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ZBORNICA ZDRAVSTVENE IN BABIŠKE NEGE SLOVENIJE -
ZVEZA STROKOVNIH DRUŠTEV MEDICINSKIH SESTER, BABIC
IN ZDRAVSTVENIH TEHNIKOV SLOVENIJE

ZAŠČITNE sestre

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Celostno obravnavo poklica zaščitne sestre monografija podkrepi z osvetlitvijo strokovne organiziranosti zaščitnih sester, pri čemer izpostavi tudi njihovo sodelovanje z ženskim društvom. V Ženski zvezi so imele stalno predstavnico, ki je koordinirala delo obeh organizacij. Na povabilo Ženske zveze so imele predavanja o preventivnih ukrepih za zdravje mater in otrok. Na Žensko zvezo so se obračale tudi glede urejanja svojega poklicnega statusa, saj so bile v glavnem zaposlene kot honorarne uslužbenke ali dnevničarke med pomožnim osebjem. Zaščitne sestre so v Ženski zvezi dobile podporo, ko je s higienskega zavoda prišla pobuda, da se za sestre uvede celibat, čemur so sestre odločno nasprotovale in se temu uprle. Predsednica društva Angela Boškin je pozivala sestre k vključitvi v stanovsko organizacijo in aktivno družbeno delovanje. Članice ženskih gibanj so zaščitnim sestram priznavale strokovnost in kompetentnost, kar je zlasti prišlo do izraza pri vprašanju legalizacije umetne prekinitve nosečnosti tudi iz socialnih razlogov. Monografija torej odpira tudi ženska vprašanja in nudi iztočnice za nadaljnje raziskovanje odnosa med spoloma v obravnavanem obdobju.

V okviru Zavoda za socialno-higiensko zaščito otrok v Ljubljani je bila leta 1929 ustanovljena šola za otroške vzgojiteljice in negovalke z namenom promocije pravilne nege in higiene otrok ter z namenom zaposlovanja domačih deklet pri posameznih družinah. Šola, ki je sprva izobraževala v obliki tečajev, se je v šolskem letu 1935/36 preimenovala v Šolo za otroške sestre negovalke v Ljubljani in vse do leta 1951 je pouk trajal eno leto. Trajanje pouka se je postopoma podaljševalo. S šolsko reformo leta 1959/60 se je šolanje podaljšalo na štiri leta. Monografija nas sistematično vodi skozi razvoj šole, razpisne pogoje, potek izobraževanja in omogoča globlji vpogled v šolo, ki je prvotno vzgajala kader za vzgojo in nego otrok v privatnih družinah, postopoma pa je izobraževala kader za domove za dojenčke, otroška zavetišča in otroške bolnišnice. Splošnemu razvoju šole sledi seznam diplomantk šole za otroške sestre negovalke, katerega vir je arhivsko gradivo Zgodovinskega arhiva Ljubljana. Monografija bralcu tudi pri tem ponuja natančen seznam, s katerim absolventke niso zgolj številke statistike, ampak zaživijo s svojimi poklicnimi zgodbami.

Obdobje po drugi svetovni vojni je bilo čas hitrega ustanavljanja številnih otroških ustanov in s tem naraščanja potreb po otroških negovalkah. Nova oblast je reševala situacijo z organiziranjem krajših usposabljanj, ki so potekala vzporedno z rednim šolanjem v Ljubljani. Izobraževanja so tako potekala v Ljubljani, Celju in Mariboru.

Tako kot zaščitne sestre so se strokovno organizirale tudi otroške sestre negovalke, a avtorici monografije opozarjata, da arhivsko gradivo glede tega vprašanja še ni odkrito, zato navedbe temeljijo na literaturi.

