health; “The effectiveness of these treatments was uncertain; indeed, many patients lost their lives at the hands of doctors employing these drastic methods.”

2: during second half of 19th cen, structure of med prof and organiz of hops assumed its modern form. “The emergence of nursing as a career was a central fact of this transformation. As early as the 1850s, physicians and surgeons recognized the crucial role that the quality of nursing care received by patients played in their recovery. In concert with hosp administrators, doctors worked to attract a better sort to nurse their patients. Their reform efforts in the 1850s and 1860s largely failed. Why and how nursing reform occurred in the 1870s, how the hosp wd affect…”

Chapter 1 “Raise Up Some Nightingales”
a surgeon Willard Parker, in 1860 on med bd at Bellevue, commended the board of govs for introducing female nurses into one of the male surgical wards; pro nursing, “I wish we could raise up some Florence Nightingales” end 43

38: Civil War raised doctors’ awareness of potential of using intelligent women as nurses, but real reform not at Bellevue before 1873.

38: “Although Bellevue’s medical men recognized the need to improve the quality of nursing care, they did not attempt to train nurses or to study Florence Nightingale’s work to improve nursing care in English hospitals.”

41: Committee on the Training of Nurses, AMA took no further steps to improve Am nursing care. Alfred Stille illustrated medical profession’s growing concern

47: visiting committee at. 1872 visiting com unanimously confirmed Miss Schuyler’s October 1871 decision; cd not do more with the present system of nursing, had to have a plan for tr school attached to, “something of the nature of Miss
Nightingale’s School in England.”
48: Mrs Griffin outlined a plan for
50: “The Training School Committee drew heavily upon Florence
Nightingale’s definition of a nurse and her description of the
appropriate duties.” not a medical man, nor med woman,
58: 1877 New York Hosp Tr School headed by matron Julie E.
Marchant admitted 11 pupils. Seems similar course to that at
Bellevue; “Unlike the Bellevue Tr School the New York Hosp Tr
School was not est as a separate entity as Miss Nightingale
recommended, or was there a committee of women to manage it.”
60: NY Hosp tr school did not follow Bellevue model, contrast to
Nightingale model, governors gave the supt of he hospital certain
authority over the tr school and limited the matron’s control
over the nurses.
171: in 1885 a Philomena Society founded in New York City, , also
a Guild of St Barnabas. October 1888 issue of The Nightingale
alumnae assoc.
Chapter 2 New York Women and the Civil War 23-35
23: E Blackwell chaired meeting April 25 1861 many of women at
the NY Infirmary for Women and children, organized the Woman’s
Central Assoc of Relief WCAR, became NYC’s central agency for
coordinating women’s contrib to winning Civil War, between 50 and
60 women and several doctors and clergy present
Chapter 3 The First American Nightingale School: A Revolution in
Nursing 37-61
table of death rates at Bellevue Appendix 1

Houle, Louise. “Florence Nightingale Must Remain as Nursing’s
Icon.” British Journal of Nursing 9,4 (November 2000):
much debate “over whether or not Florence Nightingale was an
‘appropriate’ figure to lead nursing into the new millennium. cit
Wheeler. “A few nobles of nursing history were given cursory
attention as possible successors to Nightingale’s plinth, but
Mary Seacole emerged as the only real contender. The complaints
against Nightingale seem to be based upon her colour and class
(white and upper), whereas Seacole is, for our multi-racial
society, black and poor. But given that innate value does not
reside in blackness or in poverty, why should Seacole seem a more
suitable figure?
In comparative terms, Seacole retains the glamour of novelty,
while the interposed lady of the lamp not only numbs and bores
but carries with her some of the most cloying images of nursing.
Nurses are neither angels nor saints and yet the representations
of Nightingale’s slim figure and white hands carrying that
symbolic lamp seem to confine us to nursing an ideal one of use
can live up to.
Our boredom and frustration with Nightingale warm to spring
from the widespread oversimplification of what she was and what
she did. It is worth remembering, however, what a successful symbol “of nursing she has been and it is remarkable that so much commonly mobilized...”

“Nightingale still captures the public imagination.” Creole. Reading NonN

Housman, Laurence. “Florence Nightingale.” in The Great Victorians. London: Ivor Nicholson 1932 355-67. cites re FN and suffrage, used in successful campaign to counter support of Queen Victoria other side: “And as far as the Woman’s Movement was concerned, she stood, as a power and as an example, almost alone.” p 367.

Houston, Gail Turley. Victorian Women Writers, Radical Grandmothers, and the Gendering of God. Columbus OH: Ohio State University Press 2013. Has full chapter 5, Eve, the Female Messiah, and the Virgin in Florence Nightingale’s Personal and Public Papers; cites CWFN vol 2, but misses Cassandra material, but did use MSS, does not seem to realize the many drafts; 101 says she read gnostics, Spinoza, Darwin, Confucius...etc (Confucius?) Lots on the Rome and Egypt trips; possible mystic


Hoy, Suellen M. Chasing Dirt: The American Pursuit of Cleanliness. New York: Oxford University Press 1995. Chapter 2 “A Wider War” 29-58. 30-45 on FN: “Florence Nightingale’s Good Example” focuses on FN and her example “created a sense of pride among the American women on their role as agents of sanitation. As a result, America saw a great deal of female involvement on the needed reforms regarding cleanliness. This also led to the creation of a Sanitary Commission headed by Olmsted, the strict standards of Dix on what is an ideal nurse and the integration of the learned pursuit [?] of cleanliness in the war camps to the ordinary homes.” 32: in 1860 NoN appeared in the US “extensive circulation” had important results. Godey’s Lady’s Book. Most successful women’s mag in US, circ of 150,000, est million read it. magazine reprinted portions of it, advised “every lady” to study it. Ed Louis Antoine Godey. January 1860 Dix and FN on cover Jan-June 1861. Sept 1860 1862 Harper’s Weekly ack FN’s influence. In North and South her name had become synonymous with nursing.


Hubble, Douglas “William Ogle of Derby and Florence Nightingale.” 201-11. 7 letters, originals at Royal College of Physicians of London, Sutherland drafts in 47758

Hughes, Amy. *Practical Hints* contd: 82: “Whenever possible, a nurse shd have a bath, inc her hair, and change all her garments before attending as a midwife. The skin of her hands shd be free from roughness and abrasions, esp the index and second fingers of the right hand, and the nails shd be quite short and scrupulously clean.” 85: frequent vaginal exams are most undesirable and are the readiest way of introducing septic matter; 87: admin of ergot, never in labour, only after; wring out napkins intended for mother in 1-500 perchloride and dry before use; 94: monthly nursing; 97: In case any suspicion of blood poisoning shd arise, both midwives and nurses must be guided by the views of the medical man as to beginning maternity work again. Most careful cleansing and disinfection of everything that has been exposed to infection is necessary. Mere abstaining from this work for a certain time is of no real value unless every other precaution is also taken.”


Hughes, Amy. *Practical Hints on District Nursing*. 3rd ed. London: Scientific Press. ILL. 1897? microfiche. late supt of nurses, Bolton Union Workhouse, and of the Central Training Home, Queen Victoria’s Jubilee Institute for Nurses for the Sick Poor. Dedicated by permission to Miss Florence Nightingale with deep gratitude for her kindly interest in the attempt to help my fellow workers in the service of the poor. 6 chaps: Introductory. II Preparation for District Nursing. III Practical Work; IV District Hygiene; V Advice to Nurses; VI Maternity Nursing 80--; nurse not almoner; 11: outside cities nurse must be prepared single handed to attend operations; 16: loyalty to doctors; do nothing without doctor’s orders except emergency; loyalty to patients; district hygiene, health missioners; hygiene as a science, Parkes Museum; overcrowding; cleanse gradually! 51: food for poor bad, 53: need to boil water, milk; 67 don’t give relief; 75: burn dressings, even in summer; 76 infectious cases; fumigation; 79: A district nurse shd keep special oversleeves and
apron at an infectious case, and most carefully wash her hands before leaving. It is a wise precaution to rinse the mouth and gargle the throat with a little boiled water in which 2 or 3 ‘crystals of permanganate of potash are dissolved. If living in lodgings she must change her dress, etc., if possible, before going to her room, if the care is scarlet fever, smallpox or typhus. It is usually practicable to do so in a washhouse or other outside bldg, and is a very desirable precaution. In a home special arrs can be made. Her clothes must also be placed in disinfectant before being washed.” Maternity: difficulties of employing same nurse for both maternity and sick nursing. 81: “Midwives and monthly nurses shd be antiseptic in every detail; their dresses, their bags, their methods of dealing with the patient, both during and after confinement, must be beyond suspicion.” wear clothes of washing material, light aprons.


Humble, J.G. and Peter Hansell. Westminster Hospital 1716-1974. 2nd ed. London: Pitman 1974 [1966]. on ending of Westminster Hosp. 88 even before FN began her great work Miss Elizabeth Eager, matron 1847-73 had begun marked improvement in conditions at Westminster, first to use the term “trained nurse,” wanted trained nurse, a “sister” in charge of each group of 3 wads, with 1 nurse for each ward (of 10 or 11 patients); but “head nurse” used instead. 2 nurses from Westminster went to Scutari with FN: Mary Tattersall and Mary Ann Noble; ladies’ com led by Lady Augusta Stanley, promoted nursing; when Eager retired in 1871 succeeded by Miss Spencer, who died, then Mrs Barber.

Hughes, Amy. “The Florence Nightingale Oration.” British Journal of Nursing (17 October 1914):398. Held in Liverpool town hall, presided by lady mayoress. Hughes pres of NUTN. 60 years ago FN started mission; 38 nurses, rose to 125, Boer War 800 Br nurses; related nursing reform; also in Queen’s Nurses’ Magazine


Hume, John Richard. Reminiscences of the Crimean Campaign, With the 55th Regiment. London: Unwin 1894. Maj Gen. 120: on 6th of May bishop of Gibraltar visited our camp, “On the 8th Miss Nightingale visited our camp and hospital. Everyone turned out to see 121: her, as all had heard of her good work in the Scutari hospital. Mr Alexis Soyer, the famous French cook, came at the same time and gave our men a lesson in cooking, showing them how to make the most of their rations. He certainly
did made some most appetising dishes, but the one lesson was not
enough, and I do not remember that there was much improvement in
the cooking in consequence.”

Hunter, William Wilson. *Bombay 1885 to 1890: A Study in Indian
Administration.* London: Henry Frowde 1892. Bombay: B.M. Malabari,
Indian Spectator Office. 1 January 1892

“Dear Miss Florence Nightingale, Some time ago you asked me to
write a book which would show the practical working of British
administration in an Indian presidency. You pointed out that
while the yearly ‘Statement of the Moral and Material Progress
and Condition of India’ supplies Parliament with the materials
for judging of the results of our rule in India, there is no work
readily available to the public which exhibits the local methods
by which those results are attained.” (v); account of Western
India during gov of Lord Reay 1885-90, frame of presidency
government, native states, taxation...“Now that the work is done,
to whom can I more fitly dedicate than to you, dear Miss
Nightingale--to you whose life has been a long devotion to the
stricken ones of earth, to you whose deep sympathy with the
peoples of India, no years of suffering or of sickness are able
to abate? I am, your sincere friend, W.W. Hunter (vii); book
starts with 1869 Ld Mayo directed me to visit the Indian
presidencies and provinces to draw up a plan for a statistical
survey of that empire, instruction included to deal with relation
s of government to land and landed classes; Bombay with state
ownership very different, a large head but small body for
administration.

Huntington, Frederic Dan. *Good Talking and Good Manners: Fine
Arts, with a Paper on the Social Law of Mutual Help and the Labor
Problem.* Syracuse: Wolcott & West 1887. Passing mention 11: with
D Dix, Caroline Fry, Sister Dora.

Huntley, Eric L. *Two Lives: Florence Nightingale and Mary
children. 22 pp on FN and then Mary Seacole “Doctress,” calls by
first names.
55: postscript: wd be surprising if they had not met each other.
did in fact, twice, once at Barrack Hosp. and then Balaclava. “In
her biography Florence Nightingale records the meeting” [no];
Seacole describes

Huntsman, Richard, Mary Bruin and Deborah Holttum. “Light before
Dawn: Naval Nursing and Medical Care during the Crimean War.”
coverage, Eliza MacKenzie id; Royal Naval Nursing Service founded
in 1885, Queen Alexandra became president in 1902; easier
conditions of navy and navy hosps; FN as famous patient at
Therapia; on strategy, crit of Raglan; 6: British did not want to
see a Russian fleet in Med, hence demolish Sebastopol; no coincidence that Cr War sandwiched between First Afghan War 1839 and 2nd 1878; British wanted to discourage the Russian Bear from entering India through the back door. Raglan against despatch of troops to the Cr Peninsula, unaware of number and disposition of Russian troops, warned by G Brown (Light Div com) that the duke of Wellington wd not have entered into such a campaign; but an army cannot return home having achieved nothing, so Brown said if Raglan wd not do it the govt wd appoint another so he mt as well; expected to be “home before Christmas”; Prince departed in Oct with £500,000 of winter clothing, vast sum, sunk with 33 other ships 14 November 1854; gives glowing report of RC nursing; porter for export then had alcohol content of 8-10%, close to wine, a heavy beer commonly drunk by porters; 7: Dr Robert Gooch 1784-1830 visited RC hosps on Continent, tried to introduce competent Prot nurses, not successful; Br troops in battle for Quebec 1759 in RC hosps amazed by quality of care they recd; E Fry (but does not mention that RC and Kai were unhygienic); 9: FN gave Inst of Nursing Sisters 15 in 1848 (Fry’s); Therapia 12 miles to north of Constant, on Eur side, fewer casualties; 10: san com; 11: magnitude of task seen in 400 hand carts of filth from sewers of BH and GH prior to installation of flushing system; entrenched pipe to hosps then had to be constructed to carry water from a spring 4 miles away; 2 tons of filth removed from vicinity of hosp at Koulali and 24 dead animals buried; (cites san com report); 12: Therapia also insp by san com and April 1856 report that recs carried out; Palace Hosp incorporated from sultan’s palace; 13: Mary Stanley (no ref to conversion) Prot aft service on Sunday held in ward of naval hosps, and smelly; Pincoffs liked French system of med note taking, used by navy; army recorded in heavy immovable ledgers; 16: FN authoritarian, ref to “uninformed criticism” of her role; 17: Seacole; bios of navy nurses; 23: Raglan died of diarrhea or cholera? 24: FN’s “continued vendetta” vs Hall; cites E. Davis that FN called together a bd of med officers at Castle Hosp and herself took the chair, altho Hall there”!! But Dr Anderson refused to entertain the idea; Prussian hosp an embassy hosp, nursed by Kai deaconesses and admitted foreign nationals to it; it and Br hosp got practical support from FN

Huntsman, R.G., Bruin, Mary and Holttum, Deborah. “Twixt Candle and Lamp: The Contribution of Elizabeth Fry and the Institution of Nursing Sisters to Nursing Reform.” Medical History 46 (2002):351-80. Cites BMJ in 1897 that E Fry “the found er of nursing” also in Nursing Record and Hospital World 1897 “the real pioneer of nursing in this country” why almost totally forgotten? Unpubl Fry material at Friends’ Library London; argues Fry not given enough credit as founder of nursing, but her organiz near London Hosp only 1840-42, while at 363: Devonshire Sq 1842-60 based, and called “Devonshire Square”
nursing sisters or Fry nurses; number of nurses peaked at 100, after 1913 fell to 60; final meeting in 1939, respectable women of lower class

374: ladies com considered applications from hosps for nurses, inspected, problem at London Hosp because of uncleanly state of the est, withdrew sisters (1842); 375: Dock and Nutting reported that by 1857 all 90 sisters trained by the inst were engaged I private duties (2:76); 375: “Apart from the improvement of hospital working conditions that resulted from the attentions of the Ladies’ Committee, the Institution had a negligible impact on the provision of hospital nurses”
376: care of the sick poor difficult, complaint in 1857 that a nurse accused of failing in kindness in a poor case
private nursing; training period was 3 months
379: why has Fry been forgotten? Paget considered FN better, witnessed her improvements; “Miss Nightingale’s quite extraordinary charisma inadvertently dimmed those who preceded her.” “Despite the fact that circs permitted E Fry only ltd influence on reform in hosp nursing, an area she left to Florence Nightingale, few wd deny her these accolades.” [good grief, but Fry died in 1845; no ref to not going to Cr War; 357 on Siedner, he visited Fry’s work in Newgate Prison, inspired to set up assoc to assist prisoners and in 1833 he and wife est home for female convicts rec’enly discharged; 1834 again visited London, spent a day with Fry and visited Newgate again; 1836 est hosps a school to train deaconesses to work as nurses; 357: Fry visited Kai in 1841 [but no recognition of poor sanitation and lack of nurse training]

Pt 1 21,1 (April 2003):33-36;
Pt 1 34: FN told Ld Shaftesbury that it was the San Com that saved the British Army, arguable, influence lingered on, to El Alamein 1942, victory said to be in part due to the superior camp hygiene be compared with German and Italian opponents;
Pt 3 38-40 “lady nurses” not useful

Hugh Small lecture well attended!; 31: praise of Russian sisters, trained by nurses from Kai!!


Hurd, Henry M. MD “Florence Nightingale--A Force in Medicine.”
Hurst, Isobel. *Victorian Women Writers and the Classics: The Feminine of Homer*. Oxford: OUP 2006. FN 3, 25, 50-51, 62, Cassandra 58, 92; not strong; cites Jowett on; underestimates FN influence on Jowett (25) sees FN must have been flattered, did not realize he re-wrote to respond to


351: Dunant became a pacifist, “an implicit admission that he had abandoned the assumption that spreading the Red Cross idea would make war more civilized.”

107: European powers outlawed privateering in Tr of Paris 1856, ratified Geneva conv 1864; signed St Petersburg conv 1868 outlawing certain weapons;; 109 Société de Secours aux Blessés Militaires des Armées de Terre et de Mer wholly unprepared for a major war

110 leading expert Léon LeFort of Paris; Société de Secours aux Blessés Militaires des Armées de Terre et de Mer unprepared for a major war; had hosted 1867 conf, but had no status apart from decree of June 1866 which recognized public utility of its existence. Organized an impressive exhibit of ambulance equipment during the Paris Exposition, but that a hollow triumph because most from the Prussian society and US san com; No serious effort made to procure supplies or est relations with army or med prof, or train nurses and ambulance personnel; when war started LeFort selected to organize volunteers, altho he had been critic of voluntary assistance in general and the Fr soc, but he found even greater disarray than suspected; LeFort, *La chirurgie militaire et les sociétés de secours en France et à l’étranger*. 1872

Hutchisona cont

346 Conclusion

347: 4 objects of initial project: send onto battlefield bands of volunteers inspired by pure motives of Xn charity, to supplement the presumed insufficiency of army med orga; 2 to stimulate among the common people, soldiers and civilians, respect for those killed and wounded, of whatever uniform; 3 international conv to grant special protection to the wounded and those caring for them; 4 creation of a vast charitable army of neutral volunteers, who through internat com or fed of aid societies wd put themselves at disposal of belligerents; 3 or 4 swept aside almost immediately by objections, by army, or for 2nd, overshadowed by tech innovation that barbarized warfare anew; only the 3rd attained;
350: “Nightingale was correct in her prediction that the existence of Red Cross societies would ‘render war more easy.’ she, Dunant and Moynier all died in 1910, and by then she had been proven even more correct. The great powers themselves became champions of charity toward the sick and wounded, as began to understand useful role cd play as “mediators of the values of militarism and as promoters of” of the ‘discourse of sacrifice’. Deliberate militarization of charity; Lord Wantage and MacCormac protested, but the societies promoted. “The leaders of most national societies enthusiastically prepared for whatever war service the army and the government wished them to perform, greeting the need for more money and personnel as a fresh challenge to the genius of philanthropy.” By 1890s Longmore and Mundy see increasingly lethal weapons and explosive “would make future wars an unimaginable horror for army medical services. Faced with this prospect, Dunant, the oldest hand of all, embraced pacifism, an implicit admission that he had abandoned the assumption that spreading the Red Cross idea would make war more civilized.” 351: But the national societies responded by demanding budgets for charity keep pace with expenditures on weaponry

Hutchison contd
426: Hutchison argues that while they set out with a vision to make war more humane, the worlds’ Red Cross organizations soon became enthusiastic promoters of militarism and sacrifice in time of war.”... “Florence Nightingale was among the few at the time to recognize the dangers lurking in the Red Cross vision. She refused to join and warned its founders that the governments of the world would cooperate with the Red Cross because “it would render war more easy.” She was right; starting in the late nineteenth century, armies simply used the Red Cross to efficiently recycle wounded men back into the front lines.”

In World War I, national Red Cross societies became enthusiastic wartime propagandists. This was true in every combatant nation....” and enc mass involvement of women in the “home front” for the first time.


ICN. Updates code of ethics, 130 national nursing associations, revised in 2012. Australia code of ethics 2008, Belgium.... Cdn code 2008
ICN. Definition of Nursing. “Encompasses the promotion of health, prevention of illness and care of physically ill, mentally ill and disabled people of all ages, in all health care and other community settings. "Nursing includes the promotion of health, prevention of illness and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles ICN 2002

Iddon, Chris. “Florence Nightingale: Nurse and Building Engineer.” ICIBSE Journal 18,22 (May 2015): lady with the lamp one of the first to recognise importance of air quality in tr of hosp patients and her recs on ventilation are similar to today’s CIBSE guidance> “Nightingale continually emphasises the importance of ventilation in ensuring the swift recovery of patients and reducing cross-infection.” was not first. David Boswell Reid did comprehensive systems for London Copenhagen Chicago and NY before the Cr War, Indoor health. FN quoted rates of ventilation that shd be expected, it was supposed that 600 ft of air per hour per person were sufficient for healthy adults, subsequent experience, however, has shown that is by no means enough.... “These ventilation rates are very similar to the recommended 8-101s per person rates that we find in CBSE Guides A and B. For sick wards, the ventilation rate recommended by Nightingale is between 2500 and 5000 ft3 per hour....” her preference for open windows; after her plea, Brunel commissioned to design a hosp and drew up plans for Renkioi. Parkes worked with Surgeon Major Francis de Chaumont in mid 1870s, measured CO2 levels using lime water.. They wrote A Manual of Practical Hygiene (they). “Exposing the horrid” air in schools. Univ of Salford Clever Classrooms report reiterates FN findings on importance of internal env re air quality, temp and daylighting;

Iezzoni, Lisa I. “100 Apples Divided by 15 Red Herrings: A Cautionary Tale from the Mid-19th Century on Comparing Hospital Mortality.” Annals of Internal Medicine Ann Inter Med 1996, 124:1079-85. MD Msc; good coverage of issues. 1079: FN, Farr and FN, tables 1081: “The Methodologic Context. Today, observers might view Farr and Nightingale as erring in their calculations or intentionally skewing statistics to bolster political arguments. In the 1860s, however, little consensus surrounded statistical techniques, let alone te manner in which hosp mortality rates shd be calculated.” Quetelet law of error. Fisher 1’925, Pearson goodness of fit in 1900. Many provincial hosps refused phthisis or fevers... 1082: reviews of: “excoriated” FN a celebrity but non-physician; surgeon Fleetwood Buckle concern re biases from calculating per be mortality, esp when comparing across hospitals. debate following FN’s pub parallels those cited today to measure
provider performance, “the need to hold windows of observation constant such as examining mortality 30 days after admission rather than in-hospital deaths” data quality

Ikeda, Daisaku. Florence Nightingale contd
11: Buddhism teaches that the wise are not swayed by praise or censure, by the vagaries of public opinion.
12: Lifelong mission: “Why was Nightingale able to build such a strong, unshakable self? I think it is because she embraced a noble calling, a mission. She cherished this sense of mission her entire life.” calling, to satisfy your own high idea of what is the right.
Buddhist scripture tells of Queen Shrimujla declaring before Shakyamuni Buddha lifelong commitment to bodhisattva way with 10 vows, sentient beings friendless, trapped and bound, diseased troubled poor and incurable, to speak kind words, give alms and become one with those who needed help, striving to nurture the inherent good in people’s lives.
13: Nightingale stayed true throughout her life
18: Crimean War. Scutari
23: “The Buddha taught that there are illnesses of the body and illnesses of the mind, and we must do everything in our power to heal them. It is important that we care for those who are sick, as if they were the Buddha. Buddhist practice exists only in struggling in the midst of humanity.”
24: Longfellow poem
25: used her own funds to purchase food, clothing and personal items for the patients, organized new kitchens, reading rooms and classes, got dissecting room for postmortem exams built; obstructed by the apathetic and devious
26: many of the nurses dispatched with her were inexperienced, an encumbrance [worse], “but Nightingale sincerely respected and valued them.” NO
27: FN wrote letters to the nurses’ families; 28: theft nurse
30: after the war: “Nightingale reflected on the senseless deaths of so many young men in the Crimean War, and after returning...a new struggle to protect life and health.”
32: “Her experience in Crimea led her to the conclusion that nursing itself must be reformed. Had there been a properly established nursing system in place, she felt, many more precious lives could have been saved.”
34: India; 35: published YES
35: Rene Simard, former rector of Montreal, and Guy Bourgeault:
36: “good health is neither an absence of illness nor simply a stable state. ‘Essentially good health is less the absence of illness than the tension between a precarious equilibrium and the constant dynamic of its reestablishment.’” In Buddhism a oneness
of health and illness;
Chapter 5 illness. Okay
38: Nursing that strengthens life force. Fresh air and sunlight, progressive for her time
39: “Buddhism teaches ‘the oneness of life and its environment’ and the ‘oneness of the universe and the self.’ In its inner reality, our life is 40: one with the natural environment and the universe itself. Living in harmony with nature strengthens our innate life force.’

The Lotus Sutra also contains the principles of ‘perennial youth and eternal life’ and of prolonging one’s life through faith. ‘Life’ here can be interpreted as ‘life force.’” FN on hospitals, no harm; quotes Prince Charles on hosp architecture 40: ‘It can’t be easy to be healed in a soulless concrete box with characterless windows, in hospital corridors and purely functional wards. The spirit needs healing as well as the body.’” and also that possible to build features that are ‘positively healing’

“Nightingale’s philosophy of nursing continues 41: to offer valuable suggestions for us today. Indeed, it is very close to Buddhist concept of nursing based on compassion. According to Buddhism, the causes of human suffering are not necessarily limited to physical pain.” composite, physical, psychological and spiritual and social. FN held the same view. How to relieve patients of suffering, and fretting and worrying. “Nightingale expanded the boundaries of nursing to include treating psychological and social suffering as well.”

FN devotion to educating nurses
Chapter 6. Quotes FN quoting Bible, does not acknowledge source! Cook 2:246 “Let each Founder train as many in his or her spirit as he or she can. Then the pupils will in their turn be founders also.”

47: FN “constantly afflicted with headaches, nausea and asthma attacks.”

49: Josei Toda, end of life determines whether happy or not
50: “Nightingale viewed death as the beginning of a fresh round of ‘immense activity.’ Nichiren Daishonin writes, repeat the cycle of birth and death secure upon the great earth of our intrinsically enlightened nature. Those with faith in the mystic law advance with joy in both life and death on the great earth of their intrinsically enlightened nature, the earth of Buddhahood. Life is eternal.

51: author started practicing Nichiren Daishonin’s Buddhism in 1947. He said you may not be able to compare with FN who achieved so much, “but your spirit and determination should never be inferior to hers.” “Nightingale gave her life to nursing. It was a life that demonstrated to future generations the incredible strength and capacity of a person who is fully awakened to their life’s mission as they fight their way valiantly through the crushing breakers of adversity to reach their goal.” to engage if
life revitalizing dialogue.

Ikeda, Daisaku. *Florence Nightingale: In Tribute to the Century of Women*. Santa Monica CA: World Tribune Press 2003. 57 pp 21st century the century of health, and of women. Blazed new trails. 3: had the sensitivity of a bodhisattva toward others’ suffering and pain. Reminds of the women of Soka Gakkai’s early days, vision of our Soka Gakkai nurses groups. Sources: Huxley, ET Cook, WS, Cope. By FN only NonN, NonH and several addresses, Seymer edition of [SGI Soka Gakkai International Association, a lay Buddhist movement with 12 million members; literally “value-creation society”, largest lay Buddhist movement in the world, aim to integrate Buddhist practice into daily lives, following the Lotus Sutra based teachings of Nichiren, a 13th century Japanese Buddhist priest; founded by educator Tsunesaburo Makiguchi in 1930; Josei Toda imprisoned in July, released July 1945; 3rd pres is Daisaku Ikeda who founded the SGI 1975 of Guam; has 84 constituent organizations with 12 M members in 192 countries and territories, has est schools in Japan and outside, universities also, a registered NGO at the UN; 8: “She decided that her calling lay in devoting her life to nursing.” in 25th year. NO, but family opposition. 11: “Declaring that she would have to seize what she needed to fulfill herself, because it would not be given to her, she traveled to Germany to study at a special nursing school, with an attached hospital and orphanage.” NO NO “a strong inner conviction shines through Nightingale’s life.” not swayed by others.

Innis, Mary Q., ed. *Nursing Education in a Changing Society*. Toronto: University of Toronto 1970. for 50th anniversary of founding of the School of Nursing at the U of T. i.e. 1920. Dorothy G. Riddell, “Nursing and the Law: The History of Legislation in Ontario.” 16-45. 1872-; Hampton Robb and Nutting, both Cdn born; Agnes Snively trained in US for purpose of fitting herself for hosp position; 19: returned to Ont to be supt of nurses at TGH 1884; Chicago World’s Fair. AJN Robb on.


Iveson-Iveson, Joan. “A Legend in the Breaking.” *Nursing Mirror.*
“haunts the nursing profession. It is still uncomfortably close to her death.” “Florence” and “the underlying morbidities and radical oddities” in her personal writing. 27: The true character of Florence Nightingale was established—she liked to play the power game using that age old weapon of intrigue and manipulation.” FBS in biblio. “power game.” “What she actually did or did not do for the soldiers in this war is not the issue at stake. It is what one intellectually proud but frustrated woman, out of touch psychologically yet trapped materially in her Victorian background and ethos, did for the dawn of nursing.” “hungry leeches” “First the Nightingale legacy established class distinctions in nursing which survive today and promise to go on developing.” “She kept the number of nurses to a minimum, so overworking them and endangering the principles of good care.” “Third, she placed administration firmly at the top of the nursing tree.” devotion to duty over private life. “Lastly, she unwittingly created the subservient role of nurses to doctors, which turns full circle to the creation of a class system in the nursing structure.” “Florence seized her chance in the Crimea.” good grief.

Jackson, Tom, ed. Mathematics: An Illustrated History of Numbers (100 Ponderables). 2013 FN, seems exaggerated, worked 24 hours to take notes on infection rates, hygiene and death rates, and to standardise them across wards and hospitals, something unheard of at the time. Because of her knowledge of stats! Wrote letters to the Times which resulted in construction of pre-fab hospital of Brunel, had death rate 1/10 of the makeshift hospital in the barracks where FN first worked. Produced 850 page report


Jackson, Betty M. and Webber, Pamela B. An Introduction to Theory and Reasoning in Nursing. 3rd ed. New York: Lippincott Williams & Wilkins 2010. Online only UT; foreword: authors Virginia academics, 30 hits on FN from foreword by Julie C. Novak, Purdue professional nursing, such as Florence Nightingale 10:, 13, For example, in the mid-18th [yes] century Florence Nightingale, the mother; 33 hits for FN; not UG [cited re env theory by Medeiros]

Jacob, Frank H. A History of the General Hospital near Nottingham: Open to the Sick and Lame Poor of any County. Bristol: John Wright & Sons 1951. 38: Peter Nightingale a subscriber in 1785; 133; chapter 11 Nursing 1832-82; reform. Ref to Wardroper; at Nottingham trained nurses from 1869? (142); appointment of Miss Gregory in 1872; Jan 10 1872 report of great improvement; 1872 Miss Gregory appd matron, trained under Mrs Ward at St T (188) but nothing on architect or plans anything
that FN saw; ref to Children’s Hosp, no details.


Jamieson, Elizabeth Marion and Mary Sewall. Trends in Nursing History: Their Relationship to World Events. Philadelphia: W.B. Saunders 1941. quite a few errors in this book (Sir Sidney Herbert, no pauper nursing from 1874! (398) and women had to be well-bred to be accepted in N School) has chap on FN, “Florence Nightingale: Reformer of Hospitals and Nursing” 358-81. from sec sources; N School in chap 7, 2 social grades and at Crimea; exam and those passed to be known as certified nurses, but no printed certificates (393); 2nd part of course 3 years for non-paying pupil, 2 for paid, wholly to ward practice; Rathbone gave refuge to Dorothea Lynde Dix when she was alone and sick in England; Mary Robinson gave up private nursing to nurse by salary, paid by WR (396); he paid for sickroom appliances, special diets; by 1862 school buildings built and equipped by WR added; Merryweather, grad of N School became supt of nurses (396); workh reform in America began with a group of women, the New York State Charities Aid Assoc (413) most with civil war experience, a com appointed to concentrate on Bellevue (414); as early as 1860 New England Hosp for Women and Ch in Boston tried to teach nurses, but no success until introduced Kai method, first to grad was Linda Richards, 1873; 1861 one month before beg of civil war, Quaker ladies in Philadelphia est Woman’s Hosp to train nurses....; list of hosps in US and Canada using N method; 1873 Bellevue...; Bellevue first to establish itself as “an outstanding exponent of the Nightingale plan in America...and naturally supplied many pioneers of reformed nursing on this ‘continent.’” (419); esp Isabel Hampton Robb, in 1886 supt of Illinois Tr School, and Cook Co Hosp Chicago (420) then in 1889 to Johns Hopkins (420) produced standard text: Nursing: Its Principles and Practice for Hospital and Private Use. 2nd ed. (1st ed 1893) Toronto: J.A. Carveth 1899; 512 pp and Nursing Ethics. mar Robb in 1894, succeeded at Johns Hopkins by Mary Adelaide Nutting Cdn, (421), another Cnd Mary Agnes Snively to Bellevue, returned to Canada in 1884 to TGH, for 25 years there (422); Lavinia Dock was asst to Hampton at Johns Hopkins and supt of Illinois Tr School, then wrote a Materia Medica


Jewesbury, Eric C.O. *The Royal Northern Hospital 1856-1956*. London: H.K. Lewis 1956. only passing mention of FN. and zilch on nurses. began at King’s Cross 1856-63, then moved; Miss Ward lady supt w/o salary 1860 appointed, retired 1863, then North London Deaconesses Inst. took over, Pelham Dale


Jiang, Shan. Encouraging Engagement with Therapeutic Landscapes: Using Transparent Spaces to Optimize Stress Reduction in Urban Health. Dissert. 2015 Clemson University. PhD Planning, Design and Built env. Has Verderber on com. Evidence-based design strategies, 22: traditional belief that nature heals; chapter 2.5 Therapeutic landscapes and healing gardens in healthcare facilities; 43 natural light as a healer, classical lit cited; Chinese trad medicine; 27: window views 4: natural light as a healer; “full-spectrum lighting can promote patients’ safety by (1) reducing medical errors (Buchanan ET AL 1991) illeg ILUIS 1997) and (2) avoiding fatigue (Figuro et al 2002). Natural light inpatient rooms is beneficial to patients' recovery process, such as (1) reducing stress (Leather et al 1998; Alimogluglu et al 2005) (2) reducing depression (Leather et al 1998; Alimoglu et al 2005, Balch et al 2005) (3) reducing pain (Balch et al 2005, Beauchemin, Hays”.... lots of refs but seems
The Domain of Nursing.” “Florence Nightingale is praised for her work in identifying the nurse’s role in health care, for establishing nurse training and for her theoretical writing. All three were important for the subsequent development of nursing attitudes toward theory. Notes on Nursing: What It Is and What is Not... makes; domain outside the physician’s. While we can recognize her empirical writings as important, she prob wd have been reluctant to call them theory; ambivalent attitude toward, 1881 address “Contemporary health care is a mosaic of roles...” His of nursing provides first hint, “When Florence Nightingale secularized and professionalized the role of the nurse, she established the domain of nursing expertise. The dolman was a necessary part of patient care and it was distinct form the physician’s domain of diagnosis and treatment. Nightingale’s division of labor in health care was elf-consciously constructed asymmetry between men and women, doctors and nurses ref to NonN and Norris’s Nursing Notes 1891; lots of refs


Jocelyn. Julian R.J. The History of the Royal Artillery (Crimean Period). London: John Murray 1911. FN and terrible conditions. Colonel. 508 pp. index. no Seacole. FN 295 and n2. brief mention. 294: winter. Sickness. “With the advent of winter the cholera, which had never left the army, increased with alarming rapidity, and to its ravages were added those of frost-bite, fever and scurvy. The work thrown on the medical officers was appalling, for there was little proper food, a dearth of medicine, no hospital appliances, no staff or trained subordinates, no candles even to light the tents and prevent one sufferer being trodden on while another was being attended. 295: The fate of a man stricken by sickness was terrible, if merciful death did not at once close his sufferings. First came the hospital tent, fetid, cold and dark; then the long, slow, painful transport to Balaclava; afterwards the voyage, often rough and prolonged, in ships absolutely unprovided with what was most needed; and finally the horrors of the hospital at Scutari. The deaths were frequent....” ftn 2 re state of Scutari Hospital before the influences of Miss Florence Nightingale bore fruit, “The Crimea in 1854 and 1894” 214.


Johnson, Mark. “Racism and Reform.” Nursing Times 95,19 (12 May 1999):25. “Just as determined as Miss Nightingale had been, Mrs Seacole also set up an organisation to help those in the Crimea. Indeed, she went further. She saw a need for outreach and a holistic service. She also prescribed the medicines she had learnt about from her mother and grandmother.

In order to deliver these, she set up a ‘British Hotel’ that supplied shelter, relaxation and excellent food. Alex Soyer, a famous french chef, is recorded as having praised her kitchens.” [no, he praised FN’s kitchens!] what do they say now? [one of the worst, Seacole went further than FN!]


Johnson, Dorothy. Theory development; FN Selye on stress, introduced 1936; body confronts stress in 3 universal stages of coping: alarm reaction, adaptation where the resistance to the stress is built? and exhaustion, a sort of aging; Johnson used, Johnson and Webber 2007

Johnson, Jean. Nature is the Best Medicine: More Hospitals are incorporating ‘Healing Gardens’ and Speeding Patient Recovery. Green Living 18,5 (Sept-Oct 2007):40. Example Samaritan Lebanon Community Hospital, Oregon, Japanese Gardens. Pop article; patients assigned randomly to rooms identical except window view, small stand of deciduous trees, or a brown brick wall. Shorter post op stays and few negative comments. No FN ref

Johnson, Betty M. and Webber, Pamela B. An Introduction to Theory

Johnstone, Megan-Jane, ed. Nursing Ethics. 3 vols. Oxford: Sage 2015. Mainly short articles on. Goes back to FN and 1889 articles, Dock 1:xxi: “Editor’s Introduction: Nursing Ethics.” xxii: Durkheim Ethics and Civic Morals, def, rules FN “Nursing ethics has a rich and distinctive history dating back to the late 19th century, where its inception and development paralleled the beginning and advancement of what has come to be termed the ‘modern’ nursing profession. Modern nursing is credited with having originated in the historical reforms led by British nurse Florence Nightingale (1820-1910) and the creation of her school for nurses ... St T (Dock and Stewart). Xxii: FN “Nightingale model, sc, humanitarian, not religious; Dock 1900 wrote on Johnstone, “Introduction: Developing Theoretical Foundations for Nursing Ethics.” xxvi, earliest HCC in 1889, American, article in The Trained Nurse; Taylor 1908; codes, oaths and pledges, xxxi N pledge, recognized as first “public declaration of the Vision and values of nursing” (McBurney & Filoromo 1994; but never intended to be for the profession as a whole; xxxii: ICN code !853 for profession as a whole; Dock changed her mind xlvii endnote on FN, “Nightingale who has often been unfairly criticised for imposing ethics of strict obedience in nursing, had respect for but for intelligent obs [okay on] xlv: Nursing scholars have continued to struggle with the task of developing an adequate and plausible theory of nursing ethics. “ ethics and etiquette; journals: Nursing Record 1888 UK; AJN October 1900; Australasian Journal of Nursing 1903; Pacific Coast Journal of nursing 1904
Florence Nightingale, for example, demonstrated how a healthful env could promote healing and recovery, fought for the proper care of soldiers and provided careful documentation of interventions and outcomes that laid a foundation for future research activities. Lillian Wald...

"Chapter Star: Florence Nightingale (1820-1910), brilliant, focused, competitive and she identified learning correctly as an avenue to power, intellectual skills, family connections... Turkey, “Upon her return to England, she was appointed to two commissions to reform public health. NO Nightingale was the ‘chief strategist, chief correspondent, chief worker in other words, the one essential person upon whom the whole male team of experts relied.’ Ph in India also, dev of professional nursing, even as Vic woman

393: “as entrepreneurial ‘free agents,’ notable nursing leaders such as Florence Nightingale, Lillian Wald and Mary Breckinridge all carved out their own missions beyond their immediate callings to help patients or address community needs. They took” breaks off; also p 393 on Seacole

romantic heroine, movie favourably reviewed by nursing profession as a good educ film, Variety June 1936, shd use for schools; screenplay Mordaunt Shairp, used Lytton Strachey, but disregards Strachey’s purpose and tone and “reinstates the familiar, popularized version of Nightingale as the saintly, self-sacrificing woman, the legendary lady with a lamp.” use of light, 75 minute feature film condensed from 1850-56, “passivity and femininity” (227) of N’s career; pic of FN embracing a wounded soldier, romantically and looking lovingly on him as if about to kiss him (228) "This is the most pronounced visual image in the film of her as a seductive woman, but the men romantically attracted to her reinforce this image” (229). poss this helps to explain refs to FN as "she loved soldiers"??

Jordan, Ellen. The Women’s Movement and Women’s Employment in Nineteenth Century Britain. London: Routledge Research in Gender and History 1999, Chapter 7 on Transforming nursing, 134 on FN. Cites F.B. Smith, Lytton Strachey, quotes him “outright mendacity and calculated pleading” and must use other records, Baly, Summers more balanced; nurse training not a major concern of hers; more quotes of FBS on 135; 136: has Sisters of Norwood as going out with FN. as Devonport and St John’s House, 40 ftnote on Seacole:
40: “Lizzy Herbert” and “Mary Stanley”
41: pic of “Fanny Taylor’ one of Mary Stanley’s lady volunteers, wearing badge of Koulali, rejected rest of the uniform assigned; Catherine Leslie Anderson, lady volunteer sometimes mistaken for FN
45 other nurses est at Koulali (Frances Margaret Taylor vol 2, 159-2, 164 Eastern Hospitals and English Nurses)
45: FN left mgt in hands of other nurses at Koulali and Balaclava (no understanding that Koulali the worst)

137: Has master of St John’s House acc to Paris, and nearly resigned when not allowed to go with them to Scutari

The Queen’s Daughters in India.
170: FN signed along with HM, Mary Carpenter, Brights, etc.
399: quotes from FN’s “Observations by Miss Nightingale on Evidence in Stational Returns” for recreation, moral forces
478: FN name on list; with Elizabeth Vincent, Louise Herbert (Mrs G); Mrs Wm Playfair; Princess Christian; took petition to Marquis of Salisbury
Joyce, Helen. “Florence Nightingale: A Lady with more than a Lamp.” *Significance* 5,4 (December 2008):181-82. FN did not know about antiseptics then (correct), wrong on charts re radius and area, but a pioneer. Farr the first to compile “mortlaiyt tables” listing causes of death in gen pop; 182: “she later compared his number her own on the deaths of soldiers to great effect.” (But she did not collect stats) “The pair were instrumental in setting up a royal commission of inquiry into sanitary conditions during the Crimean war.” (No); 182: her “chart is beautiful” (no mention of gray charts), but “but by no means perfect” she an innovator. (Does not seem to know Farr got the charts done but has him as against as fripperies) nice repro of classic diagram.

Judd, Catherine. *Bedside Seductions: Nursing and the Victorian Imagination, 1830-1880*. New York: St Martin’s 1998. Univ of Miami. Also on Seacole. Cites FN printed sources, no mss. Foucault, FB Smith. 73: “The myth of Nightingale’s reformation of the nursing profession consistently emphasizes the changes wrought through the introduction into hospitals of ‘educated, trained, refined women’ (Lavinia Dock quoted in Baly 1984, 55), yet old- and new-style nursing conjoined on many levels.” good grief, of course, and so said FN. “Perhaps most fundamentally, the tenets of new-style nursing emphasized developing the nurse’s policing talents.” control or rule of patients. 39: FN “Britain’s foremost nursing reformer and hospital architect,” “same attention to moral discipline and surveillance of sexuality noted by Foucault among French reformers. “Nightingale’s architectural plans, inextricably linked to her nursing reforms, emphasized the nurses’ sexuality and created a program for confining them in the hospitals, surveying their activities, and morally reforming them through their work.”In Subsid Notes, light, airy pavilion design “consistently slips between eliminating ‘holes and corners’ for the sake of controlling infectious disease and for the sake of overseeing both workers and patients.” Poovey claimed “elaborate counterespionage scheme rather than the work of healing Poovey Uneven Devs 1988:181; 123: FN critical of Middlemarch


Judge, Joan. *The Precious Raft of History: The Past, the West, and the Woman Question in China*. Stanford: Stanford University Press 2008. interesting source on FN as inspiration for Chinese women, FN with Frances Willard, Stowe and educator Mary Lyon. 65: “Nightingale was one of the most renowned Western heroines in China at the turn of the twentieth century.” authors used to enlighten young Chinese women about global humanitarian issues
and encourage them to “serve as politically engaged nurses in China.” late Qing assoc with Internat Red Cross; 66, concern that the IRC misappropriated Red Cross banner at Boxer Uprising; and to mobilize women to serve as nurses in battles for China’s national survival. Yang Qianli New Reader for Girls and Women exhorts to follow, pub 1904. these courageous Chinese “Nightingales” inc members of the Humanitarian Assoc and Assoc of Dedicated Nurses in Tokyo, and Patriotic Girls’ School in Shanghai, who volunteered to serve as nurses in the Russian incursion. reprinted 1908, with FN bio. Image of FN as motherly, as in Egyptian lit (263 end note); Pjuiu zhu bio of FN in Chinese. Magazine of the New Chinese Women. “Archeo-modernists” imbued figure of FN with maternal qualities.


Kalisch, Beatrice J. and Philip A. Kalisch, “Heroine Out of Focus: Media Images of Florence Nightingale.” Part 1 Popular Biographies and Stage Productions. Nursing and Health Care 4, 4 (April 1983):181-87. legends, gives list of dramatizations; 183: “Cook’s fear of giving offense may have softened certain rough edges of the truth, but does not appear to have misrepresented Nightingale altogether” (but cites no original sources so how does he know? first name: “Cook always gave credit to Florence’s allies”...Strachey and W-S (but not FBS) 185: “Florence and Sir Edward”; Berkeley’s Florence drives Sidney to his death and Florence and Liz square off; in Reginald Berkeley play 1929 with Edith Evans;

“Part II: Film, Radio and Television Dramatizations.” 4, 5 (May 1983): 270-78. 3 feature films, The White Angel, The Lady with the Lamp; 275: James Lee wrote “The Holy Terror for NBC’s The Hallmark Hall of Fame 1965, Julie Harris as FN; FN as religious fanatic “whose sense of divine mission made her insensitive to the feelings of others” used W-S bio, “chilling human”; refs to “Sidney Herbert” and “Florence”; 276: in Lee play FN back in England, blackmails family into independence by becoming paralytic, bullies friends 274: radio play with letters from Cook read by Irene Dunne;


Flitting like angels
From bed to bed
Cooling the parched lips
and Aching head.
ref to Woolsey, *A Century of Nursing with Hints Toward the Organization of a Training School* 1876, directress of Presby Hosp NY; (called by her first name)

131: Nightingale pledge devised by Lystra E. Gretter, supt at Farrand Tr School for Nurses at Harper Hosp Detroit; like Hippocratic oath; first admin 25 April 1893;
-- *American Nursing: A History*. 4th ed. Philadelphia: Lippincott 2004 [1995]. nice pics. FN section; Dr Marie Zakrewska worked with Blackwell, New England Hosp for Women and Children; Richards; Schuyler (descendant of Alexander Hamilton and general Philip Schuyler); 71: Richards was night supt at Bellevue in its first year; supervised the early dev of the Boston Tr School for Nurses at Mass Gen Hosp, and org or reorganized 5 other important schools; the new school at Boston City Hosp 1878

Kanai, K. *Keys in the Research of Florence Nightingale*--on Japanese Bibliography.

Kasr-el-Aini, fac of medicine, 1837 so named, 1838 midwifery est

Kaufman, Matthew W. *Surgeons at War: Medical Arrangements for the Treatment of the Sick and Wounded in the British Army during the Late 18th and 19th Centuries*. London: Greenwood 2001. “Florence Nightingale and her Nurses” 147-52; and “the Conditions in which the men lived” cited 152, 227 pp cite re FN and Crimean War and AMS; 165: “To reduce the pressure on the beds at Scutari, it was proposed that a convalescent hospital be established at Smyrna ....fabric of hosp in reasonable condition, but a previous barracks complex “with inadequate drainage and sanitation” considerable degree of overcrowding; mortality during first few months c13% extremely high for a conv hosp, due to overcrowding and unhygienic conditions; only in March 1855 did civilian med staff arrive....then got Brunel to do prefab units, but civilians treating


Kawana, Sari. “Romancing the Role Model: Florence Nightingale, Shojo Manga, and the Literature of Self-Improvement.” *Japan Review* 23 (2011):199-223. First page only seen, UofT el; author at U of Mass; uses story telling, virtues of great figures, examines manga depictions of FN, “a staple of educational materials in Japan for decades, and explores how her inspirational story has been illustrated an d adapted to suit the changing tastes of contemporary Japanese readers.” Self-help lit

KCL archives. RBNA, British College of Nurses. RBNA founded Dec
1887, royal charter 1893. Matrons’ Council 1894; Society for the State Reg of Nurses formed 1902, Ethel Fenwick as sec and treas; National Council of Trained nurses of Great Britain and Ireland est 1904, Ethel Fenwick as pres; College of Nursing est 1916, later RCN; 1917 discussion of merger between RBNA and College; Reg Acts passed 1919; General Nursing council chaired by Ethel Fenwick est 1920; British College fo Nurses founded by Ethel Fenwick 1926 as pres; and Dr F as treas; 1927 College of Nursing applied for royal charter, opposed by RBNA, granted 1928, renamed 1939; BCN closed 1956;


Keighley, Tom. “‘At-one-ment: A Way of Focusing on Nightingale’s Relationship with God.” Wellcome conference Sept 2010, on doctrine of atonement; FN critical of way concept manipulated, liked it to a faulty understanding of the nature of humanity and divinity;

Keighley, Tom. “From Sickness to Health.” in Sioban Nelson and Suzanne Gordon, eds. The Complexities of Care: Nursing Reconsidered. Ithaca: ILR Press 2006 88-103 refs to FN, how nursing has moved from care of sick to how to stay well; while nursing has moved from being handmaiden of doctors to something resembling a self standing profession; Alma Ata. Poor blamed for sickness, failure to uphold one’s duties in a rights based paradigm; and nurses lose bargaining chip, care of sick;

-- typescript of presentation “A Voice in the Wilderness” re Maori health FN MUS copy

Kelly, Christine, ed. *Mrs Duberly’s War: Journal and Letters from the Crimea 1854-6*. Oxford: Oxford UP 2007. husband was Henry Duberly, paymaster 8th Hussars. 114 ref to FN by editor; neither FN nor Seacole in published journal, but FN in letter
174: “Florence Nightingale is here. I rolled into that stink hole Balaclava yesterday to call on her, but found she was ill with fever, or rather recovering from it and in one of the huts for the convalescents on the hill by the Genoese fort, so I did not see her.” still a stink, though sanitary committee; has good bio bits in; xxv: Duberly’s journal has only brief mention of FN; letter said: “I suppose you know that Miss Nightingale is going to marry a pillbox!! A Dr McGregor. Henry used to know him and says he is one of the greatest ruffians in the service.” but Alexander McGregor died
Jane Shaw Stewart 140 289
Editor intro: xxv Mrs Duberly (Fanny) order of things was Christian and gentlewoman;
xxvii “Originally the hosp conditions at Balaclava were worse even than those at Scutari. Florence Nightingale would not allow her nurses to enter the undisciplined regimental hospitals, and she grew alarmed when some of them moved to the Balaclava hospital. [but it was not regimental]. “However, when in May 1855 she visited Balaclava to check on their progress the situation had improved and she was feted by grateful soldiers.....” ill, Fanny called on her...
xxvii no poss of Fanny and Mary meeting socially, but had interests in common, homeopathy, “Mary’s est...sold food and drink as well as providing medical care (p 323). And during the desperate early months of 1855, when the quayside at Balaclava was covered with wounded men waiting to be transported to Scutari, each in their own way attempted to alleviate the hardships of the men around them--Mary with her practical help to the wounded, Fanny by writing scathing....
140: Wednesday 31st “Eight nurses, under the direction of a ‘lady eldress’ and Miss Shaw Stewart came up today from Scutari to the Balaclava hospital” 141: it seems the ladies make the nurses do all the world while the ladies do all the swagger 289 endnote ref to Shaw Stewart, “almost the only fine lady among those at Scutari to have done any real nursing.
287 endnote: Seacole on board Medora, described similar fire as Duberly, but less panache; 323


Kelly, Karen “Women’s Leadership in the Development of Nursing.” *Gender and Women’s Leadership: A Reference Handbook*. Ed., Karen O’Connor. Thousand Oaks CA: Sage 2010. 712-20. Website 11 pp. 2: “She became the heroine of the Crimean War, where she dramatically reduced the mortality rate for injured soldiers from 40% to 2.2% by ensuring that they had nursing care, sunshine and fresh air in a clean environment.”


Work with Farr, sent findings, rc refused to publish. “The health workers who rejected her legacy this week accused Florence of fostering the belief that nurses should be subordinate to doctors. In reality, she despised doctors because it was more important to ‘do’ like a nurse than to ‘know’ like a medic.”

“In 1887, aged 67, she admitted her long addiction to chloroform, saying it had helped her to ‘get through a lot of work.’”

Kelly, Mrs Tom, Stothert, Samuel Kelson and Simpson, William. *From the Fleet in the Fifties: A History of the Crimean War*. London: Hurst & Blackett 1902. Not in BLC. Online; Seacole From Varna; Seacole not in table of contents chapter XXI a “State of Hospitals--Miss Nightingale’s Arrival--Results of her Work”...French unprepared. p 250; 250: “The hospitals, however, were crowded. Ship after ship brought its load of wounded and fever-stricken to Scutari, where the hapless individuals, if not too ill or too apathetic, hoped to recover, though had they known the frightful statistics, weekly increasing at an appalling rate, they might well have preferred ‘easeful death’ on the voyage to the almost certain fate waiting them in the pest houses, which the splendidly spacious buildings at Scutari had become.

It was a fortunate coincidence that Miss Nightingale and her band of brave nurses arrived there only a few days before the overwhelming influx of work was brought from the battlefield 300 miles away. Though possessing a rare aptitude for business, and zeal for redressing mistakes, for a considerable time even she was baffled by insidious forms of the malignant diseases which decimated her wards. Before her arrival the hospital staffs had been quite unable to cope with the fearful strain put on them; they did not possess the requisite authority for obtaining even absolutely and instantly needed aids to cure....Miss Nightingale’s anxiety increased with the increasing death rate. In her crusade against crass ignorance, she had a powerful ally at home in Mr Sidney Herbert. After a considerable period, in which thousands died of zymotic diseases, a thorough investigation resulted in a complete system of sanitation, when the death rates decreased, and soon were no higher than those of
military hospitals at home. But the improvement did not begin till March, and meanwhile desperate calamities occurred.”

Kelson Stothert had ample opp for knowing the condition of the different camps, his description coincides with those of various writers who had similar facilities for judging; not official chaplain to the Naval Brigade, practically its chaplain already.

Kelly, Christine. Seacole, Biographical Notes. 323. “Her Jamaican mother, a doctress who kept a boarding house where she nursed invalid Army and Navy officers and their wives. Widowed while still young, she became known as a skilled nurse and doctress after she had successfully applied her ‘healing arts and simple remedies’ during epidemics of cholera and yellow fever in Panama and Kingston.” [NO] went to London and applied to work as a nurse. Turned down by army and com of FN; FN happy to help her. Set up. “With the profits from these ventures she bought or prepared medicines which she provided free for the navvies and the soldiers, many of whom preferred her natural remedies to the rough and ready treatment of their regimental doctors. Nicknamed Mother Seacole, she became a familiar sight at the front tending the wounded, and after the war was awarded the Crimean medal.” Russell [okay, ends abruptly [familiar sight, twice]

An officer’s wife, Fanny Duberly, published her letters and journal from her Crimean War experiences. There is only passing reference to Nightingale and other nurses. Seacole gets not a mention, although the editor in her introduction points out similar concerns between Duberly and Seacole, in homeopathic medicine.


Kelly, Lucie Young and Joel, Lucille A. The Nursing Experience; Trends, Challenges and Transitions. 3rd ed. New York: McGraw-Hill 1996. 763 pp. U.s.a. FN 12-20, 26, 167-69 200, 219, 116 pledge 29; actually has Notes on Matters aff [exagg on decline of death rate, wrong on germ theory and silly on FN deference to doctors] 29-30 pledge by Lystra E. Gretter, supt of school at Harper Hosp (formerly Farand Tr Sch) Detroit, 1893: I solemnly pledge myself before God and in the presence of this assembly: to pass my life in purity and to practice my profession faithfully; I will abstain from whatever is deleterious and mischievous and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession and will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling.
With loyalty will I endeavour to aid the physician in his work and devote myself to the welfare of those committed to my care. Has chronology.

12 The Influence of Florence Nightingale called the founder of modern nursing; [good coverage] however Seacole: "One nurse who was not accepted was Mary Grant Seacole, 15: who had nursed British soldiers in Jamaica; [implies was not accepted in original 38 nurses]; describes problem with doctors and FN waiting. “Her overt deference to physicians was probably the beginning of the doctor-nurse game” (hardly, good grief]. “She cleaned up the hospital...vermin were brought under some control. Before the end of the war, the mortality rate at Scutari declined to 1 percent.” when hosp care improved began program of social welfare, got sick pay for. But mil doctors resented her and dissension among nurses. “High-handed at times” 17: FN credited with being "the first nurse researcher" for Matters afffecting. Notes on N “intended for the average housewife” amazingly readable today, and Notes on H; she was consulted widely after Cr War; Nightingale Nurse. Demand overwhelming; 19 maintaining standards; conflict with nurses trained for leadership, reg; 20: “Until the end of her life, she was firm on the need for nurses to obey physicians in medical matters” but stressed obs and reporting, and nurse in charge. Cited Seymer on. Health Missioner. 26: 3 schools est in 1873 supposedly based on N model, Bellevue, Connecticut Tr School, Boston 167: Major Nursing Theories, not until 1950 a proliferation of nursing concepts and theories, altho FN identified a body of kn specific to the nursing of her time. Has a table with FN concepts and others:

FN adaptation, env 1859. Disease is a reparative process; rejected germ theory [good grief]; inbalance between patient and their physical environment frustrates energy conservation and decreases the capacity for health. env/sanitation [wrong on germ theory] 219: the 100-Year Debate, how nurses shd be educated, “entry into practice” apprenticeship, first baccalaureate program was 1909, added liberal arts [a good book, treats FN as a theorist, with others, but wrong on a few points]


“would not only influence the fate of sick and wounded soldiers during the war, but would also change the course of mil medicine for ever.” Pirogov set out for Cr 10 November 1854 with 2 doctors and an assist, arrived soon after FN with 38; FN, Russians, French vivandière, FN and Pirogov set off Nov 10 with 2 doctors and a med asst; arrived in Sebastopol shortly after FN had disembarked with 38 nurses; 
82: cites FN letter to SH; domestic mgt; purveyor problems 
84: San Commission really doing something has set to work burying dead dogs, etc. JS rel YES; chloroform used 
85: Allies saw Turks as filthy 
87: cites Margaret Goodman, Mrs Lawfield; 
89: Mary Seacole “widowed West Indian ‘doctress’ who had got to know and earn the respect of some of the British regiments, including high ranking officers like Sir John Campbell from [no evidence] treating many of their ailments in Jamaica. When she read of the outbreak of war in the Crimea she paid her way to London only to be turned down by the mission. NO 

Her experience was similar to that of other black women who applied for posts as nurses in the Crimean War. A certain Miss Belgrave was rejected because a West Indian…. Elizabeth Purcell 52, too old and black; Seacole to Scutari interesting, except usual mistakes about Seacole; apparently says FN did not believe flushing the sewers a good idea (D Stanley cites on) 

King, Anthony. “Hospital Planning: Revised Thoughts on the Origin of the Pavilion Principle in England.” Medical History 10 (1966):360-73, argues that articles in the Builder attributed to FN are by Roberton; article says Scottish bn surgeon, educ, at Manchester Lying-in Hosp, surgeon in 1827, pub papers on midwifery, Manchester Stat Society papers, key paper 20 March 1856 “On the Defects, with reference to the Plan of Construction and Ventilation, of most of our Hospitals for the reception of the Sick and wounded” Transactions of the Manchester Statistical Society 1855-56:133-48, then same source 1857-58:23. FN said to have used in her Notes on Hospitals; plan of Bordeaux Hosp; Netley critique; BMJ said Netley would kill more patients than would ever cure; Godwin for pavilion system; but Netley all wards will communicate with one common corridor which will serve as a pipe to conduct the contaminated atmosphere of one ward to the comparatively pure air of its neighbour. Preston example, Blackburn Infirmary 1858, but first pavilion hosp actually to be built was Herbert Military Hosp in Woolwich; K.D. Young, On the Evolution of Hospital Design 1910. Roberton quoted FN in Transactions of the Manchester Statistical Society 1857-58 c33-40; Builder 24 July 1858; Cook says defeat of Netley change moved FN to do papers for Social Sc Congress at Liverpool Oct 1858; FN assisted Godwin in an argumentative corr with Greenhow on
contagion, and lent her support to Builder in campaign to move St T to a rural site; 361: not to minimize FN’s part, but qualify, other parties were actively engaged and were successful in bringing about changes in English hospitals prior to FN’s influence, her Notes on Hospitals strongly influenced by Roberton (did she not acknowledge) “and that three articles, previously attributed to her, are in fact his.” and Godwin did much. Builder founded in 1842 by Hansom, Godwin took over editorial chair in 1844, kept until 1883; Godwin regular attender at meetings of Nat Assoc for Prom of Soc Sc, in 1857 to its demise in 1883.

King’s College London. Web. Dickens, Rogers and Miss Nightingale. Rogers Founded 2 associations, Metro Poor Law Medical Officers’ Assoc in 1856; then Assoc for the Impr of Wkh Inf, in 1866, launched at a big public meeting; Dickens sent donation, Rogers read his letter; a dedicated pressure group, began with metro focus and then spread nationwide; Lancet Sanitary Commission 1865-66 shifted opinion; at Strand, found 556 people shared 332 beds; no washing facilities;

Kinglake, Alexander William. The Invasion of the Crimea: Its Origin and an Account of its Progress down to the Death of Lord Raglan. Edinburgh: Wm. Blackwood & Sons 1901 cheaper edition vol 7: tribute to by Hibbert. No Seacole in index; 370: opposition of George Brown to FN; 362: Stanley quoted. What do you wish us to do: ack Koulali (Kullali” “that fated hospital at Kullali in which, as we saw, at one time a fearful mortality raged” Kinglake 97:362). 362: “that pest-stricken hospital of Kullali“ men saved “with ceaseless devotion and energy” long gentle watchfulness when [ ] almost despaired, no statistics of course can show, or record the alleviation of misery effected by such care; 365: praise for them also at Balaclava 372: quotes FN from Matters aff; makes FN out to be a miracle worker, Times Fund etc. 366-93 has a lot on FN, adulation, the “lady-chief” odd analysis of the men and her. Positive on Mary Stanley. 7: chapter 11. On the hosps. No mention of Seacole in index. FN, need for discipline. Lady-in-chief, 366: armed with the special experience needed, but also was clearly transcendent in that subtle quality which gives to one human being a power of command over others. Of slender, delicate, firm, engaging, highly-bred and in council a rapt careful listener...though gently, persuasive whenever speaking herself” 367: “But with all the rare attributes that made her gracious presence a blessing at the patients bedside, this gifted woman, when learning how best to compass the objects of a largely extended benevolence, had become well practised, well versed, in the business of hosp mgt, and knew better than she did that, if
Kind devoted attention will suffice to comfort one sufferer, or even perhaps four or five, it is powerless to benefit those who number by thousands, unless reinforced by method, by organisation, by disciple. She knew that for affording due care to a prostrate soldiery, laid out before her in ranks so appallingly long as to bear being reckoned in miles, an administrative mechanism, both impelled and controlled by authority, was a condition of absolute need.” knew value of rules

368: support of SH, Raglan corr;
370: Burgoyne unfavourable end note 21; G Brown listened;
371: had “commanding genius” cites endnote 23; cites her confid report on orderlies; 373: growth of her dominion rapid; 374: McGrigor had zeal and ability, but “omitted to lay hold, dictatorially of that commanding authority” fallen into abeyance; “The will of the males was always to go on performing their accustomed duty industriously, steadily, faithfully, each labouring to the utmost, and if need be even to death....in that groove-going ‘state of life to which it had pleased God to call him.’ The will of the woman....” 376: Times fund; Macdonald
379: Macdonald learned truth from lady in chief, bought things needed; 380: wears gentle attire of “the servitress”; support of public, Lady Stratford; Percy, Stafford; 383: Raglan replace Sillery with Wm Paulet; 385: FN “Eve-like” “her first care was--Eve-like--to dare to know, and--still Eve-like--to force dreaded knowledge on the faltering lord of creation. Then declaring against acquiescence in horror and misery which firmness and toil might remove, she waged her ceaseless war against custom and sloth, gaining every day on the enemy, and achieving, as we saw, in December what to eyes less intent than her own upon actual saving of life, and 386: actual restoration of health, seemed already the highest excellence.” Commission sent; “our male rulers ordered their tortoise to gallop as fast as it could.”
383: Sillery replaced 23 Nov 1854 by Paulet; Sebastopol Com reported gradual improvement in hosps from when assumed command; 366: commissions sent out, lampoons;
388: SH and letters from FN; told commissions to correct evils as far as poss themselves; 389: but wd take 3-4 months to effect. made report at Scutari 23 Feb
390: science then interposed; 391: credits San Commission and Sutherland, Gavin, Rawlinson; rates went down
391: san comm, w/o losing a day; made fast progress; gives stats of declining deaths
392: rates further declined to level of military hosps at home

Kirby, Stephanie. “Reciprocal Rewards: British Poor Law Nursing and the Campaign for State Registration.” IHNJ 7,2:4-13. Only brief ref to FN.

letters, coverage fair, Smith exonerated 284: “far from being lacking in foresight and energy, had actually anticipated practically every difficulty that was likely to arise, and had made ample provision for it. That his instructions and requisitions were often delayed, and sometimes even not carried out, was no fault of his”; Smith apptd Hall; 285: only got official instr from WO to prepare for exped force, to be ready to proceed further East if war be declared, for 10,000, to Malta; 286: Smith wrote Hall 22 Feb 1854 to leave India to join Lord Raglan’s army; 87: Hall sailed from Bombay 10 May 1854, to Const 17 June, then to Bulgaria; 288: when Raglan told him to go to Turkey Smith got permission to write Airey, mil sec, re diseases, to get info on complaints and localities: for severe remittent and intermittent fevers, malignant dysentery, a fatal form of typhus fever, sent 3; 27 Feb 1854 Smith sent Scots Dumbreck, Linton and Mitchell 27 Feb 1854 with instr; 310: David Greig, young asst surgeon, instructed by A. Smith to go to Marseilles and embark for Turkey on Vectis; perhaps to get info on FN? And need of medical assistance? 307: re Forester

Kirby, contd
311: Smith told Sebastopol com, yes “if good nurses cd be obtained” and added a woman “there might be a spot upon a sheet that a medical officer wd not notice and a woman wd at once”; Maxwell and Cumming arrived same time, but Dr Spence on Prince with medical stores, cd not be got at, under ammunition for Crimea, so he went with it, wrecked in hurricane, he died and supplies with him; Hall got KCB Feb 1855; Dumbreck CB; Smith hon doct Dublin, in 1857 FRS; calls FN “Florence” in places (309, 327), no men; 327: Smith member of royal com, only one not in FN camp; 328: both FN and Smith wrote med history of the Cr War, “but whereas the former contented herself with devoting the first six sections of her “Notes to this subject, the latter eventually produced two vast volumes in which every details was set forth.” Medical and Surgical History of the British Army which served in Turkey and the Crimea. 2 vols. London 1858. Precis or Descriptive Index of all Letters bearing on Matters relating to the Army. 2 vols. London 1858; Smith resigned May 1858; 296: Lt Col Edward Napier had urged drastic changes in clothing for men in Med and tropics, but leather stock contd; 296: 2 May 1854 reply from Yorke denying more clothing, blankets etc to Smith, submitted to Hardinge, can’t carry weight; 307: 11 Oct 1854 Lady Maria Forester got in touch with FN “with a view to sending a party of trained nurses out to the East”

FN 207 223 22830 231 258 241-257- did tobacco research; Veronica Strong Boag thanked; midwifery 90-91


Kopf, Edwin W. "Florence Nightingale as Statistician.” Publications of the American Statistical Association 15 (1916-17):388-404. Kopf (1888-) chief clerk, Statistical Bureau, Metro Life p389 cited that FN improved medical recording system and kept detailed statistics (Kopf 1916: 389) found deaths not recorded accurately. “None of the statistical records were kept in uniform manner. She was able to introduce an orderly plan of recording the principal sickness and mortality data of the military hospital establishments which came within the sphere of her influence.” [no source cited, wrong] 390: FN had ardent desire to remedy scandalous neglect of sanitary precautions in the army; “her study of the available data convinced her that the greater number of deaths in hospitals need not have occurred at all. During the first seven months of the Crimean campaign, a mortality of 60 percent per annum from disease alone occurred, a rate of mortality which exceeded even that of the Great Plague in London, and a higher rate than the case mortality of cholera. [no ref, wrong] Miss Nightingale’s vigorous use of these facts resulted in a series of reforms, which in turn reduced this terrible rate of mortality. She observed, also, that if sanitary neglect prevailed in the Army afield, it probably affected the Army at home in considerable degree likewise. She compared the mortality in civil life with the mortality in army barracks. ....” Salisbury Plain quote. Then Chatham. [gives quotations, no ref, uses Matters aff later, but misunderstands process] “Health, Efficiency and Hospital Admin of the Br Army” 391: RC, her Notes on Matters affecting, at private expense, circulated 392: pioneer in graphic illustration of stats; Stat Dept founded, com of SH, Tulloch and Farr 393: pub First Annual statistical Report on the Health of the Army in March 1861. Balfour, Hosp construction [so, exagg claim goes back to Kopf] 395: copy of FN letter Jan 30 1875 to corr sec of Am Stat Assoc, ackn made hon member; reprinted in Public Health Nurse 1927

Kosky, Jules. Mutual Friends: Charles Dickens and Great Ormond Street Children’s Hospital. London: Weidenfeld & Nicolson 1989. has Charles West, 1854 pub anon How to Nurse Sick Children: Especially as Help to the Nurses at the Hospital for Sick Children. anticipated FN’s Notes on Nursing. 59: FN said to have repeated some of Armstrong’s argument, George A. opened 1st ch’s clinic, Dispensary 1769; criticized: “She dismissed children’s
wards in hospitals as making a demand for an excessive number of nurses” then quotes her, where mixed, adults often become child’s best protector and nurse, 60, but gives no source: “with that curious distortion of logic and attribution of false motivation which was so often a fatal flaw in that strong-minded woman, she casts scorn upon deducing the need for a children’s hospital from an excessive child mortality rate.” then cites, again no source that defective household hygiene the source for high child mortality; Charles West had to fight against; book has lots on Bence Jones, also Ada Lovelace; “Florence” and “Ada”; SH (spelt Sydney) a support of Gt Ormond St; infl of FN in 1862 at Gt Ormond St.; West influenced FN, “even if it was not openly acknowledged”; some of her close circle involved, Lord Ellesmere, Jas Clark and Bence Jones [but FN involved with two of them closely always, and Ellesmere scarcely involved]; 200: FN said to have written Charles West in 1877, “that after 20 years we shall be put on our trial again as to the training of nurses....I own to much apprehension as to their results, unless, as I trust, good men and true like yourself will try to guide them” no source given; Dickens raised money for, Burdett Coutts supported.

Krebs-Japy, Dr, trans. Principal chapters of. Florence Nightingale: sa vie et son oeuvre. Paris: A. Poinat 1932. (also Paris: Bibliothèque de l’infirmière 1932). ILL Montreal. préface Mlle L. Chaptal. trans Edouard Krebs. for Notes sur le Soin des Malades. Yvonne Japy was a nurse, then took medicine, interne la Maison-Ecole de la rue Vercintétorix, stagiaire a l’hôpital Boucicaut and Enfants Malades, 1909 sought reform, in 1922 effected, ref to Pasteur, sur l’existence de l’infiniment petit, FN notes que des miasmes contagieux. intro by Yvonne Krebs-Japy, “Sa vie et son oeuvre” 9-58, then trad of Notes ch 1 Précautions de savoir-faire 59 (chap 3); de la diversité 71 (variety chap 5), espoirs et conseils de bavards 80 (chattering chap 12), de l’observation des malades 98 (chap 13), conclusion 125, 5 chaps only, abridged, and omits some ftnotes: has SH as Sir Sidney 17; and Harrington is Harrington (35) as under sec for war; good on FN influence in France: Bordeaux, and adapted to Reims 1920, Nantes et Avignon 1923 (54); M Mesureur, dir d l’”Assistance publique de Paris a officiellement reconnu que l’heureuse fondation de l’Ecole de la Salpêtrière (de L’Assistance publique) était due à l’exemple donné par L’Ecole d’assistance aux malades de la rue Amyot et la Maison-Ecole d’infirmières privées de la rue Vercingétorix (55); cites FN in réforme française; special vocation, 3 motifs, motif naturel, amour des soins a donner aux malades, effort perpétuel pour réaliser la perfection de ces soins, religieux--idéal, reform by Dr Ourneville laïcisation.

corr over 20 years, (references not great); uses Rosenberg 63: her stats show improving san conditions in hosps, vent etc. would decrease hospital and civilian morbidity and mortality. “Since the reforms which Nightingale advocated were to a high degrees correlated with limiting the dispersal of microorganisms, it is a much debated question why Nightingale did not concede more formally that tat some point some illnesses must be because of water or airborne organisms. Rosenberg (1992) reported that Nightingale could not attribute disease.... Social order. Cites Porter that microorganisms discovered at rate of one per year. 64: restricted by isolation 64: “Nightingale’s resistance to accepting the theory of contagion and her tendency to work at stats and writing in the background, while urging others in public forums to advocate for nursing and hospital reforms, made her a formidable power in promoting organized nursing and the standardization of stats on med outcomes.”

Kuhn, Annette, and Wolpe, Annmarie, eds. Feminism and Materialism: Women and Modes of Production, London: Routledge & Kegan Paul 1978, repr 2012. 2014 pb Cites WS 116: “In her writings, Florence Nightingale frequently reiterated the equation good woman equals good nurse. She put it forward as a central criterion for selecting applicants, training future nurses, establishing professional relations with patients and.... Chapter 5. Eva Gamarnikow. Sexual Division of Labour: The Case of Nursing. 96-123 115: Eva Gamarnikow. FN “You are here to be trained for Nurses--attendants on the wants of the Sick, helpers in carrying out Doctors’ orders.”...” good woman, shd be thorough, 117: “The dev of the ideological identification-- ‘good woman = good nurse’ was evidently closely related to the use of the family as a symbol for nurse-doctor relations. The emphasis on femininity as a set of virtues and femininity seen in terms of motherhood and domestic labour....” Gamarnkow LSE! 114: “Nursing was set up and defined as women’s work, and a good nurse was seen as primarily a good woman. This ‘deprofessionalized’ the relations between nursing and medicine.” AS IF EVER WERE Professional! 98: good nurse seen in profession as identical with characteristics desirable in a good woman. NOT Quite 116: FN frequently reiterated the equation good woman equals good nurse. Also cites FN 1882, p 2; nature cures, not doctors; okay chapter 120: “This process began at the same time as the ideological shift occurred in the definition of a good nurse, moving from good woman - good nurse to nurse = mother = housewife. There appeared to be a contradicting between nursing aspirations and material changes in the nursing labour process.”
Refs: Abel Smith, Engels, Gilman, Jameson, Marx, WS, FN ref to LSE! Inst of Kai, PL paper, 1881 address, Quain, NonN;

La Torre, A., Lusignani, M. “Florence Nightingale and the Risorigimento: Her Way of Thinking Through her Correspondence 1837-1872.” Prof Inferm 65,1 (Jan-Mar 2012):4-10 abstract only, loved Italy, knowledge of language and ancient Roman culture; advocate for universal human rights.


1: rise of hospitals (good coverage)
3: puerperal fever
3-5 excellent coverage of Semmelweis.
5: “Florence Nightingale and William Farr”; tables from Notes on Hospitals
8: Lister and Antisepsis: Lister trained In London, then to Edinburgh to work with Syme, then considered one of the finest surgeons in Br Isles, 9: married his da. And stayed 25 years; 1860 to Glasgow, Pasteur studies, reasoned; German surgeons accepted Lister’s methods, then antisepsis to asepsis; 9: gloves, Halstead at Johns Hopkins got Goodyear Rubber to make 2 pairs of rubber gloves, 1889;


Laguna Honda Hospital. Modern statue of FN by Swedish sculptor David Edstrom, San Francisco. 1920s architecture, but est 1866 as almshouse for God Rush pioneers; “The stylized statue portraying feminist and nursing pioneer Florence Nightingale is beautifully designed by Swedish sculptor David Edstrom” gift to hosp 1939.

Lambert, Andrew and Stephen Badsey. The War Correspondents: The Crimean War. Stroud: Alan Sutton 1994. 335 pp. Has appendix of dispatches. 2-15, 85-6, 166; 15: At the beginning of May the army moved up to Scutari, on the Asiatic shore of the Bosphorus, opposite Constantinople, where they were invited to occupy he vermin-infested Turkish barracks that would bet he scene of Florence Nightingale’s heroic efforts.
85: (has numbers wrong and Harley St.) 85 nurses 86: has pic of carriage at seat of war, arrival 2 hosp held over 8000 sick and wounded, which rose to 14,000 by Feb 1855.
in Cr campaign Br Army lost 19,584 officers and men, only 3754 in battle, the remainder of disease or later wounds; 86: “How much impact Florence Nightingale and her nurses had on these figures is doubtful. Historians have been rather less kind to her than she was to herself, seeing her as a self-publicist with little understanding of the everyday harshness and cruelty of warfare who, through her connections with London society, took the credit for improvements in transport, supplies and care of the sick which were already being put in hand.” Good grief. Then says in 2nd winter Fr envious of Br. Pic on p 165; so, no use of her docs. And rude remarks; no Seacole in; no Small; 166: pic in hosp. (So, negative to FN but does not use “higher death rate” statement)

Lambert, Royston James. *Sir John Simon 1816-1904 and English Social Administration*. London: MacGibbon & Kee 1963. Notes in med; considerable coverage of Nightingale’s negative views of Simon, but fails to mention Simon’s keenness for some kind of reconciliation late in life—his farewell letter and tribute to her is touching. (Lambert obit founded Social Research Unit at King’s College Cambridge, distinguished King’s scholar (1932-82), Dartington Hall School utopian;


Lamorna, [Georgina Franklin], “Some Personal Reflections of Miss Florence Nightingale.” *Nursing Mirror and Midwives’ Journal* (3 Sept. 1910):347-49, includes letters re her going out as plague nurse to India, and on not being a special, paying probationer so not eligible to be ward sister.


*Lancet* “Medical News” (January 1864):24 FN continues in delicate health. Dr Foote, of Constantinople, FN will have suitable women trained at expense of her fund, to serve in Constantinople.

61: FN praised Chorlton design; St George’s Fulham Road, by Saxon Snell, followed Chorlton design, it held the largest number of patients, 808 in the metropolis
125: FN influence on midwifery training
128: Winterton letter to FN 1889
127: 2nd Earl Granville opposed N Fund, “Lady Pam” thinks it great humbug, nurses good, if drink. Chap 5, chief influence on nursing was FN, altho only a modest connection;
130: Jane Shaw Stewart 1854 asked for entry, got, thanked, Westminster required secular dress only, frustrated efforts of East Grinstead sister superior who wanted members to learn nursing; 131: Miss Mary Tattersall in hosp minutes, FN letter on, she sent £5 to hosp, considered St John’s House, but; ladies’ committee, Augusta Stanley; med school opened Caxton St 1885, new outpatient dept and new chapel 1886, new ch’s ward 1887; matrons incl Elizabeth Merryweather 1873-80; MJ Pyne 1880-98, MH Cave 1898-1913; chap 8, bldg, 5 over time, problems of WCs and drains, erysipelas, reformation in 1877, Stephen Salter architect, improvements, infl of Augusta Stanley, nurses’ home; pic at front looks like a pavilion style; 1923 hospital closed

Langdon-Davies, John, ed. *The Crimean War*. London: Jackdaw No. 11. DK 214 C3. A French general said, of the charge of the light brigade, “C’est magnifique, mais ce n’est pas la guerre.”

Langton, Charles hon sec, then chair of institution for district nursing Liverpool, got same superintendence and home as inf nurses Rathbone District 33


114: compliment to her compared to ordained Anglicans, restrained by clerical subscription and ministerial propriety plus 234: Josephine Butler, CDA
124: FN an “ethological liberal rather than a religious sceptic” had clear, unwavering, lifelong religious convictions
135: FB Smith wrong that she was unbiblical “her religiosity not orthodox, let alone conventional”
132: “Her comments were informed by the latest theories in German criticism. She repeatedly refers to the work of a contemporary who was a leading Old T scholar, Heinrich Ewald.”
296: “Even Florence Nightingale who denied that the Bible was a uniquely inspired book, criticized its contents as sometimes
wrongheaded and erroneous, and as an independent, single woman was quite free to dispense with such devotions if she wished - faithfully and fervently read the Scriptures as part of her daily routine.

Larson, Janet E. “Nightingale Discourse and “Author-ity.” Authorship 1,2 (spring/summer 2012). Essay on the “Spiritual School of Nightingale” production, “which construct Nightingale as a deeply spiritual author and inspirational role model by reading her writings as proofs of the ‘faith’... rather than as textual evidences that require nonpartisan sifting.” taking over Nightingale studies, has revived interest in her work “Despite the value of these efforts, especially the recently-arrived Collected Works, taking her equivocal writing about ‘faith’ on faith of their own is problematic because it generally forecloses probing more deeply into what else these expressions might have meant or been intended to signify.” abstract only. Get. Larson is assoc English, Rutgers


Leadbeater, Rosemary Smith-. “Florence Nightingale: Nursing, Lifestyle and Her Influence on and Inter-relationships with Women.” Historia Medicinae 1,1 Author Oxford Brookes MA; submitted 2009; cites FBS WS, Wellcome, Hugh Small; Baly As Miss N said; (Hugh Small is G Small) student-run peer-reviewed journal cites FBS on fake illness “having established Nightingale’s dominance over nurses and her business associates for a period of up to forty years, it is revealing to explore more closely Nightingale’s interactions with the women closest to her..” Mother and sister

Leas, Allan. Nightingale Power. play. Cambden 1990. FN Mus 0966

Lee, Geraldine; Clark, Alexander M.; Thompson, David R. Editorial. “Florence Nightingale--Never More Relevant than Today.” Journal of Advanced Nursing (2013) 69 245-46. David R. Thompson PHD RN FRCN Univ of Queensland, Univ of Leicester davidthomson@cuhk.edu.hk or drt@le.ac.uk Alexander M Clark UofA PhD RN assoc dean (research) and prof alex.clark@ualberta.ca 780 492-6765

Lee, Eleanor. “A Florence Nightingale Collection.” American Journal of Nursing 38,5 (May 1938):-555-61. Online, on what is at
Columbia, discussion of. Auchincloss collection


114: Secretary at war Sir Sidney Herbert asked FN to take control of the nursing at Scutari, took mostly members of religious orders, doctors at first opposed, persisted, made enormous changes, “The windows were opened and fresh air allowed to circulate through the wards.” no facilities, no plumbing, no kitchens... “Through persistence and continuous care she reduced the death rate among the soldiers in Scutari hospital from 42 percent to 2 per cent.” [exagg] Punch pics and poem. 115: best work yet to come, prepared reports (omits Cr War docs) NonH and NonN both 1859.

