American participation in the creation of a nurse model in Brazilian society in the 1920’s

ABSTRACT
The objectives of this historical-social study are: to describe the circumstances that determined the participation of North American nurses in the formation of the Brazilian nurse; and analyse the process of implementing institutional rituals as a strategy of symbolic fight, to confer visibility to the nurse profession and discuss the symbolic effects of institutional rituals for the consecration of a nurse model for Brazilian society at the time. The primary sources are constituted of written documents and photographic documents relative to the studied theme. By reading the documentary corpus an analysis was made of the symbols that had distinguished and established the hierarchies of the actions, as well as the strategies undertaken for the North American nurses, towards implementing a new model of nurses in Brazilian society, coherent with the model of the North American schools of nursing. Institutional rituals, conducted or testified by prestigious figures of the history of Brazil and nursing, were fundamental for the construction of professional identity.

DESCRIPTORS
History of nursing
Emblems and insignia
Models, nursing
Education, nursing

PARTICIPAÇÃO AMERICANA NA FORMAÇÃO DE UM MODELO DE ENFERMEIRA NA SOCIEDADE BRASILEIRA NA DÉCADA DE 1920

RESUMO
Estudo histórico-social cujos objetivos são: descrever as circunstâncias que determinaram a participação de enfermeiras norte-americanas na formação da enfermeira brasileira e analisar o processo de implantação de rituais institucionais como estratégia de luta simbólica, para conferir visibilidade à profissão de enfermeira e discutir os efeitos simbólicos dos rituais institucionais para a consagração de um modelo de enfermeira para a sociedade brasileira da época. Fontes primárias: documentos escritos e fotográficos relativos à temática do estudo. A leitura do corpus documental comportou a análise dos símbolos que distinguiram e situaram as hierarquias das ações, bem como as estratégias empreendidas pelas enfermeiras norte-americanas, no sentido de implantar um novo modelo de enfermeira para a sociedade brasileira, coerente com o modelo das escolas de enfermagem norte-americanas. Os rituais institucionais, protagonizados ou testemunhados por personagens prestigiosos da história do Brasil e da enfermagem, foram fundamentais para a construção da identidade profissional.

DESCRIPTORES
História da enfermagem
Emblemas e insignias
Modelos de enfermagem
Educação em enfermagem

RESUMEN
Estudio histórico-social que objetivó describir las circunstancias que determinaron la participación de enfermeras norteamericanas en la formación de la enfermera brasileña, analiza el proceso de implantación de rituales institucionales como estrategia de lucha simbólica, para hacer visible la profesión de enfermera y discutir los efectos simbólicos de rituales institucionales para la consagración de un modelo de enfermera para la sociedad brasileña de la época. Fuentes primarias: documentos escritos y fotográficos relativos a la temática estudiada. La lectura del corpus documental integró el análisis de símbolos que distinguieron y situaron las jerarquías de las acciones, así como las estrategias emprendidas por las enfermeras norteamericanas, en sentido de implantar un nuevo modelo de enfermera para la sociedad brasileña, coherente con el modelo de las escuelas norteamericanas. Los rituales institucionales, protagonizados o testimoniados por personajes históricos prestigiosos de Brasil y de la enfermería, fueron fundamentales para la construcción de la identidad profesional.

DESCRIPTORES
Historia de la enfermería
Emblemas e insignias
Modelos de enfermería
Educação em enfermería
INTRODUCTION

The establishment of modern nursing in the Brazilian capital at the start of the 1920's occurred under the auspices of public health, in the context of a held reform led by the former Director of the National Public Health Department (DNSP), the health surveillance physician and scientist Carlos Chagas. In that context, the new conception of public health, as well as sanitarist physicians’ participation in Brazilian health issues, appointed the need for a new agent, whose personal and professional determinations permitted that group’s proposal to complement physicians’ work through health surveillance care and sanitary education for patients treated at dispensaries of the federal government in Rio de Janeiro, through home visits. That reform offered the opportunity for a group of North American nurses to visit Brazil as participants in the Technical Cooperation Mission for the Development of Nursing in Brazil. The mission remained in Brazil for one decade (1921-1931), simultaneously working on three fronts: the organization of a unified public health nursing service, on the same hierarchical line as other DNSP inspectorates; the creation of the DNSP School of Nursing, today Escola de Enfermagem Anna Nery, in line with North American nursing teaching standards; and the reorganization of the DNSP’s Hospital Geral da Assistência, to serve as a training area for nursing students.

