

A Sociological Interpretation of Primitive Nursing

Abstract

Nursing is the oldest service and is as old as human culture and civilization. Whenever and whatever man began to care for the sick, the injured, the wounded nursing began. The beginning of primitive nursing where families lived in close proximity for protection is unwritten and unknown. Primitive men recognized that things such as poisons, wounds, burns effect health or even kill them, and that cold, heat, overstraining, too much sun or overeating might cause some minor ailments and discomforts. Besides from these so called natural ills, however, most primitives believed that they suffered or died from diseases or illness attribute to supernatural causes. As the Shamans or medical man utilized magical or super natural means in their cure as well as more prosaic treatment. In such types of society the major efforts were directed towards the diseases and not the patients.

Keywords: Primitive, Nursing, Shamens, Deaconesses, Constantinople, Samhita, Prehistoric, Ancient, Ahinsa, Vedas.

Introduction

Nursing, however, is as old as human civilization. Whenever and whatever man began to care for the sick, the injured, the wounded nursing began. The setting of primitive nursing where families lived in close proximity for protection is unwritten and unknown; therefore, we do not know with certainty how nursing began in primitive and ancient society yet it is evident that prehistoric man did practice some sort of medicines, but how and under what conditions can left to conjectures, since these people have gone and have left no written documents. During the time of lapses between prehistoric and modern time, primitive people have been markedly slower progress in nursing than in the more dynamic civilizations. Primitive men recognized that thing such as poisons, wounds, burns effect health or even kill them, and that cold, heat, overstraining, too much sun or overeating might cause some minor ailments and discomforts. Besides from these so called natural ills, however, most primitives believed that they suffered or died from diseases or illness attribute to supernatural causes. As the Shamens or medical man utilized magical or super natural means in their cure as well as more prosaic treatment. In such types of society the major efforts were directed towards the diseases and not the patients.

In all the societies, however the truly sick man was weak and helpless and could not fulfill the tasks that were normally expected from him. In such cases one has to watch the patient, nurse him and care for him. In most primitive societies this nurse was a close female relative. At that time there seems to have been an even more specialized types of nursing care. Among the African tribes the sick man was cared by family women.

Reviews of Literature

Regarding to the nursing services in primitive societies and modern society, a number of studies have been conducted by different academicians and eminent scholar. Dennis and Christian (1996), Alhuwalia (1971), Srivastava (1975), White (1978), Venkataratnam (1979), Ramanamma and Bombaywale (1980), Srivastava (1996). Janet (1996), Raghavchari (1990), Judd; Sitzman & Davis (2010) explored, described and analyzed nursing services in India and other societies of the world. Some of the other studies are as follows:

Bagga (2012) reviewed and critically examined the various aspects related to policy, service, and education & training for nursing and midwifery in India and suggested suitable strategies for development of competent nursing and midwifery human power.

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Shelby et. al. (2016) in their article synthesized the body of descriptive and empirical research on nurse migration from India, including nursing recruitment from and retention within India.

Chhugani & James (2017) find out that patients and the public have the right to the highest performance from the healthcare professionals and this can only be achieved in a workplace that enables and sustains a motivated and well-prepared workforce. Catering to the needs of nurses and combating their challenges can make nurses empowered, encouraged, challenged and affirmed to continue doing what they do best without any barriers.

Christensen (2017) suggested that against the varied historical background, it would be remiss to suggest that men have paved the way for nursing as it is today. Instead men's contribution to nursing has, for the most part, been integral in helping to establish nursing in its own right.

Varghese (2018) in his paper sought to examine the agenda-setting process to understand the constraints on policy development for nurse leadership. This paper also shows that the agenda of strengthening distributed nurse leadership in India is constrained by both the compromised social position of nurses and the imbalance in distribution of power and influence of nurses within the health system. This analysis also brings to attention the need to go beyond a strategy of creating few nurse leaders at the top. There is consensus among the experts that the nurse participation in decision making from the grassroots to the institutional level requires several facilitating policies targeting various levels of health system.

