A Tale of Two (Nursing) Schools: Sofia and Zagreb through the Rockefeller Foundation’s Lens

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In talking with men who have been interested in the nursing question, it was curious to note the confusion in their minds as to what the ideal nurse should be. They realized the need for some technical training, at the same time they expect her to have the self-abnegation of the members of the religious communities, the same suppression of personal inclinations, the same indifference to creature comforts, the same remoteness from human ties, a sort of nun without the community life and vows of the nun.¹

This quote belongs to Frances Elizabeth Crowell, a member of the Rockefeller Foundation’s (hereafter RF) field staff in Europe, and captures the tensions surrounding the perception and practice of nursing in modern Bulgaria. As part of her European tour (1922-1923),² she went there in May 1923 following Selskar M. Gunn’s visit, at that time the director of divisional operations for all of Europe. The latter provided a broader framework of the political and socio-economic development in post-WWI Bulgaria, as well as established the necessary contacts for her survey.³ However, the examination process of nurse training in the Kingdom of Serbs, Croats, and Slovenes was reversed. Immediately after her Bulgarian visit, Crowell went there and provided specific information about the “nursing situation.”⁴ A year later, in March 1924, Gunn visited Belgrade and Zagreb.⁵

This paper addresses the following set of questions: What constituted the “nursing question” in Bulgaria and the “nursing situation” in interwar Yugoslavia? What comparisons could be made about those two cases? What were the other international organizations involved in nursing education and how did they compete/collaborate with the RF? How did the development of nursing training in Europe, sponsored by the RF, intertwine with various administrative reorganizations within the RF?
In 1923, the RF’s trustees approved a proposal for collaborating and developing projects for nurse training in Europe. Originally, $75,000 were provisioned, and fellowship aid was extended. Nursing was under the jurisdiction of the central office first, and in 1923 placed under the new Division of Studies; some programs, though, stayed under the International Health Board (hereafter IHB). Consequently, nursing was caught in interdivisional competition among the Rockefeller’s boards and changed several times its location. In 1927, it was moved under the Division of Medical Education, and finally in 1932 it was consolidated under the purview of the International Health Division until 1951.6

To some extent, the memoranda on Bulgaria and Yugoslavia followed the prototype about France, prepared by Crowell earlier. She was in charge of the training program for health visitors at the Commission for the Prevention of Tuberculosis in France.7 Since no change happened in the prior 18 years, she noted, there was a need for a “radical reform in the present methods of training nurses and in the scheme of organization of training school for nurses.”8 In this early document, Crowell launched the idea of establishing the new profession of health visitor, which corresponded to the development of preventive medicine and the concept of protecting public health through education. Furthermore, this profession was a “new field of activity, with no traditions to break with, no prejudice to overcome, and so from the very first it has been possible to attract the best type of women to this work.”9

Along the same lines, the “health worker [was] practically non-existent in Bulgaria.” Crowell also found widely shared acknowledgement of scarcity of bedside nurses and of their “inadequate” training, which was below the standard in other countries.10 Why was that? What was done to alleviate this situation? There were a few attempts to promote nursing schools in Bulgaria. First, secular and middle-class women were behind an initiative to establish nursing instruction in Bulgaria. In 1895, the Sofia Ladies’ Committee of the Red Cross started a one-year course for fifteen female students. This initial attempt, which lasted until 1896, was not successful: only nine women completed the course and merely two began to work. This failure encouraged the Bulgarian Red Cross Society (hereafter BRC) to approach nurse training
in a different way. In 1900, it asked the Russian Red Cross to send two sisters from the Krestovozdvizhenskaya *obshtina*, to set up a school, and thus emerged the only long-lasting nursing school in Sofia (1900-1953). The Russian model of female *obshtina* was complex; there was a coexistence of secular communities and “semi-religious” female societies called “Sisters of Mercy.” Russian nursing remained “charitable and quasi-religious activity” and subsequently was not professionalized. Thus, the BRC borrowed from this semi-religious, semi-professional, and semi-charitable model. Therefore, the nursing school in Sofia was part of the “Holy Trinity Obshtina of Sisters of Mercy.” Following its Russian archetype, until the 1920s, the Bulgarian *obshtina* model did not produce professional nurses equal to their western counterparts. According to Crowell, the “Russian imprint” with more emphasis on the “spirit of devotion than to technical proficiency” had remained.

To offset the *obshtina* system, Queen Eleonora initiated another model of school training that intended to professionalize nurses’ education in accordance with the best international standards. In 1913, she asked the American Red Cross (hereafter ARC) to help organize a modern school in Sofia and implement the American system. In 1915, two American nurses launched the so called “Queen’s School” in Sofia, but it lasted only for a short period (1915-1918) and prepared three cohorts of nurses.