116: after war “On her return to England from the Crimean War, she raised around £50,000 which was used to set up the Nightingale school of nursing” influenced to throughout country. “Every major hospital proceeded to set up a tr school and to use her ideas” [hardly] 117: professionalisation of nursing, improvement in record keeping, design of hospitals, pavilion, effect abroad

119: inspired by E Fry....


Manchester Institution set up. Jan 1865 4 young ladies went to London from Manchester to do probationer tr at St T and KCH, sponsored by N Fund


Lefroy, John Henry, *Autobiography of General Sir John Henry Lefroy,* ed. Lady Lefroy. Cornwall, priv pr c1895; did report on tents by 1860, ref 5479, but his letters to FN not available except Cr War period, early. Lady Lefroy, *Autobiography of General Sir John Henry Lefroy, C.B., K.C.M.G., F.R.S., etc.* private pub. 1895. Written by Lefroy 1886-89. No index. Royal Artillery. 130: in Cr War for duke of Newcastle; 131: 6 June 1855 entire admin of army placed on new basis, by OIC; Bd of Ordnance abolished by revoking letters patent; 132: HG placed under war min; fin duties of sec at war to sec of state; his office unchanged; 13: took General Todleben around Arsenal in 1864; Panmure; 136 reducing hosps; mission to Const 1855-56; 141: to Smyrna, Civil Hospitals, Miss leMesurier in charge; Storks considered RC nurses moral and useless; Prot nurses immoral but useful; “He and Miss Nightingale were both of opinion that no unpaid services should be accepted.” 144: Nov 12 went round BH
with Linton and Mayer, after with Storks and Gordon RE to Gen Hosp, left card for Mrs Moore; 146: Nov 18 1855 at Gen Hosp service, 3 nurses, 4 patients, 1 orderly and he; hosp under Dr Lawson; his system worked ill, much friction and jealousy; wanted 1 doc to 40 patients, rarely allows separate cooking by ladies or nurses; 147: the ladies can only give what is on the diet roll, Lawson had no difficulty with them, but did not think very highly of their services, considered orderlies as good, cd not agree; system broken down in winter of 1854-55; “In 1854 the ventilation was bad and cubic space only 750 feet per bed. In 1885-86 (sic) vent....” He had tried all sorts of treatments for cholera. Nothing seemed to have much effect.” Nov 20 went round hosp with Drs Sutherland and Linton, saw Soyer’s kitchen; 147: Renkioi to Civil Hosp, Parkes, one of the ablest; 161: “I had a long conversation with Miss Nightingale on December 6th; she remarked forcibly on the want of men at the head of the army, capable of appreciating the value of moral influences. ‘If the officers would but exert themselves, much might be done.’” Lefroy said many in Artillery disposed, she agreed and added, the Guards and 39th; he added the Rifles; agreed as to want of greater facilities for remitting money home; he suggested postal cheques; she thought one nurse to 300 beds quite enough, only to look after the more serious cases and to do a little extra cooking; Dr -- had allowed 13 Irish nurses to est themselves in the Gen Hosp at Balaclava where only 200 sick; But he was taken in, had only expected 3 or 4 (aha! Hall); 160: had pleasure of meeting FN soon after landing, had been for 13 months nominal head of the entire female staff, recently returned from the front, but her real influence was very far short of absolute authority; “I found her a young-looking person, tall and slight, her face full, with a good deal of colour, complexion very good; hair, dark brown, cut very short in front and brushed back. She wore a little closely fitting cap; her forehead was not high but broad, increasing in breadth upwards; eyes rather small than the contrary, the upper lids full. I called it a mathematical eye, and as she had actually studied mathematics under no less an eminent a teacher than Professor Sylvester, she had probably had acquired the introspective, meditative look which musicians and mathematicians often wear. Her expression was agreeable, her features very mobile, her countenance lighted up in conversation. She was sometimes hasty, but always came round to reason. Her manner was a little stiff at first, but we became excellent friends and I warmly sympathised with her in many of her trials, and was able to render her assistance.”; 162: FN had a poor opinion of nuns as nurses. They were very wasteful and unmanageable.... x x These Irish nurses were not of a good class socially, or well-affected to the govt. They were very troublesome in their resistance to lay control and she wished to get rid of half of them.” 163: Dec 13 1855, had interesting conversation with FN, said queen intended to send her the decoration of the garter; difficulties
and vexations of her position immense. “I was able on my return
to got Lord Panmure to make it clear. Down to this time there
were ambiguities which enabled first one female faction,
then another to resist her authority. Some of the women were
quite improper people to be employed at all; one lady, well
connected and enjoying the support of -- was convicted of
embezzling public property to a considerable amount.; 172: 165:
chief RC ladies were Mrs Bridgeman Kinsale Miss Stanley pervert,
Miss Salisbury vert and pervert and Miss Winifred Wyse, niece of
HM min at Athens; Miss Weare at Monastery Gen Hosp, 72 patients;
met Col Percy Herbert; ophthalmia frequent; Dr Hall felt obloquy
of press, had had no official notice army to winter in the Crimea
last year, had protested about leaving hosp transport behind;
contended for rest of chief hosps at Karani and was refused;
waste of hosp comforts; 181: no class of army stores supplied in
more lavish excess in 1855 than medical stores; A Smith seemed to
lose all sense of proportion, going from the extreme of
niggardliness to prodigality; found 84 lbs of morphia, used in
small quantities; 183: Jan 9 1856, with FN, then rode to cavalry
camp and lighthouse; re Dr Barry,

Leighton, Margaret. *The Story of Florence Nightingale.*
Illustrated by Corinee Boyd Dillon. New York: Grosset & Dunlap
1952.

-- *The True Book about Florence Nightingale.* London: Frederick
Muller 1954. Pop book for children, cartoon illustrations

Leininger, Madeleine. “Reflections on Nightingale with a focus on
Human Care Theory and Leadership.” In *Notes on Nursing: What It
self leader in transcultural nursing, ontological, 29: contrasts
FN’s with her own caring theory; care the essence of nursing [she
thinks she discovered this in the 1960s!] 30: “Interestingly,
Nightingale never defined human care or caring in *Notes on
Nursing,* but she made inference about treating the sick in the
hospital environment.” never defined key terms. But spoke of
“laws of health” identified 5 essential points: pure air, pure
water, efficient drainage, cleanliness and light. “Put the
patient” in profound for the time; 32: precise, direct, reflect
her culture [yes] 32: Nightingale “neither discussed nor
considered culture care factors related to nursing.” [sees as
developed since her time, but did not use later FN writing]
35: comparison between Leininger’s cultural care theory and
Nightingale’s beliefs 37: both FN and her “bold risk takers
wiling to provide breakthroughs to improve and advance nursing
education, research and practice. We share the leadership
qualities of persevering over time to achieve current and future
goals, risk taking and believing that medicine and nursing are
two different but complimentary disciplines and professions.”
Leininger lived with headhunters in PNG


Lesser, Margaret. Clarkey: A Portrait in Letters of Mary Clarke Mohl (1793-1883) Letter of Mme Mohl to Mrs Reid: 1865: ...One time Florence Nightingale was so fond of me that no company was to her what mine was. She would walk with me for hours in the park and would comport herself as if she would give anything in the world that I should stay a few days longer. But when her all-absorbing pursuit came over her all this vanished. She still liked me, but did not want my company. How absurd I should have been had I not accepted this.” explained that she not “not the slightest taste for nursing--fact is, I mortally dislike it” Lesser 174


Leung, Gabriel M; Bacon-Shone, John. Hong Kong’s Health System: Reflections, Perspectives and Visions. Hong Kong University Press 2006. 547 pages
291: re quality of nursing: “If it took the Crimean War to revolutionise the discipline in the West, then surely SARS was the defining moment in Hong Kong’s evolution towards a new model of nursing practice.”
478: lit on measurement of success is substantial but ignored for decades. FN advocated measurement of the performance of hospitals in terms of whether patients were dead, relieved or unrelieved (FN 1863). She went on to argue that.... appeal fore adopting this or some uniform system of publishing stat record sof hospitals


Chapter 10 The Correspondence between Dr Ogle and Florence
Nightingale 51-57.
Extension 60: Henry Isaac Stevens, Fere Wing, architect;
Nightingale Wing
Chapter 12 63-69 The Nightingale Wing and Reconstructed Infirmary
122 has aerial photo, can see pavilions

Levine, M.E. The Conservation Principles: A Model for Health.” In

Levine, Myra Estrin. “Nightingale Redux.” In Notes on Nursing:
Barbara Stevens Barnum. Philadelphia: J.B. Lippincott, 1992 39-
43. Got severe training 50 years ago, legacy of Victorian
nursing; sanitation 40: her views at vigorous conflict with
contemporaries’ “Sanitation was the cause of all disease.
Nightingale has often been chided for refusing to believe the
germ theory. The problem was not what she failed to believe, but
what she insisted was a ‘received’ law of nature.” “Nightingale’s
discourse on sanitation was based on false theory, laden with
superstition and error. She stubbornly preached ‘atmospherics’
while scientific evidence of contagion was being gathered around
her.” [not quite, she did change, and she was not confined to
atmospherics; author gives no source.] 41: her views fit with
conservation theory; 41: liked, quoted, her views on patients,
observation of

Lewenson, Sandra Beth. Taking Charge: Nursing, Suffrage, and
Feminism in America, 1873-1920. New York: Garland 1993. the
modern nursing movement. FN okay on, but not helpful; positive
portrayal of the profession; timeline: 1872 New England Hosp for
Women offers a one-year tr prog for nurses; Linda Richards
becomes “America’s first tr nurse”; 1873 opening of first
Nightingale’s influenced tr schools: NY Tr School (later the
Bellevue Tr School; Conn Tr School at New Haven; Boston Tr Sch
for nurses at Mass Gen Hosp;...

Lewenson, Sandra and Herrmann, Eleanor Krohn. Capturing Nursing
History: A Guide to Historical Methods in Research. Springer
Publishing 2008. FN 7, 6, 110
Chapter 1 Why Do Historical Research?1-10 Lewenson and Eleanor
Krohn Herrmman. 7: ref to FN, teaching history in curriculum;
Josephine Dolan’s interest in FN kindled by “her father’s
relationship with Florence Nightingale”
Chapter 5 63- Sonya J. Grypma “Critical Issues in the Use of
Biographic Methods in Nursing History.” Cdn refs FN cites Cook,
in Regehr!!
Chapter 7 Reflections on Research Subjectivity and Identity in
Nursing History. Geertje Boschma, Sonya J Grypma and Florence
Melchior. 110: passing ref to FN her letters “may seem frozen in
time, but the questions being asked of them are ever changing.”
Lewis, Jane, ed., *Before the vote was won: arguments for and against women’s suffrage*. London: Routledge & Kegan Paul 1987. Millicent Garrett Fawcett cited FN in arguing against point “that women themselves do not wish for the Parliamentary suffrage,” that “Nearly all the distinguished women of the present time have wished for it and expressed their desire for it. Mrs Somerville, Miss Martineau, and Miss Florence Nightingale are the first three names that occur to me among the women who have made their names known in science, literature and philanthropy who have been from the outset of the movement cordial supporters of women’s suffrage.” p 394. Get article title


Lippman, Doris Troth. “Early Nursing Textbooks.” *Journal of Nursing History* 1,2 (April 1986)52-61: In 1878, only five years after the founding of the first three Nightingale schools of nursing in the United States, nurses...*A Manual of Nursing, Bellevue; A Handbook of Nursing for Family and General Use at Connecticut Tr School*; first was Clara Weeks-Shaw, *A Textbook of Nursing*, D. Appleton 1885. for student nurses, 58 prints.

Lipsey, Sally. “Mathematical Education in the Life of Florence
Nightingale.” Biographies of Women Mathematicians. from Newsletter of the Association for Women in Mathematics 23,4 (July/August 1993):11-12. tutor J.J. Sylvester, 1840


Livermore, Mary Ashton. My Story of the War--A Woman’s Narrative. Hartford CT: Greenwood 1889. Apparently says parallels in Civil War with what FN found. Author 1820-1905

possibly ref to “When Lincoln met Wisconsin’s Nightingale.” Cordelia Harvey p 127


Livingston, R.H. “They Comfort Me: The History of Nursing in Belfast.” Ulster Medical Journal 50,33 (1982):33-45. Consultant surgeon Royal Victoria Hospital. Opening address to students. Author died 1980. Nurses’ duties when hospital opened in 1817, “preparation of their own and the patients food, the carrying of coal from the store to the wards, together with attending to the needs of patients who were confined to bed. They also had to wash the ward floors and the steps of the hosp.” training not mentioned. Medical staff did dressings, leeches, cupping and blood letting themselves. A laundry (34). 35: campaign for better nursing FN, news reached Belfast by 1870, board members visiting King’s and Liverpool tr school, tr began. Miss Merryweather lady supt of Liv tr school invited to Belfast (36). 1872 matron given more resp. In Jan 1874 a long letter (37) recd from by Miss Ottway from FN, excerpts given. In 1874 the Society for Providing Nurses for the Sick Poor instituted, (37). Dr Whitlaw involvement at Belfast Royal Hosp; new Nurses Home and Tr School for Feb 1876. Then row over control, and hosp rules rewritten to give house surgeon power to dismiss any nurse, Ottway, hon sec resigned as a result, conciliation ((38). In 1876 Miss Notcutt from St T apptd. Visits by lord lt and Sir Charles Lanyon. Home provided matron to Downpatrick and to Derry Hospitals. First exam on completion of nurse tr introduced in 1890 (38).

New Royal Victoria Hosp built 1897, site given at nominal rent by countess of Shaftesbury. New hosp opened in 1903
Royal Victoria Hosp Belfast, landmark, completed 1906, first air conditioned public bldg in the world, designed by architects Henman and Cooper of Birmingham, special regard to advances in antiseptic treatment in surgery and successful applic of plenum ventilation. Forsaken “traditional pavilion-style hospital design” wards compactly side to side, long communal wards with large windows at ends; plenum ventilation, humidity control, temperature.

Lobo, Marie E. “Environmental Model: Florence Nightingale.” in Julia B. George, ed. Nursing Theories: The Base for Professional Nursing Practice. 5th ed. Upper Saddle River NJ: Prentice Hall 2002:43-60. 44: “Germany was the site of the first organized nursing school. NO In 1836 Pastor Theodor Fliedner...When Fliedner realized there was no work force for the hospital, he deigned a school of nursing. The physician for Fliedner’s hospital spent one hour a week teaching the nursing students. Gertrude Reichardt, the physician’s daughter, taught anatomy and physiology, although her only experience had been gained at her father’s side. Reichardt became the first matron of the Deaconess School of Nursing. Local peasant girls were taught hygiene, manners and ladylike behavior as well as how to read, write and calculate. There were no textbooks for nursing until 1837, when a German physician prepared a handbook.” also “Sir Sidney Herbert” (44); [no sources for these illus]; 48: Nightingale’s env model, houses, vent etc; diagrams 52-53; concl positive: 59: FN timeless, her 13 canons (vent, etc.,) differ in specifics of applc today but the underlying prs remain sound


Longmore, Thomas. Surgeon-General. The Sanitary Contrasts of the British and French Armies during the Crimean War. London: Griffin 1883. 31 pp. appendix has outbreaks of cholera in Br and Fr Armies, section of obs by FN. Longmore says Fr superiority, blames British lack of prep. (seen at RCN Edinburgh)


Lorentzon, Maria and Brown, Kevin. “Florence Nightingale as ‘Mentor of Matrons’” Correspondence with Rachel Williams at St Mary’s Hospital.” Journal of Nursing Management 11,4 (July 2003):266-74. Based on archival research; 272: table with mentor material; concludes “there are strong similarities between modern mentoring and the relationship
between Nightingale and her protégé Rachel Williams. In reality Florence Nightingale adhered to many of the modern precepts for good mentors.” main diff vocabulary and style of address;

Lorentzon, Maria; Brown, Kevin. “Florence Nightingale as ‘mentor of matrons’: Correspondence with Rachel Williams in St Mary’s Hospital.” J Nurs Manag. 11 (2003):266-274. cites BL letters
Conclusion: strong similarities between modern mentoring and the relationship between Nightingale and her protégé Rachel Williams. Adhered to many modern precepts for good mentors, main difference in vocabulary and style of address. Urging Williams to proceed slowly with reforms; from 1885 letters from FN addressed to Acting supt of Nurses, HM Nursing Service, Souakim Egypt; good paper


Luddy, Maria. Women and Philanthropy in Nineteenth-Century Ireland. Cambridge: Cambridge University Press 1995. Ref to Catriona Clear on function of convents in Irish society, but Luddy’s intention to focus on nuns as groups of philanthropic women bound by religious vows and to assess. Cites influence of clergy over the women’s decisions. 1800 120 nuns in Ireland, by 1851 1500 and by 1901 over 8000. By then nuns more than a quarter of the professional adult women workers in the census.

Luddy, Maria “‘Angels of Mercy’: Nuns as Workhouse Nurses, 1861-1898.” in Greta Jones and Elizabeth Malcolm, eds. Medicine, Disease and the State in Ireland, 1650-1940. Cork University Press 1999, 102-17; notes in Luddy

Ludwick, Ruth and Silva, Mary Cipriano. “Ethics: What Would You Do? Ethics and Infection Control.” Online Journal of Issues in Nursing (Nov 6 2006) 12,1 not working when sick, protecting patients and self for disease; monitoring re practices “Nurses have a long history of being advocates for patients. From writing books or letters about infection control (as first exemplified by Florence Nightingale) to discreetly correcting someone in an OR about an observed break in strict technique, advocacy has taken many forms.”

Chapter 3 History of Community Health and Public Health Nursing 69-110. Subchap “And then there was Nightingale” 79-86 By Karen Saucier Lundy and Kaye W. Bender. Wrong on Seacole; exagg on FN “Before Nightingale’s arrival and her radical and well-documented interventions based on sound public health principles, mortality rates for the Crimea War were estimated to range from 42 to 73%. [no ref] Nightingale is credited with reducing that rate to 2% within 6 months of her arrival at Scutari. She did so by conducting careful, scientific epidemiological research (Dietze & Lehozky, 1963). Upon arriving” ordered 200 scrubbing brushes. “The death rate fell dramatically once Nightingale discovered that the hospital was built literally over an open sewage lagoon.” (Andrews 2003) 81: “Although Nightingale never accepted germ theory, she demanded clean dressings…” 88: many people said she was “hypochondriacal” “Nightingale was rich and could take to her bed. Rumors have floated around among nursing students for years that she suffered from tertiary syphilis


M.M.H., “Florence Nightingale and the English Soldier.” The English Woman’s Journal 1,2 (1 April 1858):73-79. Lengthy quotes, table p 77 Relative mortality of the army at home and of the English male pop

M.S. [Mary Stanley] “Ten Days in the Crimea,” Macmillan’s Magazine 5 February 1862:301-11, reports on her visit 7 years after the war

Macalister, Charles J. The Origin and History of the Liverpool Royal Southern Hospital. Liverpool: W.B. Jones 1936. ILL George Henry Horsfall, pres 1864-90. new hosp opened 21 May 1872 by Prince Arthur, New Southern Hospital, Caryl St., foundation stone laid by earl of Derby 23 Oct 1867,
84: in 1858 surgical nurses placed under supervision of superior nurses resp to matron, first step to ward sister. plan went on until 1870, when lady deaconesses from an inst founded in Liverpool permitted to receive some training at fixed hours. 85: This led in 1872 to an entirely new system of nursing being started, i.e., when the new hospital was opened.” by experiment the Deaconess’ Inst in Chatham St undertook org of nursing for 6 months, improved. “A system of trained sisters and nurses” introduced in 1875.

86: In 1880 Royal Southern Hospital Nursing Inst est in a house in Grafton St for supplying private cases. New bldg, paid for, opened free from debt in 1891: telegram from FN: God speed the Nurses’ home, to be opened today, and all its dear nurses and probationer and matron and house sister; and God bless their quiet, steady and loving progress towards the best, year after year; and God guide their good president and committee and officers is the fervent prayer of Florence Nightingale London

almost no mention of nursing. no Merryweather. or Rathbone!
Matrons (p 91) Miss Blower 1881-83; Mary Gordon 1884-1902;

MacDermot, H.E. A History of the Montreal General Hospital. Montreal: Montreal General Hospital 1950. Has bit on Machin and nursing, also on the hosp: “Chapter 20 “The Hospital Outgrows its Buildings”, description from local paper in 1877 gives very bad account of the building. 78: only 1 bathroom for all the wards on male side of hosp, inconvenient location, inadequate; meals prepared for distribution on landing; smallness of wards, insufficiency of cubic inches to each bed, poverty of window room, scanty means for natural light, absurd attempts at artificial ventilation in large proportion of wards; total absence of anything that deserves the name of light in some passages, impost of admitting many essential conveniences because of lack of space; unwholesome condition of walls from age and porosity of material, impregnated with various miasmata; shocking accomm for violent, weak-minded patients in basement; report from Dr McClure, medical supt, in 1887:

79: “The visiting governors made frequent comments on the lack of ventilation.” lack of small wards to isolate noisy, delirious patients; 80: impossible to prevent vermin, bugs and cockroaches from infesting cracks in ward partitions. 80 ends: The nurses cannot be had because there is no room to accommodate them, their rooms being already overcrowded.” often 2 beds in one room, rooms cold and uncomfortable in winter, and can’t keep free from bugs in summer. “If we had good rooms I have no doubt many of the best young women of this country who find their way to American hospitals would stay at home for their training and thus the standard of nursing in this hospital would be raised.”

81: Chapter 21 surgical pavilions, in 1880 necessity for
enlarging or remodelling hosp acute. Lister’s discoveries introduced by Roddick, expanded surgical work and called for more accom, but no money; endowment fund est by Sir George Stephen (Lord Mount Stephen of CPR) in memory of Dr George W Campbell, and David Greenshields;

81: “An entirely new hospital building was then projected, and plans were submitted by a London architect for a rather ornate looking building. Advice on the plans was sought from Dr J.S. Billings of the U.S. Surgeon General’s office in Washington, one of the highest authorities in hosp constr of the day. The scheme was considered by the govs to the extent of arranging for a special appeal for extra funds from the public.” but heavy burden. In 1886 gifts of....for projected Royal Victoria Hosp, and project for amalgamation of 2, but govs decided vs amalgamation; Decision therefore to build 2 additional wings, for surgery, Campbell and Greenshields surgical pavilions, begun in 1890, finished [1894?] But lack of money to operate. 82: in 1894 central building remodelled and improved (the bad one); "The nurses had been given better, though still inadequate accommodation in an extra floor with a mansard roof build onto the central part. It was essential, however, to have a separate nurses’ home, and largely through the efforts of Mr Wolderstan Thomas... funds raised. “On 2 September 1897 the foundation stone was laid by Lord Lister, who was in Montreal at the time for a meeting of the Br Assoc.” he planted a ginko tree on Lagauchetière St side of hosp, still flourishing; Roddick chair of ceremony, but then chief surgeon at newly opened Royal Vic Hosp; New path bldg in 1894; Large 2 storey addition to east side of hosp decided on; new wing finished 1913, bringing number of beds to 400; cornerstone laid 6 June 1911 by Earl Grey, 90 years after first such ceremony; 83: Jubilee Nurses Home became quite inadequate for growing nurses’ school, so in 1926 present nurses’ residence on Dorchester St built;

85: Maxwell, published Struggles of a Pioneer paper read to NY State Nurses Assoc Oct 1920; was engaged as “lady trainer of nurses” in 1880, under Miss Rimmer, lady supt, but Maxwell resigned in 1881, no reasons given, but 85: funds taken to purchase champagne to be used in building up reserve forces of op patients, while ragged ticks of straw the only beds provided; laundry inadequate; hosp crowded, no div of services; patients mixed, pipe smoking next to suffering tuberculosis patient; urine and specimens examined in wards; lav utensils filled with sediment, odor; bedside notes unknown; Maxwell got nurses to take and later they were introduced; surgeons criticized our counting sponges in cases of abdominal section, later adopted after several lives lost from being left in wound;

86: nurses sleeping in cubicle build into an old ward, snow got in in storms, no sitting room, lack of women of “refined type to enter the school” so, a period with no definite tr of nurses; Rimmer resigned 1889; position advertised, Miss Nora Livingstone
NY Hosp Tr School applied, got 2 assistants at higher pay so cd devote all her time to training, began Feb 1890, tr school opened 1 April 1890;


MacDonnell, Freda. Miss Nightingale’s Young Ladies: The Story of Lucy Osburn and Sydney Hospital. Sydney: Angus & Robertson 1970. shooting of Prince Alfred only 1 month after arrival, nurses got publicity, letter printed with private info; love affairs and flirting, attack in legislature; Osburn high church, family turned her picture around; seen entering St Mary’s Church; Bible burning kerfuffle; board decided in January 1873, sisters to be called head nurses to avoid religious connotation (71); RC nurses at St T then cd not wear uniform of a sister, were known as charge nurse, because of RC decree its members cd not take part in prayers in an Anglican inst, and cd not read prayers (71); Barker gave evidence to the Royal Commiss held in 1873 (MacDonnell 74), “Florence Nightingale kept eight amanuenses hard at work” (82)!; royal commiss opened in 1873, bd of mgt and com; “It is the opinion of the Osburn family that probably many of Miss Osburn’s letters and those from Florence Nightingale were destroyed at a time when a great mass of documents and correspondence was burnt.” (101)


Mackowiak, Philip A. Post-Mortem: Solving History’s Great Medical Mysteries. American College of Physicians 2007, FN had bipolar disease (Small). A historical clinicopathological conference. “Bipolar personality disorder might well have had a role in sending Nightingale to the Crimea and helping her cope with its aftermath, but it cd not have produced the near fatal, relapsing,
febrile illness she contracted there." Typhoid, typhus and remittent fever were the most common fevers encountered by the British during the Crimean War (ft 23). “Crimean fever” was a generic diagnosis that covered a multitude of febrile disorders, of which brucellosis was one of the most important.” Brucellosis known by Hippocrates, but. Uses Hugh Small hypothesis (291). FN 277-82 and 285, 302 Mozart, FN. 13? Done for VA Maryland Health Care System 1995. Ack no diagnostic test; preface cites Alex Attewell. 286: figure 11-1 “by age eighty-two she required round-the-clock nursing care.” 287: claims that Nightingale herself believed that the spiteful attitude of her mother and sister toward her ruined her health. Small maintains that her real problem was; cites Hugh Small “Too Busy to be sick” Chapter 13

Maclean, W.C. “Miss Nightingale on Theories of Disease.” Lancet 96,2461 (29 October 1870):618-19. Critical vs FN on India (fair comment) cholera., part left out as follows: The Government has an inquiry instituted, and the first result is that there are no special cholera fungi in India; there is no ground water at all. Others state explicitly that cholera excreta are the special foci of cholera. But then we find cholera spreading in great intensity where cholera excreta are dealt with in conformity with this theory, and not spreading at all (as in the hospitals of Calcutta) where they have not been so dealt with. Another lays all the blame on cholera poison getting into water, unconscious apparently, that cholera has committed ravages where no such occurrence could possibly have taken place.” These,” next column: “to use Miss Nightingale’s words applied to cholera was “a dreadful, a too dreadful reality,” he, in fact, framed a “theory of disease.” No if Miss Nightingale be right, when Jenner proceeded to put his theory to the test of experiment he was worthy of reprobation for applying his “theory of disease” to a public health question, instead of leaving it to be dealt with by sanitary reformers in another age. In point of fact, he did the very thing now being attempted in India in the cholera


Macmillan’s Magazine. “In the early months of 1855, the British soldiers in the Crimea there died, of diseases alone--over and above those who were killed in battle or died of wounds--at the rate of sixty percent. Per annum; that is to say, as Miss Nightingale vividly puts it, at an annual rate greater than that of deaths in time of pestilence our of the sick. In the early months of 1856 (from January to May the rate of mortality had been reduced to 1.15
MacPherson, R.B. *Under the Red Crescent: or, Ambulance Adventures of the Russo-Turkish War of 1877-78*. London: Hamilton, Adams & Co. 1885; Bulgaria, lack of food, clothing, tents, medical care for Turkish Army in 1878

xiv: labour and hardships of surgeons, minor ailments all, xv:
32% suffered a major illness and 10% died

Red Crescent society
Kennet there for NAS and Stafford House Committee; paid backsheesh

10% of surgeons and dressers died. 28: Turks had only 1 medical school, med education in infancy 29: no women nurses. Surgeons badly trained. Did not do anatomy — reverence of dead. 30:
fatalism of Turks

31: visited hospitals at Scutari, “the scene of the noble labours of Florence Nightingale, and also the beautiful English cemetery where are buried so many of our countrymen who died of wounds or sickness there.” grave of Meyrick, young English surgeon just died of typhus.

Dr MacPherson described a “comfortable hospital of about eighty beds,” with a surgeon and four English nurses, the only women nurses he saw in Turkey (MacPherson 41: at Adrianople, pop 70,000

“on the evening after our arrival we dined at Lady Strangford’s, and afterwards inspected the comfortable hospital of about eighty beds which she conducted, with a surgeon and four English nurses. These were the only female nurses we saw in Turkey,” but a few Sisters of Mercy sent by Queen of Saxony in hospitals in Constant. “That Lady Strangford, in her private hospital, assisted by her staff, succeeded in shewing results as to the comfort of her patients and their chances of recovery that were quite unapproachable in the best and most carefully conducted hospitals where there was not the usual male nursing, any one who had the pleasure of visiting her hospitals can abundantly testify. It is to be hoped that her good work will bear fruit and that ere long female nursing may become an institution in Turkey”

42: procrastination; (Adrianople was previous capital, before capture of Constant., founded 2nd cen, Hadrian,)

46: men left lying on floor, odour unbearable, houses and mosques used as hospitals; frequency of executions, Bulgarians charged with taking part in the rising or aiding Russians; hanged;

48: he and MacKellar directed to Plevna; Turk commander hoped that England would aid with soldiers again; 60: 2500 sick there, hospitals in better condition than in Philoppolis, large mil hosp, but overcrowded and latrines bad. 61: 4 Russian soldiers (few prisoners); 63: made beeftea for doctor sick.

actually did, only 1 ref to CWFN, vol 1. cites F.B. Smith favourably, ref to Mrs N as “Fanny” “known in the literature as Fanny and W.E.N.) (29), but only in the secondary lit!; fluent in 7 languages! (29); “Sir Harry was Parthenope’s husband” (32), he is never “Harry”; good on Buxton; announces “the collected works of Florence Nightingale Project will soon have these materials available electronically. ftnote 15.


Maggs, Christopher, ed. Nursing History: The State of the Art. London: Croom Helm 1985. has Monica E. Baly, “The Nightingale Nurses: The Myth and the Reality.” 33-45. has some primary sources. by 1900 the N School had only trained 982 nurses.” critical of Dock’s favourable assessment. and then 20 full bios of FN, largely a vision of Cook (some quite hostile), authors have not read archival material or ignored it; “In another context Lucy Seymer betrays that she has read the letters in which Miss Nightingale discusses Mr Whitfield’s insobriety and that Mrs Wardroper was acting ‘like an insane king’ but she makes no reference to it. This elliptical regard for historical accuracy, or carelessness, has done nursing a disservice.” even FN said must proceed slowly and by experiment. (34) and that the only reference to Seymer!; good on poor health and deaths of first probs (38); using red register and excl those dismissed before recorded, 180 names for first 10 years; “with the exception of Agnes Jones...they were critical of what they found.” Rappe: did not learn. “but Miss Rappe’s and Mrs Deeble’s complaints were dismissed because they were ‘antagonistic to Mrs Wardroper.’” (39) but they were not dismissed, helped to prompt the reforms, more concerted system; implies the council should not have continued given the “unspectacular beginning”; correct on 1871 Wardroper and Whitfield problem (40); correct that St T “did not train to train” (42); has Osburn as a cousin of FN! (43); notes the failures 43; Conclusion: “If we examine what the Nightingale School achieved in its early years, it is in fact very little.” only 2 good supts in 10 years acc to HBC [But that refers to those already in place; those trained in first 10 years include many highly successful matrons of major institutions: Jones and Torrance, A.L. Pringle, R. Strong, Lennox, F. Lees, Baster? Rappe and certainly Lucy Osburn, judging by her long-term impact, as well as many others; including Ireland, Australia and Sweden as well as Great Britain]. PR, nursing became fashionable because of lack of opps; hosp needs triumphed over training (45); “By the 1890s Miss Nightingale had given up the unequal struggle and the Fund Council soon had to cede to less and less say as the hosp took on more and more probs.” Defects in nurse training did not lie in what was intended to the Nightingale system but in its
abuse by the service needs of the hosp.


Maggs, Christopher J. *The Origins of General Nursing*. London: Croom Helm 1983 (typed print). was PhD thesis Bath 1980; cited by Rafferty (p21) as revising opinion on FN; no archival research on FN; ref to The History of Sir Charles Grandison, novel, where nurse went beyond sick role by becoming mistress and housekeeper of the earl. Mrs Giffard. Betsy Prig a nurse in Martin Chuzzlewit, with Gamp; Mrs Horsfall a nurse in Bronte’s *Shirley*, drank. zillah. “nursinge” from old French, Latin nutricias, nourishing; the 1985 is just a reprint with corrections of the 1983; typescript only; 2 FN refs Notes on N and Quain 1882.

Magnello, Eileen. “The Iconography of Florence Nightingale’s Polar Area Graph.” paper at Wellcome Sept 2010 conference

Magnello, Eileen. *A Century of Measurement*.


23: “The statistical data Nightingale collected during the first seven months of the Crimean campaign were later analyzed with the help of William 24: Farr. Shortly after the General Reg Office.... “

23: FN dismayed by statistical carelessness as well as the appalling lack of sanitation in the mil hospitals, none maintained in a uniform manner, and lack of coordination among hospitals. QV, RC incl Farr, and Balfour;

25: “Nightingale and Farr discovered there was an annual mortality rate of 60 percent for these soldiers. Between the ages of 25 and 35, the mortality rate in mil hospitals was double that in civilian life.” end31, but does not give a source.


Maher, Mary Denis. *To Bind Up the Wounds: Catholic Sister Nurses*
in the U.S. Civil War. New York: Greenwood 1989. 178 pp. Maher a Sister of Charity of St Augustine. FN 39 58 71 29-30; 28: In US “the English example of Florence Nightingale and her nursing reforms was influential even though there was also an independent American reform movement.” [uses sec sources]; Jameson. [positive influence, but not much detail]
38: on eve of the Civil War, the only source of any kind of trained nurses, male or female, existed primarily in the 28 Catholic hospitals run by several different women’s religious communities. 39: Mary Livermore credited them with devotion, shirked no duty; wick and wounded men watched for their entrance... US sisters brought tradition of European sisters, “Second, they earned the recognition on both sides of the Atlantic from Nightingale and others who desired to initiate reforms for the betterment of the sick,”sisters offered a model for care. 58: Samuel Gridley Howe wd not let his wife do anything more than make lint and bandages and visit in hosps, altho had encouraged FN, wd not have a wife who had career as “public woman” 71: FN seen as model

243 nursing practice acts “The practice of nursing means the performance for compensation or gratuitously of any act expressing judgment or skill based on a systematized body of nursing knowledge. Such acts include the identification of and intervention in actual or potential health problems of individuals, families or groups, which acts are directed toward maintaining health status, preventing illness, injury or infirmity, improving health status and providing care supportive of or restorative of life and well-being through nursing assessment and through the execution of nursing care and of diagnostic or therapeutic regimens prescribed by any person lawfully authorized to prescribe.”
245: violations of Nursing Practice Act, state legislatures have given licensing boards authority to hear and decide admin cases against nurses where alleged violation. Can be reprimand, probation, fine or suspending or revoking of license; “An estimated 7% of the 1.9 million RNs in the United States are chemically dependent (Bernzweig 1996). Majority of disciplinary actions of boards related to misconduct from chemical impairment, misappropriation of drugs to support the addiction.
261: most frequent allegations of nursing negligence: failure to ensure patient safety, improper treatment or negligent performance of the treatment; failure to monitor the patient and report significant findings; medication errors; failure to follow
agency’s policies and procedures; personal liability with floating case. Chin v. St Barnabas Hospital, legal risk if nurse attempts to carry out tasks not competent to perform. Tennessee Rules and Regulations of Registered Nurses. Rule ... delegated functions if not prepared to handle; perform only those for which qualified

269: intentional torts in nursing practice vs unintentional torts intentional: assault, battery, defamation of character, false imprisonment, invasion of privacy, intentional infliction of emotional distress

273: criminal law for nurses: common misdemeanor offence nurses charged with include illegal practice of medicine, failing to report child or elder abuse, falsification of patient’s medical record; assault and battery and physical abuse of patients. May be felony. Usually prison time and permanent loss of license

274: patient rights. Living wills, refusal of treatment; 275: do not resuscitate orders; 276: right to refuse treatment; 277: physical restraints

278 summary, increasing case law competence for acts; nurse can/must refuse to take on if not qualified for task; incompetent charge leaders


McKeown, Thomas in 1970s showed advances in medical treatment made no contribution to the decline in mortality in 1850s to 1910, “steepest rise in modern history”; Emily Grundy International Journal of Epidemiology. Argues re rise in 18th cen. Prevailing orthodoxy of time was that answer lay in med advances, incl rise of hosp movement in 18th cen, smallpox inoc and vacc, and later advances in sc med and public health movement. McKeown pointed out mortality rates for serious inf diseases, such as TB, plummeted long before any effective individual preventive or therapeutic. Argued that hosp movement had if anything a negative effect. Said improved living standards made differences, nutrition, based on his analysis of mortality declines of late 19th cen. Made important contrib by considering means of transmission of disease. This is under fire. Cambridge group has shown some improvements by start of 19th cen, early to mid 19th cen 1830s to 1860s no further improvements, and some deterioration, nice life expectancy table.

Maindonald, John and Richardson, Alice M.. This Passionate Study-A Dialogue with Florence Nightingale. Maindonal, Centre for Bioinf Scs, John Curtin Sch of Med Research, Canberra; Richardson, School of Math Scs... Canberra

Maindonald, John and Alice M. Richardson. “This Passionate Study: A Dialogue with Florence Nightingale.” Journal of Statistics in
Malam, John. Florence Nightingale. Oxford: Heinemann 2001. For children, 48 pp. nice pics, broad coverage of issues, glossary and index, usual sexist Florence and Elizabeth, Harley St. a “hospital where Florence worked as a nurse” Institution for the Care of Sick Gentlewomen in Distressed Circumstances (16); 040 has “In 1874, Florence’s father died” and for next six years “cut off from her work while she cared for her elderly and infirm mother, whom she nursed at Lea Hurst” and has mother dying there in 1880, then aged 60 returned to London; also Evans Publishing 2003.


Malleson, G.B.. Printed Memo for Major G.B. Malleson to Govt of India re female nursing in mil hosps BP1.7(3); argues considers it successfully adapts the system known as Miss Nightingale’s, excerpts from her, ref to Mrs Cotton,

Malloch, Kathy and Porter-O’Grady, Tim. Eds. Introduction to Evidence-based Nursing and Health Care. 2nd ed. Sudbury MA: Jones & Bartlett 2010. Quotes from NonN [brief mentions] 101: PHC, Alma Ata, Healthy People 2010 (European) “Nursing was to play a major role in PHC, mapping this discipline’s path from the time of Florence Nightingale through the years of the Alma Ata Declaration through a century of practice and search to the present.
77: env conditions important, as FN demonstrates on patients’ healing processes.
vi. Mandate “to continue the journey initiated by Florence Nightingale.”


FN on 23, 30, 63, 111, 132, 170, 174, 181. Brief bio no good;

Mann, Susan. Margaret MacDonald: Imperial Daughter. Montreal & Kingston McGill-Queen’s University Press 2005. RC. on a nurse, Margaret MacDonald, RC, NS, (c1873 d. 1948) WW I nursed in Sp-Am War, S Afr War, Panama in 1906 refs to FN 19, 21, 79 117 162. her scrapbook contains newspaper drawing of FN departure for Crimea in 1854 (19), in New York at Charity Hosp, it seems Americans
used FN’s ideas faster (21); when visited St Thomas’ when matron
in chief had sense of walking in footsteps of FN, she designed
the wards, and her tr sch the model for their own, inv to Buck
Palace, Windsor Castle (79)

Mansell, Diana J., Forgiving the Future: A History of Nursing in
incl some primary sources, but some bloopers with secondary,
influence of FN in Canada, incl St Catharine’s


Marcus, Clare Cooper. “Healing Gardens in Hospitals.” Design and
Health 1,1 (January 2007):1-27 online; author prof emerita,
1: “In past centuries, green nature, sunlight and fresh air were
seen as essential components of healing in settings ranging from
medieval monastic infirmaries to large municipal hospitals of the
17th and 18th centuries; to pavilion-style hospitals, asylums and
sanatoria of the 19th and early 20th centuries inspired by the
work of public health reformer, Florence Nightingale. From
approximately 1950 to 1990, the therapeutic value of access to
nature all but disappeared from hospitals in most western
countries. High-rise hospitals build in the international style
resembled corporate office buildings; air conditioning replaced
natural ventilation; outdoor terraces and balconies disappeared;
nature succumbed to cars and parking lots; and indoor setting
designed for efficiency were often institutional and stressful
for patients, visitors and staff (Ulrich...), but patient-centred
model brought back. Results of small patient survey; gives
examples of US hospitals with gardens

Marcus, Clare Cooper; Barnes, Marna, eds. Healing Gardens:
Therapeutic Benefits and Design Recommendations. New York: John
(1820-1910) wrote with enthusiasm of these new hygienic hospital
plans, which became the predominant form throughout the
nineteenth century.” [quotes second only to fresh air] Good
nursing practice by the end of the nineteenth century and in the
first decades of the twentieth century called for wheeling
hospital beds out on sun porches and roofs; indeed, in the
treatment of tuberculosis, this fresh air and sunlight regimen
was seen as the key to recovery. In the Catholic hospital St
Mary’s, in San Francisco, historic photos depict rows of patients
in beds on the trellised roof garden. Yet all that is now left
of this space is a neglected segment of roof with a few flower
boxes, where staff retreat for a quick cigarette break.”
230: “Florence Nightingale’s pleas for more daylight and cross-
ventilation in hospital wards have been heard, but the visual and
functional potential of those open spaces has been completely
overlooked.”


Once Florence Nightingale went into the trenches among the soldiers to get a good view of Sebastopol. When it became known that she was there, they sent up such a shout that the Russians behind their strong battlements heard it and trembled, not knowing what it might mean. There was not a man there but honoured her as he would a queen. Florence Nightingale worked so hard that at last she, too, became ill of the terrible Crimean fever. Then there was sorrow indeed....

Since Florence Nightingale worked among the soldiers in the Crimea, army nurses have worn red crosses upon their sleeves, as the crusaders did long ago. But those who wear the cross today do not go to battle to fight, but to help the wounded and the dying....[no mention of Seacole, wrong on red cross]

Martha Raile Alligood “Introduction to Nursing Theory: Its History, Significance and Analysis” Chapter 1: FN’s “vision of nursing has been practiced [sic] for more than a century, and theory dev in nursing has evolved rapidly over the past 5
decades, leading to the recog of nursing as an academic discipline with a substantive body of knowledge (Alligood 2006a...) FN said, distinct, best condition ... but only in 185-s 100 years later that nursing began to engage in serious discussion about need to articulate and test nursing theory. “Until the emergence of nursing as a science in the 1950s, nursing practice was based on principles and trads that had been passed on through an apprenticeship model of education and hospital-kept procedure manuals.”


Martineau, Harriet. England and her Soldiers. London: Smith Elder 1859. has 3 charts identical with those in A Contribution to the Sanitary History. Order different. Coloured chart here is not frontispiece but the last chart. List of Illustrations: Diagrams of the Mortality of the Army in the East. Diagram[s] of the Causes of Mortality in the Army of the East (coloured 2 charts). And Diagram representing the Mortality in the Hospitals at Scutari and Kulali. (The one with comparison to mil hosps in and near London. This book has the three charts, but no tables. Preface states that the statistical statements are illustrated by 3 diagrams showing the san state of the army during the war in the Crimea, for permission to use which I am indebted to the publishers of “A Contribution to the Sanitary History of the British Army” in which they originally appeared.

Masson, Flora. Florence Nightingale, O.M., By One Who Knew Her. London: Scientific Press 1910. 32 pp. a lot on Crimea, little later; observations of Miss Felicia Skene, who had trained nurses for cholera at Oxford; Bracebridges went down to see, rejected, but Skene helped re nurses’ savings; after war, St T, Wardroper, export of nurses; 20: on 84th birthday 194 Order of St John of Jerusalem, then OM; 16 March 1908 hon freedom of city of London. “At her own request the money which would have been spent on a gold casket was devoted to charity, the sum of 100 guineas being
given instead to the Hospital for Invalid Gentlewomen, and the casket presented to Miss Nightingale was of oak.” Muslim cry to prayer (22); then some maxims from Notes on Nursing -- Victorians All. Port Washington NY: Kennikat 1970 [1931]. 118: 1887 came to know FN, 119: eggs sent by commissionaire, resplendent with ribands and medals on coat, in corridor at St T; 120: sitting room on arrival, depressing, prints, SH and Raglan, one water colour, clock on mantelpiece stopped; FN’s room “a light, airy, curtainless room, the general effect one of whiteness, simplicity, flowers. The windows opened onto to a balcony, where sometimes the sparrows were pecking at bread crumbs. Victorians All, a book, 1931. The chief, in a soft black gown, lay on her couch, leaning back against her cushions....121: A pencil and notebook lay by her hand. 121: she seldom spoke of the Cr War. “More often she was interested in things going on at the moment....Always the statistician, she would put questions, and it was rather disturbing to see the pencil and notebook come into use, and one’s answers carefully written down.” 123: a late aft in summer, windows open. “‘Listen!’ she said. A weird, faint cry sounded over Hyde Park....‘The Hourly cry to prayer’ she whispered, ‘from the mosque.’ explained “that a Mohammedan potentate was a guest of that London season.”

Florence Nightingale holds nursing back and represents the negative and backward elements.


Author Univ of S Mississippi no ebook; 2015; 26-35. Chapter 3

Environmental Model of Florence Nightingale. Nightingale’s 13 canons central to env model of nursing. Uses NonN only; canons are chapters. FN did not plan to develop a theory but to describe nursing and delineate general rules for nursing practice. Thus her model is both descriptive and practical. Her phil includes the four metaparadigm concepts of nursing, but the focus is primarily on the patient and the env, with nursing interventions aimed at manipulating the env to enhance patient recovery.

Nursing interventions using Nightingale’s philosophy are centered on her 13 canons, which include the following:

* ventilation and warmth;
* health of houses,
* petty mgt,
* noise,
* 28: variety,
* food intake,
* food,
* light,
* cleanliness
* of rooms and walls,
* personal cleanliness,
* chattering hopes,
* observations [these are her chapters!!]

29: Health: Nightingale did not specifically define the concept of health, but believed that nature alone can cure.... She described health as “not only to be well.....” [that is a def]

30: Analysis of Nightingale’s Environmental Model of Nursing; assumptions

31: Critique of Nightingale’s env model of nursing

[no idea where her env theory came from, high death rates in bad hospitals, bad conditions]

32: FN’s writings remain important to profession [but only looked at one]; cites Pfettcher 2010 that basic prs continue to be applied in modern nursing, a scholarly effort that continues to give credibility to... “Nightingale’s model was developed long ago in response to a need for environmental reform. Although some of N’s rationales have been modified or disproved by advances in medicine and science, many of the concepts in her theory have not only endured, but have been used to provide general guidelines for nurses for more than 150 years (Pfettcher). Her model remains relevant (Johnson Webber 2010)

Chapter 4 14 components, Henderson; transpersonal, Jean Watson;
Chapter 6 clinical wisdom, Benner; Chapter 9 unitary human beings, Martha Rogers; Chapter 10 Callista Roy adaptation;
Newman, Conservation; self-care, interpersonal relations Peplau;
culture care diversity Leininger; 32 chapters

FN refs 29, 26
Chapter 3 Environmental Model of Nursing. Background FN; 28: 13 canons of Nightingale’s theory
31: Nightingale’s Environmental Model as a Framework for Nursing Practice; refs Cook,


Matheson, Annie. Florence Nightingale: a Biography. London:
Thomas Nelson 1913. [Matheson 1853-]

Matthews, Arline. In Charge of the Ward. Any FN?


7: “Although Florence Nightingale began the formal development of nursing theory, most dev in nursing has occurred since the 1960s)... Choi, Alligood...
38: Military Health. FN and Dorothea Dix, Carla Barton et al cites Monteiro
162: “Florence Nightingale, the first nurse epidemiology, pioneered the use of statistics to improve public health. During the Crimean War, Nightingale collected data and systemized record-keeping practices to improve hospital conditions. She invented pie charts and other graphical illustrations to depict mortality rates and show how improvements, in [exagg claim] Historical Perspective
236: “Florence Nightingale was a great proponent of clean water and fresh air as key elements in promoting the public’s health. Her practice improved the health of Br soldiers in the Crimean War and reduced the high infant death rate in London. [no refs given] Nightingale identified the need for a clean en with five.
[cit NonN]
429: Rationale for Nursing Involvement in the Health Planning Process “Florence Nightingale and Lillian Wald pioneered health planning based on an assessment of the health needs of the communities they served.... “
33: Rathbone and FN


Mawson, Michael Hargreave, ed. Eyewitness in the Crimea: the
Crimean War Letters (1854-1856) of Lt Col George Frederick Dallas, sometime Captain 46th Foot and ADC to Sir Robert Garrett, ed. Michael Hargreave Mawson. London: Greenhill Books 2001. Letter 17, p59 encounter with FN a sergeant Hampson left apparently dying on shore at Alma, gave "a much better account of affairs at Scutari. When he first went there, he was left, he tells me, with several others in the hospital there, in a room, and for 7 days they never saw a doctor! He survived it, and says that now all is much better arranged. Miss Nightingale and her attendant angels he speaks most enthusiastically of. They were everywhere amongst the sick, doing more good than any doctors, and as he somewhat naively observed 'there was no sort of delicacy about them, Sir.'"

Maxworthy, Juli C. “The dirty hands of health care: What would Florence think?” Reflections on Nursing Leadership 34,2 (27 May 2008):1 author at SuanFran, good positive article “Florence Nightingale’s words still ring true today....” re current state of hand hygiene in hospitals around the globe? Cites Burke 2003 on 1400 people each day die from sepsis worldwide, “It is the most common complication of hospitalized patients, with 5-10% of patients in US acute-care hospitals acquiring at least one.” “Nosocomial infections occur in approx 2 million patients per year in the United States, causing 90,000 deaths and resulting in $4.5 to $5.7 billion in additional patient care costs. Burke. “Hand hygiene is the single most important factor for infection control.” Monitoring found performed only one third to one half as often as shd be

Mayo, John Horsley. Medals and Decorations of the British Army and Navy. London: Archibald Constable 1897. Vol. 2 Crimea 1854-6. 2:374-75 gives general orders on creation of medal “Crimea,” shall be conferred upon all the officers, non-commissioned officers and private soldiers of HM’s Army, including the Royal Artillery, Royal Engineers and Royal Sappers and Miners, who have been engaged in the arduous and brilliant campaign in the Crimea, and that clasps, with the words ‘Alma’ or ‘Inkerman’ thereon, shall also be awarded to such as may have been engaged in either of those battles. Then added Balaclava, and Sebastopol, for all who have been present with the army between 1st Oct 1854, the day on which the Army sat down before the town and the 9th Sept 1855, the day on which the town was taken. but not after Sept 9 1855 unless engaged in some expedition or operation against the enemy; 2:500 “Miss Florence Nightingale, 1855. Jewel. “Blessed are the Merciful.” starts in diamonds to illustrate the ideal of the light of Heaven shed upon the labours of Mercy, Peace and Charity. Crimea in gold letters. On the back, on a gold tablet: To Miss Florence Nightingale, as a mark of esteem and gratitude for her devotion towards the Queen’s brave soldiers, from Victoria R. 1855. Coloured print by Colnaghi, in Illus
London News. Intended to be worn as badge of an order.

2:501 Royal Red Cross, 1883. Gold Maltese cross. Inscribed Faith Hope Charity 1883. Head of QV. First example of an English military order of distinction for women


5: Jones one of FN’s first 12 trainee nurses
7: stage play Agnes, Handfull Productions at Derry’s Playhouse Nov and Dec 2004, directed Bernie Mahon.
A lot of her nursing with expat Irish.
15: born 10 Nov 1832 to mil family, early years Fahan House, Donegal, until 1837 when Mauritius for 6 years; kept journals, lost
22: 1856 turning point; Josephine married local curate, Rev Robert Higginbotham and did hands on pastoral ministry, and cared for mother, virtually bedridden; and tried to control younger brother, in 1859 persuaded or made to emigrate to Australia; married and descendants there.
23: end Cr War
24: Jones back at Kai, was in charge of children’s hospital; worked with Raynard at London Bible Mission in slums around Drury Lane, but wanted to be a trained nurse;
27: accepted as one of the first 12 probs and only Irish woman, started Sept 1862 [skips over a lot]
32: took up post as supt at Brownlow Hill spring 1865 at age 32, ave pop 1350 up to 1500.
Conditions, families kept apart, husbands from wives, parents from children, bldg filthy’ food rationing
38: prob died of cholera, 4 days after falling ill with fever, 19 Feb 1838, 35.
Grave; brother in law also buried there grave in old St Mura’s Church of Ireland graveyard, Fahan.
42: FN letter to Elizabeth Jones, sister, and Josephine Jones Higginbotham. From Fred Jones’s descendant, peter Jones, NZ, who has original.
22 February 1868.


welcome at 52 Queen St., FN visited, as Ruskin, Earl Russell, Mrs Gaskell, Livingstone.... note 2.
Section on chloroform; has Arneth writing Simpson after 1847 paper of Semmelweis on his discoveries; 196: in January 1848
Simpson surprised and somewhat disconcerted by letter to draw his attention to *Zeitschrift der Kaiserliche und Koniglichen Gesellschaft der Arzte zu Wien* of Dec 1847, “Experience of the highest Importance” S had shown from hospital records that between 1784 and 1822, when post mortems of women dying in childbirth rarely performed, maternal mortality was 125, but when ordered that, for educ purposes, a pm shd be performed on every mother, rate increased to 530, when hosp divided into 2 clinics in 1833, unchanged, S at first clinic for students; Arneth at second clinic for midwives; but in 1839 when med students given instrucation at first clinic, midwives at second, mortality 197: rose in first to 984 while in second 388; S suggested on death of pathologist; med students usually did eight plus autopsies; nurses did not perform or attend pm; from May 1847 S’s students required to wash in solution of chloride of lime on entering labour room; not req to wash hands between patients, thought “superfluous” since alive; but still high in second clinic; published, but ideas attracted little notice; but colleagues disseminated, Rokitansky, Skoda, Liebeg and Arneth; Arneth delegated to write Simpson, 198: but Simpson thought they were careless in Germany and Vienna; putting healthy lying in woman in same bed where patient died w/o changing bedclothes; so, did not respond well; anger and Simpson conveyed to others; misunderstanding resolved only 3 years later when Arneth took sabbatical to visit obstet centre, April 1851 visited Edinburgh, gave paper “Evidence of Puerperal Fever....” Reported decline from 11 to 2 percent; and that S obliged to abandon conviction that single cause of pf was “cadaveric particles” into genitalia; October 1847 patient had putrid cancer of cervix and she the first patient to be examined by med students, of 12 other patients, 11 died of pf, and repeat in Nov 1847, 199: thereafter S conceded pf cd be carried to new patients not only by cadaveric particles but other “morbid matter” single washing failed to prevent; “he had insisted that his students shd wash their hands in chloride of lime before every examination” not only on first entering; relief on friends to get better info out; condition cd only teach theory of obs and no contact with patients; quit; not until 1855 when appointed dir of Obs at Univ of Pest, and not until 1858 began work on Etiology, Concept

McDonagh, Anne. A Short History of Nursing. Online January 2004. Canada FN Jeanne Mance and Hotel Dieu, Mack School; 1889 Toronto General;

McDonald, Lynn. “Statue of ‘Nurse’ Mary Seacole Will do Florence Nightingale a Disservice.” online comment The Guardian 8 June 2012.

McDonald, Lynn, “Mythologizing and De-mythologizing,” in Sioban Nelson and Anne Marie Rafferty, *Notes on Nightingale: The


* “Florence Nightingale in the ODNB” letter to the editor 18 March 2005:3.

McDonald, Lynn. “Florence Nightingale: A Research-Based Approach


McGann, Anne, Crowther, Anne and Dougall, Rona. A History of the Royal College of Nursing 1916-90: A Voice for Nurses. Manchester: Manchester University Press 2009. Little on FN. 2nd para a mild swipe. “Firstly, there was no agreement on the status of nursing as an occupation, or on the nature of nursing skills. Since the nineteenth century, nursing in Britain and many other countries was inevitably associated with the legacy of Florence Nightingale, who was given credit—perhaps too much credit—for reforming the discipline and training of nurses and raising them in social esteem.” Does not say who did more. 5 wife of gov gen of Canada, “Lady Stanley Institute for Trained nurses, the first training school for nurses in Ottawa in 1891, but perhaps more significantly, his grandfather, Lord Edward Stanley, was an ally of Florence Nightingale and supported her public health work. The alliance between Swift and Stanley, nurse and politician, echoed the well-known tactics of Florence Nightingale in her political campaigns. At this point, ventures on behalf of women were unlikely to attract much pol attn w/o influential male support. Role of Arthur Stanley, Cons MP re RCN. 298: FN used positively. Pic of her. “The nurse on the left established British nursing standards. The nurse on the right is being forced to compromise them.” RCN ad on effects of Griffiths reforms, 1986.

McGill Model of Nursing website, developed by Moyra Allen and Mona Kravitz, first called responsive nursing or complemental nursing. Refined. Dev in 1960s as Canada’s universal health insurance plan began, increased demand for health care, opportunity to expand nursing roles and services, recognized “unique contribution nurses bring to the person and its family” Allen OC (1924-96) Montreal Gen, then BN MCGill and Masters Chicago, 1954 asst prof, PhD in ed from Stanford 1967; was asst director’ main goal to form a partnership with the person/family to foster health, became editor of first scholarly journal of nurs res in Canada, Nursing Papers, started masters prog MSC (appl) 1976


Eds?
Julie A Kenney and Ida Androwich. ..Informatics, Roles, Competencies and Skills 107: “Nurses have historically gathered and interpreted data. Florence Nightingale was the first nurse to use data to change the way she cared for patients. While serving in the Crimean War, she began to gather data regarding the conditions in which the patients were living and the diseases they contracted and from which they expired. The data was later used to improve patient conditions at both city and military hospitals (O’Connor & Robertson 2003). NO.
263: Using the Foundation of Knowledge Model. Snow father of public health. “Florence Nightingale should also be recognized as an early public health informaticist. Her recommendations about medical reform and the need for improved sanitary conditions were based on data on morbidity and mortality that she compiled from her experiences in the Crimea and in England. Her efforts led to a total reorganization of how and which healthcare statistics should be collected (Dossey, 2000). YES

McGovern, Celeste. “Politically Correct.” Alberta Report 10 May 1999:35. Unison vote unanimous to ditch Nightingale as role model and move International Nurses Day, because white, etc. “She was against women healers and formal nursing training”, statues of Lenin


McInnes, E.M. St Thomas’ Hospital. London: Allen & Unwin 1963. archivist at. first nice book, descriptions of the doctors. Peacock dean of med in 1871; on move, Simon and South both thought out of town better for air (108); St T had been in Southwark since 1215; 1859 Charing Cross Railway Co gave notice; hosp got damages but; comp paid in 1862; considered 44 sites, short list to 14, 9 got inspection; took over Surrey Gardens Music Hall and pleasure ground at Newington, had been a small zoo; giraffe house a cholera ward, and elephant house dissecting (105); farewell dinner for govs held 16 July 1862; kerfuffle over queen; ceremony 3000 visitors; pm and wife (Disraeli), pr and prss of Wales etc., address to her, she replied; laid stone, 100th psalm sung; 3 years later declared it open 21 June 1871; chapter 10 on founding of N School; 114-30; she did come, then on to Guy’s; new hosp in effect opened in Sept 1871 (131) altho queen declared so in June; privately printed

McKee, E.S. MD Cincinnati “ Florence Nightingale and her
Followers.” Nashville Journal of Medicine and Surgery 103, 9 (September 1909) 385-98. Johns Hopkins. 391: Nursing in American grew out of the Civil War as it had in England out of the Crimean. A trio of pioneers schools for nursing were opened, Bellevue, May 1, New Haven October 1, and the Massachusetts General November 1 1873.


McKenna, John and Laurie Brown, Nightingale. a musical 1990. FN Mus 0959 and 0964 1992 Malvern

McKenna, Amy, ed. The 100 Most Influential Women of All Time. Chicago: Britannica Educational 2010. Ebook Manukau; not UofT


Florence Nightingale (1820-1910), wealthy and refined member of the powerful new English group engendered by industrial power, began to pick up human-distress signals as a young lady. They were quite undecipherable at first. They upset her entire way of life, and couldn’t be adjusted to her image of parents or friends or suitors. It was sheer genius that enabled her to translate the new diffused anxiety and dread of life into the idea of deep human involvement and hospital reform. She began to think, as well as to live, her time, and she discovered the new formula for the electronic age: Medicare.

Care of the body became balm for the nerves in the age that had extended its nervous system outside itself for the first time in human history. To put the Florence Nightingale story in new media terms is quite simple. She arrived on a distant scene where controls from the London center were of the common pre-electric hierarchical pattern. Minute division and delegation of functions and separation of powers, normal in military and industrial organization then and long afterward, created an imbecile system of waste and inefficiency which for the first time got reported daily by telegraph. The legacy of literacy and visual fragmentation came home to roost every day on the telegraph
wire:...” Russell. “With telegraph came the integral insistence and wholeness of Dickens and of Florence Nightingale and of Harriet Beecher Stowe. The electric gives powerful voices to the weak and suffering, and sweeps aside the bureaucratic specialisms and job descriptions of the mind tied to a manual of instructions.” “Human interest’ dimension.

1: “We ascertained that the sick arriving from the Crimea were nearly all suffering from diseases chiefly attributable to diet, and that the food supplied to the army during the winter, consisting principally of salt meat and biscuit, with a very insufficient proportion of vegetables, was calculated, in the circles in which the troops were placed, to produce those diseases.” so must increase supplies of fresh eat and veg, and substitute fresh bread for biscuit. Dr Sutherland, concurred in necessity of...
2: intense suffering of army in winter, esp Dec and Jan; intense. “Excessive labour, watching, exposure and privation” never murmured; 5: better diet of French rice, veg, soft bread, and coffee and sugar; sometimes short rations; many men cd not eat the salt meat; bowels; scorbutic tendency; 6: list of deficiencies; 6: army had fresh meat in Varna; 8: deficiency of transport 8: need for lime juice, in stores, not issued; 278 cases arrived on 10 December, as prophylactic, but lay in stores at Balaklava, not issued until first week in Feb; when suffering from scurvy at height; 8: provision for issuing of lime juice to troops on board ship but not on shore; although “equally urgent”; vegetables not on diet, so Com no req to provide; cd have had soft bread; green coffee alluded to by nearly all witnesses; 9: tea better in circs; 12: camp diseases, 13: “The Turkish provinces cd have furnished, and at a later and more unfavourable season did furnish, a considerable amount” vegetables; several varieties can be safely carried by sea, keep several months, potatoes, onions, 14: vegs were in store at Balacover not issued; 14: opinion that extra rations of rum troops receiving injurious to health and habits, wd favour subst porter of good quality for a part of or whole; porter is nutritious, antiscorbutic and beneficial if moderate; 15: lack of transport, extra duties; and short rations; 16: scale of Commissariat “dangerously small” 17: hay; lack of road; forage; 20: stats strength, died by sickness, ratio

McNeill-Tulloch Report. Second Report January 1856. 24: Lack of supplies; only one blanket, nothing to lay under him, heavy rains, 6 weeks in same clothes, occasionally wet, without means of changing; 25: supplies on sinking of Prince not replenished. Rugs were available, but not issued. 27: straw mats for hospital not stuffed with straw; 28: for great part of winter troops lacked proper boots and shoes, and needed more than one pair of
socks for. 32: numerous complaints about tents, old, thin, worn out; lack of hospital “marquees”; area denuded of wood, so no wood to build better shelter; 33: contracts made for wooden huts to be sent from England mid November; sent, but did not reach and parts did not fit; 37: mortality in the Crimea outside jurisdiction; not climate, some witnesses appeared to attribute.... 37: worse further away, “deficiency of everything that was necessary to the proper tr of the sick”. “The mortality of the whole army was further increased by the disease which broke out at Scutari, and carried off many men who had entered the hospital with a prospect of speedy recovery, or who had actually recovered from the diseases for which they were admitted. Had the sanitary condition of those establishments been from the first what it afterwards, became, there can be little doubt that the mortality wd have been perceptibly reduced.” 38: “The army landed in the Crimea without hospital marquees, conveyance for the sick or any other supplies for the hospitals” except pair of panniers for each corps, scarcity of cots, even boards and trestles; mattresses, straw; only a blanket, until January. Lack of shelter; “the greater part of the sick lay in circular tents, which are altogether unfitted for the purposes of an hospital, and it was not until the huts sent out from England were erected, in February and March, that the accommodation was such as to admit of proper medical treatment.” 38: medical supplies became adequate in April 1855; deficiency of opium, “In cholera, for instance, the usual loss has, in our army, been about 1 in 3 at home, or on foreign stations where this epidemic has prevailed, but in the Crimea, during the period under question, it was 2 in every 3 attacked.” 39: “Most of the officers, finding it useless to send for medicines and medical comforts not in store, limited their reqs to such as they knew cd be given, and did the best they cd with them.” circumstances for MOs “the most painful that can be conceived” re diet, accomm, comforts; not for want of constant attention by them. Appeals. “Produced no result.” 39 supplies lacking, cd have got. 40: voluntary army; 45: soldier’s pay a shilling a day or more; ration a pound of bread and a pound of meat only; stoppages; coffee, tea, sugar; bowel complaints; 46: soldiers did not get vegetables; diet defective; Regs did not require the Commissariat to furnish, but country did not and therefore the army was deprived of them; if man goes to hospital, stoppage 3 1/2d 47: need for “a sufficient quantity of wholesome food” shd not be left to soldier; food not adequate for work 47: “nutritive value shd be determined acc to a fixed standard” 48: rec a daily ration for a soldier in the filed: lists: soft bread, fresh vegetables, rice or barley, fresh meat, coffee (roasted and ground), sugar, spirits (1/8 pint); and mustard, pepper, salt weekly 49: ref to Dr Christison on nutrition

Mead, Donna *Western Mail* 16 May 2005.
“Cadwaladr was also outspoken about the bureaucracy Nightingale had set up in the Crimea which she regarded as a tyranny because it deprived the wounded of food, clothing and even bandages. The few meetings between Nightingale and Cadwaladr after the latter’s decision to make her own way to Balaclava were acrimonious.”
“Prof Mead said: ‘Betsi accomplished to much; she influenced Nightingale but she was overshadowed by Nightingale.’ not shot like Cavell, or highly influential like Nightingale, but the extent of her service was such that she gave her health.” memorial plaque.

Mead, Donna. On Betsi Cadwaladr, from 8 March 2011 Western Mail first ed. Prof Donna Mead OBE, dean of health, sport and science at the Univ of Glamorgan, chooses Betsi Cadwaladr instead. Welsh nurse, ward sister and a prof, inspiration was “Betsi Cadwaladr, a nursing icon known as the Welsh Florence Nightingale. Betsi Cadwaladr, a nurse from Bala, was part of the great revolution in nursing led by Florence Nightingale, working tirelessly and at great personal cost to tend horribly injured British soldiers who were wounded and sick in the awful conditions of the field hospitals. The Cr War of the 1850s was hallmarked by disasters. And treatment of the sick and wounded on the front was a national scandal. Florence Nightingale understood the need for rigorous research in persuading the authorities and the public to deal with the awful conditions that spread disease. But Betsi Cadwaladr understood the human touch. Her stories were not of mortality rates or statistical graphs,. But real stones of the young men she cared for. Today we’d call them ‘patient stories,’ and she used them with devastating effect to persuade the aloof superintendents who visited her wards at Balaclava. Betsi was extremely skilled at putting the ‘flesh on the b ones of the statistics’ with her detailed accounts of the soldiers’ experiences. She was a true egalitarian, fighting for the needs of injured soldiers whatever their rank or background. She was a pioneer of the founding pr of our NHS: treatment based on need and not ability to pay.”

“focused primarily on the environment, interprets all external conditions and influences that affect the life and development of an organism, that are able to prevent, suppress or contribute to disease and death.” a restoring health process, nurse’s function to balance env, to save patient’s life energy to recover from the disease, used critical analysis; study conducted Nov and Dec 2012, based on Johnson and Webber’s model; used Portuguese translation of NonN of 1989, liked understandable language and minimum jargon; important concepts identified and defined; health beyond absence of disease; concepts stimulate formulation of propositions; positive conch of relevance. BM Johnson and PB Webber, An intro to theory and reasoning in nursing 3rd ed. 2010

Medvei, Victor Cornelius and John L. Thornton, eds. The Royal Hospital of Saint Bartholomew 1123-1973. London: Saint Bartholomew’s Hospital 1974. Sister Rahore. 251: Machin increased training from 1 year to 2 years, only there 3 years. 247: School at St B started 1877, 17 years after FN’s. Lots on Mansel (Bedford Fenwick). Mrs Drake matron when school started. 346 inkstand from FN to James Paget. “James Paget, F.R.S. from Florence Nightingale in grateful acknowledgement of most kind assistance. September 1859.” eds did not know what for!

Meehan, Therese, “The Irish Connection.” WIN World of Irish Nursing 18,9 (October 2010):28-29. Meehan file (other articles in Meehan in Papers) Favourable coverage of FN, first named, Moore favourable, exaggerates her nursing pre Crimea and during, French Sisters of Charity said to have nursed with regiments.

Meenan, F.O.C. St Vincent’s Hospital, 1834-1994: An Historical and Social Portrait. Gill & Macmillan 1995. Was press officer. On FN 28-31. Chapter 15, The Nursing School 134-37. Changes in 19th cent, Mrs Gamps. 134: nursing at St Vincent’s highly organized, a profession and vocation; Mother Camillus Sallinave in charge from beginning 135: Aikenhead’s instruction full of common sense: patients to be recd with kindness and courtesy, the sick served with respect, cordiality and compassion, to be made happy and to have comforts; not to be fatigued with too many devotions, nor rigidly enforced rules; fame of St Vincent’s spread, and FN visited to see if cd gain knowledge. 135: The prototype of the nursing school in England was the Nightingale school of nursing....” St T, king’s, trained matrons and senior nurses; Dr Steevens’s opened in Ireland a Prot school 2 years before FN’s, under Miss Bramwell, altho not functional for 2 years; Adelaide Hosp for Prots; 136: Thomas Laffan The Medical Profession in the Three Kingdoms 1879 in 1890s Catholic archbp of Dublin Dr Wm J Walsh “requested the
Catholic hospitals in Dublin to organise schools for the training of young girls in the nursing profession.” Rapid advances in med necessitated more facilities for treatment; girls available 1891 meeting; 137: St Vincent’s in common with the other hosps acceded to the archbp’s request and a tr school was opened on a small scale I May 1892. No 65 St Stephen’s Green, corner house, purchased for sleeping accomm, first lay supt appointed a Miss Robinson, who had trained at Adelaide; later a Miss Campbell from ERI; Mason from Sir Patrick Dun’s night supt.

2012: 67: “Prior to 1955—From Florence Nightingale to Nursing Research” est of journal Nursing Research
68: birth of Columbia Univ Teachers’ College Aprroahc
72: Milestones
1860 Florence Nightingale address the need for research and the educational preparation of nurses [nothing in between!!]
1900-1950
Reflective questions
references include only FN’s NonN

FN, no Seacole. Chapter 3 35: “From Can’t to Kant: The Fantastic Voyage” “The journey from the days of Florence Nightingale to modern nursing has been hard and bumpy. Nightingale’s attempts to establish professional nursing based on nursing’s unique concern with environment for promotion of health were pre-empted by an illness-oriented training that was dependent on other professions for existence and on hospitals for training and sustenance. Nursing has travelled from apprenticeship to education, from hospital service and training to the university, from mere implementation of doctors’ orders to accountability and autonomy, from practical nursing to theoretical nursing.” Kant: knowledge begins with experience.
84: epistemology, FN Crimean War, disease and. “Nightingale’s conceptualization of environment as the illeg focus of nursing care, and her admonition to nurses that they need not know all about the disease process, are the earliest attempts to differentiate between the focus of nursing and medicine. Her concept of nursing, which we are finally beginning to pay attention to, includes the proper use of fresh air, light, warmth,..cleanliness, quiet and the proper selection and admin of diet....” quotes. Notes on Nursing, evolved from extant nursing practice. Based on her obs and her experience in nursing. Yes.
Medical paradigm, those who followed FN in dev of schools of tr followed her advice re educ and apprenticeship, “however, these followers failed to continue, in her footsteps, to
differentiate the focus and goals of nursing and medicine and failed to further her theorization of nursing. Somehow the medical paradigm, better developed and more powerful, replaced what was starting to become a nursing paradigm (that is, concept of health, hygiene, environment and care).

191: Environment. “Ever since Florence Nightingale identified nursing in relation to a focus on optimizing an env to promote healing and optimal health, env has been a concept central to the nursing domain.” but have not addressed “it in the same depth and with the same conviction of its centrality as did Nightingale and as they did when considering the individual

8: “it was through determination and grit that Mary Seacole became a recognisable figure in the nursing world, arguably advancing the profession. Like Nightingale, Seacole too cared for the wounded in Crimea... At the outbreak of the Crimean war in 1853, Seacole had offered her services to the war office as well as Nightingale’s nursing team,, however she was rejected.”

Mellor, Ruth. “The Victorian Order of Nurses.” *Humane Medicine* 5 (Autumn 1989) Laurier proposed motions for VON at a public meeting 10 Feb 1897, charter granted by Qv next year; MacLeod moved to Ottawa to est, branches in Ottawa, Toronto, Montreal Halifax, to God Rush in 1898; Lady Aberdeen sent reports to FN on; letter printed her


Merry, E.J. and I.D. Irven. *District Nursing.* London: Baillière Tindall & Cox 1948. quick ref to FN and WR, later


wonders why she not given credit for being the “Apostle of Quality” attributed to W. Edwards Deming, who is always referred to by full name or surname. But good article in content. 247: “passionate statistician” Notes on Matters cited, vs Hugh Small, incorporates tables and charts. 249: Understood necessity for standardized definitions of stat measures. 251: Dates Notes n Nursing to 1902. 251: tables compares their work. 253: cites Institute of Medicine of between 44,000 and 98,000 people die in US hospitals annually “as a result of medical errors” Leape 2000. “America is in the midst of a health care crisis.” “The call is out afresh to analyze processes and eliminate mistakes and other quality problems.”FN’s life and work would call hospitals to:
* If you truly care about the patients, you will soon discover what processes need to be improved.
  * Gather data and analyze it for insight.
  * Improve the system so errors do not recur.
  * Improve the training function. Make sure the employees understand their jobs and the system.”
“Hail to the nineteenth Century Apostle of Quality!”


Middleton, Jenni. “Ethical and Compassionate Nursing.” Nursing Times. Special issue supplement. Rafferty, Anne Marie 3: “We can read Nightingale as a credo for compassion today. She recognised that systems needed to foster and institutionlise compassion, and that small touches and details mattered. Leading by example, and embedding a code of behaviour that could be sustained even in your absence was and should remain our goal today.” challenges not new, vulnerable members.
4: what history teaches us. Bradshaw, Ann “Compassion: What History Teaches Us.” Nursing Times Ethical & Compassionate Nursing supplement 3. Ann Bradshaw, Oxford Brookes. Govt and nursing bodies agree patients have a right to be treated with compassion. Prime Minister’s commission on the future of Nursing and Midwifery. 2010 Knight et al 2008. “In Nightingale’s view, good nurses were good people who cultivate certain virtues or qualities in their character – one of which was compassion.
Patients were expected to be the centre of all nurses’ thoughts. Nurses had to always be kind (but never emotional) because they were caring for living people, unlike plumbers or carpenters.” letters to pros since her time textbooks begin with intro on moral basis of nursing; Lees, (Lees 1874) list like FN’s; Rachel Williams and Fisher “inborn love” of the work, unselfishness and resolution; Catherine Wood, similar; 6 qualities; Luckes 1886 character of the nurse made the real nurse; self-discipline, personal resp for learning, truthfulness, obedience, punctuality, loyalty and kindliness of genuine compassion; EJR Landale 1893: quietness, presence of mind, gentleness, accuracy, punct, memory, obs, forethought, promptness unselfconsciousness, obedience, kindness and courtesy; Mary Annesley Voysey, obedient, truthful, conscientiousness, careful kind and faithful work without looking for results Voysey 1905; MN Oxford, sister at Buy’s 1914; etc. 6: throughout, compassion associated with individual’s character, stems from virtue; [good article]


Miller, Carol A. Fast Facts for Health Promotion in Nursing: Promoting Wellness in a Nutshell. New York: Springer Publishing 2013. FN 4, 4: What is health promotion for wellness? Begins: “In 1893,… 67: Spiritual Wellness. “Since the time of Florence Nightingale, nurses have recognized that they address the spiritual needs of their patients, but this still remains one of the most nebulous aspects of nursing care. When asked....”


Milutin, minister of war. Ordered by the War Ministry. FN annotation on title page of prospectus of St Petersburg Special Course of Lectures for Women exclusively at the Imperial Medical-Surgical Academy for the training of ‘learned’ Midwives. “Ordered by the War Ministry.” With FN annotations B.P. 1/7(6) Private. Please return to Florence Nightingale 17/6/73; comments that more than double this number have already applied; sum of 50 rubles: equal to £8. N.B. My Petersburg friend writes that the Pupils do not live together. [FN annotation]

Minet, William. 6 pp untitled typed document. “Miss Nightingale awoke the nation to a consciousness of two facts: 1. That trained nursing was only second in importance to medical skill in the treatment of illness. 2. That there existed no trained nurses, nor was there any machinery for training nurses.” 19 February
1913. Or 1915?


Bellarmine University, private Catholic university; no CWFN; not on current faculty list


“will hold in confidence” is mandated by Health Insurance Portability and Accountability Act; “I will not take or knowingly administer any harmful drug” still a vital component of nursing care, asks nurses to reflect on importance of work of FN as well as tenets of pledge.


Convalescent Hospitals 51- GOS had one, Cromwell House, Highgate, in 1878, All Saints Conv Hosp in 1869, Eastbourne by nursing order All Saints. FN a “powerful advocate” of conv homes, every hosp shd have; 56: Cambridge Military Hospital, Aldershot, built
on a hill to sweep away infection, opened July 1879, long corridor; closed 1990s. Has pic of Leeds Inf, acc 296, one of the largest early pavilion-plan hosps, a block system with detached bldgs; North Staffordshire Infirmary, Stoke on Trent pic; 26: very odd on FN and nursing “Historians no longer interpret the rise of modern nursing in terms of the influence of Florence Nightingale alone. The reforms in nursing that Nightingale advocated were already around at the time she went to the Crimea.” rec: Emrys-Roberts, Meyrick Cottage Hospitals 1991.


-- “Letters to a Friend.” Nursing Times Nov 8 1973:1474-76;


Moore, Judith. A Zeal for Responsibility: The Struggle for Professional Nursing in Victorian England, 1868-1883. Athens GA: University of Georgia 1988. U Sask. St John’s House and KCH, founded July 1848 as “Training Institution for Nurses in Hospitals, Families and for the Poor” Elizabeth Frere the first lady supt; crisis of 1874 chapter. U Sask. Covers how order carried on after Jones left; Lister, increased costs as a result of his apptment; 107 sisters became imperia in imperio, inflexible rules; 108: sisters “resented the extra work antiseptics gave them, the endless washing of basins and mackintoshes”, but they were familiar with antiseptic surgery; Chapter 6 Public Debate, 63-83, or 2 chapters 63-97 chapters 6
and 7; chapters 9 to 12 on KCH 101-5


Morris, Helen. *Portrait of a Chef: The Life of Alexis Soyer, Sometime Chef to the Reform Club*. Oxford: Oxford University Press 1980 [New York: Macmillan 1938]. 221 pp. Lots on FN; recounts Soyer going to Koulali to fix up kitchens after Scutari; 141: Lady Stratford took him to inspect, 3 smaller kitchens, fleas; 142: main kitchen at Barrack Hops perfect darkness, smokey, fuel wasted; Sisters of Mercy cooked in tiny extra diet kitchen, 143: esp rice pudding; Miss Taylor, Soyer 146: Stanley left (went to parties with Lady S) Miss Hutton asked Soyer back; 147: embarked 2 May 1855; 149: FN appearance 150: Balaclava, Eliz Davis hard working cooked breakfast lunch and dinner; 152: sanatorium on Genoese Heights on 2nd day; 159: Soyer’s plans always approved by those in authority, but not
carried out; FN at naval hosp at Leander; visited with doctors; 160: Peter Morrison with Soyer; Thomas drummer boy; 205: tribute of FN to Soyer  
75: Soyer and soup kitchens for Ireland; 137: Aunt Ju had attended his classes De 1846 for cheap soup 138: FN showed Soyer around  
173: FN well again; 183: Soyer got Crimean fever  
193: Soyer bought carriage FN used  
195: produced recipe book after the war, with help of Warriner wrote Instructions to Military Hospital Cooks; used Wellington Barracks as model for kitchens;  
Morris, Henry. The Life of John Murdoch, LLD, The Literary Evangelist of India. Christian Literature Society 1906. has FN letter in ptexts, and diary excerpts of meetings with FN.  
(during stay of Murdoch in England, “Declining Years” 1885-95  
During his stay in England on this occasion Dr Murdoch was much gratified by making the acquaintance of Miss Nightingale. He had sent some of his writings to her for her inspection and advice, and she had confessed her satisfaction with them, and especially with those on sanitary subjects. At her desire he had an interview with her and he thus notices it in his diary:  
On Friday evening July 16th 1886 had a long interview with Miss Nightingale. She as very pleasant. Was pleased to hear that she had circulated thirty copies of my letter to Lord Ripon, and given copies to Lords Dufferin and Reay. But was chiefly delighted to hear that she and Dr Sutherland, secretary of the Army Sanitary Commission, thought that the Way to Health was the very book they could send to Lady Dufferin, who wished to get out a series of simply sanitary tracts. Mss Nightingale had applied for a list of books used in schools on hygiene and promised to let me have a copy. Went away greatly pleased. Hope good may come out of my visit. Anyhow, Lady Dufferin’s proposal is excellent. (218)  
(Murdoch) subsequent letter (219): July 19th 1886. I was pleased to learn that Miss Nightingale was going to send the Way to Health to Lady Dufferin, as the best she knew suited to India. She has kindly given me the names of books on the subject likely to be useful. She has applied to government for a list of the textbooks used in the home schools and training colleges. While there is considerable improvement in the municipalities, things remain as they were in the villages. I told her of the collector of Coimbatore (Mr A. Wedderburn) who made efforts in this
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On Friday evening July 16th 1886 had a long interview with Miss Nightingale. She as very pleasant. Was pleased to hear that she had circulated thirty copies of my letter to Lord Ripon, and given copies to Lords Dufferin and Reay. But was chiefly delighted to hear that she and Dr Sutherland, secretary of the Army Sanitary Commission, thought that the *Way to Health* was the very book they could send to Lady Dufferin, who wished to get out a series of simply sanitary tracts. Mss Nightingale had applied for a list of books used in schools on hygiene and promised to let me have a copy. Went away greatly pleased. Hope good may come out of my visit. Anyhow, Lady Dufferin’s proposal is excellent.

