

As we celebrate the year of the International Year of the Nurse and Midwife, **Susan Kent** explores Florence Nightingale's impact on healthcare – and the lessons modern Irish health policy could take from her approach

Health's great reformer remembered

Many believe the three people who alleviated the most suffering in the 19th century were James Young Simpson, who invented chloroform; Joseph Lister, who invented antiseptics; and Florence Nightingale, who founded the modern nursing profession. To honour Nightingale's 200th birth anniversary, the World Health Organisation has dedicated 2020 as the International Year of the Nurse and Midwife.

Like 21st-century celebrities, Nightingale was named after the city of her birth. Although confined to bed from a chronic disease (Crimean fever/brucellosis), she continued to reform nursing and public/hospital healthcare. She became the greatest authority on hospital design, management, military hospitals and public health of her time. Idealism combined with wisdom is the secret of her reform success. Few realise that the 19th-century reforms introduced by Nightingale in response to population need are similar to those seen in Ireland today, addressed by many governmental policies such as Sláintecare, the National Maternity Strategy, the Patient Safety Bill and Open Disclosure.

Known as the "ministering angel", Nightingale was a strong administrator, statistician and trailblazer who wrote prolifically for government. A social media influencer of her day, she gained important followers especially in government. She spent two years in Scutari in Turkey, but was forever known as "the lady with the lamp": 4,000 men were housed in a 1,700 capacity hospital and were nursed on corridors, and she walked the four miles of corridors at night to check on every one.

Against much family resistance, Nightingale studied as a nurse before being summoned by Sydney Herbert, British Secretary of War, to care for British soldiers in Scutari. She was prepared for and anticipated this call. The authorities in Scutari resisted the engagement of nurses until they were required to administer care following a battle where countless wounded attended the hospital.

While waiting to work, Nightingale's 38 nurses cleaned everything they could and developed governance structures in response to challenges. She wrote that it is, "bad sanitary, architectural and administrative environment that made it impossible to nurse".

Following a Times newspaper report by William Russell, the British government and people funded Nightingale's reform propositions, such as the acquisition of a prefabricated hospital created by the esteemed architect, Isambard Kingdom Brunel, to improve the



Florence Nightingale: her greatest achievement was reform of nursing

hospital/sanitary architecture. She developed a system ensuring soldiers remained outside of hospital to receive care.

Nightingale addressed poor nutrition by acquiring the assistance of the "celebrity chef" Alexei Soyer (who mobilised soup kitchens in Ireland during the Famine) to organise the Scutari kitchens and menus. She believed the orderlies contributed to the mortality rates, so she reformed the recruitment, specific training and permanent attachment of orderlies to the hospitals.

Systemic defects

During the first winter, 4,000 men died, 90 per cent of them succumbing to disease. Nightingale's meticulous data, which correlated hospital cleanliness and systems to mortality rates, was presented in 1858 using a Coxcomb graph, one of her own inventions. Her data resulted in policy changes that decreased mortality rates from 42 per cent to 2 per cent.

One of Nightingale's reports showed how most sickness was caused by defects in the system or lack of a system into whose care the soldier was committed. Her theory outlined how hospitals were developed to treat the sick and wounded when they reached the hospital, rather than a system to prevent them from arriving in the first place, therefore proposing an end to more hospitals.

Reform implementation reduced mortality rates in peacetime by 50 per cent. Therefore, improving the troops' health required improvements in the general health, housing and cleanliness of the population. This was

consistent in her environmental writings, precursors to the social determinants of health, developed a century before the historic Alma Ata Charter.

Her statistical genius explored maternal puerperal deaths, child infections and epidemiological understanding of population needs. She established Health Missionaires (Public Health Nursing) at 72 years of age, realising that while bringing sanitation to the people of India, the people in rural England were also in need.

However, her greatest achievement was the reform of nursing. Nightingale stated that the greatest practical lesson nurses learn is, 'to observe . . .' and she believed that data collection was not just for miscellaneous information, but for analysis to save lives and increase health and comfort.

In 1860, she established a nursing school in St Thomas' Hospital in London. After five years of training she dispatched the nurses throughout Britain and the colonies to train other nurses. She transformed nursing into a profession and reformed society's view of women in the workplace. She prioritised nurses attending the

poor workhouses and identified that this was effective if she could separate the sick from others of the population, recognising the different disciplines within the nursing profession.

Today we have treatments for infections and diseases, however, we misuse them – the overuse of antibiotics comes to mind, or the failure to realise the brilliance of vaccines. We treat complex conditions, yet we are still underperforming in our approach to prevention of ailments such as obesity, liver disease and diabetes. We are not mastering the social challenges of our time such as homelessness, addictions and psychological distresses.

Nightingale proposed immediate action and doing all in our power to relieve suffering and prevent onset of illness. Above all, she stated that no one has ever done anything wise by listening to the "voices from without" or dissenting voices. Her writings may have elements that are outdated, however, many of the ideas ought to be reframed, teased out, developed further and tested anew.

Margretta Styles wrote that "in changing times, the nursing profession on the brink of an identity crisis must search for its roots and restore, reinstate and reassert its enduring symbols within a contemporary context".

Just as in 1859, a good dollop of human compassion, a broad knowledge base, intelligent reasoning and understanding are needed by nurses and midwives now to address the population health issues. A good leap of faith from others would also help. ■

Susan Kent is a nurse, midwife and public health nurse