The creation of Escola de Enfermagem Anna Nery, in 1922, led to the transposition, to Brazil, of a nursing model that combined the characteristics of the traditional Nightingale model with others developed during its adaptation process to the American society since the times of the civil war.

Across a decade, the American nurses struggled to build the image of a solidly prepared nurse, even going against many physicians inside the DNSP, who merely wanted to solve the most immediate problems in their daily practice. That reform offered the opportunity for a group of North American nurses to visit Brazil as participants in the Technical Cooperation Mission for the Development of Nursing in Brazil. The mission remained in Brazil for one decade (1921-1931), simultaneously working on three fronts: the organization of a unified public health nursing service, on the same hierarchical line as other DNSP inspectorates; the creation of the DNSP School of Nursing, today Escola de Enfermagem Anna Nery, in line with North American nursing teaching standards; and the reorganization of the DNSP’s Hospital Geral da Assistência, to serve as a training area for nursing students.

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Across a decade, the American nurses struggled to build the image of a solidly prepared nurse, even going against many physicians inside the DNSP, who merely wanted to solve the most immediate problems in their daily practice. In that struggle, it was verified that the training process of Brazilian nurses included strategies aimed at granting visibility to the emerging profession in the Brazilian society, through the establishment of rituals and emblems of the profession and the adoption of strict discipline, which modeled the behavior of future nurses.

To study this problem, the following goals were set: to describe the circumstance of North American nurses’ participation in Brazilian nursing education; to analyze the implantation process of institutional rituals as a symbolic fight strategy, to grant visibility to the nursing profession; and to discuss the symbolic effects of institutional rituals for the consecration of a nurse model in the Brazilian society at that time.

METHOD

The primary sources for this historical-social study were written documents, such as school board reports for 1923, 1925 and 1927, filed at the Documentation Center of Escola de Enfermagem Anna Nery at Universidade Federal do Rio de Janeiro. The two photographs, also part of the documentation center’s collection, were included in the document corpus because they exemplify the importance of institutional rituals for the visibility of Brazilian nursing, through the presence of renowned characters of health history, such as Carlos Chagas, during the school’s solemnities, and the photograph of students and teachers in front of an important building, which the group appropriated itself of as a symbolic good.

In line with the historical method, the study covered three essential phases: data survey; critical data analysis and conclusions. Thus, after the selection and classification of the documentary sources, the quality and relevance of the information in these sources was determined with a view to the proposed historiography research. This source validation process is called external criticism and internal criticism. External criticism questions a historical document’s authenticity and, in that sense, considers its authorship, origin and nature. The aim of internal criticism is to apprehend the document’s contents, meaning and veracity. Moreover, secondary sources, including papers and books, supported the analysis of data from the primary sources, which constituted the documentary corpus.

In the data analysis phase, the set of political, social and sanitary facts was taken into account to interpret the historical data, which permitted the historical exposition based on the selected documents. The French sociologist Pierre Bourdieu’s thinking served as the theoretical framework, especially the concept of habitus. His central argument is that social practices are structured, that is, they display properties typical of the social position of who produces them, expressed through the habitus, which translates the intrinsic and relational characteristics of a position in a univocal lifestyle, that is, in a univocal set of choices, goods and practices. Thus, the habitus works as a set of distinctive traits and distinguished separations, which constitute a mythical-ritual system and symbolize individuals in social spaces.

Thus, the effect of the statutory attribution the institutional rituals granted which, by consecrating a new identity, imposed the incorporation of a habitus in line with what is expected from the consecrated person – measuring up to his new position, were themes addressed in the analysis of the document corpus.
This study derives from the research project “Emblems and Rituals in the Identity Formation of Brazilian Nurses”, which got Institutional Review Board approval at Escola de Enfermagem Anna Nery / Hospital São Francisco de Assis on August 31st 2004. Protocol No 017/06.

