Contents

Foreword ix

Preface xiii

Introduction xvii

Part 1. Lay Knowledge 1

Chapter 1. Role of History 3

1.1. Lay knowledge 3
1.2. A difficult history for an ordinary experience 4

Chapter 2. The Hospital as a Place to Talk 11

2.1. The origin of the hospital 12
2.2. The care environment 13

Chapter 3. Care Before 1850 19

3.1. *Maison* staff 20
3.2. Sacred values in the period of lay knowledge 28
3.3. Nurses (*enfermières*) 48
3.4. Nurses and *gardes-malades* 55
3.5. City physicians 56

Chapter 4. Practices and Knowledge 65

4.1. *Domus* or looking after property life 66
4.2. *Hominem* or looking after human life 69
4.3. *Familia* or looking after group life 82
4.4. Never enough time to do everything 86

Chapter 5. A Return to Image: Minion Syndrome 91

5.1. Even more knowledge 93
5.2. The economically unnecessary provision of services 96

Part 2. Protodisciplinary Knowledge 99

Chapter 6. From Hospital-School to School-Hospital 101

6.1. A non-religious form of training 103
6.1.1. Valérie de Gasparin 105
6.2. Valérie de Gasparin and Florence Nightingale 110

Chapter 7. The Advent of Medical Writing 127

7.1. The ERR process for practical knowledge 136
7.2. Nursing students and writing 139

Chapter 8. Towards Higher Education 143

8.1. Women's groups 144
8.2. Non-university higher education structures 152
8.3. Towards university schools and scientific research 160
8.4. Europe and the *Hautes écoles spécialisées* (HES) 164

Chapter 9. A Return to Image: The Shaping of Knowledge 167

9.1. Duplication of reduced knowledge 168
9.2. The problematic identity of knowledge 171

Part 3. Scientific Knowledge 175

Chapter 10. Nursing Sciences? 177

10.1. Profession first, discipline and science second! 178
10.2. Historical constants of the discipline 192
10.2.1. Domus–familia–(ad)hominem 196
10.2.2. Three cultural and linguistic systems 198

10.2.3. Medium, mediation, cultural intermediary 202
10.2.4. Concepts of the nursing disciplinary metaparadigm 206
10.2.5. Fourteen groups of practices 207

Chapter 11. The Construction of the Discipline 219

11.1. The green knowledge theory 226
11.2. Compulsory basic knowledge 228

Chapter 12. Identity and Discipline 237

12.1. Why health mediology? 240
12.2. The identity of our knowledge and health mediology 243

Chapter 13. A Return to Image: "Where Do We Go Now"? 249

13.1. An intergenerational continuity of knowledge 250
13.2. Ordinary practices before advanced practices 252

Conclusion 257

References 265

Index 277