(Murdoch) subsequent letter (219): July 19th 1886. I was pleased to learn that Miss Nightingale was going to send the *Way to Health* to Lady Dufferin, as the best she knew suited to India. She has kindly given me the names of books on the subject likely to be useful. She has applied to government for a list of the textbooks used in the home schools and training colleges. While there is considerable improvement in the municipalities, things remain as they were in the villages. I told her of the collector of Coimbatore (Mr A. Wedderburn) who made efforts in this direction.


Morrison, Adele Sarpy. *Memoirs of Adele Sarpy Morrison*. Private printing 100 copies. St Louis: Woodward & Terman 1911. Ref to Nightingale wrap being used in “Miss Nightingale’s London Hospital in 1862” knitted. Author (1842-1925) Julie Ann Sarpy married to JLD Morrison, 96: “Florence Nightingale” re her death; “I visited Florence Nightingale’s hospital in London; I think it was about ’62, along the time that the famous Nightingale wrap or--what shall I call
it?--a shoulder protection was introduced to put about soldiers' shoulders when they were seated in bed. Her name was on the lips of every 97: one, and I saw her near enough to be able to distinguish her features and to form the idea that she was rather masculine looking, possessed of a chin evidencing the strength of Samson. She has gone to her last resting place, and peace be unto her, but let there be generosity enough in the hearths of all men to hand down to posterity a feeling of deepest love, gratitude and respect for those who work only for the glory of God and the succor of their fellowman. She herself was generous enough to say that she had learned much through the example set her by those holy souls." [good grief. NO]

Mortimer, Barbara. “Introduction: The History of Nursing: Yesterday, Today and Tomorrow.” in Mortimer, Barbara and McGann, Susan, eds. New Directions in the History of Nursing: International Perspectives. London: Routledge 2005. 1-21, swamped pre 19th cen, medieval. praises reassessments of FN; 4: “Monica Baly made a cool re-assessment of the impact of the Nightingale School on nursing and nurse education.” Nasty; has lots more on Seacole qv, also on Eliz Davis,


434: “patience, heroism and manliness of our soldiers, in many wars, “recall the noble testimony of Florence Nightingale respecting the English soldiers in the Crimea. She writes: ‘I have never been able to join in the popular cry abut the recklessness, sensuality and helpless of the solider. I should say, and perhaps few have seen more of the manufacturing and agricultural classes than I have before I came out here, that I have never seen so teachable and helpful a class as the army generally. Give them opportunity promptly and securely to send money home, and they will use it. Give them books and games and amusements and they will leave off drinking. Give them work and they will do it. Giver them suffering and they will bear it. I would rather have to do with the army than with any other class I have ever attempted to serve.” Chambers’s History of the Crimean War p. 508.
P 44: 40 nurses accompanied and 50 followed, Stanley
45: testimony to RC
41: FN letter to Wylie reproduced
275: FN “angel of mercy”
Instructions to the nurses “sound strangely unhygienic today: ‘The nurse should have a warm dark gown that from time to time will wash and which they do not fear to soil’ and again ‘It is possible to be far too clean and respectable for the work that has to be done.’ Florence Nightingale had something to say on this subject; one of the Mission’s treasured possessions is a letter which she sent to Mrs Ranyard with a cheque for £20. It reads, ‘A small gift for the Biblewomen Nurses with Florence Nightingale’s deepest sympathy for the noble attempt to provide nursing and cleanliness for the very poor; with gratitude to God and fervent prayer for its extension and progress. And if she might hint a wish it would be that this little sum should be expended in waterproof cloaks or washing gowns for summer and washing linen sleeves to take on and off, and washing aprons or washing money for two or three of the nurses in the very poorest district, where there is no local lady to look after these 11: things for the nurses.’ That was in 1875 and showed the progress which had been made for, in spite of her shortcomings, the Biblewoman nurse had come to stay. Soon she was acting as an unofficial sanitary inspector and many reforms in housing the poor could be traced to these humble women who strove to take cleanliness and godliness into places where men feared to enter. 189 Mrs Ranyard died and Council asked her niece Mrs Selfe-Leonard to succeed. Had worked in all branches

Moten, Matthew, The Delafield Commission and the American Military Profession. College Station TX: Texas A and M University Press 2000, numerous FN refs, 118; 3 sent by Jefferson Davis to Europe and Crimea re army; slow travels and many interruptions, finally got to Crimea and a few days at Scutari. Met FN, knew of from Russell stories; lots of fleas 152: Alfred Mordecai fell ill Oct 22, then to Constantinople, 153: “For a day or two he convalesced at a British field hospital, attended by Florence Nightingale, who had done so much to remedy the conditions Russell had reported. She was ‘a lady with a very pleasant & good face - still young - pretty .... Her manner very modest & ladylike .” at hospital thanked her as an American soldier; made special mention of her in his report. (Endn19) 196: Delafield surveyed medical matters, noted FN’s ‘commanding influence’ on military medicine; Mordecai letters to wife; 230: endn19 Patrick Fraser to FN 29 October 1855

and then prescribed tonics to restore to health; “The effectiveness of these treatments was uncertain; indeed, many patients lost their lives at the hands of doctors employing these drastic methods. Many Americans preferred these harsh therapeutics and found them to be a psychological remedy as well. However, by mid century, physicians moderated their use of medication and therapy.” generally believed epidemics caused by atmospheric conditions containing effluvia and miasmata or poisons secreted by those suffering from contagious diseases as smallpox. Only small minority espoused version of germ theory; 4: NY Hosp the second oldest in US; 20: nursing less than desirable

ch 2 NY women and the civil war

has tables with annual mortality rates Bellevue and NY York 1850-1920, Appendix V 1850 Bellevue 12.1 NY 11.6 and stay much the same

1920 8.3 Bellevue, 6.8 NY


177: The Nightingale, from poem; journal


Chapter 1 “‘Raise up Some Florence Nightingales’” 1-2

The Civil War phenomenon did not continue in the years immediately following. After South’s surrender, both Bellevue and New York Hospital resumed daily routines like others of 1850s but several changes imminent, one a direct result of the Civil War was est of a Training School for Female Nurses at Bellevue, “revolutionized hospital nursing first at Bellevue and later in hospitals throughout the world.”

medicine made progress, anesthetics

Chapter 3 “The First American Nightingale School: A Revolution in Nursing” 37-39

37: Expanded the function of the Am hosp, making it both a middle-class and a charity inst. “The transformation of the hospital yielded a professional ability that was and is identified with women.” Before Civil War, Bellevue mainly charity cases; in 1869 Bellevue est first Am ambulance service, inspired by the war; 38: charities commission

“The Civil War increased doctors’ awareness of the potential of using intelligent women as nurses, but real reform did not occur at Bellevue before 1873. In 1866, the annual salaries of the
orderlies and nurses of Bellevue were raised to $168 and $120 respectively.” Cared for as many as 800 to 1000 patients.

“Although Bellevue’s medical men recognized the need to improve the quality of nursing care, they did not attempt to train nurses or to study 39: Florence Nightingale’s work to improve nursing care in English hospitals.” Med board attempts. Mortality rate at Bellevue soared to about a quarter of the population of these wards, pyemia. New York Hosp

Mount, Ferdinand, review, “Lord Cardigan’s Cherry Pants,” London Review of Books 20 May 2004:9-10; a review of Ponting, The Crimean War 10: “As for Florence Nightingale, according to Ponting, she was a bad-tempered, scheming, egotistical hypochondriac, and the death rate at Scutari was far higher than at the hospitals run by the unassuming Sisters of Mercy who had none of Nightingale’s high social connections. Here, too, Ponting follows the now-established picture etched by F.B. Smith’s hostile biography of 1982. Like Smith, Ponting fails to grasp both how witty and how self-mocking Nightingale could be, and how purposefully she undertook the manipulation of the elite in order to bring about systematic reform of the nursing profession.” Strachey understood her mastery of PR. “Nightingale has been accused in recent years of being a drug addict, a rabid Tory, a diehard opponent of women’s suffrage. The first volumes of Lynn McDonald’s edition of her collected works (2001-) establish easily enough that she was none of these things, but the denigration will, I’m sure, carry on regardless. The levelling, rancorous eye never closes.”


Mundinger, Mary O’Neil. “Florence Nightingale.” Joint Commission on Accreditation of

Munro, Cindy L. RN PhD ANP “The ‘Lady With the Lamp’ Illuminates Critical Care Today.” American Journal of Critical Care 19,4
(July 2010):315-17. positive, exaggerates, 315: “Under her direction a triage system for wounded soldiers was established,” on which cites Gill and Gill [triaging] 13: germ theory not widely accepted until late in her lifetime [yes] expressed doubts about its validity, cites 1912 NoN! 14: “She kept extensive and accurate records of military hospital conditions and mortality and differentiated deaths related to hospital conditions.” [No, used data, post-war] “When she arrived at the Barrack Hospital in the Scutari military hospital in Crimea, the mortality rate was 42.7% after initiation of better sanitation and nursing care, the mortality rate dropped to 2.7%” note 4 H. Ellis on evidence-based (use for adulation)

Murchison, Charles. “On the Isolation of Infectious Diseases.” letter to editor, reply to FN and review. Medical Times and Gazette (20 February 1864) 210-11. 210: separate wards ought to be provided for in general hospitals; med students ought unquestionably to have the means of studying all infectious diseases, even smallpox, not “not to be treated in the same wards with the ordinary patients. “It is interesting to remark that the proposed bldg is to stand on the top of a bleak hill that it has five stories, including the basement, that it consists of one block only, the long axis of which lies east and west, and that every ward has a row of large windows facing the north. Yes till be able to judge how far these peculiarities agree with Miss Nightingale’s published opinions. It is true that the architect has never built a hosp at all before, and probably that he never saw the inside of one until he began this work. 211: “Until we can build hospitals in which such occurrences cannot take place, we ought not to put cases of infectious disease in the same wards as other patients.” “Valuable lives ought not to hang upon the absolute perfection of hospital nurses. That much may be done towards preventing the spread of fevers by thorough ventilation, necessary for the purpose would be absolutely fatal to many of the patients in the wards of a general hospital--to patients, for example, suffering from bronchitis or acute renal anasarca.” also, attendants even in a well-ventilated fever hospital at greater risk than in a general hospital. Typhus example

Murphy, David. Ireland and the Crimean War. Dublin: Four Courts Press 2002. FN 262 pp. FN xiii xvi 111 113-14 125-8, 134-7, 179 229; Bridgeman 124-8, 134 Intro xiii: Cr war one of most important events of 19th cen, lady of the lamp; not studied by Irish historians xiv, Bolster only source on Irish theme Irish Nursing Sisters in the Crimea 124-29. Now a considerable history, Doyle 125: nurses for medical, not spiritual work; FN to Lefroy remarks on economy aspect; first contingent 25 nuns, Sisters of Mercy and 5 Sisters of Charity (Norwood); 11 nuns from different Mercy
houses in Ireland; joined by Liverpool and Chelsea in London; 126: under Bridgeman; the Moore group formed good relations with FN, Mary Stanley, FN’s one-time friend now “nursing rival.” “The ill feeling Nightingale felt for Sir M Francis Bridgeman and her nuns was, perhaps, motivated by this association. Sr M Francis Bridgeman was also a woman of some experience and was used to being in a position of authority. Nightingale, a comparative novice in the field of nursing, saw Bridgeman as a threat. NO NO The second party of fifteen Irish nuns also refused to be split up and be distributed among the various hosps. “FN wrote SH about, “uncanonical” FN had gone to Dublin “to investigate the possibility of entering the order herself. This was the result of the brief flirtation that she had with Rome. During her time in Dublin, Florence Nightingale apparently witnessed some incident in a hospital which left her permanently disenchanted with the Roman Catholic Church. She later referred to a ‘terrible lesson learned in Dublin,’ and her interest in the Sisters of Mercy disappeared.” Cites WS p 103. BUT no plan to be a nun, but only to get hospital experience. 127: opening at Kulali Jan 1855 [Koulali] relieved much tension, Bridgeman took 10 of her nuns to it, leaving 5 with FN at Scutari, but insisted the 5 be under her control. They carried out heavy nursing work. YES; No mention of death rates at Koulali. Then Oct 1855 to Balaclava. “They soon established a reputation for nursing efficiency at the hospital at Balaclava. Modern research has shown that a soldier was more likely to die at Scutari than at the Balaclava hospital and it is perhaps a pity that Florence Nightingale could bring herself to form an alliance with Sr M Bridgeman in order to make use of the nursing experience of her party of nuns.” Good grief. Balaclava Oct 1855 after the worst of the war. 2 died in Crimea. Left 12 April 1856, No mention of reason 128: other Irish “lay nurses who worked in the army’s hospitals under the direction of Florence Nightingale and Mary Stanley” Alicia Blackwood, née Lambert, sister of the 5th earl of Cavan, worked with FN at Scutari 129: “The Crimean war still remains the blackest period in the history of the British army’s medical services.” Taught hard lesson. 134: Jesuits. Ronan 179: it was Chenery, corr at Constantinople, not Russell, responsible for FN mission, 229: “Both Florence Nightingale and Lord Cardigan have, despite their relative lack of success, taken on an almost iconic status and this creates an imbalance in the historiography of the war.” no mention of her post-war work!

Murray, C.J.L. and Lopez, A.D. “Measuring the Global Burden of Disease.” (1 August 2013)


Myers, Paul and Mike J. McNicholas. “Improved Data Illustration n Complex Multiligament Knee Reconstruction Surgery: Using the Historical Principles of Florence Nightingale and John Venn.” Acta Orthopedica 79,2 (2008):244-48. Online. “She revolutionized the idea that social phenomena could be subjected to mathematical analysis, and using statistics, she graphically illustrated the need for sanitary reform.” John Venn (1834-1923); applied principles of both to database on multi-ligament knee reconstruction. Cites Matters affecting

Myers, Pamela and White, Sheila. A Legacy of Care: St Mary’s Convent and Nursing Home, Chiswick 1896 to 2010. 2nd ed. London: St Mary’s Convent 2010 [1996]. Refs all pre 1996, files of convent missing for long period. Breakdown addressed by Frances Wilde (21). Odd connection with Stephen family, Lady Mary Hermione Stephen, tho with no nursing training (56) sister in law next door was Barbara Stephen, da of WSS, given title “honorary matron” to Nursing Home. 57: Stephen family let convent use Lea Hurst in WW II; refs to Jones and Rathbone corr; 13: when break up in 1868 Jones left with 6 our of 8 sisters, and 1 associate. Sophia, Frances Wilde, Laura G. Elizabeth and Sarah (15). Community of St Mary and St John Evangelist, as of 1868, 5 Mecklenburg St., then in 1873 St Mary’s Convent and Nursing Home, St Joseph’s Hosp for Incurables (17) 39 Kens. Sq.; amalgamation with St Margaret’s E. Grinstead in 1909 considered, achieved in 1910; another row with church authorities in 1902 (30)


Nagai, Kaori. Florence Nightingale and the Irish uncanny.” Feminist Review 77,1 (2004):26-45. very hostile coverage, FN had to erase. “These Irish nuns not only embodied the memories of the Famine which they had recently relieved, but also threatened Nightingale’s single female authority by representing Ireland as a nation through their equally motherly presence. The service of the Irish nuns in the Crimean War was erased from the myth of the Lady with the Lamp. Nightingale could establish herself as an authoritative female subject and assumed the voice of England only by suppressing another female voice which challenged England’s competence in Home management.”

Naipal, V.S. *An Area of Darkness.* 1964. p 81: “His (Gandhi’s) failure is there, in his writings; he is still the best guide to India. It is as if, in England, Florence Nightingale had become a saint, honoured by statues everywhere, her name on every lip, and the hospitals had remained as she had described them.

Nash, Rosalind. “Preface.” *Florence Nightingale to Her Nurses: A Selection from Miss Nightingale’s Addresses to Probationers and Nurses of the Nightingale School at St Thomas’s Hospital.* London: Macmillan 1915 [1914].


National Florence Nightingale Committee (Australia) archives. Royal Australian Nursing Federation. 1946-93, admin records of comm, re National Scholarship and Florence Nightingale Oration. created in Melbourne by various state FN committees

National Florence Nightingale Committee. FNIF est 1934. Committees formed in many counties and states. College of Nursing, Australian created. 1992, special working party set up between reps of the National Florence Nightingale Committee and the RCN to administer the dissolution of the committee and transfer its assets to the FN Memorial Trust. Final meeting 15 July 1992. Trust launched 19 May 1993, to be administered by the RCN


Neary, Marina Julia. *Lady with a Lamp: An Untold Story of Florence Nightingale.* Fireship Press 2009. Drama. A stageplay 94 pp; abstract: FN a saint to her patients and “a frigid spinster to her colleagues” finds solace in company of Tom Grant, a haggard physician with a sinister reputation; cerebral romance


Negodeeff-Tomsik, Margaret. *Honour Due: The Story of Dr Leonora Howard King.* Ottawa: Canadian Medical Association 1999. On first
Canadian medical missionary in China, a woman, educated U Michigan. Methodist. Has several snide refs to FN. First woman to practise medicine in Canada was disguised as a man, (Miranda) James Stuart Barry, who had sanitation concerns (5), after S African, got med degree at Edinburgh as a man, 5: “Life Florence Nightingale toiling away in the Crimea, Dr Barry was aghast at the equally sorry lot of regular army troops, whose mortality rate, due to disease and malnutrition, not active service, was almost double that of civilians.” Barry antagonized many on. “In this sense Dr Barry resembled Miss Nightingale, who fought bitter battles 6: against army doctors and governments alike. “Florence, the ‘Lady with the Lamp,’ had steppe don so many toes that she had almost been tricked into sailing on a ship, supposedly bound for her Crimean hospital, but in fact on its way back to England to get her out of the way.” [no mention that she was ill] 6: FN “did not believe that women should be doctors”. Barry left reforms in South Africa, Mauritius etc. “Her legacy, combined with Miss Nightingale’s, had changed the face of the medicine that young Leonora Howard was about to study, forever and for the better.” [does not say what] 7: Barry kept FN standing, given a scolding, behaved like a brute [no source given]. “Not to be too hard on Dr Barry, Florence Nightingale was known to be self-centred, incapable of accepting criticism, and could not herself bear to be denied whatever she asked. Used to the flattery of upper-crust Englishmen, even Queen Victoria’s adored consort, Prince Albert, she must have been horrified at such uncavalier treatment. It is interesting that she who was a wizard at manipulating then was repelled by one who was so very ‘masculine.’ Perhaps she sensed something the others didn’t.” In Lower Canada Barry got sewers and rains fixed. Army hosps, harridans as “nurses” Barry and FN upset, and Howard 20 years later, she would go on similar mission, no drainage, no hosps, to change the lives of millions. 8: Emily Jennings Stowe. First woman to practise in Upper Canada. 14: on medicine of time, purging, calomel, women doctors, except Barry, focused on female diseases; 15: chloroform, 1876: carbolic acid tr of Lister opposed in US, [cites one source on] 16: diseases of ague (malaria), cholera, consumption, quinsy (acute tonsillitis) dyspepsia (indigestion, might be ulcers or stomach cancer) diarrhea, black vomit (yellow fever) and rheumatism; Asiatic cholera killed a lot; 17: birth control and abortion.

NEJM 265 (13):606-14 1961

history of nursing,”... vocational wave. “According to Catholic legend, the first nursing mission in England and Scotland was begun by the Irish Sisters of Mercy in 1838 at their Bermondsey convent in the East End of London.” end 3. Catholic Emancipation in 1829 the critical event, stimulated foundation of first convent in England since the Reformation, and the foundation of the Sisters of Mercy in 1831. Endn4

57: Catholics barred from public life, military, and university. In Ireland te Penal Code severe. Seduction of Prots. Got prominent converts. Role of Moore 61: est 22 foundations endn42, hospital creche and night shelter and hostel for women endn43. Continued “to nurse the sick poor in their houses, provide nursing care to members of the wealthy classes and ailing clergy” and them Crimea. End 45. Benefactors plentiful

Nelson, Roxanne. “The Lady with a Lamp and a Few Secrets.” Geography Magazine. January 1999:63-67, 116. Asked readers to “think again” when considering N, “a semi-invalid who clung to Victorian mores, actively lobbying against treating nursing as a profession and dismissing women who fought for equality.” While ack that she “launched a famous nursing school,” it reinforced rigid class distinctions” Moreover N “refused to recognize the discoveries of modern science.” Failed to recognize that not everyone had a wealthy father doling out a substantial allowance (216).... And throwaway remark about being “brutally indifferent to the rights and wrongs of my own sex” as her “general” position

Nelson, Sioban and Anne Marie Rafferty, eds., Notes on Nightingale: The Influence of a Nursing Icon. Ithaca NY: Cornell University Press 2010. 172 pp, slim! Foreword by Rachel Verney, Visiting Assoc Professor of Nightingale School at King’s August 2009; “Ms Verney’s great great grandmother was Florence Nightingale’s elder sister (Frances “Parthenope Verney (née Nightingale ) (1819-1890).

On 15 August 1945, a short time after the emperor’s national radio broadcast announced the unconditional surrender of Japan, a group of nurses at a military hospital at Hiroshima gathered at the order of heir commanding officer, the chief medical officer. The young women, exhausted and terrified after nearly two weeks of unimaginable suffering following the dropping of the world’s first atomic bomb, “Little Boy,” at 8:15 a.m. on 6 August. Over those nine days they had seen thousands die (piteously begging for water), they had nursed patients through horrific burn and trauma injuries, and finally, as a mysterious rash began to appear on the bodies of survivors, they had watched as many began to suddenly collapse and die.

10: dread of occupation Hiroshima Red Cross Hospital, “the pledge seemed to settle the nurses’ terror, to remind them of their duty and purpose, and to give them the courage to continue. Under
orders, the nurses recited the pledge aloud twice a day for the next week.
cared for the Atomic Bomb Victims in Hiroshima from August 1945
to the End of the War” Univ of Sydney 2008. [the hosp spared
miraculously, lost windows; but reminiscences of nurses on
internet do not mention pledge]
Has good article by Helmhstadter, Godden 55-75 good (except Sir
Sidney Herbert on p61) and “military style discipline 61);
Magnello “Passionate Statistician” does not cite CW, or Richard
Stone, and has numerous glitches: Sir James Clarke the family
physician (119); the “Institute for Gentlewomen during Illness”
and cites FBS as an expert (119-20); 126: says FN successful in
getting a Census question on illness, and implies success also on
getting the housing question!; uses sec sources and primary
printed sources, but no archives or CW; intro has me described as
“Canadian women studies scholar”!!

Nelson, Sioban. “Humanism in Nursing: The Emergence of the
Light.” Nursing Inquiry 2,1 (March 1995):36-43. Looks at
spiritual aspects, transformation of poorly trained nurses into
trained and uniform persona of modern nurse, part of nursing
mythology. Uses Foucault and Marcel Mauss, nursing that precede
19th cen-reformers reexamined and continuities between current
and ancient explored. Dev of practices or technologies for care
of sick originated with est of hospitals in 4th century as part
of pious Xn practice; “Current practices of care and the
discourse of holistic nursing are argued to have grown from these
traditional Christian technologies of care. Humanist or holistic
nursing represents the enshrinement of the Christian ethos--freed
of doctrine the discourse of caring a redrafted Christian
discipline of love.”

Neuhauser, D. “Florence Nightingale gets no respect, as a
statistician, that is.” BMJ: Quality and Safety in Health Care 12
(2003):317
FN known as the founder of modern nursing, but is ignored as a
healthcare research methodologist of the highest skill. Was
“passionate statistician” responsible “for the most remarkable
hospital quality improvement project ever carried out and, as
shown by her careful quantitative documentation, of both the
process and outcomes of care.”
Detailed stat report, 5-fold causes: frightful overcrowding,
want of vent, drainage, cleanliness and hosp comforts. Quantified
and measured. Cf space per patient in London; windows opened for
first time and drains cleaned. Handcarts of filth.
“She recorded the outcomes of care. The death rate among the
patients was worst in February 1855 at 42.7% of all soldiers
admitted. After her sanitary reforms, which started on 17 March
1855, the death rate fell to 2.2% by June 1855. She showed a
causal link between the sanitary reforms and this dramatic fall in mortality." wd have thought this wd be sufficient. No. PMO said due to improved cases coming

“In addition to these before and after outcome measures linked to process reforms, Nightingale found two concurrent control groups. Her genius led her not to pick similar control groups but choose those purposely to be non-comparable in that their differences were biased against her hypotheses. To show how bad Scutari was at its worst, she found a sicker group of soldiers. To show how healthy Scutari and the soldiers in the Crimea became, she found a presumably healthier group. (But took comparable groups, mil hosps and Manchester men)

For the first comparison she chose soldiers too badly wounded on the battlefield to be put on the transport ships and who were cared for in the Crimea. (NO, the worst cases sent) These soldiers, too sick to move, had a mortality rate of 27 per 1000 compared with 427 deaths per 1000 at Scutari at the same time. To demonstrate the results of the improvements, she compared the mortality at Scutari with the best hospitals in London and the mil hospitals there where the mortality rate was higher than the 2.2% rate at Scutari. She went on to show that the death rate of all Br soldiers in England was higher than those in the Crimea by the end of the war and after her reforms. (Sand com reforms) The obs became the basis for her call for health reforms for the entire Br army. (Not quite, for civil hosps, also, and for using sc well) The inadequacy of the army’s healthcare data analysis led Nightingale to call for “The absolute necessity of a stat dept.” Her reform efforts contd throughout her long life. (Lots wrong on this!)

FN threatened to publicly distribute her 1858 Notes on Matters affecting unless govt appointed a royal com empowered to make improvements (Not quite), was crated and Notes never distributed. Today “a very rare and ignored book” cites republication (yes) Cites only Vicinus and Goldie letters (Use for adulation)

New York Tr School for Nurses, at New York Hospital, had classes at end of last cen,

Newdigate C of E Endowed Infant School. 2012. Christian school “Florence Nightingale visited Newdigate Infant School, complete with lamp and the children questioned her about her experiences in Scutari Hospital during the Crimean War. Pic of her in blue uniform, white apron and cap


Newman, George. “The Florence Nightingale Oration by Sir George Newman (abridged),” British Journal of Nursing (1937):212-13. Ends “I belong to the profession of medicine, allied to the great sisterhood of nursing, for to know each other and to understand each other is always and every time to make a juster judgment of each other.” Vote of thanks by Swiss minister, Charles Paravicini


Nielsen, Josh. The War Correspondent of the Cr War. 2006. Dissertation

Nightingale Pledge. “I solemnly pledge myself before God and in the presence of this assembly to pass my life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession, and will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavor to aid the physician in his work and devote myself to the welfare of those committed to my care.” Extract from Dock and Stewart: *Short History of Nursing*

grounds, lack of direct visual supervision of patients; clinical objections lack of fresh air and daylight; mechanical vent and efficient artificial lighting not adequate shd be “sufficient to dissipate stale germ-filled air and effective natural lighting; hospital shd get patients out healed as quickly and effectively as poss, “her approach to ward design was an extension of her nursing philosophy. Her ideas on nursing training and procedures, still being used today, proudly affected her ward design. Her careful analysis of patient, nursing and medical needs left to a large ward which allowed identical procedures to be conducted from bed to bed with constant supervision from a central position.” assembly line, mid 1950s large open wards became “socially unacceptable to the post-war affluent society” 48: but William Tatton-Brown, chief architect of DHSS was a patient in a Nightingale ward at St T and MARU research on “challenged some of the assumed drawbacks of Nightingale wards.” (MARU evaluated 3 ward designs spanning more than a century at St T, from 30-bed ward of 1871; to 4-bed bays with central corridor 100 years newer, single rooms and modern ancillary rooms; to 5 year old north wing, fully air cond, multi storey only 4 30-bed wards to floor, in a mixture of single rooms, 4-6 beds; patients did not feel lack of privacy or lack of dignity, nor greatly disturbed by each other, many positive advantages emerged; physical unity, ease of visual communication, people identified strongly with ward and each other; 50: no attempt to recreate the 30-bed open Nightingale ward because restrictions on usage and current fire regs make that size of bed space impractical; 2 12-bed wards, small number of single rooms; Nuffield studies on -Y- shaped ward embodies FN principles of direct visual supervision combined with reasonably modern ancillary rooms, but noisy; 51: MARU found most significant drawback to the N ward was inadequate ancillary rooms; debate now centres on nature of the bed areas itself; few patients concerned about lack of privacy; on the contrary positive social and psychological advantages in a large group. “The background noise and activity meant that private consultations on doctors’ rounds were not generally overhead by other patients, unlike in the quieter four-and six-bed wards.” Noise; but acoustic control can be achieved; “The high ceilings required by Florence Nightingale to ensure adequate fresh air are not necessary with modern heating and ventilation.”


State medicine today: no decrease in spending on health bldgs because of the massive scale of the problem. 50% of UK 2600 63: hospitals are 50 years old; DHSS answer to govt call to provide new hospitals economically and quickly is the Nucleus hospital
the culmination of 20 years of research; Nucleus ward, is controversial "in the light of recent evidence which showed that many doctors, nurses and patients preferred the Victorian ward plans of Florence Nightingale to contemporary designs including Nucleus." Rate of health bldg in UK "We were once very advanced in medical planning ideas (Florence Nightingale) and had the prosperity and political framework to implement them. The high quality of these old buildings and the fact that we won the last war have much to do with why we are still coping with the Victorian legacy, in contrast to European countries that started to rebuild in 1945." UK has led world in health bldg research since 1945; NHS creation in 1948 provided the impetus for govt financed research, complemented by King’s Fund ad the Nuffield Inst. 64: NHS owns vast tracts of land.

65: “The first real research into the factors affecting detailed design in hospitals carried out since Florence Nightingale’s Notes on Hospitals” 1863 by Nuffield, 1955; MARU Medical Architectural Research Unit replaced it as most important public centre;

Nucleus ward
66: Nucleus hospital; 71: going private. Wellington Hosp London NHS had niche for private practice “in a hard fought for deal whereby doctors, mainly senior consultants, cd treat private patients in special ‘pay beds’ within the new NHS hospitals.” compromise appeased BMA, provided a working env “for all but the most ambitious doctors.” pay beds before nationalisation; 95% nationalized in 1948; provident assocs had provided insurance to cover stay in pay beds; after 1948 system continued in a reduced scale at first, but emergence of postwar managerial and professional classes; BUPA landmark launch in charitable chain of nursing homes, Nuffield Nursing in 1957; Arab money and foreign inv in early 1970s, takeover of Harley St Clinic by American Medical International AMI; at present about 4 M people covered by private health ins in UK, 3 M in BUPA; 72: Americans providing the new for-profits, medi business

Nightingale credited with studying and coming to conclusions on the data during the war, when she did not begin this until after it.

Nightingale, F. Notes on Nursing.
Groves, Joanna. Foreword (CEO International Alliance of Patient’s Organizations) preface, Hiroko Minami, pres ICN. Elsevier.


book. Elmer Belt; London: Forgotten Books 2013. 165:171 to Balmoral Castle. When queen inquired about her work, “during the first seven months of the Crimean campaign, the mortality rate from disease alone had been sixty percent, ‘a rate, Your Majesty, which exceeds that of the Great Plague in London, a higher rate than the mortality in cholera.” same quotation from Kai as in Robb.

701: BH ¼ mile from landing place. Lack of beds, etc.
702: “The next thing required by the patients was a suitable classification of their cases. Nothing could be more absurd than to place men in Crimean fever, or cholera, beside those who were suffering from overwork, or cold, or wounds, but all were huddled together, just as vacancies occurred for them, and as chance ruled. A wounded man might have within thirty inches (the space allowed) of him at one side a person with ‘Varna fever’ and within the same distance on the other a victim of dysentery.”
Means of cleanliness one wd suppose wd be provided, but
703: Dr Cumming (negative on, vs extras)
Morning Advertiser pub wounded and diseased up to Feb 1855. Data.
704: SH, Roebuck. SH defended measures in Commons, defied Roebuck and com of inquiry to discover who was to blame, and results showed that to some extent he was safe. Times....
705: nuns called “Sisters of Charity” “The ladies who were chosen out of the vast number of volunteers comprised six from St John’s House, Westminster, eight from Miss Sellon’s House of Sisters in Devonshire; ten Roman Catholic Sisters of Charity; and fourteen hospital nurses who had acquired much experience. Departed 23 Oct. Then 2nd 58 ladies. Boulogne. Scutari, quarters ref to Two Months in the Camp before Sebastopol not found. “In the outer room we caught a momentary glimpse at the justly celebrated miss Nightingale, the fair heroine of Scutari, an amiable and highly intelligent looking lady, of some thirty summers, delicate in form and prepossessing in her appearance. Her energies were concentrated, for this instant, in the useful preparation of a dish of delectable food for an enfeebled patient--one of her hourly administrations to the wan victims of relentless war, for whose relief she so readily and nobly sacrificed the comforts of her quiet happy English home....” also Spencer T. Hall
1:707 Times almoner “I was with her when various surgical operations were performed and she was more than equal to the trial. She has an utter disregard to contagion; I have known her spend hours over men dying of cholera or fever.” Stafford sat with patients and wrote letters for them.
Nordendahl, Kerstin. “Nursing in Sweden.” *American Journal of Nursing* 48,11 (November 1948):694-96. nurses trained at university hosp Akademiska Sjukhuset in Uppsala with Emmy Rappe, grad of Nightingale School, director; since 1861, one of first Red Cross schools of nursing in the world, attached to insts in Stockholm, large building rebuilt in 1927, residential and classrooms. most important reform in tr nurses realized with foundation of the Sophia Home 1884 by Queen Sophia, hospital; first matron was Alfhild Ehrenborg, like Rappe trained at N School; Queen Sophia devoted herself to her new creation, was president of the bd of directors.

Nurses Association of China. *Gems from the Writings of Florence Nightingale.* 1925. 100 pp in Chinese. not read RCN

*Nurses of Auckland: The History of the General Nursing Programme in the Auckland School of Nursing* relic from Crimean War, soldiers made piece of embroidery for FN. Reprint from *New Zealand Nursing Journal* June 1970, at National Archives, Auckland Regional Office; also a Nightingale brick. Reprint from *Auckland Hospital Nurses’ Magazine* 1937 brick from South St. From Mrs Bedford Fenwick and council of British College of Nurses; refs to flogging patients (venereal) and nurses, but abandoned;


*Nutting, M.A. “A Memorial to Florence Nightingale.”* *AJN* 11,6 (March 1911):472-73.

Nutting in 1900 introduced science and theory prior to clinical practice; 1905 AJN first published

has FN material. New York & London: G.P. Putnam’s Sons. 1907. Has long excerpts from NN. 1:208: That which makes this book an immortal classic is its teaching of sanitary truths and principles as applied in the care of sickness, and of a boundless and exquisite humaneness towards the patients; principles which will never change, while procedures, professional etiquette, and methods will.” 1:223: “Of her Notes on Hospitals, it has been said that it has “probably done more than any other treatise to promote sound views of hospital economy.” (Cited J. Foster Jenkins, “Tent Hospitals” Amer. Soc Sc. Journ. May 21, 1874. 1:223); 1:227 has Hall and lime juice (very critical of army admin and pro FN in analysis). 1:286 “So rich a combination as hers has rarely been found of dominant, masterful intellectual genius, of creative thought, of individual executive ability to transform thought into effective action, while health lasted, and, when health vanished, still to effect this transformation through a rare force of influence on others; of maternal tenderness for all helpless and suffering life, of cosmopolitan sympathies and diverse interests, of a glorious capacity for righteous anger, with kindliness, and forgetfulness of self; of free, fearless opinions. These characteristics suggest a personality of rare proportions, for whose heroic lines her keen satirical wit, Her severity of judgment of incapacity and futility, her intolerance of mediocrity and commonplaces from only the needed shade and colouring.” 4:200 on New Zealand, 4:174 on Melbourne, 3:102 on Pringle and Ireland, 3:122 on Johns Hopkins, King interview with, 3:240 Sweden 2:304 has excerpts from a prob when training began, May 1 1877, a batch of 12 probs. “Before we came there was no sort of training for the nurses, and of nursing as one understands it now there was simply none.” Mrs Drake the matron, disapproved of lady nurses. drunkenness common, from “Sister Casualty,” “League News” Journal of St Bartholomew’s Nurses’ League. No. 5 May 1902: 134--; Turton material in vol. 4, Italy 4:86- on registration 3:47: January 1896 decisive act of undoing and betrayal of the members of the association of the fundamental principle for which founded, namely, state reg of trained nurses; BMA had passed res proposed by Bedford Fenwick, for act of Parliament ASAP be passed providing for reg of medical, surgical and obstet nurses, to take steps to obtain; Parliamentary Bills Committee of the BMA invited reps of nursing bodies to confer on, historic meeting, reps of nursing Ethel Fenwick (Reg Nurses, a co-op) Isla Stewart (matrons’ Council) Bedford Fenwick, Miss Breay and A Kenealy, for, against.... 3:48 incl Burdett “that a legal system of Registration of Nurses is inexpedient in principle, injurious to the best interests of nurses and of doubtful public benefit.” passed by majority of one, vote of hon med sec of RBNA, said repr Middlesex; delegate nurses failed to save the day; did not leave assoc; 3:49

O’Brien, Mary Elizabeth, *Spirituality in Nursing: Standing on Holy Ground*. Sudbury MA: Jones & Bartlett 1999. Has coverage of FN on, all from sec sources, entirely uncritical on nuns, deaconesses work, Kai, has beginning in US in 1849 at Pittsburgh, also quotes Woolsey that have 5 year vows and expected longer, refers to training as nurses; refers to FN’s “community” in Crimea!, p 45: “Nightingale trained under Pastor Fliedner at his Deaconess School in Kaiserswerth, as well as under the Daughters of Charity of St Vincent de Paul in France.”


Xi FN beautifully said, to “often hold God’s precious gift of life in their hands”

4: FN a Christian, Bradshaw’s understanding of FN’s Christian philosophy of nursing, Sw theologian Mikael Lundmark, compares Bradshaw and Katie Eriksson who also finds in nursing central concepts of love and charity; cites Widerquist

7: ref to Clara S Weeks, 1885 textbook.... refs to sources over period into 20th cen

46- Florence Nightingale (1820-1910) Professional Nursing; “It is difficult to describe the servant leadership of Florence Nightingale, the founder of professional nursing, in a few paragraphs. From the time

47: “Florence’s servant leadership... was her greatest gift to those who would follow her.” nursing process--Dolan.

Lots of tributes to, sec lit, but not much on what she said or did

184: following FN

189: content analysis of FN’s early writings shows persuasion high. (Uses Whiteside) no use of CWFN


O’Donoghue, Paul. “Protecting the Public in the Name of Nightingale.” *Irish Times* 1 14 Feb 2013. Nightingale Collaboration set up in 2010 by Alan Hennessy and Maria Maclachlan, to share knowledge etc on healthcare advertising. Author a clinical psychologist, founder member of Irish Skeptics Society

O’Fallon, Liam R. “Fostering the Relationship Between Environmental Health and Nursing.” *Public Health Nursing* 23,5 (Sept-Oct 2006):377-80. Guest editorial 377: “Researchers and historians laud Florence Nightingale for her ability to demonstrate the link between health and environmental exposures. According to Neuhauser (2003), it was Nightingale’s ability to collect quantitative data on environmental health conditions and outcomes, as well as to conduct controlled studies to highlight the success of her interventions at a hospital in 1855, that helped her succeed in making the connection.” Since then, the connection between nursing and env health has been well documented. But concern profession has moved away from its origins and lost its connection to env health. (Use for adulation)


O’Malley, I.B. *Florence Nightingale 1820-56: A Study of Her Life Down to the End of the Crimean War*. London: Butterworth 1931. has bit on Sugg only 199: finished third book of Cassandra in January 1855, after absence of 6 month, was at Tapton; quotes Parthe to Mme Mohl re FN, no charity (199); no ref to dog and call to service; 30 has Mrs N. her dropping Unitarianism “It meant nothing to her as a system of belief, and socially it was certainly an impediment.”


Odgers, J. Collins. “‘Blessed are the Merciful’ A Discourse delivered in Ullet Road Church, Liverpool.” 21 August 1910 following the internment of Florence Nightingale.

of stats to show the impact of disease... and improved sanitary candidness; Quetelet, Farr, cohen cited. “Questions posed by Nightingale could be classified under the rubric” outcomes okay Linda Kay Tanner Strodman “The Historical Evolution of Nursing as a profession” 33-36; FN bio 57- 58-58, pledge 59, cites Osler, Dolan 37: Nightingale Era and the Birth of Modern Nursing. Cr War setting for her work 38: initiated san reforms; Cook cited; NonN in US reprinted lengthy ed in Godey’s Lady’s Book, circ 150,000 39: FN “views about health and disease involved visualizing the body in terms of being a dynamic system constantly interacting with its env. ‘Disease was no specific entity.... but rather a general state of disequilibrium. Health on the other hand, was...” Rosenberg. Disease a reparative process, goals of nurses to promote the laws of health; env 40: US, Civil War 46: pledge

Oettle, Mike. “Pioneer Nurse in Africa.” geocities website. Trained as nurse at two London hosps. 1874 went to Bloemfontein, 1876 to Kimberley, first as district nurse in mining camps, then new Carnarvon Hosp, tr in midwifery, but typhoid, so back to England. Then nurs tr at UCH; back started first tr school for nurses in Southern Africa. 1877 back to Bloemfontein, was matron at St George’s Hosp; then returned to Carnarvon Hosp. In Transvaal War 1881 (First Anglo-Boer War) in charge of mil hosp at Newcastle, Natal, and also in 1899-1902; 1890 got reg cert. No. 15 with Br Trained Nurses’ Assoc, worked with Mrs Fenwick; thanks to her pressure got Cape of Good Hope to be first leg in world to provide for nurses and midwives’ reg, through Medical and Pharmacy Act of 1891; 1892 hosps merged to form Kimberley Hosp, 1893 enlarged, nurs training; but 1895 order left to move to St Michael’s Home, maternity nursing and nursing co-op unlike FN, who became “bitter and vindictive in old age”

Oldfield, Sybil. Jeanie, an ‘Army of One’ Mrs Nassau Senior 1828-1877: The First Woman in Whitehall. Brighton: Sussex Academic Press 2009. Lot of FN letters quoted, the quotation in title from FN. Chapter 9 makes case that Mrs Senior the model for Dorothea Brooke for George Eliot, they were friends, but Senior never thought this, loved the character, conjecture; 180-81 has jointly signed “Illuminated Address” to James Stansfeld, on appointing the first woman to Whitehall: On the appointment of Mrs Nassau Senior to the office of Inspector under the Local Government Board, Sir, We the undersigned, believing that the Law of God is one and indivisible and equally binding upon all, that the one sole right of Humanity is the right to the free and responsible fulfillment of duty, that the duty of every human being is the gradual discovery and fulfillment of the Divine Law, that obedience to
the Divine Law involves the fulfillment by every human being of a threefold duty towards humanity, the fatherland and the family. That the human laws and customs which have hitherto restricted Woman to the fulfillment of the last portion of this duty only, are opposed to the design of the Almighty, who by endowing Woman with special aptitudes and faculties, complementary to the faculties and aptitudes of man, has assigned to her equally with him the duty of their full development and employment in the execution of a joint mission on earth, and acknowledging That you have been the first English Minister to recognize the great religious truths indicated above, and that by the appointment of a woman to an office of public trust and responsibility, you have taken the first step towards the practical realisation of these truths in the political system of our country, Gladly forward to you this heartfelt expression of our enduring gratitude and esteem. Harriet Martineau, Ambleside; Isabella M.S. Tod, Belfast; Kate Amberley, Ravenscroft; Amelia E. Arnold; Ernestine L. Rose, New York; Elizabeth Malleson; Emilia Ashurst Venturi; Josephine Butler, Liverpool; Florence Nightingale, London; Cath. Taylor, Hampstead; Mary Carpenter, Bristol; Eliz C. Wolstenholme, London; Lucy Wilson, Leeds; Mentia Taylor, London.

Oliver, Beryl. The British Red Cross in Action. London: Faber & Faber 1966. Good book; lots of neutralization before convention; duke of Wellington, treated French officers and soldiers made prisoners with utmost humanity, saved lives, that they mt treat our officers and soldiers well (32) and they did; 33: when Peninsular War began in 1808 Br Army w/o any efficient system of hospital transport; James McGrigor rec to Wellington to set aside vehicles for, Wellington vetoed, but McGrigor went ahead, est chain of hosps and used commissary transport; ambulance from French from Latin ambulare to walk, to designate a movable hospital; chap on Crimean War, Lindsay at, memoirs, Raglan on Caradoc; 42: John Hall caution vs use of chloroform; Hall issued Medical Memo stating ambulance equipment needed; 43 Selimiyeh Barrack made available, the General Hosp was the Turkish Military Hosp given over in May 1854, was partially equipped and soon in working order; BH had quadrangle, covered with rubbish, a morass in rain; wards and corridors paved with dirty broken stones, invested by rats and vermin, sanitary arrs appalling, had to land sick and wounded in boats on stretchers; 44 duke of Newcastle sent out hosp commission; 45 condition of men arriving, no utensils for eating, and no clothing; 46: only 1 kitchen in BH, food only meat, bread and tea, except for extras; (good coverage on FN) 52: Lindsay at Inkermann; Dunant got support at ISC;

Olivera contd
First Congress in Geneva 1863; 69: Moynier had been at congress in London 1862 and heard FN paper on SH; 94: NAS volunteers incl Hon Reginald Capel and his wife, Charles Wood, Mr Duncan and Mr Watson; Dr Chater, Mrs Chater; 95: on news of Sedan, Eugenie refused to resign the regency, then fled through galleries of the Louvre, hailed a passing fiacre and sought refuge in house of Dr Evans the dentist, drove with him to Deauville with a false passport, on Sir John Burgoyne’s yacht; substantial distribution of money and goods, equal to both sides; 98: LL met with General Trochu, and war min, got to both sides, with white flag; 100: NAS sent DG and HBC to tour hosps in Rhine district, evolved system of communication with St Martin’s Place, met with Brackenbury; and Prussians; 100: early October Marshal Bazaine capitulated 27 Oct, British wagons first to enter Metz, brought doctors and med equipment and food; 102: distress in Loire area, esp Chateaudun; at Le Mans 6000 sufferers packed into cathedral, smallpox too; Col Elphinstone; 104: late Nov Lord Granville called attention of society to deplorable condition of 400,000 French prisoners of war in Germany, exposure and lack of warm clothing, Leopold Swaine of Rifle Brigade to undertake mission, visited towns; but not in terms of Red Cross or Geneva conv, not until 1929 was conv relative to treatment of prisoners of war promulgated; cd not use badge; French soldiers also in Switzerland; 106: France signatory to convention but authorities did not take it seriously; 107: Dunant after Sedan and republic proclaimed had interview with Jules Vavre, and official announcement that Article V of convention to be observed, re help to wounded by inhabitants of country;

Oliverb contd
143: LL became fin sec to War Office in Lord Beaconsfield’s govt; Gathorne Hardy sec of state for war, in a few months Frederick Stanley; to increase efficiency of army; not until July 1878 and signing of Berlin Treat, and return of Beaconsfield and Salisbury, “peace with honour” that clearer; LL supported increasing female nurses; 146: FN selected 24 sisters to despatch to Egypt under Mrs Deeble; first recipients of RRC were FN, Lady Loyd Lindsay, Lady Strangford, Mrs Deeble and Sisters Cannell and M Fellowes of Br Red Cross Society; Egypt 147: General Gordon in 1884 sent out to Khartoum, in March the Mahdists besieged town and he cut off; no serious measures to relieve him taken until finally Lord Wolseley sent up; J.S. Young went to see about aid, arrived Nov 8 for soda water; newspapers, visited hosp at Citadel where invalids from Nile Expeditionary Force nurses, found supt Cannell, got things for her; 148: Princess of Wales, future Queen Alexandra; 156 on Turco-Greek War 1897

Olson, Christopher D. “Historical Nursing Leader: Florence Nightingale.” online. Humane Medicine. Author Bethel College Nursing School, St Paul MN
Orton, Diana. *Made of Gold: A Biography of Angela Burdett-Coutts*. London: Hamish Hamilton 1980. St Deniol’s Library M34.9 BC2. Uses 1st names for Burdett-Coutts, as in Dickens, Dr Stover and Angela; p 50 mis-spells Monckton Milnes; 151 “Angela arranged thro’ Dickens”; FN “who thought any woman who wanted to be a doctor instead of a nurse was merely trying ‘to do things just because men do them.’” ft noting Woodham-Smith.


Osborne, S.G. *Scutari and its Hospitals*. London: Dickinson 1855. Cook 2:459 available online UCLA Elmer Belt. Went to introduce himself to FN; chap 4 on ladies shd not be in hosps 2: arrived at Constantinople 8 Nov, wounded arrived next day; went to Gen Hosp with letter from SH, to Menzies, offered funds for assistance “they had everything--nothing was wanted” which “echoed the words of the authorities in England” and min for Foreign Aff had given full power to Lord Redcliffe to obtain anything on the spot for the comfort of the sick and wounded. Macdonald of Times arrived day before 21: Russian sick prisoners, more ashamed, most disgraceful; 3: went to Barrack Hosp, to Mr Sabine, undertook to share in duties of chaplain, introduced self to FN, walked a few of the wards 25: appearance “just what you would expect in any other well-bred woman [over 30],....her manner and countenance are prepossessing and this without the possession of positive beauty, it is a face not easily forgotten, pleasing in its smile, with an eye betokening great self possession, and giving when she wishes a quiet look of firm determination to every feature. Her general demeanour is quiet and rather reserved....she speaks on matters of business with a grave earnestness one would not expect from her appearance....She has trained herself to command, and learned the value of conciliation towards others and constraint over herself. 26: hospital work, not missionaries 28: “The trials to which Miss Nightingale as the head of the sisterhood is exposed are so far greater than those of the other sisters, in that she has a greater weight of responsibility, but there is not one of that devoted band who does not each day pass an ordeal to her every womanly sense beyond all description. The dressing the wounds of the men, the attendance upon those who are in the agonies of death, is but a small part of the field of duty...29: 50: visited French Military Hosp at Pera, thanks to M Levi;
similar construction to those at Scutari, but superior in many respects, officers’ wards “handsome lofty rooms; the rest of the building had the usual corridors of considerable breadth” and raised divans; “order, quiet, regularity of service and perfect machinery of this hosp” after but a few months, and in foreign land; system; “nothing seemed left to chance” smallest matter of detail; saw orders given for diet and treatment;

51: Sisters of Charity each at post and well define duties, cool and with skill, “the evident result of perfect training” iron bedsteads, admirable; shelves; table board for meals; thick straw mattress, abundance of clean bed linen as well as blankets; large shelves full of clean linen, bandages etc; floors perfectly clean; only one spot with “the least offensive smell” “Russian sick and wounded “much the same, treated as well; dispensary had abundance of medical materiel; bakery; kitchens;

52 “I saw the meals for the patients in course of preparation,; it was far more like the cooking for an hotel than for a hospital."

No hurry or confusion, not like our “bungling” Turks “degraded domestic condition” of women;

Otten, Joe. Councillor for Dore and Totley, Sheffield, Lib-Dem. Feb 2 2013 comment. “MPs call for recognition of Mary Seacole in the history syllabus.” re EDM. Liberal Democrat Voice. “Early Day Motion 919 is calling for the revised history curriculum to retain material on the Crimean war heroine, nurse Mary Seacole. You know, like Florence Nightingale, but better, braver and blacker. If you haven’t heard of Mary Seacole, Horrible Histories, as usual, will tell you everything you need to know.”

Link right there that shows FN as a white nurse, in uniform, pushing aside Seacole, portrayed as a black, Otten a prospective E Parl cand for Yorkshire and the Humber


Outline NUR101 Seneca College. Health and Healing I. Wellness across the Lifespan. FN’s theory will be used to ground the exploration of these concepts. Text: Potter, ref to M.E. Parker 2006. Nursing theories and nursing practice.


starting infection control at Scutari, timing off, 6000 dead already when arrived. “In Britain, the Army authorities were blamed for what was happening in Scutari. They had failed to notice that the Barrack Hospital, loaned to the British by the Ottoman Sultan for use as a hospital, was not properly managed and supplied. The doctors were unwilling to let a group of women run the hospital, and they resisted the nurses’ presence in the wards.” and UK ambassador wanted to spend money on a new church in Istanbul.

-- Founder of Modern Nursing. Boston University Dev. of Special Collections 1976. short. unpaged. no good. Wellcome
-- “Florence Nightingale: the Myth and the Reality.” Nursing Times Occasional Papers. 79,20 (3 August 1983):40-42. re childhood disease, sciatica, psychical and physical trauma in the Cr War; 41: “Rumor also abounds surrounding Miss Nightingale’s death which some detractors ascribed to a venereal disease.” but how cd she have been so intellectually creative; her sexuality “The question of unresolved homosexual tendencies has been raised by at least one biographer”; sleeping with countesses!

Palmer, A.W. The Banner of Battle: The Story of the Crimean War. London: Weidenfeld & Nicholson 1987. New York: St Martin’s Press 1987. 289 pp. Alan Warwick. Good on FN and other nurses, bit on Seacole, Cites Russian lit. FN 141-4, 181; blurb says deals with myth of FN: Totleben secured surrender of fortress of Plevna after 2 other generals had failed. Apart from him, only 3 senior officers from the Cr War later enhanced their mil reputation: Sir Hugh Rose and Sir Colin Campbell in India, and Adolphe Niel in France, ablest min of war in France; MacMahon, victorious at Magenta but defeated at Worth in 1870 and discredited as crypto-royalist pres of 3rd Rep; junior officers of Raglan, Garnet Wolseley, took part in the 2 assaults on the Redan, vs King Kofi of the Ashanti and King Cetewayo of the Zulus and Arabi Pashi in Egypt; Charles Gordon was a sapper subaltern at Balaclava in Jan 1855, became Chinese Gordon; 141 Selimiye Kislasi Barracks, across waters from Topkapi Palace, still impressive skyline; 143: purveyor was muddle-headed Ward, a Peninsular War vet; hostility of Dr Duncan Menzies, senior MO at Scutari and Hall chief of med staff of Br Exped Army; Menzies wrote duke of Newcastle the day after the nurses reached Bosphorus vs admission of women, 144: Hall said nothing lacking, and FN had press behind them; she had
close contact with MacDonald of Times; 144: Russian nurses “Compassionate Widows” were est by mother of tsar, Dowager Empress Marie Feodorovna (also a former German princess) during Napoleonic Wars; 145: Pirogov did not want the Compassionate Widows but sought grand duchess’s help; her mother-in-law treated her badly, glad to replace; effective supt of the nursing order was Alexandra Stakhovich, dominated by Pirogov altho had court contacts; Ekaterina Bakunina; “ministering angel” from MacDonald in Times, making solitary rounds; 149: Inkerman a rare engagement for which little prep on either side; main body of Russian assault troops knew nothing of the ground, arrived only the previous day from Bessarabia; British did not recognize any preps in their camp; Menshikov had probed British flank 26 Oct then pulled back; Raglan’s nephew noted large reinforcements daily arriving to Russian Army; allies went ahead with assault plans for Sebastopol; 150: Pennefather. 157: Raglan to Canrobert” Au nom d’Angleterre je vous remercie.” Russians left, thinking more troops coming. Raglan wanted to pursue, but British had lost a lot, and Canrobert wd not. Raglan made field marshal as a result. 162: prime minister (Aberdeen)’s son, Alexander Gordon was asst QMG, told him the true state; terrible battle, at length victorious, but with a loss which we can ill afford; you need not expect to hear of the fall of Sebastopol this winter; the utmost we can do is to protect ourselves in our present positions and will be very fortunate if succeed at that; 163: Russians recd considerable reinforcements;


pamphlet “The Influence of Florence Nightingale on Nursing Education in America” c1923. Johns Hopkins


Parker, M.E. Nursing Theories and Nursing Practice. 2nd ed. Philadelphia: F.A. Davis 2006


Parsons, F.G. The History of St Thomas’s Hospital. 3 vols. London Methuen 1936. vol 3 has brief refs to FN and school; made governor in 1896; years 1864 and 1865 adaptation of Surrey Gdns site to new purpose; 22 Manor Place prepared for Nightingale probs; 3:163: in 1866 a new agreement with Nightingale com made,
hosp undertook to accommodate 38 probs; increased quarters behind matron’s house and first 2 blocks of new hosp


Paskiewicz, Pat. The Life, Betrayal, and Death of Nurse Florence Nightingale Shore. unpublished manuscript.

10: has FN “collecting data about the mortality rates of British soldiers” while “tending to the thousands in the mil hosp!; then mortality dropped significantly “after improving hygiene and sanitation” but that the work of the San Com; reproduces iconic chart; invented it [worked with Farr on 13: Sweeny says nurses shd be more involved in the pol process; credits her with “triage work” not based on social class but “need for emergent care”. Has FN pledge

Pass, Anthony J. Thomas Worthington: Victorian Architecture and Social Purpose. Manchester: Manchester Literary and Philosophical Publications 1988. 173 pp. 87-93. 87: J.R. Tenon French architect? who promoted pavilion system, Mémoires sur les hôpitaux de Paris. Any ref? Tenon cited Royal Naval Hospital at Stonehouse, nr Plymouth, as model, but that for arch reasons, 3 storey pavilions, central chapel, colonnade, like tents of a camp. Re attack on Netley, Palmerston, who had browbeaten George Gilbert Scott over FO project, little respect for architects. Cites him on Netley. 88: says FN sent copies of her Matters affecting to the queen and cabinet. Shaftesbury arr that 2 of her papers be read at Soc Sc Congress, Notes on Hosps, sold 15,000 copies (but not clear which ed). Battle over Woolwich, with Galton, duke of Cambridge opposed over expense, but retreated, confirmed Galton’s appts as perm under sec for war in May 1862, but a Pyrrhic victory because design decisions taken irrevocably, avion pr but only 64 feet between wards “as to render the innovation almost useless. It was a poor compromise and a disappointment for Miss Nightingale and her band of influential followers.” (Not quite). HM a distant relative of Thomas Worthington. Roberton papers from 1856. 89: 3 parts of Manchester for workhouses; overcrowded, ¼ of inmates were sick; in 1862 George Greaves rec large hosp extension and Worthington apptd. Blue Book Improving the Sanitary Condition of Barracks and Hospitals. 1861. 90: Chorlton: “The scale of the project and the decision to adopt the ‘Nightingale principles were unprecedented at that stage.’ 480 beds, 5 3-storey ward blocks. 100 ft. apart for pavilions, connected by a wide arcaded corridor at ground
level, 15 wards, each with nursing facilities and 32 beds, “the optimum number acc to Miss Nightingale” each pav 124 ft. By 24; maximum light and vent. Ceilings 14 ft. Plus, 1300 cub ft per patient, almost twice Woolwich H, far in advance of est standards. Painstaking attn to position and size of windows, hearths and ventilators, ingenious windows, no central heating, but “warming” with iron hearths. 91: in spring 1864 Worthington visited Fr and Belg hosps, Bordeaux, Larib, St Jean at Brussels, and June 1865 Builder gave full description for Chorlton, which prompted FN to write him; his £23,000 for 5 pavilions “only marginally exceeded.” Did an account of the Pavilion Hospital Recently Erected at the Chorlton Union Workhouse for Manch Stat Soc, argued “The workhouse hospitals are in fact among our most important national institutions. Here by far the largest class of diseased persons are housed, while, with rare exceptions, it is feared that the aids of good medical skill and careful experienced nursing are but very scantily and insufficiently supplied.” Chorlton Union contemporary with Scott’s great hosp in Leeds and Butterfield’s Hants at Winchester, but Chorlton the closest to the exacting standards set out in Notes on Hosps. FN praised it for its cost, £60 per bed. Then Prestwich apptd him while Chorlton under construction, smaller, 180 beds, but every class of inmate, his “most complete workhouse commission.” site outside Blackley, Crumpsall Green. 93: hosp physically isolated from main workhouse complex, 8 wards, linked at ground level, improved over Chorlton from FN’s detailed suggestions. 2 floors, sanitary acc redesigned to improve cross vent and windows, equal areas of wall and window. Central heating and large hearths.

Patrick, John. Short History of Glasgow Royal Infirmary. Glasgow: Glasgow Royal Infirmary 1940. 43 pp pic of block plan
10: infirmary same from 1861 for 50 years
18: patients diets: low, middle, full
29: Rebecca Strong matron 1879-1885 and 1891-1907. “A pupil of Florence Nightingale” in caption. Credited for intro of “the systematic educ of nurses.”; Lister link
30: reconstruction 1896.
37: Nurses’ Home not until 1888; first nurses’ home built; before, nurses lived and slept in rooms attached to wards, then at a long low bldg facing Castle St; tr sch began 1893

Patton, Rebecca; Zalon, Margarete; Ludwick, Ruth, eds. Nurses Making Policy: From Bedside to Boardroom. New York: Springer Publishing 2014 and ANA 568 pages; uses Cook, not CWFN UofT el, not UG; authors pro FN
28: The Environment and Health. “Nurses have long recognized the role of the environemnt in maintaining health. Florence Nightingale emphasized that the env should promote health and in no way be harmful. The provison of fresh air, light, a quiet env, nutrition, warmth, clean water, sanitation and cleanliness was
essential to this vision. From a social justice perspective, the
same environmental factors are ideal natural advocates for env
health. "FN emphasized env
41: "Modern nursing’s evolution from a vocation to a profession
began in the late 1860s as Florence Nightingale published her
views about how nurses should be educated and how patient care
should be provided (Hegge, 2010. While Nightingale did not
directly use the word advocacy in her writings, her work was
consistently about advocating for
76:
129: "The power of harnessing evidence for public policy can be
easily traced in nursing from the data collected and analyzed by
Florence Nightingale during the Crimean War and her advocacy
efforts in the years that followed." [did not collect] Harnessing
evidence.... shortly after, Lincoln est National Academy of
Sciences 1863 to gather sc info
320: one of nursing’s greatest role models (McD 2006 url)
380:
397: “While Florence Nightingale is often cited for her caring
service to others, and her skilled clinical work as the ‘lady of
the lamp,’ her more long-lasting impact comes from her ability to
leverage data and her effective and intensive advocacy to achieve
implementation of a reform agenda that would.

Pavey, Agnes. The Story of the Growth of Nursing, as an Art, a
Vocation and a Profession. 3rd ed. London: Faber & Faber 1947
[1938]. okay, nothing new on FN, sec sources only, Liv section.
Part II chapter 1 Florence Nightingale 269-89, chap 2 N Fund, est
of nursing schools; 315: first Queen’s Nurse to be enrolled and
first gen supt of the Queen’s Inst was Rosalind Paget. link with
St Katherine’s Royal Hosp, Regent’s Park, founded and endowed by
Queen Matilda in 12th cen; St Vincent’s Dublin leading hosp of Br
Isles when FN endeavouring to find some training and experience,
but wd not accept a Prot (135);
3rd ed. 1951 [1938] 242: credits Sisters of Charity with first
“actual” nursing; Mater est 1860; Warde to U.S. in 1843; McAuley
mention
241: FN, Manning and St Vincent’s exchange;
chap 7 on American nursing
368 Helen Bowden All Saints UCH first matron, Bellevue, 6 months
later New Haven Conn; 1879 1st book on; first 3 New England Hosp
for W and Children 1872, Linda Richards 1st with diploma;

Payn, Ange. Nursing a Grievance: an Evening with Florence
Nightingale. written and starred. Bristol 1989 FN Mus 0967

Payne, David. “Face to Face.” Nursing Times 95,19 (12 May
1999):26-27. Fake dialogue between the two. Ref to Social Affairs
unit paper by Janet Warren, nurse midwife, and GP Myles Harris,
Come Back Miss Nightingale. 1998. FN bit not bad.
Payne, Karen, ed. “Florence Nightingale and her Mother Fanny, 1851-62.” Between Ourselves: Letters Between Mothers and Daughters. Boston: Houghton Mifflin 1983 99-111; includes such nonsense as: “Florence’s father died in 1873 and she was forced to stop working for the next seven years in order to nurse her mother. Fanny died when Florence was 60; they had eventually made their peace and in the final years it was frustration rather than anger that Florence expressed at having her work interrupted.” 110


1855: made hospital inspections in the Crimea. “Florence Nightingale is often seen as the saviour of sick and wounded soldiers in the Crimea. Until recently it was often asserted that Nightingale managed to reduce the death rate....” “Unfortunately, the truth is very different. Despite the unstinting efforts of Nightingale and her team, death rates did not drop; on the contrary they continued to rise. Indeed, the death count at Nightingale’s own hospital at Scutari was the highest of all the hospitals in the region.”.... “Once she realised her mistake, after 1856, she worked incessantly to improve matters in army and civilian hospitals. Ack San Comm “Nightingale’s influence as a role model.”.... [much favourable coverage of FN’s work, snide, incorrect, remarks]

1857: suffered from depression. Also has Bridgeman, Davis, Mary Seacole.... usual myths.


Pearson, Emma Maria and MacLaughlin, Louisa Elizabeth. Our Adventures during the War of 1870. 2 vols. In 1. London: Richard Bentley 1871. No FN, sent out by NAS, very critical of, esp of Loyd Lindsay, worked with Anglo-American Ambulance. Sent out as a pair to report, not part of fixed team. earlier pub From Rome to Mentana 1868 and a 3-vol One Love in Life.
English ladies running over the countryside; one nurse died, used for suffrage cause, cited by Summers

Preface: “To show the evils war inflicts on those who take no active part in it, its degrading influence on national character, and the cruel sufferings of an invaded country. In speaking of our great National Society for the Relief of the Sick and Wounded in war, we have given a straightforward statement of transactions with them. No attempt has been made to enter into any discussion as to vi: the causes of what we consider to have been much of failure in carrying out the great work before them.” Sympathies with French, do not deny. Very negative on Johanniter, Ritter, Prussian, no neutrality, Chapter 5 The Knights of St John; 1:89 saw stores, not allowed; 1:115 Loyd Lindsay told them to report to Prince Pless, problem of stores; 1:267 emperor signed the capitulation, had was a prisoner on way to Germany; MacMahon had 80,000 troops 1:268 emperor had 30 carriages, full extent of defeat; second volume on 2:315 Sims, Frank Brackenbury all covered positively; Mrs Capel; 2:362 join Anglo-American 2:283: Johanniter had immense stores to distribute evenly, not so. “The ‘Johanitter Ritter’ are the great Hospitaller Order of Prussia. They are attached in that capacity ot the Germany army. They do not profess to be neutral or international. Nothing could be had from their stores in Orléans unless upon the order of a German physician, countersigned by Count Stolberg, one of their chiefs, and his was not given, naturally to any ambulances that had not a German head, and was given for the use of the German wounded.” lots on atrocities.

Peate, Ian. The Student’s Guide to Becoming a Nurse. 2nd ed. Oxford: Wiley-Blackwell 2012. [a lot of errors, worse on Seacole] Chapter 1. 14 Florence Nightingale. Born in 1820, In March 1853 Russia invaded Turkey.... “This conflict occurred in and around Scutari and became known as the Crimean War. Soon after British soldiers arrived in Turkey they began to fall ill with malaria and cholera. Florence Nightingale volunteered her services to the war effort and was given permission to take a group of nurses to a hospital in Scutari based several miles from the front....

Back in England, pub Notes on N and Notes on H, both dated 1859...credits her with N School, and env health, and principles. Okay. With Rathbone set up district nursing 1861. “Queen Victoria gave her support to this venture and district nurses became Queen’s Nurses.” no. Much later. FN and sanitation in homes

Peate, Ian, ed. Nursing Care and the Activities of Living. 2nd ed. Wiley Blackwell 2009. 42: has FN offering services to assist with epidemic, but offer rejected when a national newspaper alerted by Florence publicised the huge cholera death rate amongst the Br soldiers. Outcry and govt changed [govt changed in February 1855]. Florence again
volunteered her services, went with 38, appalled at conditions...rooms without clean blankets or decent food and water, unwashed...okay there....

after war a heroine, “she began a campaign to improve the quality of nursing in mil hosps.” publ findings widely. “and with the support of friends raised money to improve the quality of nursing, founding the Nightingale School and Home for Nurses at St T...” and for workhouses. Campaigned for women to have vote and careers.

Important because env theory. “Florence suggested....” pure air etc. list [wildly wrong, but not all that hostile]

FN 26, 28, 31 34-6 164
lots on Russell; but Chenery reported what FN did (31), “but we can identify the way in which she is cast in an almost fictional role as a character ministering directly to the sick.” endn13: in Lambert & Badsey 78-86
40: Cadwaladyr, “she chooses to call herself Eliz Davis,” constructs an identity for herself, English.


Pelling, Margaret. Review: F.B. Smith, Florence Nightingale: Reputation and Power. English Historical Review 99,393 (October 1984):918-19. Displayed “an unusual instinct for the realities behind historical evidence” “does not scruple to call Miss Nightingale a liar, and his case histories (Scutari, army sanitary reform India, nursing and the Contagious Diseases Acts) are primarily based on detective work in which Miss Nightingale’s account of events is contrasted with her own actions or with the records left by the many obscure men and women whose ideas and services she undoubtedly exploited.” (918); 919: critical of him for effect of trivialising, and feminists might suspect...but FN held herself aloof from feminist movements. Tone of “secular common sense” “may well serve all classes of reader better than any more pretentious or respectful account.”


based at Wellcome, Oxford, Cross College. But no refs to FN, not in index;

Good book, uses CWFN and acknowledges it (perhaps too nicely). Covers India well. FN used Condition of England techniques to get sympathy for poor in Br and ryots in India.
1 gets year wrong, FN was 34 in Oct 1854;
Corrects germ theory error, using my old unpub paper.
33: Prior to 1883 Nightingale still attributed disease origins to env causes, even if she accepted that some few diseases could be transmitted via observable viruses or inoculation.
34 Snow and Simon, FN anger re their assertions about uselessness of san measures (but exaggerated for Simon)
39 and biblio: has Reverie down as anon (I have HM)
65: FN worked with Dickens “when she joined forces with the Committee of the Association for Improving Workhouse Infirmaries, on which he and John Stuart Mill served.” but did they work on it?
82 both FN and Eliot hesitated about joining ranks of suffragists
Lots on Lydgate, who used microscope. (FN unhappy with Middlemarch because marriage the solution, not own work)
99 Eliot writing *Middlemarch* in late 1860s when germ theories getting more attention because of microscopical research such as Lydgate’s, Lydgate recog character suffering from typhoid not typhus, not distinguished until Pierre Louis’ famous 1828 tract, and English hosps not until 1860s. England still invested in single fever theory of disease, contradicted one type of germ for each type of disease.
assoc of Lydgate with Louis, Lydgate also was sympathetic to patients (104)
110 Russell treated badly in Anglo Indian press after attempted even handed reporting from India in *Times* after mutiny. Penner has FN “appears not to have commented on it in her corr” sepoy mutiny to Canning and McNeill 9:48-49
111 “native rent collectors (known as Zemindars), cd set rents as high as liked (owners)
119 Penner confuses FN’s Harley St work with prostitutes
121 Martineau assured readers Br cd counter superstition of Indian people with “knowledge and capital”, but Madras in 1876, 19 years later, had horrific famine.
122 shd be sewerage
123 Penner cites examples about native successes, dams and irrigation, but not in her public writing on irrigation in India
125. Good on India and Cotton. FN more tactful,
148. Cites 2 reviews of Bostridge to show that opinion still negative about FN as a person, “dismissive conclusions about Nightingale herself.” Jan Marsh, in *The Independent* “in the end
the legend is historically more significant than the life” and for Atlantic “a woman to whom we owe a great deal, but would perhaps never want to meet”

172 endnote re pics of famine victims. Whether FN got photos from Digby unclear.

Penney, Marjorie. “The Naval ‘Miss Nightingale’ in the Crimea.” Nursing Mirror (16 December 1960):ii-iv. Eliza Mackenzie, lady supt of Naval Hosp at Therapia, north of Constantinople, on European coast, left London 25 Dec 1854 for Paris, Lyons, Marseilles, on Simoom, asked by W.G. Cowper, 1st lord of the Admiralty; in old wooden palace at seashore, rickety; rows over Maltese men nurses; party arrived 10 Jan 1855, they realized only female nurses wd do; arrived to find laundry washed but left damp in an outhouse by a party of ladies led by Miss Stanley, whom SH had sent out in direct violation of his undertaking to FN that she alone shd select her nurses; includes letter of FN not published before (in ptexts); Mackenzie visited FN at Scutari, when ill in bed; observed that it wd need the genius of a Wellington to cope with 7000 patients and new arrivals at that time; Therapia was manageable and the only hosp with any degree of comfort; Mackenzie left Nov 1855 in poor health; recd a diamond bracelet from sultan of Turkey and official letter of thanks from bd of Admiralty and a super silver tea service and urn from officers and men of black Sea Fleet.

Pennington, Hugh. review of Bostridge in London Review of Books (4 November 2008). he is infection control person in Aberdeen. Comments about FN not being personal, but merely philanthropic in general don’t hold up if read letters to her from friends such as Louisa Ashburton; Lea Hurst village friends Mrs Holmes and Lizzie, Hannah Allen, and CBN Dunn, who looked after them on her behalf; to friends made in the course of work, such as Mrs Sutherland and Caroline Werckner; and a number of the nurses whom she mentored, esp Eva Luckes, Pringle, Lemon; missionary nurses Wilson?

enthusiastic letters of appreciation from foreign nurses who visited and went back to their countries feeling empowered: Alfhild Ehrenborg, Louise Robinson Scovil, Isabel Hampton Robb; Charlotte Macleod, Flora Masson, Rachel Williams


5: Nursing is a human relationship between an individual and a
person 6: who is sick, or in need of health services, and a nurse especially educated to recognize and to respond to the need for help.” in the interaction “effort is first directed toward understanding the problem, the conditions required for resolving the difficulty may or may not include the use of technical procedures and devices” special and goal-directed nursing. “Health has always been the primary goal. However, curative methods in nursing have tended to supersede development of preventive ones. But not full medical authority. Part of health team. A function;

Peplau shares with FN focus on rigorous, science based approach to the practice and educ of nursing (Gastmans 1998); Carper’s (Chapt 6) aesthetic way of knowing in nursing has been used with Peplau’s theory to help nurses recognise interpersonal patterns, to make sense and meaning from their obs and provide a context for aesthetic knowing.

Chapter 1: Florence Nightingale (Austyn Snowden) “the original pioneers of nursing” in 19th cen. “Nightingale, Seacole and Robb were literally creating an original role in an environment difficult for us to comprehend from this distance.” women subordinate to men. “Seacole’s case is particularly striking as she was also Black. This was a period when Black people could be born into slavery.” none of these nurses were “theorists as such” Links with other theorists, Seacole (chap 2), and Robb (chap 3) (so, now Seacole is a nursing theorist!)

Cites CWFN Cites LM Evidence-based; passionate statistician; Seacole: “Some called the Mary Nightingale of Jamaica” some similarities, also diverse, “Mary used her skills and understanding of the disease process to treat and alleviate suffering.”

“On her way to meet her cousin at the battlefields, she made a detour to visit Nightingale’s hospital at Scutari. Fluir (2006) suggests that she did this in order to legitimise her presence and seek Nightingale’s approval for being in the Crimea.” several hundred miles from. “She did not actually meet Nightingale as she was ‘distracted by her meetings with old colleagues and caring for the wounded soldiers’. She did meet Mrs Bracebridge who intimated...” has her not meeting FN! “She was allowed to stay the night but was required to sleep with the washerwomen rather than with the nurses” [one washerwoman, no beds in nurses’ quarters]

Chapter 2 Mary Seacole. Sue Royce.

“She was rejected

“Section One discusses the pioneers such as Florence Nightingale and Mary Seacole who carved out the role of the nurse and profesionalised

“Some army doctors were suspicious of her at first; fortunately others realised her skills and talents and utilised them fully.” [Name one]
“Why do we not have women healers like Mary Seacole today?”
Robb;
Has her going bankrupt in Crimea in 1856; returned “toast of 19th
century London society”
“Theory. Although Mary did not write about her nursing as did
other nursing theorists, she did highlight many important
issues.”

Peplau, Hildegard E. “Notes on Nightingale.” 48-57. In Notes on
Intro., Barbara Stevens Barnum. Philadelphia: J.B. Lippincott,
marker in nursing’s progress toward becoming a profession is
Florence Nightingale’s book, Notes on Nursing, published in
1859.” [but it not for professional nurses!] “This book must be
understood as a period piece, a reflection of commonly held views
about women and Nightingale’s conceptions of nursing at the mid-
19th century.” [a reflection of her war work, and her pioneering
ideas on biophysical causes, the env] wondered how FN reconciled
commonly held notions of women at home and calling into nursing.;
decries “amateur females” “Nightingale’s attribution of nursing
also excluded men.” Yet in earlier centuries were religious and
mil orders [and still were; FN was critical of them, and she did
not exclude men from nursing] “This failure to recognize male
nurses is still evident in the slow recruitment of men into the
contemporary profession of nursing. Nightingale was the product
of her era and did not envision the possibility of changing roles
and relationships between women and men.” [no, she helped to
change them; Peplau does not recognize that women were allowed
into no profession then!]
49: “natural selection (Darwin) and germ thoery (Pasteur).
Nightingale... apparently ignored Darwin and rejected Pastuer’s
germ theory.”
49: mental illness not uncommon in Nightingale’s day; there were
asylums. Yet, “Nightingale did not consider nursing practiced in
these institutions in her published works.” FN infl by great
ideas, was educ; home env; her household managed by a matron who
superintended light, cleanliness, order, punctuality! “These
concerns also appear in Nightingale’s descriptions of nursing
practice.”!! 49: “Nightingale’s descriptions of nursing practice
do not specifically show relationships between nursing actions
and the state of the ‘constitution’ of the persons receiving
nursing care. The book includes comments on the prevention of
complications during illness but little is said about prevention
of disease. nothing in the book on nursing actions, because
written before trained nurses]; disease as “reparative process”
seems to make nursing opposition to Nature God? Both fix things
that are lacking, but nurses do it better. [sarcasm] “Nightingale
does not clarify her intended use of the term Nature but the
impression is easily gained that when the word is spelled with a
capital “N” it is synonymous with God. She was a deeply religious person.” “Notes on Nursing is primarily about the conduct and practices of nurses. It describes what nurses do or should do...but it skirts discussion of nurse-patient interactions or relationships.” Nurse to move bed so patient can see out of window, not talk about themselves, not trying to cheer up patients. “Century old” critique bound by the era. Her intro to FN from “the nurse’s pledge that bears her name” but not written by her! Etched deeply in my mind when student nurse 1928-31. Got brief sketch of FN’s life and work, in a class or 2 on the hi of nursing. “She was portrayed as the leader of modern nursing.” NonN used. Next contact was in 1948, Columbia, did psych nursing, Isabel Stewart and Eliz Burgess 51: read archives at Col; puzzled over “reparative process” 52: reframed “The work of nurses is to support the person’s processes of bodily repair until the functional bodily processes are restored and begin to function fully again, or nurses support the person’s functional bodily processes in some way until their normal functions are restored.” These refinements clearly differ Nightingale’s views. Considered symptoms not as “causes” but as lacks or wants; “In Notes on Nursing. Nightingale does not specifically identify the bodily processes in question.” e.g. keep air pure does not say respiratory process; or how pure air would support and thus begin a reparative process. Or digestive or elim process for nutrition; “Nightingale’s failure to specify processes” reflects “limited knowledge of these matters.” she “states and describes what nurses do” NO in hospitals of her day. But New York Nursing Practice Act of 1970 says nurses “diagnose and treat”, new def in ANA report Nursing: A Social Policy Statement 1980. 53: FN def body functions her book pub by Putnam’s in 1952, reissued 1991 by Springer, told to have a physician as first author! There defined as interpersonal process; ... psych nursing “The shift toward interpersonal theory was pivotal. Its emphasis on nurse-patient relations and theoretical constructs to explain patient dilemmas was new to nursing.” 55: “Theory-based nursing practice is a new paradigm “ emerged after WW II with rapid evol of med sc. And tech; shift from “an activity orientation” focus on what nurses do to knowledge-based nursing practice, what nurses know theoretically and use intellectually to guide nursing practice. “Some of Nightingale’s ideas in Notes on Nursing are fuzzy, to say the least, and some are outmoded. It was her first book and she did claim only to be giving ‘hints.” “I can try to justify its shortcomings” 56: process of personality development underlies its whole but does not appear in index. Anxiety, conflict, self-system. “What I do acknowledge from Notes on Nursing is the idea of nurses support in the ‘reparative processes’ within the person in such a way as to enable restoration of functioning.” Finally! “Nightingale was not a devotee of physicians,” although did not indulge in doctor bashing. “If only Nightingale had described fully and precisely
what she meant by Nature or nature!” Good grief. Ahistorical. Grossly misunderstands NonN purpose

Percy, Algernon. A Bearskin’s Crimea: Colonel Henry Percy VC and His Brother Officers. Leo Cooper 2005. Chapter 6 Nurses and Hospitals, on FN a bit, and Mary Stanley. 123: Letter of Lt Montague Burgoyn to his mother from Scutari after Alma. “40 females have now arrived and are now a regular subject of ridicule.” commonest medicine and appliances wanted, need for requisitions to be signed, commandant a perfect fool.” Only 30 patients a day cd be cleaned in baths available; 124: Josceline Percy persuaded to take Mary Stanley and 46; 125: letter 15 Dec 1854 en route, ladies like angels, the paid nurses keen on cognac; left 2 December; 134: “Miss Nightingale has not shone and I suspect Dr Cumming, the Medical Inspector, is an enemy to anything like a new system by which the soldier may be cared for. Dr Menzies of the General Hospital, on the other hand, told me he wished for the nurses”; 136: FN said that Josceline had “sneaked home like a commander who has set so many Robinson Crusoes on a desert island”.
Josceline Percy, an MP interested in hospitals, took out the Stanley party to Scutari, and thought that Nightingale had not “shone.” He went on to set out the problems she faced: “I suspect Dr Cumming, the medical inspector, is an enemy to anything like a new system by which the soldier may be cared for. Dr Menzies of the General Hospital, on the other hand, told me he wished for the nurses.” In Algernon Percy, A Bearskin’s Crimea: Colonel Henry Percy VC and His Brother Officers 134. Back in England, he spoke in the House of Commons 143: “One should also recognize the contribution of Mary Seacole, the Creole from Jamaica, who, having been rejected by Liz Herbert for employment on Josceline’s expedition, made her own way out to the Crimea in early 1855 and instituted the ‘British Hotel’ entirely under her own steam. For the rest of the campaign, she provided sustenance and medical relief to the troops, often exposing herself in the trenches to enemy fire. She was immensely popular and made many friends, including Lord Rokeby, who became a lifelong supporter.” 143: Percy spoke in House early in Feb 1855 of shortages, lack of proper clothing, no knives and forks; 69 men and 9 officers for 1 doctor, while French had 25 wounded or 50 malades ordinaires; pic of St Thomas’ Hosp by Millie Harris, Gordon Museum


Pettitt, Clare. “‘Those Noble, Glorious Men’: Nightingale in Elizabeth Gaskell’s North and South.” paper at Wellcome conf 2010 “Florence” argues that images and accounts of Nightingale’s work at Scutari profoundly influenced the way Gaskell represented the suffering of working men in her novel, “those noble, glorious men” as she called the soldiers in the Crimea; and also of ordinary people more generally; helped her to move towards representing the social body in an entirely new way at end of her novel, departs sharply from narrative techniques of her previous industrial novel, Mary Barton. At King’s


13: Chapter 1 Inclusivity: Attending to Who is in the Center

“Reviewing the works of Carnegie (1991, 2000), Davis (1999), Hine (1989), Robinson (2004), Seacole and Salih (1857/2005), Staupers (1961) and Washington (2006) gave me greater insight into the pressing social justice demands on the time and energy of nurse leaders of color and the discrimination they have battled on a daily basis. One example is that of Mary Grant Seacole, a Black Jamaican woman who, prior to the formation of schools of nursing in Jamaica, served in Panama and Cuba to help curb the spread of cholera and yellow fever epidemics and to care for those who fell sick. When the Crimean War broke out in 1853, Ms Seacole petitioned to join the nurses being sent by the British government. She offered her vast knowledge of disease containment and treatment to aid in protecting soldiers in the British Army, many of whom were from Jamaica. In spite of having letters of support from British Army physicians and the wife of the secretary of war, she was turned down because she was Black. Undeterred, Ms Seacole financed her own way to make the 3000-mile journey. Once there, she petitioned Florence Nightingale to join the Angel Band of military nurses, but Nightingale refused to give her a position. Seacole established Spring Hill, a lodging house with nutritious food and a place for the troops to come and heal on the outskirts of the battlefield. She brought knowledge of cures for dysentery and was cited by many military officers for her quick and thorough healing practices. Seacole worked tirelessly during the day at the lodging house, and then at nightfall, she headed to the battlefield to rescue and treat fallen soldiers. After the Crimean War ended, Seacole returned home, injured and economically poor, but rich in the satisfaction that she had made a difference in the lives of hundreds of soldiers” (Carnegie 2000; Robinson 2004; Seacole & Salih 1857/2005). No page numbers
Philipps, Melanie. July 13 2014 “Forget Reform, the NHS is Beyond Repair.” has pic of FN with cap: For Florence Nightingale, nursing was invested with Christian moral values.
in text: “For Florence Nightingale, the most menial nursing tasks were invested with the importance of Christian spiritual and moral values. She would have smashed her lamp in fury when, in the 1990s, nursing leaders came to regard caring as demeaning to women since it made them inferior ‘handmaidens’ to male doctors.”
And other articles


Pilkington, Paulina. “Nursing Education--What Can we Afford.” 13th Florence Nightingale Oration, at Holy Trinity Anglican Church, Wooloongabba, Brisbane. Australia Dept of Health. 1978; lots of other Australian orations online

8: General Hospital was Turkish hosp, intended to hold 1000 patients, English 760, preferable to Barrack. Had baths, like all Turkish hospitals 10: French had 14 hospitals;

Pines, Stella. “The First Australian Hospital.” International Nursing Review 7,28 (1932):28-33. Trans Fr and German, got info from Mrs Graham, former lady supt; 31: after 3 years 2 of the sisters returned to England, one (who married later) became matron of Benevolent Asylum and Midwifery Hosp, another married and when widowed appt to mental hosp, and a 3rd went to Melbourne to take charge (no names); Australian students “were such excellent nurses, no more staff was needed from England); Miss McKay (later Graham); Osburn lectured in anatomy, nurses of medical and communicable diseases and bandaging; nurses did not
take temp; did washing of sheets; 32: in 1884 superseded as matron by Miss McKay

Place, Barbara. “Nursing Education—Australian Made (Florence Nightingale Oration)” no info

Plettchcr, Susan A. “Florence Nightingale” chapter 6 71-90 in

Plumptre, Adelaide M. "Florence Nightingale." Hospital World (August 1920):58-63. (seems to be a Cdn pub) Nutting


FN 57: has section. Inv by SH. FN “carefully chose the nurses from various religious orders through a rigorous interview process; however, the army physicians ignored Nightingale and her nurses upon their arrival....” cold bare floor, own excrement

75: ref to Passionate Statistician

71: credited with “most aspects of nursing” and “birth of nursing research” “After exhausting days of organizing care for the soldier in the Crimea. Florence would document pages of data, later developed into graphic displays to persuade others of the need for controlling disease in the war zone. Her accomplishments in statistics earned her an 1858 el...“

65: timeline as “Florence Nightingale goes to Scutari” 1854, 1859 NonN...