RESULTS AND DISCUSSION

The forces at stake in the federal capital and the arrival of American nurses

At the start of the twentieth century, Rio de Janeiro, former capital of Brazil, was the only large city and differed from other Brazilian cities because of its banking network, as a trade and industrial development hub, and because it offered the largest railway network in the country. This condition derived from the proximity of raw material suppliers, capital accumulation resulting from agriculture or foreign trade and the existence of a considerable consumption market in the city itself and regions bordering on the railways. Also, plenty of workforce was available due to foreign immigration(9).

This large group of Brazilian and foreign immigrants, however, constituted a permanent focus of tension regarding employment opportunities, as the most promising and non-eventual activities were reserved for foreigners. In addition, these many immigrants aggravated the city’s chronic problems, including lack of water, sanitation and insufficient housing. The city’s geographical shape, cut by hills, bays and mangroves, also worsened the problems deriving from population growth and hampered the city’s expansion. Consequently, the rise in housing prices made the poor population establish itself in collective and unhealthy facilities, in the center and port areas of Rio de Janeiro(10).

What added up to this critical picture were the repercussions of the first world war, accompanied by the interruption of foreign capital when Brazil had to comply with external debt commitments. Inside the country, for popular classes, this brought down wages and increased the cost of living and unemployment rates(11).

The situation was aggravated even further when, in September 1918, a flu epidemic arrived from post-war Europe, called the Spanish flu, which led the city to chaos and disclosed the public apparatus’ inability to cope with health, considering that, in less than two months, more than two-thirds of the population was affected, killing approximately twelve thousand people(12).

The press reported on fatal cases, criticized public services’ activities and accused the government of unlawfully withholding information on the true situation of the epidemic. Also, Brazilian health surveillance physicians were concerned with the publication, in 1916, of the Report on the sanitarist physicians Arthur Neiva and Belisário Pena’s Medical-Scientific Expedition to the regions chastened by draught in Northern Bahia, Southern Piauí and Northern and Southern Goiás in 1912. This report reinforced the impression the work by Euclides da Cunha called Os Sertões (1902) had left, which showed the precarious living conditions of the population in the Brazilian inland(13).

Thus, health and sanitation turned into national themes and created the opportunity for a movement called Pró-Saneamento do Brasil, led by health surveillance physicians, which joined a large number of intellectuals, physicians, politicians, journalists and scientists and demanded the organization of an administrative apparatus in health and the State’s more active participation through stronger actions against diseases(14).

The president-elect Epitácio Pessoa (1918-1922), committed to the sanitarist movement, created the National Public Health Department in 1920, establishing sanitary practices inside the State apparatus and permitting the political rise of the medical-sanitary intellectual circle, which started to influence health decisions in Brazil and was led by the renowned scientist Carlos Chagas, nominated to lead the department(15).

The sanitary reform Carlos Chagas led took place between 1920 and 1924, through a series of decrees, issued in the attempt to redefine the State’s role in Brazilian health issues. In this context, the cooperation program with the Rockefeller Foundation started in the federal capital and the replacement of the sanitary policy by the sanitary education concept.

Meanwhile, Lewis Wendell Hacket, former director of the Rockefeller Foundation’s International Health Council, encouraged Carlos Chagas to get to know nurses’ contribution to prophylaxis campaigns in the United States, intermediating negotiations with the Rockefeller Foundation, which had been working in Latin America since 1915, to arrange for the visit of a mission of North American nurses to Brazil. Underlying this decision was the premise that population health did not only depend on sanitary campaigns, but much more on professionals’ quality. In that sense, Wicklife Rose, from the Rockefeller Foundation, established primary contacts with nurse Ethel Parsons, former head nurse of the Child Hygiene and Public Health Nursing Division in Texas, inviting her to lead a mission of nurses that would come to Brazil(16).