Celovito predstavitev poklicev zdravstvene nege v Sloveniji zaokroži poklic bolniške strežnice. Na Kranjskem se izobraževanje za bolniške strežnice povezuje z letom 1908. Izobraževanje je potekalo v obliki tečajev. Kot povod za organiziranje tečajev je bilo poročilo dr. Josipa Grudna, profesorja bogoslovja v Ljubljani, o skrb vzbujajoči slabi oskrbi revnih bolnikov na deželi. Zaradi pomanjkanja usmiljenih sester v kranjskih bolnišnicah so na dekanskem shodu leta 1908 sklenili, da se v poklicu bolniške strežbe usposobi tudi laično ženstvo. To so začetni podatki poglavja o izobraževanju bolniških strežnic na Kranjskem. Avtorici monografije v nadaljevanju podrobno opišeta prizadevanja za ustanovitev strežniške šole v Ljubljani, sprejemne pogoje in predviden potek izobraževanja, a hkrati zapišeta, da vesti o dejanski otvoritvi šole ni zaslediti, čemur pripisujeta začetek prve svetovne vojne. Seveda je vojna potrebe po strežniškem osebju znatno povečala, zato so bili organizirani tečaji v Ljubljani, Novem mestu in v vseh večjih krajih. Monografija nas v nadaljevanju popelje skozi prvo svetovno vojno v luči poklica bolniških strežnic. Številne med njimi so bile odlikovane. Tudi Slovenke so se priključile množici anonimnih žensk, s trakom Rdečega križa na roki, a njihovih spomini in pričevanja niso ohranjeni. Naj bo pričujoča monografija poklon tudi njim.

Po koncu prve svetovne vojne se je v pogojih nove jugoslovanske države poklic bolniške strežbe razvijal dalje. Leta 1928 je začela delovati dvoletna Strežniška šola v Ljubljani.

Za izobraževalne bolničarske tečaje so poskrbele tudi same bolnišnice ali redovnice. Npr. na Golniku, kjer je leta 1922 prevzel bolniško strežbo red šolskih sester sv. Petra pri Mariboru, danes sestre Frančiškanke Brezmadežnega spočetja, so sestre ob delu obiskovale tudi redni pouk v strežništvu. Provincialni predstojniki so konstruktivno sodelovali z državnimi in oblastnimi oz. banovinskimi zdravstvenimi organi ter spodbujali redovnice k vpisu v zdravstvene šole in tečaje.

V začetku leta 1939 je začela izobraževati Bolničarska šola Obče državne bolnice v Ljubljani, na čelu katere je bil dr. Dragaš. Šolanja za bolničarke druga svetovna vojna ni prekinila. Poleg rednega šolskega izobraževanja so potekali tudi bolničarski tečaji tako legalni kot ilegalni.

Pomanjkanje usposobljenega zdravstvenega osebja za nego bolnikov po drugi svetovni vojni je spodbudilo izobraževanje bolničarskega kadra, kar monografija konsistentno predstavi.

S koncem druge svetovne vojne se tudi zaključi obdobje moderne zdravstvene nege na Slovenskem in sledi prehod v sodobno zdravstveno nego, ki ji monografija nameni zadnje poglavje.

Monografija vsekakor načenja v okviru osnovne teme vrsto vprašanj in je izhodišče za nadaljnja znanstvena raziskovanja, predvsem pa je poklon vsem poklicem zdravstvene nege in njihovemu delu.

FOREWORD BY THE AUTHORS

Marjeta Berkopec, Irena Keršič

The history of nursing in Slovenia was written by women. From the beginning of the 20th century and almost until its end, the occupations of 'protective nurse' and 'children's nurse', as they were then called, were exclusively in the domain of women¹⁴⁸⁶. They were the ones who gave nursing its character and endowed it with their professional knowledge and life force. Many of them are not remembered anymore. They are not mentioned in textbooks, although they contributed much to the occupation. Their life stories prove that they dedicated themselves to the noble calling of their chosen profession, making nursing unique, interesting and very much necessary. Most of all, they were developing the occupation, promoting the sense of professional identity, and providing professional care, all with a great deal of compassion. They were the ones who were developing professional values still adhered to by nurses to this day.

This book presents the stories of individual women, sheds light on the period in which they worked, and discusses the nature of their work. It helps keep familiar and less familiar names from being forgotten—all the women who, during the 20th century, were instrumental in the development of the occupation now known as nursing. War-time nurses, care assistants, trained hospital nurses, community nurses/care nurses, protective nurses and children's nurses—all names by which nurses were known in the history of Slovenia—are referred to in the title of this book by one name: protective nurses. However, the book sheds light on their individual names and lives, and they become recognizable individually and as a group. It is no coincidence that it was two women who decided to investigate the history of nursing in Slovenia. As nurses and lay historians, we would like to present the stories of women who were often overlooked and whose stories remained untold for too long.

The legacy of their predecessors today continues, created and developed by both women and men working in nursing. They enrich the profession with their knowledge and experience, making sure that it is governed by respect and advances. In the future, the name of the profession might change, but the legacy remains the same.

Much as today, nursing in the past also constantly met with social, economic, professional, political, and cultural challenges.