66: founded school

53: Key Terms.... “Mary Seacole” on list

Seacole: 74: web ref to Historic figures: Mary Seacole.

621: lists, Nutting, Mahoney “First African-American graduate....“ Mary Seacole “A Jamaican-born nurse who traveled to Crimea to care for British soldiers. She was denied the ability to join Nightingale’s nurses due to her biracial heritage.”

Pollard, Eliza F. Florence Nightingale: The Wounded Soldier’s Friend. Toronto: Musson 1890. [author d. 1911] [seen at G. Arnoldi’s, war oriented, Col catalogue]. Hamilton gives date 1890. [was dated c1909, but then Hamilton cd not have seen it in 1901]

Pollock, C.E. [Charles Edward] “Florence Nightingale, O.M., R.R.C.” Journal of the Royal Army Medical Corps 15,4 (October 1910):383-93. (385-89), ref Cook 2:466; John Bale pub?; but 384: when war declared there were no men of the AHC available for duty in the mil hosps in the East; to meet this want pensioners were hastily enlisted as attendants for the sick. no one had the
temerity to suggest that women nurses shd be employed in mil hosps. FN SH. Memo drawn up by Mr Ramsay at SH’s desire when govt had determined to send out an est of nurses (395); FN’s handwritten (386-89) and letter 1 May 1855 in PRO 43/963; has Rules of Nurses. 388: Rule IX. “Each nurse will be allowed 1 pint of porter or ale at dinner; half a pint of porter, or a wine glass of wine, or 1 oz of brandy (as she likes best) for supper. In case of constant attendance on cholera or infectious fever, the supt may allow an extra quantity at her discretion.”

Pollock, Arthur William Alsager. United Service Magazine (1857): 360: quote from Alexander, James: “I rode one day with a medical friend, Dr P. Frazer KTS, 361: formerly in Portugal with Admiral Sir Charles Napier...to visit Miss Nightingale the ‘soldier’s friend,’ at the row of hospital huts below the old Genoese castle of Balaklava. I always make friends with doctors....” met Miss Nightingale’s page on hill, “said his mistress was at home, and we found her in a clean room in a wooden hut which overlooked, with many others, the Black Sea; the grey towers of the castle of Balaklava were above them. Miss Nightingale had been suffering from fever--looked thin at this time, and was dressed in a bonnet, with a black dress and shawl. Spare white sheets on the walls formed a sort of tapestry to hide the boards; the table before her was covered with papers and work. She had visited the 14th hospital huts and approved of their condition, and she offered Dr Frazer, for the general hospital (to which he was attached) pillows with holes in them for bed sores. Aware of the carelessness of some of the hospital orderlies, she was anxious to know if a supply of nurses would be of use in the front, but it was thought not safe to send them, for unless the huts were surrounded with palisades and shut off from the rest of the camp, the nurses might be interfered with.

One object of my visit to Miss Nightingale was to ask where we could get school books for the 14th Regiment; she promised some help, and I afterwards got a liberal supply of copy books from her and many numbers of the ‘British Workman’ (Monthly paper) which, with the Bible, were used as school books. We took leave, much pleased with our visit, and on the occasion of another visit I had the satisfaction of seeing Miss Nightingale looking quite recovered, and well and cheerful. My countrywoman, Miss Shaw Stuart, a coadjuter of Miss Nightingale in works of humanity and mercy, I also saw; she was well 362: adapted... for the labours...” was present at hq for grand ceremony of instaling Knights of the Bath, when Lord Stratford came from Const for that purpose, canopy, flags of the 4 allies, royal standard.... address by ambassador, reply Sir Edmund Lyons, Sir Colin Campbell etc on receiving their decorations. 2 sorties of Russians in August, Captain Frazer 97th killed on one; made friends with Rev Mr Cannon, “among other deeds of active benevolence, had assisted, with others, to establish the Inkermann Coffee House
for soldiers recovering at the Scutari hospitals. At first there had been much irregularity among the invalids there, but a remedy was applied, and at the coffee house they had good rooms, books, papers, writing materials, dominoes, draughts and bowls, coffee, lemonade, etc.; all appliances were found the men to make them comfortable and happy during their convalescence.”

Ponting, Clive. *The Crimean War: The Truth behind the Myth.* London: Chatto & Windus 2004. Prof of History, prof of politics at Swansea, then London, prosecuted for providing info on Thatcher to Opp MPs 195: hospitals running well when FN arrived at Scutari; cites C. Bracebridge! (Dossey cit) hospital “clean and airy” “few bad smells”; quotes Stanmore on SH, uses FBS and Woodham-Smith, no original sources on FN: “Although Florence Nightingale tried to portray the situation at Scutari as appalling before she arrived, this was not the case.” (195) chosen “through the influence of her well-connected friends” 195; 196: “Nightingale was (despite her almost total lack of experience) appointed Superintendent of the Institute for the Care of Sick Gentlewomen in Distressed Circumstances” through “two family friends” Lady Canning and EH (but EH was her friend); 195: also has her father providing her with an income of £500 year in 1852 so cd live independently, and 196: appointed supt at (WS name). FN “had to take some basic training with the Sisters of Mercy in Paris before she cd take up the post” as if she was forced to, when she insisted! 197: “Nightingale was a strict disciplinarian and alienated nearly all of the women under her. She was intolerant, would only accept her way of doing things and was determined to assert her position.” 298: by spring and early summer of 1855 about 230 nurses with Br Army in E, FN in charge of 39 of them; the largest group was Stanley’s with 47; 199: “Florence Nightingale certainly believed in her lone mission; and felt that she was right and everybody else was wrong, unfeeling and corrupt.” what achieve? Very little and certainly no more than the nurses in other hospitals; “Nevertheless under Nightingale the death rate at Scutari remained far higher than that of the front-line hospitals in Balaklava.” improved when san com came out early March (JS, Dr Hector Gaven [Gavin] and Rawlinson; “Their programme was an indictment of the previous management (including that of Florence Nightingale) and the death rate was subsequently reduced from forty-two per 1000 in March 1855 to two per 1000 by June.”

Poovey, Mary, ed. *Florence Nightingale: Cassandra and Other Selections from Suggestions for Thought.* New York: New York University Press 1993; has nasty statement re FN, that the doctrine set out in Suggestions “cannot justify the ruthlessness with which Nightingale sometimes used other people” does help to explain the anger xxvii; Poovey: Samuel Rudin University Professor of the Humanities, Institute for the History of the
Production of Knowledge, NYU: prof of English, -- "A Housewifely Woman: the Social Construction of Florence Nightingale." Uneven Developments: The Ideological Work of Gender in Mid-Victorian England. Chicago: University of Chicago Press 1988 164-98. notes 237-46 (Prof of English, Johns Hopkins) cites F.B. Smith as source: 197 "In one sense—in her own terms—Florence Nightingale failed at nearly every nursing scheme she devised. Nightingale’s plan for nursing, however, came to naught, her health missioners were never recruited and organized on the scale she envisaged, and her effort to reform workhouse nursing yielded only a cruel parody of her original grandiose scheme." in 1:845. wrong on Harley St. ft 7 (238) “At the time she volunteered to go to the East, Nightingale was the (voluntary) resident lady superintendent of the Invalid Gentlewoman’s Institution in London, but her duties there did not include nursing”. (ft 7 from 167, where also mis-states the crossing in the mail bit)

Pope, A, Snyder MA, Mood, LH., eds. Nursing, Health and the Environment: Strengthening the Relationship to Improve the Public’s Health. Washington DC: National Academies Press 1995. Sections on nursing educ, research; summary of recommendations; Resurgence prompted by landmark report, Nursing, Health and the Environment: Strengthening the Relationship to Improve the Public’s Health, 1995, by Institute of Medicine. (National Academy Press; Andrew M Pope, Meta A Snyder and Lillian H Mood, eds. Wash DC: National Academy Press 1995 (Chair Lillian H Mood) UG el; pic of FN as “Angel of Mercy; begins Executive Summary “Every day sanitary knowledge, or the knowledge of nursing, or in other words, of how to put the constitution in such a state as that it will have no disease, or that it can recover from disease, takes a higher place.” cits: 13, 49, 103 49: cites FN and Wald as examples of advocacy, “crusaders for social justice” while others ambivalent; 103: cited on nursing research, observation for a purpose 1 13: Intro cites FN on fresh air, light, etc “At its inception, the profession of nursing adopted a holistic approach toward health promotion and the prevention of illness and injury. Florence Nightingale founded modern nursing on the tenet that the role of the nurse was primarily to modify the environment in ways that enhanced health and healing. Her classic text Notes on Nursing.... codify ... topics, vent., etc. “In Nightingale’s view, any factor that can affect the health of the patient and the health of the public was relevant to nursing practice.” lots of cits of FN, in 10 chapters 2: Defining Environmental Health, to distinguish between env health and sc of ecology, focus her adverse health outcomes associated with exposure to env hazards; chemical, physical, biol, psychosocial; 3: chemical compounds, 1 Introduction cites FN “fresh air” etc
Note 18
132: Physicians, Hippocrates, Percival Pott (chimney soot), Virchow (for legislation to protect env) Snow, (pump) but US med profession has not wholeheartedly supported US env health movement;
133: Nurses esp important partners in US env health movement, have direct contact with patients, families and communities, often the only point of contact for people seeking medical care; people usually listen to what nurses say, they are trusted, and often do what they say, “they make excellent public policy advocates. When nurses speak, legislators listen, so they are in an ideal position to make the case for regs on env health.”
136: protecting children, “most vulnerable group in society--children” no FN quote has chronology, but FN not in, and not in Books.
151: ref to cigarette smoking and death rates from lung cancer;
233: climate change

Poplin, Irene Schuessler. review of Hugh Small, Florence Nightingale. Nursing History Review 9 (2001):235-37. completely taken in by his argument of her “breakdown” “Nightingale discovered her culpability in the death of the hospitalized soldiers. But the government cover up by civilian, military and royal leaders prevented her from rectifying grievous wrongs committed against ‘common soldiers.’ She blamed herself for their deaths because she had the means to prevent them and failed to act. According to Small, high mortality statistics based on death rates for each regiment in the Crimean War allowed comparison with the patients hospitalized at Scutari. When Nightingale discovered the implications of these statistics, she broke down from overwhelming guilt.” (236). 237: “Small’s book may be viewed as iconoclastic by readers wishing to retain the romantic Nightingale myth. But it is a must read for seekers of truth in knowledge.” “an exciting revelation”; refers to his use of primary sources. [re myth] [truth claim]

Porter, Roy. The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present. Harper Collins 1997. has fav refs to FN “pourriture d’hôpital (hospital gangrene); 375 FN wanted St T to move to country, but new building was pavilion, a design allowing cross-ventilation--she believed stagnant air bred disease; 377 gets title of Harley St. correct, re Crimea; 378 “Nursing was a key weapon in the hygiene war--a nurse could do more good than a physician. Dirt caused disease, sickness was a warning....” FN a “starchy but gifted organizer” 375-79

nursing in the 19th century to produce the first concept of nursing. In her early edicts, she wrote that nurses use a knowledge base that is different from the knowledge base physicians use. However, the nursing profession did not begin discussing the need to develop, articulate and test nursing theory until about 100 years later.” Modern nursing theory began in 1960s with likes of Virginia Henderson. Her “grand theory” “assisting individuals to gain independence in the performance of activities contributing to health or its recovery.” Theory dev now 4 general kinds: grand, middle range and situation specific here. Margaret Newman’s health and expanding consciousness; Rosemarie Parse’s theory of human becoming 27: grant Henderson 1966, King, Levine, Newman Oren, Parse, Rogers middle range: Beck, Mercer, Michel, Reed, Reed and Sherare situation specific Holzemer et al, Jeammott and Jemmott…Melzack and Wall 29: nursing definitions and theory. ICN has def Japan Nurses Assoc ANA

Post truth, Oxford Dictionaries has chosen it for national word of the year. An adjective, meaning “relating to or denoting circumstances in which objective facts are less influential in shaping public opinion than appeals to emotion and personal belief.”


FN, cites Cohen 1984 “first nurse epidemiologist” 381: Chicago 1893, Fenwick, Robb, Nutting, Dock met at meetings 49: Grey Nuns est first nursing in New France in 1737, Marguerite d’Youville;
87: FN fav on
93: FN “nursing’s first theorist”, on env 93: “the obs she made during the Crimean War provided the first set of principles for nursing practice. Much of what Nightingale articulated as nursing practice was directed toward manipulation of the environment, including patient areas that were clean and free from dirt and vermin, as well having fresh air and light.” warm, comfortable, adequate nutrition. Torres (1986) “notes that Nightingale provided nurses with a way to think about their clients and the environment by directing the focus of care to the creation of an env conducive to healing instead of a direct concern about disease processes. Nightingale’s conceptualization
clearly differentiated the role of nursing from that of medicine.”

93: McGill model, developed by Dr Moyra Allen and colleagues. “They recognized that many health problems and concerns faced by clients were most effectively approached through changes in lifestyle and long-standing habits, the McGill model developers focussed on the individual in the context of his or her family and, like, Nightingale before them, presented nursing as a profession that was complementary to medicine.” focus on health rather than illness and treatment, on all family members rather than the patient alone, on family goals, rather than on the nurse’s and on family strengths rather than their deficits.

95: Table 5-1 Theoretical Models for Nursing; lists 24! Beginning with Nightingale “Practice-based theories” 1859; McGill 1987 Health in the context of family; includes Roy 1974 biopsychosocial adaptive system; 525 on Cr War, cites Matters affecting 1324: FN recognized importance of nutrition.


Pratt, Edwin A. Pioneer Women in Victoria’s Reign, being Short Histories of Great Movements. London: George Newnes 1897. [not good on FN but useful on others] 121: Harley Street Nursing Home and Hospital for Governesses. 133: has £4461 raised for a training school and home in connection with the Liverpool Inf, “Miss Nightingale was consulted about the plans, and she gave them the same consideration, she said, “as if she were going to be herself the matron.” writing chair of Liverpool Training School, 134: operations started in 1862; objects (1) provide thoroughly educated and proficient nurses for the inf, (2) district nurses for the poor, and (3) sick nurses for private families; in 4 years divide city into 18 districts; at end of 1895 77 nurses and probs at Royal Inf, 55 private nurses, total
152; pres of com of Liverpool Tr School and Home for Nurses still Wm Rathbone, from Liverpool movement spread to Manchester, where in 1864 a Sick Poor and Private Nursing Inst founded on similar lines, but no tr school, so sent to London hosps, chiefly st T; now has district nursing dept with 39 nurses in 4 homes, Manchester and Salford; 135: 1868 East London Nursing Society est thro Hon Mrs Stuart Wortley, 1875 Metro and Natl

Preece, Richard. Dr "Devils’ advocate: Florence Nightingale and OH." Occupational Health online 9 July 2010. “She is arguably the most famous occupational health (OH) nurse in history.” we forget she is inexorably linked with caring for workers close to their workplace. “While Florence....” PubMed is NIH free digital archives


Prospectus, Liverpool Training School and Home for Nurses. pamphlet 32 pp has numerous quotes of FN, and J.S. Howson’s paper on nursing read at Social Sc meeting 1858. cites Trained Nurses among the Labouring Poor, by a Physician. London Churchill 1860. (c1861, ref to “new ed” of Notes on Nursing “What is a Nurse”) “Miss Nightingale has given our plans the same consideration as if (to use her own words) she were going to be herself the matron.” and advice from lady supt St John’s House, ho sec of Devonshire Sq Nursing Inst, founded by Mrs Fry, and from McNeill, Jebb, Clough, Wardr, Whitfield. FN quoted:

The public hitherto has had a very inadequate idea of what is meant by nursing the sick. There has been little demand for really good nurses, and consequently very few such have been available. We know more clearly than heretofore that the care of the sick demands acquirements of a much higher order than the common nurse can attain to. The nurse’s work is in fact a very important part of medical practice, and for its due exercise requires a considerable amount of knowledge, both of the laws of health and of disease.

At present a nurse, however willing, has no opportunity of arriving at this knowledge. She has neither instruction nor training, and she comes to her duty with all her experience to learn, and nobody qualified to enlighten her. Everywhere this want is felt, and in a very short time it is to be hope that every large town will make provision for training its nurses, both for rich and poor, as well as for hospital service.” (5) H1/ST/NC15/10

Public Health Nursing. 77 items in FN Search,

Pugh, Martin. *The March of Women: A Revisionist Analysis of the Campaign for Women’s Suffrage 1866-1914*. Oxford: Oxford University Press 2000. 1: Begins with FN reference that did not need the vote, and 147: that women’s rights absurd as some did not take opportunities that were there, but he did not say she opposed, but that she did come to support (148); but never ack that she paid dues, wrote for and signed petitions for, p 55


Purvis, June, ed. *Women’s History: Britain 1850-1945*. New York: St Martin’s Press 1995. UG HQ1593 W579; Also New York: Routledge 2005; “Debate and Controversy in Women’s History” 2008 ebook; Chapter 1 “From ‘women worthies’ to poststructuralism? Debate and controversy in women’s history in Britain.” Intro by Purvis: 2: FN as supt “drastically reduced the death rate of British soldiers. End13 cites Pollard, Tooley and A Matheson; These accounts, however present Miss Nightingale as the self-sacrificing ‘Lady with the Lamp,’ mopping the brow of sick soldiers and overcoming the barriers of her ‘ladylike’ status to nurse men who were her social inferiors. No mention is made of her ambition, ruthlessness and iron determination since, as Vicinus observes, such characteristics did not fit the public experiences about middle-class women.” end14 Vicinus Independent women. [so, exaggerates effectiveness, and does character assassination]

“the upper middle-class spinster Florence Nightingale” 125: Nightingale one of the “avowed professional spinsters” Purvis got Nightingale wrong in both directions, at first exaggerating her achievements, using poor secondary sources to credit her with “drastically” reducing the death rates of British soldiers--no doubt her work helped--but she herself credited the Sanitary and Supply Commissions for making the basic changes needed. But Purvis otherwise fell for the sarcasm and cheap-shot accusations of “ambition” and “ruthlessness,” faulting Nightingale twice with being a spinster, even an “avowed, professional” spinster, whatever that is.

Pushpa, Biswas, *Florence Nightingale: She Dared to be Different*. 2010. 178. [not seen, not available by ILL]

himself: If germs are the secret of disease in wine and beer, may not germs also be the secret of much human disease? 53: Lister wrote Pasteur 13 Feb 1874, thanks him for his brilliant researches “demonstrated to me the truth of the germ theory of putrefaction, and thus furnished me with the principle upon which alone the antiseptic system can be carried out.” Lister had been 9 years at it.


Rafferty, Anne Marie. The Politics of Nursing Knowledge. London: Routledge 1996. ILL condescending on nursins, uses Baly and FB Smith, C. Maggs Origins. 201 “Recent research has, however, provided a welcome corrective to an otherwise hagiographical record, subjecting Florence Nightingale’s achievements in military and secular nursing to critical scrutiny and evaluation.”

“Foreword” to Godden ix-x. 8 refs to FN in 2 pages, 7 of them scathing, several with alliteration, and needless to say, for a foreword, with no specifics: “rules her nursing dominion from her bedroom,” “mishap and misadventure,” “preserving the pristine purity of the Nightingale name took precedence,” “brutal and waspish,” “unleashed a florid form of control-freakery,” “frustrated” “desperately trying to direct,” did not take risks into account, “failed in her duty as a mentor”; Registration revisited
37: Jowett as mentor; cites Hektor as antiFN source; has FN refusing to join suffrage society, until later
62: few of medical registrationists in RBNA shared views of radical nursing faction, e.g. Acland typical with change in 1887, approved by FN; Mrs Fenwick’s power base small, outnumbered by medical men; 7 were nurses, meetings rife with controversy
43: battle 30 plus years
49: Wood and Fenwick vs Nurses as Domestic; St T and London chief opponents; Dyce Duckworth
51: prince and princess of Wales patronized rival organiz, NPFN National Pension Fund for Nurses; royals split
62: Princess Christian, nursing world divided, and royal family
63: Registration in Retreat, after royal charter granted, General Council rules changed, permanent offices removed; bylaws changed in Mrs Fenwick’s absence as supt of English contingent in Graeco-Turkish War; new exec; Mrs Fenwick replaced by a nominee of Mr Henry Burdett. “Daggers were drawn between Henry Burdett and Mrs Bedford Fenwick.” allegations of irregularities, financial and const, 64: Dr Bedford Fenwick was treas; “The greatest blow to the pro-registrationist lobby was struck in 1896 when, by a narrow majority, the RBNA passed a resolution opposing registration. End 120 (Nutting and Dock 1:48). This breach marked
the beginning of the ‘internecine treachery’ which finally led to the forced retirement of the Bedford Fenwicks from office.” 121; Matrons’ Council still pro reg; until ICN founded only one; 64: Sydney Holland, Lord Knutsford called nursing “childishly simple” 2 65: Wakely (shd be Wakley) 70: Catherine Wood, founder New Zealand first country to have state reg 1901 85: Sydney Holland, nursing “childishly simple” 94: Scottish Poor Law nurses had in reg 98: Caretaker Council 1919-23, Matrons’ Council; Professional Union of Trained Nurses; 259: Memorandum on the Reg of Nurses and the RBNA in Opposition to the Petition of HRH Helena, Princess Christian...for the Grant of a charter...1892;

Rafferty, Anne-Marie, Jane Robinson and Ruth Elkan, eds. Nursing History and the Politics of Welfare. London: Routledge 1997. has 10 page intro but no article by her. Ft 23 on p 201 calls Baly’s demythologising account of the politics of the Nightingale fund is a more tempered revisionist account than Smith’s iconoclasism. In Nursing Legacy;

Railton, Margaret and Marshall Barr. The Royal Berkshire Hospital 1839-1989. Reading: Royal Berkshire Hospital 1989. 72 77. Chap 3 Expansion etc. 1856-86. 75: 1861 additional wards to be built and conv day rooms. Local arch Joseph Morris asked to submit designs, 2 wings, to retain Henry Briant’s imposing entrance. Comp. 1863 Holmes and Bristowe sent to expect, 4 hours there, got good review. 1865 again a shortage of beds. 77: reorg of nursing. 77: FN’s inst, and the Liverpool tr Inst and Dr Falconer of the Bath Home for Trained Nurses all approached for advice; FN wrote herself; board impress by Falconer and Bath Home and in Jun 1866 entered into an agreement whereby the home wd supply the hosp with 1 trained set up and 3 trained nurses; 78: Miss Smith the new supt 1866, in Dec 1866 agreement with Bath Home terminated, and other supt and completely new staff wd be obtained from elsewhere; FN approached, but corr missing; 79: gradually nursing dept brought to full strength; 81: in June 1871 Miss Baster, supt at Eye and Ear Inf at Bradford appointed supt at salary of £70, new period of expansion, out-patients dept and consid of conv home;

Ramelson, Marian, *The Petticoat Rebellion: A Century of Struggle for Women’s Rights*. London: Lawrence & Wishart 1967. States: “It is not generally realized that there was not a single aspect of the movement to which she did not give her public support. This included not only education for women and girls: she was one of the first signatories to the letter protesting against the operation of the Contagious Diseases Acts in 1870 (1870-88), she sent an annual donation to the Women’s Suffrage Society from its beginning to her death in 1910, she supported every effort to get the legal recognition of the separate identity of a female, for mother’s rights in regard to the custody of children, and for women separated from their husbands to keep their own earnings.”

p 40

Rao, G.A.J. “Florence Nightingale.” *Nursing Journal of India* 62,6 (June 1971):179. only 1 page, praise of FN work on India. “Her unparalleled contribution to the sanitary uplift in India was so great that she may be called the architects of Indian sanitation.” “She regarded herself, and in large measure was able to act as a sanitary servant of the army and people of India.”


492: “She declined an invitation to join the London National Society for Women Suffrage in 1867, although she had supported the 1850s campaign for a married women’s property act led by her cousin Barbara Bodichon.” [date wrong I think, and she did join; Helen Taylor letter of 1868 thanks for prompt signature and Clementia Taylor letter of 1868 sent receipt for dues, and one in 1870 thanks for another cheque and for her work on the CDA] radical deconstruction. Sentimentalized in Victorian hagiographies, sacrosanct rep “But the reality of N’s sense of personal failure and despair is a far more compelling story, recently uncovered by Hugh Small” [no, invented the story] “After analyzing her own statistics, Nightingale came to the conclusion, a year after the Crimean War was over, that she had unwittingly contributed to the unnecessary deaths of thousands of the sick and wounded in her supposedly prestigious Barrack Hospital in Scutari.” [but not her stats, and the barrack condemned by doctors] “Culpability” falls for Hugh Small completely. First woman in RSS (yes) “supposedly sole pioneer of women’s nursing in Britain [486-87] 487: this “myth” [but she never claimed to be the only one; gave great credit to Wardroper and Mary Jones]; cites Unison’s rejection of FN in 1999, uncritically; father Unitarian [not quite]; 488:” Institute for the Care of Sick
Gentlewomen” [no] FN overhauled its admin, battle with hosp’s governing body, “which resented her interference” [no refs, and if read Canning corr not true]; 490: Hugh Small again, quotes that “bad hygiene had killed thousands of patients in her hospital” [no refs, and if read Canning corr not true], uses rough figures for mortality, 5000 follows Small; 491: Notes on Matters affecting a masterpiece of stat analysis [yes], wd become Bible of public health reform work in Br [no] snide remark about “an interfering woman” offered unpaid advice on India; “other nursing pioneers from the Crimea, such as Bridgeman and Seacole” overlooks E Fry; FN turned against hospitals; FN and Wardroper ok 482: brief mention of wkh reform; 492: “Nightingale never lent her voice to the women’s suffrage movement, privately doubting her sex’s ability to use the franchise wisely and publicly arguing that there were far more pressing social evils that shd be first addressed, such as women’s economic position” “She thus declined an inv to join the London National Society for Women’s Suffrage in 1867” [wrong, gives no sources; 5:388-409 includes thanks from Suffrage Society for her support]; and yet another boost to Hugh Small’s website, but not the collected Works


Rappaport ideas “Historical consultant for 2005 Channel 4 doc on Seacole, like Robinson. 9: after Kingston “She had then run a provisioning business and a succession of boarding houses in the Panamanian Isthmus during the Gold Rush years of the early 1850s, where her medical skills had frequently been called upon, particularly in the treatment of yellow fever.” [no] “Mary” British Hotel. 9-10: W.H. Russell, who in September 1855 called her a kind and successful physician...who doctors and cures all manner of men with extraordinary success’”; 11: explains that QV not vs coloureds, so, “The fact that Queen Victoria never solicited a personal meeting with Mary Seacole cannot therefore have been a matter of Seacole’s colour.” Nor did she lack royal recs. yet acknowledged only in circular in Times 30 January 1857, the second, for fund, prince of Wales had donated £25 and duke of Edinburgh £15. there can be only one rational explanation for the queen’s reluctance, “as a sutler to the troops” “the silence is deafening” someone must have turned the queen’s mind against making a public ack of Seacole: “There is only one logical candidate to fit the latter argument: Florence Nightingale--a woman whom the queen revered as a paragon of her sex and whose opinions she took as gospel.” (no, not at all!); 12: “another, more telling reason behind Nightingale’s implacable opposition to Seacole has been revealed by the latest Nightingale biographer, Mark Bostridge” in Guardian Feb 2004, notes of “private conversation between Florence and her sister” meeting of queen and FN. “At some stage the queen must, surely, have interrogated Nightingale about the celebrated Mrs Seacole. Nightingale had met
Mary Seacole at Scutari, on which occasion she had flatly 
declined Seacole’s offer of nursing assistance.” [but no evidence 
Seacole offered there, she was on way to Balaclava with 
supplies]; “Nightingale’s published corr contains not a word” 
about Seacole. “Again, it is as though Seacole’s name has been 
deliberately excluded. Or has it” Hugh Small turned up, 1870 
letter “Florence”. Bostridge 2004 Guardian article re private 
conversation with sister, 14 year old illeg daughter, Colonel 
Bunbury, and Soyer’s error [but this is an undated, unsigned book 
of jottings, not at all clear FN the sources]; 13: queen induced 
to subscribe in 1857; “What is clear, however, is that the 1870 
letter shows Florence Nightingale firmly reasserting her position 
as the figurehead of British nursing. For, as self-appointed 
“Matron and Chaperone and Mother of the Army” she insisted that 
she “could not help knowing” Seacole’s true character.” wanted to 
go down as “mother of the Army”. only 3 or 4 years of public 
profile. 15: “The final irony is that, as Nightingale’s star 
wanes, the post-colonial atmosphere of political correctness has 
not ensured that Mary Seacole’s will once more burn bright.” fin.

Rappaport, Helen. No Place for Ladies: The Untold Story of Women 
in the Crimean War. London: Aurum 2007. mainly sec sources, some 
Ms, little FN from primary sources; one chapter is “Miss 
Nightingale Queens It with Absolute Power” ILL, lots on Seacole 
“Mary” p 184 implies Sally or Sarah was her mixed race daughter; 
Ref to Steve Jones on FN nurses; chap 6 lots on FN; good book, no 
mss but ok refs
98: Marianne Young, surgeon’s wife was at Varna, pub letter 24 
Oct 1854 in Times appeal for wives to nurse, ignored, wives too 
disreputable; 99: some wives engaged informally; no nurses at 
Varna when cholera epidemic on; 102-03 Felicia Skene, aunt of 
Janie Skene, Oxford; 105: Acland recommended but rejected, except 
Susannah Faulkner a widow hired at 16s a week; 107: FN had 2nd 
thoughts about Mrs Dorothy Travels, told her her service not 
reqd, so not 40; 10 groups of nurses wd go, some 229 in all; 108: 
at Marseilles, Mrs Larscher, who had been hired as had experience 
as family nurse to SH’s brother, fell ill and left behind; chap 7 
misery; some coverage of Russian nursing; chap 10 Miss 
Nightingale Queens It with Absolute Power; run in with James 
Barry; 164-78, and other. Some good sources, but except for a bit 
of Wellcome, printed only. Used WO records and various archives, 
good on other women, Mrs Duberley, Seacole fan, sarcastic on FN; 
has material on French nuns, Russian (seems read Russian!); 
99 on French, 101 617 applications; 103 Oxford group Mrs Susannah 
Faulkner accepted of Skene group.

Ratcliffe, S.K. Sir William Wedderburn and the Indian Reform 
Movement. London: Allen & Unwin 1923; has chap 7 on FN, “Florence 
Nightingale; Education; Temperance” 120-26; 120-21: “when sending 
him the rough drafts she writes:
“The more you are so kind as to correct and alter, the better pleased I shall be. Please do not let me be impertinent to the India Office, nor to the departments. It is so very unbecoming of me to be governessing the Government. I feel inclined to sign myself 'Cat’s Paw.'”;

January 1884 letter 1:121: “May success attend your arrival in India. May land banks and all other goods for our native friends follow your footsteps, and may you above all continue enlightening us in England and show us the real meaning of Lord Ripon’s policy....long may you live to show the working of liberal principles on that most stupendous stage of the world.”;

and on his appointment to Bombay High Court FN wrote 1:121: May you proceed from strength to strength” (so, there are letters we don’t have); Indian Famine Union formed; 62: expansion of supreme and prov councils, grant of power over budget, creation of a st com of House of Co to consider any protest from majorities of such councils against the exec; resolutions yearly;

77: India Parl com: protests against forward policy on NW frontier and consequent expansion of mil expenditure; crit of Indian budget system, for sc inquiry into condition of rayat [ryot] and causes of famine; advocacy of reform prog of the INC; 1895 Con govt; Wedderburn moved amendment to address regretting govt decided not to withdraw from Chitral, violating pledge given by viceroy’s proclamation, dangerously adding to govt resp and leading to increase in already overgrown mil expenditure; 77 vote for Indian troops at Suakim, another part of empire; Fawcett denounced as “a masterpiece of melancholy meanness”; 79: proposed a royal commission, appts; Lord Welby, a Treasury official chair, G.N. Curzon, Caine on for India; witnesses incl Naoroji, Wacha, Bangerjea, Iler and Gokhale, Wedderburn in on minority report;

80-81; Lord George Hamilton sec of state for Cons; 83: Wedderburn moved in Feb 1897 an amendment to address for a full and independent inquiry into the condition of the masses of the India people, re Govt Famine Relief Fund only from fresh taxation; 84: year of diamond jubilee, but famine, over 4 M on relief in 1897, but problem re false accusation (87) on troops; 90 when Curzon left famine already starting, 1899 and 1900 terrible, but UK in S African War, which he opposed; 91: plea April 1900 for intensive inquiry and in July moved for famine relief, but Indian debates in shadow of war, Chamberlain and Kruger; 92: Wedderburn believed the war avoidable; Indian Famine Union, Wedderburn’s motions in house for inquiry opposed by Hamilton; 111 1900 terrible; 112 6 M receiving relief; letter to April 1901 Times and other;

Letter to Times April 1901 Wedderburn on famine

Rathbone, William. Reminiscences of Miss Nightingale: Her Principles, Work and Powers. typescript n.d. 7 pp Wellcome SA/QNI/P.10/4; first went to see her in 1859/60 to ask for tr nurses for the north; she had been in Liverpool only once, remembered details; lack of district nurses led them, at FN’s
suggestion, to build a nurses’ home and introduce the N system into the inf, from that spread first to Manchester, the two other hosps in Liverpool and all the most important hospitals in the north of Eng, also Scotland; Liverpool workh inf, tr school successful, one of best tr schools for nurses in UK;

Rathbone, William. *Sketch of the History and Progress of District Nursing*, from its commencement in the year 1859 to the present date, including the foundation by the queen of the Queen Victoria Jubilee Institute for Nursing the poor in their own homes. London: Macmillan 1890.

with FN intro ix-xxii. 133 pp. district work recent (6); argues better at home, even miserable homes (7); Gibbon chair of inf took prelim step of examination of nursing at KCH and St T, supported offer to erect a bldg to be used as a tr school, the Liverpool Training School and Home for Nurses (22); esprit de corps, nursing the home (all very like FN); 2 of the largest wok hosps, Manchester 1500 beds, Birmingham 1700 now under charge of Jones’s successors. East London Nursing Society founded 1868 by Hon Mrs Stuart Wortley, Robt Wigram et al, main features of Liverpool system, but w/o homes (45); 1874 foundation of Metro and Nat, initiated by council of Order of St John of Jerusalem, set on foot by Lady Strangford, Sir Edmund Lechmere and Wigram (46); district homes in London of Metro North London (Holloway), Paddington, Marylebone, Hampstead; South London (Battersea), Kensington, Walworth, Westminster, Chelsea; Jubilee: queen appointed duke of Westminster, Jas Paget, and R. Alcock trustees of the fund, to report to her; provisional com (included women); queen used ancient charity of St Katharine’s Hosp, an eccl corp est on site of St Katharine’s Wharf, near Tower, moved to Regent’s park when dock constructed, founded 1148 by Queen Matilda, queens always the patron, linked to Fund (82-84); Scotland, Ireland (88); royal charter issued Sept 1890, council appt: master of St Katharine’s (Peile), duke of W, Paget, Alcock, Mrs T Acland, Mrs Dacre Craven, Mrs Henry Grenfell, Lady O’Hagan, Lady Ponsonby, Ly Rosebery, HBC, Rev Darley, Dyce Duckworth, Oliver Heywood, John Jaffray, earl of Meath, W Rathbone vp, Scottish council had Lady Rosebery pres, incl Lumsden hon supt Royal inf Aberdeen, Joseph Bell, Douglas Maclagan, Dr Donald Macleod (89-91);


and made significant improvements over the winter of 1854-1855. Medical care and treatment improved after the Crimean War, especially while on active service.” surgeons better trained, more anesthetics, “tried to repair injured limbs rather than immediately amputate them.” trained stretcher bearers by Boer War. “Having read of these horrible conditions and soldier suffering in the Crimea, Florence Nightingale volunteered to head a female nursing staff at the military hospital at Scutari. She initially recruited thirty-eight female nurses to serve with her. N made significant improvements in hospital bedding and clothing cleanliness; diets; and medical supply availability and organization. Her assistance improved hospital conditions for the soldiers in the Crimea, especially over the first harsh winter of 1854-1855.” after Cr War, AHC est 1857, soldiers enlisted specifically for med service, Aldershot had course; by 1883 2000 men in. Army Nursing Service formed in 1861.


Raugh, Harold E., Jr. The Victorians at War 1815-1914: An Encyclopedia of British Military History. Santa Barbara CA ABC-Clio 2004. 405 pp. 234: “Conditions were unsanitary, the soldiers were overcrowded, and equipment, medicine and supplies were in short supply. Florence Nightingale headed the Scutari hospital female nursing staff and made significant improvements over the winter of 1854-1855.” medical care and tr improved. 234": “Having read of these horrible conditions and soldier suffering in the Crimea, Florence Nightingale volunteered to head a female nursing staff at the military hospital at Scutari. She initially recruited thirty-eight female nurses to serve with her. Nightingale made significant improvements in hospital, bedding and clothing cleanliness; diets; and medical supply availability and organization. Her assistance improved hospital conditions for the soldiers in the Crimea, especially over the first harsh winter of 1854-1855.”

Raugh, Harold E., Jr. The Victorians at War 1815-1914: An Encyclopedia of British Military History. Santa Barbara CA ABC-Clio 2004. 405 pp no Seacole or nuns, or SH or JS; FN 244-45. FN “a leading progressive and reformer who sought to improve medical and sanitary conditions in the British Army, notably at the Scutari General Hospital [BH] during eh Crimean War (1854-1856) and within British society as a whole.”... Blackwell, ; “nursing studies in Germany” then “resident lady supt of a hosp of invalid women in London”; Alma, Times 245: arrival Nov 1854, mixed reception; at Scutari Gen Hosp [wrong] “immediately set to work improving the filthy conditions
of the hospital by washing sheets and blankets, establishing hygiene instructions to be given to the orderlies, improving patient diets and streamlining the feeding process. She also organized the nursing services at Scutari. Emerged with reputation; cites Summers that she monopolized the nursing hi of the war; returned as heroine, “She was instrumental in establishing the army Sanitary Commission in 1857 and helping improve the sanitation and quality of life in soldiers’ barracks” rest of life trying to improve standards of nursing and advocating women’s rights. Blind in 1895; cites Kaufman 2001; Palmer 1987; Royle 2000; Simkin n.d. Strachey 1918; Summers 1988;


J. Fawcett said FN explicated what became known as nursing’s meta-paradigm, and “laws of nursing” gave distinct perspective; “It has been suggested that nursing became a science when Nightingale identified her laws of nursing” cites Barritt 1973; (good grief!); 31: “While myths about the success of this school [St T] abound, due in part to the biased writings of biographer Cook (1942) on this subject, [Cook 1942!]; def of nursing; FN not Cartesian, contrary to other scholars of her day; but holistic, because of her spiritual perspective, and poverty not a moral deficit; 34: FN’s concept of the patient’s environment as a major component in her model emerged in part from her experiences early in the Cr War; “She was vehement in her disbelief of the germ theory and regarded ‘contagion’ as a word borrowed from poets that was connected with ‘no end of absurdities’ (cites FN Notes 1859). “In fact she was deeply concerned that attention to ‘mystic rites’ such as antisepsis and disinfection would sway people from the real problem of poor sanitation (Nightingale, 1949 [which is Hampton’s Sick Nursing and Health Nursing 1893--does it say that?]); disease as reparative process; FN’s feminism; cites Widerquist “particularly her Unitarian beliefs in charity” (37); 38 has a diagram of FN’s model of nursing; 39: consistency
Nightingale’s laws of nursing were empirical generalizations developed according to the canons of inductive logic, induced in a consistent and logical manner from practice situations.” pragmatic adequacy; Although her rejection of bacteriologic principles limited the explanatory power of the relationships in her model; Torres says current theories on stress, need and adaptation derive from her model; Unfortunately, some of the research modeled after Nightingale’s work is based on her myths, rather than her facts and theories.” e.g. motivation to enter nursing; nursing ed; Regardless of her own education, however, Nightingale did not establish nursing educ in the university.” protection from sexual harassment; okay on reg NANDA diagnoses. Lots wrong with this.


Reid, Edith Gittings. Florence Nightingale: A Drama. New York: Macmillan 1922. Wayne State. 3 act play. UCLA also 1923 date

Reid, Douglas Arthur, Memories of the Crimean War: January 1855 to June 1856. London: St Catherines Press 1911; [this the original, also as edited Soldier-Surgeon 1968] quoted in Lawson, Surgeon in the Crimea endnote 4 on 192 (which is a quotation from Memories, Seacole had a store at Kadikoi, near Balaclava, where sold all sorts of commodities, citing grand food luxuries, in Russell’s book “Mrs Seacole’s Hut”, a sutler or camp follower who sold goods to troops; Sardinians there for politics, Cavour hoped that French Napoleon III wd help him drive the Austrians out of Lombardy and did; Sardinians acquitted themselves well, assisted in French defeat at Battle of Tchernaya 16th August 1855; completion of Varna-Monastery telegraph; Chapter 6 has a lot on FN, a few bits on Seacole; on arrival Feb 5 1855 started for front; got to Gordon’s battery, found colonel; made acq of surgeon, R.C. Anderson, who took him to the “hospital.” “Naturally, I expected to see a hut or building of some kind and was much astonished when he pointed out a row of bell tents pitched, like all the others, in the mud. I looked into some of them and found them crowded with sick, ten or twelve men in each tent with their feet towards the pole and their heads towards the curtain. They were lying on the bare ground wrapped in their great coats. It struck me that, whatever was the matter with them, they had a very poor chance of recovery. They were being sent down daily in batches to Balaklava for embarkation to Scutari or England. The diseases from which they suffered were chiefly dysentery and fever. The regiment had then been more than two months in camp, and this was the best they could do for their sick and wounded!” Lord Raglan paid a surprise visit to our Camp Hospital after the huts had been erected. He expressed himself as much pleased
with its equipment and with the kind of huts supplied. I cannot say that we were satisfied. That they were an improvement upon the tents previously used as a hospital there can be no question, but the huts were constructed of thin boards, and the roofs were not protected by felt and consequently were not weatherproof. As to the equipment, the supply of medical and surgical necessaries was meagre in the extreme, and as to medical comforts there were none. We could not get proper diet for the patients, nor could anything be cooked properly. An order came out that as many sick as possible should be sent away home and not detained at Scutari, where the hospitals were becoming overcrowded. This was a sensible arrangement, as it enabled us to keep our regimental hospital more free for the reception of recent casualties, which were coming in continually. Some of the wounded men were dreadfully troubled by the flies that, in spite of all precautions managed to get on their wounds with the result that very often, on removing the dressings, we found them full of maggots. It must be borne in mind that antiseptic treatment was not available fifty-five years ago, for the simple reason that our present-day antiseptics were unknown. We managed to kill the maggots by filling the wounds with calomel, which happened to be one of the drugs of which we had a plentiful supply, and for which we had little other use. The water that we used to cleanse the wounds was by no mean free from impurities, so that there was ample reason for getting the poor fellows out of camp as soon as they could be moved.


da Florence May 44n “Seacole, Mrs (storekeeper at Kadikoi) 44n It was during this journey that Reid made the acquaintance of the celebrated Mrs Seacole, the mulatto who kept a store at Kadikoi and was renowned for her kindness to the wounded and sick awaiting evacuation at Balaklava Reid 13-14. Reid arrived at Balaclava early Feb 1855 as asst surgeon; scandal of breakdown; 10 refs to FN ships ill equipped and overcrowded charnel houses
19 FN organized a unit of 38 women nurses, when reached Scutari attitude of medical officers at first indifferent if not antagonistic, but she moved swiftly to clean up and reorganize, incurred the latent and finally the open antagonism of Dr Hall; FN cd not understand why the army wd not adjust itself to meet the new needs; Hall a benevolent despot; 20 surgeons resented outsider, interloper;
141 9 May 1856 expect FN round the hospital in a day or two,
whitewashing; so FN knew Kulali bad [Koulali]
157: quotes Lawson on Seacole.
192 endnote 4 in Lawson: “Reid added 'The authorities, in recognition of her benevolent services, awarded her the Crimean Medal. Some years afterwards I met her at Charing Cross. The medal first attracted my eye, and on looking up I recognised her duskey countenance. Of course I stopped her, and we had a short talk together about Crimean times. She had a store at Kadikoi, near Balaclava, for some time, where she sold all sorts of commodities, clothing and articles of food that were luxuries to us. I need not say that she was largely patronised. Her store appears as a landmark in one of the maps in Russell’s book on the war. It is there called ‘Mrs Seacole’s Hut.’

Mrs Seacole was in fact one of the many sutlers or camp followers who sold goods (mostly food and drink) to the troops, and who followed the army on every campaign, appearing in the most unlikely places. They were present in great numbers in Balaclava and Kadikoi.”


Reidcontd

Not very long after Lord Raglan’s visit, I was one day walking about the camp when I noticed a group of mounted officers, some evidently of high rank, approaching our lines. They turned out to be Lord Raglan, General Pelissier and a number of staff officers, English and French, escorting Miss Florence Nightingale, who had come up from Scutari to see what provision had been made for the sick and wounded at the front. She visited the hospital, and I am afraid what she saw must have made her woman’s heart bleed. But her visit was productive of much good. Through her report and her influence, the arrangements were improved and went on improving until the time came when, long before the war was over, we had almost a superabundance of medical comforts and even luxuries sent to the hospital.

Macdonald, Times writes:
42: “Both Newton and Struthers--two of the principal doctors at the Scutari Hospital--it may be a consolation to know, were tended to their last moments, and had their dying eyes closed, by Miss Nightingale herself. Wherever there is disease in its most dangerous form, and the hand of the spoiler distressingly nigh, there is that incomparable woman sure to be seen; her benignant presence is an influence for good comfort, even amid the struggles of expiring nature. She is a “Ministering Angel,” without any exaggeration, in these hospitals, and as her slender form glides quietly along each corridor, every poor fellow’s face softens with gratitude at the sight of her. When all the medical officers have retired for the night, and silence and darkness
have settled down upon those miles of prostrate sick, she may be observed alone, with a little lamp in her hand, making her solitary rounds. The popular instinct was not mistaken which..... “Day of Humiliation” at St Margaret’s Westminster, Rev Dr Melville [tribute. Henry Melvill]


The History of Nursing in Ireland. Hospitals for the poor founded because of bad health, poverty, in “period of conquest” Dr Steevens’ Hosp, largely founded by his sister, 326-
The Training of Nurses 327-

“In 1847 nurses were untrained and often illiterate. They did not wear uniforms and were not organised. They were, in general, kind hearted and attentive and looked after their patients well as far as they could.” hosp conds “appalling” nuns in Europe, but dissolution

“So it was that Florence Nightingale, the foundress of the British nursing tradition, went to seek nursing experience first in France and Italy and later in Ireland. It is not recorded that she actually nursed in any of the continental hospitals she visited, but she closely observed the organisation of the various establishments. She came to Dublin in 1852 where she hope to be accepted by the Irish Sisters of Charity for training as a nursing sister. Negotiations however fell through, but there was an interesting sequel. In 1854 a party of Irish Sisters of Mercy went to the Crimea as a voluntary expedition and worked in the army hospital there, doing the hard, practical nursing which until then was virtually unknown. The French Sisters of Charity were also working with the French Army and the standard of nursing care given to the French soldiers compared with the British was in such sharp contrast that the necessity of obtaining proper nursing for the British became a government concern. Nurses were sent out from England but they were little more than camp followers, despite the efforts of Florence Nightingale. All of this, however, did highlight the need for an improved nursing standard in Britain and laid the foundation for present day standards in that country. NO

Progress in nursing in Ireland and in England were closely linked until 1921 when Ireland established its own government.”

proximity

Reverby, Susan M. Ordered to Care: The Dilemma of American
Nursing, 1850-1945. Cambridge: Cambridge Univ Press 1987. 41: FN accepted natural sexual div of labour, special nature of women; hosp training. 42: “She never accepted the ideas of germ theory and disease specificity.” 43: “Training was to separate nurses from personal and social contact with patients and to prepare them to act as household mistresses, disciplining their servants.” even redesigned the ward, barracks arr with 2 rows of bed, “to allow the nurse to survey the condition of her charges and to move quickly to discipline the unruly.” cites FBS as “negative and controversial recent biography” cites only printed sources; Louisa May Alcott Hospital Sketches. “All our women are Florence Nightingales” Civil War in New York Herald 1864; 49: Louise Darche; gets balance right on what FN sought; hierarchy, moral training. another erroneous ref on germ theory (author, Wellesley prof, named chair, history of ideas and women’s and gender studies)

Review of 3rd ed Notes on Hospitals anon review. Medical Times and Gazette (30 January 1864):129-30. 129: Critical, with deference, begins: “It is sad to see a work of so much value--full of such useful information--disfigured by a few serious and elementary mistakes. Much as all medical men must appreciate the philanthropic labours of its authoress, it is a false kindness to pass erroneous views without a protest. This becomes the more incumbent on us as the third editions sins more notably than its predecessors.”... “We feel bound not to become tacit accomplices in the spread of opinions which are not accounted sound by competent authorities.”
129: objected to comment spread of disease better indicator than mortality rate; work directed to remedy of evils; but vs “Wholesale denunciation of ‘contagion and infection’, which would require rough treatment if not by a lady; Vs axiom that sanitary condition modifies the ultimate issue of cases. Objection to the numerical display, mortality of 90.84, wholesale denunciation of contagion and infection, to lay to rest such spectres. Farr defended Nightingale
130: notes pavilion principle [no comment on] convalescent hospitals, Herbert, children’s hospitals cautionary, Indian military hospitals, critical do not preclude “heartily congratulating Miss Nightingale on the public appreciation which has given rise to a third, and all but rewritten edition of her work. Great service to our profession. Re removal of St Thomas’.


Reynolds, Stephen, ed. For All the Saints. Toronto: Anglican Book

final efforts to preserve peace. Turkish decl of war greeted with enthusiasm in England. Kingsley declared the Turks “fighting on God’s side” and Marx that the Br and Fr ruling classes were being driven by the inexorable force of history to side with enemy of tsar.

86: 23 Sept 1853 Br and Fr govts ordered their fleets to enter the Dardanelles; on 26 Sept Turkish Grand council voted for war with Russia; and 4 Oct officially declared war, with ult to Russia to evacuate the principalities, if not a positive reply in 15 days, wd commence hostilities; Br and Fr ambassadors encouraged;

18 October 1853 Turks attacked Russian positions, the action Stratford had urged to avoid because gave Turks appearance of aggression. tsar delayed until 1 Nov, equivalent of decl of war: “Russia is challenged to fight; she has therefore no other course left her than putting her trust in God, to have recourse to arms in order to compel the Ottoman Govt to respect treaties and to obtain reparation for the insults...to legitimate solicitude for the defence of the Orthodox faith...”

130: disease. “The armies of all the belligerents were stricken with severe epidemics of cholera and typhus, dysentery and malaria, and owing to the lack of sanitary facilities in military hospitals, even minor wounds suffered through accident or on the battlefield generally proved fatal. Endnote 12.” Grim conditions reported “called forth the heroic efforts of the British nurse Florence Nightingale, who organized a corps of volunteer nurses and initiated a thoroughgoing reform of the British medical services. Endnote 13. Uses Hibbert, Curtiss and WS [exagg claim] 174: Austrian ult to Russia 28 Dec 1855, prelim conditions for peace, ostensibly agreed upon by Austria, Br and Fr, taken to Petersburg

only brief mention of FN, positive, re disease, cites Hibbert that much of sickness brought on by the men by excessive drinking 43,54,260,285.

Richards, Laura E. *Samuel Gridley Howe.* New York: Appleton-Century. includes nice letter of him to FN encouraging 145, and FN’s to Mrs Howe on his death 146-47

Richards, Laura E. *Florence Nightingale: The Angel of the Crimea, a Story for Young People.* Floating Press 2014 [1945]. Kobo ebook 68: “When Miss Nightingale arrived at Scutari, the death rate in the Barrack Hospital was sixty per cent; within a few months it was reduced to one per cent, and this, under heaven, was accomplished by her and her devoted band of nurses. Do you wonder that she was called ‘The Angel of the Crimea’”


Robert G. Richardson also author of The Surgeon’s Heart: A History of Cardiac Surgery 1969 (published 1958 to, consultant medical editor for Britannica

Richardson, Robert G., ed. *Nurse Sarah Anne: With Florence Nightingale at Scutari.* London: John Murray 1977. Foreword Charles Hugh Terrot. 183 pp. Da of a clergyman. Huguenot family. Da of a bishop, entered in 1847 as “child” or novice, then sister then eldress. One of the 8 chosen; 7: returned with impaired health, worked at St T, did some welfare work. Excerpts from journal; 66: 21 Oct at Belgravia Sq, met FN, felt impulse to love, trust and respect her; did needlework at Osnaburg St, 22nd recd communion at St Mary Mag Munster Sq, then under charge of Miss Langston, head of St Saviour’s London; 23rd to London Bridge Station; Bracebridges there, FN already gone; 67: 24th met 5 nuns from Bermondsey; 163: Med trip back, Athens; 165: Balmoral in 1897 diamond jubilee; RRC, Sarah Anne the only surviving Anglican sister to receive; Gonzaga cd not travel; 127: Wheeler incident “Sister E” “ardent, impulsive, excitable and over anxious;” 128: thought it unjust; Terrot’s book is very nice 176: end27 The editor of the journal, in an endnote, corrects the record: “Sister Elizabeth’s exam by the commisioners was not a trial, simply an attempt to arrive at the truth. In her letter to The Times she had overstated the facts and admitted as much in her evidence. Florence Nightingale confirmed that Sister Elizabth had exaggerated the number of deaths” (Richardson, 176, endnote 27; 177: endn 29. Kouali, variety of spellings provided about 750 more beds. Cavalry barracks and hosp. “Conditions there became appallng and the mortality rate soon exceeded that at the Barrack Hospital.” [Kouali, gets stats right]
A nurse'

5: John Conolly pub The Construction and Government of Lunatic Asylums and Hospitals for the Insane served as pattern book for asylum designers, for green blinds to shade; 5: “The best known writer and reformer was Florence Nightingale, whose name became synonymous with hospital ward design. Her experience of nursing, particularly in the Crimea, made her an avid and informed campaigner and led to the reorganisation of both the military medical services and the nursing profession....playing a key part in the introduction of the pavilion plan to hospital design in the years following the Crimean War. This can be seen as the single most important development in hospital planning, significantly improving patients' chances of successful treatment and recovery by creating an environment which was both sanitary for the patient and convenient for the nurse. The pavilion plan is characterised by a greater degree of separation and segregation than earlier designs, featuring wards (commonly called Nightingale wards) in long, rectangular pavilions, cross-ventilated by opposing windows. Nightingale, however was only one of a group of people, including John Roberton, a Manchester surgeon, and George Godwin...to whom credit must be given for the introduction of this plan to England in the mid 19th century.”

90: Cr War: Scutari converted Turkish barracks and Kuleli [Koulali] a Turkish mil hosp; cf Brunel, uses Parkes’s plan
95 Herbert Hosp the model for Cambridge Mil Hosp at Aldershot, the next gen mil hosp; as early as 1856 a pav plan hosp designed for this site by F. Warburton Stent, clerk of works, RE, but not executed

chap Convalescent Homes and Hosps; 48: avoidance of pavilion model for separate cottages; elsewhere architects eschewed pav plan altogether for closer affinity with Cranleigh type;
FN involvement with Manchester scheme. Adshead produced a design for a conv hosp for 136 patients, pavilion, J. Adshead 1860 “A plea” says she improved the plans. Gave up pavilion plan for conv places, domesticity, cottages; 182: first place entirely for convalescents Harrow Weald, infl of Theodore Monro a med st at Bart’s, 1840; 1853 a purpose built inst Walton on Thames, Surrey, Joseph Clark design; p 184 has Thomas’ design, on FN
instructions; one of first to do was Barnes Conv Home at Cheadle, connected with Manchester RI, designed by Lawrence Booth, built 1871-75, pav wards; modeled on male conv inst at Vincennes, as rec by FN; 106: the Rotunda was the first purpose-built mat hosp in Br Isles, opened 1757; in England the earliest was Westminster New Lying-in; Queen Charlotte’s designed by Charles Hawkins 1855-57, design crit severely by FN; 107: EH Banner arch of Liv Lying-in; 107: E.H. Bamner did Lying-in Hosp Brownlow Liv 1884, single-bedded wards arr in “cottages” 2 storey ward blocks, covered ways, each cottage floor had nurse’s bedroom placed for inspection;

108 Women’s Hosp Euston Rd. Designed by John McKean Brydon, variant of pav plan, circ ward, closely based on Young and Hall’s East Sussex Hastings and St Leonand’ of 1885-57, advised on “san and other arrs” by FN and Galton for Euston; has pic and plans; 42 bed hosp on Euston Rd moved there in 1889-90, with circular ward tower, based on Young and Hall’s East Sussex, Hastings and St Leonard’s Gen Hosp of 1885-7; cites FN and Galton, even that hosp com was advised on san and other arrs by FN and DG from Builder 11 May 1889 363 (but they were critical) 90-92 Netley, Builder and Cr War Godwin, Netley fashionable Italianate imposing, commanding position; Palmerston intervened on FN’s side (92)

34 pic of Nurses’ Home at Derbyshire Young and Hall 69: workhouses inf Marylebone. St Pancras one did not last and does not seem to have occupied special acc. Snell did design for a 700 bed work inf with circ wards, in 1881, each block 3 storeys high and 32 bed; but his plan never carried out; first circ ward in workhouse was by Charles Bell at Hampstead Union, built 1884-85;

27: Ashton under Lyme, arch competition, influence by Blackburn by selected design by Joseph Lindley less elaborate; Robertson infl plans; inf erected 1859-61, wards only slightly larger than Blackburn, 10 instead of 8 beds; Blackburn com won by little know architect James Turnbull, model of excellence; long axial corridor, kept distance between pavs to a min w/o blocking light or air; delays in bldg

29: Stoke on Trent new North Staff Inf, Hartshill 1866-69 to replace original, G.B. Nichols architect and local C. Lynam, in consult with FN; 211 beds, 2 storeys; both Leeds and Stoke modeled on Larib

62: Chorlton not much infl. Southampton Incorporated Workhouse 1865-68 designed by Thos Alfred Skelton (the Southton?)

63: MAB

64: St Pancras Inf John Giles and Biven 1868-70, comp;

64: Holborn Union Workhouse Inf 1877-79 by Saxon Snell near by the St Pancras Inf at Highgate; all 4 insts united under NHS as Whittington Hosp;

66: Saxon Snell did Holborn, St M, St Luke’s Wkh; Holborn
guardians impressed, used for new inf at Islington, also did St Olaves in Southwark and St George’s on Fulham Rd Chelsea 1876-78; St M inf generally thought to be Snell’s most successful 85: mil Royal Marine Barracks at Woolwich built 1858-60 one of first Eng experiments in pav planning, designed by Wm Scamp, chief asst at Admiralty, infl of Roberton, Godwin and FN; Scamp’s plan novel, but a compromise; 273 beds, 168 in 4 pav plan ward blocks, 3 storeys; Haslar main lunatic patients

“Miss Nightingale’s Corps at Constantinople” The Observer Dec 4 1854:5 from BL ref to Stafford, “Miss Nightingale only takes care of the men, so Lady Stratford sends for the officers. We much need religious books and small common prayer books. My stock is exhausted, but I have testaments still. I have distributed 1100 and more are needed.... Miss Nightingale’s present staff of assts consists of 38,...10 RCs, Sisters of Mercy, 8 from Miss Sellon’s, 6 from St John’s House, Westminster, 3 selected by the lady who originally proposed the plan, 11 from among the applicants amounting, in all, to between 60 and 70. This number proving very inadequate, Miss N deputed 2...(so probably the same)


Ritchie, Margaret B. A History of Nursing Through Philately. has FN stamps. includes one linking FN and Mother Teresa, she d. 1910, Teresa b. 1910


Roach, M.S. Simone (Sister) Caring: The Human Mode of Being, Implications for Nursing. Ottawa: Canadian Hospital Association Press 1984 “Caring is the framework through which we as nurses implement the art and science of professional practice.” The nurse who wrote the Canadian code of ethics for the profession said it simply, and arguably better with “Caring is the framework through which we as nurses implement the art and science of professional practice” (Roach, 1984).

Robb, Isabel Hampton. Nursing: Its Principles and Practice for Hospital and Private Use. 1898 is Philadelphia: W.B. Saunders, ed. rev. 3rd ed. Rev. 1906; Cleveland: K.C. Koeckert 1913. 565 pp Revision for 3rd ed, for this ed mainly added ftnotes; FN and George Elliot quoted in front matter, nursing an art, “the living body, the temple of God’s spirit”
2nd ed had slight change; no ref to FN, but only to Nightingales, a flannel vest 133:
6th ed. Revised and enlarged, by Hunter Robb, few additions, mainly by footnote. 565 pp
for 3 years’ course; no theory or definitions of health or healing; lots on disinfection, bacteriology
chapters follow FN; sanitary care of the ward
Chap 2 economics of the hospital
Chap 3 hygiene of the sick room and ward, ventilation, temp, light, disposal of excreta, soiled dressings;
69: ventilation at Johns Hopkins, Billings,
71: “Give plenty of light and softly shaded sunshine to patients and ward, but be particular to exclude the glare on hot days” And not on face. “Except in certain diseases light is an important factor in the patient’s recovery as it renders the air more healthful and has a definitely destructive power upon bacteria. It is surprising how many people, in other respects very intelligent, dread the night air…” Disposal of excreta...
Ch 4, bacteriological notes, sterilization and disinfection;
76: “Bacteria .... Microorganisms, germs or microbes, (i.e. tiny forms of life) are among the various terms employed in describing the many and widely different classes of these organisms.”
ch 5 bed making
ch 6 obs of patients;
Ch 7 baths
ch 8 enemata, 9, ch 12 medicines
ch 13 diet in disease
ch 14 how to observe, report and record symptoms
ch 18 surgical nursing, aseptic and antiseptic surgery; healing of wounds; putrefaction, aseptik and infected wounds
324: from wounds: forms of blood poisoning, septicemia, pyemia, sapramia, erysipelas and tetanus; erysipelas is Streptococcus
Ch 19 bandages, surgical,
Chap 21 surgical op room

Intro chapter appeared among papers at Nurses’ Exhibition in New York 1897, then expanded. Gerstein RT85 R
FN 25-27. Fliedner and Kai in; ethics and etiquette. Saw need fora book on ethics when writing Pr and Practice, to be a chapter, then a full book; concern about lack of uniformity in nursing profession, standards; 11: ethical laws could bring together; not that they lived beyond the pale, but ideas of moral responsibility vague and indefinite, “few have evolved them for themselves as a result of observation and experience; increasing necessity for some such definite moral force or laws that shall bind us more closely together in this work of nursing, and that will bring us into more uniform and harmonious relations.” no
other body of workers outside of physicians who need just such strength and stimulus as comes from unity of purpose than trained nurses; teaching shd be done by the supt.

13: “By ethics is meant the sc that treats of human actions from a standpoint of right and wrong.” teaches practice and duties of human life and the reasons for what they shd do and who leave undone. 14: a pr of duty 15 etiquette a form of behaviour or manners for particular occasions, a code of polite life, ceremony; ethics for moral weight, etiquette forms to be observed in professional intercourse, conventional (Dr Austin Flint); 14: teaching shd begin at beg of tr; from supt herself, integrated, 19: self-reliance, self-restraint, self-possession, sympathy, sentiment, conversation, patience, gentleness, cheerfulness, good temper, habits of exactness, truthfulness, method and order, vigilance and obs; problems of remuneration and professional engagement.

Chapter 2 Nursing as a Profession (history) 23: E Fry 24: Fliedner 25: Fliedner met E Fry in England, on return to Germany founded asylum, 1833 first woman prisoner, later became first deaconess at Kai, founded hosp; FN; travels, 26: Notes on Hospitals from pilgrimages !! Kai, quotes [no source given] “I at once recognized what I had so long sought - a spirit of devotion, of order and unity of purpose. It was impossible not to be impressed with the air of purity and deep, unaffected piety which pervade the whole place, and yet there was no asceticism; it was the world, and yet not the world in the ordinary sense of the word. There was the mother, Madame 27: Fliedner, the pastor’s wife, mother of his large family, laying no claim to the dignity of ‘Lady Superior’, but a plain Christian woman, who had not found the duties of wife and mother incompatible with spiritual cares, when both alike were exercised under one and the same guide and director, her husband. There were the young deaconesses with their intelligent animated countenances, no mere instruments yielding a blind and passive obedience, but voluntary and enlightened agents, obeying, on conviction, an inward principle.” [no source given but in FN The Wounded Soldier’s Friend” 42] 1849 [no] enrolled as voluntary nurse; Crimean War; return, fund, founded tr school, soon duplicated in UK and then... 1873 Sister Helen, a Nightingale sister or tr nurse came to America and started the New York Tr School for Nurses at Bellevue; then New Haven and Boston similar schools; 32: nurse was “assistant” not servant to physician, had to be brought to understand; 35: modern med requires sc training of nurses, for aseptic operations, bacteriologically practical training needed. Op room nurse no less important than any of surgeon’s staff; nursing “half the battle” even general public has come to recognize important part of skilled nursing in typhoid, pneumonia and other infectious disorders, constant intelligent care needed. 38: “nurse’s work is a ministry; I shd represent a consecrated service, performed in the spirit of
Christ, who made himself of no account but went about doing good. The woman who fails to bring this spirit into her nursing misses the pearl of greatest value that is to be found in it.” [Hampton Robb more explicitly religious] 48: cleanliness, deeper meaning “which can only be appreciated by those who have mastered at least the broad principles of bacteriology.” 46: how hopeless and dull the many washing and various antiseptic applications unless learned from bacteriology for “surgical, a microscopical cleanliness.” Air, food, need chemistry, ventilation and hygiene, physiology; 48: good physical health needed, and then education, 62: ethical qualities, neatness, punctuality, chapters on junior nurse, senior nurse 78: be guarded in conversation; discreet silence; 84: professional manner in ward at all times, treat equals with courtesy, superior with deference, willing obedience; 79: courtesy to strangers; 99: no perfume; 100: sources of infection, care of her health, never to touch face, eyes, lips with hands unless sure perfectly clean and free from infectious material; typhoid fever; “After one patient has been cared for, the nurse shd always scrub her hands before going ot the next.” always washing hand before handing food or preparing medicine. avoid use of handkerchief esp near wounds, never rub eyes; 108: no alcohol stimulant or narcotics, unless physician says; 110: annual vacation 2 weeks; 128: Night Duty; real test; 149: patient confidentiality

Robb. JAMA said her textbook without a competitor; developed curriculum for Case Western Reserve School of Nursing. Lakeside’s prog became one of the first schools to implement FN teaching Nursing Ethics 1900 Educational Standards for Nurses 1907 helped found the AJN founding member of ICN first pres of the association that became the ANA helped to create grad hosp economics course at Col College; died in accident


Roberts, Joan I. and Group, Thetis M. Feminism and Nursing: An Historical Perspective on Power, Status and Political Activism in the Nursing Profession. Westport Conn: Praeger 1995. Syracuse. Chapter 1 “‘Awake, Ye Women, Awake!’ Perspectives on Florence Nightingale” 1-54, 58, 104, 197, 195, 201 228; good on bad bios, founders take on symbolic meaning; Kalisches alert to sexist denigration of women leaders, FBS; 41: FBS largely ignored by US nurses, acc to Benson; 19: natural laws of unified being; Boyd on Suggestions for
thought
28: women’s enfranchisement; Evelyn L Pugh, cites refusal to sign 1866 petition.
31: political activist or recluse?
52: Nightingale myth continues, Abbey service; nice on “The memorial service did not recognize the other dimensions of Nightingale’s life and career that are being studied by current scholars, Nightingale as a social reformer and sanitarian, whose actions did not fit well into the mold of trad and humility...” Monteiro.
54: Nightingale pledge unchanged to 1935; good book;
RG Edelstein Equal rights for women; argues FN did as much for emancipation as those who struggled for woman suffrage (p296), but she for it...also

George von Bunsen quoted.
217: Chapter 15 Servants of the Sick and Poor. 1867 cr prss wanted efficient tr sch est at Berlin, campaign of 1866 had shown inadequacies, and cholera outbreak; saw as sc of nursing; 218: quotes cr prss from 1867 on intentions, not an order, 3 year tr school, little things important; praise, qualified for Kai, but it not sufficiently scientific; for ladies; wd est affiliated branches in connection with central home; 219: but outbreak of war in 1870 delayed plan; terrible winter of 1870-71 confirmed princess in conviction that more sc tr needed; 1872 wrote a longer and more exhaustive memo; 219-20 220: “entirely free Samaritan work” because orders fettered by rules and observance of and cannot always obey the calls of humanity; 221: Lees, had assisted in field lazareth at Homburg; 1875 WR plans, 223- FN quoted, 226 quoted; 227: collection for home; 228: Fuhrmann trained; also 229: Society for the Promotion of Health in the Home Häusliche Gesundheit formed;
154: cr prss turned soldiers’ barracks at Homburg into a hosp; existing hosp Militar Hospital attached to barracks re-arranged, for use of wounded French prisoners; both cleansed; 155: cr prs added 2 wards built in separate pavilions, called Victoria Barrack, said to have shown better results than any other hospital during the war, a model; small things; Lees working before Metz in charge of 2nd Field Hospital of the 10th Army Crops, inv to Homburg to superintend nursing at royal lazareth; 156: Lees published account in Good Words 1873: “The Victoria Barrack, planned by a German architect, recd certain improvements at the suggestion of the princess herself. It was so highly
approved by the Americans that a model and photograph of it are preserved at Washington, U.S.A. It was built of wood, on a brick foundation, and contained four rooms, the two smaller of which were used for a store room and attendants’ bedroom respectively .... The best and finest linen for the wounded came from our Queen, who also sent from Balmoral a box of beautifully knitted woollen socks, to the great astonishment and delight of the soldiers, who told me they thought only Germans cd knit so well as that.” ward had 24 beds 157: well lighted, windows on both sides and by small ventilators in the middle of the raised roof. The whole bldg cd be opened from end to end when reqd, and wooden sides consisting of large ‘clappers’ or shutters, which opened outwardly at pleasure. Bright, iron bedstead, horsehair mattress, 158: everything must show the dirt.


Robins, Colin. “Florence Nightingale Redundant?” letters to ed Times 3 May 1999. Crazy political correctness, and suggestion that Seacole wd be more appropriate “Mary Seacole, a determined lady of mixed race from Jamaica, went at her own expense to the Crimea to se tea and buns to the soldiers and to serve dinners to the officers. Her friendly provision of such comforts to men far from name was worthy and much appreciated by those who could afford her modest prices.” claim that helped the wounded. Nice letter


Robinson, Victor. The Story of Medicine. New York: New Home Library 1931. 1 ref to FN, not useful. Robert Liston amputated a thigh by compressing artery with left hand and cutting and sawing with right; 420: Liston gave ether its first European trial and on Nov 4 1847 James Y. Simpson of Edinburgh discovered anesthetic properties of chloroform. 421: Simpson protest against hospitalism, same humanity that led him to seek pain assuaging, drove him to lessen hosp mortality; appalled at frightful stats, man on op table has more chances of death than Eng soldier at Waterloo; young Quaker [Lister] but Simpson opposed, 422: hated his carbolic spray and shocked at sacrilege of changing dressings on sabbath, and Sisters of St John lined up in opp also; in midst
of insults that he est antiseptic surgery, but did not introduce the term: John Pringle, father of mil san, published Experiments upon Aseptic and Antiseptic Substances 1750. 114: Aretaeus, vivid portrayal of disease; 117: absence of any Hippocratic ref to infection altho 2 contemporaries, Thuc and orator Isocrates wrote that certain diseases re communicable, and scattered refs to in Virgil, etc. Livy, Plutarch; ded to Sir Ronald Ross; Mosquito Day Aug 20 1897, discovery. Sanitarian must learn to think like a mosquito and act like a larva. Ross's spirit sent Walter Reed on Cuban adventure, returned with proof the bite of mosquito, mystery of yellow fever, essential for building of Panama Canal; 347 Thos Fuller, Sevenoaks, Kent, saw specificness in infection and immunity. Exanthematologia 1730, rational account of eruptive fevers, smallpox...to every seed its own body; pestilence can never breed smallpox nor the smallpox the measles, nor chicken pox any more than a hen can a duck, a wolf a sheep, consequently one sort cannot be a preservative against any other sort;

Robinson, Seacole. Essex County Record Office has records of Crimean Fund D/DGg/7 91: Thomas Day, a relative of Edwin Seacole, had the wherewithal for a store as well as hotel; Seacole and Day, left England on the Hollander 27 Jan 1855 190: Seacole letter to HV has not survived, nor HV to FN, he is “Verney” she is “Florence” 5 August 1870. 9004/60 bundle 148 166: medals. Never recd an official pension. “And despite the repeated assumptions of her own contemporaries and almost every commentator since, she was never formally awarded any campaign medals for her part in the war.” 167: where from? British Crimean medal, Sardinian award, French Légion d’Honneur and Turkish Order of the Medjidie. Small. No notice in the London Gazette or War Office archives to suggest that she was offered any award, nor does she enlighten us; None of her medals can be found, and her memoirs says “peace has not distinguished the soldier’s friend with a medal” more likely that she distinguished herself; got miniatures, or bought.


129. organized nursing a recent art, FN “new profession out of centuries of ignorance and superstition.” Quote of FN at dinner before departure 120: Lady Hornby description. FN still weak, cd not join in the games; 126: cites Tooley, “Miss Nightingale would not look through Doctor Sutherland’s microscope, for she did not believe in germs and did not want to see them.” Has her leaving money to F Galton, then revoke; not bad.

Robinson, Jane. *Mary Seacole: The Charismatic Black Nurse Who Became a Heroine of the Crimea*. London: Constable 2005. back cover has Times called her a heroine, “Florence Nightingale called her a brothel-keeping quack”; has extensive negative coverage of FN (notes in sec sources)

72: Seacole managing a professional nursing service for the Br Army, Up Park, yellow fever epidemic, sent for by authorities. “They commissioned her to provide a nursing service for the hospital there, probably of traditional and supposedly...Afro-Caribbean and unofficial trainees. “Florence abhorred people who didn’t recognize their place in society” (122?)

99: Seacole treated “by the London branch of Florence’s nursing outfit” [but they were recruiting extra nurses FN did not want and did not know about”

121: Seacole quoted a chapterful of letters in WA, all stressing the importance of her work and saying what a sterling soul she was, from Paulet, and Hall, but “lack of corresponding copies in their authors’ papers are inadmissible as independent tokens of esteem.”

FN a “small, pale, thin-lipped spinster from the English shires, with a rarefied upbringing and an urge for reform.”

6: slave trade abolished 1807, but 7: “tinted rather than tainted”

124: must have riled Florence that such a slapdash, morally dubious (from Florence’s point of view) and socially iconoclastic character shd have become the other heroine of the Cr War. While not quite courageous enough--or perhaps too canny--to denigrate Mary in public, Florence spat venom in private and perhaps felt better for it.”

140: was utterly dedicated to her cause, a brilliant administrator

141: Seacole a mixture of “doctor, apothecary”and entrepreneur”

142: has John Hall inspecting her medical box with approval, sanctioned “her unsupervised practice of medicine in the Crimea”; citing Claydon house bundle 110, w/o mentioning it a pencil jotting;

143: quotes *Morning Advertiser* 19 July 1855, re “lady of colour” a Miss Nightingale and a Soyer in her way; “acquired great experience in the treatment of cases of cholera and diarrhoea.” no charge for her powders. “She is often seen riding out to the
front with baskets of medicines of her own preparation,” highly intelligent;
157: FN “took to her bed” desire for seclusion
173: EH interviewed on behalf of FN
175: benefit for her was 27 July 1857, but
180 cheque bounced
185 Seacole fund resurrected in 1867
191: It is difficult to understand why Florence shd have judged
Mary so harshly, unless unflatteringly one puts it down to
jealousy.
192: Panmure declined to dispatch Mary to India 1857, as too
“precious” to lose [source?]
FrPr no call for Br Hotel, she became “a royal favourite”
193: Alexandra and Pr of Wales close to Mary
87: Seacole applied at WO 18 October 1854

Robinson, Frederick. M.D. Diary of the Crimean War. London:
Richard Bentley 1856. A good medical diary. Varna
314: 8th [May 1855] Miss Nightingale has taken up her abode here,
in a hut. She has been going over the various hospital
establishments, where, of course, all the attention and respect
she so well merits were paid to her. 316: “I am sorry to hear
that Miss Nightingale has been attacked with fever.” rumours of
change in ministry in England, that Lord Ellenborough being war
minister; 397 visited Sebastopol, French vivandières there.
435: rumours of peace 9 Jan 1856; 439: French sutler (female)
winter costume described; no ref to Seacole but to French
sutlers, also called vivandières, saw when visited Sebastopol

Robot Ethics: The Ethical and Social Implications of Robotics.
Cambridge Mass: MIT Press 2012. UofT ebook only

Rogers, Martha E. Nightingale’s Notes on Nursing: Prelude to the
on Nursing is an exciting and far-reaching compendium of ideas
and statements concerning the purpose and scope of nursing, the
essentials of good nursing practice, and the variety of providers
of nursing that existed in her purview.” skill and humor,
describes fallacies in health practices and superstitions that
existed in public and health workers. “The thoughtful reader can
find in Notes on Nursing the underpinnings for much of what is
going on today.” Promotion of health, broad scope, homes, hosps,
schools, playgrounds, workplace, mil and all places. Need for
fewer hospitals, not more, differentiation of nursing
practitioners; human compassion, broad knowledge base,
intelligent reasoning and understanding provide a pic of what
nurses needed to be in 1859, also can propose ways to look at it
now. 59: from pre-scientific to
Rogers, Martha E. *An Introduction to the Theoretical Basis of Nursing*. Philadelphia: F.A. Davis 1970. Short key book. Only brief mention of FN, but she the model for Rogers, born May 12 (1914-94). Knoxville Tenn, no second ed of book. Science of unitary human beings. Society of Rogerian Scholars, 1986, she founded. Author has some science background. Cites history of sc 30: “At mid-nineteenth century Florence Nightingale had been saving lives in Scutari with her emphasis on sanitation and humane care. [NO EXAG] Evidence of the effectiveness of her efforts grew. Despite strong protests, modern nursing was born. [what protests??] The nature of man’s environment was proposed to be a significant factor in recovery of health. YES Extensive statistical data accumulated testifying to the validity of Miss Nightingale’s arguments. By the end of the century she was emphasizing that maintenance of health was as important as care of the sick. [NO, FROM THE START] N’s proposals placed man within the framework of the natural world. His humaneness was moving into focus. The foundation for the scope of modern nursing was laid.” oh dear. EXAG

Rook, Arthur and Margaret Carlton and W. Graham Cannon. *The History of Addenbrooke’s Hospital, Cambridge*. Cambridge: Cambridge University Press 1991. Ch 22 “The Influence of Florence Nightingale” 192-204. Adv for nurses. Alice Fisher, has corr with FN in. To 1887, got a successor for Fisher. Ch 39 The Training School for Nurses 363-, Addenbrooke’s opened a training school for nurses in 1877 under Fisher. 365: by 1891 a total of 511 probs had been trained at Addenbrooke’s, and second year provided also. Dr Laurence Humphry taught. 30 probs being taught a year. Alice Fisher Ward for Sick Probationers. By 1892 2 years reqd for a certificate, as per Lords’ com that said at least 3 years; matron and staff nurses had all had 3 years at a recognized school and were members of the RBNA


Rosen, George. *A History of Public Health*. New York: MD Publications 1958. On FN acc to Halloran expanded ed. Johns Hopkins; 1 FN ref, lots on Chadwick 219: “A tendency for nurses to become health visitors appeared early in the present century and was fostered particularly by the growth of the child health movement. In 1893, Florence Nightingale called attention to the need for ‘health nursing’ 220: and insisted that the district nurse shd be a ‘health missioner’ as well as a sick nurse. The following year she restated the importance of health teaching in the home, urging the training of health missioners for this purpose.” Ladies San Assoc; new ed. Baltimore: Johns Hopkins University Press 2015.
Expanded edition, Elizabeth Fee Intro.
196: General Board of Health, earlier efforts to improve sanitary conditions hampered by lack of a central agency; now there was. Epidemics “occupy a prominent place among the situations that precipitated action in the interest of the community’s health.” 1848 England no exception, choera epidemic; (June Moscow, by Sept Hamburg)
184: Southwood Smith and Neil Arnott both friends and disciples of Jeremy Bentham;
197: Public Health Act, compromises, emasculated, mainly permissive, did not extend to London; Bentham impressed with the French system;


Rosenberg, Charles. review of F.B. Smith, Florence Nightingale: Reputation and Power. Medical History 27 (1983):93. shows Rosenberg won over: desire to show that Nightingale was a “liar, a careerist, a bully, a callous manipulator of friends, and a barracuda-like enemy; she was, in short, a power-hungry psychopath. She was never much of an administrator, Smith argues, and even less an original thinker....And I must confess that Smith’s lively and even fascinating demolition of Miss Nightingale’s moral credentials convinces this reader at least; she may well deserve this portrait in psychopathology.” author is (1936-), Ernest E. Monrad Professor in the History of Science, Harvard).