Parsons arrived in Rio de Janeiro on September 2nd 1921, starting a diagnosis of the situation, according to which nursing schools in the federal capital did not adopt the minimal nursing standards that existed in Anglo-Saxon countries; hospitals were overcrowded and both male and female persons practiced nursing, without any professional preparation; she also found that DNSP physicians working at tuberculosis, venereal disease and child hygiene services had hired 44 girls, some with low education levels, who, after twelve lectures they offered, started to work as visitors(11).
During the North American nursing mission’s stay in Brazil, Parsons served as the General Superintendent of the DNSP’s Nurses service, centralizing nursing command. Nevertheless, the work to set up modern nurses had to be done in stages and through strategic approaches, including the effect of practical (care and public health) demonstrations on the utility of solidly prepared nurses10.

According to Ethel Parsons, the nurse was the central figure in teaching on the sanitary doctrines in force in the civilized world, which were necessary to preserve health, emphasizing that the nurse’s aptitude was based on her ability to teach through demonstration, in view of her hospital experience9.

During its stay in Rio de Janeiro, the North American nursing mission significantly contributed to the doctinaire inculcation and technological importation project in health and education, at the heart of capitalism, within a conjuncture under strong American influence11. This indoctrination process exemplified North American nurses’ fight to impose the legitimate view, through power relations established among agents, which at bottom derives from and is proportional to the symbolic capital accumulated across the social trajectory.

Establishment of institutional rituals for Brazilian nursing

During the North American nursing mission’s activity period, Claire Louise Kieninger (1923-1925), Loraine Genèviève Dennhardt (1925-1928) and Bertha Pullen (1928-1931) served as the deans for what is currently Escola de Enfermagem Anna Nery, inaugurated on February 19th 1923. The latter’s term in office was a prorogation period of the mission in Brazil, as the initial agreement determined 1928 as the contract’s end date12.

The course took two years and four months. The first four months were an experience period, during which the student could be disconnected at any time, left to the school’s dean. The cap reception ritual marked the student’s actual integration into the student group. The excerpt from one student’s speech, who belonged to the pioneering group at Escola de Enfermagem Anna Nery, when the first reception ritual of the school cap was held in 1923, evidences the incorporation of a habitus in line with Christian ethics, reinforcing their new social condition:

It means that you belong to the class of those who, forgetting about themselves, seek the welfare of those who suffer, it means that you belong to a class that has been trained and educated to repress one’s own desires for the common good and that you grow in your heart a well of goodness and energy. You already are no longer fully master of yourself, everything you will do will fall back on your class6.

The graduation of the first group of nurses from Escola de Enfermagem Anna Nery, in June 1925, was celebrated through religious, professional and social events, which joined civil, religious and military authorities. Thus, on June 19th, the archbishop of Rio de Janeiro celebrated a solemn mass at the mother church of Candelária. The graduation ritual included different moments: the opening, while the hymn of nurses was performed, student members entered the premises in ascending order. After Carlos Chagas’ speech, D. Sebastião Leme blessed the degrees and badges. After the class speaker’s speech, all participants sang the national anthem. Also, a gala ball was held at an elite club in Rio de Janeiro6.

During the graduation ritual, the lighted lamp, which evokes Florence Nightingale, passed through the hands of each graduate before being passed on to the class of candidate students. The lamp transfer, which symbolized the shared commitment to keep alive the ideals of the profession, reinforced the student’s vote, commitment, faith and fidelity towards the institution and nursing, turning the moment more severe6. The next day, the busts of Carlos Chagas and Claire Louise Kieninger were inaugurated, as well as a plaque that rendered tribute to Ethel Parsons. Picture 1 registers the event, which took place outside the salão nobre of the Students’ Boarding House in the neighborhood Tijuca.

At the center of this posed picture are the busts of Claire Louise Kieninger and Carlos Chagas and the plaque for Ethel Parsons, stating: To Mrs Parsons – The great organizer of the Modern Nursing Service in Brazil, a Tribute from the 1st Class of Brazilian Nurses 06/19/1925.

Picture 1 – Inauguration of busts of Claire Louise Kieninger and Carlos Chagas and a plaque to render tribute to Ethel Parsons Source: Documentation Center, Escola de Enfermagem Anna Nery/UFRJ

The Brazilian flag rests on the bust of Carlos Chagas, revealing the final letters of the legend, and the American flag on the bust of Claire Louise Kieninger. The honored persons’ individual attributes and their respective countries’ flags reinforce existing alliances between both and the valuation of American nurses’ participation in the establishment of a nurse model for the Brazilian society.