World War I, known also as the Great War, and the post-war situation which brought the collapse of the Austro-Hungarian Empire and the formation of a new country, were characterized by poverty and backward conditions. From the historical perspective, nursing in what is now Slovenia started to develop in the late period of modern nursery,¹⁴⁸⁷ which lasted from 1860 to 1945. During the time of the Austro-Hungarian Empire, training for vocations in so-called patient care was very complicated, with extremely few women from what is now Slovenia meeting the entry requirements.

The first chapter of the book discusses the educational system for nursing professions during the time of the Austro-Hungarian Empire. Looking back at the conditions during the Empire era is important for understanding the development of nursing in Slovenia. Slovenian women were one of many nationalities who trained in Vienna to become professional war-time nurses, hospital nurses, or community nurses, bringing the knowledge and experiences they gained back into the area of what is now Slovenia. Among them are Jožefina Bezlaj, Olga Cvahte, Pavla Bones, and Angela Boškin. Doctors were the lead healthcare and medical professionals and the first to introduce social-medical supervision, but their lead was soon followed by trained healthcare team members—professionals who were starting to also act independently. By establishing a counselling office for mothers and children in Jesenice (1919-1922) at the initiative of Angela Boškin and with the support of Alojzija Štebi and Dr. Francišek Kogoj, nurses even managed to be ahead of doctors in health care and social work.

Several doctors played an essential part in the education of protective nurses and should be mentioned. The first one is Andrija Štampar, the force behind the introduction of social medicine in the new Kingdom of Yugoslavia.

¹⁴⁸⁶The term 'medicinska sestra' (what is today a nurse) became used only after WWII. Before that, women who performed the tasks of a nurse were known by various other names, including 'zaščitna sestra' (protective nurse) and 'otročka negovalka' (children's nurse).

¹⁴⁸⁷Slo. 'sestrinstvo': the term is not found in the Terminological Dictionary under nursing, in the Dictionary of the Slovenian Standard Language, or in the Slovenian Medical Dictionary, although it is frequently used in nursing for the protective nurses active before WWII and for nurses after WWII before men started to join the occupation. The term appears in the first minutes of the professional organization and originates from the early Kingdom of Yugoslavia. It was used frequently in the states of ex-Yugoslavia and denoted a sense of affiliation and collaboration. It reflected the attitude of nursing care providers, nursing employees, and nursing as a profession.

In Slovenia, Štampar's lead was followed by Ivo Pirc, the Director of the Hygiene Institute in Ljubljana. Matija Ambrožič advocated for the establishment of the School for Protective Nurses. Not as well known is Dr. Bogoljub Dragaš, who always remained in the shadow of Dr. Ambrožič and Dr. Pirc despite being the school's first principal and a great proponent of protective nurses and children's nurses. All of these people were aware that improving national health cannot be at the sole discretion of doctors, who needed associates to be active in the community and to implement their social and medical principles. They were the few exceptions who understood that protective nurses were competent professionals and colleagues.

In respect to education for the nursing professions, the period between the two world wars in the Kingdom of Serbs, Croats, and Slovenes/Kingdom of Yugoslavia was marked by the founding of vocational schools with different founders. There were five schools in total (including Škola za sestre pomočnice in Zagreb, Škola za nudilje in Belgrade and Šola za zaščitne sestre in Ljubljana), but their curricula were not uniform. The graduates of these schools did not receive the same title upon the completion of their studies (Croatian: sestra pomočnica, Serbian: nudilja, Slovenian: zaščitna sestra). The inconsistencies resulted in long-lasting endeavors to unify the legal framework in the areas of education, employment, health insurance, social insurance, uniforms, further professional training, and activities of professional organizations. Uniformity at the country level was reached after WWII, when laws and regulations were passed by the state to unify the educational programs at all four-year vocational healthcare schools. In Slovenia, the titles obtained included 'bolničarka' (patient care assistant who completed additional training), while the titles children's nurse and protective nurse were both changed to nurse ('medicinska sestra'), although the term 'zdravstvena sestra' (healthcare nurse) was also proposed to better reflect their independent and co-dependent role in the healthcare system. The term nurse ('medicinska sestra') was used throughout the country. Among the general public and among professionals, the term 'sestra' (sister) sadly continues to be used all too frequently to this day, reflecting the past role of nurses as good-intentioned women.