Nursing in Sumerian and Egyptian Cultures

The Sumerian culture is known as the oldest culture of the world, and the world's known medical prescriptions scratched on a 4000 years old clay was translated in 1953 A.D. (Dolan 1968). Yet medical progress did not parallel social progress and female had never equaled to the male. Herodotus, the Greek historian, implied that Egypt in its later period was land of specialists with physicians and nurses (Bullough & Bullough 1969). Egyptian temples were often healing temples used to perform many nursing duties. There were wet nurses (Bullough & Bullough 1969) at least for the nobility and there were divinities that were known as goddess of nursing. Some of these nursing deities were also the deities of parturition, watching over the mother and children, especially the royal children. It is said that some of our present day nursing techniques and duties also were known in Egypt and physicians or surgeons instructed the wife or nurse on what to feed the patients? Ancient Egyptians recognized and developed treatment of several gynecological infections, sexual transmitted infections, including chlamydia and gonorrhoea. They had pregnancy tests. The first record of pregnancy test is from the ancient Egyptians 4,000 years ago, and it was even believed to incorporate a determination of the sex of the fetus (Sullivan 1997). There were notable similarities between the care of women during pregnancy, childbirth, and their daily lives in the ancient Pharaonic times and the current

era of modern health care for women throughout most of the modern world (Fouly 2012). There is no doubt that the Egyptian nursing was one of the best nursing of the ancient world.

Nursing in Early Bablonia

The Babylonian civilization (Dolan 1968) had more medical documents. Hammurabi, the king of Bablonia is remembered for his code of law, a compilation of the oldest preserved codes of ancient law. The code of law was somewhat humanitarian and tried to prevent the defrauding of the helpless and reduce the cost of medical care. Medical treatment in Bablonia was primitive the illness was caused by sin and by displeasure of the God.

Nursing in Early Greek

The Greeks (Srivastava 1996), however, gave a new direction to the medical thought by separating medicine from magic and by raising it to the status of science. The advances made at that time made ancient Greek medicine much closer to modern than any other historical form of medicine. This does not mean that the religious medicine was unknown to the Greeks. The Greek (Bullough & Bullough 1969) medicine always retained a religious orientation. Hippocrates of Cos often called as the father of medicine and is best remembered today by the 'Hippocratic Oath' which was probably developed after his death. Hippocrates of Cos II or Hippocrates of Kos (460 BC – 370 BC) was an ancient Greek physician of the age of Pericles, and was considered one of the most outstanding figures in the history of medicine. Rome was the cultural colony of the Greeks, in Greek, nurses, midwives as they always attended the most of the deliveries, assisted by a few women companions. Most of the professional nurses were probably salves, which had strengthened their position in medical care.

Nursing in Roman Civilization

Roman civilization is known for its advanced public health system including nursing. There was a good infrastructure like sophisticated sanitation including sewage systems, drainage and public baths. Many women and monks provided care for patients, primarily the elderly and the needy. The women, who used to provide nursing, were called Deaconesses (Theofanidis and Sapountzi 2015). In the year 400 there were around 40 deaconesses serving as parish nurses in Constantinople (Blainey 2011). Phoebe, a disciple of the Apostle Paul, is considered as first mentioned deaconess or first district nurse.

Nursing in Ancient India

Ancient India occupied one of the southern peninsulas of Asia, has a good heritage of medicine. The oldest scriptures of Hinduism are the Vedas, written in Vedic, the parent language of Sanskrit. It is said that these four books were given by Brahma originally. The Rig-Veda contains suggestions for medical treatments by the use of herbs and incarnations. The fifth Veda, Ayurveda (Watts 1981) or the traditional system of Indian medicine is known as the science of life. The word meaning of word Ayurveda, Ayur means life and Veda means knowledge, so Ayurveda means science of life.

Lord Buddha himself took very keen interest in supporting the science of medicine. However, Indian surgery received a setback during this period because of the doctrine of Ahinsa (Tabish 2000). Buddha used to attend to the sick himself. To look after the sick was treated as a noble cause. Ashok erected a series of pillars, which included an edict ordering hospitals to be built along the routes of travelers and that they be well provided with instruments and medicine consisting of mineral and vegetable, drugs, with roots and fruits. Prevention of diseases became a matter of first importance and hygiene practices were adopted. Cleanliness of the body was a religious duty. Doctors and nurses (midwives) were to be trustworthy and skill full. They must wear clean clothes and keep their nails cut short.

Charak and Sushruta (Dolan 1969) were exponent physicians in ancient India. Both of them collected medical information into a compendium or SAMHITA. Charak in second century A.D., a court physician of King Kanishka, presented a clear understandable ethical standard required for those who cared for the sick. Volume I, section XV of his Samhita emphasized that the persons who are nurses should be good in behavior, distinguish for purity, should possess cleverness and skill, imbued with kindness, skilled in every service a patient may require, competent to cook food, skilled in bathing and washing the patient, rubbing and massaging the limbs, lifting and assisting him to walk about, well skilled in the making and cleaning of beds, get ready for patient and skillful in waiting upon one that is ailing and never unwilling to do anything desirable that may be ordered. Dhanvantari, the patron god of Indian medicine, also initiated many methods of healing and passed it to Sushruta.