Rosenberg, Charles. Introduction. unpaged. Florence Nightingale on Hospital Reform. New York: Garland 1989. cd not distinguish between moral and material in hosp, indiv and community. “Her certainty was strident and uncompromising.” authoritative position, obsession with cleanliness and ventilation; a particular model of disease transmission, “one that conceded only grudgingly to an understanding of the role played by microorganisms in the transmission of infection. In her explicit rejection of the germ theory, Nightingale was to draw gradually further apart from the consensus of medical opinion during the last third of the nineteenth century.” even pf;
-- “Florence Nightingale on Contagion: The Hospital as Moral Universe,” in C.E. Rosenberg, ed. Healing and History: Essays for George Rosen. New York: Science History 1979:116-36; cites Cook but calls Woodham-Smith more successful; cites FN Notes on N, Notes on H, and Lab Cl, also Rural Hygiene, which says consistent over 50 years, but no primary sources, nothing on India; no acknowledgement that her views changed, metaphor; 124: “Nightingale’s mind ultimately saw things not in additive terms, but instead in morally resonant polarities: filth as opposed to
purity, order versus disorder, health in contradistinction to
disease. Hospital infection was thus a consequence of disorder in
a potentially ordered pattern.” vision of hospital; 125: “indeed,
the emphasis in Nightingale’s etiological and pathological
thought on the interaction of the patient as a whole with every
aspect of his environment implied that the distinction between
moral and physical well-being, between mind and body was hardly
meaningful.” 125: Since her etiological views were, as we have
emphasized, fundamentally holistic and since she was unwilling to
accept the specificity of disease and the possible existence of
specific causative agents, Nightingale saw the nurse’s role as
both multifaceted and indispensable. (126) It was also
fundamentally moral.” 126: It is not surprising that Florence
Nightingale was so resolutely hostile to the idea of specific
contagion, nor so sceptical of the existence of 127: specific
disease entities.” 130: charismatic.

The Care of Strangers: The Rise of America’s Hospital System.

Rosenberg, Charles E. Explaining Epidemics and Other Studies in
the History of Medicine. Cambridge: Cambridge University Press
1992. Lots on FN, essay reprinted “Florence Nightingale on
Contagion: The Hospital as Moral Universe.” 90-108. 109 Cholera
in 19th cen Europe.
90: her ideas anachronistic by the 1880s and 1890s; needs to
explain; “a seemingly self-serving and hegemonic vision of social
control” we prefer our heroes to be not only heroic, but
consistent; with our preconceptions. 91: “Nightingale’s medical
views were based on a deeply internalized and little questioned
view of the world and on a consequent model of relationship
between behavior, indiv resp and diseases.” 92: “The idea that
disease could be induced by a specific contagion was anat
hema to Nightingale.” Contradicted her belief that filth,
disorder and contaminated atmosphere were responsible for
hospital fevers and infections.” “Contagion seemed morally random
and thus a denial of the traditional assumption that both health
and disease arose from particular states of moral and social
order.” Body seen as system;” “Health, on the other hand, was
synonymous with balance in the body’s physiological state.” 93:
vs individual diseases states. Cites NonN and NonH; uses Eyler;
cites Lying-in Insts
104: NonN emphasized that disease was a normal reparative
process, wh cd be aided but never directed or demanded. 105:
cites Health Teaching in Towns and Villages 1894; and 1893 paper;
uses WS, not Cook; cites later works, mainly NonN, nothing on
India and how learned about cholera.
“Specialness of her life does not imply a specialness for her
ideas.” deviance and intensity of motivation, rhetorical ability.

Ellis, Janice Rider and Hartley, Celia Love. Nursing in Today’s
The Nightingale Influence. 124: 185, 183 243, 569 153, 230 133, 235 400 plus


54: FN “the first nurse researcher” her achievements “astounding” “She saved the lives of many wounded soldiers during the Crimean War; she restored order from chaos by assuming responsibility for the soldiers’ environment as well as nursing care, despite strong resistance from the physicians in charge; and she bough innovation and advancement in the fields of nursing, health and hospital planning. Nightingale” high social class, well educ. “If her model for nursing had been followed, the nursing profession would be in a much more advantageous position today. The “Angel of Mercy” image, as identified by Kallisch and Kallisch, existed from 1854 to 1919,

-- “Miss Clough, Miss Nightingale and the Highland Brigade.” Victorian Studies (September 1971):75-79.


4: Nature of Nursing “a profession that uses specialized knowledge to contribute to the needs of society for health and well-being. Several professions have developed to contribute to health and well-being, medicine to heal illness and injury, pharmacy to prepare and dispense medicinal preparation, particular need for 5: tending the sick injured and children, esp in war and in plague or famine. “Modern nursing looks to the efforts of Florence Nightingale during the Crimean War and after, in Britain, for the inspiration and general principles to identify nursing’s place in society.”

5: Characteristics of Modern Nursing. FN bio, and she left “legacy of writings about the nature of nursing” and her actions
to improve health in her society. Emphasized that nursing more than administering medicines and applying poultices. “Rather nursing aims to promote health by the proper use of the environment to aid the natural reparative processes. The essentials of nursing, according to Nightingale, include fresh air, light, warmth, cleanliness, quiet and the proper selection and administration of diet. She strongly advocated that mothers, teachers and nurses be educated in the laws of life, that is, understanding what makes for ‘healthy existences’ (Nightingale 1859 p 7). N declared that nursing was a significant way to improve the health of the British nation. In the schools of nursing that she established, nurses were educated to understand health and how to use the environment, both to promote health and to provide energy for the person’s natural healing processes. The Nightingale approach to nursing education came to North America in the founding of three schools in 1873, Bellevue Tr Sch in NYC, the Connecticut Tr Sch in New Haven, and Boston Tr Sch (Donahue 1996). Nursing today has a focus on health rather than disease

7: Two characteristics of nursing, FN alluded to “in her persuasive discussion about the importance of observation” must be sound, close and quick observer, and must be of delicate and decent feeling; “concept of caring” as central to nursing; “Nursing is a health care profession that focuses on the life patterns of persons. The emphasis is on health and how mutual interactions of the person and env promote health. As a profession, nursing has a commitment to promote health and full life-potential for individuals, families, groups and society as a whole Caring is a key aspect of the nursing commitment, and clinical reasoning skills are foremost in the practice of profession nursing.”

8: Nature of Knowledge


64: her theory Enhancing innate life processes key theme in FN, reparative process. As a natural process; fresh air etc. later articulated as adaptation; her own work “congruent with this position and in fact extends it in several ways” i.e. natural reparative process;

65: search for “laws of life”, awe in discovering central nervous system;

her adaptation model “This might be considered an updating of Nightingale’s plea to nurses and it includes the nurse’s use of self in the caring interpersonal relationship.” introduced to in first text Interpersonal Relations in Nursing of Peplau.

67: tone of urgency in FN, she did not allow lack of sc knowledge, inadequate social and health care systems to daunt her;
Royle, Trevor. *Crimea: The Great Crimean War 1854-1856*. Little Brown. and New York: St Martin’s Press 2000. (military historian) has chap 4 “Ladies with Lamps” 246-60 with lots on FN. review by Angus Calder, “Charged with incompetence.” used some primary sources, but none of FN, and stated, citing Hugh Small that she “did little to improve the hygienic conditions at the Scutari Hospital and on her return to Britain was much mortified by the discovery that 5000 soldiers died under her care during the winter of 1854-5.” 540. Stratford told Clarendon Russian prisoners wd be housed in old arsenal bldg at Scutari, but sick and wounded to be treated alongside British, expected temporary, fall of Sebastopol to be imminent 250; on 22 Oct Cowley confirmed to Clarendon that each French division had 46 doctors, 104 nurses and 7 admin officers, and ambulance wagon (251); doctors and administrators “resented their presence” FN and nurses (252); 253: “By no stretch of the imagination was she the ‘Lady with the Lamp’ but she was a doughty fighter.” corpse of Russian officer put in their accommodation; Stratford asked Menzies as deputy insp gen for list of urgent wants, but Menzies said “satisfactorily supplied”; problem was mgmt, and surgeons did not have respect, were jealous (254); Stratford persuaded Turkish govt to provide beds and furniture (255); Stratford wrote Clarendon 5 Dec 1854 that when workmen to repair hosp struck, she came to rescue (255); FN a “bossy boots” (255); 12 Dec 1854 orders given to construct telegraph line from Balaclava to Varna; “Many (LM yes) Seacole had set up a rough and ready nursing station, which, acc to Russell, attracted men....”; states FN “rejected her offer to serve at the Scutari hospital” but no data that there was an offer (257); prefab hosp at Renkioi, by Brunel, 22 modular wooden ward units, kept cool by ingenious ventil system, separate bldgs for kitchens and laundry; became operational in August 1855 (258); US took note, used by federal army in Civil War; French prepared, had orderlies and vivandières; Newcastle wrote Raglan about suffering, Raglan written off as “an accomplice to the slaughter” but less than fair; at Solferino in 1859 French had only 1 doctor per 1000 men, and Russian wounded inside Sebastopol as badly treated; Pirogov top surgeon, but red tape kept from reaching Sebastopol until mid Nov, too late; but got mil hosp est fast, 5000 operations, and had nurses (260); Turks worse off, and cared little; Trevor Royle intro 1-10; less hostile to FN; has her again as a “bossy boots” and farce when a legless soldier asked for brandy; but ack that 10% of entire army died from disease by Jan 1855, and only after intervention of govt sponsored san com that it was discovered that Scutari built on top of a cesspool which allowed sewage to spill into drinking water; colleague Struther wrote official letters of complaint about FN before died of typhoid in Jan 1855; but Greig keeps thoughts to himself;

*Rules for General Guidance in Matters Relating to Village*
Conservancy and the Public Health. [sp error is there] Printed. With handwritten Florence Nightingale from Sir Richard Temple Sept 1879. These village Rules apply to NEW villages. Are there any which apply to existing villages? 7 pp, plus plan?

Rumsey, Henry Wyldbore. Essays on State Medicine in Great Britain and Ireland. London: Ridgway 1857 58 pp. Previously considered a mere idea, speculative theory, or at bet a German innovation; now in face of active and passive opposition, certain great questions in public action, chiefly in its preventive and legal depts, have advanced so rapidly; Arthur Ransome, Farr; registration; for real prevention; 6: aetiological reg of mortality and sickness; ; 22: Chadwick... Plea for data... 24: Sanitary. Successful progress of sanitary measure, beneficial efforts of officers of health, gradual abatement of causes of sickness and mortality; 25: defects in local boards; 37: for appointment of “state physicians” 39: Dr Lankester address 55: resolutions adopted by the association Aug 7 1867, committee, Dr Acland, pres; includes Ransome, Rumsey, Lankester FRS, E Hart... Res to approve plan proposed by Dr Farr, namely appt of reg med officer in every reg district or group, as step to a national organisation for purposes of state medicine; to invite cooperation of council of Nat Assoc for Prom of SS and to urge its branches to promote the same; and if need be by deputation to govt; committee be appointed to collect info


Rushdie, Salman. Grimus: a Novel. New York: Overlook Press 1979. Jocasta, the madam, checking out her “empire” next to “Boom-Boom’s” room using whip. 141: “The next door yielded only silence. This was Mlle Florence Nightingale’s chamber. She exuded a comfortable, homely sexuality, so peaceful as she displayed an accidental nipple, so demure as she undressed. Florence always did it, never screwed or fucked or shafted or banged; did it with grace and in the dark. As Jocasta paused, a tuneful hum welled up from within. Florence was singing her client to sleep with a soft lullaby.”

Russell, R. Lynette. *From Nightingale to Now: Nurse Education in Australia*. Sydney: W.B. Saunders 1990. has good pic of Lucy Osburn; request of Parkes. inf1 at Melbourne through Turriff, then Isobella Rathie tr by Pringle at RIE, became lady supt in 1890; also Tasmania, Jeannette Milne appted to Launceston Hosp 1886, had been tr at RIE under Pringle; and succeeded by other n nurses, Margaret Turnbull and Isobella Rathie; 11: “The Nightingale system of nursing”; 15: conclusion. “When the Nightingale system of nurse training was introduced to New South Wales, it was considered to be the most advanced scheme in the world and Florence Nightingale an ultimate authority in nursing matters. The Nightingale system was, in fact, so successful in improving the quality of nursing services that any attempt to change the system was, and still is, strongly resisted. As a result this method of training remained substantially unchanged in Australia for some 100 years.”


Salvage, Jane. NT This Week. “We Can Honour our Nursing Heroes.” 95,19 (12 May 1999):20. Is this FN or both?

Salvage, Jane. Says her Politics of Nursing known, not in UofT cat


Sample, Ian. “Open hospital windows to stem spread of infections, says microbiologist.” *Guardian* 20 February 2016. AAAS meeting, she championed as defence against infections, but “incoming air might help control nasty pathogens by letting more microbes insides.” Jack Gilbert, US Argonne National Laboratory, Illinois, “offers the unconventional view that unwanted microbes might gain a foothold in hospitals because they had too little competition from other organisms.. “mirrors what seen in the gut, where antibiotics can kill off balanced and healthy community of bacteria, and make way for hardier bugs that cause illness.” AAAS
Vancouver. OR scrubbed, “but somehow, magically a pathogen gets into the person when they’re in the operating theatre and they get sick.” Jessica Green at Oregon U reported air conditioned hospital rooms had less diverse populations of microbes compared with rooms with windows open, “but the air conditioned rooms had a greater proportion of pathogens that lived on humans or belonged to groups that cause disease.”

Sarkis, Jeanne M.; Conners, Veronica L “Nursing Research: Historical Background and Teaching Information Strategies.” Bull. Med. Libr. Assoc. 74,2 (April 1986):121-121: “Her careful documentation and logical planning during the Crimean War have been credited with reducing the death rate of wounded soldiers from 427 per 1000 to 2 per 1000 in a six-month period. Because of her abilities with statistics, one writer has called her the ‘Lady with the Slide Rule’ (CA Winslow “Florence Nightingale and Public Health”)... No ref to percentage [exagg claim] yes, she is credited, but shd not be.


Sattler, Barbara and Lipscomb, Jane, eds.. Environmental Health and Nursing Practice. New York: Springer Publishing 2003

Saunders, Hilary St George. The Middlesex Hospital 1745-1948. London: Max Parrish 1949. Appendix III matrons: 1849 Mrs Jarron, 1867 Miss Martyr; 1870 Miss G.M. Thorold; 1905 Miss Vernet; 1909 Dame Alicia Lloyd Still. 38: in 1854 during severe outbreak of cholera June-Nov killed 53% of cases admitted to the hosp, only 2 nurses and a scrubber contracted the disease; “Such comparative immunity was in all probability due to the care taken by the hosp of its nurses and also to the presence beneath its roof for a short time of Miss Florence Nightingale. It was the eve of the Crimean War and the hurricane of her reforming zeal had not yet fallen upon the Army Medical Services. Miss Nightingale was busy acquiring that knowledge which was afterwards to transform the hospitals of Scutari, and she acquired much of it in the Middlesex Hospital. There she undertook, “the superintendence of the cholera patients...brought in every half hour from the Soho district, Broad Street, etc.” [no sources given for quotes] from Mrs Gaskell. Governors moved slowly, but a nurses home built in Cleveland St in 1869 and Thorold came in 1870.

such as Florence Nightingale and Lillian Wald made significant inroads related to serious health issues because they were nurses.” ... “Since Florence Nightingale, nursing has been an explicit part of the planning, evaluation and implementation of actions taken to meet the goals of public health.” According to the WHO, “In the 21st century, health is a shared responsibility, involving equitable access to essential care and collective defense against international threats.” (Endn3)

FN recognized as modern founder of the nursing profession “a recognized early pioneer in epidemiology” prevention and public health sc, dev system for training nursing and changed nursing “During the Crimean War her statistical records on the living conditions of the soldiers demonstrated the relationship between sanitation and the presence of disease. Her ground breaking work changed the care of soldiers in the field and translated into a new understanding of the need to implement improved sanitation practices in all health care settings.” Nursing’s focus on prevention; Wald, Henry Street Settlement in NYC. Now primary health care. Authors Univ Cincinnati College of Nursing and Johns Hopkins

Savona-Ventura, C. “Military Hospitals in Malta” the mil hosp, initially Inglott, proportions TH Wyatt, described by FN, never built. internet. 1905 mil hosps in Malta included Valletta Mil Hosp, for 232 beds and quarters for 65 NCOs and men of RAMC; Cottonera Hosp for 157 patients in 4 large wards, a model, a house, Citta Vechia Sanatarium 80, good for conv cases; finally in 1873 need for new mil hosp taken up, new hosp containing infs, each for 32 sick men, built near Zabbar Gate, considered one of best in southern Europe. In 1882 mislabeled as anal hosp in Ill London News, used for men of Tel el Kebir; other plans for hosps earlier not done either; B&HI com reported 4 hosps of Malta bad (1863), Valletta hosp condemned proposal to abolish all, and build new gen hosp for 300 outside Valletta, but not done; a new hosp opened in 1858 at Vilhena Palace at Medina, as oph unit; --“Malta and the Lady with the Lamp, Sunday Times of Malta (22 December 1991)

Sayer, Captain, compiler. Despatches and Papers Relative to the Campaign in Turkey, Asia Minor, and the Crimea, during the War with Russia in 1854, 1855, 1856.with Original Plans and Drawings. From War Dept. London: Harrison 1857. UG. Stats. Some letters, Hall to Raglan 2 March 1855; Appendix by Adj gen has numbers of NCOs and men sent to Crimea from commencement of the war to end March 1856, total of men 93,959, up to 99,618 embarked from England, Med or India, incl Foreign Legions

63: uses Bauman on McAuley, 63: care of sick one of 3 objects, but no actual discussion on; 66-74 material on FN and St T influence

66: FN sought experience in Dublin in 1844, quotes from Manning corr, St Vincent’s; 68: Moore and group spent 1 week in Paris en route “to study the duties they were about to practise, and to procure various items” surgical instruments; recd instructions from the Sisters of St Roch’s and visited hosp; 74: Steevens’s Hosp bd of govs in 1879 got trained of N School supt; and tr and home, St Patrick’s Home, No. 8 Usher’s Quay; during first 3 years 26 pupils instruction, incl first RC lay nurses “Mrs Brown’s nurses”; T.D.O. Browne, The Rotunda 1947

Schama, Simon video. BBC episode 13 Victoria and her Sisters beautiful visuals

Schama, Simon. A History of Britain. New York: Hyperion 2000-0002 3:221. Has pic of Seacole on p 218, along with JS Mill! Queen and nursing. “The genuinely epic history of Florence Nightingale, the single woman par excellence who had spurned marriage for the sake of a higher calling, who had brought her band of 38 young women to the hell of the barracks hospital at Scutari, who had taken on the mutton-chop whiskered medical corps and the army bureaucrats to wring from them the barest necessities: bandages, splints, soap, who had made the washtub her personal escutcheon--all this had stirred the nation, not least the queen herself. Many times Victoria had expressed her bitter regret that she was not the right sex to be able to join the soldiers in their heroic privations and combat.” 220: Chenery’s rev of incompetent mgt and command, of shortages....; "The nurses at Scutari were surrogates for her own presence. When Florence Nightingale returned to Britain after the armistice in 1856, Victoria invited her to Balmoral to hear, first-hand, her account of the ordeal. But there was another heroine of the Crimea whose work was unknown to the queen (until her own step-nephew Captain Count Victor Gleichen told her) but was the soldier’s own favourite pseudo-mother. In the same year that Nightingale met the queen, a gala banquet and concert, with 11 military bands, was held by guards regiments at the Royal Surrey Gardens to benefit Mary Seacole, who had been declared bankrupt. There was a good reason why the returning soldiers so admired Mary. If you had been sick or wounded and managed to get taken to her ‘British Hotel,’ you stood a decent chance of surviving. It was not so at Scutari. But Mary Seacole was the wrong colour to be an officially canonized Victorian heroine.” born.... Seacole a Nelson godson; her establishment in Jamaica “part hotel, part convalescent home” during cholera epidemic of 1851 and even more serious yellow fever of 1853, “had acquired a reputation for working miracles of recuperation among the critically sick. Her antidotes for dysenteric diseases and the associated dehydration
which almost always proved fatal were all drawn from the Caribbean botanical pharmacopeia. This origin guaranteed that they would be ridiculed as ‘barbarous’ potions by the medical est and that Mary’s application to go to the Crimea to treat the cholera and typhoid victims (which accounted for the vast majority of fatalities) wd be dismissed out of hand, not least by Nightingale herself. Unlike Nightingale, Seacole had no Baron Sidney Herbert [not then] at the War Dept to argue her case. But, using her own funds...somehow got...Once there she made, not for the barracks hospital in Turkey where it was clear she was unwelcome (but she was given hospitality for the night and an interview with FN); About two miles from Balaclava Mary spent £800 of her own money building--presumably in imitation of her Jamaican est [no!]--the British Hotel, a combination of supply depot, refectory for soldiers about to go into action, and nursing and recovery station for the sick and wounded. Unlike the Scutari wards, the British Hotel was kept warm and dry. The best thing that could happen to a soldier laid low with cholera or typhoid was to be cared for on the spot, rather than endure the excruciating sometimes three-week passage across the Black Sea, to the deathtrap hospital at Scutari.” rats. Rice pudding day.

Schamab contd 221: Soyer “approved her fare as wholesome and her courage as heroic. [where?] Once the convalescents had been taken care of, she would saddle up two mules and load a wagon with hot and cold food and basic surgical supplies--bandages, blankets, splints, needles, thread and alcohol. She would then set off straight into the thunder of the siege and, guided by a Greek Jew who knew the lines of the trenches and the positions of the camps, would disappear into the smoke, looking for wounded men--sometimes enemy Russians as well as British and French--who needed rescuing along with a mug of tea, a word of consolation and, as she instinctively understood, the touch of a clean handkerchief. Mortars whizzed past the old lady and her mules plodding through the fire. More than once, when she heard shouts of ‘Lie down mother! Lie down,’...she did.’ She became inured to horror. “those who survived seldom forgot Mary Seacole.” no invs to Balmoral, only a press of creditors. But “the fundraising events--at Covent Garden and Her Majesty’s Theatre, as well as the Royal Surrey Gardens--saved her from bankruptcy [no, they took place later]; 3:223 Queen Victoria’s half nephew, Prince Victor of Hohenlohe-Langenburg, amateur sculptor, made a bust, “Mami” prob through him became known to Victoria, “who in 1857 wrote to Seacole officially recognizing her work.” lived to 1881. Left estate of £2000, all subscriptions from those whom she had cared for. [no from officers of high rank]

Scharlieb, Mary. Reminiscences contd:
chapter 6, Medical Work in India, on that work, describes
differences in conditions and responses to disease, had to have
own hospital, cd not do surgery at patients’ homes; purdah, caste
Hindus and Gosha Muhammadans, Lady Grant Duff, and Surgeon
General Furnell called meeting of chief members of Indian
community (103), resolution, approved inst of a hosp exclusively
for the use of Caste and Gosha ladies, under her, had to separate
lying-in women from surgical cases and general mass of patients,
and provide 104: “separate accommodation for the Muhammadans, the
ordinary caste Hindus, and, finally, for the Brahmin ladies.”;
chapter 7 Experiences and Patients in India; 121 not right to
take advantage of a doctor’s position of confidential advisor and
friend to do any definite missionary work, wd be dishonest, “my
aim at any rate was to live the Gospel, although under the given
circs I could not preach it verbally.” 122: left Madras Feb 1887,
never to return.;
29 chapter 3 began midwifery in 1871, had review Fayrer’s Medical
Jurisprudence, Surgeon A.M. Branfoot, intro to Acland on return
to London,
71: old London School of Medicine on Handel St., now Hunter, an
Adam house, formerly inhabited by George IV’s Mrs Fitzherbert;
77: got honours all round, and gold medal in obstetric med,
examiners were Matthews Duncan and Dr Gervis;
89 grad at London Univ 10 May 1883, degrees awarded by Lord
Granville, chan, she presented by Garrett Anderson, dean of the
London School of Medicine for Women; 90: Acland the connection
with queen, summoned to Windsor Castle 1883; Lady Biddulph
attending, 91: described sufferings of caste and Gosha women who
will not accept services of male doctors, and “the unintentional
barbarities and injuries inflicted on these poor women by the
kindly, but absolutely ignorant, native midwives. I also gave
some account of the frequent failure of native methods of
treatment,” and for women not from physical examination. 92: QV
turned to Lady Biddulph: How can they tell me that there is no
need for medical women in India? “Tell them how deeply their
Queen sympathizes with them, and how glad she is that they should
have medical woken to help them in their times of need.” gave
photo to show, and signed birthday book; 93 day before leaving UK
had command to visit Pr and Pss of Wales at Marlborough House,
asked to hear what she told his mother; back in India 1883-87;
encounter with Queen Victoria;

Scharlieb, Mary. “Florence Nightingale.” In Christian Social
Reformers of the Nineteenth Century, ed. Hugh Martin. Freeport

46-48 on FN, had intro on return from Madras. on first visit, “a
chronic invalid. She was never seen except on her bed, but she
was always fully dressed in a black silk gown and dainty cap, and
she sat upright, not deigning to rest on the pillows.
Miss Nightingale was deeply interested in the circumstances of women in Eastern lands, especially in Hindu and Mahommedan women. She was never tired of hearing my stories of their lives, their manners, customs, and sufferings. One phase of Hindu woman life that greatly appealed to her was that of the widow. Under the British Government, no widow may become Sathi (suttee). She may not mount the funeral pyre and attain purification and salvation in the arms of her departed lord. The British Raj is able to prevent this material sacrifice, but no human power can prevent the death in life that is the Hindu widow’s portion. The fact of widowhood is considered to be proof of sinfulness. It matters not whether the wrongdoings that drew down the wrath of heaven were in her present life or in one of her former lives. The crime has been committed, the stain is hers, punishment falls on her in the loss of her lord and master, and for the sake of her eternal welfare the cleansing fires, actual and material, or potential and spiritual, are her only means of purification, restitution, and it may be of eventual forgiveness.

As the actual fire is forbidden, the spiritual purification of humiliation, fasting and prayer must be endured. A year after the husband’s death the widow is dressed in her richest silk and golden robe, and wears for the last time her valuable jewellery, she is conducted to the sacred tank, and there, to the accompaniment of chants, prayers and music, she is stripped very roughly of jewellery and rich clothes, she enshrouds herself in a length of unbleached longcloth, her head is shaved—all actions typifying her utter humiliation—then she is immersed in the sacred water, a mystical washing away of sin. She emerges dripping, shivering with cold, with sorrow and with fear. Her calico shroud must dry on her person, and from this time until the day of her death she knows no comfort, no consolation, no ordinary clothes, only her shroud, no nourishing and pleasant food, only cold rice and water—her touch, her very presence is pollution.

Who can wonder at Florence Nightingale’s generous sorrow for such sufferings, and who cannot understand her desire to help anyone who was able and willing to give such relief as might be possible to these patient sufferers?

Miss Nightingale threw herself enthusiastically into my work, she shared my hopes and fears, and by her great sympathy and powerful interest she helped materially in the completion of the task I had set before me.”

Caste and Gosha Hospital, separate quarters for Muslim and Hindu and Brahmin ladies.

Schneider, Dona, and Jones, David E., eds. Public Health: The Development of a Discipline. 2 vols. In vol 1:511 learned from death rates declining, not from poor nursing care but sewers and ventilation, influenced the commission, 1:512 FN “wrote in two
styles, passionate and statistical. Notes on Nursing is a passionate work...” vol 1 “From the Age of Hippocrates to the Progressive Era. Rutgers University Press 2008. UofT ebook


Schroeder-Lein, Glenna R. Encyclopedia of Civil War Medicine. New York: M.E. Sharpe 2008. Also 2015. Online UG? UofT missing; 290: 87-88, 93, 156, 230-32, 324 “Nightingale, Florence (1820-1910). “A British reformer whose ideas on sanitation and nursing, esp during the Cr War, influenced Americans during the Civil War.” WEN “a wealthy industrialist” NO, Fanny; “rel of love and conflict with her parents and her sister... because Florence did not wish to adhere to Victorian upper-middle-class expectations for women.” Unitarian and Anglican background, educ for girls. “Precocious, brilliant and opinionated” Sarah Christie governess. Taught by father. 87: someone volunteered to go to the Crimea in 1855-56 where worked with Florence. Diet of Hosp Patients N to improve the soldier’s diet. 89: surgeons and hosp workers recognized hospital patients had different dietary needs from healthy troops in field; also Chimorazo Hosp. 93: Dix appointed by sec of war Simon Cameron, regarded as “an American Florence Nightingale, following in the footsteps of the woman who had done so much to improve Br hospital care during the Cr War.” 94: ref to Barnes and Alexander of San Comm; 156: Hospitals, Pavilion. “Hospitals designed in the pavilion style were constructed in both the North and the South during the Civil War. Base on principles developed in Europe in the 1850s during the Cr War, these hospitals were advocated by Florence Nightingale. The pavilion plan required a large amount of space and new construction, it could not be applied to buildings converted from other uses.” 230: 366: Lewis, Samuel E. “The Florence Nightingale of the South.” Confederate Veteran 27 (September 1908):420-24. 1919).


2011, King’s. FN after war not active, enjoying her celebrity, cited Hugh Small uncritically. Cites enormous prestige of FN in America, refs in newspapers, women compared to FN, “nightingales” 169-70: nursing curriculum FN est in England “had considerable influence in postwar America. Nightingale opened her first school in 1860, and by 1876 22 nursing schools were in operation in London alone.” impact of Notes on Nursing. By 1873 first nurses’ training progs appeared n NY, Boston and New Haven, but few former (Civil War hosp) workers matriculated. Obstacles. “American nursing leaders adopted Nightingale’s model of admitting only young, white middle-class women for training--those whom leaders believed were most susceptible and receptive to their disciplinary and educational standards. This excluded two thirds of the war’s relief workers, neither white nor middle-class, who had staffed hosp kitchens and laundries during the war. This exclusionary mentality was doubly punitive: the ‘undesirables’ cd have used the steady work that nursing offered, and unlike nursing neophytes, the had the advantage of prior experience.”

47: Mass reformer Hannah Ropes moved by FN’s Notes on Nursing Material on FN and HM collaboration on Civil War in Women Theorists on Society and Politics. Query who were the “in laws” who nursed with FN?

46: Cordelia Scales, Mississippi, in May 1861 told friend she was going in capacity of FN, tho wd prefer fighting to dressing wounds


Schuyler, Constance B. “Florence Nightingale.” In Notes on Nursing: What It Is and What It Is Not. Commemorative edition. Intro. Barbara Stevens Barnum. Philadelphia: J.B. Lippincott, 1992. (Also another ed.) 3-17. Positive, lots on bio, quite accurate 4: driven by desire to help humanity; God, religious ideals to reforms; exagg on Cr War 5: “When Nightingale arrived at Scutari, conditions in the hospital were so terrible that almost one half of the soldiers admitted died. N’s reform of the nursing care of the Br soldiers during the Cr War is probably her most well-known achievement. She not only nursed the sick and wounded she also accomplished the enormous tasks of cleaning up the grossly unsanitary conditions in the mil hospitals of the Cr theatre.” NO San Comm, esp in Crimea 5: FN wrote letters urging “them to investigate the structure and plumbing of the hospitals. Her pressure finally resulted in the dispatch of a San Com, which went on to find major defects in the system of health care and san in the hospitals. The Comm mandated action to clean up the situation, and the mortality rate dropped.” [did it] “Years ahead of her time in stat analysis, she compiled stat data on health
conditions in the Army and used these data to write reports in areas that needed reforming.” Notes on Matters aff. [no recognition of Farr or others] exagg Panmure, but correct on work behind the scenes; 4 sub-coms; 6: wrong on SH and AHC, “strained themselves to help her achieve her goal. Both men suffered from debilitating illnesses but continued to work for her in spite of their deteriorating health until the times of their deaths.” No, AHC died in Italy.

7: re-org of WO when Hawes died, his office of under sec elim, for 2, a mil under sec, and assist undersec for health admin. De Grey; 8: in her lifetime published 147 books and pamphlets re san and health; 8: NonN and NonH “opened a new era in hospital reforms and health care.” used stats etc., ok on NonN “the principles of nursing she expounded on ... such as providing a therapeutic env for patients, caring for them with empathy, maintaining... “ 9: still relevant; good 9: exagg on India. 10: wrong on sequence for cubic space work and on King’s and pf, seems not to know it was her prog;

11: “One must be sure of oneself, of one’s character, that it will stand any hour.” “She assigned readings in the humanities to increase their understanding of human ethics and morals.” NO. shd never stop learning, 12: India Bombay Village San Act 1889 est village structures; “refers most to in personal writings are Plato, St John, Dante, Bacon, Locke, Newton, ant, Hegel, Comte and Mill. [okay on Mill] has Enl in 17th cen. 13: Kant, has FN reconciling idealism and emp!! “Historians in the 19th cen wrote that it was the combined force of sc knowledge and idealism that enabled reformers of the time to succeed as never before” this combin for FN!! “She used emp ev to illustrate the need for reforms and her belief in phil and religious ideas spurred her on to push the needed reforms into reality.” more the religion, steeped in empiricist trad of Bacon and Locke, “and by the idealist philosophers who were being popularized in England by” Jowett, said to father “Hegel and Comte are men ... have a grasp of absolute truth never before equaled.” [but what she said was: “Take Hegel & Comte - men who I suppose have had a grasp of absolute truth, never before equalled. Yet really I don’t know what good it has been of to any one. What progress have they caused the world to make?” Also: “ Kant & Milton did much mischief in this way. And I think Kant & Milton so superficial.” on God’s nature, said.

14: JSM Jowett and Martineau “also had strong influences on Nightingale’s ideas.” Mill yes, Jowett. Discussed Plato and Hegel [but she was critical of his views” WEN Unitarian [no qualification]; WEN good, mother and Parthe not; 16: co-worker; 17: ends with her “far-reaching reforms” everyone shd be helped through educ to develop his or her potential. Soldiers, civilians, nurses, rich or poor.

Schweikardt, Christoph. “New Aspects of the German ‘Scientific
Scotland, Thomas and Heys, Steven. Wars, Pestilence and the Surgeon’s Blade: The Evolution of British Military Medicine and Surgery during the Nineteenth Century. Solihull: Helion 2013. 407 pp. FN Chapter on Cr War, 216, 218, 221-9, 231-4, 236-9, 253-8, 267, 284-5, 298,
298: Franco Prussian War. FN supported, wd have gone as nurse if not sick, gave advice.
299: Br Red Cross, sent ten surgeons and five nurses (no ref); impressed by German med services, each soldier carried a field dressing and had a card around his neck so that, if wounded, med officers cd record wound for guidance. Evacuation rapid; Wm MacCormac with French, noted they did not generally employ antiseptic surgery; critical of them. Antiseptic surgery arrived... 303: Prussians made some use of Lister’s methods of antisepsis but French did not, they used non-sterile lint to pack wounds; higher incidence of gas gangrene among French troops; Lister evolved a famous bandage
264 Parkes, gave school international reputation, field sanitation; his Manual of Pr Hygiene thorough, good on water purification and disinfection and deodorisation of sewage; no cause known of cholera

Scott, Elizabeth J.C. “Significant Steps Forward for History of Nursing.” History of Nursing Millennium Conference 6-7 July 2000, Edinburgh. in IHNJ 5,3 (summer 2000):65-68. 68: “Concluding thoughts...."this will prove to have been a historic nursing conference when the subject of nursing history moves on past the dominating image of Florence Nightingale. As was shown here the history of the nursing profession is about so much more and has lessons to teach today’s world of nursing.” this a conference which turned down papers on FN!

Scott, Helen. “Nursing Must Not Lose the Tradition of the Lamp.” British Journal of Nursing 10,9 (2011):556. Author, editor BJN assertions re FN and Seacole as equals. 556: anniversary in May “of two nursing pioneers” “Much has been written about these two nursing icons over the years. Whatever the truth or the mythology that surrounds them, Florence Nightingale and Mary Seacole will always endure as potent symbols of nursing. Their reputation has stood the test of time because in people’s minds they represent nursing at its best.”

“Florence Nightingale and Mary Seacole were there at the beginning of the revolution that brought about the birth of the modern nursing profession. The question nurses of today have to ask themselves is whether nursing is moving too far away from the ideals of these pioneers, that is, in the words of the RCN motto,
‘The tradition of the lamp.’” if changes in nursing benefit patients long term, history will not judge our generation harshly. However nurses must be aware of real danger of losing the common touch.


-- “Personal Recollections of Florence Nightingale.” American Journal of Nursing 11,5 (February 1911):365-68 and unnumbered, has 2 letters of FN photocopied. Where she proposed Grace Neill to meet FN; records her own meeting with FN at South St. 2 July 1899 called, gave name of Mrs Grace Neill, deputy inspector of asylums, hospitals and charitable institutions, Wellington NZ; for Tuesday (4 July) and for her on Thursday (6 July)


-- “Florence Nightingale’s Notes on Nursing.” American Journal of Nursing 27,5 (May 1927) 355-57ldiers;


61: “They are as valid today as they were a century and a half ago.” concepts, regs enunciated by FN

87: first trained matron apptd at Natal Govt Hosp (Addington) was Sophia Morris Paterson, trained at Glasgow Royal Inf 1883; Grey 1855

118 Sister Henrietta broke down prejudices against, friendship with royalty;

130: G Grey was a friend of FN, hosp designed by founder, Sir George Grey, to contribute to the civilisation of the native tribes. At Kingwilliamstown;

131: instruction of Bantu women in elementary nursing; Dr Fitzgerald decided to train Bantu women as nurses as well as men
as doctors; gave excellent service;
135: doctors training nurses 1793 Prof Sannazaro pub article on;
Professor May in 1797 Heidelberg; 1800 asked to est school at
Univ of; Kai 1833; FN
Anglican in UK; Order of St Thomas the Martyr 1874 sent Sister
Emma and 5 associates, with Sister Henrietta to Blomfontein;
Order of St Michael and All Angels, still there;
136: FN and secular nursing; not the founder of straining as
such, but of modern secular training; ['good on history]
Nursing ed 1900-60
284: Sister Henrietta, introduced apprentice system Carnarvon
(later Kimberley Hosp);

Sears, Joseph Hamblen. These Splendid Women, with Introduction
Aldridge. “Florence Nightingale” 290-311.

Selanders, L.C., Crane, P.C. “The Voice of Florence Nightingale
on Advocacy Online J. Issues Nurs 17,1 (Jan 2012):1-
cites Bostridge, herself, W-S, etc, not CWFN

Selanders, L.C., Crane, P. ”Florence Nightingale in Absentia:
Nursing and the 1893 Columbian Exposition.” J. Holist. Nurs 28,4

Nightingale’s Original Theory for Nursing Practice.” Journal of

Selanders, L.C. “Florence Nightingale: The Evolution and Social
Impact of Feminist Values in Nursing.” J. Holist. Nurs 28,1
(March 2010):70-78. Supported suffrage but did not give it
priority.

Selanders, Louise C. Florence Nightingale: An Environmental

Selanders, Louise C. An Analysis of the Utilization of Power by
Florence Nightingale 1856-1872. Dissert.

Sellman, Derek and Snelling, Paul. Becoming a Nurse: A Textbook
Routledge. FN ref, 4: 288

Sellman, Derek. “The Virtues in the Moral Education of Nurses:
[ethics] instrumental in continuing the Aristotelian trad of
concern with moral character of persons. Cites M Hainsworth,
Modern professional nursing, 2nd ed 1949, on ethics following FN,
Baly. Likes FN for following Aristotle (does not cite anything
specific); cites MacIntyre, good on context FN had to deal with, and on obedience. 9: “Nightingale was certain about the nature of this particular set of values. Her virtues can be seen then as a continuation of the Aristotelian tradition.” concl 10: virtues a neglected pat of morality, has a legit history, “which Nightingale influenced in a way that is implicitly Aristotelian. Miss Nightingale’s reputation as been tarnished with the subsequent distortion of her educational approach and by the zeal in which obedience above all else came to be seen as the primary virtue in a nurse. The backlash of opinion that inevitably occurred against such an austere regime changed the fundamental nature of what was perceived to be required of a nurse. Instead of being a handmaiden to the doctor, the new nurse was to be a model of scientific rationality with a new-found sense of autonomy.” 11: “It is not fashionable to hold Nightingale in high esteem. Many believe her to be responsible for much that is wrong with nursing today. Certainly she is blamed, but this is more the result of her followers who developed a narrow interpretation of much of her work. There is a rekindling of interest in virtue ethics in health care in general and in nursing in particular. In this respect it may well be appropriate to rehabilitate Miss Nightingale’s reputation and pay attention to the moral character of those who wish to be nurses.” MacIntyre After Virtue.

Sen, Priyaranjan, ed. Florence Nightingale’s Indian Letters: A Glimpse into the Agitation for Tenancy Reform, Bengal 1878-82. Calcutta; Mihir Kumar Sen 1937. Also Elmer Belt UCLA online


Seymer, Lucy Ridgely. A General History of Nursing. London: Faber & Faber 4th ed. 1957 [1932]. no ref to primary sources; lots of sec; covers some RC material; some errors (Sellon did not go to Crimea, p 74); 74: E Fry and Anglican orders had no share in reform of hosp nursing; St John’s House founded 1848 first purely nursing order in C of E, title “Training Institution for Nurses in Hospitals, Families and for the poor” inaugural meeting July 1848; a corp inst, community of women who are members of the C of E; to act as nurses and visitor sot the sick and poor; to connect with some hosp or hosps; probationers at 18 to pay £15 yearly for 2 years, got tr at Middlesex or Westm; and from 1849 at KCH; became nurses after 2 years, had to remain 5 years; some with educ admitted as nurses w/o prob; sisters were highest class;
1856 expanded by taking over whole of nursing at KCH, wh did not est a lay school of own until 1885; St John’s House also nursed Galignani English Hosp in Paris 1865-75 and Charing Cross 1866-89; has 1 chap (y) on FN and the Cr War; chap 7 The Nightingale School, FN’s Writings and Contemporaries; chap 9 on tr schools has section on Nightingale System 128-31;

129 Nightingale system schools of nursing started in London 1867 Middlesex (Miss Martyn lady supt 1867-70, Miss Thorold 1870-1905), Westminster in 1874 under Miss Merryweather, Bart’s in 1877 under Mrs Drake (1865-78) Machin 1878-81; Manson 1881-87; Isla Stewart 1887-1910 (but Drake hardly had a school, nor Machin); Gt Ormond St 1878 (Wood) Guy’s 1879 (Burt); London 1880 Luckes) KCH 1885 (Monk) Charing Cross 1889 (Gordon) UC 1899 (Hamilton); RC orders chaps 4 and 5

-- Florence Nightingale. London: Faber & Faber 1950. [bio pre-1954 and does not refer to primary sources]

-- Florence Nightingale’s Nurses: The Nightingale Training School 1860-1960. London: Pitman Medical 1960. 169 pp. good material. used primary sources extensively, but does not give any numbers; corr of Wardr, Crossland, Osburn, Machin, prob; quotes Crossland’s 1879 list of hosps with FN nurses; diaries at LMA, doctors’ lectures; Sibella BC letter to FN on 1872 letter; Gordon; 117: Hamilton brought in prel tr school 1910; had been in mind of D.S. Coode, who had succeeded Haig Brown in 1903 as home sister, and of Lloyd-Still when a sister; approved by Fund council Jan 1909, with Coode as first head, but Hon Gertrud Best began in fact; Hamilton pleased; 118: Luckes had been first with Tredegar House in 1895; Guy’s started 1902; 119: at presentation to Crossland on her retirement 1896 private nurses invited for first time; Appendix 3 Syllabus of Mr Croft’s Lectures for 1873; 83: has list of hosps which had N matrons and nurses, shows spread; 8 with a matron plus staff, and another 58 names and 26 other matrons and numerous other sisters, etc.


-- Oration of Mrs Lucy Seymer, MA, SNN before the congress of the International Council of Nurses, Atlantic City 1917. 16 pp. intro says MA Oxford in history, trained at Nightingale Tr School. ref all printed sources


Seymer, Lucy. “The Writings of Florence Nightingale.” Nursing
"It was a fashion among some biographers of the 1920s to ‘debunk’ their eminent Victorian forefathers. Nobody as serious minded and as fearless as Florence Nightingale could hope altogether to escape this form of detraction.” yet she was herself a debunker, trenchant but never scurrilous. cites Saturday Review August 28 1858 (Cook 10) item, same date as Builder article. is it same? goes over major writings succinctly --Seymer, Lucy Ridgely. “Agnes Jones 1832-1932.” International Nursing Review 8,43 (1933):43-51. good bio; was Ranyard Bible woman; strenuous day; nursed a nurse with typhus -- Seymer, Lucy R. “The Nightingale Jewel.” American Journal of Nursing 55,5 (May 1955):549-50 from Ill London News -- “Florence Nightingale at Kaiserswerth.” American Journal of Nursing 51,7 (July 1959):424-26. Online


Shannon, Richard. “An Icon and her Intrigues.” review of F.B. Smith, Florence Nightingale: Reputation and Power. Times Literary Supplement. 28 May 1982:571-73. glowing tribute. Get again “Nightingale’s first battlefield was the Upper Harley Street Institution, which she briskly took over and reformed to extinction.”

“No one did more to keep cholera alive and well than Nightingale.” citing FBS "Miss Nightingale’s opinions about cholera varied through time, but she passionately held to whatever notion happened to occupy her mind and always tried to forbid the propagation of rival theories, even if they were theories she had lately espoused.”. “She was most consistent where she was most wrong, as in her hostility to germ theory and her attachment to ‘miasma’

“Smith points out that Ireland, a country close a hand and crying out for reforming and philanthropic attention, was ignored by Nightingale.” “Biographers have accepted Miss Nightingale’s fiction and presented her and Lawrence as united in their pursuit of the grail of salubrious India. There is no evidence that Lawrence acceded to any of her overtures.” Shannon: Like Cranborne he regarded her as a tiresome meddler. “Even her bigoted dogmatism about cholera has to be seen in context.” “Although she lacked any originality of thought,” had gift to.... “Yet for Nightingale nursing never became more than a form of applied housekeeping--a view she retained all her life.’’

Miss Nightingale served the cause of nursing less than it served her./”

Shannon professor emeritus of history, Univ of Wales. In book on Gladstone. “Herbert’s passing exposed Gladstone to the attentions
of the formidable and tenacious Miss Florence Nightingale, who had tried to manipulate Herbert for her war office reform and now hoped to exploit Gladstone’s old Peelite friendship for the same purpose.” 447. Wd not known that Gladstone pursued Nightingale, having met her at the Herbersts. He called on her, unsuccessfully prior to her leaving for the Crimean War. He twice called on her without an appointment in later years. Immediately after Herbert’s death he asked Nightingale for material on him, probably for his own tribute. The two remained on cordial, Liberal terms,

Shannon, Scott. Handbook of Complementary and Alternative Therapies in Mental Health. Academic Press 2011. Author is MD, president elect of Am Holistic Med Assoc 479: FN as crusader, for holistic approaches to patient care, art and nature in healing, physical and psychosocial (uses as quoted by!!), tending the sick and wounded in Sebastopol WRONG COUNTRY, while Claude Bernard.... anticipating Walter Cannon and his student Hans Selye; together evolved a theoretical model that reconnected emotional to physical health and that stood p to modern sc experiment; led to current Western body-min medicine, and Robert Ader’s 1980 term psychoneuroimmunology;


Derry Infirmary, not until 1869 “that the first properly trained and registered nurse was installed--she was a pupil of Florence Nightingale herself.” J.A.L. Johnston, M.D. presidential address 20 Oct 1960, “The Ulster Medical Journal. Xxix,2 (December 1960), 99.

Shell, Charlotte M. And Dunlap, Karen D. “Florence Nightingale, Dr Ernest Codman, American College of Surgeons Hospital Standardization Committee and the Joint Commission: Four Pillars in the Foundation of Patient Safety.” Perioperative Nursing Clinics 3,1 (March 2008):19-26. Authors RN and MSN. Abstract: “The foundation of patient safety was started by Florence Nightingale in 1854 and was enhanced in 1910 by Dr Ernest Codman and his ‘end result system of standardization.’ In 1951, the Joint Commission on Accreditation of Heptulose... was established.” ILL in
Shelly, Judith Allen; Miller, Arlene B. Values in Conflict: Christian Nursing in a Changing Profession. Downers’ Grove IL: Intervarsity Press 1991. 215 pg. 2009 2007 pb; FN pledge not by FN, 12 FN refs, exagg claim for FN success at war and in getting legislation 42: “She dressed wounds and braved cholera wards to care for dying soldiers at the bedside; but she also battled hospital, military and govt policy to create change. End. Her reforms reduced the British death rate in the Crimea from 42.7 per cent to 2.2 per cent within six months.” End11. (Leah Curtain and M Josephine Flaherty. Nursing Ethics: Theories and Pragmatics. Brady Co 1981 p 141 on FN” influenced... “She advocated for patients’ rights directly to Queen Victoria and members of Parliament. She used her ‘network’ of acquaintances to submit bills to the British legislature. They were passed. [no ref] She wrote profusely, doing careful research, so that her reports to the govt brought action. In 1860... est “ 43: “Professional nursing in the United States began with a distinctly Christian foundation. Christian virtues were widely taught as the basis for nursing ethics.”... 1991 ed. Sources

Shepherd, John. “The Civil Hospitals in the Crimea (1855-1856). Proceedings of the Royal Society of Medicine. Section of the History of Medicine 58 (1965):199-204. Nice pic of Brunel’s huddled hosp. Conflict. Army doctors resented high pay of civilians. “Incredibly difficult relations” of John Hall with Raglan, and “his troubles with Florence Nightingale (who was given powers from the home govt which placed him in an impossible situation) [no] and jealousies of some brother officers, he did not like intro f civil element; Lancet opposed the civil doctors going, the Med times and Gazette supported, its newly apptd ed Spencer Wells one of the surgeons selected to serve; “virulent crit of Dr Meyer” no one knew him; 2 sr physicians went, 4 sr surgeons (inc Sp Wells, and Holmes Coote) 5 asst physicians and 9 asst surgeons, arrived end March 1855; Meyer had already come with “a batch of nurses” “by no means approved by Miss Nightingale.” sr surgeons pd £1000 a year; Smyrna now Izmir; had been an army barracks, deficient water supply, vent and drainage, previous occupants left parasites and vermin; on shore below slopes of a hill; open sewers of the town traversed the ground floor; Hall had sent a small staff of army MOs to est, and receive overflow from Scutari hosps, then grossly overcrowded; they were bequeathed 800 patients, gross overcrowding, fevers, the few wounded not isolated from those with cholera, typhoid and other inf conds; of 993 patients admitted between 14 Feb and 13 March 127 died, a mortality almost as high as that occurring in Scutari hosps (actually it wd be 1079% over 12 months) (201); Mrs Holmes Coote paid £300/year as matron; work came to a standstill in summer of 1855, staff gradually reduced, a failure; Brunel
consulted by WO, had not apparently designed a hosp before but in 8 days placed contracts; in 3 months the first prefab units shipped, by Oct 1855 Renkioi in use, had worked pumps gave vent; covered ways; plan in Parkes 1857; med staff under Parkes, fist prof of military hygiene; 203: FN had no role in design altho Parkes later became close collab; Goodeve and Robertson sr physicians, Spencer Wells and Holmes Coote transferred from Smyrna; Parkes bec prof of mil hygiene; Wells became pres of College of Surgeons, Hulke Moorfields Eye hosp; McLeod succeeded Lister at Glasgow; (all very prominent) Parkes pub on, with appendix by Brunel; 204: the experiment a failure in not relieving situation at Crimea and promoting liaison between army and civilian; but much good came of it indirectly,thro Parkes; 502: Nurses and Other women in the Crimea; nurses first introduced into hosps of Cr Feb 1855, 8 of Miss Stanley’s party went, request from Raglan, FN against, initially all at Balaklava Gen Hosp, under Miss Langston; but she went home in April 1855 a nervous wreck, replaced by Miss Weare, aged 70, who greatly admired Hall; cook was Eliz Davis; when Castle Hosp opened JSS put in charge, 503: but she unlike the other Stanley nurses admired FN; also Mrs Drake a prof nurse in original party; after Sept 1855 also to Monastery Hosp and LTC hosps; Clough, at first at General Hosp, Colin Campbell invited her to hutted hosp of Highland Div, given hut built for her; FN reprimanded her for taking appt in regimental hosp, but she said no authority over nurses in the Crimea, and she the first to propose to come out here and brave the dangers; 504: est position, had Colin Campbell and Raglan, became a celebrity, visited by Stratford and daughters; FN avoided her in May, then she became seriously ill with relapsing fever; died, also had connection with Lauderdale Maule, brother and heir presumptive to Lord Panmure; 505: Raglan had never anticipated women in range of enemy guns, experiment was Coin Campbell and approved by Raglan, and an outstanding success; Mrs Drake died; Mrs Duberly but Lord and lady George; 506: “While the carnage continued, she and her fashionable friends picnicked, dined, danced, went on conducted tours of the battlefields, attended parades and reviews, patronised the race meetings...” Stratford brought a party of ladies and gentlemen from Constantinople to tour the front; “Raglan: “Lady Paget became his close companion” the only woman at his deathbed. Life otherwise for soldiers’ wives and female camp followers; FN not enthusiastic about females at reg hosps, but approved of two being given official status as nurses. “Certain women even went up to the advanced lines, often under fire, to render first aid or to help bring in the wounded. In a special category was a West Indian Creole volunteer, re women other than nurses. 1:90 “Many appeared on the field of battle to succour the wounded and one was found to be assisting 91: a surgeon while he operated” (Shepherd 90).
Shepherd, John A. *Simpson and Syme of Edinburgh*. Edinburgh: E. & S. Livingstone 1969. has bit on FN, Syme conducted FN around Edinburgh hosp when there post Cr 218 (ref LMA); re relations with Simpson. 116 Simpson anxious that the army doctors shd be well supplied with chloroform and know how to use it; Hall in Sept 1854 issued a directive about chloroform, reprinted in *Illustrated London News* 23 Sept 1854, but this a measured statement, “cautioning medical officers against the use of chloroform in the severe shock of gunshot wounds, as he thinks few will survive where it is used....mistaken philanthropy...can only caution and entreat medical officers they will narrowly watch its effects; for however barbarous it may appear, the smart of the knife is a powerful stimulant, and it is much better to hear a man bawl lustily than to see him sink silently into the grave” then he a scapegoat, FN against; Syme reacted 12 Oct 1854 to *Times* vs Hall;
that chloroform does not increase the dangers of operations performed during a state of exhaustion, however extreme, that pain instead of being a ‘powerful stimulant’ most injuriously exhausts the nervous energy of a weak patient, and that, therefore, so far as the safety of the operation may be in question, chloroform proves useful directly 118: in proportion to the severity of the injury or disease and the degree of exhaustion or shock.” but Simpson involved in crit of FN, on Unitarian issue, Struthers, and wrote SH on her spying and interfering with doctors, who defended FN, also Christison involved; 120 clear that Simpson shared views of doctors at Scutari that FN autocratic, interested in Renkioi Hosp, Brunel and Parkes, ideal for prevention of hosp infection;
121 Syme received FN and conducted her around Infirmary when FN “undertook her intensive survey of the major hospitals in Britain”


Shepherds-Borg, Keith. “The soldier and the lady’s lamp.” *Journal of Perioperative Practice* (1 November 2007);


Showalter, Elaine. "*Florence Nightingale’s Feminist Complaint, Women, Religion and Suggestions for Thought,*" *Journal of Women in*


Sigourney, Lydia H. Great and Good Women. Edinburgh: Nimmo 1885 no FN mention

Strangford, Viscountess. Hospital Training for Ladies: an Appeal to the Hospital Boards in England. London: Harrison 1874. 17 pp. This is not how to do it, but an appeal to accommodate ladies, 35 and over, who wd spend a year, but not a long day at it. Quotes FN, cites Jones example. Home and family first. Must be instructed. 12: “Unless a student binds herself for twelve months’ service and takes up her residence in the hospital, she is refused admittance in all the London hospitals (with this one exception: University College Hospital, Gower Street, and lately, St Mary’s, Paddington) to learn or to practice. We contend that this is wrong.” A whole crowd of men, of medical students, whether intending to practise professionally or not, are admitted, and why not a few lady nurses? The men students are under the guidance or overlooked by the house surgeons, the nurses by the lady supt. There need be no more inconvenience with the one class than with the other.” recommends contact with poor, mutually beneficial, lady visitors at workhouses (13); 14: student to be ready in ward when surgeons and physicians make first rounds, 9-10 am, mt stay till after their 2nd at 3 or 4. 15: “What we want---what we must have---is the power to suit all and every case of acquiring knowledge, and we ask the hospital boards to meet our needs. At present they compel, us if we want to learn to nurse our fellow creatures, to give up our homes and ourselves in a way that practically puts it out of the power of
all but the very few who attach themselves to ‘sisterhoods’ or who make nursing a profession, to learn nothing within their walls.” might be thousands of women of all classes, but who have no occasion for a profession. 15: 35 plus, for ladies, at least. 16: Frauenverein example


good data on comparison of Renkioi and Scutari.
100: has letter to HV on Aylesbury at RSM; her views of hosp design compared with Brunel’s in last chapter; miasma theory, disproved by discovery of bacteria; Utopian view of “going too far”

126: Turks had huts, Br origin, but poor, 336 patients n 24 huts, 14 men each, but squalor; 140: comments on FN
84: Brunel and FN similar in views on hosp design, no evidence ever met; his huts larger than her wards but similar, she for narrower;

100: FN and miasma, no und her views changed but did not say kept till her deathbed;
120: “Conditions should only be compared after September 1855 when both Scutari and Renkioi were open simultaneously.” Table 3 Before Renkioi opened, 37,159 admitted to SandK with 5149 deaths (13.9%). For the comparable period 6009 admissions and 283 deaths (4.7%) compared to 1331 admissions and 50 deaths (3.76%) at Renkioi.

121: Pincoffs was at Scutari during last 12 months of the war “and left a picture of conditions in the Barrack Hospital during the time that Renkioi Hospital was open. He gave full credit to Miss Nightingale and considered cleanliness and food very satisfactory.” He points out that the Scutari data were affected by the admission of cholera cases from the local village, which spread to the German Legion and Osmanli Horse Artillery then living in the insanitary East wing of the barrack, and then to the wards themselves. The disease killed swiftly, typically in 12 hours and the mortality was 63%. There was no cholera at Renkioi.

88: FN perhaps felt her views confirmed by Renkioi;
103: re placing infectious patients mixed in; E.C. Robins, Modern Hospital Construction 1883, and The Builder 30 June 1883; Volinia Press 2007. 218 pages
(1) “Her father was a Unitarian,”
In the anti-slavery movement.
(2) comment of “Colin Matthew” as biographer
(3) Mrs Nightingale came from a Unitarian family, was a “domineering woman,” pro marriage with “Lord Houghton.”
(4) “F.’s desire to have a career in medicine,”
FN’s father gave her permission “to train as a nurse”?
(5) At Kaiserswerth “she studied to become a nurse,”
(13) Para and pic on drying machine
(14) “Although Mary Seacole was an expert at dealing with cholera.” “She visited Nightingale at her hospital... rebuffed” No, explained in the comments on Seacole. “British Hotel,” “She sold food and drink to the British soldiers.”
“Medical service”
(19) Colin Matthew again ref to as biographer, Primary Sources.
(8) Henri Dunant speech on FN gets excerpt
(9) Maeve Kennedy 2007 article
(10) Lee Glendinning on Wellcome, Hall’s letter. No mention of Hugh Small, but his influence clear.

Simpson, William. The Seat of War in the East. London: Paul & Dominic Colnaghi 1855. ded to Queen Victoria. has section on FN. (Col catalogue)

215: “Florence Nightingale began to organise her nurses for Scutari, and she wrote to Simpson asking for information on the use of chloroform in the field. She also asked Duncan and Flockhart to supply her with some of the drug free. They refused, but Simpson bought her enough for 1,000 doses, and it was duly despatched.” he condemned the war, reproved politicians behind it.

108:
good on comparing cholera treatment outcomes from Homeopathic Hospital and regular. 133: homeopathic treatments included camphor, cuprum and veratrum, apparently successful in central Europe on cholera in 1831. another source with exaggerated declines in mortality from FN and 27: has FN removing cartloads of; decline in percentage
“This success was repeated during a cholera epidemic in London in 1854, when patients at the London Homeopathic Hospital had a survival rate of 84 percent, compared to just 47 percent for patients receiving more conventional treatment at the nearby Middlesex Hospital.” Critics pointed out three major reasons why
this did not prove homeopathy effective, 134: as hospitals may not have been playing on level playing field; Homeopathic Hosp may have had higher standard of hygiene; or not success of homeopathy as failure of conventional medicine.

109: “Indeed, medical historians suspect that patients that received no medical care wd probably have fared better than those who received the conventional medications given at the time. This might seem surprising, but the 1850s still belonged to the era of so-called ‘heroic medicine,’ when doctors probably did more harm than good.

108: “‘Heroic medicine’ was a term invented in the twentieth century to describe the aggressive practices that dominated health care up until the mid-nineteenth century. Patients had to endure bloodletting, intestinal purging, vomiting, sweating and blistering, which generally stressed an already weakened body. On top of this, patients would receive large doses of medications such as mercury and arsenic, which scientists now know to be highly toxic.”

108: “The richest patients were the most heroic, because they endured the most severe treatments.” But question if homeopathy better than no treatment; on FN, gives her undue credit.

27: “Nightingale set about transforming the hospital by providing decent food, clean linen, clearing out he drains and opening the windows to let in fresh air. In just one week she removed 215 handcarts of filth, flushed the sewers nineteen times and carried the carcasses of two horses, a cow and four dogs which had been found in the hospital grounds. The officers and doctors who had previously run the institution felt that these changes were an insult to their professionalism and fought her every step of the way, but she pushed ahead regardless. The results seemed to vindicate her methods. In February 1855 the death rate for all admitted soldiers was 43 percent, but after her reforms it fell dramatically to just 2 percent in June 1855. When she returned to Britain in the summer of 1856, Nightingale was greeted as a hero, in large part due to The Times’s support.” no.

Also a brilliant statistician; used her records to compare a group of soldiers treated at Scutari in the early unhygienic days with a control group of injured soldiers kept in own army camp.

FN set up experiment. Many people against training nurses because higher mortality for those cared for by trained nurses. “N, however, pointed out that this was only because more serious cases were being sent to those wards with trained nurses. If the intention is to compare the results from two groups, then it is essential... to assign patients randomly to the two groups. She enough, when Nightingale set up trials in which patients were randomly assigned to trained and untrained nurses, it became clear that the cohort of patients treated by trained nurses fared much better than their counterparts in wards with untrained nurses. Furthermore, FN used stats...” re home births.
Cites Gill,. 87: “She could be justifiably be compared to Florence Nightingale, who was conceivably one of the most extraordinary nurses6 in history.

Skeet, Muriel. *Notes on Nursing: The Science and the Art*. Edinburgh: Churchill Livingstone 1980. 115 pp republished FN’s Notes on N 1859 and this is a blow by blow, chap by chap commentary on it; but only sec sources consulted, no ref to FN’s later work on nursing, Quain, not very good


Slater, Victoria E. “The Educational and Philosophical Influences on Florence Nightingale, An Enlightened Conductor.” *Nursing History Review* 2 (1994):137/52. thought FN ahead of her time, and holistic, but on review of the nursing lit, bios, led me to realize she was “a woman of her time” separation of mind and body. but only uses printed sources. 138: the first phil she studied was Descartes (but no source), Plato, Rousseau, Dugald Steward; “Institution for the Care of Sick Gentlewomen” (145); 146: FN may have come to see herself as one of Plato’s guardians, elite, one of Stewart’s enlightened conductors; saviours; 148: “I believe Nightingale accomplished much of what she did by going back to her study of Rousseau.” light weight article


Small, Hugh. “Brucellosis and Psychology: Nightingale’s ‘Depression’” paper presented at conference at Embley, 14 July 2010. Refers to FB Smith as a “sociologist”; “Miss Nightingale”; has a table with depression on it... Gives graph of reductions in death rates from scarlet fever, shows at least half the decline from sanitary measures, before antibiotics and vaccination; due to “sanitary engineering” what Simon said in 1858 cd not be reduced by san measures.


**Smith, T.R.** “Hospitals” *Building News* (1 May 1868) 289-91 on pavilion; RIBA, date odd; lists foreign pavilion hospitals: Malta Mil Hosp proposal (Valetta for 300 beds) (but not built) and same 1884 E. Ingress Bell and Sir A. Clarke architects; Johns Hopkins lists beds 361, architects J. Niernsee and J.S. Billings; Montreal General 1893 on H Saxon Snell; Prince Alfred Hosp Sydney 350 beds, architects Mansfield Bros 1882--; Stockholm Sabbatsberg New Hospital 300 beds 1879 no arch listed; Bellevue NY Sturgis Pav 889- Rand and Taylor architects; University Hospital Heidelberg 1869-76 no architect listed; 65: Buckinghamshire General Inf, Aylesbury 1861-62, FN did not manage to get kitchen out of basement in east wing; 65: Leeds, Scott Gen Inf “a first, rare, interpretation of the French plan” but w/o the artificial ventilation; “Scott, having had the benefit of communications from Florence Nightingale, made sure that there was a full system of opening window lights, backed up by extra floor and ceiling inlet and exit points for fresh air.” 66: FN commends Chorlton, Charles Greaves medical adviser to Chorlton Union and vice-pres of Manchester Statistical Society; 111: Preston, 1865 2 storey pavilion “double” pavilion, 24 bed wards; 113: Cumberland Inf, Carlisle, added pavilion blocks 1870-74 architect Charles Ferguson, a local architect; 114: Hull Royal Inf Henry Saxon Snell; 13: FN misleading prince for Leeds Gen Inf, Anning, the General Inf at Leeds 1963: 1:28; 77: North Staffordshire new site. G.B. Nicholls and Charles Lynam selected, 2 different architects, but proceeded, to work to the, then com consulted FN and decided bldg shd be constructed on pav system Nicholls and Lynam’s scheme built 1866-69 prepared under supervision of hosp’s med bd, architects visited new hosps in England and Paris, result a French type, glazed cloister; “it was a clearly articulated solution on the Larib plan—albeit at a more limited scale—and two obvious influences wd have been Florence Nightingale (...) And Builder, but also had Scott’s new Leeds Inf under construction;


Smith, Andrew. *Medical and Surgical History of the British Army which served in Turkey and the Crimea*. 2 vols. London 1858. Only brief patronizing ref to FN; men spoke in the warmest terms of gratitude of kind treatment by lady nurses prob 1:116


Smith, Barry contd Preludes
133: “her vaunted nurses remained marginal to the army until 1914.” WO ignored FN advice. “The carnage from preventable illness culminated in the Anglo-Boer War: under relatively benign climatic and topographic conditions the 480,000 British and Colonial troops suffered about 22,000 recorded deaths, but less than 7000 of them in battle and the remainder from preventable diseases such as gastro-enteric infections and typhoid fever, the outcome of dirty water and food, and exposure.” Summers 205, 333 n. 1; Longmore and Rutherford “duly opposed the motion to create societies of volunteer relief workers, after the Swiss, Prussians and Spaniards had supported it.” Rutherford quoted in Pierre Boissier, “The Early Years of the Red Cross,” International Review of the Red Cross. No. 22 (March 1963) at 132; FN essentially a Hobbesian realist, saw society as inherently unstable and warfare between national states inescapable; but
136: “Miss Nightingale saw more clearly than the founding fathers that future wars would involve mass mobilization and year-round campaigning with massive casualty numbers, as the American Civil War was demonstrating.” Swiss looked to supranational conv, but she had no faith that warring powers wd allow conventions to assume status of enforceable international law. Approved voluntary only insofar as can be incorporated into military system. Paper in view that armies themselves must cater for their wounded, as British did. 45773 f168; 136: Rutherford signed acc to Ellen Hart, Man Born to Live 1953 at 148; 137: terrible battle casualties of AM Civil War and Austro-Prussian War confirmed her in belief that only fully integrated military relief personnel could cope, but carped; 138: “Field ambulances were used in 1870, but they might have been adopted from the outset had Miss Nightingale not been so privately remote from the Red Cross.” 141: Red Cross began to emulate FN on sending letters to families. Ends “The paradox remains: Florence Nightingale’s
prefiguring of these activities was born...Despite her English nationalism and her assertion that aid to distressed soldiers must be solely the responsibility of government her practice brought her closer to the Red Cross voluntary ideal than she ever chose to admit.” good grief.


Smith, Barry. (F.B.) “Florence Nightingale, the Common Soldier and International Succour,” in Roger Durand et Jacques Meurant, eds., Préludes et Pionniers: Les précurseurs de la Croix-Rouge 1840-1860. Geneva: Société Henry Dunant 1991. 130-41. 141: Author described for his “revisionist account” which has provoked much discussion and been three times reprinted. 131: Dunant publicly honoured Nightingale in 1862 by naming her among saintly precursors, in Un Souvenir, got one of first RRC 1883 [the first] and feted at 8th Internal Conf of Red Cross London 1907; posth on medal for distinguished service in 1912...FN’s reply in third person and addressed to Mlle Gaussen in Geneva, not the donor, in sec source, Oliver, British Red Cross 68; cites Oliver, Beryl, The British Red Cross in Action. London 1966 p68 and 205 had letter of FN to Gaussen; 133: objects to her point about govt duty as had own funds etc.

Smith, Fred. A Short History of the Royal Army Medical Corps. Aldershot: Gale & Polden 1929. 11-14. Army nurses recruited from among the wives and widows of private soldiers and non-commissioned officers, status of a private, reported to a sergeant, paid less than laundresses and cooks.

Smith, Bonnie G. Changing Lives: Women in European History Since 1700. Lexington: D.C. Heath 1989. FN 198, 216-9, 248 252 252: [wrong] has Butler as leader of anti-CDA “associated with the leadership of Josephine Butler” with “The campaign gained support from such celebrities as Elizabeth Blackwell, Florence Nightingale and Harriet Martineau.” 216, not bad, but; 218: by pic: “On her return from the Crimea she took to her bed with the claim to serious illness. Thus released from household rituals, she wrote book after book on reform and lived to be 90.” 218: “Nightingale obtained a commission to take a team of nurses equip it and lead it to Turkey.” funds. 3-fold aims: to save soldiers’ lives and improve their immediate lot, then, FN wanted to change the status of nursing, “she molded an untested collection of women into a squad disciplined to take doctors’ orders and trained, if only by this experience, in health-care procedures. The upgrading of nursing that followed the Crimean
experience resulted from the publicity generated by Nightingale as well as her subsequent role in establishing school of nursing and nursing corps. Moreover, her best-selling Notes on Nursing (1859) caused changes in the kind of care sick people received. “... fresh air, sunshine, nourishing food. A new Joan of Arc, exploiting her considerable prestige, Nightingale spent the rest of her life on a final goal: modernizing the English army so that it was efficient, sanitary and honest. This became an obsession so hideous and brutal were the conditions under which the common soldier lived. In fostering the causes of sanitation and nursing, Nightingale was the first of many women whose initial moral commitment led them to science and knowledge.”


Smith, Peter C; Mossialos, Elias; Papanicolas, irene. Performance Measurement for Health System Improvement. 251: “controversies about risk adjustment reach back to the mid-nineteenth century. Florence Nightingale (1863) was criticized for publishing figures that showed higher death rates at London hospitals than at provincial facilities. Any comparison which ignores the difference between the apple-cheeked farm 252: hospitals explicitly refused patients with phthisis (consumption), fevers or who were dead or dying, urban facilities took everyone (Bristowe and Holmes 1864), “Had the figures Nightingale published ‘really overlooked the differences in relative severity of cases admitted into... different classes of hospitals?” Bristowe 1864 492

Smith, Marlaine C. and Parker, Marilyn E. Nursing Theories and Nursing Practice. 4th ed. Philadelphia: F.A. Davis 2015 not UofT or UG [2010] 27, 54, 3rd. Numerous cits. 564 pp, quoted Patricia Wilstead-Fry 1993. Said FN not a theorist, “Given that theory is the interrelationship of concepts which form a system of propositions that can be tested and used for predicting practice,
Nightingale was not a theorist.” none of her major biographers present her as one, rather a “consummate politician and health care reformer.” Not UofT or UG


Snodgrass, Mary Ellen. Historical Encyclopedia of Nursing. Santa Barbara: ABC Clio 1999. 194-200 Florence Nightingale entry has lots wrong has Feb 7 1837 fever outbreak at Spitalfields. 191 Institute for the Care of Sick Gentlewomen in Distressed Circumstances; Sydney Herbert; 196: has Seacole complimentary; 197 map has Seacole at Cr, FN at Scutari 197: “She received a unique decoration, the Victoria Cross.” [not the Victoria Cross, but a medal from Victoria] 199 US Civil War, ref to Simon Cameron, sec of war and Dix, head of the US San Commiss! More wrong on Seacole; also has a section on women; “The most successful woman to overturn male domination was Florence Nightingale, whose name remains at the forefront of the nineteenth-century feminism.” After Inkermann she shamed male med staff by asserting that she could immediately slash hospital mortality by instituting simple efficiency and cleanliness. Against the scoffing of the Royal Commission on the Health of the Army she proved her point by setting up the landmark Scutari hospital near Istanbul, Turkey. The model known worldwide as the Nightingale method forced smug generals to admit that nine thousand soldiers had died needlessly, exceeding the statistics for the Great Plague of London. Within months of her return to London....; 117:

Snodgrass, Mary Ellen. Historical Encyclopedia of Nursing. Santa Barbara: ABC Clio 1999. 194-200 Florence Nightingale entry has lots wrong has Feb 7 1837 fever outbreak at Spitalfields. 191 Institute for the Care of Sick Gentlewomen in Distressed Circumstances.; Sydney Herbert; 196: has Seacole complimentary; 197 map has Seacole at Cr, FN at Scutari 197: “She received a unique decoration, the Victoria Cross.” 199 US Civil War, ref to Simon Cameron, sec of war and Dix, head of the US San Commiss! More wrong on Seacole; also has a section on women; “The most successful woman to overturn male domination was Florence Nightingale, whose name remains at the forefront of the nineteenth-century feminism.” After Inkermann she shamed male med staff by asserting that she could immediately slash hospital mortality by instituting simple efficiency and cleanliness. Against the scoffing of the Royal Commission on the Health of the Army she proved her point by setting up the landmark Scutari hospital near Istanbul, Turkey. The model known worldwide as the Nightingale method forced smug generals to admit that nine
thousand solders had died needlessly, exceeding the statistics for the Great Plague of London. Within months of her return to London....;


“Section One. Section One discusses the pioneers, such as Florence Nightingale and Mary Seacole, who carved out the role of the nurse and professionlised it.” positive about FN.

“Overview: This section focuses on the original pioneers of nursing. In the first three chapters this is historically evident as these nurses practised in the 19th century. Nightingale, Seacole and Robb were literally creating an original role in an environment difficult for us to fully comprehend from this distance.” women subordinate... “Seacole’s case....”

“None of these first three nurses were theorists as such, although the origins of most nursing theory can be found here. These nurses were trailblazers, and their stories are articulated better by providing more background than ... For example, Nightingale’s time as a clinical nurse was comparatively short.”


Soine, Aeleah HeaRan. From Nursing Sisters to a Sisterhood of Nurses: German Nurses: German Nurses and Transnational Professionalization, 1836-1918. Dissertation University of Minnesota PhD. Mary Jo Maynes, advisor. August 2009 chap 1 Cradle of Modern nursing Kai and confessional nursing Chap 2 Cr War, Civil War and German wars Chap 3 postwar nursing reforms, FN, motherhouses; has Seacole ref

Soothill, Keith; Henry, Christine; Kendrick, Kevin, eds. *Themes and Perspectives in Nursing* Springer Publishing 2013 [1992], 338 pp. Chapter 4 by Francis, Brian; Peelo, Moria and Soothill, Keith. “NHS Nursing: Vocation, Career or Just a Job” 57-74. 57: “a desire for professional status which made problematic the carrying out of duties usually performed by lower domestic servants (G 1978). Nightingale, we are told, saw these non-nursing duties as character building; however, not all shared her view in a period which saw attempts to get nurses registered and hence officially recognized.” 14 cits of FN; cites N 1881; 159: “Nursing was set up and defined as women’s work (White 1978) Gamarnikow 1978.... FN 1881
205: Caring and curing: “Florence Nightingale (1860) clearly defend the caring function of the nurse as distinct from the curing functions, although she was clear that nature and not medical staff cured.

Sorokina, T.S. “Russian Nursing in the Crimean War.” Journal of the Royal College of Physicians of London 29,1 (January/February 1995):57-63. Cite. Pirogov had volunteered in Sept to go, but application ignored. Summoned to grand duchess, beg Nov 1854 (another article says his wife contacted gr duchess); Sisters of Mercy of the Community of the Cross, founded 6 Nov 1854 (day after Inkermann) by Helena Pavlovna, for this purpose. Pirogov was Russia’s top surgeon. Got tsar’s support: chron; Pirogov left Petersburg for Crimea 10 Nov 1854 also describes help by volunteer nurses before arrival. Alexandra P. Stakhovich, widow of captain and first lady-in-chief of community; first detachment arrived at Simferopol 12 Dec 1854, started work next day; info from Pirogov’s letters to his wife. Also Compassionate Widows; Pirogov vs amputations (done too much), plaster of paris, saw at artist’s studio; Ekaterina Bakunina head of 3rd detachment of 8; 4th headed by Sister Budberg, arrived 10 April 1855;

South, John F. Facts Relating to Hospital Nurses, Also Observations on Training Establishments for Hospitals. London: Richardson Bros. 1857 (at Bodleian, micr at BL); FN read in 1857; 14: Mrs Roberts sent out specially attached to Miss Nightingale, who had advantage of her large practical knowledge and experience; 14: who had the advantage of her large practical knowledge and experience in hospital matters, such, indeed as I do no hesitate to affirm was not possessed by any other person, male or female, who was connected with the Crimean hospitals. 5: nursing “for the most part, very generally alike throughout the large metro hospitals, the mode of conducting it at St Thomas’; 9: nursing est at St T “which may be taken as a fair example of the usage throughout all the ‘large London hospitals.’” 15: “presumed value of her assistance, I cannot but regret that her name has never been mentioned in any notice of the Scutari and Balaklava nursing services.” 18 “noble services of Miss Nightingale in the miliary hospitals of the East” 19: Pakington Sir Wm Heathcote supported proposed tr inst, but he not a judge of bad hospitals 23: Jane Shaw Stewart, sister of Sir Michael SS bart; proposal for sisters and head nurses, have within own hospitals all the appliances for; 2 21: instruction in nursing at Kai, 1851 pamphlet, the writer, “whoever he or she may be” 25: Mrs Fry, Institution of Nursing Sisters founded 1840 ref to in Bowman, got books for nurses Household Surgery. 4th ed 1859 4/6 Murray rec by Croft 47760 f13 and On the Bones 3rd ed


Spiegelhalter, David J. "Surgical Audit: Statistical Lessons from..."


Spilsbury, Julian. *The Thin Red Line: An Eyewitness History of the Crimean War*. London: Weidenfeld & Nicolson 2005. Good maps. Cites “We have on our hands a sick man—a very sick man; it will be a great misfortune if one of these days he should slip away from us, especially before all necessary arrangements are made.” said by Tsar Nicolas I to Br ambassador in Petersburg 1853 (1); set scene for Cr War, had lost in 1820 Egypt, Syria, Greece, Moldavia and Wallachia (Romania) and had shaky grasp on what remained; dream of Russian statesmen a warm water port with free access to the Eastern Med, a nightmare for Fr and Br, Fr wanted no Med rivals and Br did not want Russian threat to communications with India via Red Sea, and worry re Russian expansion into Central Asia;

2: Napoleon being crusader and protector of Latin Christianity; RC monks placed silver star with arms of France over the sacred manger and seized keys to church, caused riot, some Orthodox monks killed, Russians blamed Turkish police for complicity; rebellion in Montenegro complicated matters--Austria demanded withdrawal of Turkish forces, under Omar Pasha, acting against the rebels. Prince Menschikoff, castrated by Turkish cannon ball in an earlier war, amb in Constantinople, backed Austrian demand, added that refusal to withdraw wd be treated as decl of war; Sultan was assured of Br and Fr support, both fleets in Dardanelles, refused and Russian forces crossed river Pruth and entered Moldavia. Austria mt yet bring influence to bear, but emp was grateful to tsar for support in 1848.

3: inadequate numbers in Br Army for war, when sent out did not have reserves, had to make up and combine

Spriggs, Edmund Antony, “Hector Gavin, MD, FRCSE (1815-1855) His Life, His Work for the Sanitary Movement and his Accidental Death in the Crimea.” *Medical History* 28 (1984):283-92. refs to FN; Gavin’s task was to travel across Black Sea to Crimea; set to work, burial grounds needed covering with lime or charcoal, then earth, latrines to be erected; slaughtering place for animals, then carry refuse to sea.