The main part of the book discusses 'protective nurses' who laid the foundations for higher education of future nurses and nursing professionals in Slovenia. During the 22 years it was running—from the first enrollment in 1924 to the last degree conferred in 1946—the Ljubljana School for Protective Nurses provided education to 263 protective nurses. The umbrella term protective nurse included a one-year study program (for the title protective pediatric nurse), a two-year study program (for the title protective pediatric nurse) and a three-year study program (for the title protective nurse). A protective nurse is a very fitting name. It evokes the preventive role of nurses (protection), and under the Austrian educational system it also included the responsibility for patient care. According to Majda Šlajmer Japelj, care nurses worked in the community following WWI and were renamed protective nurses shortly after the scope of their work was more clearly defined based on the development of the educational system. The name protective nurse very clearly illustrates nurses' work in relation to society and is based also on the name and the mission of the institute where the first nursing school was founded (School for Nurses at the Institute for Health Care and Social Protection of Children).¹⁴⁸⁸

When the School for Protective Nurses was founded, this signaled that the minimum educational standards for the professional work of people providing nursing and care might be raised. The educational level of care assistants in Slovenian hospitals was very low at the time, about on par with basic literacy. When the School for Patient Care Assistants was founded in Ljubljana in 1928, the mother general of the Sisters of Mercy was worried about how the nuns would be capable of studying when many had difficulties reading and understanding certain expressions. The nurses, who at the time of enrollment in the School for Protective Nurses had already completed four grades of secondary school and obtained a secondary school diploma, were recognized as having a secondary school education after completing a three-year vocational program and were considered to have the same educational level as teachers. Unfortunately, healthcare policy failed to recognize the value of educated nursing staff from the very beginning. Political decision makers always opted for staff with lower qualifications. For example, even the commissar for youth care, Alojzija Štebi, did not insist on her original plan of having the educated nurse Angela Boškin work in Tržič because that is where the nuns were active and she did not wish to start a dispute with them. Dragaš, the principal of the Ljubljana School for Protective Nurses, advocated nursing education and even wrote that the title of "a nurse cannot be conferred to someone without adequate education and preliminary knowledge". However, at the meeting of nursing school principals where raising the educational level for nurses in the Kingdom of Yugoslavia was discussed, Dragaš vehemently opposed the idea. When unifying the nursing education scheme for the whole of Yugoslavia, the

decision was made not to raise the level of education at the national level; instead, the Belgrade School for Nurses had to change its four-year nursing program to a three-year program. Similarly, educational standards were devalued after WWII, when healthcare staff were given a formally higher level of education without receiving corresponding training. The situation worsened in 1960 when new rules on special professional examinations and courses for additional qualification of healthcare workers were adopted. Nothing of this sort was acceptable in any other profession. Similarities with today's situation are clear: nursing professionals have for many years been warning of a dire shortage of general care nurses and specialist nurses in Slovenia, but political decision makers do not recognize the importance of hiring nurses with a higher education degree. As a result, in clinical settings nurses with a secondary school degree often perform interventions and tasks which go beyond the limits of their competence without receiving proper remuneration.

Immediately after WWII, when decision makers had to face the existing conditions, design healthcare services anew, form a record of available healthcare workers, and lay the foundations of healthcare education, an Office for Nursing was established at the Ministry for People's Health. Protective nurse Neža Jarnovič became the first—and, sadly, the only—nursing officer at the Ministry. Despite efforts to retain the Office for Nursing, the Ministry abolished it in 1947, claiming that the most critical tasks had been performed. Today, efforts to establish a Nursing portfolio at the Ministry of Health have so far been unsuccessful, reflecting long-lasting pressure and ignorance of political decision makers for the situation of nursing in Slovenia.