The subsequent history of nurse education in Bulgaria, between 1920-1935, revolved around the attempts to reopen the Queen’s School as a state school, which involved various local and international stakeholders, including the RF. In order to prevent such occurrence, the BRC invited ARC’s participation in its school as a way of improving its reputation. In 1923, an American, Rachel Torrance, was appointed the first director of the BRC School. She initiated substantial changes during the “American period” (1924-1927): candidates were required higher educational standards, the training period within the hospital was increased, and the International Council of Nurses’ standardized curriculum was adopted. Torrance also commenced the decoupling of the school from the *obshtina* and the latter gradually lost its importance.
However, in spite of the changes, the training was still concerned with preparation of bedside nurses and rudimentary preparation for public health work.¹⁴

In 1923, during Crowell’s first visit, she learned about the desire to re-establish the Queen’s School, but it was a few years later that this idea received a firmer institutional support. In 1926-1927, the correspondence with representatives of the Bulgarian government reveals that it seemed inclined to set up a state school of nursing. The initiative derived from the Faculty of Medicine in Sofia. Edwin Embree agreed that Crowell should “restudy the situation in Bulgaria” at the same time when similar investigations were being made by Alan Gregg and Selskar Gunn. According to the plan presented by the government, the school was to be attached to the university and supported by the General Office of Health. The latter had already apportioned 1,000,000 leva for nursing education but there were no field training services. By 1928, nothing had been changed and the Rockefeller Foundation decided not to get involved until the government “perfects the organization.” The subsequent RF commitment would consist of training fellows, assisting visitors, and giving minor equipment. Even if a program were to be developed, there would be some aid between $5,000-7,000 for three years and no capital program for buildings. At the end, the cooperation resulted in just three fellowships.¹⁵ The third attempt at establishing a state school of nursing in Bulgaria was recorded in 1935. Ralph Collins’ diary mentioned that the dean of the medical faculty was trying to take over the Red Cross’ nursing school. This move was, though, “stimulated” by the fact that the BRC received 1,000,000 leva for a building.¹⁶ However, as noted earlier, the BRC managed to keep its monopoly over providing nursing training in Bulgaria until 1953.

The lack of enthusiasm on the part of the Rockefeller Foundation seems to be explained by the fact that the BRC School in Sofia prepared bedside nurses but not health visitors, according to Hazel Goff, its former director (1926-1927) and a short-time assistant to Crowell.¹⁷ The need for health visitors was acutely felt, and an agreement between the Office of Health and the BRC School was achieved. The former was to establish a health center to prepare
public health nurses and sanitary officers. Indeed, the Health Center was founded in 1928 under the auspices of the General Office of Health, in cooperation with the City Health Department, the Ministry of Education, the BRC School, and the Ministry of Labor. From November 1928 to March 1930, the RF contributed $3,750 (or, approximately 25% of the whole expenditure) and allocated a new estimated aid of $15,000 for the next five years. It seems that the formation of the Public Health Center was a way to circumvent the BRC’s monopoly and to establish training for public health nursing. Another way to add more visibility to the profession was through instituting the Central Nursing Bureau, an initiative also discussed by the IHD in 1928. Such institutions existed already in Poland, France and were projected for Hungary, Yugoslavia, Czechoslovakia, and Bulgaria. By turning to the state, the BRC School’s administration sought to minimize the BRC’s influence. Thus, a combination of domestic efforts in collaboration with the RF and ARC helped undermine the impact of the obshina model.

Unlike Bulgaria, where Crowell visited only two cities, she went to several cities in Serbia, Croatia, and Dalmatia (1923). As she wrote, the training school for nurses and health visitors in Zagreb was the “most interesting native development” found in any of “these European countries.” It was an unaided effort, supported entirely by the state, organized by the regional chief health official, Dr. Lochert, with the purpose to serve local needs. The school was opened in 1921, and the first course lasted 14 months, with a future expansion to two years. The organizers included Dr. Stampar, the head of the Hygienic Department of the Ministry of Public Health (1919-1931). He upheld an ideology of public healthcare and medicine that should concentrate on the social aspect of diseases. Stampar saw the role of the physician as a “folk educator” promoting preventive medicine, and not just staying in hospitals. Moreover, according to Gunn, his health program had a “definite value in helping the political consolidation of Yugoslavia,” a concept that had a substantial appeal to the RF’s officers.