Beneath the valuation of women and nurses, which the importance of the event granted, it was evidenced that the honored persons represented the roles men and
The rituals and emblems of the profession, which the North American nurses established since the inauguration of Escola de Enfermagem Anna Nery in 1923, mainly served to consecrate a new symbolic order, as rituals entail statutory deposit effects, since they mark not only the passage from one state to another, but determine the incorporation of a professional habitus in line with social expectations regarding the profession\(^{(18)}\).

In that sense, institutional rituals reaffirmed the student’s commitment to the profession because they represent communication acts that notify someone about his/her identity\(^{(19)}\). Thus, the cap or the degree, as distinctive marks of students and nurses, entitled them to a right to be according to an established identity, which represents the learning of an adequate habitus for their new social position.

Hence, one of the traits that marked the North American deans’ term in office at Escola de Enfermagem Anna Nery, was the implantation of rituals and emblems (Cap Reception, Graduation and Inaugurations), already established in their country, during solemnities that joined people from different Brazilian and American social spheres, turning the group manifest to itself and other people. That is the case because the consecration of the group, granted by the rituals, depends on the power of the authorities who establish it and on the receivers’ willingness to get to know and acknowledge the institutional conditions of a valid ritual.

The rituals’ symbolic efficacy rests in the fact of acting on the real by acting on the representation of the real\(^{(19)}\), as rituals, by establishing differences, transform other people’s representation of the consecrated person by modifying mainly the behaviors they adopt towards him/her. At the same time, the investiture transforms the person’s representation of herself, as well as the behaviors she believes she is obliged to adopt in order to adjust to that representation. Therefore, rituals are responsible
for reinforcing the social bonds among individuals and the group they are inserted in, entailing a kind of reaffirmation of a social group’s identity.[19]

The different social groups tend to endow themselves with means that allow them to endure beyond individual agents’ finiteness, through the use of symbolization and immortalization instruments[8] as reference points to express and inculcate, intentional or implicitly, a social identity. In that sense, the light that keeps alive the memory of Florence Nightingale, the precursor of modern nursing, who during the Crimean War passed through field hospitals’ infirmaries at night to help the victims of war, present in the rituals of Escola de Enfermagem Anna Nery since its establishment, celebrates and transmits the history of a global nursing personality to posterity, which should be known, learned and reminded.

Moreover, the promotion of nursing figures and facts through statues and portrait inaugurations aimed for and resulted in the appropriation (like in the case of Carlos Chagas) or construction of mythical figures (prestigious North American nurses) as models to be followed. This strategy also contributed to consecrate the founders of Brazilian nursing, preserving their memory for posterity, as the portrait or statue immortalizes the person it represents[8] and permits capitalizing on symbolic profits deriving from the effects of immortalization.

These strategies were combined with the planning and control of students’ actions in regulated and regulatory spheres. Through this educative work, social constructions were incorporated and therefore inscribed on the students’ bodies as a system of dispositions, a habitus, principles producing practices and the appreciation of practices. Thus, the habitus works as a grammar that produces distinct and distinctive practice, which the subjects’ actions reflect and which update the marks of their social position and structural distinctions that define them.

Besides, these strategies contributed to strengthen the group’s feeling of internal unity, through the standardization of attitudes and gestures[20], which were considered indispensable for the nurse model and compatible with the moral, social and sanitary standards at that time. Thus, ethics and esthetics were constructed, underlying the effort to teach the students how they should behave as nurses, with decent gestures and looks, adequate ways to smile and talk. Besides, the nurse’s uniform combined with the demand for a discrete, dignified and homogeneous posture. Therefore, the incorporated signs that cover the ways of talking, pose, posture, economy of gestures, combined with external body signs like uniforms, medals, armbands, etc., symbolize nurses’ social position through distinctive differences that grant them social acknowledgement.