Protective nurses worked primarily in the areas of health prevention and social prevention. In Slovenian nursing, they are known as the forerunners of social workers and today's community nurses. Together with doctors, they played an equal part in the pioneering work of setting the foundations for social medicine and public health in Slovenia. They were very much prevention-oriented. Most often, they worked in community health centers, school health services, children's clinics, public clinics, and children's convalescent homes. In any preventive social-healthcare institution, they would be involved in the health protection and social protection of mothers and children, promote preventive measures against tuberculosis, anti-alcoholism campaigns, and perform health education activities. In community health centers, which were being established throughout the country, there was often a protective nurse working alone at the beginning, with doctors visiting only occasionally. For example, the school health services in Novo Mesto employed only a protective nurse from 1931 to 1936. Further, nurses worked alone in trachoma prevention clinics in the region of Prekmurje, where a doctor only visited once a week to treat the most severe cases. They also played a significant role in promoting hygiene and a healthy lifestyle. Most health education activities were conducted by protective nurses working as travelling teachers in communities; they were sent to the most remote areas. Promotion of health among the population was conducted at people's healthcare schools, including individual lessons, health-related lectures, organization of healthcare seminars, and holding of hygiene-related exhibitions. If health education is regarded by considering that period, the task of protective nurses was not easy. They first had to overcome the fear and distrust for anything new among the uneducated peasant population—including the distrust for an educated woman. Nurse Angela Boškin wrote that people did not like to be taught: "They are used to their old ways and refuse to sway from them." People were not used to getting home visits by a nurse and were even more surprised that she was interested in their children and the children's health. The data collected by protective nurses in the community was processed by the Hygiene Institute for statistical purposes. Of course, nurses did much more than gather data. They also prepared proposals for improving the social conditions of mothers, children and families, and they intervened personally with the relevant institutions as part of their social work in trying to help those who were most needy.

Both in clinics and in community work where no doctor was present, protective nurses often found themselves in a situation that required them to make independent decisions, assess the situation and give instructions for the necessary measures to be taken. Their writings attest that they were well aware of their competencies but that limits were set to the work they could do, although they "did not interfere with the doctors' scope of work—on the contrary, they could often help doctors by taking some tasks from them". Summer camps also did not have constant supervision of a doctor; health activities were instead led by the so-called school protective nurses, who in addition to providing health care also acted as teachers.

At that time, nurses would rarely receive regular employment in the public sector. They were the first to cover the staff requirements of the Institute for the Healthcare Protection of Mothers and Children in Ljubljana. Job openings at the Institute were filled quickly because students at the School for Protective Nurses and, after 1929, students at the School for Children's Nurses were called in as additional labor and worked both day and night shifts. Most often, protective nurses would receive a fee or a daily allowance in return for their services instead of a salary. They worked on a contractual basis and in case of a longer sick leave their contract in the public service was terminated. They had

¹⁴⁸⁸ Correspondence between Majda Šlajmer Japelj, Irena Keršič, and Darinka Klemenc, April 11, 2022.

to face the insecurity of a temporary job that was badly paid and frequently late payments, which translated into economic and social precariousness. After completing their studies, they were theoretically able to gain employment in hospitals, but in reality hospitals did not accept them. According to their standing contracts, hospitals had nuns from charitable religious orders working in curative care. Even though relatively few protective nurses were trained, unemployment in this professional group soon became a problem. Many nurses moved to other parts of Yugoslavia where it was easier to find employment.

Protective nurses were sent by decree to the most remote, backward regions of the country. Their working conditions were far from easy, their working hours were not limited and often stretched throughout the day, and they had to walk long distances in all weather conditions: "After a long day of successive visits with patients, post-partum women and babies, when coming home exhausted in the evening, it is time to prepare for a lecture, go visit an exhibition, instruct people, do office work, and other such things." In addition, they faced difficult moral dilemmas: "How can I teach a mother how to prepare dietetic meals when she has no milk, no flour, no sugar, oftentimes not even a pan in which to prepare something for her child?" They lived frugally, few had a family of their own while most devoted their lives to their vocation. By presenting the names and the life stories of all graduates, we are removing the veil from their faces. Many of them will gain recognition only now, when their names and last names are listed. Many of their stories remain unknown and not researched. Let the names that are listed here act as an encouragement for further research and for shedding more light on their roles.

In 1927, protective nurses joined a professional nursing organization, enabling them to advocate not only for the development of their occupation, but also to assume an active role in the labor union. They started to draw attention to the economic exploitation, unemployment, and unsuitable conditions in which they were forced to live. They also started to connect with members of women's movements who supported them in their endeavors to ameliorate the unjust conditions in which they lived. Protective nurses had a permanent representative in the Women's Union. When the Hygiene Institute proposed that celibacy should be mandatory for nurses, the Women's Union strongly supported nurses. Their sharp protest with claims that imposing celibacy on nurses meant restricting their freedom and that the proposal was illegal encouraged nurses to resist the proposal fiercely. Members of the women's movement recognized protective nurses as professionals competent to address healthcare and social issues. The movement fostered an exchange of ideas which touched upon the fight for women's rights and on women's economic emancipation. It is not surprising that at nurses' meetings it was discussed how to prevent men from enrolling in patient care assistant schools since some claimed that competition from men would endanger the very existence of the nursing profession. Similarly, men at the time were afraid of competition from women who enrolled in secondary schools in increasing numbers and were beginning to get a foothold in men's occupations while being a cheaper labor force. Among other Yugoslavian nurses, it was quickly recognized that Slovenian nurses held progressive views.