Thus, Yugoslavia offered a “very promising field for future development of educational facilities for nurses and health visitors,” according to Crowell. The
government, through the Ministry of Hygiene, was already spending 3,000,000 dinars for such purposes. Likewise, the Ministry regulated training to last for two and a half years; nurses received a state diploma after graduation and had the salary and status of teachers. The “mixed” [religious and secular] school in Zagreb presented an “admirable opportunity” for developing a generalized training of health workers. Most lectures were given by university professors, and the public health work was done under the direct supervision of those in charge of dispensaries and other public health facilities. The director, Jelka Labas, a “Croatian woman of good family,” had worked for ten years in the training school at the Rudolfinen Haus in Vienna. Five students (two nuns and three lay pupils) were sent to Vienna on government scholarships. Two nuns also acted as sister tutors and were helping the director. They supervised the students’ practical work in two hospitals. Dr. Lochert intended to train nuns for hospital work and lay pupils for public health work, recognizing that Croatia, like Slovenia and Dalmatia, had to rely on members of religious orders for hospital care. Nun pupils belonged to the Barmherzigen Schwestern and the Heiligen Kreuz. The first class of graduates consisted of 34 religious and 8 lay students. Initially, the sisters objected to gynecological work and care for male patients, but the director overcame this concern during the course of training. Lay pupils had dormitories in two pavilions, while the religious ones were lodged and fed by their own communities. The lay nurses received stipends from the state. The theoretical training was the same for both religious and lay students.

According to the May 1924 minutes of the Rockefeller Foundation, out of 75 total graduates, 49 were religious nurses working in hospitals and 26 lay nurses serving in public health. Assistance by the RF of $8,500 was approved for the following items: lecture hall, teaching equipment for a demonstration room, laboratory, diet kitchen, and furniture. In addition, $2,000 were authorized for an assistant to the director and for ten scholarships. Over the years, the aid continued, and by 1930, the school received $14,500. Furthermore, documents from 1937 attest to the RF’s subsequent commitment. It contributed $23,409, as an amendment to its emergency fund for European nursing schools, for the construction and equipment of a
permanent building of the School for Public Health and Bedside Nurses in Zagreb.  

In spite of the generous RF appropriations for the nursing school in Zagreb, its support for women doctors as directors of both schools in Zagreb and Belgrade also created tensions with the ARC, as the letters of 1931 exchanged between Clara D. Noyes and Mary Beard reveal. The former expressed her concern that nurses from Yugoslavia had complained that nursing in their country is “dominated by physicians” who had only a year of nursing training. Yet they occupied all leading positions. For example, in 1931, nurse Zelenjak had difficulties in assuming the position of director of the school exactly because prior occupants of this post were women doctors.

While the Zagreb School was founded in 1921, the BRC School initiated its modernization program around the same time, and both governments were seeking international collaboration. The different contexts in Bulgaria and the Kingdom of Serbs, Croats, and Slovenes predetermined the Rockefeller Foundation’s local policy of cooperation. It is not surprising that the Zagreb School received the lion’s share of the RF’s generosity. In the words of Ralph Collins, “In Yugoslavia the system was accepted almost before we were on the ground to influence its development. In Bulgaria we labored long and with great discouragement to establish the principle which only now, after ten years of work, is beginning to show results.” While the BRC preserved its dominant position over the nursing landscape, the Yugoslav state established financial, institutional, and legal framework that facilitated the RF’s aid. Ironically, as the epigraph shows, the Bulgarian medical officials considered lay nurses to be “nuns” and the modernization of their training was delayed. By contrast, the real nuns in Zagreb, supported by their government, attained professionalization of their training and became RF fellows.

In conclusion, the Rockefeller Foundation was trying to raise the status of the nursing profession, as well as to achieve economic and social welfare and political stability in post-war Europe. Its focus on women as nurses, though, contributed to maintaining the feminized dimension of the profession, too.
The RF documents also reveal, on the one hand, a flexible country-specific approach, which was often influenced by local actors, as in the case of Andrija Stampar. On the other hand, one can also discern a regional approach in RF’s public health policy, and especially an attempt to establish local (and transnational) webs of nurse leadership communication. On a third level, all these interactions happened in a changing international context, as the ARC, the League of Nations, the Near East Relief, and the League of Red Cross Societies were also influencing local responses. Therefore, the “nursing question” in Bulgaria and the “nursing situation” in interwar Yugoslavia had both many differences and resemblances.

