

# Feminist, Activist, Nurse: Florence Nightingale's Legacy

Anne Marie RAFFERTY\*, Rosemary WALL\*\*, Jane SALVAGE\*\*\*

---

İletişim / Correspondence: Jane Salvage Adres / Adress: Florence Nightingale School of Nursing and Midwifery, King's College London, England

---

Greetings to the Florence Nightingale School of Nursing, Istanbul University, from your sister school, the Florence Nightingale School of Nursing and Midwifery, King's College London, England! We are happy to celebrate with you the centenary of the death of the world's most famous nurse, whose name both our institutions are honoured to bear. Here in London we are celebrating not only the life and legacy of Florence Nightingale, but also the foundation of our School exactly 150 years ago.

In this paper we will discuss how Florence Nightingale's feminism and activism shaped her attitude to reform, and how we need to honour the spirit of her legacy today. Nightingale believed in the fundamental goodness of humankind. Although her own background was one of wealth and privilege, she identified with the poor and undertook works of charity - "We should consider that the same tie connects us to every one of our fellows as the tie which connects us with God," she said (quoted in MacDonald, 6:432). She was suspicious of the trap of luxury for the affluent classes, and insisted on the fundamental rights of men and women to develop their potential. In particular, she was highly critical of the restrictions that kept so many women of her class captive to social convention, and unable to choose their own careers. She herself fought a long battle with her family before they agreed to allow her to work as a nurse.

## Feminist focus

Nightingale's family life inspired her to break the mould of a privileged girl at an early age. She was es-

pecially influenced by her father William, and the intellectual atmosphere of her home with her mother Fanny as hostess. Their eminent visitors included their neighbour and future Prime Minister Lord Palmerston, the mathematician Mary Somerville, and the scientist Charles Darwin. William Nightingale educated Florence in subjects as wide-ranging as chemistry, geography, physics, astronomy and mathematics, as well as history and ancient and modern languages. She imagined running off to college dressed as a man (Bostridge 2008, pp. 37-8) but at that time the universities were closed to women. Her parents opposed her early attempts to choose her own path in life and develop a career, rather than conform to their expectations that she should either marry or stay at home.

Nightingale's feminist views are demonstrated in an essay she produced in her early 30s, entitled *Cassandra*. This was later published as part of a larger work, *Suggestions For Thought*, in which she discusses religion, spirituality and the co-existence of good and evil in a God-created universe. In *Cassandra* the young Nightingale openly rejects the world of enforced female idleness for women of her class, the suffocating demands of family duty and the constant call of social rounds and obligations. She urges her readers to break free and make their way in a masculine world. It is a radical call to action: her recognition that it involves moral outrage and courage to challenge the prevailing norms should spur us on today.

Nightingale had offers of marriage. She was courted by Richard Monckton Milnes for at least four years.

---

\*Prof. Anne Marie Rafferty, Dean, \*\*Dr. Rosemary Wall, Research Fellow,\*\*\*Prof. Jane Salvage, Visiting Professor

When she rejected him for the last time in 1849, aged 29, she wrote a private note showing how torn she was between marriage and her pursuit of independence and intellectual endeavour: 'I could be satisfied to spend a life with him in combining our different powers in some great object. I could not satisfy this nature by spending a life with him in making society and arranging domestic things' (Vicinus and Nergaard, p. 40).

Nightingale escaped the disapproval and demands of her own family, and rejected marriage as a path for her own life. Her circle of women friends was wide and intersected with many different interests, including women pioneers and reformers like herself – such as Elizabeth Blackwell, the first female doctor in the UK, and Harriet Martineau, journalist and author. She supported the work of female pioneers of women's education. She became friend and mentor to two generations of nurses, but could also be a tough critic. Eventually, both family members and friends gave her practical as well as moral support for her work.

Elizabeth Blackwell had become the first woman from the UK to qualify and register as a doctor, in 1849. She completed her training in New York State, and continued her training as a midwife in Paris, and as a 'lady doctor' at St Bartholomew's Hospital, London. She inspired Florence and they met in 1849-50. Not only did Blackwell want to be a doctor, she wanted to be independent and free from marriage. However, their views soon diverged. Nightingale's views on the entry of women into the medical profession were rooted in her belief that few women had the necessary qualifications for entry. Nursing in many ways provided the ultimate rebellion as well as benefit - it was highly practical, and involved Nightingale's favourite prescription, hard work. When done properly, she thought nursing could have even more impact on patients than medicine, whose therapeutic options at the time were fairly limited. Nightingale also thought medicine was in dire need of reform; it was nursing where women could achieve change, controlled by female nurses, and taking only medical orders from doctors (Bostridge, pp. 151-154). Later in life, Nightingale came to support

women entering medicine, and her last two doctors were women.