It is not insignificant that the right to professional regulation was granted to the professional associations already in 1931, when the rules on the work of auxiliary staff in social and healthcare services were adopted. That is when a record with different groups of auxiliary staff was made and professional associations were entrusted to update it. The authorization was revoked following WWII, and it was not until 2005 that the professional association was authorized to run the record again.

Protective nurses were ahead of their time also when it came to realizing the importance of nursing documentation. They wrote, for example: "Later you can look up your old notes." "They'll come to check, they'll come to look at the papers." "Inspection wants to see written words and numbers." During the meetings at the professional association, they discussed professional training and proposed to visit the lessons at the Nursing School in Zagreb, to rotate working placements, and to establish a nursing course. Nurses have to continue to educate themselves and follow the developments in their profession, otherwise "work gets somewhat monotonous in the day-to-day tasks at the clinic." There was a library at the professional association to which new nursing literature was constantly added. A chapter in this book focuses on the extensive bibliography of protective nurses, pointing to how highly they valued professional literature.

The book also puts a special emphasis on children's nurses, who tended to be overlooked and overshadowed by protective nurses. The first graduates of the School for Children's Nurses were employed predominantly as nannies in wealthy families, later as carers of healthy and ill children in closed institutions. After the war, the scope of their work broadened and they started to assume more challenging tasks at pediatric departments of general hospitals, in children's hospitals, in daycare settings and in residential institutions for children.

There is not much archival evidence on children's nurses who, after 1950, started to teach at secondary schools. We tried to make up for the fact that they had been largely overlooked with a list of all graduates of the School for

Children's Nurses—from the first course in 1929 to the last generation of students, which enrolled in 1960/61. By making their names public and shedding light on their life stories, we want to give the due attention to generations of otherwise anonymous groups of women who, for over three decades, were continuously educated in the area of pediatric nursing. Quite a few of them significantly marked nursing in the post-war era. A special mention goes to children's nurse and educator Anica Toni Gradišek, who was a teacher, mentor and principal remembered by many generations of nurses. She is now regarded as one of the first researchers in nursing. She published extensively and these documents remain a priceless source of information to this day. It is thanks to her that a list with the names of the graduates of the School for Children's Nurses in Celje was preserved. In 1954, the Ljubljana School for Nurses took over the archives of the Celje school and rearranged them into a Record of Graduates. Children's nurses also had their own professional association, which joined the Federation of Nursing Associations of Slovenia in 1972. Unfortunately, we are yet to discover material on the activities of the association of children's nurses.

Furthermore, patient care assistants are also discussed in the book. So-called 'hospital care' was first in the domain of charitable orders of nuns who were active in Slovenian hospitals from 1843 to March 8, 1948, when a decree was passed to dismiss them from hospital work. They worked exclusively in curative care. In Carniola, training for patient care assistants is first mentioned in 1908. The training was in the form of classes organized by Vincentiana (a charitable organization) in collaboration with the Ljubljana State Hospital. Before WWI, serious preparation was underway to found a patient care assistance school in Ljubljana; however, these plans never came to fruition. War increased the demand for patient care assistants. Patient care assistance classes were organized in all large towns throughout the country. War-time nurses who unselfishly took care of the wounded during the war were among the recipients of Red Cross medals. Only a few of their names are known; let them serve as an encouragement for further research.

After WWI, training for patient care assistants continued in the newly established country. Even before the law on the vocational schools for auxiliary staff in social and healthcare services was passed in 1931, setting the legal framework for auxiliary staff schools, a two-year patient care assistant school was established in Ljubljana in 1928. Moreover, courses for patient care assistants were organized by hospitals or nuns—these were organized for women who had been working with patients for a long time and needed qualifications under the new regulation. In 1939, the Patient Care Assistance School at the Ljubljana General State Hospital was inaugurated; this is where education continued during WWII. Because of the war, demand for patient care assistants again increased and they were trained at both legal and illegal courses. In the first post-war years, hospitals organized many courses to obtain the title 'patient carer'. The courses, which lasted between four months and a year, were attended by patient care assistants who had previously worked in hospitals. Due to a lack of healthcare personnel trained in nursing patients, and due to massive discharges of nuns, schools for patient carers started to be founded throughout the country. These one-year program schools continued to operate until the educational reform of 1960.