“Documents leaked last month revealed that education sec Michael Gove plans to remove Florence Nightingale and Mary Seacole from the National Curriculum for schools. The news sparked a storm of protest,” shd not surprise. Summary “There are plans to drop Mary Seacole and Florence Nightingale from the curriculum taught in schools, according to leaked reports. Here, nurse leaders protest that this would rob young people of valuable role models and undermine the image of the profession. It is also suggested that a person’s contribution to society is more important than their personality.” (Uses both FN and MS) “For many nurse leaders, union activists and academics, the downgrading of Mrs Seacole and Miss Nightingale is a mistake that cd ultimately damage the future of nursing. RCN diversity and equalities co-ordinator Wendy Irwin says it is important to ‘seek out and celebrate’ historic nursing figures who can act as role models to inspire and encourage future nurses to even greater excellence.’” Anionwu, both overcame.... “Joan Myers, pediatric nurse consultant and chair of the chief nursing officer’s black and minority ethnic advisory group: need role models “Mrs Seacole was a black woman pioneer, a trailblazer doing work to help the British public and was highly respect by soldiers. She needs to be remembered and acknowledge for that. From a black person’s perspective, to have an icon or role model and someone to look up to from our history is important.” never saw a black nurse consultant. Simon Ferrer “It was her battles against prejudice, class and ethnicity to provide nursing care to soldiers during the Crimean War that gave me the confidence to challenge those views” don’t have to surrender to prejudice. FNM Novie Williams, 3rd year student, not recd any teaching at univ on his of nursing “or on historical nurses such as Mary Seacole or Florence Nightingale,: Sue Norman. Chair. “It is important children learn about Miss Nightingale and Mrs Seacole and how their work led to ‘huge changes resulting in better health care.’ LM.... Petition, 34,000 people across the UK and worldwide signed against removing MS from

St John’s House: A Brief Record of Sixty Years’ Work 1848-1908. 12 Queen Sq. Bloomsbury, pamphlet 1908. Cook 2:465 26 pp. Has FN letters and SH. FN attended with SH at meeting of council in Oct 1854 and chaplain gen to forces to facilitate, 6 nurses to proceed and serve under FN (7); names of nurses (8)
St John’s House Queen Square.
13: Messrs Galignani in 1865 asked for St John’s House nurses for hosp in Paris for English residents; 14: Mary Jones resigned her office as superior in 1868, succeeded by Mrs Hodson a most generous benefactor and sister, who resigned at end 1870; then Miss Caroline Lloyd; April 1871 Children’s Hosp Nottingham placed under their nursing, until 1873, but both it and Paris too small for efficient training; 14: maternity home est in 1877 for
training, 10 in-patients, house taken at Ashburnham Road, Chelsea and Mat Home est there;
15: This work was honoured by Miss Nightingale’s sympathy and interest. She inspected the plans (which were based on the newest hygienic principles then known) and gave them her warmest approval." at close of letter to council she wrote: “I wish you God speed with all my heart and strength and shall be proud if we can by maintaining pupils with you follow in your steps and extend among a large number your benefit promised to the poor.” appeal to public for funds. 1883 Maternity Home removed to 18 Queen Anne Terrace, Albert Rd, Battersea, work relinquished in 1892 as expend too heavy, numbers of nurses gained LOS dipl there at certif;
16: 1883 a storm broke out, and most of sisters and some nurses left, re-org by Esther Gilbert and Helen Frere; 1885 new agreement between SJH and KC, hosp no longer to be nursed from SJ House; In 1886 Community of All Saints took over mgt of SJ House and later Comm of St Peter; 1886 MAB asked for SJ House help;
18: agreement for nursing at Charing X ended in 1889, as hosp wanted own staff
19: 1892 nursing at North Eastern Fever Hosp undertaken for 1 year; 2 became missionaries in Zanzibar; 24: in 1907 left Norfolk St for Queen Square Bloomsbury;
25: lady superiors and sister superiors: Elizabeth Frere 1848-49, Elspeth Morrice 1849-53; Mary Jones 1853-68; Eliz Hodson 1868-70; Caroline Lloyd 1870-83, Esther Gilbert 1883-86 (became Rev Mother of CHS Priory Ascot)...
St Catharines General Hospital. *Seventy-fifth Anniversary 1874-1949* of the Mack Training School for Nurses. St Catharines p. 3

3: School opened June 1874, but Mack had idea in 1864, acc to Lavinia Dock corr to a Mack relative. Soon after FN’s work appeared. “The year 1874 marks the beginning of nursing education in Canada under the Nightingale system which insisted that a school for nurses be under the leadership of a woman who was herself a trained nurse. Later called the Mack Training School. Affiliated with St Catharines Hospital. Miss Money sent to London in 1873 to get Guy’s trained nurses, started probs.
Report on starting school started with a Latin quotation: “Where there is no woman, a sick man groans.”
[2003] 95: nursing dominated by women or men, cites Gamarnikow.
“Arraigns Nightingale for setting up the new nursing in a way which mirrored the Victorian bourgeois household: doctor-father, nurse-mother and patient-child. The nurse was to have her own
sphere, but it was to be one in which she was subordinate to the doctor and bound to take his orders. She would not interfere in diagnosis and would carry out his prescriptions. " Although Williams 1980 argue N method did give nursing an independence from medicine. FN an opponent of orthodox medicine men and assoc with Farr and belief in env causes of disease will be recalled. 131: doctors liked E Fry approach, because FN gave control to matron and she did not. Good analysis.

95: “Nursing Dominated by Women or Men/” Gamarnikow 1978 view way in which nursing emerged had more to do with patriarch than with the capitalist class structure. She applies her theory to the Nightingale model of nursing as a paid occupation. For her the ‘central interprofessional rel which subordinated nursing to medicine’ (1978 p) is crucial rather than the intraprofessional disputes which have so exercised nursing historians.
94: cites source that Miss Breay, FN chief pioneer, excellent consequences, transformed nurse from a domestic servant to an educated pupil and prob; 95: upper class connections; 131: Williams 1980 suggests 19th cen doctors preferred to think of origins of ‘modern’ nursing as ling with E Fry rather than FN because tr arrs of latter ave some control over ward to matron; 62: FN “serious mistake in the denominator” for high death rates; 109: FN attempts at workhouse reforms
69: FN and germ theory Chadwick supported by FN on, miasmatic [does not say changed mind, nor that carried on]; okay on FN

Staff. “A Hero in Her Own Right.” *UofT Magazine*. Spring 2015. “Jamaican-born nurse tended to wounded soldiers during the Crimean War. Academics often ref to Jamaican-born nurse... as the ‘black FN’ but the comparison is inappropriate, according to U of T English prof Sara Salih. “In fact, Nightingale’s organization may have rejected Seacole because of her skin colour, says Salih, who is editing the nurse’s 1857 autobiography. “She describes tending to wounded soldiers on the battlefields during the Crimean War.” “Nightingale urged her nurses not to consort with this ‘improper woman.’ Nightingale claimed that Seacole served alcohol and encouraged gambling at the ‘hotel’ she established near the battlefront, where she provided meals for officers.” Emphases morality. Add a Comment.

Penguin to publish annotated ed this year.

O’Gorman, Francis, ed. *The Cambridge Companion to Victorian Culture*. Cambridge: Cambridge University Press 2010. background for treating as equal to Seacole; also
Samantha Mathewes, “Remembering the Victorians”. Dr Arnold and General Gordon, divided personalities, quotes Strachey; quick ref to recording of her; so, 3 mentions,

Stanley, David and Sherratt, Amanda. “Lamp Light on Leadership: Clinical Leadership and Florence Nightingale.” Journal of Nursing Management 18,2 (March 2010):115-21; on anniversary of death. Stanley, School of Nurs and Midwif, Curtin Univ, Perth W Aust; NonN only primary source; 115: abstract “There are a few parts of Florence’s character which fit the profile of a clinical leader. However, Miss Nightingale was not a clinical leader: she was a powerful and successful role model for the academic, political and managerial domains of nursing.” Australia. First names her and “Miss N…” 116: Clinical leadership a new term
117: Was Florence Nightingale a clinical leader? Approachable and open? but Hall and purveyor; shocking nurse; “Sir Sydney Herbert, min for war” Mary Stanley; “Subsequently, Mary Stanley never received any official acknowledgement from the Queen for her part in the recruitment of nurses for Turkey or for the care of soldiers in the Crimea. Only Florence’s part in the Scutari adventure was officially or publically recognized. Mary was reduced to tears…” Brickbat; [but Stanley left in 4 months, and converted to Roman Catholicism, did not like the food! The only time she was in the Crimea was when she visited it seven years after the war; ”Ten Days in the Crimea,” Macmillan’s Magazine 5 February 1862:301-11.
Goes through faults of FN using secondary sources, never read what she did there directly! No Goldie or Cook or O’Malley; 117: “A great friend of Florence in her middle and later years Benjamin Jowett came to know her quite well….reproving Florence was like pouring cold water….”cites Bostridge. “Even her family were kept at arms length on her return from the Crimean War and Miss Nightingale employed her Aunt Mai and Arthur Clough in a type of secretarial role…..” [Clough was paid, senior position, and Aunt Mai had performed that role voluntarily in the Crimea] 117 and 118: Sir Sydney Herbert and wrong title; 118: returned convinced she had failed; let down, “Se had indeed let them down. The death rate at Scutari was higher than any of the other hospitals (Grint 2000, Bostridge 2008) and while she wanted to put this fact in the official Government report Sir Sydney Herbert had the figures removed so that it was decades before the truth of Scutari was released. By then Florence’s iconic position 119: was unassailable.
119: FN excluded Galton from will because he “refused to exclude research from the endowment brief as Nightingale had wished, she revoked the bequest in her will. Research it seemed was not something Florence was interested in, but statistics were her life-long passion (Reid & Boore 1987) “ [good grief] also wrong that Galton “would be responsible for overseeing the chair’s
work” 120: “Miss Nightingale lacked experience to offer detailed instruction.” re NonN, never cites another book! Great respect for the for the Nursing undertaken by Mary Clare Moore and her nuns [but Morre ran the linenry] 120: “it is questionable that as the Superintendent of Female nurses that Florence did any actual nursing herself. [but never read a source!] After her return from the Crimean conflict, Florence did no nursing [not hands on, but did referrals, after care, etc.] and sought advice and information from a number of informants. It was these people who delivered the knowledge and clinical insights that may be attributed to Florence Nightingale.” Mary Jones [FN did get advice from her superior civil hospital experience, but Jones soon deferred to her, as is evident in correspondence never consulted], “In fact Mary Jones is somewhat overlooked as a real pioneer of modern nursing. [but Jones quit her order and quit nursing, while running the midwifery ward did not notice that deaths were increasing; did not admit unwed mothers and did not permit divorced women to become nurses.] It is also worth noting that in terms of practical experience, Mary Seacole, a Jamaican-born Creole who also cared for the sick and wounded during the Crimean War, far outdid Nightingale’s experience of hands-on nursing (Bostridge 2008, p. 273). [but misses Bostridge’s caution about political correctness and false comparisons] [lists five “nurses” as “central contributors to the development of the nursing profession, most of whom do not remotely qualify: Mary Seacole (bar and restaurant proprietress, first aid on battlefield on three occasions; Mary Jones (a serious leader before Nightingale, but who soon deferred to Nightingale on nursing, did not realize there were mounting deaths in her midwifery ward, then quit her order and nursing over a dispute with male authorities); Mary Clare Moore (who did voluntary nursing in an Irish cholera epidemic in 1832, and ran the linenry during at the Barrack Hospital, but was not strong enough to nurse, nor post-war; Mary Stanislaus Jones (who did nurse post-Crimea, helping to found and run a convalescent hospital in John’s Wood); Mary Gonzaga (who also nursed post-Crimea at the order’s convalescent hospital); and even Mary Stanley (who had done voluntary epidemic nursing pre-Crimea, but little there and none after). There are many other women who do deserve to be celebrated for their contributions to the development of the profession, whose work, for some with brief biographies, in McDonald 2009a and b). sad reality that leaders who function at bedside care often relegated to the back pages of history (Stanley 2007) “Nurses such as Mary Seacole, Mary Jones, Mary Clare Moore, Mary Stanislaus Jones, Mary Gonzaga and even Mary Stanley...are all central contributors to the development of the nursing profession.” Incumbent upon us to recognize these other leaders, to remember and celebrate their achievements and to see the significance of their contribution to clinical nursing and
quality patient care.
120: Union 1999, at its conf “it was noted that Florence had a submissive attitude to medical officers, antipathy towards feminism and her success in the Crimean was questionable (Grint 2000).” however, success; why does it matter if was or was not a clinical leader?

Stanley, David. “Lights in the Shadows: Florence Nightingale and Others Who Made Their Mark.” Contemporary Nurse: A Journal for the Australian Nursing Profession 24 (2007):45-51; (author assoc prof Charles Sturt Univ, WA) concern FN overshadowed nuns, ladies, Seacole as “unofficial nurse” cites bad sec sources: 47: somewhat blames FN for high death rates. Main problem, apart from overcrowding was built over sewers, stench. “Nightingale did not subscribe to ‘germs’ and while it is true, germ theory was radical and new, she cd see no connection between the sewers and the disease rampant in the hospital. “instead she believed in cleanliness. Death rates rose, altho wards clean. “They all died in a clean env, but they died nevertheless.” cites Brighton 2004; so, then “The War Office though where [were] more sceptical and in March they sent out a Sanitation Commission lead by Dr Sutherland to investigate the staggering death rate at Scutari.” but Palmerston sent it out, and Sutherland became FN’s chief collaborator after the war. Her reports highlight the bad sewers and drains; she herself saw to the removal of excreta tubs in the wards. Germ theory hardly new and radical then--this is pre Pasteur and Lister; no doctors using germ theory at the time! But 47: “Nightingale refused to accept that the flushing of the sewers was related to the fall in death rates and preferred to attribute it to the passing of winter, although she claimed that the arrival of the commission saved the British Army” (cites Kerr 1997. But she did credit them, and gave copious info on the removal of “filth” n her reports.
48: nuns “Sisters of Mercy who formed an important component of Nightingale’s first party in October 1854....Nightingale had little time for them and described them as being fit more for heaven than hospital” (cites W-S) but they worked closely together, became friends and remained in touch lifelong! The nuns who were not wanted were the Norwood Sisters, from a cloistered order, with no nursing experience, and who went out independently of Nightingale’s party. Error continues: “Three of the Sisters of Mercy were....[he gives their names, but they came later, and although their superior had agreed to serve under Nightingale--she would not allow her nuns to sign independently--she changed her mind and refused to work with Nightingale.
49: “One nurse, Fanny Duberly,” but Mrs Duberly was not a nurse, but an officer’s wife, who published her journal and letters from the war.

Stanley, Julie and Mary Green. Florence Nightingale 2013.

115: influence of FN, to assess her practices and approach to nursing care “against a set of clinical leadership criteria.” Was she a clinical leader?
116: “her appropriateness of her status as a clinical nurse leader may be called into question.” “The present study challenges the view that FN was an effective clinical leader.” Frankel 2008 on health practitioner; cl leadership a recent term defined by Millward and Bryan 2005 xv as “being about facilitating evidence-based practice and improved patient outcomes through local care.” Harper 1995 followed in describing a “clinical leader as a clinical expert in an area of specialist practice who uses interpersonal skills to facilitate quality care.” so, nursing leadership and clinical leaders may be very different people

117: Stanley 2006a-c and 2008 concluded that a clinical leader is a “clinical expert in their field, and who because they are appreciable and open, effective communicators, viable in practice, positive clinical role models, empowered decision makers, clinically competent and clinically knowledgeable and significantly displaying their values and beliefs through their actions” good grief. Was she? No, not approachable and open [why not judge by her years post-Crimea? She mentored nurses]; cites Bostridge and Jowett openly for negatives; Aunt Mai and Clough; her beh “has been attributed to her poor and health and a reluctance to seek publicity, but even before she became informed [yes] Florence was not regarded as an easy person to get on with.” her sister “shocking nurse” cites Brighton 2004 [but she had nervous breakdown and hardly a fair judge of her nursing skills]; “frequently clashed with many people” army purveyor and Dr Hall [for good reason]; and even Mary Stanley “who came to support and assist her” [but FN under constraint, had agreement no more nurses until she asked for them, and the doctors did not want them, and so many Catholics, and nuns, upset the balance; Mary Stanley converted to Roman Catholicism while there, left early, had never planned to stay]; Sir Sydney Herbert [adds title and mis-spells]; “venom” Stanley “never received any official ack from the Queen for her part in the recruitment of nurses for Turkey or for her part in the care of soldiers in the Crimea.” [but she never was there until 7 years after the war; only there a few months]; clashed with Bridgeman [who wd not let her nuns sign the contract with the War Office, signed on their behalf, and then refused to act on her commitment; also her hospital had the highest death rate, never mentioned!]

118: ack impact of FN’s writing on hosps and India, persuasive
and prolific; posted to Crimea [Turkey] as supt not clinician [ridiculous to discuss nurses as clinicians then--this was the first use of women in war hospitals by Br]; understates previous FN experience at Harley St: resigned in August 1854 [but working in October, and left from there]; misdates letter to SH [citing Bostridge 2008 229] that she was general dealer etc, not mentioning nurse. Good grief! No recognition of initial hostility of doctors or how bad conditions were; what clinically could anyone do with overflowing toilets and non-functioning sewers and drains?; post-Cr reclusive, est nurse education.... “assumed name Miss Smith” [traveling with her aunt Mrs Smith]; cites Bostridge on letting men down; “She had indeed let them down. The death rate at Scutari was higher than at any of the other hospitals (Grint 2000, Bostridge 2008)” but highest at Koulali, Bridgeman’s;

119: positive clinical role model, no, “visible on the wards” in evening; understates [Robinson on letters she wrote; vol 14]; [a bit hard to imagine sexual activity in the wards, when men on floor or on trestles 18 inches apart]; True “none were to see her in a clinical capacity” but she did network on clinical issues, kept up; her Quain’s articles in 1880s and Chicago 1893; finger poisoning, aseptic surgery; “There is certainly no information to support her use of evidence-based practice in the application of nursing care (Larson 1997). For example, in 1864, she described a sc article demonstrating that cholera was a water-borne infection, as having no practical value (Smith 1982). Cites FBS no page number 120: Notes on Nurses has only three pages on personal cleanliness and only one sentence on care for patient hygiene! [but the book not for hospital nurses, and was written before her school was open] “This brings into question Florence’s practical insights into common nursing duties.” good grief! Where did her info come from? [no recognition her experience better than anyone else’s] respect for Moor and Mary Stanislaus Jones and Mary Gonzaga [you missed her surname; FN in touch with them to the end of her life]; “questionable that deferred to Mary Jones [yes, but Jones quit in 1866 over a dispute with the C of E and never nursed again]

Stanmore, Lord. Sidney Herbert, Lord Herbert of Lea: A Memoir. 2 vols. London: John Murray 1906. has letters, SH to FN 1:338-41; 1:398 has Smith refused to allow civilian doctors when cd not get army doctors; SH passed on demands of FN re supplies


Stark, Myra. “Introduction.” Florence Nightingale’s Angry Outcry
against the forced Idleness of Victorian Women: Cassandra. New York: Feminist Press 1979. 1-23. mainly based on Woodham-Smith, Strachey, no original sources. not bad beginning, refs to works on women at home, Mrs Ellis’s series, The Daughters of England, The Wives of England, the Mothers of England. Cassandra written 1852, a work of “despair and anger” (11), death in life, tyranny on marriage (12); “an outcry of protest against the powerless of women--their lack of control over their lives, their subordination to husband and family, their loss of any identity except through personal relationships--and against the boredom and triviality that result from the limitations of their existence.” V. Woolf ack “Cassandra” in A Room of One’s Own 57: Florence Nightingale shrieked aloud in her agony”, ref to Cassandra. and Strachey cri du coeur (189); the book shd take its place “among the classics of Victorian feminism” with JS Mill Subjection....; then “She refused to give wholehearted support to the main feminist causes of her day--suffrage and equal educational rights for women--and was critical of those who did. Indeed, she frequently expressed contempt for the lives and characters of most women” (15) then gives Clarkey ex., citing Woodham-Smith 260; cites “brutally indifferent” comment to Martineau (16); cites Pickering on her malady hysterical nature, FN’s crit of women from her mother and sister’s examples (17); she “refused” to join suffrage movement of JS Mill (18), altho’ acknowledged that she paid her dues and joined, re her request to him to help on India! (19); “After ‘Cassandra’ Nightingale turned away from the subject of the condition of women. As a Victorian recluse dedicated only to work, she lost sight of the crippling disabilities--economic, social, educational, political--under which most women continued to suffer; and she failed to understand the necessary work of support, of education, of raising public awareness, in which the women’s movement of her time was engaged” (19); cites Ld Stanley on FN’s opening up professions for women from Cook 1:305; ref to Harley St. as “the Hospital for Poor Gentlewomen” (22);


Stephenson, G.D. Some Pioneers in the Medical and Nursing World. Shanghai: Nurses’ Association of China 1924.

Sternberg, Esther M. Healing Spaces: The Science of Place and Well-being. 2009. Not online

Steven, John Lindsay. “A Lecture on the Duties and Training of the Medical Nurse.” Glasgow Medical Journal XXXL,5 (1889):330-37. Lecture given to nurses at the Glasgow Hospital for Sick Children. 331: Intelligent obedience, “duty of the nurse to carry out strictly, accurately and intelligently the instructions of the physician.” 332: obs of a nurse of temporary squinting of the eyeballs or passing slight convulsive spasm of arm or leg may be means of throwing light on true nature and locality of an obscure nervous disease. Must never presume on own knowledge but not a mere automaton or machine, not as soldiers. “Nurses are officers in the army drawn up to do battle with disease, and in the absence of the commander much will frequently be left to the trained intelligence and skill of the nurse. Intelligence in a nurse, then, is as important as accuracy of observation or obedience” 333: general qualifications, Xn, calling. Training under Nightingale Fund, honest, punctual, patient, cheerful, truthful, quiet and orderly and kindly; call of love to humanity and of heartfelt sympathy with human suffering. 335: books; 337: books can never be more than guides... 4, FN’s NonN, Bell’s Notes for Sug Nurses, Anderson Medical Nursing, Allan’s Fever Nursing. “I would like you all carefully to read Miss Nightingale’s book, partly from its historical value and the associations it recalls, and partly because of the sound common sense which pervades its every page. Never mind, although you may feel inclined sometimes to resent the assertiveness of the writer, every feeling of this kind is soon lost in the memory of the noble devoted life of one whose name was a household word in our land in a time of great national sorrow and trial, and whose name was a household word in our land in a time of great national sorrow and trial, and whose influence is still felt in every hospital of the country. You will find in the book things to make you smile, and things to
excite your pity and indignation, and withal, I believe, you will rise from the perusal better and wiser than before.”

Stevenhoved, Susanne. “Florence Nightingale.” *Six Hundred Women and One Man: Nurses on Stamps*, trans from Danish. Kolding: Danish Museum of Nursing History 2004. 30-32. Also has Seacole entry. Pic of Jamaica stamp with Seacole in hospital in nurse’s plain uniform at bedside of soldier 1991 $8. Soldier in next bed like the soldier in Punch cartoon, where Seacole holds up Punch magazine. Quote of Russell: “I have witnessed her devotion and her courage: and I trust England will not forget one who nursed her sick, who sought out her wounded to aid and succour them, and who performed the last offices for some of her illustrious dead.”


Stevenson, Keira. *Florence Nightingale*. Online

Stevenson, Christine. *Medicine and Magnificence: British Hospital and Asylum Architecture, 1660-1815*. New Haven: Yale University Press 2000. FN refs. Great book on hosps that were. Fine pics. Haslar and Plymouth. Bordeaux, by Jean Bourguet’s, St André Hospital, 1825-29, planning principles laid down 70 years earlier, first published pavilion war plan in 1788 for rebuilding of Hotel-Dieu; FN refs 3-4, 158 163 188 229 234-35 234: but uses Strachey and Rosenberg and his ref to that “sacred text” of Notes on H, Consensus had already departed from progressivists of Wm Strutt’s day, return to larger wards and wariness about artificial vent; FN closer to Pringle than Strutt, but both wd have understood the antitheses that structured them, her refs to “beautiful but unhealthy bldgs” how to cure: remove warming and ventilating app and trust to magnif supply of windows for fresh air, open fireplaces and forget the cost of fuel; contagion by contact an absurd hypothesis. 235: “Nightingale variously rejected contagiousness of syphilis, tuberculosis and smallpox, let alone the hospital diseases.” cites FBS! 235: “Against her firm advocacy of the pavilion plan and her general conviction that hospitals were, or shd be, as difficult to build as pocket watches (though at the same time uncomplicated in their plans) a powerful alternative began to range itself in the 1860s and this was simply, to disregard the finer points of hospital planning, or even to ignore planning entirely, on the grounds that it did not in itself make a signif difference to patients’ chances of survival. 229: “Nightingale was a root and branch miasmatist.” 158: Today infectious diseases are caused by parasites like bacteria and fungi. Contagious diseases may also be infections, passed directly from one person to another, w/o an intermediary like the flea, louse or mosquito. Bubonic plague is therefore infectious, but not contagious because it requires the flea vector; 158: cites FN favourable on hosp not doing sick
harm, as Pringle; 3: only at end of 1850s did the difficulties of hosp design begin to be widely addressed in Br and drawn to specialist attention. FN “at the time often identified as the pre-eminent specialist, wrong on germ theory. Uncritical on FBS


Stewart, Isabel M. and Anne L. Austin. A History of Nursing: From Ancient to Modern Times, A World View. 5th ed. New York: G.P. Putnam’s Sons 1962 [1920] RT31 S7 Lavinia L. Dock (refs to Sir Sidney); chap on Nightingale Revolution in Britain 98-121 and First Nightingale School in America, Bellevue, Women’s Visiting Committee in New York and report of Mrs Eliz Hobson’s visit, Gill Wylie, got him to go to UK; Hobson saw “so-called nurses, most of whom were vagrants or prisoners from the nearby workhouse who had been arrested for drunkenness, immorality and other misdemeanors. They slept on straw beds laid on the bathroom floor, terrorized the helpless sick, took fees, and were not to be trusted with medicines nor with food brought in by visitors.” Women decided they wanted a school of nursing on the Nightingale pattern, opposition by commissioners, warden and medical staff, but prominent citizens and some doctors supported,... he went to UK, did not see FN but got the letter (138); other schools Boston, New Haven, Philadelphia, Chicago, Detroit; 141: fame of Bellevue attracted many Cdns, who went back to pioneer, returning were Mary Agnes Snively who est nursing school at TGH, Edith Draper, Royal Victoria Hosp in Montreal, Louise Darche, Diana Kimber developed first school at City Hosp of New York, the twin of Bellevue and corrupt; Isabel Hampton, after organizing Illinois Tr School and nursing service at Cook Co Hosp Chicago went to Johns Hopkins Baltimore where est its new school; then succeeded on her marriage by Adelaide Nutting, a Cdn member of 1st Johns Hopkins class; Lystra Gretter worked in Detroit where
directed Farrand Tr School of Harper Hosp, founded 1883, in 1891 est first 8 hour day for student nurses, formulated the FN pledge; Agnes Deans, a Harper grad from Canada; 142: Linda Richards, America’s first tr nurse, in 1873 got diploma, not a N school but under Dr Susan Dimock learned in German hosps; Richards was night supt at Bellevue in 1873, took charge of school in Boston, spent time at St T and RIE, met FN; and had appointment at Kyoto, 5 years, “developing the first Nightingale school in the Orient in a small mission hospital” then director of Philadelphia Visiting Nurse Society, and first prof org of nurses; 158: Early Nursing Schools; 110 strong pro FN -- “Florence Nightingale’s Role in the Advancement of Knowledge,” typescript. 1954? Trevelyan Hi of Eng 653 says FN the hero of Cr War, and she and JSM the 2 principal pioneers of position of women today p242 on first nur school in Canada, Ottawa by Grey Nuns.

Stewart, Isabel M., Gelinas, Agnes, eds. A Century of Nursing: With Hints toward the Organization of a Training School and Florence Nightingale’s Historic Letter on the Bellevue School September 18 1876, etc. reproduced. Putnam 1950 (1876). no index 173- has handwritten version of letter to Gill Wylie; ref to Bishop Potter; chap on founding of Bellevue Tr School for Nurses May 1 1873, Schuyler; Charity Hosp on Blackwell’s Island; 79: Sieveking pub pamphlet 1849 on training of workhouse women as nurses for poor, urged visiting of workhouse wards by ladies; 1852 Lancet said St Pancras and Marylebone resolved to substitute paid and efficient nurses for paupers, but; 80: April 1854 Sieveking read paper to meeting of the English Epidemiological Soc, “Importance of Supplying the Labouring Classes with Nurses”; Dr Ogle of St George’s in London Medical Gazette was sec of committee of nursing of; sick poor; doc sent in signed by Jas Clark, Jas Paget, Wm Jenner, George Burrows London Lancet Apr 7 1866; (this is good, cites govt reports), 96: cites Acland’s preface to Lees: Nursing is a dept of the profession of medicine and surgery; it is the medical work of women, and a fit object for the employment of great practical ability, and for the exercise of high moral qualities. It furnishes an outlet for the tender power and skill of good women of almost every class, as supts of Hosps, or as ward sisters or nurses. !! 106: Bishop Potter Memorial House opened 1867, re Episcopal Hospital of Philadelphia as Prot sisterhoods; has some on France, Husson

Stika, Daniel L. When Lincoln Met Wisconsin’s Nightingale: Cordelia Harvey’s Campaign for civil War Soldier Care. Mustang OKLA: Tate Publishers 2009. 148 pp Harvey’s campaign for Union soldiers 83: cites Gill that FN concerned with same 87: “She could justifiably be compared to Florence Nightingale who was” extraordinary. Numerous citations to.
Chapter 9 Negotiating the Gentle-Man: Male Nursing and Class Conflict in the ‘High’ Victorian Period. Holly Furneaux 109-quotes FN NonN “The foremost icon of ‘New’ or reformed nursing, Florence Nightingale was invested in feminising nursing and making it a respectable profession for women to enter.” ... “The very differently circumstanced Creole nurse Mary Seacole similarly insisted in her 1857 memoir and travelogue that ‘only women know how to soothe and bless’ sickbeds.’ Seacole, a skilled family and vocationally-trained Jamaican 110: nurse whose offer to serve with Nightingale in the Crimea was famously rejected, now receives the attention she deserves for her remarkable independent venture to the Crimea, where from the base of her general store, eatery and sometime makeshift hospital, ‘The British Hotel’ she provided the soldiery with much-needed provisions, medical care and field nursing. In this context, Seacole’s efforts to greater effective nursing as feminine are qualified by her frequent acknowledgements of the tenderness of the men she saw caring for their fellow soldiers in appalling conditions, often without basic medical supplies....”

Stillé, Charles Janeway. [Stille,] History of the United States Sanitary Commission, Being the General Report of its Work during the War of the Rebellion, Philadelphia: J.B. Lippincott 1866. Online FN quoted; 31: UK San commission, 27: Parliamentary reports, professional men and “especially the in valuable testimony of Miss Nightingale, so that all the conditions of the problem were perfectly known and its solution could be arrived at with the exactness of a scientific demonstration. The description of the causes which had produced a mortality in the 28: British army so fearful, that had it continued at the rate which was maintained in January 1856, it would in the months have destroyed every man in it....” 30: Still the success of Miss Nightingale’s efforts in the hospitals at Scutari, and the astonishing results which were produced in the improvement of the health of the troops, by the adoption of the measures recommended and enforced by the Government Sanitary Commission which was sent out to the Crimea in April, 1855, led those to persevere who clearly saw the nature of the difficult task before them.” 31: powers unprecedented 61: letter of SH to FN begging her; so, credits both San Comm and FN

Stocks, Mary. *A Hundred Years of District Nursing*. London: Allen & Unwin 1960. good. in Baly biblio vol 13. 60 on *Lancet* opposition to ladies in nursing; in 1863 Liverpool tr School and Home for Nurses gave 1st annual report, subscriptions and donations totaled £4461; Miss Merryweather installed as lady supt, brought 4 nurses from N School, and a few probs started; Rathbone said approached Nightingale for help when cd not get recruits for her projected district nursing service; (Woodham-Smith 346) but no letter extant (Stocks 26); Rathbone went to Liv RI, chair Mr Gibbon agreed and Wm R provided the funds for a Nurses’ Home, 3 objects: nurses for RI, district or missionary nurses for the poor, nurses for private families; Wm R says submitted all plans to FN; com all men (29); Merryweather directed for 12 years, succeeded by Miss Baker, her trainee, when left for Westminster Hosp (32); Liverpool led way in district nursing; in 1864 E.M. Hunt appointed supt of district nurses; *Lancet* critical of lady nurses, and FN rambling and incoherent 22 April 187; Lees lectured; caused scandal re syphilis lectures, Burdett Coutts quit; St Katherine’s Hosp, royal foundation, patron, queen proposed to appoint a certain number of nurses from different insts as St Katherine’s Nurses; Lady Augusta Stanley’s inst, and 3 from Westminster; but FN opposed, where private nursing combined with district, district gets given up, as e.g. Westminster Hosp and its nurses’ Home and August Stanley; lots of fuss over getting the Queen’s Jubilee Fund, eventually it was much to FN’s liking, via Rathbone; 75 Scharlieb taught district nurses


Stone, M. “Florence Nightingale.” in C.C. Heyde and E. Seneta, eds. *Statisticians of the Centuries*. New York, Springer Publishing 2001 171-75. Has FB Smith, Hugh Small in biblio. 171: Calls her “FN” passionate statisticians. “Back in England in 1856, she rejected the role of heroine for that of a practical-minded empiricist, determined to exploit facts and figures in her various campaigns.” Farr, gives one chart. Cites Hugh Small on coxcomb, from FN Museum lecture! 173: Farr wrote FN (no source given) We want facts, objections to intermingling causation and stats. “Hugh Small’s book is almost a statistical whodunit, as it documents the story that comes from FN’s revolutionary stat demonstration, after six months of careful investigation, that the pr cause of the frightful mortality of the Cr soldiers in her charge was not their poor, half-starved condition on admission, but the filthy state of the hosp itself—a state of affairs hitherto regarded as inevitable in hospitals! Small makes the case that it was FN’s overwhelming sense of statistical guilt, when alas too late, she uncovered the truth with Wm Farr’s help--
that triggered the physical collapse that has puzzled her biographers.” Good grief.

Statistical high ground in 1871 Notes, 174: “Hew enthusiasm for Quetelet was poss only because Q made his excursions into pure theory a very small part of his writings.” withdrew offer of £2000; cites FB Smith pace the critic a manifest in her integrity. Lousy article!


Strachey, Lytton. “Florence Nightingale.” Eminent Victorians. London: Folio Society 1967 [1918]. mine: illustrated edition. New York: Weidenfeld & Nicolson 1988. [1880-1932] on Sugg, sarcastic 108: re Mill “One copy was sent to Mr Mill, who acknowledged it in an extremely polite letter. He felt himself obliged, however, to confess that he had not been altogether convinced by Miss Nightingale’s proof of the existence of God....” [rather unbalanced assessment] then on re the cri de coeur “Her fierce pen, shaking with intimate anger, depicts n biting sentences the fearful fate of an unmarried girl in a wealthy household. It is a cri de coeur; and then, as suddenly, she returns once more to instruct the artisans upon the nature of Omnipotent Righteousness.” her mind not good for “a coherent system of abstract philosophy. In spite of her respect for Law she was never at home with a generalization.” (108); 109: “Years after the discoveries of Pasteur and Lister, she laughed at what she called the ‘germ-fetish.’ There was no such thing as ‘infection’; she had never seen it, therefore it did not exist.” 110: “For
many years the Master of Balliol acted as her spiritual adviser.” 110: ackn Jowett’s use of her advice on Plato; 112: “too kind” quote


History of Nursing 1032: dates to mid 1800s. FN, born to a wealthy Br family, “called” to nursing “lady with the Lamp”, est the first professional nursing school in London in 1860. 1 para on. Also a para, longer, on Seacole

Strangford, Viscountess. Hospital Training for Ladies: an Appeal to the Hospital Boards in England. London: Harrison 1874. [Beaufort, E.A. afterwards Smythe E.A.] 17 pp. 4: year’s study, if no other benefit, widened sympathies; ref to FN’s life of Agnes Jones, appeal for successors to fill her place; to spread; 5: if every parish priest appealed to his flock; why so many women ailing in body and mind, nervous, depressed,...9: more on FN list (from Notes); ref to Frauen-vermin, [somewhat lightweight]

Street, Andrew. “Whatever happened to Florence Nightingale’s vision?” University of York. 6 January 2015. Prof, Centre for Health Economics; lecture, “Realising Florence Nightingale’s Vision”; patient outcomes


Strong, Rebecca. Education in Nursing: An Address given in London in 1895. Edinburgh: Douglas & Foulis 1927 priv pr


Sullivan, Eamonn RN. “Why Florence Nightingale is Still Relevant to Us Today.” 24-27. In Trant and Usher [head of [can cite] Performance and Quality at Guy’s and St Thomas’] good on FN, but includes Seacole. 24: “Florence Nightingale remains such a positive role model because of her leadership, and the way she achieved massive change. Her influence on healthcare was global.
Although she was popular in her time, she was also unpopular with a lot of people, but, despite the criticism, she always remained focused on the essence of care. Her objective was better patient care, and building an education system that would achieve this. Her discipline and organisational skills mean that she still epitomises the nurse leader who coordinates the hospital and keeps everything going. I find her inspirational for this.

26: first encountered FN when visited FN Museum. “I was also impressed by Mary Seacole. She had a very different role in the Crimea to Nightingale, and I believe she had even greater challenges because she was not white. For Mary Seacole to achieve what she achieved back in those days, as Nightingale did, is amazing.” [but not in nursing!]; went to St T in 1994; mil nurse in Iraq and Afghanistan, her experience in the Cr really rings true for me. “She had a strategic vision that other people simply did not have, and that so many women at that time were not allowed to have. She was light years ahead. Loot at what she achieved at the field hospital.” primitive coditons. 27: “even though we think of the Crimea as being brutal and awful, the standard of care that the soldiers recd in the Crimea was better than ever before and there are many similarities to modern mil healthcare.” Iraq and Afghan, “again literally light years ahead of the best civilian trauma centres in the western world. As Nightingale took with her the experiences of war to better civilian care, modern military nurses are doing exactly the same today. The lessons that she learned in the Crimean War, she brought to St Thomas’ hospital, for example, in the design of the wards in the south Wing - the Nightingale wards. They may be old fashioned today, but, at the time, they were world class. Their essence - the concept of light and air, good sight lines so that nurses can see their patients, the distance between the beds - so many of the things Nightingale introduced to nursing and care still hold.”


47 extant letters, letters marked Burn were destroyed.

8: Moore founded 8 additional houses in England: Chelsea 1845; Bristol 1846; Brighton 1852' St Elizabeth’s Hospital for Incurables, Gt Ormond St 1856 later called Hospital of St John and St Elizabeth, located in St John’s Wood (the first Catholic hosp since Ref); Wigton 1857; Abidon 1859; Gravesend 1860; Clifford 1870; Eltham school 1874; others came from Ireland;

8: Gonzaga was superior; however manning sought to replace them with Sisters of Charity from France, in 1865

9: re conversion, sacraments

16: FN said the “most religious mind I ever knew” and the gutter bit 45783; 17: Moore to FN like McAuley to her; 18: Mercy more than charity--adds forgiveness of even the worst ingratitude; difficult to forgive for FN; devotional authors
they visited sick poor at home and at Guy’s and St T
17: no sacraments [but FN did take sacraments]; 18: 1862 Moore
sent FN her Life of McAuley and copies of some of her letters;
22: Moore on visiting sick poor at home, giving money, but not
nursing them; 23: Moore had daily communion; 24: similarity not
on doctrine but fundamental imperative of Christian faith, active
wholehearted work for good of one’s neighbour, fidelity to God’s
will and dependent for its efficacy not on human exertion but on
indwelling presence of God; 24: both believed in perfection of
ordinary actions, purity of heart; seeking first the kingdom of
God, both “to do God’s will in this world, selflessly and
truthfully, without regard to their own personal loss or
benefit.” 27: Moore educated until 9 as a Protestant and was a
bigot; 30: Moore stuffed pillows, superintended the washing of
soiled laundry; managed some or all of the linen stores, managed
the extra diet kitchen, charge of FN’s stores;
32: Bermondsey annals have 80 pages in Moore’s hand, in third
person, recording experienced in Turkey and the Crimea; including
transcriptions of letters they wrote home to one another; FN used
Moore’s records in reports; on cotton shirts handed out; beef
tea; FN 6 years her junior; 33: Moore occasionally visited her in
London; 35: loaned her spiritual books; Moore asked for Soyer’s
recipes; 37: Catherine of Siena to reform the church and the
papacy, Catherine of Genoa to reform medical care of the sick
poor, esp the plague-stricken and lepers, contrary to the
attitudes and current practices of hosp workers; Teresa of Avila
to restore Carmelite convents and monasteries to contemplative
prayer and strict simplicity after centuries of relaxation; FN
appreciated C of Genoa for being directress of the hosp; 39:
Moore leant her Frederick Faber’s Spiritual Conferences and a bio
of John Olier; 41: accusation of Catholic nuns transferring their
allegiance from pope to a Prot lady, and then the pope, cardinal
joke; 41: retreat of community 7 August 1856; regrets FN not in
ture church; 42: FN sent gifts, and got mother to; in 1864 6
bottles of port wine for a sick sister, brandy, and books and
food for St Eliz Hosp; FN sent money for Eltham;

Sullivan, Mary C. “Catherine McAuley (1778-1841) and the Mission
of Mercy in Britain.” Ushaw Lecture, University of Durham, Centre
for Catholic Studies, 17 October 2013. 16 pp typescript.
9: digression: “Catherine McAuley and the Sisters of Mercy cannot
be said to have founded or instituted in Ireland a pioneering
system of ‘careful nursing’ as the forerunner of what is now
described as a ‘philosophy and professional practice model’ of
modern nursing.” misreads and exaggerates what she actually said
about the care of the sick. Used “careful” “not designating a
system of a particular method of nursing, but simply using an
ordinary adjective” as in teaching, conversing or sheltering. Her
“motives in visiting and counseling the sick were deliberately
and specifically Christian,” neither she nor any Sisters of Mercy
in Ireland or England were or aspired to be trained nurses” until after 1857 opening in Cork of first Mercy hosp in Ireland, and first in England in 1856. 10: their work was “untrained care, though increasingly experienced and knowledgeable.” “In view of the present existence of misleading literature on the history of nursing.


sullivamb Friendship contd
49: visit of Bishop Grant to Bermondsey to hear sisters’ confessions, then tells Moore need of nuns to go to sick and wounded soldiers; by 16 Oct passports for five secured and left by train 17 October, Grant told them to take warm clothing; 50: Grant visited in evening, nuns packed; 5 set out after mass and breakfast: Gonzaga Barrie, Mary de Chantal Hudden, Stanislaus Jones, Anastasia Kelly and Moore (age 40), the other average 29; stayed at Hotel Clarendon; brought a letter from Grant with copy of agreement he worked out with govt, to SH; 52: Bermondsey nuns had visited Sisters of Charity at St Roch’s Hosp and on their advice purchased cases of surgical instruments; Norwood sisters arrived 23 October, recruited by Grant; 52: 5 Norwood Sisters of the Faithful Virgin, ran orphanage in Norwood, Southwark; left by train 24 October for Lyon, then steamboat to Avignon, rail to Marseilles; 53: arrival in Constantinople, Norwood nuns stay on with Sisters of Charity at Galata to recover; Mercy sisters went to Scutari with FN; Moore’s annals on arrival: “It is scarcely possible to describe the extreme desolation of these apartments. The room given to our sisters had no furniture except an old chair without a back, which served them for a table. The windows completely broken admitted the piercing air, for it was then bitterly cold and there was no means of procuring a fire. The commandant, Major Sillery, most kindly sent in mattrasses and such bedding as could be spared, and the soldiers gave part of their rations, no provision having been laid in for this unforeseen addition....

A can of warm water therefore from the barrack kitchen was procured into which some tea was put and a small cup full, without milk or sugar was measured into copper basins for each; this with a scanty portion of bread was their supper and this kind of privation, which they felt the more on account of their feverish state after such a trying journey, continued for many months x x The purveyors were unwilling to place the hospital stores and clothing at Miss Nightingale’s disposal. However, before the end of the first week she succeeded in obtaining leave to send nurses to the General Hospital, a building similar in design to the Barrack, the number of patients being above a thousand, the distance was about a mile over a bleak rocky hill, blest with wild dogs. Miss Nightingale appointed to this charge
Sister M Gonzaga and Sister M Anastasia and a party of nurses. Rev Mother with Sister M Stanislaus and Sister M de Chantal had work in some of the wards of the Barrack Hosp when suddenly the news of the fatal engagement at Inkermann came, and this was quickly followed by crowds of wounded men in the worst stages of destitution on the 9th November and the succeeding days. The sisters were now almost overworked preparing the wards and beds and, according as the wounded arrived, helping them, dressing their wounds and comforting them. The want of changes of linen being one of the greatest miseries, Miss Nightingale undertook to have the soldiers’ shirts washed and mended and she purchased a supply of shirts and flannels, the men having all lost their kits on the field. They had also been without the means of washing themselves for weeks and were therefore in a most sad state, so that those employed for them in any way were covered with vermin. Miss N gave the charge of the linen and her own store room to our Rev Mother, who also went round the nights to the wards and corridors very soon after she appointed her to give out the extra diets in a room which she fitted up for a kitchen. X x x...

Their food was so bad and so sparing that they were often faint from hunger—the bread was sour and often mouldy—the meat was of the worst description and divided in a manner only fit for animals, the want of water was a suffering greater than can be expressed: during the first weeks (as before noticed) they were parched with thirst.... Even for washing so little water was to be had and so destitute were they of all conveniences that they were forced to wash in the same water and in the same basin to wash also their linen.

Sullivanc Friendship cont
55: Barrie letter to Bermondsey from General Hosp, dressing gangrene wound;
56: re Bridgeman; “Nor is it possible here to described in detail the reasons for Florence Nightingale’s refusal to welcome them to Scutari....”[no recognition of numbers, or doctors, or ratio];
57: FN asks for more from Bermondsey; 58: Mary Helen Ellis, Mary Martha Beste and Mary Joseph Hawkins; set off for Balaclava with Jones, Ellis and Beste
60: annals record chaplain’s written refusal to hear confessions of Bermondsey sisters working with FN because he disapproved of their coming tot he Crimean under N’s authority, would not connect himself with the transaction in any way; Duffy, a Jesuit censured sisters and wrote Catholic chaplain O’dwyer of displeasure; 62: FN did not burden Moore with feelings about Bridgeman’s attitudes and decisions, but did tell Lefroy; 67: F to Moore on pigsty left, an exaggeration; 69: ref to rats at Scutari; 70: Moore annals on Bridgeman and FN; Br at General Hosp at Balaclava; rats worse there; 71: bishop ordered Moore to obey doctor’s orders to return;
80: Mai Smith wrote Moore asking her to provide a statement to
Mary Stanley about conduct of Charlotte Salisbury in Scutari, FN had dismissed; Salisbury had with Stanley’s supported attempted to bring a libel suit against FN, when failed Stanley kept issue alive; 82: Moore evidently did write; 83: Bermondsey archives have undated letter of Stanley, that wanted her fully exposed if guilty, asks if Salisbury expressed desire of becoming a Catholic 84: sultan’s gift, sisters had given their services, given £10 individually; £80 to Bermondsey, given to St Eliz, and £150 to Kinsale, Liverpool Charleville, Cork, Dublin, Carlow and Chelsea

Summers, Anne. “The Mysterious Demise of Sarah Gamp: The Domiciliary Nurse and her Detractors, c. 1830-1860.” Victorian Studies 32,3 (1989): 365-86. Seen. 366: This is in part due to the domination of the literature on the subject by Florence Nightingale biography. C and hagiography.... More recent studies have pointed out that Nightingale’s achievements were neither as rapid nor as unqualified as has sometimes been suggested. Nursing before FN. Online


Summers, Anne. Angels and Citizens: British Women as Military Nurses, 1854-1914. London: Routledge & Kegan Paul 1988. 2nd ed. Revised. Newbury, Berks: Threshold Press 2000 (but revisions only to correct small errors) was done as Open Univ doct thesis, supervisor Charles Webster! sources re FN include only BL and LMA, calls women by first name. F.B. Smith in biblio; “Serious historians will continue to rely on E.T. Cook.... and the most recent study, F.B. Smith....will prove valuable if read in conjunction with it.” (end note 1 on 302).
20: St John’s House Training Institution for Nurses founded by a high church group, played significant role in Crimean War; originally to provide home nursing for the sick, but saw as potential way of improvement of hospital nursing; “spiritual rather than medical improvement was the goal; it was not just a question of replacing drunks and drabs with competent cooks, cleaners and poulticers, but steering patients towards salvation and improving the moral tone of the wards.”
21: “Women of means were automatically assumed to be more spiritually endowed than working women, and were also deemed qualified to instruct the latter in the proper duties of a hospital and private nurse, without themselves having to undergo any practical probation.
It is worth asking – as Florence Nightingale was to ask, in exasperation, many times in the 1850s and 1860s why a group of women of independent income and religious inclination, but without formal training of any kind, should have been considered
competent to perform these functions.”
Summers condemns FN recommending her w/o her consent! (83); 72: “She seems to have taken five nurses to Netley” cites AMD in end note, not FN source; 22: encouraged JSS to gain experience at Guy's and Westminster while on waiting list (JSS letter to Mary Stanley cited); quite hostile, source for Dingwall re Jane Shaw Stewart error on Harley St. “Invalid Gentlewomen’s Institute” 85: on struggles JSS and Wilbraham; 92: bad nursing, Deeble and 6 other nurses completed N training course at St T, installed November 1869, in 1st month one sister nearly poisoned a patient by dosing him with liniment instead of cod liver oil; 46: “The bulk of the female nursing work of the Crimean War was, therefore, done outside Florence Nightingale’s jurisdiction, and without reference to her ideas of proper professional practice.”
41: Fanny Taylor rejected the uniform of the nurses, only wore the badge of Koulali;
43: Stanley’s group had 10 ladies, none with experience of paid employment, convinced motive of reinforcing Catholic presence; Fanny Taylor a clergy daughter with experience of visiting; 46: Kate Anderson had visited workhouses and slum, nursed cholera patients and learned invalid cookery; nursed at naval hosp at Therapia, Scutari and Koulali; doctors at Koulali welcomed them; 46: FN’s arrs undermined as “supt of the female nursing est in the English general mil hosps in Turkey”; bulk of female nursing work in Cr War done outside FN’s jurisdiction;

Summers, Anne. “Yes, Florence Nightingale was a Meddler--But only because she cared.” The Guardian 11 September 2007. Response to “unpublished letters” Angel of mercy or power-crazed of Sept 3, former curator, equal proportions of angel of mercy and power-crazed meddler, apposite, “it was the caring mission which itself produced the impulse to interfere.” Her history “showed that improvements in the Crimean hospitals’ mortality rates could not be ascribed to the introduction of Nightingale’s nurses. But it doesn’t follow that ‘it was not until 1857 that she realised the conditions within the hospitals themselves had caused such a huge number of deaths.’ She knew that nursing was inseparable from sanitation. One of her first requisitions was for 300 scrubbing brushes. The members of the government’s army sanitary commission recd her full support and became her allies after the war, when she placed her intellectual labour (still unpaid) at the service of military and civilian medical reforms.....”

ftnote: One of the more interesting candidates for a nursing post
to be turned down by Florence Nightingale and her helpers was Mrs Mary Seacole....daughter of a Scottish soldier and a black boardinghouse keeper and herbal ‘doctress.’” deeply disappointed “she raised her own funds and set up in the Crimea as cantiniere and dispenser of folk remedies. Her commercial services and her kindness to the wounded were greatly appreciated. We may speculate that she was rejected in London because she was neither a hospital nurse nor a domestic servant--but because of her colour she was not, despite her respectability, perceived as a ‘lady.’ ”Mother’ Seacole appears not to have handed down her medical skills and recipes.” cites Ziggi


Summersa contd
167: Balkan wars between Serbia Turkey and Russia; did not expect Br mil intervention, but St John’s order guaranteed money and WO encouraged, ladies com formed; 168: in 1878 Russia appeared to be about to trample on Br interest in Const; 169: launched St John’s Ambulance Association, Strangford went to Cairo with Herbert Sieveking and staff of 5 English nurses, war over by time arrived but used;
on Subsidiary Notes first 3 chapters taken from Shaw Stewart, in 45774 ff21-et seq, and 3 on French hosp construction and mil nursing based closed on her writings; Cook’s lists as FN, but WS identifies as JSS,
73: JSS “a deeply religious woman--her specific commitment to the Church of England was one which Florence Nightingale did not share”
310 endnote 33. “The first three chapters of Subsidiary Notes are taken word for word from Shaw Stewart’s lengthy ‘Confidential Memorandum’ BL Add Mss 45774 ff. 21 et seq., 16.3.57; three other chapters of French hospital construction and military nursing are based closely on her writings in the same MS volume” [but these seem to be from 1859] “The sections on experience in Scutari in the published work were added by Nightingale;
76: FN preferred “a life of political intrigue, pulling the strings of commissions, to the hurly-burly of a hospital ward.”
Apprently JSS met FN at Harley St., as she recalled in letter 26 May 1859

Susan Usher, co-ed, is Montreal

Susman, M.P. “Lucy Osburn and her Five Nightingale Nurses.”
Sutherland, Gillian. review of Bostridge TLS Sept 12 2008.

Sutherland, John (Calif Inst Tech), review of Jules Kosky, Mutual Friends: Charles Dickens and Great Ormond Street Children’s Hospital. Medical History 35 (1991):467 has crack at FN; book about Charles West, founder of Great Ormond St. West convinced children’s hosp necessary both to treat ch and as research centre for children’s diseases, but opposition, resistance to the idea of a children-only inst. “Florence Nightingale objected on the grounds that children made excessive demands on nursing staff.”


Svitlik, Barbara Anne. Nursing Education in the United States and England between 1850-1920: A Critical Analysis of the Influence of Florence Nightingale. 1998. 489 pp. Dissertation. PhD City University of New York. 1998. chair of examining com Samuel Bloom, exec officer Robert Alford, profs Lindsey Churchill and Charles Winick supervisory com; adviser Bloom, Abstract, founder FN, American nursing, IV: “Today American nurses are demonstrating their enlarging capacity and resolve to shape the direction of health care in this country--motivated in large measure by the ideals and philosophy they inherited from the founder of modern nursing, Florence Nightingale. V: Eliot Freidson, attainment of autonomy essential step for an occ wishing to achieve full professional status. but historically, preserve for major decisions about the health care became exclusively vested in the medical community commencing with the advent of sc med. Physicians alone were granted unprecedented public confidence to control the medical workplace in the belief that they wd be able to solve all the health needs of the future....” vi: thesis draws heavily on FN’s motives and decisions in... modern nursing through the educ system she propagated. Thanks God.; Chapter II Significant Historical Antecedents to Nightingale’s System in England 31-44 Chapter III The Nightingale System 89-102; Chapter IV Case Study Nightingale in the Crimean War 103-29; Chapter V Theoretical underpinnings of n’s Plan 129-170; Chapter VI Sc medicine dominates over Nightingale’s intentions 171-97; includes “Nightingale’s Conflict with sc medicine” and “Significance of Nightingale’s opposition
to the germ theory” Chapter VII Nightingale’s Apprentice Model of Education Prevails References 458- 198.... lots of mss sources, and good print sources,, but entirely missed germ theory change 202: FN inability to directly supervise how students taught, an enormous disadvantage, but did.... 142: influence of Nightingale’s spiritual beliefs on reform in health care delivery; hosp as microcosm of society; following laws; 160: env theory 186: Nightingales ’usual educ for Vic woman, but “it is not recorded that she had any basic sc educ, leading some, such as Palmer, to infer that ‘she rejected sc knowledge’ (1983b 232).” 187: “But overarching linflences of a deeper magnitude caused Nightingale to reject the germ theory of inflection.” Sympathetic to the anticontagionists. vs single causation; abandonment of hygienic measures. 187: “She expressed fear that the germ theory 198: propagating a false sense of security because disinfectants and antiseptics were being advocated in lieu of sanitary measures and hygiene. Nightingale once... [cites NonN!], carelessness of surgeons in employing disinfectants; 189: “In pre-Listerian days she insisted that absolute cleanliness was essential in preventing infection, yet as an anticontagionist she fearlessly worked with smallpox infected patients...” cites Goldie that she later accepted Lister’s antiseptic technology 190: It is entirely open to question what her motive were in rejecting the germ theory.” (Stewart and Austin 1981, p 119) Sutherland remained opposed.... 191 compares carelessness in Civil War, “Yet, in 1854, while treating the wounded in Scutari during the Cr War, Nightingale’s efforts in implementing sanitary measures succeed in sharply reducing morbidity and mortality among the military patients.” NO 193: Significance of Nightingale’s opposition to the germ theory. uses WS, but has Cook in Refs


187: Rosalind Paget ref to FN’s vision of nursing not destined for all time, 1913;; cited FN’s idea of district nurse as health missioner, but soothing pillow
188: Briggs report perceived FN role as creation and perpetuation of ministering angel image, with no mention of other aspects, mission for sanitising society;


Sweetman, John. Raglan: From the Peninsula to the Crimea. Arms and Armour 1993, some discussion of FN re medical services. FN reported to SH who complained. Et tu Sidney; and med services contd to create problems for Raglan; Paulet reported satisfaction to Raglan, praised FN and staff, and thought significant improvement, and duke of Cambridge enthused also, but Paulet drew attention to hosp transport;
31 December FN penned a devastating condemnation of the med arrs to SH, pricked the balloon of local complacency; total lack of order at Scutari, number of vacant beds not known; hygiene a foreign concept; vermin; also problems at Balaclava, Airey;


Symonds, Richard. “Florence Nightingale (1839-1910) [sic]. Far Above Rubies: The Women Uncommemorated by the Church of England. Leominster: Fowler Wright Books 1993:237-45. [argues FN claim most difficult to assess because of her own [confessional] statements. Queries incl of Josephine Butler, only post Prot Ref Br woman commemorated in ASB. E Fry and FN “were included in the draft calendar which was circulated by the Liturgical Commission in 1976. The records do not explain why their names disappeared later.”: 242: “Her mother found Anglicanism more suitable to her social station; Florence was thus brought up in the Church of England” [after mention of Unitarian background] no mention of Poor Law reform, describes as a mystic but not a contemplative.


Szenajch, Wladyszawa. Florencza Nightingale. Warsaw: Lekarisi
Takahashi, Aya (assoc prof International Student Centre, Hokkaido Univ). The Development of the Japanese Nursing Profession: Adopting and Adapting Western Influences. London: Routledge Curzon 2004. Chapter 2 “‘Nightingale-ism’ in Japan” 36-53. does not add much. more on the culture around and education. 5: “Modern nursing was introduced and developed as part of the westernization of medicine. The ‘Nightingale System’ for training nurses was introduced by Japanese doctors who had studied medicine in Europe and the U.S., and by Occidental missionaries who established pioneer nursing schools in the 1880s and 1890s.” [yes] by turn of cen nursing profession recognized, patriotic and efficient, became models for westerners; 2: in 1880s and early 1890s as 5 nursing schools est on Nightingale System, two by Presbyterian Church and Protestant Episcopal Church, others by med doctor who had studied at St T, and Jap RC and precursors of Imperial Univ of Tokyo Hosp; , 2-3 year courses; grad Suzuki Masa, who first founded a domiciliary nursing group, Ozeki Chika pub nursing text; 26: 2 Xn schools Kyoto Nursing School founded 1886 (Richards), and Nursing School of Sakurai Women’s College founded also (by Agnes Vetch from Edinb RI), the most successful in introducing; FN as a great woman with female virtue. from 1870s on.

Takahashia contd
36: to teach ethics based on Japanese Confucianism. “Florence Nightingale was a useful female ‘sage’ and girls were expected to absorb the Confucian-interpreted moral qualities of Nightingale.” numerous bios on her. a model. in books on Great Western Women. errors re Red Cross, big in Japan and her role not known. July 14 1910 FN died (date?) 1 year after Hagiwara Take, a distinguished Red Cross matron, had tried to visit her, when in London for International Council of Nurses meeting. 27 September 1910 a dignified memorial ceremony for FN held by Red Cross Society, conducted by a Shinto priest, and Nightingale memorial announced. JRCS did much of training. it inspired by European Red Cross and developed under aegis of royal family; Japan signed Geneva conv in 1866. Japanese Red Cross Society new name; had a tr school in 1890s. cites only sec sources, but good analysis. 26: 2 Christian nursing schools, Kyoto Nursing School founded 1886 and Nursing School attached to Sakurai Women’s College founded 1886 the most
successful in introducing the Nightingale system by employing US
and Br nurses trained as Nightingales. However both closed in
1900s for financial difficulties; but some Japanese historians of
nursing consider did not take hold as doctors too powerful to
allow nurses to take any control of nursing resp or training; in
fact the other non-Xn schools run exclusively by medical men; 27:
domiciliary nursing; 28: no Xn culture as UK and charitable
nursing societies quickly shifted to commercial format; 19:
western medicine, and German medicine preferred in 1870; got
doctors from Prussia; 62: cites Baly on security issues, to
prevent nurses from being “molested” hosps lawless places, nurses
molested on stairs, but this not so important in Japan; Monica
Baly “The Nightingale Reforms and Hospital Architecture.”
Bulletin of the History of Nursing. 1986. no. 11 (p4);

Tallberg, Marianne. RN MA University of Helsinki. Nurse Education
and Nursing Literature Before Florence Nightingale. typescript.
RCN. short, unpaged. 11 books 1784-1838 analyzed. gives biblio of
Eur sources

Lytton Strachey and W-S and FB Smith “a scholarly study of
Florence Nightingale’s political influence”

Tarbox, Mary P. “A Fierce Tenderness: Florence Nightingale
Encounters with the Sisters of Mercy.” in VL Bullough,... New

Tarbox, Mount Mercy College, Cedar Rapids Iowa. The Influence of

Tarrant, W.G. Florence Nightingale as a Religious Thinker.
[religion]

Taylor, Jeremy. The Architect and the Pavilion Hospital: Dialogue
and Design Creativity in England 1850-1914. London: Leicester
University Press 1997. Large sections on FN.
864:53-54 review of FN’s Notes on N;
90: hosp comp for new Manchester Royal Inf, sought a lot of
outside adversaries, incl Lister; Waterhouse’s tall new UCH on
Gower St; 18: Scott modelled Leeds on FN’s ideal of pavilion,
Lariboisière (1846-54 by MP Gauthier) but it had artificial vent;
36: Derby rebuilding old theatre in 1889 to “almost perfect
asepsicism” walls line with marble and curved skirting lush
floor, varnished surfaces; all surfaces flush, no projections,
angles rounded “to have a room completely impervious, dustfree’
47: seems to imply Godwin wrote the 1858 articles, using FN and
Roberton, refs to Blackburn 1857 and Ashton 1859, a “shared victory with the sanitarians generally, and John Roberton and Florence Nightingale in particular” her papers at Liverpool immediately promoted by God, and then 1863 esp. 49: “For architects, Notes represented a design guide that was clearly written, unambiguous in its instructions, and suitably illustrated with plans, details and diagrams.” sections. “An assured guide for the 1860s” 52: nice pic of Derbyshire RI c1896 in newly complete pav wards. The windows double hung, walls of Keene’s cement painted and varnished, but terrazzo flooring after visit to German hosps;

Chap 1 4: request of M Forester to FN 11 October 1854
5: 5 sisters of Mercy already in Paris; FN applied to Fry’s establishment
by 21 Oct 10 Sisters of Mercy, 8 Sellons, 6 St John’s House, 3 by M Forester, 11 from applicants, for total of 38
6: at Hotel des Bains, Boulogne
7: CHB sent SH a summons; 9 ladies, 22 paid nurses, 15 Sisters of Mercy under Kinsale
7: assembled at Belgrave Sq for address by SH, EH got to sign agreement
10: departure, EH brought gifts
12: left Marseilles 7 December in Egyptus, to Therapia
53: description of tough life
Chap 5 Mary Stanley asked for staff at Koulali; Taylor and Mrs Smythe; 500 patients, 5 doctors
62: Koulali 5 miles from Scutari; easy to land, wards like separate bldgs
64: 2 hosps, upper General Hosp 3 storeys, corridors around and wards off, like Scutari, for 250 men, sick, not wounded

118: Convalescent hospitals. Begins with quote of FN, in 1863 when FN said not a day longer, only 1 “halfway house” in London, the Metropolitan Convalescent Inst, founded 1841, at Waltham on Thames, and bad design, praiseworthy but not to be followed; ideally a string of cottages; 119: debate settled by Bristowe and Holmes, showed health of hosps influenced by conditions belonging to the hosps themselves, not by their siting, but a caveat, a “country dept”;
122: Herbert Memorial Convalescent Home finally built at Bournemouth 1865-67, design by TH Wyatt, a single gothic, 2-
storey stone bldg, mullioned windows, clock, spire; “Florence Nightingale’s scheme for Wiltshire provided an architectural form that clearly anticipated the coming surge of interest in local cottage hospitals...Its domestic character, small units and limited (20-bed) capacity was to be echoed in designs all over the country--designs that were to be published in editions of Burdett’s Cottage Hospitals (from 1877 on). FN Notes 112-13, working plans by Mr Thomas of WO. FN responded to committee with “A design for Convalescent Hospital arranged as Cottages” Plan ? in Notts, 4 single-storey detached cottages, 2 for convs, male and female, one for staff, one for kitchen and dining rooms (male and female), linked by covered ways, like a home, but wd admit of extension by addition of parts, built 1865-67 at Bournemouth.

130: Leeds General Infirmary 1863-68 Gilbert Scott placed OP Dept at ground level, below ward access circ level; dispensary a single storey bldg in court Builder 1864:115-17, 151-3;

130: St Thomas’ the most prestigious of this first generation of pavilion hospitals, St T 1868-71; no contact poss with main hosp and its corridor circ system Builder 1871 60, 486-87

153: in 1870s key contributor to asylum design C.H. Howell, R.J. Griffiths and John Giles (with Biven or Gough), by 1890s Giles, Giles, Gough and Trollope dominant. Won competitions. FN 173-77;

176: FN adamant that wash house never shd be part of main bldgs, shd be detached and as far as poss away, fear of foul air, closely followed with new pav hosps, e.g. Derby Royal Inf, Manchester Hosp for Sick Ch, Norwich, Preston or Wigan; 170: at Leeds Scott’s new Gen Inf of 1863-68 failed to provide suitable accomm for nurses; by 1879 a separate nurses’ home being built, linked by covered way; Royal Berkshire Hospital Reading (1836-39 by Henry Briant); Henry Saxon Snell arch for 2 nurses’ residences: St M at Notting Hill (1879-81) and for different arch context at Chelsea’s Tite St.

170: Henry Currey at St T provided a tr inst for 40 prob nurses sponsored by FN Fund, built with matron’s residence as a separate unit; probs had own rooms, arranged around a square galleried space, day and dining rooms at ground floor podium level;

170: Snell architect for 2 nurses’ residences, 1884 and 1885, St Marylebone at Notting Hill (1879-81) and Chelsea’s Tite St. for Hosp for Children, The Builder 1885 I 912;

56: Roberton cited Bordeaux Hospital in paper to Manchester Stat Soc in 1856, quoted in Builder 20 September 1856 by Godwin; good model of, every ward a separate hosp; 57: “The main criticism by Florence Nightingale of the Lariboisière design centred on the high mortality rate. This was, however, caused by the artificial heating and ventilation system imposed later on to an architectural form designed primarily on almost ideally for natural ventilation. The result was a disastrous promotion of airborne cross-infection.”

57: first civil hosp on pav pr in England was Blackburn Inf, 1857 completion (arch James Turnbull on principles of Roberton and
workhouse infirmaries; 67: model for separate workh inf est by Worthington’s Chorlton 186-66, almost exactly contemporary with Gen Inf Leeds by Scott, infl by George Greaves, vice-pres of Manchester Stat Society, where from 1856 Roberton presenting papers; 68 (Ayers 81) Worthington ack debt to Roberton and FN; 69: pic of Holborn Union Workhouse Inf, Highgate, Snell design 1879 for 620 bed inst; Manchester Workhouse Inf at Crumpsall had architects Mills and Murgatroyd, 1876, 3 double pavilions for men, central admin, and 4 double pavilions for women; 72: by 1904 these new hosps accounted for 44% of Poor Law bldg, in some London and provinces PL inf became in effect the general hosps; St Pancras Infirmary 1869 Giles and Biven (is that non-workhouse?) 83: after HH at Woolwich, Cambridge Military Hospital, Aldershot, provided the other large army pav hosp of late 19th cen, completed 1879 to replace a former hut hosp; 24-bed wards, capacity of 270; 2 2-storey pavilions, shows improvement over Herbert plan, sanitary towers now completely separated from ward space by cross-ventilated lobbies; 70: Snell’s 776 bed St Luke’s Wkh jettisoned N plan for bed spacing and laying, altho maintaining cross-vent; he had used an 8 bed arr at 620 bed Holborn Union Inf 1879; reverted to standard pav plan at his finest workhouse inf design, that for the St Marylebone Poor Law Union, North Kensington (1879-81); Snell’s St George’s Union Workh contained largest number of patients of any inf hosp in metropolis, St Luke’s almost as large;

Taylor, Carol, Lillis, Carol and LeMone, Priscilla. Fundamentals of Nursing: The Art and Science of Nursing Care. 2nd ed. Philadelphia PA: Lippincott-Raven 1993 [1989]. 1385 pp FN index 5-6, 61, 50. Has historical intro, brief. 6: “Florence Nightingale’s contributions are numerous and far-reaching: recognizing that nutrition is an important part of nursing care; instituting occupational and recreational therapy for sick people; identifying personal needs of the client and the role of the nurse in meeting those needs; establishing standards for hospital management; establishing a respected occupation for women, establishing nursing education; recognizing the two components of nursing—health and illness; believing that nursing is separate and distinct from medicine, stressing the need for continuing education for nursing.” Florence Nightingale elevated the status of nursing to a respected occupation, improved the quality of nursing care and founded modern nursing education.” (Citing Dolan, Fitzpatrick and Hermann 1983), so acknowledges FN, but chapters do not; intro, promoting wellness in health and illness; values and ethics; holistic care; assessing, vital signs, safety, asepsis, hygiene, activity, rest and sleep,
comfort, nutrition, urinary, bowels, fluids; spirituality; medication, wounds, peri-op.


The Nightingale 6,20 (23 May 1891) New York, has article on male nurses

The Leaf and the Lamp. Ottawa Canadian Nurses’ Association 1968. 105 pp. Section on Quebec cholera esp 1832, Sisters of Charity of Providence trained at H-D in Montreal. Typhus epidemic 1847 came with Irish; Sisters of Charity, Grey Nuns. 1874 first influence of FN in NA, Mt1 Gen tried to start a nurses’ tr school, hoped mt raise standards but conds at the hosp so difficult that it was not until 1890 that the school actually began, under G.E. Nora Livingston, grad of NY Hosp; 4 yrs later Royal Vic Hosp and tr school put under an Ontario nurse, trained at Bellevue, Edith A Draper;

The Practitioner: A Journal of Therapeutics and Public Health. 1878, ed T. Lauder Brunton vol. XXI July to December; Netten Radcliffe 2 lectures 141: “sacred from the memory of Florence Nightingale.” cliff, tombstones 146: The Times, FN appeared on the scene “and, like the glorious angel who, descending the gates of Dis, let up the murky air with a splendid radiance and “


thesis: Chadwick 1890, Weekly Dispatch, I cannot tell you how strongly I believe in soap and water as a preventive of epidemics, endn4 Edwards, the Annals of hygiene, 1890, p 493; no

Thomas, Sandra P. “The View from Scutari: A Look at Contemporary Nursing.” Nursing Forum 28,2 (April-June 1993):19-24. US not all American have health insurance... wd “heartily approve of our current efforts toward a national health plan.” worked on extending to paupers. Money wd be better spent in maintaining health in infancy and childhood than on hosps, RN PhD


Thompson, John D. and Grace Goldin. The Hospital: A Social and Architectural History. New Haven: Yale University Press 1975. Good bk, lots on FN, but relies of W.S., Strachey and Seymer Sel Wr, and wrong on germ theory; John Snow 149: “the smallpox may occur over a cesspool as an oak may spring up through a manure heap, but the smallpox would never appear over the cesspool in the absence of its specific poison, nor the oak rise from its manure heap in the absence of the acorn which seeded it.” cited from B.W. Richardson, Snow on Cholera 1936; cites Pringle Observations on the Nature and Diseases of the Army: “The sick should not be sent to one common hospital x x Barns, granaries and the like places will allow the steams to disperse x x It is common to look out for close and warm houses, and therefore to prefer a peasant’s house to his barn, but experience has convinced us that much more than warmth is requisite.” Change of Hotel-Dieu, new hosp after old so bad. Tenon. 155: “The hospital at Scutari was Florence Nightingale’s Hotel-Dieu. Its effect upon her is comparable to that of the Paris hospital upon Tenon.” Netley a corridor hosp like Bamberg, FN’s comments on “clarity and eloquence” (156); 159: “The Nightingale ward may be called an edifice built up out of pure air.” used Airs, Waters and Places.” but 159: “Florence Nightingale was a thorough going miasmatist for whom germs did not exist.” body exhales “organic matter’ ready made to enter into the putrefactive condition” good on n ward, bathroom and lavs independently ventilated; for 32 patients; influence on US Civil War in South, Chimborazo Hosp; Johns Hopkins required “to compare favourably with any institution of like character in the country or in Europe”. Hopkins purchased the site; to be religious in character, but non-sectarian; 231: “The specifically British emphasis on supervision derives from Nightingale. From 1861 to the beginning of World War II the Nightingale ward was the dominant
accommodation in Britain, indeed very nearly the only available design for a nursing unit." For ease of supervision. Only with mass use of penicillin and other anti-biotics led to changes in medical treatment was defects of N ward evident; patients turned out fast. St T bombed, but not rebuilt in same way. Hosps went high rise.

Thompson, John D., “The Evolution of Hospital Design,” in Compelled by Data: John D. Thompson: Nurse, Health Services Researcher and Health Administration Educator, ed. William D. White. Yale University 2003. Pp 149-50 “Florence Nightingale’s Contribution to Hospital Design,” 149: It was impossible to ignore her chronicle of san conditions in hosps during the Cr War (then quotes preface of Notes on Hospitals) does not say opposed germ theory to death, but associates with Miasma theory, disease “caused by ‘miasmas’ arising from rotting material in the ground,” a misguided conception, but cleansing efforts to combat the so-called miasmas were also somewhat effective against bacteria. Cites James Lind, naval surgeon and pioneer in naval san, and scurvy 150: miasma theory so strongly believed and its applic achieved such dramatic results that it delayed the acceptance of Lord Lister’s experiments in antisepsis (he was then Mr Lister), which were an extension of Pasteur’s research on germs. FN not as retiring as Aikin in 18th century on laying out a plan for a hosp. “In fact her instructions to architects were most specific, about the pavilion’s length (128 feet), width (32 feet), ceiling height (16-17 feet) number of square feet per bed (96) cubic feet of air (1,600 per bed), number of stories (2) type of floor (polished oak) and paint color (pure white or the palest possible pink). HH and St T. And they disguise the fact that “the pavilion ward was an adapted barrack. The pavilion design soon became the standard plan for hospitals throughout Europe and even in Europe’s colonies in America.” (Thompson RN MS Yale School of Public Health


prevention in *Noes on Nursing*” “the overall theme of the little book”; then near end, undiluted statement for surgical nursing “In surgical wards, one duty of every nurse certainly is prevention” must be ever on watch (71) (in conclusion)


Thompson, W.G. MD *Training Schools for Nurses, with Notes on Twenty-two Schools.* New York: G.P. Putnam’s Sons 1883. Connecticut Training School for Nurses and Dispensary, at Connecticut State Hospital, New Haven CT, 3rd est 1873, on FN model

Thompson, W.G. MD *Training Schools for Nurses, with Notes on Twenty-two Schools.* New York: G.P. Putnam’s Sons 1883. 4: from Fry, Guy’s, KCH, UC. 1860 St T; 5: New York State Charities Aid Assoc studied via Wylie, model for Bellevue and many others; Westminster Hosp, Liv, Dublin, Glasgow; 1867 Sydney; Conn Dr Seaman, 9: new system 10: opposition to; 13: US schools, now 22 in 16 cities, over 1000 grads, similar instr, 1-2 years, New York one of largest; 17: instruction in; 13: now 22 tr schools in 16 cities,

Thornbory, Greta, ed. *Public Health Nursing: A Textbook for Health Visitors, School Nurses and Occupational Health Nurses.* John Wiley 2013. 256 pages cits of FN 104: “It is argued that Florence Nightingale was one of the principal movers for this legislation as well as pol ack of the crucial role that nurses played during the World War I (1914-1918). Useless!


Timko, Michael. “Florence Nightingale: Fantasy and Fact.” *Currents in Modern Thought: Essays* 18, 7 (July 2003):285-95. US prof emeritus. no good sources. exaggerated claims. “At the peak of her influence--the 1850s and 1860--she was virtually a ruler of the empire, deciding who would head military and health
departments, doing the job of Secretary of State in effect. For nearly 30 years Nightingale was a world consultant on civilian and military health care. Heads of government lined the waiting room of her house on South St.” (285).


Tooley, Sarah A. *Southall Life of Florence Nightingale*. London: S.H. Bousfield 1906. Online. no index 351 pp. Ded to EH. Author interviewed people who knew FN 177: Soyer 238: Lord Ellesmere understood FN wd not want a man of war to return in, took French vessel to Marseille, passed thro’ France at night, visited old friends Sisters of St Paul [not likely], travelled via Boulogne 242: Viscount Chelsea moved she be hon gov of St George’s, meeting presided over by duke of Cambridge 322 has FN visiting Claydon frequently in summer [wrong, but got from Verneys] but book does stress sick poor concern. 341-42 has FN letter August 1903, read by the Hon Fred Strutt, mayor of Derby, at Lea Hurst, lent for the occasion: 341: Will you express to each and to all of them my very warmest wishes for their very highest success, in the best meaning of the word, in the life’s work which they have chosen. We hear a great deal nowadays about nursing as a profession, but the question for each nurse is, ‘Am I living up to my profession?’ The nurse’s life is above all a moral and practical life, a life not of show, but of practical action. I wish the nurses God-speed in their work and may each one strive with the best that is in her to act up to her profession, and to rise continually to a higher level of thought and practice, character and dutifulness.” To nurses assembled in garden, “occasion of impressive interest.”

Chapter 8 *The Nightingale Fund Training School*. 91: 1860 98: Surrey Gardens had been Spurgeon’s tabernacle; N Home adjoined matron’s house, 40 probs and home sister;

Tooley, Sarah A. *History of Nursing in the British Empire*. London: S.H. Blousfield 1906. 392 pp. No index. Online Good material Chapter 1 nursing before 1840 Chapter 2 Pioneer work of E Fry; 23: founded “the first known inst in this country for the training of nurses for the sick” prison reform work began in 1813; in 1840 visited Continent on a tour of prison insp; in Dusseldorf interpreted by Fliedner who had seen her work in London; founded 1836, began in 1833 when Mme Fliedner took discharged female prisoner; E Fry visited Kai in 1840, when training its own body of nursing sisters and sending out; 28: in
1840 started a Society of Sisters of Charity to visit and attend the sick, based on Kai; told bp of London; Queen Adelaide gave name; 30: name changed to nursing sisters; but 31: “failing health prevented Mrs Fry from taking an active part in the mgt of the inst which she had founded.” carried on by daughter and sister in law; died 1845
ch 3: 35: fee paying, Prot only, 3 months training, had to read and write; got certificate from matron of Guy’s did first
37: very elementary training, first probs sent to Guy’s;
38: went to private families, did district nursing gratuitously for the poor and joined staff of several London hospitals; 1845 some at Hanwell, some to German Hosp at Dalston; 1854 several volunteered for Crimea
39: real growth began in 1872 when moved to 4 Devonshire Sq;
Chapter 3 inst of nursing sisters,
Chapter 4 Charles Dickens and nursing reform; pun of Martin Chuzzlewit
Chapter 5 St Johns’ House
36: Bowman, Todd and Farre
Chapter 6 Nursing sisters of St John the Divine
Chapter 7 First Reforms in Hospital Nursing
Chapter 8 The Nightingale Fund Training School
91: Mr and Mrs SC Hall approached SH about testimonial to FN, EH replied, July 1855, one wish to found a hospital in London and to work it on her own system of unpaid nursing; proposed to give to Messrs Coutts’ bank where a sub about to be opened; meeting at Willis rooms;
93: £44,000 repeated “at meetings all over the kingdom throughout the winter of 1855-56” but Lady Palmerston vs. Humbug, nurses good now; drinking ok
96: “When Mrs Wardroper became matron of St Thomas’ there was not a sober woman on the staff. She blamed the conditions of work, and at once set about remediya those conditions by a partial division of labour. She employed some of the women for the rougher cleaning work, and kept others more at the beside of the patients. Mrs Wardroper improved the nurses’ dietary and shortened the hours of labour.” appealed to ladies and a few came. Gave title of “sister” when FN school, an upper floor found, each had small separate bedroom, common sitting room and 2 rooms for sister in charge;
98: 1871 opening of new hosp on Embankment, Nightingale Home a special wing adjoining the matron’s house, accomm for 40 probs and home sister; small separate room for each prob, sitting room, dining hall, “refined and comfortable” QV opened apt of Crossland as home sister....

Torres, Gertrude. Theoretical Foundations of Nursing. Norwalk CT: Appleton-Century-Crofts 1986. 243 pp; lots on FN. Ded to a Grey Nun. Carative factor; Chapter 1 Historical Perspectives in the Dev of Nursing Theory; Intro. Nursing theorists from FN to
Watson; 17 all but one after 1952; “Nursing has paid little or not attention to the writings of Nightingale throughout history in terms 3: of directing its practice.” only recently that students have been exposed to her Notes on N; little motivation for nursing teachers and theorists to develop and publish their theories because did not know FN’s; Table 1-1 identifies the nurse theorists in chron order, with major themes; 4 major themes: env, need, interaction and systems; FN on env, Henderson on needs; Rogers stresses env but also uses systems approach; emphasis on needs significant from mid 1950s to mid 1960s, then systems gained; interactive theme can be identified in each decade; env theme limited attention; in 1950s 2 theorists published; during 1960s 8;.....

FN focuses on env, air, light, noise and smell; Rogers man-env exchange; 5: need theory one of strongest; theory 40-48, 5-6 17 theorists; has Henderson, not Harmer; nothing after FN until Peplau 1952
45: Table 4-1 Nightingale’s Theory : focus, examples
46: environment
Nightingale provided many propositions/assumptions, from observation and experience, from NonN
48: Chapter 4 Environmental Theory. FN in 1860, to 1952
49: FN writing preceded most of sc theories such as germ theory, based on common sense from experience; many air and water pollution;
Description of the theory: human interact environment. Health of homes, nursing to facilitate reparative process; Health is placed in the framework of preventing mostly epidemic diseases and facilitating indiv’s’ ability to heal themselves. [okay]

Towne, Joseph marble bust of FN in Russell Cotes Art Gallery and Museum, Bournemouth ODNB says 1850


Trained Nurses Association of India. TNAI Bulletin. 3,2 February 2014 “National Florence Nightingale Nurses Award 2014” ceremony 12 May, in Nursing, hosp or community, nursing educ and nursing admin
“President Presents National Florence Nightingale Awards.” Pranab Mukherjee gave certificate, medal and cash awards to 35 awardees

Training School for Nurses at Bellevue Hospital, 1872, opened
1873,

Transactions: Summary of Proceedings, Transactions of the National Association for the Promotion of Social Science. Edinburgh 1862:557. On the reading of the paper on “The Sanitary Statistics of Native Colonial Schools and Hospitals,” by Miss Nightingale...a short discussion took place and the following resolution was unanimously adopted on the motion of Mr James Heywood: “The Department of Public Health, in congress at Edinburgh, request the council of the National Association for the Promotion of Social Science to represent to the Colonial Office the importance of considering the valuable reports of Miss Nightingale on native colonial schools, native colonial hospitals and the causes of the disappearance of native races in British colonies, and that they also represent the desirableness of endeavouring to obtain additional information respecting native races.”

Trappe, E.D. “Florence Nightingale and Rumanian Nursing.” Slavonic and East European Review 49,114 (January 1971):125-27. 2 letters to FN by Mrs E.B. Mawer, compiler of 2 books on Rumania, fairy tails and proverbs, wife of an English physician, in 1877 in Bucharest for nearly 20 years; she suggested formation of a nursing society, to get Princess Elizabeth to allow use of her name in title, got support of pm and a general, got cordial but not optimistic answer from Princess E. Sent to FN. Princess’s lead in org of wartime nursing in Rumania in 1877 (vs Russia) set pattern for Queen Marie and Princess Ileana later


ch 4 "Nursing’s Neighbours: Doctors and Healthcare Support Workers” Ch 5 evidence-based everything; Ch 7 Managerialism, NHS "Not wanting to dive into nursing’s history too soon, I have so far avoided the F word - Florence - Nightingale. Although nursing has some ancient predecessors, its modern form, in most places in the world, developed from the work of British Victorian women, Florence Nightingale being the name that many people can remember. Its unique historical and cultural circumstances have stamped on the profession some characteristics that may have been useful in 1860 but in 2013, even in 32: a faded form, seem puzzling or are unhelpful.” to reassure “Male establishments, for example by emphasising the nurse’s traits of ‘obedience’ and moral trainability. ‘Do not let a nurse fancy herself a doctor’ wrote Florence Nightingale in 1869. Note4. Hierarchy, routine, helpfulness to doctors (a good preparation for marriage) and emphasis on rules of conduct become important in nurse training allowing nursing to be seen as preserving and developing ‘womanly qualities’ in its practitioners- unlike university education
which many men of the time saw as threatening femininity and leading to ruin (Rafferty 1996). [but univ option for women still 20 years off_ 
8: emerging profession in terms of 
31: “The first mid-19th century nurse couched in an ethical language.
143: Florence Nightingale School of.... Peter Carter seems to think nursing profession pre-Nightingale, but she and other Victorians then made obedience and trainability important, to “reassure ‘male establishments,’ Nursing would develop ‘womanly qualities’ unlike university education, which the author seems not to realize was not an option at all at the time, or indeed for a good two decades. Nightingale’s first name becomes the “F word,” and she simply the name “that many people can remember,” with no mention of what she did! (7).