Sushruta (Dolan 1969) who lived about 5th century A.D. described diseases, medicinal plants, procedure relating to the surgery and some 121 different surgical instruments. He also described (Wilkinson 1969) the relationship between disease, medicine, nurse and patient.

Conclusion

It is observed that nursing and caring in different primitive societies is as old as the history of human culture and society. The process of child care and human services did start with the development of human civilization and culture. Yet the primitives in all the societies were ignorant and the natural law and, therefore, attributed diseases to evil spirits. They thought that illness was a punishment for their sins and misdeeds. The medicine they practiced viz, the primitive medicine was aimed to get rid of evil spirits by sacrifices and rituals offered to gods or by wearing charms and amulets ect. As the knowledge of humans grown they took help from nature in curing the illness. Ancient Greek nursing during Hippocrates, Egyptian nursing during the Pharaonic period and Indian nursing in Vedic and Buddha period were well developed.

References

1. Alhuwalia, Balraj K. (1971). *Socio-Economic Background of Army Nurses: A Case Study: Poona : University of Poona*
2. Blainey, G. (2011). *A Short History of Christianity. Penguin Viking.*
3. Bloom, J. R.; Alexander, J.A. and Nuchols, B.A. (1997). *Suffering and Hospital Efficiency in the United States.*
4. Bullough & Bullough (1969). *The Emergence of Modern Nursing. London: The Macmillan Company*
5. Dolan, A. J. (1968). *History of Nursing. Toronto: W B Saunders Company*
6. Dennis, A. and Christian, M. (1996). *Effect of Wage on Retention of Nurses. Canadian Journal of Economics. Vol. 29. Issue 1.*
7. Fouly, H. (2012). *Ancient Egyptian Women's Health Care in Relation to Modern Women's Health Care Practices: An Overview. The International Journal of Childbirth Education. 2(4). January*
8. Janet, G. (1996). *A Social History of Wet Nursing in America: From Breast to Bottle. Cambridge History of Medicine. Cambridge: Cambridge University Press.*
9. Judd, D.; Sitzman, K. & Davis, M. (2010). *A History of American Nursing: Trends and Eras. Jones and Bartlett Learning.*
10. Madan, T.N. (1980). *Doctors and Society: Three Asian Case Studies: India, Malaysia, Sri Lanka. Delhi: Vikas Publishing House Private Limited.*
11. Marriot, M. (1955). *Western Medicine in a Village of Western India.*
12. Raghavchari, K. Ranjana. (1990). *Conflict and Adjustments: Indian Nurses in the Urban Milieu. Delhi: Academic Foundation.*
13. Ramanamma, A. and Bombaywale, U. (1980). *Socio-Economic Background of Nurses. Indian Journal of Social Work. Vol. IX. No. 4. Nov. 1980.*
14. Srivastava, A. L. (1975). *Human Relations in Social Organizations. Allahabad: Chugh Publications.*
15. Srivastava, D. M. (1996). *A Study in Medical Sociology. New Delhi: Radha Publications.*
16. Sullivan, R. (1997). *Divine and Rational: The Reproductive Health of Women in Ancient Egypt. Obstetrical & Gynecological Survey. 52(10).*
17. Suryamani, E. (1989). *Organization and Semi Profession: A Sociological Study of Nurses.*
18. Tabish, S. A. (2000). *Historical Development of Health Care in India. https://www.researchgate.net/publication/290447383.*
19. Theofanidis, D and Sapountzi, D. (2015). *Nursing and Caring: An Historical Overview from Ancient Greek Tradition to Modern Times. International Journal of Caring Science. Volume 8. Issue 3. September- December.*
20. Venkataratnam, R. (1979). *Medical Sociology in an Indian Setting. New Delhi: South Asia Books.*
21. Watts, E.A. (1981). (Ed.). *A Hand Book of Trained Nurses Association in India. Calcutta: The Commonwealth Trust Limited.*

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22. *White, R. (1978). Social Change and the Development of Nursing: A Study of the Poor Law Nursing Services. London: Henry Kumpston.*

23. *Wilkinson, A. (1969). A Brief History of Nursing in India and Pakistan. Delhi: The Trained Nurses Association of India.*