The final chapter of the book discusses the end of modern era nursing and indicates the transition to contemporary nursing. The three-year school for protective nurses was first renamed Ljubljana Nursing School and in 1954 it was reorganized into a vocational college. Although there were bold plans after the war to elevate the healthcare educational system to a vocational college level for all existing and future nurses, they were sadly not implemented. Only the Vocational Nursing College in Ljubljana legally remained a college. All of the other healthcare schools (secondary nursing school, midwifery school, school for children's nurses, and school for patient care assistants) became secondary vocational schools after the educational reform in 1960. The educational programs at all secondary healthcare schools were extended to last four years. All existing secondary vocational schools (midwifery school, school for children's nurses, and school for patient care assistants) underwent reform, while secondary nursing schools were only reorganized into four-year schools for healthcare workers.

In researching the history of nursing in Slovenia, the two major obstacles are a complex educational system in the Habsburg monarchy and the fact that archival documents are located in many different places. There was often confusion about the names of occupational groups dealing with nursing, healthcare work, social work and patient care, so it is sometimes difficult to pinpoint whether sources are referring to protective nurses, children's nurses or patient care assistants. Protective nursing was a new occupation that emerged between WWI and WWII. Because people were unfamiliar with the profession, the title they obtained during their schooling was often written wrongly or inconsistently. It is found both in legal documents and professional literature and is used among the lay population. Although protective nurses significantly marked the period they lived in, they remained largely unnoticed.

This book presents the history of protective nurses—much of the information has not been known or published before. In searching for an answer to the question of who the women are who marked the rise of today's nursing

profession, it is undoubtedly true that the history of protective nurses is exclusively the history of women. They were active in a period which saw the first ideas of women's emancipation spread throughout the tradition-oriented Slovenian society. Protective nurses join a growing group of educated women who were limited by the society in which they lived, and whose position was always under the influence of men, politics, economy, religion, and the stove. Together with the women's association members, they started to demand women's rights. They fought submission in the healthcare system, invisibility in society and ignorance with education, active participation in the professional association, international cooperation, research activities, union endeavors, the publishing of professional materials, and the development of interpersonal and interprofessional relations. They participated in the drafting of the legal framework for their work, all the while holding extremely high ethical values. Despite the fact that nursing has come an incredibly long way, some professional challenges—such as the Nursing Act—to which the protective nurses already pointed remain unaddressed to this day.

Like any research, researching the history of nursing is painstaking but also completely absorbing work. It is a passion, time flies because you become so absorbed in it. At some point—maybe even in the middle of the night—you discover a new fact, find the answer which you have been seeking for half a year... Even if it is only a brooch worn by Angela Boškin on her uniform... This book is the result of many years of intensive work, digging for material, endlessly going through the archives, and checking countless pieces of information. Each photograph we discovered anew was a source of joy, but also a challenge. That is the beauty of researching history. I should mention the support of many people who stood by us, encouraged us, and hurried us, as well as the invaluable professional help of some of our colleagues, especially Dr. Majda Šlajmer Japelj, who managed to get extremely valuable connections in Austria concerning the history of our forerunners' education. The material we obtained from Austria definitely made us want to publish a book on the history of Slovenian nursing even more.

We are sending the book out into the world convinced that the nursing profession is now enriched because its own history has been illuminated. It is a tribute to all our predecessors who now have names, faces and content. Like we wrote at the beginning: "They were the ones who gave nursing its character and endowed it with their professional knowledge and life force." We hope that the current and future generations of nurses receive the same things from this book.

PREDSTAVITEV AVTORIC

Marjeta Berkopec, dipl. m. s.