Treiben, Linda and Jones, Jackie H. “The Care/Cure Dichotomy: Nursing’s Struggle with Dualism.” Health Sociology Review. Online 1 April 2015 1-11 Journal of Australian Soc Assoc Taylore & Francis online
Authors Kennesaw State University, Kennesaw GA, WellStar School of Nursing

care/cure dichotomy exists between nursing and medicine, one part dominates, medicine “has emerged as the more valued and prestigious half of the dichotomy. Nightingale nursing has steadfastly adhered to the science of caring which, in many ways, impedes the ability to move beyond the dualism of care/cure.” examines origins and endurance of care/cure dichotomy in nursing as both externally and internally imposed. Western thought. Cites FN’s Notes on Nursing as 1881!
“Our analysis seeks to examine the power relations between nursing and medicine,” binary opposites care/cure, as gender, sex and low versus high status occupations. Caring includes feeings of concern, respect and affection as well as work of attending to a person’s needs. Gender scholars argue for a bridging between knowing and doing in thought, calling for a connection between dualistic ways of thinking (Hess 1990, Sprague and Zimmermann 1993) [why is care/cure a dichotomy, maybe care leads to cure?; women healers nonsense]
Ways of knowing: medicine and its connection to positivist science. Throughout history, oversight of the sick has been divided along gendered lines. In many ancient cultures, women were thought to possess knowledge of healing and were, therefore, closely associated with spirituality and divinity (Jecker & Self 1991) Acc to Acherberg (1881) the earliest medical paradigms were not masculine, but of women healers who often used mysticism or natural herbs to affect [yes] a cure.” However, by the early eighteenth century, the value of women as healers has been largely discredited.”
3: “Gender and the creation of nursing” acc to nursing
historians, in the early 1800s prof nursing did not yet exist (Kalisch....) Finally right! Female relatives; “In the nineteenth century nursing was transformed from domestic unpaid work done in the home and family context to an occupation that required professional training.” “Nightingale’s Notes on Nursing: What It Is, And What It is Not (1881!) helped set the basic foundations for nursing practice as suitable work for women who wished to contribute to society.” [but NonN not for professional nurses] According to Gamarnikow (1978), Nightingale’s writings frequently demonstrated that she believed nursing was, by its very definition, ‘women’s work’” 4:] cits to be a good nurse one must be a good woman, N 1881) “From the beginning, this dichotomisation produced an inequality in the workplace that mimicked the separate spheres of a domestic household.” Good grief. “By the logic of the day, medicine was a skill only attainable by educated men. In Nightingale’s design, nursing was its complement. Images of nursing and nurses reconfirm its gendered bias.” Kalisch... “Four main nurse stereotypes, each reflecting images of women.” Ministering angel/dutiful daughter....”

“Just as women were barred from the profession of medicine, the nursing profession attempted to ban men. As nursing was re-created as a respectable occupation for women, it seemed necessary to discourage men from entering the profession both by excluding them and constructing their otherness. Nightingale effectively ‘ended’ men’s association with nursing when she established it as woman’s occupation (Evans 2004, p 322). Men were forbidden from joining professional organisations (Mackintosh 1997; O’Lynn 2007) viewed as sexually suspect.... Perception men do not belong 5: Nelson (1997) critical of recent feminist revisions of nursing’s history that suggest foundation thinkers such as FN are resp for nursing current problems. “Despite popular notions to the contemporary, nurses’ deference to doctors was not in Nightingale’s original design. Twaddle and Hessler (1987 p 213) asserted ‘Nightingale never demanded that her nursing colleagues obey physicians blindly.’ [no, to obey intelligently] While modern nursing was designed to complement medicine, its founder saw it as an independent profession that was equal, not subordinate, to the medical profession (McDonald 1994) reminds us that Nightingale defied convention by stressing the importance of care in a hospital system largely dominated by men and the androcentric biases of her time. Ironically, although she perpetuated dichotomy in establishing nursing’s gendered occupational niche, Nightingale also helped pioneer statistical positivism (McDonald 1994). Largely due to Nightingale’s work, nursing today utilises both qualitative and quantitative methods in its quest for professional validation.” NO page ref! Ref had FN 1881. McD Is Women Founders reply:
Florence Nightingale and “Gendered Occupations”: Nursing and Medicine
a profession does not do things, especially years before there are any professional organizations. Doctors were organized, and university, and they banned women. Sioban is “Reading Nursing History.” Nursing Inquiry 4,4 1997: 229-36 get.
No idea that NonN not for professional nurses, published before her school opened. No recognition of educ differences between men and women at time, impossibility of equal relations FN did not invent gendered occupation, did not ban men from nursing, expected military nursing would be largely done by men belief in golden past, when nursing and medicine equal

Trollope, Joanna. Britannia’s Daughters: Women of the British Empire. London: Hutchinson 1983.1 Chapter IV “Every Woman is a Nurse”: Florence Nightingale 79-100; has Koch isolated tuberc bacillus in 1845! And Lister teaching antiseptics in surgery (81), has duke of Newcastle wanted to send nurses to Cr but Army didn’t (82); has Ly Alicia Blackwood as a nurse, and story re using dead baby used in pipe (84); “There was one acute inadequacy in Indian medical care of which Miss Nightingale makes no mention--she scarcely had time, after all, with everything else that preoccupied her--and that was the huge problem of childbirth and of all female diseases.” (86); has 18th cen med men knew fever “rampantly contagious and how it could easily be avoided”; nineteenth-century medical men persisted in ignoring such knowledge” (86-87)! Puerperal fever compounded in India by purdah system

Troubetzkoy, Alexis S. The Road to Balaklava: Stumbling into War with Russia. Toronto: Trafalgar Press 1986. FN 34, 39. Roger Fenton first war photographer, for Times. 39: credits FN “one of the most remarkable human beings that have ever lived” founder of modern nursing. Had 5000 wounded in her charge. “Six months after her arrival the hospital death rate fell from 44 percent to 2.2 percent. In unspeakable conditions of filth, squalor and shortages, she toiled ceaselessly, often 20 hours at a stretch, to ease the plight of the private soldier. “ cites WS.

Trueland, Jennifer. “Has the Legend Grown Stale?” Nursing Standard 26,4 (28 September 2011):18-19. Quotes Tom Keighley on “glaring inaccuracies” Anionwu “does not want to knock Miss Nightingale off her pedestal, but she would like her to make room for other important nurses. ‘Florence Nightingale has contributed a large amount, but others have contributed as well. I have no issue with her--but why are other historical nursing figures so little known, people like Betsy Cadwallader, who was also in the Crimea?’” Professor Anionwu blames the ‘male-driven’ nature of history for the oversight.” quotes LM re letter to Lord Patten, re “snow job” done on FN.... “But some nurses have questioned
Miss Nightingale’s relevance.” Unison; next week EA compares FN and Seacole work (26,5)


try Canadian Nurse 1966 62:59-61


Tsuda, Umeko. *The Writings of Umeko Tsuda*. Includes her journal for London trip, with interview of FN, excerpt in *White Plum*

Tsuda College. *90th Anniversary of Tsuda College* 1990. Includes copies of letter and the violets from FN; Tsuda College 2-1-1 Tsuda-Machi, Kodaira-shi Tokyo Japan
21 March 1899 letter to FN
Dear Miss Nightingale
Will you permit me to thank you for those beautiful flowers given me yesterday from you. They were most exquisite. The memory of their beauty, fragrance and your kindness will remain with me long after the real flowers will have withered. I cannot tell you how much I appreciated them. Some of these will be pressed to go back to my Japanese home.

May I take this opportunity to thank you again for the great honor and privilege of meeting you and of being able to tell you however inadequately how much we women of Japan feel that we owe to you. Your influence has come far out to me, even to our women of the Far East and in their name may I thank you many many times....

Tsuda, Umeko *The Writings Of Umeko Tsuda*. Tsuda College: Tokyo 1984 335: 75 Onslow Sq London March 20th. Eventful day. In aft saw FN, wd rather have seen her than royalty itself, asked Mrs Bickersteth to arrange, as had FN’s life in Japanese and also photos of the Red Cross Hosp work in Japan, wished to present to her, only day before FN consented to see her. took hansom to 10 South St., left 4:30, “a small four-story house fronting on the street,” taken in by male servant, to top floor back room. “This
room was large and bright and sunny, and filled with pictures and flowers. [336] As I came in from the side of a screen at the
door, a bright cheery voice called out, ‘How good of you to come
out such a bad day.’ There was a large snow white bed, with a red
silk quilt lying at the foot, propped up by pillows and all
dressed in snowy white, a white wrap over her shoulder, and a cap
on her head, lay a bright-looking woman, with eyes full of life
and intelligence, a face, not so old or wrinkled, with a remains
of its former beauty on it. When I thanked her for the privilege
of seeing her, she said, ‘No, not at all. It is good of you to
come.’” showed photos. She said “How interesting, I am so glad to
see them.” “I showed her her own picture in the Japanese
magazine, she said smilingly. ‘That is far too pretty.’ She asked
me about Japan, and said, ‘Tell me about your women.’ Then I said
how the work of nursing had gone on, and how much we owed to her.
She said, ‘O no, not at all, it is they who are doing it.’” fog
came up as rose to go. “”Don’t go now, until the cloud has
passed, unless you are in a hurry.” sat down, continued talk. “I
spoke of the future prospects for our women, and how their work
was gradually broadening out. She said, ‘It was quite the same in
England. Forty years ago, women had such narrow lives. Nothing
but marriage was expected of them by their parents. I am sure it
was so with my mother.’ She then went on to ask about our nurses,
and I said the home nurses were much harder to reach and teach
than those in hospitals— that they did not get the discipline and
training they needed. She asked if we had poorhouses in Japan,
and [337]: said, ‘I am glad you don’t have them. You are better
off without them. Some of the poor say they would rather be
nursed by one of their own number because they alone can know or
feel for each other.’ You are interested in education. It is
compulsory in your country? It is only just lately that it has
become so here.’” said wd return to Japan next month. “She said,
‘You must come again and see me. It is very good of you to come.’
When I spoke of Japan and England having come together and being
very near now, she said, ‘Yes, that is so, your country has gone
on, and is pushing forward.’ She insisted on my taking some tea
with her, which had been brought in, but I feared to tire her and
rose to go. She said, ‘How are you going? You cannot walk in such
weather.’ I told her I would get a hansom, and then with the
brightest smile on her face, I left her.” maid came out with a
big bunch of flowers, said Miss N wishes you to take these....

“One thing she said was in regard to war. We had spoken [338]
of the Japan-China War, and the work of our nurses. She said war
is a dreadful thing. Let us hope it may never come. And yet it
gives the opportunity and the time for many brave deeds.”

Turnberg, Lord, Hansard 11 March 2013, quoted Roy Griffiths of
1983 when looking to change the management structure of the NHS

“If Florence Nightingale were carrying her lamp through the
corridors of the NHS today, she would almost certainly be looking for the people in charge.’ I think she would have been more concerned today about finding someone in charge of the care of the patients in the corridors of the Mid Staffs hospital. She would have been looking for anyone able to explain what had been happening to the patients for so long and would have found no one.”


266 Bell, Frances Spencer

Turner, A. Logan. Story of a Great Hospital: the Royal Infirmary of Edinburgh 1729-1929. Edinburgh: Mercat 1979. little ref to FN, seems not to know RIE connection, only St T. 210: est of tr centre in London initiated a general movement re nursing: a com of enq appointed by managers of RIE in favour of higher pay getting better class of women, prob; a School or Assoc for the Tr of Nurses, appointment of a Mrs Taylor as instructress, 1861, 3 wards; re beer; 212: temporary arr failed; in 1866 managers appointed Anne L. Sidey, late matron of shelter in Grassmarket, but had to resign in Feb 1871 from illness; Fasson advocated appt of a lady supt and prob system, and on rec of com Elizabeth Barclay elected, salary £100; 214: FN gave help, letters from her; Nurse Janet Porter; 214: Barclay est a special “Nursing and Training Fund” got donations of £500 and list of subscribers drawn up; marked improvement took place, but “obliged to resign in Jan 1874 for reasons of health”; Pringle; 208: nursing conds described by Joseph Bell and James Syme; prelim training introduced in 1924; FN visited hosp with Syme in 1857 (215); 241: Lister in Glasgow, 1864 Pasteur showed fermentation and putrefaction were vital ph due to action of micro-organisms, foundation of germ theory, on which Lister built his conception of antiseptic or anti-putrefactive treatment of wounds; complete rev in surgery; BMJ 1867 2:246 on results of his methods in his wards;

Turner, Barbara Carpenter. A History of the Royal Hampshire County Hospital. Chichester: Phillimore 1986. 78: when com of mgt met in new hosp for first time 1868, admitted 16 in and 14 outpatients, had at last “removed to new premises”, “trust that it will please God to make the Royal Hampshire County Hospital a blessed means of extending to the sick and afflicted the benefits of medical staff and science, and while the physical
necessities of those, who in a long succession of years resort to its wards are relieved, that their spiritual wants will ever be remembered and supplied.”

Butterfield gave £500 to the chapel fund, hosp “cannot have been unimportant to him financially” bldg had taken a long time to complete, and for last careful remedial work he did, refused any money at all. People in Winchester remembered that Gilbert Scott’s fees for restoring the High Cross not paid. Butterfield was working for a com of county gentlemen all used to having their own way (79-80). Heathcote not only a friend and patron, ill. Keble died then. 80: still years before main drainage arrived in centre of Winchester, none in the new Romsey Rd bldg. A tradition that Butterfield usually destroyed his plans, and certainly his original drawings seem to have disappeared. Subjected to endless but prob necessary economies, and plans passed to an engineer. “All was openness and light, space and fresh, bracing air around, and a developing garden.” no public transport and long walk from town centre. 82: site of new hosp open space, sloping towards the south, northern frontage along the road from Winchester. Rawlinson’s original suggestion had never really been examined, but his calculation that a new hospital mt cost £6000 was a hopeless under est. Before a brick of Butterfield’s bldg laid, “yet another engineer had been asked to look at the plans.” Barter Memorial Chapel, paid for by Heathcote and Butterfield’s donation. In the chapel Butterfield most able to display the characteristics wh made him one of the most successful architects of his time. Plans have not survived, but bldg still to be seen despite additions. Not pavilion like Netley, running east to west 255 feet, central block and 2 wings, slab. Central bldg vast and impressive staircase, 3 small wards for special cases, and ltd admin, op theatre, apartments for house surgeon and matron, nurses and servants day and sleeping rooms, bd room, kitchen and offices; 5 large wards 2 on ground for men, med and surg, and 2 above similar for women; turrets. “Convalescent balconies of which FN had not approved.” Kean’s cement.

In 1876 Heathcote concern about heating and vent and next year and water supply irregular, bouts of unexplained fever began to appear. Absence of main drainage.


Tuson, Penelope, ed. The Queen’s Daughters: An Anthology of Victorian Feminist Writings on India 1857-1900. Reading: Italaca n.d.

Tyson, Edith, ed. Letters from the Crimea: Captain Jasper Hall of the 4th (or King’s Own) Regiment of Foot, to his Sister and Father. Lancaster Museum Monograph. Typescript. Officer, ADC to Codrington, died November 1856 at Aldershot. Letter to Jane. “What a number have perished and what quantities wounded, in the last battle on Inkerman Heights our loss was as great as at Alma and the fighting they say much harder. Here I have to see all the unpleasant horrible part of war without the excitement of being in the field. Our Hospital is immense, we have now about 6000 sick and wounded, there are about 80 doctors at least there were a few days ago, and more arrive by each steamer.... We have here now arrived from England a quantity of nurses and nuns to wait on the wounded and ill. They are useful, especially the latter, but they are such an enormous expense to the country, and they are hardly worth the money, for most soldiers prefer their comrades who make attentive nurses. The nurses and nuns are under the superintendence of a Miss Nightingale, a young lady (about 33) with a large fortune, she appears a very manly personage and talks quite in the strong-minded’ style. There is also a Mrs Bracebridge, a lady of very good family and rich, her husband is here and they do a great deal of good among the patients. Lady Stratford de Redcliffe too, the ambassador’s wife is also most kind and comes nearly every day bringing all sorts of things in large quantities for the hospital.”


untitled. No author. Illustrated London News 94,2728 (1 August 1891):135. with sketch of JS, when young, “The Late Dr John Sutherland” obit. “Perhaps the ablest of English military sanitarians was Dr John Sutherland, who died at Norwood on July 14. Dr Sutherland was an Edinburgh man, educated at the High School, and taking his degree of M.D. at Edinburgh University. A little journalism at Liverpool led to his appointment in 1848 under the first Board of Health, a nomination which left its mark
on the sanitary history of the country. The bare record of his services is remarkable. He reported on the cholera epidemic in 1848-9, and he represented the F.O. at the International Quarantine Conference in Paris in 1851-2, and was presented by Louis Napoleon with a commemorative gold medal, which he has bequeathed to the British museum. But his life work has been the improvement of military sanitation. When Dr Russell’s letters on the horrors of the Crimea aroused public opinion in England, Dr Sutherland was sent to report on the health of the troops before Sebastopol. He saw Florence Nightingale and her wonderful work in the hospitals at Scutari. His inspection over, he was recalled to England by Lord Panmure to report, and was also summoned to Balmoral to give a personal account to the Queen and the Prince Consort.

Then followed his membership on the Royal Commission on the sanitary state of the Army, in India and at home, from which have sprung most of the modern improvements in the health of both services. Dr Sutherland was an active member of the Barrack and Hospital Improvement Commission, afterwards the Army Sanitary Committee, which sat under the presidency of Sidney Herbert, and the value of his work—which was continuous up to 1888—may be judged from a comparison between the vital statistics of the Army before the Crimean War and after that critical and unfortunate period. Later on he visited Algeria and examined the reforms which had so largely reduced the mortality of the French army. Dr Sutherland’s life was, apart from his work, a singularly quiet one. He suffered from deafness, and was unable to attend public meetings, but his work and unrivalled experience were in constant request with sanitary engineers.” [so, much wrong, but seems to be a short version of FN in Times]


UT Health Science Center. San Antonio. “The Lady with the Lamp and her Contributions to Modern Nursing.” Online September 2016


Vaillancourt, Eric. MA thesis on medécins-infirmières relations 1867-1920

Vandenbroucke, Jan P. and Christina M.J.E. Vandenbroucke-Grauls, "In Defense of Farr and Nightingale." *Annals of Internal Medicine* 125, 12:1014. Defends them vs misreps of their work on hosp stats by Dr Iezzoni (in 124:1079-85)


Venning, Annabel. *Following the Drum: The Lives of Army Wives and Daughters, Past and Present*. London: Headline 2005 372 pp. 124-6, 131-2; no Seacole; FN 74-5, 124; Mrs Longley 34, 124-5 303 nursed in Indian Mutiny; not much on FN, but interesting on Longley; no ref to her in FN; describes how wives went to find husbands on battlefield, bury if dead, rescue if alive; 74: 1854, soldier’s wives at Scutari. when FN arrived, many in unmarked graves; Blackwood, 260 women and children 75: officers’ wives; Duberly,

124: Becky Box, intrepid, regimental wife, “in the latter stages of the war employed as a nurse by Florence Nightingale.” strong as an ox, cd pick up a six-foot man and carry him. 124: “Before Florence Nightingale and her small band of trained nurses landed at Scutari, it was left to army surgeons, invalid or pensioner soldiers acting as untrained medical orderlies, and the brave wives of soldiers to administer what care they could to the men. Mrs Longley who had managed to embark with the 17th Lancers, only thanks to the intervention of her former employer Lord John Russell, more than justified her presence in the Crimea. She devotedly nursed the sick and wounded, going out 125 onto the battlefield of the Alma, to tend to the wounds of those who lay bleeding there.” often sickness ravaged an army; 302: “In the Crimea, too, many of the soldiers’ wives preferred to go out on to the battlefield to ascertain their husband’s fate rather than trust the word of soldiers returning from the fight. Elizabeth Evans, who had travelled out with the 4th (King’s Own) followed the men onto the battlefield of the Alma until she was ordered to the rear. When the fighting ceased she and her companions rushed onto the field past wounded horses screaming in agony, severed legs, piles of corpses humming with flies.... 303: Longley, Lord John Russell helped her to get there; “remained in the Crimea for the remainder of the war, working as a nurse, and afterwards travelled to India where her nursing skills were in much demand during the Mutiny. she received a medal for her nursing services from Queen Victoria.”

Verderber, Stephen. *Innovations in Hospital Architecture*. New
v "The very first requirement of a hospital is that it shall cause neither human nor ecological harm" [that’s it for the page]

243: new Evalina Children’s Hospital, first new ch’s hosp in more than a century, built on narrow, rectangular portion of historic site of St T. FN hosps 7, 21-3, 43, 81, 21. Brunel designed and constructed an innovative prefab barracks hosp at Renkioi, Turkey (18550 in a variant of what wd soon become known internationally as the Nightingale Ward. [odd, off] FN authored 2 influential books post Cr, Notes on N 1858 and Notes on Hosp 1859 [has dates wrong]

22: “Nightingale’s writing, nonetheless, set the standard for sustainability against which the performance--functionally or otherwise--of all hospitals wd be judged to a greater extent until the outbreak of World War 2. St T pavilion plan, 7 pavilions linear plan.

23: caption “Nightingale was a firm believer in the miasma theory of disease.”

23: “Nightingale’s influence was profound in the military hospitals built during this time. This was due as much to her ability to communicate [24:] well as to her social position and extraordinary energy. For these attributes she was the most widely quoted hospital reformer of her era. In rapidly expanding cities in America and in Europe, the pavilion plan appeared by 1860 to be the best method to house patients in an attractive campus setting--amid landscaped grounds and a reliance on natural ventilation, daylight, views and terraces for patient use. However, plans for American urban hospitals were put on hold in 1861 with the outbreak of the civil War. Regardless, a number of prominent military barracks hospitals built by the Union Army were directly influenced by Nightingale’s open ward prototype. These emphasized cleanliness, hygiene, ambiance, and functional efficiency.”

24: acceptance of germ theory gained a foothold; early 1870s John Shaw Billings, probably America’s preeminent authority on public health and its symbiotic relationship with hosp architecture, concluded that fresh air and hygiene must be of highest priority in hospital architecture." [nothing on FN influence] 1875 he did plan for JHH

25: “Germ theory, together with Nightingale’s columnist advocacy, drew acceptance in new hospitals in the 1870s and 1880s. This theory made common sense, it was scientifically verifiable, and the day-lit naturally ventilated, narrow open pavilion was ideal for this new understanding of infection and disease control. “ next 50 years medicine transformed.

pre World War II. Medical and public health advancements, “a new generation of skyscraper Nightingale hospitals was built in the period 1910-1940. Nearly all of these hospitals are gone although those that remain afford unique opps for sustainable
redevelopment and preservation.
81: Nightingale 150 years ago for wards [sees as entirely socializing for patients, not need of nurse supervision] vs private room
1905 Chicago architect Albert Ochsner proposed high rise hosps to Assoc of Hosp Supts, new economies; did prototype 1907 for 500 bed hosp of 10 storeys; with 10 single-level Nightingale pavilions on a city site.
39: summary, major development in history of sustainable arch for health: fresh air, water, natural light, human scale, meaningful connections with adjoining community, natural locally av bldg materials....[43: continues, pics between] “The ecohumanist work of Florence Nightingale centered on the provision of clean, well-lit and ventilated hospitals affording the patient a meaningful view of the outdoor natural landscape from within an open ward. Her passion and drive influenced generations of hospital administrators and their architects and her influence was international in scope. Nightingale hospitals were characterized by their low profile, relatively narrow open wards with interspersed landscaped courtyard and the nursing station located at the inboard end of each ward, adjacent to a circulation artery.

177: FN perhaps “the first modern practitioner of EBR&D.” work with commoner soldiers, based on empirical field-tested evidence.
276: hosp with factory “among the earliest modernist building types. The roots of modernist hosp design date from the work of Florence Nightingale in her emphasis on strict functionality, cleanliness, and the critical importance of an uplifting, bright treatment environment, in contrast to the dark, drab hospitals and clinics common up to that point in time.” with modern tech, hosp became a testing ground for marriage of arch factionalism and


Verney, Harry C.W. “Some Personal Reminiscences about Florence Nightingale.” Aylesbury, Bucks. Royal Buckinghamshire Hospital. 4


Vicinus, Martha and Bea Nergaard, eds. Ever Yours, Florence Nightingale: Selected Letters. Cambridge Mass: Harvard University Press 1990. 10: “Her faults are too evident. She tended to see all issues in black and white; those who agreed with her were friends and those who disagreed were enemies. Her lack of generosity, even vindictiveness, towards women who disagreed with her was a lifelong habit. She manipulated her friends and family shamelessly; she used her illness to force other people into action.” but says a “brilliant reformer” and credits her with “considerable achievements”; p 1 their selection “representative of the full range of Nightingale’s interests” but “emphasizes the relationship between Nightingale’s private conflicts and her enormously varied public responsibilities,” and used notes to show “intimate side”. Also “emphasized her ongoing family conflicts, tracing her always difficult and often painful relationships with her mother and sister”; V and N cite Pickering as fact 4; 200 typical, re Chadwick. “As advocates of prevention via ventilation and sanitation, they supported the miasmatic theory that disease arose spontaneously from filth, rather than from disease-specific germs. The growing body of medical men who favoured what we now call the germ theory seemed to undermine their campaigns for greater cleanliness, for this theory suggested that disease cd occur in sanitary as well as unsanitary surroundings.” then has 1858 letter


Vicinus Eliza M. Mosher Distinguished University Professor of English, Women’s Studies and History, Univ of Michigan.
21: “Her ambitiousness and her ruthlessness” did not fit image of
women.


Vossen, Carl. *Florence Nightingale: Geliebtes Kaiserswerth*. Kaiserswerth Diakoniewerth 1986. 150th anniversary public (1836-86) ackn Macmillan for 2 photos used in Cook, in German, short pieces. Wellcome


Burdett 111: FN influence on pavilion
107: rising expenditure on salaries
178:
quotes FBS;

Waddington, Keir. “The Nursing Dispute at Guy’s Hospital, 1879-1880.” *Social History of Medicine* 8 (1990):211-30. v complex, doctors vs. new nurses, were threatened with firing, but ended up with more influence. treas. Edmund Lushington, appt 1876, unsalaried; son of Stephen. Margaret Burt appointed to reform, was St John’s House, left eventually to marry. argues doctors had got modicum of reforms at Bart’s and London before 1850, increase in nurses’ salaries, Guy’s, not a charity, slow. “At St Thomas’s the Nightingale Training School was producing a ‘troubled’ flow of trained women who were moving into other institutions, bringing with them Nightingale’s conception of a disciplined and efficient nurse.” (214); UCH got professional nurses from All Saints after Kentish Town railway disaster in 1861; Guy’s got money from property, did not have to court benevolence; at Guy’s Lushington waited to retire old matron Mary Long after 34 years, retired Nov 1879; his sister held a responsible position at a convalescent home in Ockham, Surrey, by nepotism; believed needed a competent female in authority (no mention of FN connection); Burt had 9 yes at KCH, Charing Cross and Leicester Inf were was lady supt; 216: “The dispute was symptomatic of the medical profession’s latent hostility to nursing reform.” put up a “spirited defence”; a patient died, nurse charged (219) Ingle a new nurse had dragged patient to bathroom, as punishment for a soiled bed, put in cold bath for 20 minutes, left her; died 3 days later, not from consumption, for which admitted, but tubercular and infl disease; Wm Gull refuted opinion on this death

Waddy, Charis. *Women in Muslim History*. London: Longman 1980. 135-37 on FN; Dr Nimet Taskiran in 1975 remark sultan’s gifts the only act of international recognition of FN’s work at the time;
value of the bracelet high, cd buy one of the best villas on the Bosphorus (135);


Wagenaar, Cor. “Five Revolutions: a Short History of Hospital Architecture.” 26-40. 29: 1st scientific, phil, tech. French radical. Pavilion Tenon, J.B. Leroy and C.F. Viel. Lariboisière. M.P. Gautier arch built 1839-54. 1st pav. All the original ideas are there, though the chapel is no longer ded to Nature, but a small Catholic church. “The tremendous success of the pavilion type was further enhanced by the work of Florence Nightingale, who introduced the concept of the barracks hospital during the Crimean War of 1854. Easy to assemble and take apart again, this is a temporary, military counterpart of the pavilion type.” NO [complimentary, but wrong]

p 30 has plans of Friedrichshain; 1st pav, Städtisches Krankenhaus im Friedrichshain, built 1868-74 by M. Gropius and H. Schmieden, Schmieden evolved into one of Germany’s leading hosp architects. Positive refs to FN examples of pav, St T, G. Gilbert’s Hotel-Dieu in 1878 replaced medieval J.J. Van Nieukerken. Algemeneen in Groningen Saint Paul, Barcelona by Luis Domenech i Montaner Steinof Psychiatric Hosp Vienna 1907 by Otto Wagner Hopital Edouard Herriot, Lyon 1913 by Tony Garnier 31 2nd rev, med sc, bacteria discovery med technology, x-rays machines needed space. Pavilion replaced by block 190 helmets for medical staff; Thompson and Goldin chapter 6 “From Pavilions to Skyscrapers’ 17-23.

Wake, Jehanne. On BBC Reputations as biographer, has Oxford PPE (perhaps wife of Roy Wake?)


Wake, Roy. *The Nightingale Training School 1860-1996*. Haggerston Press 1998. ch 1 Florence Nightingale: 28: “Strachey had been invited to write FN’s official bio but turned this down.” later said glad he didn’t “She was a terrible woman--though powerful.” cynical book cd be done, and did, critical of; Woodham Smith wrote in difficult circs of immediate post-1945 29: years, over 10,000 of FN papers in BL in Wales for safekeeping during the war, Baly critical of it; then 30 Wake gives own stereotypes of
parents, Austen’s Mr and Mrs Bennett: “The studious father with the splendid library...and a mother almost entirely preoccupied with the social round”; and has 33: “the Army was her enduring love.” and 36: arrived at Scutari with Mary Stanley, whose mission had not been communicated to FN; and 31: “post of Superintendent of the Institution for the Care of Sick Gentlewomen in Distressed Circumstances”; does he use FB sources say used the GLRO, “Admissions Registers” far from accurately kept; records of tr; matrons’ addresses and corr; AH and HBC 33 packets; uses Woodham-Smith, Baly, Seymer’s memoir of Lloyd Still but not her book; uses Baly thesis; FN to HBC at GLRO; Sugg; Nightingale Fellowship records; cites FB Smith but only re LeFanu quote; good on HBC as unsung hero, only £50 a year; 23: in 1991 the Nightingale School ceased to exist it etc became the Nightingale and Guy’s College of Nursing and Midwifery; 1992 name adjusted to Nightingale and Guy’s College of Health; 1993 combined with Normanby College of Health within KCH UL to for The Nightingale Institute; 72: Baly in private communic had FN regarding the Osburn enterprise as a failure, “who dismissed all the nurses except one.” as if FN had dismissed them! no overall biblio, seems did not use Seymer major book

A118: “In the 1850s, Florence Nightingale advocated fresh air and clean water as a primary treatment for soldiers in British military hospitals. Nightingale’s writings are often credited with introducing environmental health into the practice of nursing. The advent in the 1900s of public health nursing--a term coined by Lillian Wald to describe her efforts to improve environmental conditions through nursing, communication and even cultural enrichment among immigrant populations in New York City--also contributed to today’s understanding of this field of nursing. In 1893 Wald, a nurse and social worker, founded the Visiting Nurse Service of New York with 10 nurses. By 1916 the group had 250 nurses visiting 1300 patients a day....” private donations funded.

“Nightingale Institute for Health and the Environment” Burlington Vermont, pres Hollie Shaner. To educate health care professionals about env effects of human activity
Barbara Sattler, director of Environmental Health Education Center at Baltimore’s University of Maryland School of Nursing, started, then lost, now resurgence of interest as toxic exposure, hazards etc. [Wald credited, but M&N much earlier]

carbon monoxide deaths, 500 in US
recognition env factors beyond individual control
Univ of Maryland School of Nursing has inf resource re Envir health; Howard Univ and National League fur Nursing in EnvRN site; A121: ecample of lead hazard reduction; A123: in 1997, ANA formally endorsed initiative of Health Care Without harm, first large profesional organiz to do so, has Pollution Prevention Kit for Nurses, dev with NIGE


Wald, Priscilla. Contagious: Cultures, Carriers and the Outbreak Narrative.


“All over Eastern Europe statues of Lenin are being taken off their pedestals (1999), dismantled and hauled off to be cut up. It is in the same vein that the nursing profession must, as we enter the new millennium, start to exorcise the myth of Florence Nightingale. Not necessarily because Florence Nightingale was a very bad person, but because the impact of her legacy or more correctly the interpretation of that legacy has held the nursing profession back too long.

The Nightingale myth had from its earliest days been appropriated by the nursing hierarchy and the founders of the Royal College of Nursing who colluded with them. To use it to sell any vocational self-sacrificing ideal required for the good of the service and not the good of nursing.

As a result of the Nightingale myth, the leadership of nursing in.... [garbage!!]

“The failure of British nursing to meet its potential, I would contend, is the ever present Florence Nightingale whose views, whether based on myths or reality, has stopped nursing from progressing into a profession in its own right. What is clear is that the Br est sought from the very origins of modern nursing to sanitise nursing, and ensure that its heroine would be acceptable, a white, English middle class, protestant women
Florence Nightingale fulfilled this role admirably, unlike Irish Catholic nurses such as Joanna Bridgeman and Jamaican nurses like Mary Seacole who made an equally important contribution to nursing during the Crimean War. Neither of these has been officially credited for their efforts.

It was Joanna Bridgeman who developed the system of nursing and management that Florence Nightingale adopted, while the efforts of the black Jamaican nurse Mary Seacole in the Crimea were cold shouldered. What is equally interesting to note is that is was probably the Quaker, Elizabeth Fry, who has greatest claim to the title founder of modern nursing with her pioneering work at John’s Hospital by her Institution of Nursing Sisters, a number of years before Florence Nightingale embarked upon her endeavours. So maybe International Nurses’ Day should be celebrated on her birthday, the 21st May.

“Florence Nightingale supported the subordinate role of nurses to doctors, opposed registration of nurses, three year training of nurses, did not see mental health nurses as part of nursing and had questionable success at her hospital in the Crimea. She also turned her back on the fine history of lay women healers, not to mention her opposition to women speaking in public.”

posted 12 May 2010.

By Michael Walker (Unison Nursing student officer and Wendy Wheeler, RGN RHV


138: “The traditions of caring for others, which are best exemplified by Saint Francis, Florence Nightingale and Sister Gamelin (founder of the sisters of Providence) are not upheld by abandoning the sick and denying care to the poor.”

letter to ed of doctor Used to oppose a strike; only ref? But a nurse on picket line said FN was probably on her side

Walsh, James J. (1907) *Makers of Modern Medicine*. New York: Fordham University Press. Also Catholic University edition 1915 172: cites Dr Robert James Graves “felt very deeply that the most important element in the treatment is the conservation of the patient’s strength with the preservation of his morale, and this can be best accomplished when the patient is constantly under the care of an experienced nurse, noting every symptom and averting every possible source of worry and every form of exhaustion of energy.” In the case of fever, Graves was exceptional in urging the importance of feeding the patient; Graves, Robert James (1797-1853) MD FRCS Irish surgeon, Graves’ disease named after

Nightingale 57-71. okay short bio. family background. state of hospitals and disreputable nursing at time. 67: blames Turkish Customs for holding up supplies!! got bedding washed. got reading rooms. work after war reforming hospitals.


Wantage, Lady (Harriet Sarah Loyd-Lindsay). Lord Wantage, V.C., K.C.B. A Memoir. By his wife. 2nd ed. London: Smith, Elder 1908. Has FN tribute letter. Section on the committee on Army Hospital Corps. Met 1882-83, re Egyptian campaign and whole subject of our mil hosp org, both in peace and war; many witnesses; FN took deep and active interest in the com, in constant communication 278-80.


Warsh, Cheryl Krasnick. Prescribed Norms: Women and Health in Canada and the United States Since 1800. University of Toronto Press 2010 223-. Nursing The Sc of Womanly Arts RC nuns in Fr and Br colonies; 230: FN “Nightingale’s views regarding the role of nurses as professionals and as women were complex and has rendered her value as a feminist model controversial.” religious, wanted a calling rather than a bourgeois profession. “She trained her nurses to be subservient to the medical staff and was hostile to many of the goals and campaigns of contemporary feminists.” [they did not exist then! How could she be hostile to something that did not exist?] international influence. Sanitary reform and modern nursing to own countries. Reciprocity of ideas. “Eliz Bl, who befriended Nightingale before the Cr War, opened the New York Inf for Women and Children in 1857 and initiated free, four-month training sessions for nurses....” with physicians. Visit. 231: between 1873 and 1923 number of US hospitals rose from 178 to 6,830, one quarter of them with a nursing school; similar growth in Canada, in 1909 some 70 nursing schools (Bullough and Bullough 1978, 127); Grey Nuns provided nursing care for centuries, est first Catholic nursing school in Ottawa 1898 (Stewart and Austin, 1962, 242); Ross-Kerr, Winnipeg General Hospital had nurs school 1887; in Montreal nurses paid less than the ratcatcher, end2; 233: finally Chinese and Japanese students permitted in nursing schools

xx: arrival of first nurses in Alberta in 1859 parallels resurgence of nursing in Britain, “The movement to improve
standards of care for the sick ad wounded was spearheaded by Florence Nightingale. Critical public acclaim for her work in the Crimea in which the lives of thousands of wounded soldiers were saved through good nursing riveted public attention upon the need for change. The comparability between the types of roles fulfilled by nurses trained by Nightingale in her school and the roles customarily expected of women in nineteenth century Britain was sufficiently evident that nursing achieved respectability ad acceptance as a suitable field of work for women outside the home.” NO, usual errors on exagg of FN in Crimea xxiii: FN did not see compensation as important. NO Chapter 1 Origins of nursing. Grey Nuns came to Alberta in 1859 came by ox cat 15: from arrival in 1859 first health care agency in Alberta est by ruses, by Grey Nuns, in their own living quarters; in 1870 built a separate in-patient hospital in their convent at St Albert Mission, 1881 constructed a separate hosp building 6: but home visiting the main 7: exemplary health service dev in Quebec in 17th century, contrast with Britain, in Canada care never as bad as Britain because no dissolution of monasteries 8: est of schools of nursing in 1860 beg with FN; 9: the Bellevue in NY, Anglican diocese of Athabaska est 1873, led to est of churches, res schools and hospitals; first lay nurse in Alberta Miss Mary Newton, sister of Canon Newton of Ang session at Hermitage, nr Edmonton; 73: public health nursing in Canada can be traced to New France care of sick and poor; “community nursing”; from time of FN “selfless care” very much part of nursing’s ideology note 21 74: National Council of Women approved formation of VON in 1898, with professional education of women 89: district nursing, Rathbone in same year Grey Nuns est nursing in Alberta, Rathbone in Liverpool 109: nurses in military conflicts in Canada; bipartisan role of nuns’ hospitals in Quebec and Montreal, Fr and English from 1756 to 1763. “During the Northwest rebellion of 1885, a military request for nursing services shows the influence of Florence Nightingale and the experience gained during the America Civil War: ‘No volunteer nurses. If you can send an organized body under a trained head, they will be welcome.’” note 3 (CNA Leaf and the Lamp); 2 groups came, one from Mother Hannah Grier of SJD Toronto, other by Miss Miller head nurse at Winnipeg Gen Hosp 4; n 1898 nurses of VON attached to Yukon mil force: 1899 Boer War offer of Cdn govt to send nurses to Boer War Pauline Paul chapter 7. Nursing ed 109 “Although there had been a long tradition of nursing within religious orders, the movement to establish nursing as a profession for lay women in modern times essentially began with the worldwide publicity focused upon nursing and the work of Florence Nightingale.” Other groups of nurses who advocated reform, “Nightingale’s decision to undertake
nursing as a career and her widely publicized and successful demonstration of the work that could be carried out by nurses through care provided to soldiers wounded in the Crimean War had a remarkable impact on nineteenth century society both in Britain and elsewhere. Unsolicited donations streamed in; the idea soon swept the world and many established. “Historical accident” Esther Lucille Brown, to apply FN method to new schools (note 1 Irene Spry Paliser Exped!!)

Watson, Jean. “Notes on Nursing:” Guidelines for Caring Then and Now.” 80-85. Commemorative edition. Argues FN still relevant, even in post-modern age. And needed. Interconnection between person and env, person and nature, inner and outer worlds, private and public, physical and spiritual “as part of the natural healing responses of people and civilizations: the need to systematically develop nursing 82: practice” jargon, 81: need for calling in nursing, “compassion, commitment, involvement, a passion if you will for nurses to recommit to a ‘calling’ to engage in reform based on basic human caring-healing and health values, reform based on knowledge rooted in ancient feminine wisdom and knowledge, a cosmology of wholeness, connectedness and harmony that need to once again be openly pronounced for personal, public, sc and political action. Nightingale’s attunement to the interconnections between all dimensions of the personal, the public and the political parallel the voice of contemporary women who remind us again... “feminist voice.” “The ancient Nightingale wisdom is also part of nursing as caring theory.”

84: Postmodern Messages from Nightingale FN wr remains contemporary and timeless. Roots in women’s wisdom and knowledge. Basis for profession. 85: FN’s vision “Caring-healing-feminine cosmology, and worldview that Nightingale proclaimed a century ago.” good grief.

Watson, J. Frederick. The History of the Sydney Hospital from 1811 to 1911. Sydney: W.A. Gullick, Government Printer 1911. refs to FN, and to plans. numerous additions; 102: in 1867 Nightingale Wing commenced for accomm of the nursing staff which was intro into the hosp. The plans of this bldg has been submitted to Miss Florence Nightingale and it was called after her, completed in 1868, 38 rooms, bathrooms and lavs


miles, was in was Koolalee with 1200 beds. Jan 1855 [Koulali]
168: "The British hospitals were concentrated at Scutari, two
miles across the water from Constantinople. They were three in
number, having a total of 2,900 beds. Five miles north of
Scutari, on the shore of the Bosphorus was Koolalee hospital with
1,200 beds.... he [Koulali]
168: Wrote mother “The deaths in the Barrack Hospital amount to
50 a day. They are carted off, sewn up in blankets, in arabahs
and laid in layers in trenches; officers are distinguished only
by having a white wood coffin. My first view of this was an
arabah upset in the mud with the bodies all in a heap. In fact
the Barrack Hospital is a lazar house, a dead house. Everything
there is bad and I look forward with no very pleasant feeling to
being quartered there.”

This description was supported “by every published report,
official or independent.” So, pleased to be posted to Koulalee
[Koulali], “for that hospital was considered to be healthy,
comfortable and delightfully situated between the hills and the
sea. How little justified was Koulalee hospital’s reputation for
healthiness, however, is shown by the official War Office returns
which record that mortality at Koulalee was higher than in any
other establishment. In February, the month in which Heron Watson
joined the staff, 300 out of 1200 patients, one in every four,
died, the majority of fever, dysentery or other infections much
of which originated within the building itself the hospital was
to be the scene of his professional labours during the next five
months.”
168. Description of bldg.
Half a dozen rooms in one corner were quarters of Miss Stanley
and her nursing staff, lady volunteers, paid nurses and RC
Sisters of Charity of the order of St Vincent de Paul [no];
Stanley and ladies driven out by “a destructive fire” accomm
found in cramped quarters of med staff, which caused ill feeling.
Lady Stratford “a meddlesome, frolicsome, runs-away-from-home old
woman”;
169: “The nuns are better than the nurses and if I were ill I
would rather have a nun to attend me. Some of the nurses had
fever and upon my word they are almost no less. A bevy of good
cooks would be a good deal more useful and not half so
troublesome.’ The fact that the paid nurses were unskilled,
disorderly and a number were too fond of the bottle.’” The lady
volunteers: “‘The Stanley ladies did little but stroll about with
notebooks in their hands.’ Even the staff of the Scutari
hospitals, working directly under the strong hand of Miss
Nightingale, gave that masterful woman much concern and Miss
Stanley and her staff at Koolalee were beyond Miss Nightingale’s
discipline. Heron Watson’s poor opinion at this time of Miss
Stanley’s ladies and nurses was, it appears justified.
Unfortunately he extended it to all female nursing staff
everywhere and to Miss Nightingale itself.” “Heron Watson’s poor
opinion at this time of Miss Stanley’s ladies and nurses was, it appears, justified.” Unfortunately he extended it to all female nursing staff everywhere and to Miss Nightingale herself.” Called her to his sister “a very dowdy old maid”; when Stanley left matters improved under Hutton;
169: to his sister he wrote“’from what I have seen of her, which certainly has been in the distance, she is a very dowdy old maid, abut whom the less romance the better.’” then Stanley resigned her post, handing over to Miss Hutton, “under this efficient disciplinarian matters improved, and in June, some weeks after he himself had been appointed physician to the nursing staff and had got to know them well, he was able to write with greater appreciation of their work.” praised esp the Sellonite sisters, who had nursed cholera in the slums of Plymouth in 1853; Sister Anne staffed his wards, “most excellent good and delightful person.” [Koulali]
170: at Koolalee Heron Watson had 2 wards, one above the other, 120 sick and a few wounded; “The medical officer’s working day began at seven, when a cup of black coffee was brought to his bedside. He then rose and disinfested himself, there being sometimes what is described as ‘a legion of animals’ for the staff was repeatedly reinfested by new batches of patients arriving from the front. The nursing staff had nicknames for the parasites with which they were afflicted, lice being known as ‘heavy dragoons’ in contrast with fleas, which were called ‘light cavalry’ because of their speed and agility.” Breakfast, ward at 9 until 4, then 2 hours in evening. Fever horrible, only 1½ feet between beds. Too much a clerk, orders disregarded and medicines not sent, all cases have scurvy as well. “No one at home can take in the humiliating condition to which Lord Raglan has brought the army through want of the common requisites of life.” koulali
171: San com sent out. visited Koolalee 11 March. “The sanitary commission has been here and they have done us good. Their practice, I am glad to say, is sound, which is a mercy as they have much in their power.” conditions greatly improved. May “The newspapers have compelled the wards to be got into a state which is worthy of a civil hospital long founded at home.” wards “neat and tidy” Eastern Hospitals, got warm words; doctors ill
173: Greig.
General Hosp Scutari, Robert, chaplain, dysentery, within 24 hours of the two brothers’ arrival news of their presence reached FN, who was herself recovering from Crimean fever “who sent them a note which ran ‘Miss Nightingale is very sorry she cannot come to see you but has asked Miss Tebbutt (the matron) to visit you two or three times a day to see that you have all you want.’” Heron reported “Now we have everything so comfortable from them: books, soup, rice and milk porridge, jellies, perfumery, soap and snow white towels in profusion.” Heron Watson treated with “administration of mercury to the first stage of poisoning, the stage of salivation.” Developed a sloughly ulcer of the mouth and
extensive necrosis of both jaw bones; sent home. On board only opium; 174: back to Edinburgh after war, was pres of Royal College of Surgery;
175: pioneer of med educ for women; Christison waged war on other side; he opened his class of surgery in extra mural school to women; and provided clinical study; did first ovariotomy at Edin; surgeon to QV, knighted 1903;


Watts, Ruth. Gender, Power and the Unitarians in England 1760-1860. London: Longman 1998. FN 2, 107, 117, 158, 205, 209. Gaskell, Martineau, etc. reform of education. 2: Unitarians played prime role in emancipation of women from late 18th cen onward, Wollstonecraft infl by; Unitarian lawyers helped Barbara Leigh Smith draft first bill to attempt to win property rights for women; Martineau; Carpenter. Gaskell, Somerville, Eliot, FN “strongly influenced by Unitarians or came from Unitarian families respectively” So, not a claim of Unitarian status. 107: Wm Smith grandfa to Barbara Bodichon and FN

cap: “Errors by Florence Nightingale killed thousands of troops in the Crimea, says a new BBC drama.” begins: “We still think of Florence Nightingale as the saintly nurse of the Crimean war, eulogised by Longfellow as the ‘lady with a lamp,’ whose flitting image was kissed by dying soldiers as she passed through the wards. But this stereotype has more shadow than substance, for in reality she was the kiss of death to thousands of men in her care. Thanks to her mistakes, the death rates in her hospital near Sebastopol were double those of smaller regimental hospitals in the winter of 1854-5. Ten times more soldiers perished from illness than from their wounds. They would have been better off staying at the front that with Nightingale.”...then 12 months after the war “Nightingale realised her denial of hygienic practices had turned her hospital into a death camp. When she tried to publish the truth, the government decided to cover it up, she subsequently had a nervous breakdown, and then spent the rest of her life trying to atone for what she saw as a terrible crime.” Norman Stone. Hugh Small, complains that “squeezed out” by BBC. [FN did not have a hospital near Sebastopol]

Wavella contd
“father’s role in aiding her recovery” “For years Nightingale had planned to marry Richard Monckton Milnes” quotes Strachey: “a dominatrix, a vampire, who sucked energy from men and let withered hulks behind.” parental opposition to nursing “a
profession then regarded as little better than prostitution” trained at a German hospital; “Her explanation for the high mortality rate was that the army was sending her wounded men too late to be saved. In reality, her celebrity meant that more soldiers were sent to their deaths at her insanitary hospital.” Small estimates she “unwittingly responsible for 5000 unnecessary deaths.” has Lord Palmerston asked FN to investigate the deaths of 16,500 soldiers from the effects of starvation and exposure on the front line. “But her inquiry backfired; having learnt statistical skills, she crunched the numbers and realised that she was primarily at fault.” embarrassed the govt by concluding that its neglect of hospital hygiene--not army incompetence--had caused the soldiers’ deaths. Overcome by remorse, she pressured the govt to publish the evidence to mobilise opinion for public health reform. Its refusal led to her breakdown: she took to her bed for most of her remaining 53 years, orchestrating campaigns that were critical to the development of public health.” BBC Radio Times cover story end May 2008. researcher Kenneth Cavander NY, read Small.

Weaver, Cora. Florence Nightingale and the Water Cure. Malvern: Cora Weaver (self pub) 2010. 80 pp. BL. Ack CWFN! Viili “perhaps the world’s most famous invalid.” took to be for almost half her life. examines her illness and how she tried to resolve it; brucellosis only on p 50. Family in favour of water cure, and vs doctors and medicine. 2: John and Mrs Smedley and hydropathy at Matlock. Ran a successful hydropathic est. Allies with Nightingales, Peter N. Seabathing. Malvern 1848. How water cure works, circulation, packing, douche, foot bath. Carlsbad, Franzenbad, Harrogate. 1838 trip to Germany; writing done at Malvern in 1857, Bury House, Gt Malvern. 51: FN (Florence) may have been suffering from post traumatic stress disorder, in Malvern in 1857 suffering from Cr fever symptoms; 52: may have been suffering from shell shock; 52: Malvern again August 1858, January and March 1859; 63: worst symptoms did not cease until early 1880s

Weaver, Cora. Florence Nightingale and the Water Cure. Malvern: Cora Weaver (self pub) 2010. 80 pp. BL. Ack CWFN. Viili “perhaps the world’s most famous invalid.” took to be for almost half her life. examines her illness and how she tried to resolve it (no mention of brucellosis). Family in favour of water cure, and vs doctors and medicine. 2: John and Mrs Smedley and hydropathy at Matlock. Ran a successful hydropathic est. Allies with Nightingales, Peter N. Seabathing. Malvern 1848. How water cure works, circulation, packing, douche, foot bath. Carlsbad, Franzenbad, Harrogate. 1838 trip to Germany; writing done at Malvern in 1857, Bury House, Gt Malvern.

Webb, Val, Florence Nightingale: The Making of a Radical
Nicknames for women while titles for men: Florence throughout, Fanny; Florence and Liz (39) Rafael Sabatini becomes Sabatini, FN is “Florence” and SH “Sir Sidney” (17) although no such title Sir Sidney Herbert 4 “Sir Sidney Herbert’s wife Liz” 315 again the men’s accomplishments are exaggerated: Nightingale’s grandfather, whose bank failed is called “a successful banker”; “WEN” “introspective, liberal thinking” “fond of travel and intellectual pursuits” while “Fanny” insisted on getting a second home near the “right” people (23); has his duty to “legislate in local politics” and despaired of his unproductive life, he sought a seat in Parliament “or perhaps Fanny desired it for him” (23) “Fanny’s rejection of Unitarianism’s intellectual honesty and social conscience for what Florence saw as an ineffectual, socially blind Anglicanism” (25) but Nightingale respected her mother’s faith; Liz Herbert and Rev Henry Manning 40


Webster, Charles. The National Health Service: A Political History. New ed. Oxford: Oxford Univ Press 2002 [1998]. Did 2 vol official history of NHS (said to contain nothing on nursing or FN). This has refs to FN only re her status 189: ref to FN and Thatcher, but nothing on FN’s role in NHS. Few refs to nurses.

Webster, Charles. Oxford Wellcome unit. The National Health Service: A Political History. Has FN joke


of health “perfect circ of pure blood in a sound organism” any departure from this is disease, certain tendency to reparation in nature; influenced by Prof Edward L. Youmans; BL has 1984 reprint Chapter 10 has venesection, chapter 17 sick children ch 13 contagion and disinfection 234
4: obedience to doctor, fidelity to his orders, even if the necessity of the prescribed measure is not apparent to you. You have no resp beyond that of faithfully carrying out the directions received. It is true that nearly all orders are conditional, and that circs may occasional arise which would render literal adherence to the plan of treatment indicated useless, or even injurious, whence the necessity for an intelligent understanding on the case on the part of the nurse. etiquette requires nurse to rise when doctor enters;
6: prejudice against cleanliness and fresh air, even in this enlightened age; cleanliness, skin, clothing
Ed. Susan Reverby.
1885. Repr 1984
fFN on 373

gives highly erroneous statement on Seacole, omits such important international nursing pioneers as Mrs A.K. Pratt; write a review.


Welch, Mary Louise “Nineteenth-Century Philosophic Influences on Nightingale’s Concept of the Person.” Journal of Nursing History 1,2 (April 1986):3-11. printed sources only and some errors. has Enl from Locke to Hegel! and this for universal laws; on Suggestions, says inconsistent (4) eclectic “because they are a mixture of her own personal beliefs and those of certain early nineteenth-cen thinkers” borrows and embellished (but no und that she uses different voices). and has Jowett and FN “both members
of the Tractarian Oxford Movement, members of the Ch of England examining the commonalities between their religion and the Catholic Church.” good grief.

Wels, John Stephen Gary and Bergin, Michael. “British Icons and Catholic Perfidy--Anglo-Saxon Historiography and the Battle for Crimean War Nursing.” Nursing Inquiry (15 February 2015; both authors Waterford Inst of Tech), cites Irish Nursing article abstract: “Taking as its starting point Carr’s view that historical narrative reflects the pre-occupations of the time in which it is written and Foucault’s concept of consensual historical discourse as the outcome of a social struggle in which the victor suppresses or at least diminishes contrary versions of historical events in favour of their own, this paper traces and discusses the historical narrative of Br nursing in the Crimean War and, in particular, three competing narratives that have arisen in the latter half of the 20th cen and the first decade of the 21st. These are the established narrative surrounding Florence Nightingale; the new narrative surrounding Mary Seacole and an Irish narrative surrounding the role of the Sisters of Mercy. It is argued that the increased vehemence of the debate surrounding these narratives as representative of the changes that have taken place in Br society. However, we also argue that the Irish narrative and its critique are reflective of deep rooted Anglo-Protestant attitudes articulated by Nightingale and uncritically accepted by subsequent historians even in modern Br historiography.” “Yes, to debate represents changes in Br society; cites EH Carr, What is History? Penguin 1986 and Foucault; cites 6 McDonald sources: but not the Seacole book. Vol 14, Review article, Hi today on Seacole; vol 16; and War Corr; and JcIN McDonald 2012a and 2014; FN ref to Brickbat, cited in Tarbox 1990, 282

“McDonald makes pertinent points that need answering, however, her argument at times descends into that deep-rooted Anglo/Saxon caricature of the nuns’ Catholic faith overcoming nursing principle. Echoing Nightingales charges, McDonald, in order to condemn the sisters’ nursing, chooses to cite one of the more historical assertions of the 1841 rule and Constitutions of the RSMs. And without hard evidence that it was followed in the Crimea, declares that ‘threats of the dreadful judgments of God towards impenitent sinners’ and the prospect of being ‘miserable for all eternity’ are good Catholic teaching, but would not be allowed in any Nightingale school” (McD 2014 2429). Alternatively she chooses ot to emphasize the 1841 rules that emphasize ‘tenderness’ and ‘relieving distress.’” concl last 10 years change in this discourse “away from an exclusive focus on N’s role in the Cr war to a more pluralistic one in which a number of women who went to care for Br soldiery are now
seen as part of the story of nursing (for example, Rappaport 2013).”

“Catholic Irish sisters “Nightingale vilified them for their Catholicism, whilst they were in the Crimea and ignored them in her recollections of that time afterwards, except to praise one nun prepared to accept her subordination--Revered Mother Moore. No William Howard Russell wrote newspaper articles about them praising their work. The only authority that valued them was the British Army medical Service--the villain for both Nightingale and Russell (Lambert and Badsey 1998). The British Establishment, both then and now, largely ignore them because at so many levels they are the ultimate ‘outsiders’ for either a Protestant dominated past or a secularizing modern multi-racial present--Catholic, Nuns and Irish.” fin.

Foucault: Archeology of Knowledge

West, Roberta Mayhew. *History of Nursing in Pennsylvania.* Pennsylvania State Nurses’ Assoc n.d. 1926? first school of nursing in Philadelphia from Woman’s Hosp, 1863. Blockley affiliated with Pennsylvania Hosp later. “Several public spirited members of the Board sought the advice of Florence Nightingale. Alice Fisher of St Thomas Hosp, London [yes] was persuaded to head the proposed training school.” some objection to the salary she asked, some members of bd paid personally to make up difference; she wanted Edith A. Horner as asst (24). 25: Fisher’s personality and remarkable ability overcame amazing obstacles marked improvement she effected ult resulted in civil service appointments for the entire inst. and improvements in nursing influenced growth of hosps

Wheeler, Wendy and Walker, Michael. “Florence: Death of an Icon?” *Nursing Times* 95,19 (12 May 1999):24. A variation of other item. “Across eastern Europe statues of Lenin have been taken off their pedestals, dismantled and hauled off to be cut. It is in the same vein that the nursing profession must, as we enter the new millennium, start to exorcise the myth of Florence Nightingale.” Not a bad person, but. “Why is it that the medical profession still dominates health care? Why are very few nurses in the political arena?” FN cd help on that!

“The failure of British nursing to meet its potential is at least partly due to the ever-present Miss Nightingale, whose views, real or mythologized, have stopped nursing from progressing.” good grief, FN was for progress!

White, Rosemary. “Some Political Influences Surrounding the Nurses Registration Act 1919 in the United Kingdom.” *Journal of Advanced Nursing* 1 (1976):209-17. 209: Idea of reg mooted in 1874 in Acland’s preface for Lees’s *Handbook for Hospital Sisters*, said Medical Act of 1858 allows women to be reg as medical practitioners, but no provision for reg of tr nurses, ought to be
remedied. RBNA always stood for, 1887 General Medical Council passed res in favour of the “authoritative certification of competent tr nurses who, when certified, shd be subject to common rules of discipline.” 1894 Mrs Bedford Fenwick founded Matrons Council with reg as a main object; 210: BMA in 1895 passed res for, and again 1906; nurses divided in 1896 on, when Parl Bills com of BMA met majority of one vote against motion; 1903 bill for reg put forward, another 1904, and many; only when minister of health got own bill; 1902 Midwives Act set up central Midwives Bd req certification and reg; but more reasons why not; Poor Law 211: 215: General Nursing Council Dr Addison new mn of health, 25 members, 4 Poor Law nurses; Abel Smith 1960

25: Govt did not actively encourage the growth of the Poor Law nursing service, set standards as a prereq for est of tr school, but made no investment of its own, paid for out of local rates. Prob nurses formed bulk of nursing staff, as cheap labour. Okay article


Whiteside, Carol Lea. The Sources and Forms of Power used by Florence Nightingale as depicted in her Letters Written July 1, 1853 to August 7, 1856. Gonzaga University. 2004. 326 pages. 3162855. doct thesis.


P 126, footnote: “It is well known that Florence Nightingale was no supporter of female emancipation.” NO. It is often said,
incorrectly, that she was not, or even that she opposed the vote for women. But she signed numerous petitions for the vote, worked very hard for financial independence for women, for good salaries and benefits for nurses, and opposed “ladies” working for free, which brought down salaries; supported the Married Women’s Property Act, led the battle for some years (then supported it when Josephine Butler took over) on the CDA. Supported higher education for women. Etc.

W and O oppose the statement: “There were no nursing schools before Nightingale’s.” They don’t name one. Kaiserswerth gave no classes in nursing and no supervision. It did teach pedagogy. Its hygiene standards were lousy. Paris hospitals - FN was vague about what she learned. She was on wards and saw operations, but no classes are ever referred to, or supervision. E Fry’s nurses got (I think) 2 months of some kind of training.

The portrayal of FN is often nasty, drawing on bad sources that she was guilty of “making authoritative demands” (p 124), “mercilessly drove others” (I would love to see a primary source that showed this), getting “favored figures into office for her own designs” (saving lives! Getting reforms adopted!!! what nasty “designs”!), an “interfering nuisance” (yes! for good causes and for people who could not speak for themselves, ordinary soldiers and the destitute!). Her papers were “designed to manipulate those in formal power to bring about change” (good grief), then statements “which maintain that she was not really a trained nurse at all, that she had not practiced nursing before her sojourn in the Crimea, and that any training she had taken, had been very meagre” Kaiserswerth and Paris. But who had more experience or training than she at the time? Name someone! Kai and Paris were not formal training, right, but then how does anything get started? W and O fail to mention that FN had run a small hospital for 18 months pre-Crimea, where she ran the place, bought supplies, hired staff, did the nursing, and liaised with 3 eminent doctors; there were operations, deaths, palliative care, and she organized the after-care.

Her “substantial means” began only after her father gave her annuity - she was 33. Before that she had only a dress allowance. Having a rich father does not necessarily give “means.”

W and O are factually wrong on the history of nursing. P 125 “At the time of the Crimean War the world of nursing in Europe was straining to evolve from the province of the sacred on the one hand and from the profane on the other” Good grief. The nuns were not trying to evolve at all. Sisters “controlled schools for nurses” (where? Name one). They did run hospitals. FN “was not the founder of the first school of nursing.” None named.

The “relatively safe sacrifice”. FN published stats on the high death rate of nurses. 40% higher than for women of the age group, in civil hospitals. Nurses died in the Crimean War, and many were sent home invalided. But we get bullshit from W and O about “safe sacrifice” meaning “the individual expects to
relinquish neither life nor limb” but only those things not valued (p 125-6), only “temporarily foregoing the comforts and creature delights of moneyed upper-class English existence....” But she nearly died of brucellosis. No mention that she really was ill!

W and O simply do not realize how badly educated women were in FN’s time. Her nurses did not even have a high school education. Women got into London University only in the 1880s (and then only a few).

W and O mention that tasks “at times manual and offensive” yes, but the old-style nurses were hired to do precisely that. FN wanted the profession NOT to be cleaners. W and O have it backwards. FN: “Another thing is certain: a nurse must not be a scrubber. And a scrubber cannot be a nurse” (Nightingale, Notes on Hospitals, 3rd ed.

W and O’s “two schools of nursing” but university connected schools date to roughly a century after FN’s start. Totally different circumstances. P 127, of course university schools “have left far behind them the floor scrubbing and linen washing of the of nursing” (which FN worked to change for ALL nursing).

P 128 “they are told that she was responsible for the first authoritative work in bio-statistics” (what does this mean? Maybe they were told that, but it is not fact, but exaggeration).

P 128 W and O deride the establishment of her school “This is defined as the genesis of the nursing ‘profession’ and the work of this woman is seen as constituting the turning point and the consequent emergence of the modern occupation.” Meaning, she did not really do it, WHO DID? But she is only credited with this. Sly.

Of course university schools of nursing will be very different from those at hospitals. Does one need a PhD to figure that out?

P 128 “Professionalism appears not to be an issue and even the very word is used very loosely....” but look at what FN said about it! You have to read her later work to get this straight. They did not, nor do most nursing historians.

They go on a lot about the Nightingale pledge, then acknowledge in a footnote that she did not write it.

FN 150 (on quarantine; FN rejected germ theory), 115 177 (on sanitary conditions) 121-22 125 129-30 303 7: 1892 the year of the final US cholera epidemic; cites Rosenberg to make the point, p. 134 150: “Britain’s beloved pioneering nurse, Florence Nightingale, rejected the germ theory as it seemed to undermine her efforts to improve sanitary conditions in hospitals” (Rosenberg, 1977a, 134).

50: “While the prevailing Victorian religious mood influenced Nightingale, Unitarianism, in particular, played an important role in Nightingale’s life.” gives criteria, re salvation.

Widmer, contd(2)
329: “The rapid filling up of the hospital by invalids and the wounded sent down from the front occasioned enormous evils that prudence and foresight should have prevented. Vessels were arriving almost every day, with fifty or a hundred or two hundred cases, and this rapid increase was not met by any corresponding increase of surgeons and nurses x. The death rate was awful x. The burials were at night to avoid a panic.

The great hospital x had reached its highest point of misery and disorder--not less than six thousand invalids, with no sufficient supply of medicine or other service and with no organization to use to advantage the existing means. Such scenes of suffering and wicked neglect I never witnessed....Men were dying; some were dead and the sheet drawn over the face. The smells and sights were awful, and I turned back, but seeing in one of the rooms a fine-looking soldier raised to a half-sitting posture, I saluted him and asked him what they needed most. “Oh, Sir” he said, “night watchers. The lights are put out at nine or ten and we are told ‘Every man is to be quiet and go to sleep.’ But after a time there is a cry for ‘Water, water!’ and one is crazy and sings, another curses; some get up to help a comrade and are made worse by it; and so the long night wears away.”

I offered to organize a night-watching corps of volunteers, but Dr Menzies rejected the offer with disdain.”

Purveyor said to me, “some women have come to the hospital! A Miss Nightingale, with a force of assistants, has come and taken possession of rooms at the right of the front entrance. Was anything ever more improper than women in such a place?”

I replied “It is time, Mr Parker, that somebody shd come in here and do something, for I do not believe that any x hospital x every equaled this in disorder, filth and suffering.” “I know it,
I know it,” he said. “But these women will not stay long.”

Widmer, contd(3)

Reception accorded FN:

“Dr Menzies set himself to make her position insufferable. He soon found that she was master of the situation. She was a quiet, self-possessed, interesting, intelligent lady, evidently wholly absorbed in her work. She had the faculty of command....” culminated with FN asked Menzies to open storeroom Number 7. He replied no articles there, all went up to the front.

“Well, I would like to have the door opened, or I shall send men to break it down.” evidently alarmed him and he did, she found what she wanted, Menzies’s star fell and hers ascendant.

“Not long after Miss Nightingale’s arrival she visited the smaller hospital at Kulelie [Koulali], which was still being supplied with the ‘beer bread.’ She expressed surprise at the delicious bread and asked where it was obtained and why it was not being used in the great hospital. When she heard the whole story, she immediately requested a new contract with the mission bakery, at an increased, price, for the Barrack Hospital. This arr contd until the end of the Crimean War.”

Grandfa supplying not only the 2 hosps but army camp also, up to 20,000 lbs of bread a day, and Russian prisoners who did not like it, black bread;

Also coffee; grandfa roasted it; excellent results, then discontd when steamer brought English coffee;

Nov 1854 transport arrived at Kulelie [Koulali] with 250 wounded, he visited, destitute of underclothing and covering, so much vermin preferred cold rather than vermin; even 2 weeks later “equally destitute”; asked chief physician why no clean clothing, told no satisfactory laundry facilities had been found, and too filthy to be cleaned anyway; pile saturated with mud, pus, blood, stench terrific and vermin abounded; Crimean lice “large, fat, disgusting, overgrown, hellish-looking creatures.”

Late in war cholera struck bakery workers; got them working again. Ref to Pasteur and Koch not known yet; French Army Chenu ascribed spread of cholera to ‘morbid vapors’ and ‘noxious emanations’ (Rapport au Conseil de Santé des Armées 1865, p 87); 571: Grandfa took clothing at Koulali improved a laundry in the huge kitchen, had almost a half mile of clothesline strung in large garden, engaged 22 laundresses and 2 firemen and took over; odour terrible, people mobbed; contrived to manufacture a hand operated washing machine from a beer cask; got tongs and put first load of clothes himself; soon laundered as many as 3000 articles per day, brought comfort, and employment; profits paid for new church; FN (exaggerated praise):

“Very soon Miss Nightingale transformed that hospital. From the first, she divided her forces into night watches, and there were nurses and assistant nurses walking those corridors and wards all night long. The nights were no longer lonely. Every want was
attended to, every pain, if possible, assuaged. The death rate was changed immediately from the moral effect, no doubt, of sympathy and woman’s gentle care. I had seen some instances of brutal treatment from surgeons, possibly fuddled with drink, but there was nothing of that after Miss Nightingale came.” Had superior knowledge... did not see much. “Graceful and agile in form and movement, with the light of a high and holy purpose pervading her whole personality--single, firm, determined. I think of her in that scene of disease and death with the deepest interest and admiration. He also gave her a Book of Psalms large print for soldiers with “weak eyesight,” now at Columbia. The mission bakery also had a contract to supply bread to the smaller hospital at Koulali, which continued. It happened that Nightingale on a visit there discovered the “delicious” bread, asked where it was obtained and why it was not available at Scutari. “When she heard the whole story, she immediately requested a new contract with the mission bakery, at an increased, price, for the Barrack Hospital. This arrangement continued until the end of the Crimean War.” Widmer 570.

Widmer, Carolyn Ladd. “Grandfather and Florence Nightingale.” American Journal of Nursing 55,5 (May 1955):569-71; 569: grandfa was Cyrus Hamlin, Yankee missionary, baker and washwoman for soldiers in Cr hosps, he a cousin of vice president to Lincoln; was missionary in Turkey 1838; Widmer a Yale grad, dean at Univ of Conn School of Nursing; from his father’s autobio; his bakery to supply employment to impoverished Christian families; made a yeast bread, called “beer bread” because the yeast from a brewery; old Selimiyeh Barracks; grandfa summoned by the doctor who was organizing the hosp and had come across his beer bread; supplied 6000 lbs a day to Scutari and 800 to Kulelie hosp; 2 lots on Sat, none on Sunday; profit put into a church bldg fund. “Unfortunately, however, the mismgt and graft which Florence Nightingale was shortly to encounter upon her arrival at the Scutari hospital were already rampant. In due time the chief physician, Dr Menzies, and the second purveyor of the hospital met with Grandfather and demanded a share of the bakery’s profits, stating that this was customary in all their contracts. When he indignantly refused, they began a campaign against his bread, employing such tactics as inserting baked bedbugs in the loaves and sending them to the commissariat. As a result, the contract was canceled and given to a baker who was, we assume, more cooperative, although his bread was inferior and more expensive. Righteousness triumphed shortly, however. Almost at once the price of flour rose 50 percent; the mission bakery would have been ruined had its contract not been canceled, and the new baker met with serious financial loss.”

570: Grandfa visited:

Wieslander, Henning. “Florence Nightingale och Hennes Svenska
Wiki 1976 Callista Roy, adaptation model of nursing, using FN’s environmental principles

1873, Connecticut Training School for Nursing opens, 3rd in US est after FN model, first to be chartered in US: in 1926 became Yale School of Nursing

Wikipedia Timeline of nursing history in Australia and New Zealand has 4 entries for 1850s. one is FN and nurses leaving for Cr War;

1855 (the only note for it) Mary Seacole leaves London on 31 January to establish a ‘British Hotel’ at Balaklava in the Crimea.

1857 Ellen Raynard creates the first group of paid social workers in England and pioneers the first district nursing programme in London

Wikipedia entry on FN. uses “Fanny” for Mrs N. Christian divine calling, has lots of dates and names wrong. “When in Rome in 1847, recovering from a mental breakdown precipitated by a continuing crisis of her relationship with Milnes, she met Sidney Herbert…” (no mention of EH). illness prob Brucellosis, “possibly combined with chronic fatigue syndrome. She barred her mother and sister from her room and rarely left it.” “In 1869 Nightingale and Elizabeth Blackwell opened the Women’s Medical College.”

1870s mentored Linda Richards; FN was a “Christian universalist.” like Origen, crucifixion of JC provides atonement for all sins. credits William Playfair (1759-1823) Scottish engineer and pol ec with first pie charts, re time series and a bar chart. The Commercial and Political Atlas 1786.

United States Sanitary Commission. planned by Henry Whitney Bellows, a Mass clergyman, and its only pres, first exec sec was Frederick Law Olmsted, who designed Central Park, NY. her tutor was James Joseph Sylvester (1814-97), his most distinguished pupil, arith, geometry, algebra;

Wilcox, Herbert Sydney director of 1951 The Lady with the Lamp with Neagle


Wildman, Stuart and Hewison, Alistair. “Rediscovering a History of Nursing Management: From Nightingale to the Modern Matron.” International Journal of Nursing Studies (abstract only seen)
Univ of Birmingham, School of Health and Popl
hi of nursing mgt lost in celebratorial and uncritical accounts
of nursing as a whole, important influence of key figures other
than FN overlooked and it emerges that nursing mgt has a longer
and more complex history than is generally accepted.

Wilkins, Frances. Six Great Nurses: Louise de Marillac, Florence
Nightingale, Clara Barton, Dorothy Pattison, Edith Cavell,
Elizabeth Kenny. London: Hamilton 1962. FN 34-60. cites Tooley,
Cook Omalley WS. okay not great coverage. Florence. uses WS name
for inst. but has laundry and extra diet kitchens.

Wilkinson, A. A Brief History of Nursing in India and Pakistan.
Trained Nurses’ Association of India. 1858. Author nursing supt
St Stephen’s Hosp, Delhi 1908-38, pres of TNAI 1940-47.
Chap 1 gives early background to 1500 BC, Hindu writings,
Athravaveda, demons. 700 BC medicine with Brahmins, scholars and
priests.
700-600 BC halls of healing, or hospitals, founded. Ayarveda,
science of life. Treatises, stress on absolute cleanliness in all
depts of op room and for all instruments; leading authority
Charaka, use of massage. Disease prevention;
2: innoculation, but with diet, ceremonies
4: nursing included in Araveda. “There are more details of
nursing in the old India records than in those of any other
country in the world.” includes construction and equipping of a
hospital, “science of bldg” shd be devoid of draught, well
ventilated and well lighted, not exposed to direct sun or to
dust, smoke or foul smells, have bathing places, kitchens and
lavatories with ample space; a herbarium for medicine plants and
for animals; 500 BC to 300 AD rise of Buddhism and medicine rose
5: “Compassion for all living creatures, which was an essential
part of the creed of Buddha, showed itself in ministrations to
all sufferers. In the rule of life of a Buddhist monk, assistance
to the sick was a part.” famous Buddhist king Asoka got large
number of hospitals est, for humans and animals. Vet sc also
rose. Monastic universities had medical schools; but surgery
decline because law of Buddha forbade dissection of animals and
discouraged anatomy studies; with decline of Buddhism and est of
Brahmin influence, Buddhist hosps disappeared; Hindu cast system
became more rigid, aversion to any kind of physical contact
involving “pollution” grew, “this was the chief cause of the
decline of medicine as a profession. Then came the Mohammedan
invasion leading to the conquest of India about A.D. 1200, which
accelerate the process of decline.” most advanced period of
medicine in India was 250 BC to 750 AD; about 1000 AD public
hosps disappeared, next mention not until Br Army
Chap 2 Military nursing
7: FN long gap, until after 1854 FN brought about reforms in the
Army Nursing Service (NO, in civil mainly), inevitable that her
thoughts shd turn towards India, never visited but her “accurate knowledge of conditions in the hospitals there is all the more remarkable”; got her info from research, sent out questionnaires 8: RC appointed; nursing in mil hosps practically non-existent then, and quality poor; hosps had soldier attendants; from 1664; 21 Feb 1888 nursing sisters sent out by govt to organize mil hosps, landed in Bombay, fully qualified certificated nurses, foundation of the Indian Army Nursing Service, which developed into one of finest in the world. Cites WS first lady supt Miss Locke, Bart’s, 2nd Miss Foxley. Work to get orderlies trained; has pics of hospitals, but no indication of FN influence, or pavilion style; Dufferin hosps; Bielby story


Williams, Keith. “Reappraising Florence Nightingale.” British Medical Journal (Christmas 2008):337:a2889 claimed that popular image of her as “the angel of Scutari” and “genius” behind much medical and nursing reform concluded that she “actually impeded” progress, thanks in part to her “class-based hostility to military doctors.” John Hall and Andrew Smith get positive assessments while Nightingale is responsible for “failures.”

That Nightingale was far from alone in being critical of the army’s conduct of medical operations can be well seen in the letter Lord Palmerston, as prime minister, sent with Dr Sutherland, as head of the Sanitary Commission, to take to Lord Raglan, commander of the forces, describing their mission “to put the hospitals, the port and the camp into a less unhealthy condition than has hitherto existed.” Palmerston asked Raglan to “give them every assistance and support in your power,” noting that they would be “of course...opposed and thwarted by the medical officers, by the men who have charge of the port arrangements and by those who have the cleaning of the camp.”

Their mission will be ridiculed and their recommendations and directions set aside, unless enforced by the peremptory exercise of your authority. But that authority I must request you to exert in the most peremptory manner for the immediate and exact carrying to execution whatever changes of arrangement they may recommend, for these are matters on which depend the health and lives of many hundreds of men, I may indeed say of thousands. It is scarcely to be expected that officers, whether military or medical, whose time is wholly occupied by the pressing business of each day, should be able to give their attention or their time to the matters to which these commissioners have for many years devoted their action.
and their thoughts.

Williams, Noel T. St John. *Judy O’Grady and the Colonel’s Lady*. London: Brassey’s Defence 1988. on plight of soldiers’ wives in Cr War, or soldiers’ families in vol. 15. Some on FN, but she for soldiers, not wives; chap 8 “Florence Nightingale and the Camp Followers at Scutari” 101-15; 107 soldiers moved, cholera at Varna.

Williams, Keith. “Florence Nightingale: The Need for a Reappraisal.” *Wellcome History*. online No. 37 2-4. 2008. doctoral student UCL. despite F.B. Smith “some hostile comment” in, relatively recent! “the popular image of her remains that of the ‘Angel of Scutari’ and the ‘genius’ behind much medical reform and the development of nursing. However, an examination of primary sources reveals that much of this reputation is based on myth, the problem being that historians generally have not undertaken the breadth of primary research necessary to arrive at an objective re-evaluation of her work, her achievements and her role in the movement for medical reform in the 19th century.” esp mil med. “far from guiding the reform and development of military medicine, actually impeded its progress as a result of her class-based hostility to military doctors.” snobbery. attacked AMD doctors. “Hagiographies”; critical of FN KCB remark of Hall, but does not acknowledge his failure to inspect; 5: “her recorded failures” failure to stop bldg at Netley; idea of Army Med School proposed earlier than FN; destroyed papers; Smith had father a poor border shepherd, rose (3); 2: “Nightingale seemed to have no hesitation in participating in the attacks on the Crimea army doctors, and on the Army Med Dept in general. Indeed, she became noted for her exaggerated statements and vituperative asides...She had a particular animus toward Dr Andrew Smith, who overcame a lowly background....” 3: “What Nightingale achieved at the hospitals at Scutari has been subject to some debate, and there is much evidence to suggest that she did more harm than good.” “the first media-created celebrity” “As is often the case, many of these myths have been reappeared so often that they have attained the status of fact, but are myths that are easily exploded by reference to archival material.”

An aberrant gentlewoman 185
Enter the hero 164
The summons 168
the lady supt 172
Army reformer 179
Woman emancipated 186
Quaker angel 188
Founding her order 193
Dangers of Fashion 207
Octavia Hill - the genius of women
A new workshop 216, pavilion system. Ends: “Today we take for
granted that there is a pure science of healing which can be
cultivated apart from actual sick people, in rooms where microbes
are grown like vegetables...But the beginnings of sc medicine
were very different, and we can follow them in the career of
a...as...”

Williams, Ann. “A Professional Pilgrimage: A History of the
Florence Nightingale Committee of Australia 1946-93.” Nursing

Williamson, Graham R., Jenkinson, Tim and Proctor-Childs, Tracey.
Sage 2010. 216 pp Write a review; review F. Mhiana, Nurse
Education in Practice 13,6 (2013) who is Stuart undated?
“In this chapter we will be looking at concepts of caring. We
will begin with a brief mention of the impact of key figures in
the history of nursing, Florence Nightingale and Mary Seacole.
They lived in a very different society from our own, and so we
will also examine some more contemporary ideas about what caring
is....”

Florence Nightingale.... [start ok, rich, destiny, religious
convictions, then “in early adulthood she became a beautiful and
accomplished socialite...” Holliday and Parker 1997]

“Nightingale eventually broke with her family and trained for
three months in Kaiserworth [yes, wrong] in Germany under the
auspices of a religious order in which deaconesses cared for the
sick....” 1853 supt. [gets name right of Harley St!].... pages
missing

Chapter 7. “The caring, culture and tradition in nursing
discusses some issues concerning concepts of caring. It begins
with a brief mention of the impact of two key figures....
“Mary Seacole’s story is very different from her contemporary
Nightingale’s, but she demonstrated leadership, fortitude and
heroism in no small measure. She was a contemporary of
Nightingale who also cared for soldiers in the Crimean War and
became familiar and respected in Victorian society. But her name
and achievements are now much less celebrated.”... mother (Stuart
undated)

.... “Above, we saw how Florence Nightingale and Mary Seacole
took on ‘caring’ roles. Cites A. Stuart. Undated RCN.
“She married an English sailor, Edwin Seacole, godson of Lord
Nelson, but when he died young she required an outlet for her
talents. Being a restless soul, she decided to go to the Crimea
to help the wounded. She initially went to England and
volunteered her services to Nightingale’s organisation and to the
War Office, but was rejected, probably because of her colour and
because she was not of the class or background that was acceptable to Nightingale, who was not keen on Seacole personally (Stuart, undated)....

Williamson, Lori, ed. Nightingale and the Birth of Professional Nursing. vol 5 has facs of Nash, Nightingale to her Nurses; Introductory Notes vol 2


Wilson, A.N. The Victorians. London: Arrow 2002. Praises Seacole. Cites her in saying 177: “When Seacole reached London, Florence Nightingale had already left for the Turkish capital. She went to the organization in London which was recruiting nurses for Miss Nightingale’s hospital at Scutari...and was turned down flat, despite her obviously useful qualifications.” (But the recruitment was w/o FN’s knowledge or consent). cites pp 90, 121. Has FN referring to herself in 3rd person. Then at pic of FN slams her, with no citation. “But it was Mary Seacole, whose services Miss Nightingale rejected on racialist grounds, who nursed the sick in the front line of battle in the Crimea itself and whose jolly ‘hotel’ provided the men with home cooking and a much-needed commodity, handkerchiefs.” (At FN illus p178 plus)


Wilson, Jennie. Infection Control in Clinical Practice. London: Baillière Tindall 1995. By a nurse. 140: infection control structure in hospitals started in 1940s. Cites Simpson, “surgical fever” HAI 139; HAI any infection developing as a result of treatment from which patient not suffering when admitted “opportunistic pathogens” susceptible sites from invasive procedures. 140 FN credited with improvements in hospital 287: isolation procedures for control. Gloves, gowns, bed isolation, screen. “The purpose of the screen was to keep the patient away from other patients and to remind the staff to take barrier precautions.” FN realized transmission rarely from air or environment but body fluids.