It should be highlighted that the Nurse’s Hymn, lyrics by Maria Eugênia Celso and music by Eduardo Couto, sang during these rituals, represented a strategy aimed a pro-

Excerpts from the Nurse’s Hymn evidence strategies of religious devotion and exaltation of attributes intrinsic in women’s nature, such as charity and abnegation, which are also considered important to legitimize that women go out to work: And all nurses will be the messengers of God’s love; provide shelter, consolation is the lemma of our lives and the glory of our profession[10]. Thus, the valuation of female attributes in professional practice, implicit in the division of sexual roles, which should guide nurses’ daily work through discrete, silent, generous and unselfish care, evidenced great material and symbolic division of the social world.

Underlying the institutionalization effect of rituals and emblems, the Nurse’s hymn contributed to legitimize women’s insertion in health, through the valuation of religious and patriotic attributes, as a successful strategy to disseminate nurses’ good image to the Brazilian society[21]. And that is the case because the rituals, as symbolic manipulation strategies, that is, represented in things like hymns and public acts, intended to determine the impression that other people should have these properties and their bearers, so as to create mental representations and social manifestations, in line with the properties presented as such.

In that sense, the so-called liturgical conditions ruling the way rituals are manifested, such as people’s etiquette, the order of rituals, the presence of authorities and the order of speeches, hymns, the composition of tables and emblems like flags and insignia, constitute important visible elements to create mental images of the institution and consecrated people.

Thus, the North American nurses’ consecration of a nurse model for the Brazilian society in the 1920’s comprised the establishment of institutional rituals and the adoption of strategies aimed at processing a transformation in the candidate nurses’ habitus. In practical terms, these strategies contributed to make the nascent profession known and acknowledged by society at that time. To the extent that, at the end of the North American nurses’ mission to the capital of Brazil, in 1931, Escola de Enfermagem Anna Nery offered a solidly developed teaching program and had graduated 73 nurses, approximately 17 of whom were taking graduate programs in the United States. In terms of limitations of the mission’s work in Brazil, based on the analyzed data, it is observed that the desired incorporation of Escola de Enfermagem Anna Nery into Universidade do Brasil, upon its creation, was not achieved. Nevertheless, the dissemination of the school model was guaranteed when Escola de Enfermagem Anna
Nery was granted the condition of official standard school (Decree 20.109, issued on June 15th 1931).

CONCLUSION

At the end of the North American nurses’ mission to the federal capital in 1931, nurses graduated from Escola de Enfermagem Anna Nery demanded the positions of power American nurses had occupied inside the School and in the DNSP. Although the American presence corresponded to the imposition of a hegemonic worldview, it contributed to the valuation of the nursing profession in the Brazilian society.

The establishment of a new nurse model in the Brazilian society was accompanied by a set of strategies, aimed at constructing a group identity, so as to make the profession known and socially renowned. In that sense, the promotion of nursing facts and figures aimed for and the profession known and socially renowned. In that sense, the promotion of nursing facts and figures aimed for and resulted in the construction of symbolic capital, deriving from important social contacts with sanitary authorities, like in the case of the scientist Carlos Chagas. Besides, the construction of mythical nursing figures as models to be followed, enunciated elements to identify the profession.

Hence, ritualistic repetitions, like inaugurations, cap reception and graduation ceremonies, in combination with the perpetuation and transmission of the profession’s knowledge and emblems (flags, statues, medals, hymns), witnessed by prestigious characters in Brazilian and nursing history, were fundamental to construct the professional identity.

At the end of this study, a historical version could be elaborated on American participation in the establishment of a nurse model for the Brazilian society in the 1920’s. It is important to continue research on the theme though, also in the Rockefeller Foundation’s files (foundation that sponsored the mission of American nurses in Brazil) in the United States, with a view to a reading of the past based on other document sources. Another study limitation was the impossibility to reconstruct history based on subjects’ testimonies, through interviews as, due to the time elapsed, this data collection technique could not be used, which would have contributed to enrich data analysis and discussion, through a confrontation with other document sources used in this study. Besides, the versions and interpretations developed here are but mere provisional truths, as experience cannot be recovered.

REFERENCES