She also held liberal views on women's issues such as prostitution. She challenged public opinion in exploring the causes of prostitution - economic pressures and domestic abuse. She also campaigned behind the scenes for the repeal of laws that allowed compulsory examination of suspected prostitutes for signs of syphilis, believing that the inspection of women for venereal disease amounted to legitimised rape. Sexually transmitted diseases were a major problem in the Army, and Nightingale believed that soldiers would be less likely to visit prostitutes if they had more entertainments and comfortable barracks. The laws were finally repealed in 1886.

Nightingale drew psychological strength and sustenance from her women friends and was at the centre of a remarkable and influential network. But her chief collaborators were men, such as the politicians Sidney Herbert, Harry Verney and Lord Palmerston, and the statistician William Farr, who were key to her work on health care reform in the United Kingdom and India after the Crimean War. The Nightingale Training School's Fund had a male committee, but Nightingale insisted that only a woman could supervise the trainee nurses.

### **Knowledge in action**

Political contacts and influential networks were important, but she thought the key to unlocking success was knowledge. It was this she craved, and it was central to her sense of empowerment. Her keen appetite and genius with numbers led her to demand a broader mathematical education than her father could provide or was expected for a woman of her time. Her sense of challenge and desire to change the world was driven by a firm belief in the value of useful knowledge, put to work and action. She was always willing to challenge convention and authority, and thought science was the vehicle to achieve social reform and the driving principle through which it could be delivered. Mathematics was key to unlocking laws of nature, the rhythms and regularities through which natural and so-

cial processes operated and through which humans learned the laws of God. 'God governs by His laws, but so do we when we have discovered them. If it were otherwise we could not learn from the past for the future,' she wrote (Epigraph, *Essay In Memoriam, MacDonald* 5:60).

She regarded statistics as the most important science, 'for upon it depends the practical art of every other art, the one science essential to all political and social administration, all education and all organisation based on experience' (MacDonald 5:39). At their most positive, scientific laws told people how to intervene, modify the cause of a problem and modify human behaviour. Knowing the laws of Nature provided the capability and responsibility to act and intervene for good. This she did with great skill, political acumen and dexterity, collaborating with the leading experts of the day.

### Contact and continuity

Nightingale's words still speak to us today at many different levels. We continue to struggle with problems which might not still be with us if a fraction of what she had fought for had been implemented. Take the state of modern hospitals. We still battle with excess mortality attributable to healthcare-acquired infections. The insistence on strict discipline in implementing hygiene measures, as pioneered by Nightingale, is vital to the solution (Griffiths, Renz and Rafferty 2009). In the UK recent outbreaks of healthcare-acquired infections had disastrous consequences for patients, families and staff (Healthcare Commission 2006; 2008). The cause of problems was system failure but the description of the conditions in the wards could have come from the incriminating pen of Nightingale herself.

Indeed, there is barely a topic in health care to which her writings and teachings do not apply. Whether the issue is meeting the Millennium Development Goals, the quality and safety movement, the public health and prevention agenda, or moving care closer to home, Nightingale speaks to us today. Her definitions of nursing, of both the ill and the well, are highly relevant to modern health care and have a decidedly

contemporary ring. 'What is nursing? Both kinds of nursing are to put us in the best possible conditions for nature to restore or to preserve health - to prevent or to cure disease or injury,' she wrote (*Sick-Nursing and Health Nursing*, Burdett Coutts, cited in Dossey, p. 289). She was acutely aware of the power of the environment to shape health outcomes, and the need to intervene and change the conditions using a strong evidence base. We must act on her insight if we wish to reduce the burden of chronic disease - intervening upstream and changing the social determinants of health is central to sustaining our health systems. She recognised the urgency, and was good at communicating it and mobilising opinion.

