

# The History of Pediatric Nursing in Germany. Outlining a Research Desideratum

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## Abstract

The history of pediatric nursing is an underexplored field, particularly in the German-speaking world. While nursing history has seen significant research progress in recent years, there is still a gap regarding the specific evolution of pediatric nursing. This article outlines key research questions and areas of relevance for pediatric nursing history, addressing topics such as the professionals involved, the role of infant mortality reduction, infection control, changing childcare ideals, and the relationship between pediatric and general nursing. While the focus is on Germany, these perspectives are at least partly transferable to other European countries.

Keywords: Pediatric nursing, infant mortality, history of infectious diseases, semi-professionalization, ideals of education, child abuse

## 1 Introduction and Overview of Existing Research

Research into the history of nursing has produced visible successes over the past 20 years. Historians and nursing scholars interested in history have published papers on a wide variety of topics: Research exists on the history of general nursing, geriatric nursing, psychiatric nursing, professional organization, professional politics, wartime nursing, and on various nursing organizations and corporations. However, one research gap persists, at least in the German-speaking world: the history of pediatric nursing, which extends from circa 1890 to 1990. At the time of writing, there are only two relevant publications. One is an article by Bettina Blessing entitled “Baby and Infant Healthcare in Dresden, 1897–1930”, the other is an article by Sylvelyn Hähner-Rombach about mothers on children’s wards. An article in a nursing textbook is forthcoming at the time of writing (August 2023). A scarcity of literature therefore compels this article to draw on exemplary historical sources and otherwise to emphasize its exploratory nature.

Its aim is less about mapping initial research findings and more about seeking to derive suggestions for promising research on the history of pediatric nursing from the little that is available today. Thus, this article should not be regarded as an introduction to the field, nor as a blueprint for an encyclopedic future research program. Rather, it is intended to outline, in loosely linked fashion, possible areas within pediatric nursing that are of particular relevance to nursing history and its neighboring disciplines in Germany. These areas are based on the following questions:

First, what role did the fight against infant mortality play as a starting point for the development of the pediatric nursing profession?

Second, what was the significance of infectious diseases and infection control for pediatric nursing practice and professional policy, especially in relation to transitions in the history of epidemics?

Third, how did historical changes in ideals of childcare and corresponding practices affect pediatric nursing?

Fourth, who exactly were the groups of actors who nursed children professionally? And how did pediatric nursing develop first into a highly specialized field and later into a modern salaried profession? And, in the case of Germany: How did pediatrics manage to maintain professional autonomy from general nursing?

This article is about the situation in Germany, where children's hospitals have been established in significant numbers since about 1890. The perspectives are likely to be transferable, to some extent, to Austria, where pediatric nursing has developed structures similar to those in Germany. With the exception of these peculiar aspects of professional policy, the points covered in this article might be partially relevant for other European countries (as well as those where nursing developed by adopting the Anglo-American system). It must be emphasized that a separate research project would be needed to reach definitive conclusions here.

## 2 The State of Research in the English-speaking Countries

The statement that the history of pediatric nursing is a largely unexplored field may be true for the German-speaking world, but the situation appears to be somewhat better in the English-speaking research landscape, especially in Great Britain: Here, after all, there are a number of summaries in textbooks and journal articles on the development of pediatric nursing, although the majority of these are brief introductions.<sup>1</sup> Taking this into account, it must be noted that research here is also still in its infancy. These works describe the emergence and development of pediatric nursing in the context of the rise of children's hospitals in the second half of the 19th century. Another topic is its relationship to general nursing, which does not seem to have been entirely free of tensions here either. The quantity of articles and their thematic scope already provide a much better overview than for the German-speaking world. Moreover, some of them are reflective in terms of method and theory, take into account dimensions of social and ethnic origin and gender, and thus also meet historiographical requirements.<sup>2</sup> Some specific topics have also been explored, such as the reorganization of visiting hours in children's hospitals since the 1950s in Great Britain<sup>3</sup> and Australia<sup>4</sup> public-health nurses in the context of the fight against child mortality in the USA,<sup>5</sup> school nursing in Great Britain<sup>6</sup> and the USA<sup>7</sup>, the emergence of intensive care pediatric nursing, and nursing in pediatric oncology in the USA.<sup>8</sup> Finally, an oral history publication already exists for Great Britain, in which numerous contemporary witnesses, including (former) pediatric nurses and patients, were interviewed.<sup>9</sup>

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<sup>1</sup> Gasper/Clarke 2021; Clarke 2017; Gasper/Charles-Edwards 2002; Jolley 2011; Whiting 2005; Gasper/Mitchell 2010; Lomax 1998.

<sup>2</sup> Hawkins 2012; Tanner/Hawkins 2016; Hawkins 2021.

<sup>3</sup> Jolley/Shields 2009; Bradley 2001.

<sup>4</sup> Bradley 2001; Wood 2008.

<sup>5</sup> Thompson/Keeling 2012.

