Book Review

The Nurse Apprentice, 1860-1977 (History of Medicine in Context)

Ann Bradshaw


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Although it was published seven years ago, this book is unlikely to be familiar to Australasian readers as it details the history of the apprenticeship model only as it appeared in the United Kingdom. Why it has been chosen for review in this issue therefore requires some explanation.

Firstly, Ann Bradshaw's book could usefully inform our opinions about the future of nursing and nurse education. It is true to say that after two decades in the higher education sector the preparation of nurses for registration, in Australia at least, still attracts derision and opposition, and not only among those who trained under the apprenticeship model, but also among younger nurses who have experienced university education firsthand. When considered alongside our local accounts, this scholarly history is a goldmine of cautions in respect of the apprenticeship and other models of nursing education. It describes the interplay between personal and political interests, inter-organizational rivalries, financial considerations, and social and demographic changes, and creates a fascinating tapestry in which over-optimistic visions and ill-fated plans, unwanted assumptions and retrogressive attitudes, are interwoven with their very antitheses. Many of the issues remain the same today, and centre on the problem of how to prepare nurses for their roles, given the multitude of constraints and changing public expectations of education, work and social life; and, how those roles should be conceived in the context of a rapidly changing clinical, occupational and economic environment. For me, the lessons which I take from this book concern not so much specific actions but rather general strategies. In particular, it reaffirms my belief that leaders and policy-makers need to listen to nurses themselves, that nurses must be able to articulate and represent the interests of patients as well as nurses, and that they must employ politically appropriate language and concepts if they wish to be heard. Today, that means speaking the language of interdisciplinarity, for example, and of evidence-based practice, organizational innovation, risk management and intersectoral partnership.

Secondly, this book provides aspiring historians with an example of meticulous scholarship, drawing on a vast array of archival sources, placing events in their cultural and political context, and taking into account the relevant existing histories. My guess is that there are nearly one thousand items listed in the references. Bradshaw takes a bold step in constructing a history around key themes rather than a simple chronology, which inevitably disrupts the reader's impression of the research itself, and, in this particular case, the quality should silence any such arguments.

There is one further aspect to this. Historical writing, and not just research, is a technical skill. It raises questions as to how to structure the work, what issues should be discussed in detail and which passed over, whether there is any room for the author's opinions and values, and the role of ideological or other commitments. Academic and other professional historians are far less certain on such matters than they are about the standards for research and the debates rage on, but Ann Bradshaw has written in a style which many would find acceptable. It is not weighed down by obscure French theory, for example, or driven by any overriding political agenda. The author's rather obvious attempt to be objective and dispassionate, reporting at length what others said, for example, but giving little away as to her own opinions, may be considered a strength by the positivists and traditionalists, but a weakness by the interpretivists, constructivists and poststructuralists. This attempt at being detached is inevitably not entirely successful, and there is a strong whiff of nostalgia when the author concludes that the role played by the sense of 'vocation' in choosing to train and work as a nurse, and in sustaining a commitment to high quality care, has been underestimated by poststructuralists. This attempt at being detached is inevitably not entirely successful, and there is a strong whiff of nostalgia when the author concludes that the role played by the sense of 'vocation' in choosing to train and work as a nurse, and in sustaining a commitment to high quality care, has been underestimated by poststructuralists.

Thirdly, the quality of the book is all the more noteworthy because the author is not a professional historian, schooled in historical methods, nor - I suspect - paid to do historical research; as is often the case with the history of nursing, I am reminded of Schopenhauer's declaration that the dilettante is to be respected above the professional historian. For me, the lessons which I take from this book concern not so much specific actions but rather general strategies. In particular, it reaffirms my belief that leaders and policy-makers need to listen to nurses themselves, that nurses must be able to articulate and represent the interests of patients as well as nurses, and that they must employ politically appropriate language and concepts if they wish to be heard. Today, that means speaking the language of interdisciplinarity, for example, and of evidence-based practice, organizational innovation, risk management and intersectoral partnership.

Ann Bradshaw ends her book by asking the reader to reflect on what long term impact these changes are likely to have on the nursing profession and patient care. My enthusiasm for this book does not mean that I always agree with the author's interpretation of the data, of course, and this is the case with these concluding remarks. The world has changed dramatically since the apprenticeship model ended, and there is no going back. Few young people today with the necessary intellectual ability would undertake at least three years intensive training that did not entail graduation with a university degree, and preferably one which was portable across professional and international borders. I am certain that a glance at today's undergraduate textbooks and university curricula would astonish a nurse working during the 1970s, and the employers' expectations of newly qualified nurses would surely leave them dumbstruck. University education for nurses is here to stay, and with it the complex network of intellectual and academic influences. Furthermore, the changes in values and expectations among potential recruits to nursing, to which Bradshaw refers, can be traced to social and intellectual movements that go far beyond nursing, and the challenge for today's nursing leaders and educators is to work with these new realities rather than fight against them, and to do so for the ultimate benefit of patients.

The introduction of first-hand accounts from nurses who oversaw or trained in the apprenticeship model, or who played a part in major policy developments, along with photographs and other illustrations, would have enlivened what at times is a rather dry subject. But this would have resulted in a much longer and more expensive book, and placed yet more demands on what was obviously a labour of love for the author. One minor issue that could easily have been addressed, however, is to have acknowledged in the title that this is exclusively about the 'general nurse' apprentice: I did not see any mention of mental or psychiatric nurses in the book. That quibble aside, Ann Bradshaw has produced a fascinating, scholarly and thought-provoking book which left me wishing for more, and I strongly recommend it to historians of nursing, to nurses educators and policy-makers, and to anyone who enjoys reading about nursing's past.