Florence Nightingale is rightly regarded as the founder and figurehead of modern nursing. She led the first cohort of nurses to Scutari Hospital during the Crimean war and was the superintendent of all the British military hospitals by the end of the war. She championed better health and sanitation and better care for the men of the British Army. She influenced opinions on British foreign policy in India and helped to pioneer the first nursing training school in London.

Having taught nursing on and off since 1987, I have found one universal truth: every student nurse knows who Florence Nightingale is. However, I am constantly amazed by what they know or think they know about her contribution to nursing. At a conference recently, I was surprised to hear even experienced nurses suggest a number of things she was supposedly famous for.

A large number suggested Florence Nightingale “invented nursing research” or was “the first nurse researcher”. While it is true that she had a passionate interest in mathematics and applied her knowledge of statistics to much of the data she gathered while in the Crimea, Ms Nightingale did not view herself as what we now understand as a researcher. In fact, she was so against the idea of research that she even revoked the bequest from her will. Ms Nightingale was a passionate statistician, but it seems she did not understand research the way we do now and she was not interested in its broad application.

Others claimed Ms Nightingale had “healed the sick on the battlefields of the Crimean war”. This is another myth. She travelled to the Crimean peninsula only three times: on one occasion, she soon became ill and did little; on the other two visits, she was establishing herself as the overall administrator of military hospitals on the peninsula. In terms of the work Ms Nightingale did, her duties were in keeping with her role as a superintendent and as such she set about to organise the nurses, not do nursing. Ms Nightingale organised numbers on the beds to help monitor how many patients there were. She organised the kitchen to provide more nourishing meals and administered the hospital’s resources. Rarely and only at the start did she help with any nursing duties.

Other nurses at the conference suggested that Florence Nightingale “stopped the deaths at Scutari hospital”, a myth that Ms Nightingale helped dispel with her own statistical data. Some of my colleagues still held on to the myth that she carried a lamp.

These misconceptions do the memory of Florence Nightingale a disservice and hamper an understanding of the magnitude of her legacy. If we are to genuinely respect and admire her achievements, we need to be clear what these are and are not, and help diminish the myths that have long grown around the legend.

David Stanley is associate professor, Charles Sturt University, Bathurst, New South Wales, Australia

Ann Shuttleworth is practice and learning editor of Nursing Times.

www.nursingtimes.net / Vol 110 No 47 / Nursing Times 19.11.14 11