<sup>6</sup> Kelsey 2002.

<sup>7</sup> Houlahan 2018.

<sup>8</sup> Foglia/Milonovich 2011; Wilson 2005.

<sup>9</sup> Jolley 2003.

### 3 How Important was Infant Care to the Emergence of the Pediatric Nursing Profession?

By the middle of the 20th century, pediatric nursing had succeeded in claiming a monopoly on the professional care of sick children, although it remains to be researched how thoroughly this claim was actually enforced.<sup>10</sup> This semi-professionalization started with the establishment of infant homes in the latter half of the 19th century. Here, nurses, in collaboration with pediatricians, developed practices to successfully reduce infant mortality. By 1890 there was a body of knowledge comprehensive enough to enable the creation of a new medical field with corresponding specialist care. First, neonatal care required highly specific skills and long experience. A second area was the provision of adequate baby food and the monitoring of its safety.<sup>11</sup> Reducing infant mortality was also a public health education project. Therefore, pediatric nurses became experts who advised mothers on nursing and nutrition.<sup>12</sup> Apparently, the field of infant care preceded the later expansion of the scope of the pediatric nurse's expertise to include toddlers, older children, and adolescents. In Germany until after World War I, a pediatric nurse was called a "Säuglingsschwester" (infant nurse). In 1923, the job title was changed to "Säuglings- und Kleinkinderkrankenschwester" (infant and toddler nurse). Only from 1957 onwards, did children of all ages become part of the job title, when it was changed to "Säuglings- und Kinderkrankenschwester" (infant and children's nurse).<sup>13</sup> To what extent the early job titles, which referred only to the care of very young children, were an actual representation of the work in children's hospitals, is a question that requires clarification. After all, the children's hospitals where pediatric nurses worked are very likely to have cared for older children too, not only infants.<sup>14</sup> However, the caring for babies was apparently deemed the qualifying core competency for quite a long time.

### 4 The Role of Infection Treatment and Control

The acceptance of pediatric nursing as an autonomous discipline was apparently a process that took several decades. The successes in reducing infant mortality were celebrated publicly and probably boosted the perception of pediatric nurses as competent experts. The triumph against infectious diseases in children sparked public euphoria in a similar way. The implementation of infection control measures, especially the introduction of nationwide vaccinations and antibiotics by about 1970, constituted only the climax of this development. Classic infection control had become part of nurses' competence since the spread of asepsis and antisepsis in the last quarter of the 19th century. It therefore seems possible that the successful repression of epidemics promoted and perhaps also shaped the professionalization processes in pediatric nursing. Admittedly, the same could also be argued to some extent for adult nursing.<sup>15</sup> Nevertheless, it seems reasonable to attribute special importance to infection control in pediatric nursing: Vaccination campaigns were primarily aimed at children, and hospital architecture features such as separate isolation or infection buildings, hygiene locks and

<sup>10</sup> Hähner-Rombach 2018, pp. 151, 160, 166–167.

<sup>11</sup> Blessing 2015.

<sup>12</sup> Wegmann 2012.

<sup>13</sup> Hähner-Rombach 2018, p. 151.

<sup>14</sup> See Eckart 2010 for example.

<sup>15</sup> Nolte 2020.

modular glass boxes for isolation were found more frequently in children's hospitals.<sup>16</sup> Besides prevention, diseases such as poliomyelitis, diphtheria, and whooping cough required specialized care. They also resulted in lengthy stays in children's hospitals and often even more protracted stays in children's sanatoriums or rehabilitation facilities. Infectious diseases thus provided children's nurses with many possibilities to claim professional expertise.

## 5 Changing Childcare Ideals

The lengthy hospital stays in the first half of the 20<sup>th</sup> century and their eventual drastic curtailment in the second half of the century point to another set of issues: the shaping of relationships between pediatric nurses and their patients. Beginning in the late 1960s (in the English-speaking world about 15 years earlier), new models of parent-child attachment began to take hold.<sup>17</sup> Previously, it was considered not only possible but also desirable for pediatric nurses to replace the primary caregiver for children of all ages.<sup>18</sup> And in fact, separations of weeks or even months made sense from the perspective of infection control. In Germany, however, the prevention of nosocomial infections remained a major argument against admitting relatives, even after the risks of serious harm from infectious disease had been steadily minimized by the 1970s.<sup>19</sup> Isolation probably produced very specific forms of care relationships within the social space of the hospital. And allowing parental involvement during the course of the 1980s probably resulted in a profound change to the pediatric nurse's core competence.

Interestingly, childcare ideals shifted away from authority-oriented to partnership-oriented models around the same time. Whether this change is related to the opening of the children's hospitals is a question that has yet to be answered. In Germany, this is a relevant issue, as there is currently growing public interest in the history of children who experienced violence during the 1950s and 1960s in hospital settings. Publicly organized curative and convalescent care was a mass phenomenon in Germany. Millions of children, including infants and toddlers, were separated from their parents for weeks or even months at a time for convalescent cures or sanatorium stays. The reports of physical and psychological abuse that happened during these stays have become legion. The perspective of pediatric nurses is crucial for an adequate assessment of these events but has yet to be taken into account.