Marjeta Berkopec je več kot 30 let zaposlena v Splošni bolnišnici Novo mesto kot operacijska medicinska sestra. Kot pomočnica glavne medicinske sestre Centralnega operacijskega bloka je delala dve leti. Sodelovala je v delovni skupini za pripravo strokovnih standardov in e-dokumentacije v perioperativni zdravstveni negi. Je mentorica študentom zdravstvene nege. Od leta 2009 do 2018 je bila članica Upravnega odbora Strokovne sekcije medicinskih sester in zdravstvenih tehnikov v operativni dejavnosti pri Zbornici zdravstvene in babiške nege Slovenije – Zvezi strokovnih društev medicinskih sester, bobic in zdravstvenih tehnikov Slovenije (Zbornici – Zvezi). Je soavtorica učbenika Perioperativna zdravstvena nega, ki je izšel leta 2019. Dvajset let je bila članica upravnega odbora in dva mandata podpredsednica regijskega strokovnega Društva medicinskih sester in zdravstvenih tehnikov Novo mesto. V tem obdobju se je začela intenzivno ukvarjati z raziskovanjem zgodovine zdravstvene nege. Raziskovala je zgodovino operacijskih medicinskih sester na Slovenskem, ki je bila izdana v knjigi leta 2015. Je članica Delovne skupine za ohranjanje zgodovine zdravstvene in babiške nege pri Zbornici – Zvezi in članica uredniškega odbora informativnega biltena Utrip, ki izhaja pri Zbornici – Zvezi. Njeno publicistično delo je na voljo v bazi Cobiss.

Marjeta Berkopec is an operating room nurse in the General hospital Novo mesto for more than 30 years. Working as a Head Nurse Assistant for the Central Clinical Department for two years, she was a part of a group for the preparation of professional standards and e-documentation in perioperative care. She has been a mentor and was a member of the management board of Slovenian Operating Room Nurses Association between 2009 and 2018 and became a co-author of the textbook *Perioperative nursing*, which was published in 2019. For twenty years, she was a member of the board and two terms the vice president of the regional professional Association of Nurses and Midwives Association of Novo mesto. During the period, she began researching the history of nursing and in 2015 published a book of the history of operating room nurses in Slovenia. Currently, Marjeta works as a member of editorial board for the bulletin *Utrip*, published for the purposes of Nurses and Midwives Association of Slovenia, and is a member of a working group for the preservation of the nurses and midwives history. All her publication is available at Cobiss.

Irena Keršič, dipl. m. s.,

je v svoji poklicni karieri štiri desetletja posvetila zdravstveni negi gibalno oviranih otrok in mladostnikov s posebnimi potrebami v CIRIUS Kamnik (Centre for Education and Rehabilitation of Physically Handicapped Children and Adolescents). Center je edina šolska ustanova v Sloveniji, ki celovito združuje osnovne in srednješolske izobraževalne programe, podprte z zdravstveno službo. S področja zdravstvene nege in oskrbe gibalno oviranih otrok se je vključevala v izobraževanje zaposlenih v šolskem, socialnem in zdravstvenem sistemu. Od leta 1997 do 2008 je bila podpredsednica Društva medicinskih sester, bobic in zdravstvenih tehnikov Ljubljana (The Nurse and Midwifery Organisation of Ljubljana). V tem času se je začela aktivno ukvarjati z zgodovino delovne obleke medicinskih sester in zgodovino zdravstvene nege na Slovenskem. V letu 2010 je bila v sodelovanju z Muzejem Idrija – Cerkljansko soavtorica prve razstave o zgodovini zdravstvene nege na Slovenskem. Od leta 2011 je vodja Delovne skupine za ohranjanje zgodovine zdravstvene in babiške nege pri krovni organizaciji Zbornici zdravstvene in babiške nege Slovenije – Zvezi strokovnih društev medicinskih sester, bobic in zdravstvenih tehnikov Slovenije (Zbornici – Zvezi) (Nurses and Midwives Association of Slovenia). Njeno publicistično delo je na voljo v bazi Cobiss.

Irena Keršič has devoted four decades to the care of physically handicapped children and adolescents with special needs at the CIRIUS Kamnik (Center for Education and Rehabilitation of physically Handicapped Children and Adolescents) in her professional career. The Center is the only school institution in Slovenia to fully integrate primary and secondary education programs supported by a health service. In the field of nursing and nursing care for children with physical disabilities, she participated in the education of employees in the school, social and health care systems. From 1997 to 2008 she was Vice President of The Nurse and Midwifery Organization of Ljubljana. During this time she began to actively engage history of working clothes nurses and the history of nursing in Slovenian. In 2010, she co-authored the first exhibition on the history of nursing in Slovenia in collaboration with the Idrija-Cerkljansko Museum. Since 2011 he has been the leader of the Working Group for the Preservation of the History of Nursing and Midwifery at the professional organization Nurses and Midwives Association of Slovenia. Her publicity work is available at Cobiss Base.