1 RAC, RF Records, Projects, SG 1.1, Series 711, Bulgaria, FA 386b, Box 1, Folder 11. Crowell, Elizabeth F. Memorandum: Study of Sick Nursing and Health Visiting, 1923, 7.
2 The idea for such a tour to study the nursing education and training in Europe was suggested by Edwin Embree, Secretary of the RF in 1920. Its purpose was to explore opportunities for cooperation in post-war Europe.
3 RAC, RF Records, Projects, SG 1.1, Series 711, Bulgaria, FA 386b, Box 1, Folder 1. Gunn, Selskar M. Public Health in Bulgaria, March 1923, part 1.
4 RAC, RF Records, Projects, SG 1.1, Series 710, Yugoslavia, FA 386b, Box 4, Folder 37. Crowell, Elizabeth F. Memorandum: Study of Sick Nursing and Health Visiting in Yugoslavia, 1923.
5 RAC, RF Records, Projects, RG 6.1 Field Offices, Paris, SG 1.3 Pre-war reports, FA 395, Box 46, Folder 524. Gunn, Selskar M. Public Health in Yugoslavia, 1924.
6 RAC, RF Records, Projects, SG 1.1, Series 100C: International Nursing, Progress Report: Nursing Education, FA 386a, Box 38, Folder 334. Administration, 1919-1926; RF Records, Administration, Program and Policy, SG 3.1 and SG 3.2, FA 112, Series 908 International Health Division, Box 7d, History Greer Williams Notes – Nursing, 2.
8 RAC, RF Records, Projects, SG 1.1, Series 500, France, FA 386b, Box 9, Folder 100. Crowell, Elizabeth F. Nursing education and hospital service in France, 1921, 3.
9 ibid., 9.
10 RAC, RF Records, Projects, SG 1.1, Series 711, Bulgaria, FA 386b, Box 1, Folder 11. Crowell, Elizabeth F. Memorandum: Study of Sick Nursing and Health Visiting, 1923, 6, 8.
12 RAC, RF Records, Projects, SG 1.1, Series 711, Bulgaria, FA 386b, Box 1, Folder 11. Crowell, Elizabeth F. Memorandum: Study of Sick Nursing and Health Visiting, 1923, 24-25.
13 ibid., 28-30. Crowell’s number is 42 but this is not accurate, 24 nurses graduated. Tsentralen Dŭrzhaven Arhiv, f. 156k, op. 1, a.e. 17, 28-29.
15 RAC, RF Records, Projects, SG 1.1, Series 711, Bulgaria, FA 386b, Box 1, Folder 10, Nursing, 1916, 1926-1928.
16 RAC, RF records, Officers’ Diaries, RG 12, A-E, FA 391, Box 68, Officer: Collins, Ralph, 28 February 1935.
17 She started the first course for visiting nurses. Dŭrzhaven Archiv-Sofia, f. 360k, op.2, a.e. 24, 1-4.
18 RAC, RF Records, General Correspondence, RG 2, Series 1931/76, Balkan States, FA 308, Box 557, Folder 3766. Goff, Hazel A. Introduction of the undergraduate student to a generalized public health program as developed in a Balkan state, 1-4.
20 RAC, RF Records, Projects, SG 1.1, Series 100C: International Nursing, Progress Report: Nursing Education, FA 386a, Box 38, Folder 339, Administration, 1919-1926, 2.
21 RAC, RF Records, Projects, SG 1.1, Series 710, Yugoslavia, FA 386b, Box 4, Folder 37. Crowell, F. Elizabeth. Memorandum: Study of Sick Nursing and Health Visiting in Yugoslavia, 1923, III.
23 RAC, RF Records, Projects, RG 6.1 Field Offices, Paris, SG 1.3 Pre-war reports, FA 395, Box 46, Folder 522. Gunn, Selskar M. Public Health in Yugoslavia, 1924, 56.
24 RAC, RF Records, Projects, SG 1.1, Series 710, Yugoslavia, FA 386b, Box 4, Folder 37 Crowell, F. Elizabeth. Memorandum: Study of Sick Nursing and Health Visiting in Yugoslavia, 1923, 78.
25 ibid., 78-79.
26 RAC, RF Records, Projects, SG 1.1, Series 710, Yugoslavia, FA 386b, Box 4, Folder: Crowell, F. Elizabeth. Memorandum: Study of Sick Nursing and Health Visiting in Yugoslavia, 1923, 47-52.
27 RAC, RF Records, Projects, SG 1.1, Series 710, Yugoslavia, FA 386b, Box 4, Folder 39, Zagreb School of Nursing, 1923-1929.
28 ibid.
29 RAC, RF Records, General Correspondence, RG 2 FA 308, Series 1931/710 Yugoslavia, Box 63, Letters between Clara D. Noyes and Mary Beard, 4 February 1931, 25 February 1931, 9 March 1931.