Wilson, Emily. “Nurses.” Union Delegates Vote to replace. Daily
Mail 28 April 1999. “Nurses have voted to throw out Florence Nightingale in favour of more politically correct role models. Delegates at Unison’s annual conference decided the Lady of the Lamp—who was white, middle class, wealthy and Protestant—should give way to less ‘outdated’ figures. They suggested that women such as Mary Seacole, a Jamaican healer and entrepreneur whose career as a nurse was somewhat less conventional than Nightingale’s, would better represent today’s nurses.” but Alex Attewell described the move as a great mistake and dismissed criticism as inaccurate. She was a feminist, he said, campaigned for right of women to speak. Comments after vote “unanimously to ask nursing’s international body.... to move International Nurses’ Day from Nightingale’s birthday of Nightingale May 12 to a more appropriate date.” too domineering and hierarchical. Wheeler. “All over Eastern Europe, statues of Lenin are being taken off their pedestals. It is in the same vein that the nursing profession must, as we enter the new millennium, start to exorcise the myth of Florence Nightingale.” went on to claim that Nightingale believed “nurses shd be subordinate to doctors, was against registration of nurses, opposed their three-year training, did not see mental health as afield for nurses and had ‘questionable success’ at her hospital in the Crimea.” Attewell, said she achieved so much more than the legend suggest, wrote books, etc, forward thinking;

Wilson-Barnet, Jenifer. “Speaking Volumes: Florence Nightingale to her Nurses.” THE (1 July 1996) online. Prof of nursing and midwifery KCL

Winkelstein, Warren. Florence Nightingale: Founder of Modern Nursing and Hospital Epidemiology.” Epidemiology 20,2 (2009): “According to Nightingale, the hospital case-fatality rate during the first months after her arrival was 32.8% note2. [but note 2 not on Crimean data at all], prof in School of Public Health, former dean UC Berkeley (1922-2012):311. DOI 10.1097/EDE.Ob013e3181935ad6. 1 page article “Although Nightingale did not accept the concept of bacterial infection.
“Within 6 months, the hospital case fatality had dropped to 2%.” when she returned 3 years later a national heroine, may have been chronic fatigue syndrome. Lived as recluse for 50 years, but influential, skilled in maths; cites Notes on Hospitals 2 papers pub; ref (note 2)
author: C.E.A. Winslow (1877-1957) leading theoretician of the American public health movement

Winslow, Charles-Edward A. “Florence Nightingale and Public Health Nursing.” Public Health Nursing (1946):46:330-32. was speech at Florence Nightingale Honors Day Ceremony, Town Hall, New York 13 May 1946, delivered by Dr Hugh Auchinclos, Presby Medical center, New York. Memorial chair in her name unveiled as a tribute to all members of the nursing profession. Dedi of the chair made by Gertrude Lawrence, actress, read Longfellow’s poem. Unveiling by Lawrence and Annie Warburton Goodrich, dean emeritus and founder of the Yale School of Nursing; speakers; okay on background and conditions at Barrack Hospital. Wrong: “In February 1855, the death rate in this hospital was 420 per 1,000; in June 1855, when Florence Nightingale returned to London as a national heroine, it was not 420 but 22. What manner of woman was this who wrought such miracles in the Crimea? She was best known as the ‘Lady with the Lamp’ who brought a glow of comfort to the suffering. One of them wrote, ‘What a comfort it is to see her pass even. She would speak to the one and nod and smile to as many more, but she could not do it all, you know. We lay there by hundreds, but we could kiss her shadow as it fell, and lay our heads upon he pillow again content.’” no ref. [got year of return wrong, so speeded up death rate reduction; exagg claim]. FN more than ministering angel, “an executive of the first order and a valiant fighter for the cause.” Cook. More than sympathy and energy, energy directed “by constant and rigorous scientific criticism. The knowledge of sanitation a century ago was incomplete by modern standards. It included no recognition of the microbe, but it had cor 331: recently grasped the broad generalization that dirt and disease were intimately related. What was known at the time, Florence Nightingale clearly understood. Above all, she checked all her efforts by statistics, with a scientific caution far ahead of her time. She was in spirit, the ‘Lady with the Slide Rule,’ as well as a lady provided with the lamp of compassion and the broom of efficiency.” [exagg claim]; first of contributions in hosp construction; John Howard interest, then NonH and many shorter pubs, “accomplished wonders for hospital reform.” “She argued with power and passion for adequate water supply and waste disposal, for cleanliness of the wards and the bedding, for control of overcrowding, for heating and ventilation, for lighting, for adequacy and sanitation of food supplies. She fought for all these things in England and, by so doing, she made the way easier for such men as Goldwater half a century later in the United States. The hospital administrator of today -- where he is conscious of it or not--is building on the foundations laid by Florence Nightingale.” 2nd: public health practice “will
always bear the impress of this great pioneer is military medicine." Army in India, RC, results analyzed herself, final report. As a result of RC report on India, "the death rate for the army in India was cut from 69 per 1000 to 35. It has been truly said that this was “a complete example--history does not afford its equal--of an army, after a great disaster arising from neglects, having been brought in to the highest state of efficiency.” [Crimea, not India?] then got Army Medical School est., provided for first time training in hygiene and san. “I doubt if General Simmons and the other leaders who planned the health program which so successfully protect our soldiers in Asia and Africa and Europe thought of their debt to Florence Nightingale, but their task would have been much harder without the background of the years of progress along the lines she traced.” Finally, angel of the Crimea, profession of nursing, when a menial occupation. “Florence Nightingale transformed it into an honorable profession.” first school, example for Bellevue in 1873 and led to university schools Western Reserve and Yale; “She crated the profession of nursing almost singlehanded.” “Furthermore, from the beginning, she visualized the nurse not merely as an attendant on the sick but as a teacher of hygiene.” health missioner, guide and teacher; “She demanded a trained medical officer of health in each area (an end not yet attained in one third of the counties of the United States) with trained sanitary inspectors and ‘health missioners.’” Bucks ex. “Here was the conception of the public health nurse in its vital essence. It is beyond question her inspiration, which has placed the nursing profession in the forefront of social consciousness with regard to the broader and more constructive meaning of the word ‘health’ or ‘wholeness’ and not merely the freedom from disease.” FN guided Lillian Wald and Adelaide Nutting and Annie Goodrich.... NonH cholera. “We are at present confronted with a gospel of resignation somewhat similar to that which Florence Nightingale deprecated. Only today it is the God of laissez-faire who is invoked to stop all rational progress. We have indeed accepted the fact that the physical universe is controllable, that a water purification plant represents a law of nature just as truly as a typhoid germ.” Hayek road to serfdom. FN wd have played havoc with such mystical dreams. Economic laws in themselves no more essentially beneficent than physical. Both may be utilized for our common good, by “the intelligent and vigorous application of the human mind and the human will to the tasks of the common welfare.”

Winslow, C.-E. A “Nursing and the Community.” Public Health Nursing 10,1 ()58-63 repr of 1938 article not FN, Author Dr PH; bacteriologist “seminal figure in public health” taught at MIT; founded Yale Dept of Public Health at Yale Medical School, prof and chair of dept, also instrumental in founding Yale Nursing School, pres of Am PH Assoc, etc. leader of public health
210: ref to FN, Eliz Barrett short term disabilities


Wolstenholme, G.E.W. FRCP “Florence Nightingale, New Lamps for Old.” lecture 11 May 1970, in R.M. Shaw et al (Royal Society of Medicine) *All Heal: A Medical and Social Miscellany.* London: Wm. Heinemann 1971: 201-15. Night nurse needs light that does not disturb the patient, typical of detail; 206: “Florence Nightingale was totally opposed to the very idea that diseases were caused by germs, and retrospectively she may be subject for mockery on this ground.” but believed in facts. Her crit of Netley led her to write 16 Sanitary Defects in the Construction of Hosp Wards, in great detail, use of Matters affecting, ref to Henry Hurd of Johns Hopkins [germ theory wrong on] was pres address to Royal Society of Medicine 1970 on 150 ann of her birth. also has article on Frank Buckland--Medical Naturalist citing FN on his pet bear Br Assoc 1847, party in Botanic Gardens. Canon Buckland first pres of Br Assoc when met at Oxford 1832; then in 1847 Canon B became dean of Westminster; menagerie at deanery; young Buckland worked with T.H. Huxley


256: 73% in 8 regiments, I am a bad mother.

258: “The mortality of the Crimean disaster, 73 per cent in six months from diseases alone, was the ghastly fruit not of war but of the system which controlled the health administration of the British Army.” and still in operation. No ref. [exagg claim]

W.H. Greenleaf critique: of this biography, which gives it much credit as a “fascinating” account, with “intense and graphic liveliness,” points out her many errors of fact and mistranscription, and extensive use of Cook, not properly acknowledged (194). Greenleaf’s examples are drawn mainly from the Crimean War period; here a few crucial ones from other areas are given. Moreover, one must note that the “attractive narrative style” he praised comes with a total failure to specify sources--no footnotes or endnotes; 94-99 on Suggestions, 96 re FN meeting Richard Monckton Milnes at Palmerstons, said to have been recounted in Cassandra; 98 bit on Stanley asking FN to persuade his sister not to convert to RCs; 35: states WEN a Unitarian; Fanny and W.E.N. normal uses

-- “Florence Nightingale Revealed.” *American Journal of Nursing* 52 5 (May 1952):570-72. re her personality and philosophy


Woodhead, Linda, ed. *Reinventing Christianity: Nineteenth-century Contexts*. Aldershot: Ashgate 2001. St Deiniol’s I 10 247 Refs to Suggestions 16-17, 199-210, no pubs of FN, subversive and female Christ, “In a similarly heretical style she speaks of the need for contemporary saviours. For her the Christ is clearly not sufficient as a type of what human nature may become.” cites Strachey insults of FN (16); Hilary Fraser and Victoria Burrows, “The Feminist Theology of Florence Nightingale.” 199-210 on Poovey’s ed of Suggs, and nothing else! No context, then has Punch, Strachey again and Poovey W-S

-- Lonely Crusader?


Woodward, John. *To Do the Sick No Harm: A Study of the British Voluntary Hospital System to 1875*. London: Routledge & Kegan Paul 1974. author Sheffield. good book. argues FN, basing her analysis on Farr, wrong on hosp mortality; much less, as argued by Bristowe and Holmes of St George’s; Bristowe and Holmes collected
data on incidence of hosp diseases present when visited the hosp, 1 day only; pyemia chosen, 1862, different results from FN (116); her “sensational outburst” and other authorities; Simpson, amps, criticism of his stats (117); 118: Lincoln Co Hosp in 1860 had hosp diseases, tried stoving the wards, but had to evacuate; Bristowe did report, said cd not bring up to standard; new bldg opened 1878; UCH and Erichsen, but out of context (119); Appendix A Comparison of the Mortality Rates presented by FN and Fleetwood Buckle; her Table A6.1 in Notes on Hosp 1863 used annual report of Reg Gen 1863; which had fnote stating that morality of any one hosp qualified by fact that the mortality is not deduced from the division of the deaths by the ave no. of patients, but by the number on one particular day, but this note not included in the table pub by FN, “thus creating a totally erroneous impression about the rate of mortality in hospitals.” (163); did she change it in subsequent eds? good grief table shows mortality of 56.87, 90.84 etc.

Woolf, Virginia. A Room of One’s Own. 1929, 69-70. info Poovey cites FN that women never have a half hour of their own, how Jane Austen wrote.


108: on FN 180: miasma could be countered by hygiene.

Worboys,2 Michael. Spreading Germs: Disease Theories and Medical Practice in Britain, 1865-1900. Cambridge: Cambridge University Press 2000. 2 mentions of FN: 24 “The critics, with Florence Nightingale amongst their leaders, were more generally critical of medical and surgical practice for being reactive, waiting to undertake the usually hopeless task of treating already developed diseases rather than proactively trying to prevent illness arising in the first place.” ref to 1860s, “hospital diseases”, because origins in env conditions ought to be preventable, higher mortality rates in hosps than in private practice....[then the quote]; 77 FN aided and abetted Farr, but no ref to “germ practitioner” not very quotable 51 cattle plague of 1865 and germ theory. Worboys at Sheffield.

pages; 1 chap on FN, Pringle, von Olhausen, 1st Am tr sch, VON, Waltham. FN 50-76; met summer of 1895, FN gave her a note of intro to Crossland, FN had rec the Metro Distr Nursing Assoc as basis for Queen’s Jubilee Institute, anecdotes; Gill Wylie in report First Report of the Committee on Hospitals of the New York State Charities Aid assoc 23 December 1872, had 3 months in Eng and Cont, reported on St T, did not see FN, but got letter from her Pringle 77-85, came for 1 year, stayed almost 2, Worcester, with Macleod and et al visiting schools abroad 1904, to Joseph Bell, Bell. “He told us how, thirty odd years earlier, when he was yearning for the higher development of the Royal Infirmary, he had appealed to Florence Nightingale, and how she sent to them from the School at St Thomas’s one of the young sisters (head nurses, we call them).” (78), then...Pringle, almshouses in Ireland;

Worcestera Nurses and Nurses contd
83: Pringle’s reluctance to work for any but RCs when Worcester went to look for her; but Waltham had both RCs and Prots, homely old-fashioned ways, but “called out the best in every one”; Baroness von Olhausen, Mary Phinney (1818-7) mar 1858, American, widow, volunteered with Dorothy Dix; Chapter 8 VON 105-17 in 1897 Ly Aberdeen asked about Waltham method of tr nurses, interest in district visiting nursing, and it the only Am school that taught it, had heard about through Cdn grads; she visited, then W got telegram from Earl Aberdeen, gg, asking him to visit Ottawa to advise on est of an order of visiting nurses, in commemoration of diamond jubilee; went, but doctors hostile...Ly A wrote notes to the doctors, buttered up; Osler sided with them (110), but W went to Govt House in Toronto, had got hostile message from Osler, again Ly A sent personal notes to the doctors, spoke for an hour, insulting questions (112), gave stirring pro Victoria speech and won them over!
-- “Florence Nightingale May 12 1820-1920.” (12 August 1920):193-201. address given at Boston on 100th anniv of birth
H1/ST/NC12/9/1
108: Ly Aberdeen wrote personal note to 70 doctors, 60 came; 109: Waltham asked Osler to introduce him to former Toronto colleagues, he urged him not to go into such a hostile camp, and have nothing to do with ‘those pestiferous Aberdeens’” but had already written to some of his friends not to scalp him at first sight. Letters were salvation, and later Osler assoc with her in anti-tuberculosis work in Ireland; Goft House in Toronto, evening, smokes, booze, food, spoke for an hour; 112: asked how much paid to work for the Aberdeens?

Wortman, Julie A. “Even Church Calendar was Cause for Argument.” Episcopal Life September 1991:12. Pic of FN: “Florence Nightingale: hardly a model?” controversy at General Convention
when a move to remove “English battlefield angel of mercy
Florence Nightingale from the list of those proposed:” led to
charge of church double standard; approved only 5 new
commemorations, with rest referred back to the Standing
Liturgical Commission for further study. “The cloud over
Nightingale formed after she won her first vote at the 1988
convention. ‘She was a vindictive woman who was virtually an
atheist by the end of her life--hardly a model,’ said retired
Bishop Vincent Pettit of New Jersey, outgoing chair of the
liturgical commission, noting that the reformer may have died of
a venereal disease. Eau Claire’s Bishop William Estland agreed.
‘To include Florence Nightingale in a list of important human
beings who have made great contributions to the human race, and
esp furthering the cause of nursing, is totally appropriate,’ he
said. ‘To include her as a saint of the church worthy of
 emulation in Christian life is a travesty.’ Orris Walked:

Edward Wrench reported the lack of such basics as bedsteads and
medicines, and that the “director general almost forbade use of chloroform,” which they used only “for the more serious
operations.” Moreover:

Nightingale justly received great praise for the improvement
she effected in the larger hospitals. Had the surgeons been
given her power to obtain what they required regardless of
cost, much of the misery and mortality in the hospitals would
have been averted before her arrival. (208)

Medical Journal (22 July 1899):205-08. description of cases,
cholera, fever, no bedsteads, practically w/o medicines; director
general almost forbade use of chloroform (207); “Miss Nightingale
justly received great praise for the improvement she effected in
the larger hospitals. Had the surgeons been given her power to
obtain what they required regardless of cost, much of the misery
and mortality in the hospitals would have been averted before her
arrival.”

95 (April 1949):512-13. Col website

Wrigley, E.A. and R.S. Schofield. The Population History of
(criticism of, Wrigley got a knighthood)

Wyatt, John. History of the First Battalion Coldstream Guards
during the Eastern campaign from February 1854 to June 1856.
London: 1858. brief ref to. Battalion surgeon, re deaths in hospitals. battalion surgeon. no publ. 132 pp. no index.

3: departure 21 April on Vulcan, to Scutari on the 29th,
4: French got vegetables on arrival, so scarcity for British
5: Varna. General Hosp at. serious cases transferred to.
32: operations on slab of table, chloroform usually
60: “The first return of convalescent men from Scutari, from
wounds received in action at Alma and Inkermann, was on the 9th
of March, and they all spoke in the warmest terms of gratitude of
the kind and unremitting attention they had received from Miss
Nightingale and the lady nurses.” difficulties in supplies.
61: because hard ration biscuit, and their digestion debilitated
by almost unvaried diet of salt provisions, highly desirable for
daily ration of fresh bread, fresh meat, vegetables,
this is a detailed history, includes some data in tables
119: water, “its contaminations as a cause of disease”; time
spent in answering inquiries; 122: “freedom from palpable
impurities” the water he inspected! concern re clothing and
cholera or diarrhea!; 125: inadequate shelter, tents, contributed
to disease and aggravated it; 126: Sardinians went underground
127: cooking, but in severe part of Cr campaign completely
failed, lack of men to attend to; not teaching. salt provisions
shd be soaked in water, taught by Soyer, efficient;

Wylie, Walker Gill. Hospitals: Their History, Organization and
22: 40: on pavilions
44: on Sanitary Commission
45: 1st ed of FN’s 1859 NonH “has done more to bring about reform
in hospital construction than any other work ever written.” and
NonN “has made her name a household word wherever the English
language spoken” educated the people.
47: Crimean experience did not do so much for France. Husson’s
well known work pub 1862, but nothing better than the Lar.
proposed;
“Before the interest in sanitary and hospital reform caused by
the Cr War had quieted down, the American people had an
opportunity afforded them to make use of the valuable suggestions
published in the reports of the English commission, and, in doing
so, succeeded in developing the most perfect system of army
hospitals ever known in the world.”
48: “The works of Miss Nightingale and the Crimean experience are
frequently quoted by the committee and the plan of army hospitals
adopted was the practical application of the temporary one-story
Crimean hut with ridge-ventilation, extended to the size of the
wards recommended by Miss Nightingale. The wards were...
50: “The same system and plan of hospitals were adopted by the
Confederate arm during the war.” war experience led to following
principles in construction; large area, wide sep of pavilions,
and from admin bldgs, wards only one storey, ventilated by
openings along ridge of roof; to last only as long as free from infection, shd be destroyed once infected; one storey wood pavilions for contagious fever put up on Blackwell’s Island NY; 24 beds
51: Berlin, Charity; Roosevelt hospital, rec by Dr Smith, “very much the same as that of Miss Nightingale.” opened in 1871; in Boston, one-story pavilion plan adopted, Mass General and Boston City Hosp; 52: Germans used San Comm org and studied hospitals for Fr Pr War and then applied in civil hospitals; Galton book; 52: Johns Hopkins plan
48: FN on army hospitals; 69: 93:
205: FN and corridor plan; 209 St T; 224 plans


Yeo, Geoffrey. Nursing at Bart’s: A History of Nursing Service and Nurse Education at St Bartholomew’s Hospital, London. Stroud, Glos: Alan Sutton 1995. 157 pp good on the history and brief but ok on FN, covers FN’s attempts to get Paget involved 28: 16 years before got a tr school; Frances Drake, new matron in 1865 got first scrubbers employed, to relieve nurses, but nurses still did much cleaning work; 29: then Waterlow became treas of the hosp in 1874, admirer of FN and chair of Central London Sick Asylum District Bd, he asked for her assistance for Highgate, then Bart’s 30: 1876 governors voted money, to start 1877; Mrs Drake the widow of a solicitor, not trained as nurse, but had experience at Foundling Hosp, 32: but saw nurses as servants; by 1877 a couple of sisters were St Thomas’ trained, but the vast majority not, and the matron could not; first pupils arrived 1 May 1877, got lectures from Dyce Duckworth; 33: antiseptic procedures only brought in after 1880; 34: govts got Drake to retire, started position matron and supt of nursing; 35: Machin started (good on Machin), became as matron; Dec 1878, made favourable impression on Paget and Savory, but too impatient; untrained sisters obstructive, treas too busy to see her; she resigned Jan 1881 after only 2 years; successor Ethel Gordon Mansion; 42: Isla Stewart, bn Scotland, in 1887 was matron of emergency smallpox camp of Metropolitan Asylum Bd at Darenth; then 1886 to Homerton (became Eastern Hosp); began at Bart’s 1887 at age 30, to 1910; 46: lectures in bacteriology started 1903, when asepsis in surgery beginning to be fully understood; Stewart revised the curriculum;

Young, Robin. “Nurses ditch dated ‘lady of the lamp.’” The Times 17 April 1999.


Young, Arlene. “Entirely a Woman’s Question”?: Class, Gender and the Victorian Nurse. Journal of Victorian Culture 13,1 (spring 2008):1355 (page # not clear, online) Univ of Manitoba; good article on discourse, fierce debate

Young, P. De Smith V., Chambi M.C., Finn, B.C. “Florence Nightingale, 101 Years After Her Death.” Rev. Med Chil 139,6 (Jun 2011): 807-13. Revistta médica de Chile Pablo Young, Veronica Hortis De Smith, Maria C. Chambi, Barbara C. Finn. In Spanish. Abstract English considered one of the pioneers in nursing, Cr War, 38 voluntary nurses, “She cleaned and refurbished the hospital in Scutari and reduced the mortality rate from 40 to 2%.” NO. lamp. Got RRC, OM. Stats and math

Young, Judith. “A Divine Mission: Elizabeth McMaster and the Hospital for Sick Children, Toronto, 1875-92.” CBMH/BCHM 11 (1994):71-90 ref to Nightingale system, 83: then McMaster decided to train as a nurse; chose Illinois Tr School, supplied nurses for Cook Co Hosp, poss interviewed by Isabel Hampton, shortly to leave.... McMaster graduated with “highest honors” el pres of class. 84: became lady supt in 1891; but small nursing school discontinued; left for ill health and family reasons in 1892; clash of personalities;


and health. “It is difficult not to see Nightingale’s reticence as an instance of repression, as a tactic for avoiding psychological formations too painful to be confronted. But it must be stressed that Nightingale articulated her situation in the somewhat different terms of a desire to integrate all areas of her life.” Distinction between interiority and exteriority, to distance one’s interiority from external reality and physical existence. “From Nightingale’s perspective this discrepancy disrupted the necessary balance of the interwoven attributes of one’s identity: physical health, spiritual understanding and social usefulness.” “This conviction was something of an intellectual prejudice in Nightingale and helps explain her resistance to germ theory. It was in keeping with her notion of a benevolent nature to believe that disease ensued from disorder--from pollution, filth and the mismanagement of noxious fluids discharged from the body--rather than from organisms that had a life of their own. Disease was, as she termed it ‘a reparative process’” the symptoms themselves indicated that nature was already setting right an imbalance between the body and its immediate environment,”.... re fresh air. [but FN clear on mutual influence of biophysical and mental]


Zerwekh, JoAnn, Garneau, Ashley Zerwekh. Nursing Today: Transition and Trends. St Louis: Saunders 2011. Lousy coverage, sec sources. 121: “Nightingale’s interest in hospital reform was insatiable. She visited hospitals and took copious notes on nursing care, treatments and procedures. She sent reports on hospital conditions to Sidney Herbert, the Br sec of war. Secretary Herbert then assigned her other hospitals to review. The reviews always included recommendations for improving nursing care. From this early background of experiences, Nightingale was not ready for her greatest mission--the Crimean War. The legend was on the way (Bullough...) Good grief! “When Nightingale began a rigorous selection process for accepting nurses, many volunteered, but few were chosen. She cleaned up the kitchens, the wards, the patients and the mess.” clever, demonstrated effectiveness of her methods, then withdrew her services !!! “The actual number of solders who benefited from the care of her nurses was immeasurable.”... “Eventually, many schools in Europe and America use the Nightingale model for nursing education. The program was generally 1 year in length; 122: myths.

nurses discomfort with politicals until recently little
written on politics of nursing; women socialized differently, not
encouraged to engage in team sports men are and learn
relationship to business;
pol efforts of AN, Lavinia Dock, Margaret Sanger, Harriet
Tubman, Lillian Wald encourage nurses to emulate them.
Chenitz, W. Carole FN EdD Chapter 23 The Political of Nursing
Research 307- “Research is the systematic study of phenomena to
generate knowledge.” 308: “Research as a function for nurses
dates back to Nightingale. Florence Nightingale kept accurate,
detailed and thorough descriptions of patient care in Crimea. She
recorded and analyzed case studies and presented detailed
statistical accounts. Nightingale used her descriptions of
patient care, analysis of case studies and stats to influence
change in health care based on research. She urged others to
continue improving care of the sick through research( Grer Grier
1978; Kopf 1978)

Grier, Brown, and Grier, Margaret. Contributions of the
Passionate Statistician. Research in Nursing and Health Res. Nurs
H. (Oct. 1978) 1,3 103-9. re FN in Crimea collecting data! Good
article but wrong on FN collecting data.
Info on “the mathematical and stat training of Florence
Nightingale is presented” opens: “Nightingale once said that
statistics is ‘the most important science in the whole world, for
upon it depends the practical application of every other
[science] and of every art, the one science essential to all.’
[cites Kopf, not FN] in texts on hi of probability and stats,
David 1962; Hacking 1975; Koeren 1918; Walker 1929, in quant
graphics Beninger & Robyn 1978 and on hi of sc Bell 1937, 1945;
Gillispe 1960, Sarton 1962; uses Ws; ref to Sylvester “We also
do not know where FN learned probability theory and stats.” poss
fro Sylvester, or Quetelet.
104: ref to Quetelet’s “moral statistics(political physics)” [but
gets terms wrong!]
105: ref that Pearson called her a “prophetess”
“We know of no earlier use of observed and expected frequencies
as demonstrated her in Nightingale’s work” (ref to healthy
districts and actual deaths from Matters affecting
Reprints her charts and a table; cites Matters affecting, and
Notes on hosps 1st ed.
Asks what contact she had with Quetelet, and what stats books
had;
Ends 109: on her death RSS reported as “missing friend” “In
nursing science she is not missed, for she has yet to be fully
discovered.”

Grier, Brown, and Grier, Margaret. Contributions of the
Passionate Statistician. Research in Nursing and Health Res. Nurs
H. (Oct. 1978) 1,3 103-9. re FN in Crimea collecting data! Good article but wrong on FN collecting data.

Info on “the mathematical and stat training of Florence Nightingale is presented” opens: “Nightingale once said that statistics is ‘the most important science in the whole world, for upon it depends the practical application of every other [science] and of every art, the one science essential to all.’ [cites Kopf, not FN] in texts on hi of probability and stats, David 1962; Hacking 1975; Koeren 1918; Walker 1929, in quant graphics Beninger & Robyn 1978 and on hi of sc Bell 1937, 1945; Gillispie 1960, Sarton 1962; uses Ws; ref to Sylvester “We also do not know were FN learned probability theory and stats.” poss fro Sylvester, or Quetelet.

104: ref to Quetelet’s “moral statistics(political physics)” [but gets terms wrong!]

105: ref that Pearson called her a “prophetess” “We know of no earlier use of observed and expected frequencies as demonstrated her in Nightingale’s work” (ref to healthy districts and actual deaths from Matters affecting Reprints her charts and a table; cites Matters affecting, and Notes on hosps 1st ed.

Asks what contact she had with Quetelet, and what stats books had;

Ends 109: on her death RSS reported as “missing friend” “In nursing science she is not missed, for she has yet to be fully discovered.”

Justham, David. A Study of Nursing Practices Used in the Management of Infection in Hospitals, 1929-1948. PhD University of Manchester 2014. Medical and Human Sciences, School of Nursing, midwifery and social Work; supervisor Christine Hallett, Jane Brooks and Michele Abendstern; father worked o promoting penicillin

Lockwood, Charles Barrett (1856-1914) aseptic approach , from Worboys. 54: Ack LM (6:573) on FN accepting (may have) germ theory, later, but her practice grounded in miasma theory; 55: removing miasma also eradicated as a cause of disease; sanitation for improved env coditons “probably a driving force for the emergence of the public health movement. (Cites Baly); Mary Douglas, Purity and Danger


FN 14-15 influence of Oxford movement Jowett wrote to FN re doing for educated what Wesley did for the poor, TH Green, create a new moral fervour... (only passing mention)

Nursing is something that is done with the head, the heart and the hands.


Cohen, Edward H. “Henley’s In Hospital, Literary Realism and the Late-Victorian Periodical Press.” Victorian Periodicals Review, 28,1 (Spring 1995):1-10 W.E. Henly, In Hospital 1888, was TB patient, Bar’s Margate Royal Sea, the RIE treated by Lister

Bell, Joseph. Notes on Surgery for Nurses. Edinburgh: Oliver & Boyd 1887

JN quotation in Tales of the Seraglio: Turkey and Persia. About Tarare John Bibby info: Pierre André Sayous, 1853. “C’est que j’ai quitté mon nom pour celui-la, dit-il, ainsi je m’alpelle Tarare, quoique ce ne soit pas mon nom. Il ny’a rien de si clair dit le calife, et cependant j’furais été plus d’un moisale trouver.” Cited in Ukoth, Galton at UCL


Roberts, G.Q. A Brief History of St Thomas’s Hospital. London: Photchrom 1920. 22 pp opened by queen June 21 1871, architect Henry Currey “it has, in fact, become the pattern on which the most modern hospitals are built.” 6 pavilions for patients; old history 18-19: FN school treas Sir James G Wainwright

Shryock, R The history of nursing Philadelphia 1959, Holland, FN infl


Henry Bence Jones, F.R.S. 1813-1873 privately printed. 33 pages his notes of autobiography dictated in last days (facts wrong on Harley St.)
22: “Miss Nightingale opened the hospital for Invalid Gentlewomen at Chandos Street in 1850 and later on it was moved to 1, Upper Harley Street, subsequently removing to 90, Harley Street... then Lisson Grove, bearing Florence Nightingale’s name. Friendship with Sydney Herbert [yes] which began at Harrow, little to do with his friendship with Miss Nightingale.
23: on drugs, said there is scarcely one which may not under different circts produce opposite effects.
23: Charles Darwin a patent, dieted him severely
Hosp for Children
27: Royal Institution, Faraday, Tyndall

Money orders 160: dates from 1791, clerks got in 161: remittance, “During the Crimean War, official means of sending money home were provided for the soldiers, but not for the civilian element attached to the Army. For some months Florence Nightingale filled the gap, until it was decided to issue money orders through the Army Post Offices at Balaklava, Sebaastopol and a few other centres. From this modest beginning sprang the foreign money order service, which was first extended to Canada, then to other Br possessions and finally to foreign countries.

Try bl


marked the beginning of modern nursing in China (2). Ella Johnson from Breast first training school for nurses in connection with Liang Au Hosp Fukien in 1888 with 2 nurses. Eliz Mckechnie of US

Lin, E. “Nursing in China.” AJN 38,1 (1938):

American Association of Nurse Anesthetists. “Nursing Service and Medical Science,” Chapter 3 online source

Congress in Chicago held May 1893, papers published 2 months earlier Chicago World Fair.

Online Chicago https://archive.rg.stream/womansmissionser00burdiala/womansmissionser00burdiala_djvu.txt


medicine in ancient China 3: “There is no record in Chinese history before the nineteenth century in which we can trace the words “nurse’ or “nursing.”

2: Care given by relatives and friends, same gender, lower status 3: “The Nightingale System” “Elizabeth McKechnie of the United States brought the Florence Nightingale system of nursing to China for the first time on a rainy day, March 24, 1884, when she planted the seed at the West Gate Red House Hospital, now known as the Margaret Williamson Hospital, in Shanghai.” friend Dr Eliz Reifsnyder

4: Ella Johnson est the first training school for nurses in Fukien in 1888. 2 nurses in first class.

Second period 1904- war


298: nursing as Christian service, est missionary ideals 1873-1914

“When American missionary nurse Elizabeth McKechnie arrived in China as the first ‘trained’ nurse in 1884, there was no equivalent in Chinese culture to the conceptualization of nursing popularized by Florence Nightingale, that is, a noble profession suitable for unmarried, God-fearing ladies (Grypma 2011). Complications of gender and status in Chinese society impeding nursing, care was serving, same gender, lower class.

299: female medical missionaries supported nursing Philadelphia Woman’s Medical College. Dr Elizabeth Reifsynder (1881) started earliest nursing school at women’s hospitals they founded in Beijing (1881) and Shanghai (1886), Reifsynder supported McKechnie
“Nurses for India.” Medical Reporter. 1 (July 1892): 72.

Blennerhasset, Rose and Sleeman, Lucy. Adventures in Mashonaland. Bulawayo: Books of Rhodesia 1969 vol 8 in Rhodesiana Reprint Library. Publishers’ Introduction unpaged. “To understand the nurses’ spirit and motivation it must be recalled that this was an era greatly inspired by the work done during the Crimean War by Florence Nightingale. She had completely revolutionised the concept of nursing and won for it respectability and a glamour which made it an honourable profession for cultured young Victorian ladies.” Anglican orders, FN closely associated for South Africa “the Community of St Michael and All Angels” Kimberley Hospital, reputation “of being the premier nurses’ training inst in the country” under direction of Sister Henrietta Stockdale; strong, got reg before other countries. Blennerhasset, sister of a baronet, joined order as Sister Aimée. Stockdale made them take an English nursing course, and she persuaded bishop Knight-Bruce of Bloemfontein Diocese to est a hosp in Mashonaland. Chapter 1 How I became a nurse, 1: doing volunteer work with doctor, found out how bad workhouse infirmaries were did “medial an surgical tr” midwifery, diploma of London Obstetrical Soc, then was supt nurse to Cardiff Union Hosp; [no dates!] with untrained nurses no night nurses 3” “I had charge of between three and four hundred beds. My nurses were untrained; there were no night nurses. Typhoids, covered with bedsores, were left at night to the care of 4: an old woman from the ‘house.’Pneumonia cases and unfortunates I the last stages of phthisis, had to look after themselves.” got night nurse for board; 16 months later the Cardiff Hospital had a staff of trained nurses. Guardians resolved to appoint resident house surgeon. Dr Sheen The sick were well cared for.” But health began to break 5: went for change of work, to Johannesburg, left Jan 1890; 7: Lucy Sleeman, sister, went out to a case for 5 weeks nursed a typhoid in a 4 roomed house with nine people,

“Nurses for India.” Medical Register. 1 (July 1892): 90-93.

How earlier young Englishmen “Came to India with their lives in their hands.”Adventure, “great unknown land- the white man’s grave.” but now “do not expect to die sooner in India as a clause of their engagements” Appeal by a lady in England, times for trained nurses, to spinster r=problem. Times repr Edith E. Cuthell.

We fully endorse all said about “want in India of trained nurses” med attendant, has to accept aid of amateur nurse, or leave in hands of paid incompetent nurse; customary to depend for aid in nursing on sergeants and soldiers’ wives, but small, and “mostly inexperienced and untrained, though very willing.”
sick soldier gets comrade.
Germany has excellent working nursing insts,
91: noble work of Lady Dufferin, sisters of Mercy.
91: “The govt system of providing medical aid in all parts of the
country is admirable, the Govt however does not provide nurses
outside its hospitals nor aid any nursing inst.” In Germany govt
grants in aid.
Importing nurses from England; Eurasians.
“Our idea is that having obtained the young and healthy women in
the country, and in the numbers that wd be required, their tr shd
be more systematic, more after the college class system. “ at
present free and easy.
92: in Germany royalty interest selves n. Empress has inaugurated
a nursing inst in Berlin. In India good Mrs Ellerton’s memory ...
Lady Canning. Lady Roberts’ work will cause her to be gratefully
remembered long after she has left the country.
Eurasian Army Hosp Corps
92: “/When Miss Florence Nightingale with her little band of
helpers sailed for the Crimea, public opinion divided, “The
little band of self-sacrificing women proved their suitability
and became necessary. A precedent having been set, it was not
surprising that the grat Am Civil War following, shd call both a
large number of devoted women...” North and south, Franco-German
war, English women volunteered as nurses,
Lady Roberts [not great article, but a few good points, very pro-
German]

Flood, Raymond; Rice, Adrian: Wilson, Robin. *Mathematics in
Victorian Britain.*
See 415 lots of FN refs

Magnello, Eileen and Van Loan, Borin. *Introducing Statistics: A
Index 29-34 FN
29: Florence Nightingale the passionate statistician
known as lady with the lamp but not for stats.
29: cartoon figures has her saying“Yet in my capacity as a
statistician, I was able to introduce essential measures of
sanitary reform in hospitals in the battlefield and in London.”
text: By using the methods and ideas of the mid-Victorian
statisticians, Nightingale persuaded various government officials
of the importance of the lessons she learned in the Crimean War,
and shoed that mortality rates could be reduced among the Army at
home.
30: met Babbage, studied stats in morning
31: SH, to Cr War
32: on arrival in the Crimea, chaos at Scutari, no furniture,
food cooking utensils, blankets or beds, rats and fleas constant
problems. “She was the only person with funds and the authority
to rectify this bleak situation.” NO
FN balloon “I discovered an annual mortality rate of 60 percent form such diseases as typhus, typhoid and cholera – a rate even greater than the Great Plague in London.” NO

“Nightingale was distressed by the statistical carelessness she found in the military hospitals. There was a complete lack of coordination among hospitals, and no standardized or consistent reporting. Each hospital used its own classification of disease, tabulated on different forms, making comparisons impossible. Even the number of deaths was not accurate – hundreds of men had been buried but their deaths were not recorded.”

34: polar area charts. Persuaded medical profession that deaths ere preventable if sanitation reforms ere implemented in hospitals

Wrote Quetelet after.

30: mortality at


Toman, Cynthia. Soldiers of the Great War: The Nurses of the Canadian Army Medical Corps. UBC Press 2016. FN 16 29 222

16: CAMC enlisted its nurses as soldiers in order to have control over them, behaviour and postings. 1918 Col George Adami recalled saga of FN , referred to Nightingale as ‘the despair of the official, making it impossible to incorporate her and the organization she controlled as an integral part of the Medical Service.” NO, so Canadian nursing sisters had military status (in 1906, 50 years later!!)

29: at end of war, influenza, hundreds form German prison camps turned up, little could be done for them, men forced to lie on the floor in their uniforms. Clint “believed that no one had provided for the men after the armistice and lamented that ‘again a Florence Nightingale in authority was needed I the worst way.”” note Mabel B. Clint. Our Bit: Memories of War Service by a Canadian Nurse. Montreal: Barwick 1934. Little history of nursing in WW I.


99: letter to Sara Henneel 29 June [1852] Mai Smith called on her, with FN, before letter of intro arrived Barbara Leigh Smith

102: letter 16 July [1852] “I had a note form Miss Florence Nightingale yesterday. I was much pleased with her. There is a loftiness of mind about her which is well expressed by her form and 103: manners.”
Mackay, Martha. “Why nursing has not embraced the clinician-scientist role.” *Nursing Philosophy*. 10,4 (2009):286-96 xerox
Author then doctoral candidate, UBC, now PhD on faculty. St Paul’s Heart centre. Cites LM evidence-based article, pro science in nursing! 294: Doctors have options of 75/25 research/practice “It is my opinion that the discipline must at least agree that science is a necessary and worthy pursuit for nursing: that there is a unique body of knowledge called ‘nursing’: and that nursing’s development is well served by rigorous science originating from clinical, and other, perspectives. If nursing, collectively, is unable to accept these premises, then the viability of the clinician-scientist role in nursing will remain ill conceived.
Mmackay@providencehealth.bc.ca
604 682-2344 x 63127

Johnson, Sue. *Nightingale’s Vision: Advancing the Nursing Profession Beyond 2020*. 2017. ANA
Argues FN vision still alive, as seen in recs from 2010 Inst of Medicine Future of nursing report and 2015 follow up assessment. Nurses will be at the table. IOM recs a blueprint

Author PhD RN 50 years principal of RN Innovations LLC a firm retired 2011, Fort Wayne IL, routinely “Florence” uses Cook a lot, NonN, WS error on distressed gentlewomen, lots of credit to FN, but bloopers:
9: a “transformational nurse leader” “complete a three-month training course for nurses at the hospital in Kai.” experience enabled florence to understand the basic component of nursing care, hospital design and personnel admin.” pivotal. Then “distressed circs”
30: chapter 7 developing Others. Cites Cook 1913a for numerous statements, no page numbers (one) vol 1 507 pp; vol 510 pp some paragraphs have 5 or 6 references to (Cook, 1913a) no page number,
30 Kai trained, N School like it.
Chapter 4 Advocacy; Chapter 8 Community Chapter 12 Ethics
41: (Cook, 1913a) (Cook, 1913b)
67: FN exemplified our Code of Ethics
68: commitment to the profession [which did not exist], a Matron closely supervised
 cites address. Religious
Chapter 13 Safety Kai; ventilation poor and sewers, got scrubbed. “Besides focusing on cleanliness, F convinced the Sanitary Commission to accomplish sanitary engineering and resolve the drainage issues. This action resulted in a significant reduction of the death rate at the Barrack Hospital due to Florence’s 74: advocacy” cites Cook no page.
Chapter 15 Evidence

Johnson, What Would F.... Do?, published by the ANA, has much
good information in it on Nightingale’s innovative contributions,
research and advocacy. However, it is marred by the use of the
palsy “Florence” throughout. Doctors get surnames and honorifics,
nurses are routinely first named. Nightingale herself always used
titles and honorifics for both: Dr Sutherland and Miss Jones,
Nurse DeLaney and Matron. The ANA should require adult status for
nurses and doctors, and nurse-authors should insist on it.

The book also follows standard, defective, status for
referencing: every statement must have a reference, even if it is
ridiculous. The most used source was E.T. Cook’s 2-volume
(official) biography of Nightingale, an excellent source.
However, Johnson failed to give page numbers, again, standard
practice, suitable for short journal articles, but hardly when
volume 2 is 507 pages and volume 2 510 pages.

Some paragraphs have 5 or 6 references to (Cook, 1913a); one
reference (p 41) was to two: (Cook, 1913a) (Cook, 1913b), meaning
that the reader is to look for the reference in two volumes
totalling more than a thousand pages! Get real ANA and nursing
publishers.

There are other bloopers, too. Nightingale got NO nurse
training at Kaiserswerth (Johnson, p 9), they did not give any.
See my coverage of Kaiserswerth in Florence Nightingale’s
European Travels, 2004. The Nightingale School was not similar to
Kaiserswerth (Jonson p 30), precisely because Kaiserswerth did
not train and Nightingale would never have nursing students
thrown into the wards to fend for themselves, as happened there.
Nor did the matron supervise the students (p 68).

Nightingale deserves much credit for the clean up of the
appalling Barrack Hospital at Scutari, where she led the nursing.
However, she did not convince the Sanitary Commission to do its
work; they knew what to do and she gave them credit for making
the great reduction in death rates. Johnson cites (Cook 1913a)
with no page number on this - can’t imagine that Cook got it
wrong.

Porter, Roy and Porter, Dorothy. In Sickness and in Health: the
Gerstein RA487 P67

Nuisances Removal and Diseases Prevention Act, 1846, updated 1848
alongside the Public Health Act
Sewerage and Drainage Act of Liverpool, 1846 allowed for MOH to
be appointed
Health of Towns Association, Rosen, A History of Public Health,
195: critical of sanitary bill of Lord Lincoln; Liverpool had
particularly bad conditions, and then flooded with starving Irish
immigrants, Liverpool Sanitary Act the first comprehensive san
measure in England, gave town council power to appoint a MOH, a
borough engineer and inspector of nuisances
196: Southwood Smith and health of Towns Assoc waging a strenuous
educ campaign to arouse public opinion to press the gov; Smith
pamphlet An Address to the working Classes of the United
Kingdom... 1847, many could have been saved

London: Baillière, Tindall & Cox 1950. OBE MD barrister, prof of
PH, Liverpool and MOH Liverpool 498 pp
Chapter 1 The Beginnings of Public Health Legislation. Royal
Commission on the Health of Towns 1844 and 1845 reports. Resulted
in sewerage and drainage bills
in 1844 Metro Health of Towns Assoc founded at Exeter Hall
meeting
1842 Report on the Sanitary Condition of the Labouring Population
of Great Britain,
Liverpool Sanitary Act of 1846 the first comprehensive sanitary
act passed in UK, gave effect to san improvements, created the
machinery to appoint MOH, borough engineer and inspector of
nuisances; scavengers
FN 84-85 and 237"It would not be possible to consider the art of
medicine during the middle years of last century without ref to
the lady whose zeal and energy initiated great measures of reform
in the standards of nursing in hospitals and in the methods of
nurses’ training.” sc of bacteriology not heard of and “hospitals
and hospital methods were not only not aseptic but positively
dirty” infections communicated by patients, nurses and doctors.
Lack of even ordinary cleanliness and hygiene. When she faced
obstruction from medial profession “which was instinctively
opposed to change” ... caustic; took all her driving power to
obtain reforms in the army’s arrangements for tr of sick and
wounded, and had to use all influence she possessed at home to
that end. Assisted by JS and Hector Gavin 85: on return, visited,
“had a large share in securing the appointment of Parkes”,
“Nightingale Nursing Home” [error in name]; Rathbone
85: Dorothy Pattison example similar driving force; Sisters of
the Good Samaritans at Redcar, joined the order, cottage hosp at
Walsall, in Black Country; 86-88 AE Jones
147: Chapter 3 Dev of Sc Method in the 19th Century, from pub of
Pasteur’s researches into fermentation to applic to diagnosis and
tr of disease. Pasteur elected assoc for Fr ac de Med 1873, at
meeting of surgeons 1878 communicated his views on applic of germ
to surgery; cont experiments of methods of protection, use
of vaccine; anthrax
149: Koch’s postulates; 1882 Tubercle =bacillus;
150: bacteriology and public health; change happened fast
152: fever hospitals; most famous London Fever Hosp est 1802; or
Poor law; issue of isolation, carriers may take for weeks or
years; and for some max infectivity in first 2 or 3 days, usually
before patient goes to hospital;
154: biochemistry Thudichum
155: antiseptic and aseptic surgery
Bristowe and Holmes study of hospitals
156: Holmes, puerperal fever; Semmelweis [good on]
157: Lister did get credit, unlike Semmelweis; regius prof in
Glasgow in 1860, when Pasteur research on fermentation, Professor
Anderson intermediary; resemblance between putrefaction in a
wound and in fermentation close, tried carbolic acid.; to Glasgow
Royal In 1865, avoid evils of inf; his wards became the
healthiest in the world; not used in German Army in 1870 and op
mortality in amps very high; some had 100% failure in lower limb
amputations; Von Nussbaum got methods into Vienna, then to other
hospitals, Lister to King’s in 1877
(P 80: Lister’s praise of Pasteur)
Chapter 5 Epidemic situation in last 3 decades of 19th cent;
Public Health Service created on fear of epidemics and success of
san reform estimated by ability to reduce number of cases of such
inf diseases as cholera, typhus, typhoid, dysentery and smallpox;
at outset reformers did not know methods of spread of any,
claimed that efficient measures of general san would be adequate
and sufficient to prevent outbreaks of all these diseases; only
towards end of cen that understood that san measures effective
against infectious diseases of intestinal origin, but less so, or
not all, against other contagia; common opinion that diphtheria
and scarlet fever due to smells from defective drains or sewers;;
vaccination for smallpox
167: cholera epidemics; between 1869 and 1874 widely prevalent in
world, but not in England, escaped; earlier ones part of world
pandemics
‘168; no cholera outbreaks 1866 and 1893; that latter widely
diffused on pilgrim routes, few deaths; later epidemics affected
usually one locality, often the failure of some san precaution,
mitigated;
169: vaccination acts
236: Society of Medial Officers of Health, est in 1856; Simon
first president;
236: district nursing Rathbone

Health in England, 1830-1910. Oakland CA: University of
California Press 2016. Author 1977- Gerstein RA487 C735 2016 see
Thorne Thorne ref end78 and 79 Chapter 6 re use of pavilions
Chapter 6, 18: On French import, pavilion, “promoted in Britain
by the likes of Florence Nightingale and the architect, George
Godwin, during the midcentury.” end78 pavilion hosps became one
of the most distinctive features of all hospitals built after
midcen, incl fever and smallpox hospitals, variety of both began
to emerge in the 1860s, as LGB inspector 219: Richard Thorne
Thorne published in 1882 end 79; models crucial since LGB
sanctioned the required loans

Twining, Louisa. Recollections of Life and Work, being the Autobiography of Louisa Twining. London: Edward Arnold 1893. ch 6 has visits to poor and Hardy bill, began noticing in 1847, made 1st visit to a workhouse in 1853, to the Strand Union, Cleveland St., 500 inmates, asked to bring other visitors but this declined; asked for interview in 1854 saw Ld Courtenay who said wd not refuse permission, but Guardians declined, pub 1855 “A Few Words about the Inmates of our Union Workhouses” Longmans, consulted Mrs Jameson on, had already noted in lecture of Sisters of Charity; in 1856 visited St Gile’s; 1857 wrote letters to Guardian on, reprinted in pamphlet “Metropolitan Workhouses and their Inmates” and subject brought to H of C by Ld Raynham, who asked for inquiry, not granted; got a petition in favour, signed by Mrs SH, Mrs Tait; met Sootheron Estcourt at PL Bd 5 years after 1st visit, had formed Workhouse Visiting Society; in 1861 made inquiry re number of pd nurses employed in London workhouses; inquiry Lancet 1866, Lancet Sanitary Commission; Metro Workhouses (Infirmary Wards) with reports by Farnall; 1865 Lancet commission with Ernest Hart, Anstie and Dr Carr; 1867 a public meeting held on, Ld Carnarvon presided, but Villiers left office before a bill cd be brought before Parl; 1867 bill by Hardy, “the keystone of all the improvements that have since taken place.” separation of infirm from workhouse proper; Times praised (121), but first actual pioneer in this movement was Agnes Jones of the Nightingale Tr School; no mention of FN in this chapter, but in ch 7, visit to Mr and Mrs J.W. Cropper at the Dingle, Liverpool; FN (129) made acquaintance at Harley St.; visits in 1858 to Strand with Miss de Bunsen, Mrs Wm Cowper also visited in 1858 House of Mercy of Clewer; preachers: Manning, Liddon, Bp Wilberforce and Kingsley on Xn socialism;


See full chapter
Gutzke, David W., ed. British Politics, Society and Empire, 1852-1945: Essays in Honour of Trevor O. Lloyd. London: Routledge 2017. Check use of Baly, which editions, Helmstadter, Carole. Chapter 3. “Florence Nightingale reconsidered as the founder of modern nursing” 44-68. Not UG, online only UofT “Miss Nightingale” 44: hailed as the founder. “The four most distinguished scholars to explore Nightingale’s contributions to the development of the new nursing, Sir Edward Cook, Brian Abel-Smith, Monica Baly and Mark Bostridge, all agreed she was.” Abel-Smith identified problem, could not recruit and retain enough women. Baly the first to say N School not a success, Nursing Legacy “the iconoclastic Baly” argued that she created
secular nursing end4
45: FN desperately wanted nurses “to be deeply religious women, handmaidens of the Lord” endn5
Bostridge says heavily mythologized but defended N School as “a long-term success” following major problems in early years; due to Croft’s lectures
45: “Since Cook published his study, many new primary sources have become public” YES
FN often refused to speak with her family endn10, did not allow JS or HBC into her room; treated JS “often acted as her personal secretary”
50: “the one exception to Nightingale’s lack of interest in the training school came when, in July 1867, the govt of New South Wales, Australia, asked the Nightingale Fund to send four ladies to reform the nursing at the Sydney Infirmary.” to become a nursery for nurses to go out to country hospitals.
“The five Nightingale nurses proved unsatisfactory. They indulged in all kinds of improprieties and considered themselves superior to the Australian probationers.” Osburn found the colonial women better educated and better conducted. 18 months after she informed the N Fund Council she intended to replace with Australian probs “She cut Osburn off completely; she had Bonham Carter write, telling her that neither he nor Nightingale would correspond with her again” endn52
55: “Whatever Nightingale’s reasons for supporting Wardroper, the fact was that other raining schools had little difficult in attracting ladies, while St Thomas’s did.” “Nightingale did have some minor successes.” persuaded her to accept home sister. Croft thought the number of lectures given inadequate endn68; Wardr undermined the home sister
61: “Osburn made major improvements in Sydney, but Nightingale repudiated them. Machin established a far superior nursing service in Montreal, but felt forced to resign before she was fired.”

Thesis that Nightingale’s “contributions to nursing were destructive has merit but is not completely fair. Nightingale cannot be considered the sole founder of modern nursing, but she did make positive contributions and must be considered one of its founders.” “Yet it was from St John’s House that Nightingale derived her (unachieved) aim of systematic instruction in the wards. Unlike the sisterhoods, Wardroper and the St Thomas’s governors shaped modern nursing in a damaging way. Wardroper created the complete disjunction between clinical work and instruction, a system which severely diminished the educational aspect of nursing school.” contract with hospl.

90: FN 2 opposite errors, “pitted against each other in their most unqualified form, without any attempt at conciliation.” A mistake to look upon diseases as separate things, instead of looking upon them as conditions, just as much under our own control, or rather as the reactions to a kindly nature. Smallpox a thing, of which a first specimen in the world that went on propagating itself; 91: seen overcrowding, typhoid, typhus. Respects FN “but I wish she had deemed it expedient, before writing these sentences, to consider well whether the facts stated and the opinions expressed are consistent with the modesty and reticence of true science as regards the unknown.” “Miss Nightingale must not supposed that the doctrine of specific contagion is to be settled in the offhand manner of the passage given above.” Given the doctrine in which she was brought up was extreme and irrational and devoid of evidence, must equally withhold assent from her curiously vague statements (cited from Labouring Classes)

92: FN has often seen and smelt smallpox, but how, in her simple assertion, that she saw and ... we must surely admit of some doubt and difficulty in settling the question of the origin of morbid poison, without being thereby committed to the preposterous doctrine that they grow up indiscriminately out of mere dirt and overcrowding. Her experience of fevers entirely opposed to mine. The “degree of overcrowding has nothing to do with the type of fever produced; nor do these diseases ‘begin, grow up and pass into one another’ in the manner stated. But I must admit that my nostrils are not yet so highly educated as to be able to distinguish a case of smallpox... “I only demur to her philosophy of disease as not deprecating the value of her labours. It is because they are so valuable and so justly popular that I feel it necessary thus to refer to them as the expression of a too confident and indeed wholly untenable medical theory.”

Woman’s Work 340:


Med educ 1750–1825,
17: bloodletting, reduced fever and relaxed the patient temporarily and became a popular treatment in many serious diseases, “despite its harmful effects” bled through a vein in arm; 40: also considered a preventive 70: practice changed in some ways after mid-century, “although the principle of vigorously attacking the disease remained unaffected. Bloodletting, blistering and other aspects of heroic therapy were abandoned, but mercury, arsenic, strychnine, antimony, opium, ipecac, quinine and others remained the physician’s main resources. New synthetic drugs that reduced pain and fever and induced sleep were coal tars. Alcohol, used to excess.

85: FN recognized need re horrifying mortality rates in Br
hospitals during the Crimean War. “Developed and introduced an organizational hierarchy of nurses based on strict discipline and businesslike admin. She was able to reduce the mortality rate in the hospitals she supervised from 42 percent to 2.2 percent. This achievement earned her a worldwide audience for her system of nursing.” note 86
86: female supt for nurses
219: if to be an independent professional role for nurses can only be that proposed by FN

Purgatives and emetics in much use, calomel the most popular purgative, a salt of mercury, frequent use caused salivation an soreness of gums and prolonged, ulceration of the mouth, loss of teeth; popular emetic was tartar emetic, of antimony, another poisonous mineral. “Most of the mineral drugs that became popular at this time were dangerous poisons.” med ed 1825-60.

Dominiczak, Marek H. Florence Nightingale: Nurse, Writer and Consummate Politician.” Clinical Chemistry 60,1 (2014):284-85. [wrong on germ theory] Online, 284: nuns, Kai, E Fry influence, “Distressed Circs” Crimean War: Russia and Turkey fighting against France and Britain!!! FN a “miasmatist, believing that diseases spread by emanations given off by the environment (essentially bad air) and particularly by poor hygiene. Interestingly, she never accepted the then-emerging germ theory.”; but 2 of her books still relevant today; cites LM since 2010 emerging; author College of Biochem, Glasgow 285: time of profound social change

cites Porter, Cambridge Illustrated History of Medicine 2001


female social scientists such as FN ignored; positivistic social science from its early days, according to McD, has often been radical, highly critical of the status quo.

135: did comparable work to FN for Russia in Cr War
photo of FN


85: cites FN on transformation of workhouse or part into a hosp. “The sick can never be properly treated in the same est as the ale-bodied pauper. ... no more connection.
69: lack of powers was the excuse for lack of action, but compulsory connection of a new home with main sewer was a provision of the 1948 Public Health Act, consolidating of LGB...
1848 Morpeth Public Health Act a great landmark in social reform when passed, emasculated and generally ineffective in short term, because permissive, not obligatory.

Sturdy, Steve and Cooler, Roger. “Science, Scientific Management and the Transformation of Medicine in Britain c 1870-1950.” Sage online

Lorrain School of Nursing. Online. A Caring Profession in Canada. Catholic nuns arrived, Grey sisters of the Immaculate Conception, recognized need. Before emergence of formal training for nurses in canada, nursing skills passed down by female relaive sand neighbours, in late nineteenth century more and more difficult for female relative sto care for sick unless cd obtain medical and surgical fare. Formal training of nurses. Theophilus Mack the first. In 1901 65 nursing schools in Canada and 280 nurses and student nurses; by 1930 218 nurisng schols and oppp student nruses. Wards. Patient care, set up by supt of nruses and head nurses. Lectures also part of nurisng prog but only a small portion, 2 hours once a week by isiting physicans and surgeons; College o nurisngs and RNA. , no wBSCN mandatory entry.
1639 Augustine ordre est first hospal, HD de Quebec
1642 Jeanne Mance est Montreal's first HD
1789 four Grey Nuns of Montreal go to st bniface...
1874 Mack, St Cathharines (no mention of Machin or Montreal)...
1899-1902 12 Cdn nruses serve in S Afr War, lieutenants fo rpay and allowances
1904 7. Brookly Tr Sch\8. New York State School for Tr nurses
9 Cnd Army Medical Corps crats own nrusng service

1908 Cdn Nat Assoc of Trained Nurses formed (becomes CNA) 100,000 RNS

1919 UBC introduced univ degree prog, first in British Empire
1925 Univ Montreal with Grey Nuns found first francophone nursing degree prog in world;
1930s Quebec lay nurses become first in country to form unions
1939-45 nearly 4500 Cdn nurses serve
2004 84 bachelor’s degree and nine doctor prog in Canada
1883 nurses in NW Rebellion

CCV: Nurse Training Schools. Table XVII Summary of Statistics of training Schools for Nurses
1. Connecticut Tr School for nurses (state hospital)
2. Illinois Tr Sch ...
3. Boston City Hosp
4. Boston Tr... (Mass Gen Hosp)
5. Tr school... (New England Hospital)
6. Missouri School of Midwifery
9. Buffalo Gen Hosp Tr Sch
10. Charity Hospitl Tr Sc
11. Mt Sinai Tr Sc
12. Tr Sch ... (Bellevue)
13. Tr Sch of New York Hosp\14. Tr Sch... (House and hosp of the Good Shepherd)
15. Nurs Tr School of the Woman’s Hosp
16. Philadelphia Lying-in Charity and Nurse Sch
17. Washington Tr School (lists number of instructors, students, graduates in 1881, number of pupils since organized, graduates since organ)

notes since then two schools, Chicago and NY
ccv: Wash Tr School held first regular commencement in May last (1882), conferred 3 certificates upon grads, had exhibition to raise funds for home; “The nruse training of this century commenced at Kai, a little village on the Rhine, near Dusseldorf, in 1856...” Fliedner, but known “on account of the attendance of Florence Nightingale, who went there in 1851 to perfect her t as a nurse. The term of instruction and service at Kai was three years, and there was no lack of applicants, thought a fee was charged for the tr. [wrong, FN there 3 months, no training; no fee] Special recognition....” by san comm

McNamara, Pat. Catholic Sisters and the American Civil War. Patheos Newsletters Online May 30 2011

nursing monument in Wash. 1861-65 approx 640 women from 21 rel communities volunteered nursing services. Did not wear habits in public; altogether, on both sides, 4000 women served as nurses, more as nurses assistants, cooks and laundresses; high turnover
rate, less for sisters. Sisters evangelized by example.

abstract: had est 200 nursing schools by 1915. How used their distinct und of nursing to shape nursing schools and nurse tr movement in US between 189- and 1920. 3 women’s religious communities, Catholic Health Assoc and Univ of Notre Dame, Results: “Catholic sisters adapted their nursing to bring it into line with modern society by establishing nurse tr schools for both religious and secular women. This legitimized their nursing practice and enhanced their influence with students, physicians and hosp groups. As nuns admitted laywomen into their schools and worked toward accepted standards of professionalization, they stamped their distinct und of nursing onto secular society. Problems of RC clergy to attempt to control evaluation processes


Giaimo, Cara. “Florence Nightingale Was Born 197 Years Ago, and Her Infographics Were Better Than Most of the Internet’s.” online Atlas Obscura. Good points, shows charts. “Marshaling statistics to advance social causes.”


BMJ Introductory Notes on Lying in Institutions Books received. 28 October 1871:516. 2 weeks later an anonymous review BMJ

Rafferty, Anne Marie.

Introduction, Anne Marie Rafferty 1-8
Anne Witz. ‘Colonising Women’: Female Medical Practice in India, 1880-1890. 23-52
27: Hoggan and Blackwell, National Health Society. Hoggan in 1871 took up appointment at St Mary’s Dispensary for Women and Children.
“Three feminist pioneers of female medical practice” Hoggan, Garrett A, and Blackwell; Hoggan and Blackwell co-founders of
National Health Society, Hoggan hon sec
Mary Ann Elston Run by Women (Mainly) for Women 73-108
58: (Nursing in nineteenth-century Europe) FN work of “FN and others” to make nursing a respectable woman’s occupation in the West.”
59: “and even Florence Nightingale’s offer to treat the wounded in the Crimean War clearly fell into this category of primarily philanthropic rather than specifically medical activity.”


Bullough, Vern L. American Nursing: A Biographical Dictionary. Vol. 3:44-8. 45: Small, Sadie M. “M. Elizabeth Lancaster Carnegie.” Fellowship from Rockefeller Foundation for Toronto, one year certificate, met and married Eric Carnegie. Brother of former St Philips student. Florida A&M College, trad black, when completed course at Toronto became first dean of school of nursing, as Cdn certificate judged equivalent to US master’s, had to get national certification for prog

Vance, Connie and Olson, Roberta K.. The Mentor Connection in Nursing. New York: Springer
only a female mentor can provide female role modeling and understand distinctive female challenges. Nursing, educ and social work. Passing ref to FN, from her day;
FN 6, 97


FN’s Notes on Nursing read by adults and advanced classes of girls in schools, “attended with instances of beneficial sanitary reforms in their homes”; discussions have “elicited interesting local illustrations and valuable directions of practical applications for the use of the labouring classes.

“A new and cheap edition” with abridgement but important additions.

“I venture to recommend, as highly important, that at each Mechanics Literary Institution someone should be asked to read particular chapters, as papers” desirable if a doctor did. Health of Homes. Personal cleanliness. “Considering the immense proportion of deaths in the infantile stage in the United Kingdom, the great mass of which are preventible, the chapter of ‘Minding baby’ is one of commensurate importance” esp for females. “Amongst competent medical professors of sanitary science, in America as well as in England, I have met with but one opinion, coinciding with my own, on the practical soundness and great value of the expositions in the ‘Notes,’ of sanitary principles made from the authoress’s own long and varied observation.” by liberality of Harrison, “I am enable to provide to the Council to forward to the managing committee of each Institution a copy of the new edition of the ‘Notes,’ with the view to their consideration of the eligibility of their use” for purpose proposed. Esp for females

Hallsten-Kallia, Armi. “International Influences on Nursing in Finland.” *AJN* 46,3 (March 1946):154-56. DOI: 10.23073456712

ajn 46,3 pic, 154: School of Public Health Nursing, Oulou Amanda Kajandar, first trained nurse of Finland, became its first sister and directress. Affiliated with Kaiserswerth Conference and benefited form deaconesses. Nordic co-operation; first secular nursing at Surgical Hospital of the University Clinics in Helsinki, when moved into modern bldg 1888; Dr F Saltzman founded first tr courses in Surgical Hosp, got Anna Broms to study abroad, Stockholm and Royal Inf Edinburgh, and St Thomas’ “When Anna Broms returned to prepare for the opening of the Surgical Hospital, the Nightingale influence was brought to bear on nursing in Finland. From the beginning,” position of matron as supt and director emphasized, started 1889. First nurses’ course ws 6 months, then in 1892 12 months. Several prominent Finnish nurses trained in Sweden in 1890s. Then Germany Hilda Montin at Victoria House; 155: direct influence of Nightingale school to
fore in 1890s when several nurses where wholly or partially educ
at St T. Ellen Ekblom, later Jensen the only one to have met FN. Most important, Baroness Sophie Mannerheim educ at St T 1899-
1902. Was appointed matron at Surgical Hospital 1904 and until
death in 1928 inspired and untiring leader of Finnish nursing,
principal points of N training entrenched. Student nurses’ home. In 1906 built. In Helsinki. Nurses’ Association, Mannerheim pres from 1905; Ellen Nylander did prelim instruction at Tredegar
House in London, then US influence; 156: public health nursing
(Can cite re FN influence on Finnish nursing)

Halm, Margo A. “The Healing Power of the Human-Animal
Connection.” American Journal of Critical Care 17(4) (2008, July)
373-376. cites FN NonN online. Author RN PhD, St Paul MN. Use of
animals, as therapist, dogs, cats, fish and guinea pigs. “As long
ago as 1860, Florence Nightingale commented that ‘a small pet is
often an excellent companion for the sick, for long chronic cases
especially.’” companion animals. Margo.a.halm@allina.com

“Nursing, a Historical Overview.” Typscript. Nursing in Fiji
1892 first hospital built in Levuka, old capital, with untrained
European women under med supervision
early 1900s, capital to Suva, first 70 bed hosp, nursing by long
term prisoners, supervised by untrained matron
1892 professional nursing began, first qualified nurse, Frances
Wedderburn from England, matron Colonial Hospital, from N School, started training European nurses in 1893
1897, first qualified nurse graduated, May Anderson
1895 district nursing introduced; first midwife sent from England
to help
early 1900s training program extended and more trainees; Fiji
Diploma in Nursing at end of 3 years
1923 Colonial War Memorial Hosp built
1925 Lautoka Hospital built, nursing school started, 6 Indian
girls in first batch
1945 first senior tutor appointed to head the
1946 first qualified tutor took over the training, first
principal
1954 Central Nursing School built in Tamavua, Fiji Nursing
curriculum used
1955 New Zealand Nursing Curriculum started alongside
1964 postgrad training

Peckham, Robert, ed. Disease and Crime: A History of Social
of Infection” 1 ref only
69: in 1866 Nightingale bemoaned evil in house construction. Cites NonN.

Gulcan Taskiran, and Ayla Bayik Temel. Glcan.takran8@gmail.com

Dear Colleagues. I was pleased to see your article on Florence Nightingale as a passionate statistician. I could only read your abstract, but it is clear from your charts and tables that you have found the key material in her work.

In the course of preparing the Collected Works of Florence Nightingale I have developed a website and an (ongoing) newsletter, that is, occasional updates by email. If you would like to received these (occasional) emails, please say so, by replying to this email.

A number of people who work on Florence Nightingale have formed a Nightingale Society, which promotes her work. You cite Eileen Magnello and Mark Bostridge, both of whom are members. If you would like to be added to that list, I would be happy to include you in (occasional) emails. The Nightingale Society also defends her when attacked, which is quite common now (fashionable) in the United Kingdom (although not in Canada or the U.S., nor, I trust, in Turkey).

We also want to ensure that the 200th anniversary of her birth (1820) is celebrated (in 2020), and encourage nurses, doctors, statisticians, historians, etc., to plan for recognition of this anniversary.

a conscious choice to attend a bacc nursing program. I had no great passion for nursing except to play the part of Florence Nightingale in the Crimea." 180: Eleanor C. Lambertsen, since the time of Fnn, leaders in the profession have insisted that nurses, and 181: nurses alone determine how to discharge their responsibilities to society; Myra Levine: prof emeritus Univ of Ill College of Nursing, 219: Cook County School of Nursing, pre WW II, her second choice, her first choice had a quota of Jewish students; wore blue uniforms with starched collar and cuffs and black silk tie “which we were told was mourn in memory of Florence Nightingale” Carnegie, 27-42 pubs: “Nurse training becomes nursing education at Florida A & M College,” Journal of Negro Education (spring 1948); Carnegie, 28: born and raised Catholic, played organ and sang; took classes of Oblate sisters of Providence, an all-black order, idolized and wanted to be a nun when finished high school. “All schools in Washington were then segregated and I went to an all-black high school” during height of Great Depression, worked after school and on weekends, in a caf that hired black help but catered to whites only; graduated at 16, went to New York , a cousin had attended Lincoln School for nurses, one of the two schools of nursing for blacks in New York then; put age down as 18, liked nursing. Lincoln school founded in 1898 for black school, by white philanthropists; a guest lecturer Mabel K Saupers, exec sec of Nat Assoc of Colored Graduate Nurses, 30: struggle of black nurses to gain recognition as full-fledged members of the ANA; her history of nursing course taught by a white who did not mention contributions by blacks or racial problems; 30: 1936 attended for first time convention of NACGN in New York, delegates from other black nursing schools; made solemn pledge to herself to “do all within my power to help change the system and break down the barriers that were keeping black nurses out of the mainstream of professional nursing.” grad 1937, and Depression still on and hard to get employment: only 4 of 200 hospitals in NY employed black nurse; Lincoln, Harlem, Seaview and Riverside; s the latter 2 for TB; she got job at Lincoln; then took exam for federal civil service “junior grad nurse” only 2 fed hospitals where black nurses employed, all-black Veteran Hosp in Tuskegee and Freedmen’s general hosp, all black, in Wash; had experience of Henry Street Visiting Nurses Service in Harlem, decided to get bachelor’s degree with major in public health nursing. 30: having been raised in Was DC had been exposed to racial discrim in schoos, hospitals, chrusches and many stores, but until went to Alabama, had not been segregated ona train. , h331: to Tuskegee, Tuskegee Institute a black school founce by Booker T Washington in 1881, got engaged while there; worked with rural community, black; then to Feedmen’s Hosp in Wash DC, broke engagement; enrolled in 2 courses at Howard Univ, blakc univ; in
Feb 190 renrolle din West Virginia Stte Colelege, a black school; provided nursing serviceto students in excagne for tuition, room and board; stipend; and did private duty at Lincoln in New york; inJune 1942 got BA from West Virginia State College, major in Soc andniors in Psych and History; then Medical College of virigina had separte nurising programs and separte cliical faciclitites; st Philip the black nurusing prog, joined fauculty in 1942 as clinicial insturtor and supervisor of obstetric nurisng; 4 other black nruses onfalcuty; at all black places is south, eas called Miss, but at Medical College of Virigina was Nurse Lancaster. And got this accepted; new nursing fdiector at St Philip, Alda Ditchfield, upheld 32: applied for nursing in navy, but black nurses not allowed; summer 1943 attended Teachers College NY. Hampton University, got first bacc prog accepted in cirginia; Bernice Carnegie, form Toronto went to St Philip because blacks not accepted in nruisng school in Torontp; housed at Carnegie relative, not sure of acommod, met Eric, and married after short courtship Dec 1944; ; 33: completed Toronto course in 945; 33: lunch incident n Florida; ; had to get clinical experience elsewhere; 34: schools with black but with white directors, sent mailed enquiries, “extended hand left dangling”; friend in Jacksonville sent her to dir of nursing at Duval Medical Center; the director accepted her hand, 35: swukkubg ti set example, but then threat of walk out of white nurses; for one year black nruses allowed to staff black wards only, then barriers dropped and whole hospitak open to black students 35: fight for full membership in Florida State Nurses Assoc. 1946 Convention in Miami Beach for white nurses; black nurses in basement of a black church in black section; pres permitted to attend one prog and report on it; they invited the white pres; in 1947 met at Dayton Beach, in different sections; all black members now permitted to attend one prog session and to attend joint prog meeting on collegiate meeting, had to sit in back

Egenes, Karen J. History of Nursing. Jones & Bartlett. Or

Ancient, deaconesses, modern Europe Hotel-Dieu, Fry, St John’s House, Fliedner, “Florence Nightingale and the origin of Professional Nursing” 4-nice, on Crimea but off; “Because Nightingale believed that dirt, rather than microscopic pathogens, were the cause of disease, she embarked on a campaign to thoroughly scrub the soldiers’ barracks and hospital wards, and to let in sunshine and fresh air. Within months, the number of deaths decreased dramatically. Nightingale, who had learned the principles of statistics from her father’s tutelage, carefully documented the results of her care and used
these as the basis for further interventions [cites WS no page]. Through her work, she laid the foundations for modern evidence-based practice.” heroine when back. School at St T. Cites Baly and Seymer.

6: US origins, Civil War. Gives names
8: Nightingale School influence on US schools. 1872 Philadelphia Women’s Hosp; 9: US leaders, Richards, Robb, Sophia Palmer 1854-1920 NY State Nurses Assoc founder; Lavinia Dock; Nutting... Wald founded first Visiting Nurse Assoc; Mary Breckenridge 1881-1965 nurse midwife;

3 notable schools founded by “committees of laywomen, rather than physicians” Bellevue, Connecticut and Boston at Mass Gen
10: US schools dependent on hospitals, unlike N School;
11: origins of public health nursing, no idea UK doing it earlier;


western medicine intro to Gold Coast from 1868, expatriate med officers, by 1878 missions had enlisted help of male orderlies; nursing in Ghana firstly a male occ, but 1899 first nursing sisters arrived and ladies began to come;

Chea Jia En. “Nursing: Nightingale’s Time and Today” Malaysian Journal of Nursing. 8,3 (January 2017):54-56. Author leopricorn@ymail.com student nurse, Tun Tuan Cheng Lock College of Nursing, Assunta Hospital, Malaysia online, cites Matters affecting. Student nurse. In English, okay article, short, 55: but she unwittingly bequested a legacy whereby most people from developing countries consider nursing to be a lowly occupation that is synonymous with only cleaning a patient’s wounds, bodily fluids and excrements which alone with the nurse’s uniform. In her time nurses treated as hospital maids; 56: nursing has taken a step forward and back, but now lacking “the profound sense of love and compassion of their predecessors” both a firm grasp on practices and a heart and soul that are never too full imperative.

Forrester, David Anthony, ed. Nursing’s Greatest Leaders: A History of Activism. New York: Springer 2016. BL 320 pp. Author PhD, RN FAAN UofT electronic Part 2, Modeling the Way. Chapter 2 Frances Ward, “Florence Nightingale: Where Most Work is Wanted.” 21-50. Has a timeline. Chapters, Mother Mary Aikenhead; Clara Barton; Margaret Higgins Sanger; Sister Elizabeth Kenny; Clara Louise Maass; Dorothea Dix; Lilian Wald; Mary Breckenridge; Edith Louisa Cavell; chapter 12 on unsustainable US health sysem; susan B. Hassmiller, PhD RN FAAN.... [get] foreword: FN the first
of many visionary nurse leaders who inspire me every day

Gehan, Edmund A. And Lemak, Noreen A. *Statistics in Medical Research: Developments in Clinical Trials*. New York: Springer 2012 [1994] 214 pp. Has FN in, cites Diamond and Stone, “enterprising and energetic nurse had an early interest in hospital planning and operation that influenced her close attention to, cites P. Brown 1989 with Farr’s advice did standardized forms for Uniform hospital Stats, sent papers to ISC; depended on Farr; asked Galton re chair; cites W-S Authors Gehan PhD, Lemak MD

Szreter, Simon. “The importance of social intervention in Britain’s mortality decline c.1850–1914: A re-interpretation of the role of public health.” *Social History of Medicine* no. 1 (988): 1-37. Szreter 1: McKeown iconoclastic work demonstrated that medical est., including efforts at improving public health, “Played only a minor role in the grand historical and demographic drama of the period,” decline of mortality rates; here a revisionist analysis, argues was misleading, in *Modern Rise of Populism*, not only nutrition, from rising income, asks if UK case the exception; 9: medical component, sc advances from immunization and therapy; hospitals dismissed outright, ref to 1955 article which concluded that hosp reforms in the last third of 19th cen prompted by FN’s highly critical revelations in her *Notes on Hospitals* on balance the effects of hospital work in this period were probably harmful” note 21: ref to McKeown and Brown, Medical Evidence, “this harsh judgment is not one that has been entirely endorsed by more recent research.” see S Cherry, Hospitals and population Growth: The voluntary general hospitals. Pop Studies. 10: McKeown “sleight of hand” 11-13, counter arguments to McKeown;

18: reinterpretation of McKeown, not decline of airborne diseases as a unitary category the predominant characteristic of changing mortality patterns, but “classic sanitation and hygiene diseases.” no doubt that first two thirds of 19th cen witnessed an increasing incidence, from overcrowding and lack of basic sanitation, proper water supply and waste disposal, the “ensuing disappearance of water-borne diseases in the last third of the century was due to the eventual provision of adequate sanitary facilities, long delayed but finally implemented.” McK himself ack improvements in water and sewage from seventh decade...

21: sewering alone, without commensurate attention to purity of water cd be liability, Farr showed, medical science in public health field, vital in what McK loosely calls “municipal sanitation, hygiene. “The narrow def of med intervention as either sc discovery or the effects of clinical and hosp practices only, misleadingly understates the importance of medical men and human agency in general in bringing about the nineteenth-cen
decline in mortality. Sanitarians contributed by convincing public opinion of the need for strategic measures to improve the urban env; cites Farr, Arnott, Kay and Southwood Smith, Chadwick; first Public Health Act 1848; “heroic” age of public health  
24: Public Health Act 1872 obliged local authorities to ensure pure water supply; pressure for the 878 Public Health (Water) ac made truly financially feasible; Adulteration of Foods acts; long slow dogged campaign; Simon credited loans of local authorities form central govt funds as true barometer of sanitary progress; 26: argues no one factor for decline, preventive measures of san and regulation; all but complete eradication of typhoid cholera and smallpox show effectiveness of various aspects of the “large-scale strategic public health measures which were introduced during this period.” Clean local water for typhoid and cholera; clean air the exception  
26: argues public health movement for “decline in mortality” in national aggregate stats in 1870s, was due more to the eventual successes of the politically and ideologically negotiated movement for public health than to any other positively identifiable factor. The resulting implementation of preventive measures of municipal san and reg of the urban env and food market actually arrived on the ground in the many new cities....”  
29: Public Heath Act (London) every new and rebuilt house had to have own proper and sufficient water supply. Expansion of local health and maternity services; 30: health visitors; lady health visitors and midwives became more professionalized; Midwives Act 1902; regulation of milk supply; 33: McKeown was prof at Birmingham; sees as laissez-faire approach, gains as by product of ec growth, so govt shd maximize ec growth.


Jones, Claire L. Dupree; Marguerite; Hutchison, Iain; Gardiner, Susan; Rafferty, Anne Marie. “Personalities, Preferences and Practicalities: educating Nurses in Wound Sepsis in the British Hospital, 1870-1920.” Social History of Medicine. Online May 4 2017: http://doi.org/10.1093/shm/hkx016 good article, Ms refs good article. Opposition to Lister in England, but Glasgow and Edinburgh influence spread; Croft one of fist hosp surgeons in London to express enthusiasm for Lister’s ideas, based on a germ theory of putrefaction, by 1890s... di dot mention Lister by name
but support demonstration by inclusion of “infective particles”; referred to Professor Tyndall’s lecture “Dust and Disease” particles or germs in the atmosphere, but to naked eye the air is empty endn29; John Tyndall “Dust and disease” BMJ (June 1871) 661; see R Richardson Inflammation, Suppuration.... Notes and Records of the Royal Society 2013,7, 211-29; ; Croft refers to Letheby “Lecture on the Right Use of Disinfectants” Med Times and Gazette (18873)


Harper, Christopher. “Florence Nightingale: Major new study will look at her life n Derbyshire.” Daily Telegraph. 15 October 2017 Paul Crawford study, working with University of Derby and Derby teaching hospitals NHS trust. statue cleaned up, no longer green. John Rivers cited; new position for PhD or near, Anna Greenwood Anna.Greenwood@nottingham.ac.uk History Dept. And Paul Crawford, Health Sciences

Crawford, Paul. “Florence Nightingale carried the lamp but modern nurses carry the can.” The conversation. Online. 23 April 2014. What would FN say about health care today? Compassion, but mid-Staffordshire restoring humanity. Crawford position “Health humanities” Nurses of today are scapegoats. Don’t use

Crawford, Paul; Brown, Brian; Nolan, Peter. Communicating Care: The Language of Nursing. Cheltenham, GL: Stanley Thornes 1998. 130: when FN developing nursing, considered it vital that nurses have moral character; 160: profession no longer as FN crafted it;

Mortimer, Barbara and McGann, Susan, eds. New Directions in Nursing History: International Perspectives. Ref to Harold Perkin. The Third Revolution: Professional Ethics in the Modern World 199 lightweight and somewhat nasty. Background, “The history of nursing has been dominated, overshadowed and at times swamped by the iconic figure of Florence Nightingale. Nightingale was an immensely complex, talented and long-lived woman whose published and unpublished output was enormous. Baly, Maggs, nursing before 19th cen ignored, see Carole Rawcliffe note 12 has section on Seacole: (in Background);


Sanitarian model in mid-19th cen. abstract: “while a Sanitarian medical paradigm fit the mid-nineteenth-century British citizenship regime better than one based on limiting contagion by quarantine, full implementation of the ‘sanitary idea’ had to wait upon adjustments after 1870 in the predominantly liberal citizenship regime, and particularly on the institutions of governance and ideas about the responsibility mix.

534: why only partial implementation of public health measures (prophylactic strategy) despite near consensus on the aetiology. Shaped by broader society - debates over role of state and its responsibilities vis a vis citizens; why “politics matters” more than science. Edwin Ackernecht view, authoritarian and liberal states favor different aetiology and prophylaxis

537 doing reform. Sanitary idea, consensus on a medical paradigm by mid century consensus on cholera cause, the sanitary idea; whether miasmic or water-borne, agreement that better san the solution

1848 Public Health Act inspired by miasma theory, Chadwick; also Farr; Snow water borne

539: pioneering 1848 Public Health Act; 540: act limited

542: sanitarians embraced the new citizenship regime, saw their policy proposals directly linked

545: the Royal San Commission of 1869 to 1871 found no provincial cities in Br had yet built the integrated sewers Chadwick’s landmark PHA of 848 had intended. End62 (Szreter Popoulation Health approach”

546: preparing the way; CDA

547: consolidating PHA of 1875 different: became imperative, from permissive end73 (Hamlin and Sheard); mun govs obliged to create local health boards and hire local health officers, and provide adequate local water and health services. Cost not longer an excuse.

“Municipal socialism”; 550: local boards got subsidized loans for sanitary services, increased 8 fold; so, even with sc consensus, action not taken 550: but stronger commitment than on Continent by 1870s newly enfranchised voters
cites Baldwin, Contagion and the state in Europe 1830-1930; Dorothy Porter, Health civilization and the state 1999


Dr Duncan and his adversaries 1847-63.
60: Demythologizing heroes not necessarily negative, FN “whose status as a national icon was largely of her own devising.” FB Smith, but “far from virtuous illuminator” but more interesting. Good grief. (Cites Add Mss 45751 JS to FN)

77: Fighting for Public Health. FN and Sutherland against them but Simon and Duncan for

Using Bacteriology in