We still need to reminding of her observation that infant mortality is the most sensitive index of the health of a population, and what we would call 'health literacy' the key to reducing it. 'The life duration of babies is the most 'delicate test' of health conditions,' she wrote. 'What is the proportion of the whole population of cities or country which dies before it is five years old? ...the remedies are well known... want of household care of health... but how much of this knowledge has been brought into the homes and households and habits of the people?'. Her solution was to create a cadre of workers known as 'health missionaries' and to advocate a dual system of nursing, sick and health-nursing, to take the laws of nature and maintenance of good health into the home. She regarded district nursing as 'the Star of Bethlehem', the crown of good nursing, the modern civiliser of the poor' (1897, cited in Dossey, p. 280). Moving care closer to home remains a major plank of current health policy. There is a drastic need to strengthen community nursing services worldwide and retool them for these new roles and demands.

More broadly Nightingale also emphasised the importance of carrying public health messages and measures into workplaces and schools, which remains a priority in our health care systems. She spoke frankly and advocated putting pressure on officials and politicians through public opinion. Her 'health-at-home nursing' and its modern equivalents are ever more vital in this

economic downturn. Her interest in population health was fuelled by the belief that 'the health of the unity is the health of the community. Unless you have the health of the unity there is no community health' (cited by Dossey, p.296).

Nightingale's famous publication *Notes on Nursing* still provide inspiration, showing us how to make the patient comfortable, provide a healing environment and allay the anxieties that attend the care of the sick, in this case in the home. It also shows that Nightingale's skill and dexterity in this domain was of a high order - the many thoughtful touches she recommends reveal her as someone who used her intelligence and powers of communication to show how much the quality of care depends on the detail. Her 1897 letter to the nurses trained by the Nightingale Fund reminds them that 'nursing is in general made up of little things; little things they are called, but they culminate in matters of life or death' (cited by Dossey, p. 278). How true this is - and it is the detail that gets lost in the clamour to do more, and the ever-faster pace of care.

### **The healing environment**

Nightingale reminds us that the quality of the environment is paramount. There is much to learn from her writings on good hospital design as a means to enhance the quality of the healing environment and patient experience. She highlighted not only the design of the physical or built environment, but the psychological environment, on which she wrote with compassion, sensitivity and attention to detail. The reader of *Notes on Nursing* can only marvel at her intelligence, wisdom and command of her subject, and her encouragement to the reader to achieve more. In her view of the world, the moral and the clinical were indivisible and perhaps they should be for us too. Spurring her students on to higher standards, she also warned that professional ambition should always be tempered with humility. She also understood that the smooth running of an organisation relies on the work of many, and provided the perfect definition of teamwork: 'The very essence of all good organisations is that everybody should do her own

work in such a way as to help and not hinder every one else's work' (address to the Nightingale School, 1872).

But the last word brings us back to the fact that it is the small things in care, as in life, that matter. The nurse should be 'thorough and perfect in every detail of ward work, of order and cleanliness, and down to the temperature of a hot water bottle...of a poultice,' she said. 'The smallest thing is important to a patient, to that most delicate instrument, the human body. We are justly horrified at a mistake in giving medicine or stimulant. We are not perhaps so horrified as we should be at mistakes in fresh air, feeding helpless patients, cleanliness, warmth, order, and all the rest of what we are taught - that Nursing helps Nature and the Physician and Surgeon. It is straightness that is so much wanted; straightness of purpose, work, conduct' (*Notes on Hospitals*, 1863).

Care delivered close to home was Nightingale's ideal. The vital contribution of prevention to health and the development of public health nursing have fallen well short of the progress she advocated. Indeed today's challenges are remarkably similar, as she would probably be shocked to discover.

No-one can lay claim to the breadth and depth of Nightingale's interests and few can match the power of her intellect. So many of her words ring true today. The continuing need to improve the quality of health and health care is a constant and difficult challenge: Nightingale's example, her courage and enthusiasm and persistence, should inspire us to keep fighting. As she said, 'I attribute my success to this - I never gave or took any excuse. How very little can be done under the spirit of fear! Were there none who were discontented with what they have, the world would never reach anything better.'

Thank you for listening to our thoughts today. Across the miles, nurses around the world will continue to be inspired by Florence Nightingale, and to join together in improving health and health care for our families, our nations, and all citizens everywhere.

© the authors, 2010