## 6 Issues of Professionalization

Who cared for infants and children professionally? Particularly in the long period of time before the official establishment of the nursing profession, it is difficult to identify the various actors involved without projecting modern categories onto the past. Not surprisingly, there is a broad spectrum of these actors. This is especially true for the period before the first nursing schools were established, which was around 1890 in Germany. Here, it was not until 1923 that a state-recognized training program for infant nurses was established.<sup>20</sup>

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<sup>16</sup> Photographic albums Nos. 1–3 of the Heidelberg University Children's Hospital, collection of the Institute of Medical History and Ethics, Heidelberg University.

<sup>17</sup> Grossmann 2009.

<sup>18</sup> Von Miquel 2022; Schmuhl 2023.

<sup>19</sup> Internal documents from the Heidelberg University Children's Hospital, collection of the Institute of Medical History and Ethics, Heidelberg University.

<sup>20</sup> Hähner-Rombach 2018, p. 148.

Both the place of employment and the range of activities are likely to have shifted substantially over time. Pediatric nursing and education, for example, were intertwined to a greater degree than they are today. Around 1900, many women who had been trained at children's hospitals worked as educators in middle- and upper-class households or in residential education.<sup>21</sup> On the other hand, the majority of women who cared for infants and children in households or homes on a professional basis were probably not clinically trained pediatric nurses. This can be deduced from the fact that around 1900 there were only about a dozen children's hospitals and schools in the whole of Germany.<sup>22</sup> For a long time, pediatric nurses could not possibly have claimed a unique competence, let alone a monopoly, in caring for children, even in hospitals. Even after the first children's hospitals were established in the last quarter of the 19th century, it would be decades before children were no longer treated in hospitals for adults. As a result, general nurses and orderlies may have been substantially involved in the care of children without being labeled as children's nurses. The relationship between infant care and the midwifery profession deserves special attention. A comparative or interwoven history of both professions would be a worthwhile perspective, in view of the numerous overlaps of competence (and conflicts). Probably not quite as conflict-laden but certainly also worthwhile would be to clarify the role of community nurses in the care of children. This somewhat arduous work of differentiation is nonetheless important to understand the process through which pediatric nursing became a profession.

But even after pediatric nursing had become the established profession of a clearly defined group, the question of who had access to the sick child remained central to their professional status. Starting around the 1960s, pediatric nursing underwent a number of further changes. The lengths of stay in children's hospitals were slashed over the course of the following decades to a fraction of what they were before circa 1970. Children's nurses not only had to get used to sharing access to the children with parents, they also saw some of their competence taken away by professional educators and hospital teachers.<sup>23</sup> This likely shaped the self-assertion struggles of pediatric nurses which took place during those same years. In contrast to English-speaking countries (and large parts of the world), pediatric nursing in Germany was until recently largely isolated from general nursing. Children's hospitals ran their own separate schools for nurses that led to a qualification which (at least on paper) qualified nurses to care for children exclusively. This meant that, conversely, general nurses could not simply practice pediatric nursing. Pediatric nurses did not participate in professional nursing associations but were organized in a subgroup of an association for pediatricians. There was no common nursing register to provide a basic shared professional infrastructure for the different branches of nursing. In the course of the modernization processes of nursing in the 1960s and 1970s, this special status came under serious scrutiny. But despite pressure to adapt to the international standard of generalized nursing training and professional organization, reforms failed due to the resistance of pediatric nurses and (arguably more

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<sup>21</sup> Wegmann 2012, pp. 96–97; timeline consisting of excerpts from the annual reports of the Heidelberg University Children's Hospital. Archive of the School of Pediatric Nursing, Heidelberg.

<sup>22</sup> Archive of the School of Pediatric Nursing, Heidelberg.

<sup>23</sup> This is clearly reflected in a manuscript of a speech given by Matron Elisabeth Leist, head of the School of Pediatric Nursing, Heidelberg, collection of the Institute of Medical History and Ethics, Heidelberg University.

importantly) because of objections from pediatricians.<sup>24</sup> In any case, this would make another promising perspective for research.

## 7 Summary

In summary, much of the history of pediatric nursing remains unexplored. Some basic trends give rise to research questions. For example, the emergence of pediatric nursing as a profession had to be reconstructed from a variety of practices associated with relationships between carers and children. The struggle against infant mortality, in particular, will in all likelihood turn out to be the nucleus of the semi-professionalization of pediatric nursing. Physical and mental abuse enabled by children's long-term isolation in clinics is currently the issue receiving the most attention, at least in Germany. Unlike in most other countries, the exceptionalism of pediatric nursing in Germany has prevented it from becoming part of a more general nursing profession until recently.

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<sup>24</sup> Stemann 1969.

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