The Solemn Lady with the Lantern

O ur heroes, with the passage of time, become increasingly heroic. What had been exemplary behavior is transformed, after centuries, into legendary performance; and appropriate esteem is then replaced by inappropriate worship. Thus, our credulous children are taught that our past leaders had been faultless, fearless and without blemish. Saying that many of the founders of this nation were slave-holders or religious bigots, for example, is now tantamount to heresy.

Consider one of the great heroes of Great Britain, a woman of great wealth and privilege, who exploited her position in British society to advance the health of its citizens more effectively than a battalion of contemporary physicians and surgeons.

Her childhood, as viewed in retrospect, was enriching and fulfilling. She traveled extensively, visiting such places as Egypt and the many nations of Europe. Her education, which was intensive, was supervised by her father who taught her Latin, Greek, Italian and German, as well as a rigorous training in mathematics which served her well in later years.

Nursing in the early decades of the Victorian Era was not yet a profession; indeed, in contemporary government statistics it was listed as a lower form of domestic help. To be called a nurse in the London of 1850 was to be disparagingly labeled as a vagrant, an alcoholic or a prostitute. Nightingale’s interest in nursing met with her family’s opposition and hence she delayed her entrance into this nurturing calling until age 33 and only after covert apprenticeships in both Germany and France.

1854 was the year that Britain and France entered into an ill-advised military venture called the Crimean War. It was a conflict ennobled by heroic poetry (such as Tennyson’s 1854 paean to the suicidal “Charge of the Light Brigade”), appalling mortality rates and the inept military leadership of Lord Raglan.

With 38 recruited nurses, she volunteered her services to Britain’s War Office, and she was promptly shipped off to the Turkish town of Scutari. Her inspection of the military hospital facilities revealed an incredibly filthy, vermin-infested venue, a lack of the most fundamental of facilities and a hospital mortality rate of about 42%. Her great administrative skills changed these “death houses” into efficiently managed, sanitary resources with mortality rates well below 10 %. Her corrective actions caught the attention of the world press and many poems (such as Longfellow’s 1857 tribute to her: “…a lady with a lamp, I see”) were generated in her honor.

And so, Florence Nightingale has entered history as a gentle nurse, an angelic soul wending from bedside to bedside, with her lantern, bringing a nurturing compassion to dying recruits, with little mention devoted to her extraordinary accomplishments beyond the Crimean interlude.

Nightingale had returned to her London home in 1856 and lived, virtually as recluse, until her death in 1910. And while she rarely left her bed chambers, she had a steady succession of visitors and her subsequent achievements in enhancing the health of Britons are truly legendary. But it was not her gentility or nurturing nature that furthered her social agenda. Rather, it was her hard-nosed insistence and reliance upon the inflexible realities of health statistics that overcame the resistance to her plans. And her opposition? Much of Parliament, the senior military establishment and even humanitarians such as Charles Dickens who were offended by her assertiveness and her reliance upon cold statistics rather than congenial anecdotes.

Of her many allies and supporters, there was William Farr (1807 – 1883) born in poverty, educated as a physician and ultimately director of Britain’s General Registry Office, the agency that gathered data on births, deaths and reportable illnesses. A professional friendship ensued, a political alliance based upon their shared belief that numbers, vital statistics, have incalculable merit when applied to society’s problems. And so epidemiologic studies of the successive cholera epidemics of London offered conclusive evidence that the disease was water-borne (and not air-borne) giving additional evidence to the controversial germ theory of disease.

Nightingale exploited Farr’s data to prove the incompetency of Britain’s health care system, both civilian and military. And in a Victorian Age when women were assigned solely to maternal and domestic tasks, Nightingale managed to create Britain’s first professional college of nursing (at St. Thomas’ Hospital), a new medical school solely for the military, a commission that thoroughly revised health care standards for the military, both in the field and in barracks; and perhaps her greatest achievement: transforming nursing from a menial task to a noble profession.

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