

Between Public Health and Social Work: Visiting Nurses in the Struggle Against Poverty and Infant Mortality in Bulgaria 1923-1934

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1 Introduction

At the beginning of the 20th century, Bulgaria as a part of the Balkan and South East European region was a typical rural country of small and middle scale farming and prevailing peasant population. At the beginning of the 20th century, many rural regions were involved in economic and cultural modernization processes. Nevertheless of the prevailing peasant population, Bulgaria underwent intensive economic and social transformation which introduced modern industry, transportation and communication and new urban social strata as well. After 1910 the relative share of the urban population began to increase – from 19.1% in 1910 to 21.4% in 1934. The few bigger towns such as Sofia, Plovdiv, Varna, Ruse (and Burgas lately) had a population between 50,000 and 300,000 (only Sofia after 1930) inhabitants. Water supply and sewerage were introduced but quite slowly especially in the villages. Concerning birth and child mortality rates, there was a small difference between towns and villages. The birth rate was 40-45 per 1000 in average, the infant mortality rate - about 160 per 1000. Traditional family and kinship circles played most important role in the social support of children, elderly people and disabled people. Mutual aid of fellow-villagers was the next most important social net. Local Religious (Christian, Orthodox, Catholic, Protestant, Jewish and Muslim), women societies and other charity organizations supported small children or elderly people homes and other charity initiatives. In the end of the 19th – beginning of 20th century, experts (doctors, teachers, economists, jurists) and politicians (first of all of the left and left – centered parties) started discussions about new groups of people who needed social protection; international scientific standards were adopted to present the situation of working children and women, neglected children, child nutrition and infant mortality. New organizations were founded in the capital of Sofia in order to research social problems and to support such needy groups - “*Soup Kitchen for Pupils*” (1897), “*Association for Fight against Tuberculosis*”, (1907), “*Child Summer camps*” (1904), “*Union for Fighting Child Delinquency*” (1906). (Author, Angelova, 2005). They insisted on social legislation and state and municipality biopolitical measures which followed international models. During the years of the wars 1912 – 1918 (Balkan wars 1912 – 1913 and World War I 1914 – 1918) many articles about the foreign social support systems were published. In 1915 the first Municipality Social Service in Sofia was established.

The aim of this article is to present the connection between biopolitical measures and social work in Bulgaria and the visiting nurses, the first steps to the development of professional social work. There are only a few publications on this topic (Baloutzova 2011; Promitzer and others 2011; Author 2009) The article is based primarily on quantitative sources about the activities of the first Children Health Station in Sofia and other cities from the Central State Archive and statistics. Letters, articles and other publications in the Newspaper “*Sestra*” (Sister) from 1925 – 1934 are also referred to.

2 The beginning of the public health nursing

The concern about the struggle against epidemics, tuberculosis and other contagious diseases as well as against infant mortality drew attention in the second half of the 19th century to social hygiene and poverty, to the homes in the poor outskirts, to working class families, mothers and children. In contrast to the more evident power of discipline and direct social control, the organized social advising and various educational courses were important techniques of indirect influence on the population. This “pastoral power” – the power in advising, counseling and facilitating - appeared in different consultation centers, courses, lectures, exhibitions, instructions, booklets and issues. It is argued that it was no less effective than coercive power in determining how people shall understand and live the social world. (Pamela Abbott, Liz Meerabeu, 2003)

Young women mostly from the middle class were attracted by ideas to help poor families and mothers and to reform the living conditions. This reflected practices that had developed from the 19th century in England and the US in particular. For example, in Victorian England the Ladies’ National Association for Diffusion of Sanitary Knowledge, founded in 1857, was organized in order to study the living circumstances of the working class and the ignorance of mothers. They were also concerned with the effects of diarrhea, whooping cough, measles and bronchitis which affected children from all classes. This Ladies Sanitary Association set up branches around the country. The important steps in this direction were made by the Charity Organization Society (COS), organized in the late 60’s. In the 1880’s a new organizational form of educational and social work among poor population in England and USA appeared: the settlements. A new generation of women joined the settlements searching for independent life (Martha Vicinus, 1985). The settlements movement was motivated by the general thought to live among the poor citizens and by social reformists ideas to educate them and to change the communication between rich and poor. In England it was started by Octavia Hill (1838 – 1912) and in the USA by Jane Addams (1860 – 1935). The philosophy of the Settlement movement was to bring rich and poor people together through visiting the poor, living among them and building friendships rather than practicing charity as was the case for the COS (Martha Vicinus, 1985) Public health nursing was founded in USA in this context. The feminist social worker and nurse Lillian Wald (1867 – 1940) who started in 1893 the Henry Street Settlement in New York and formulated the tasks of public health nursing. Other centres where public health nurses were trained included John Hopkins Hospital, Baltimore, the Massachusetts General Hospital in Boston and the Presbyterian Hospital of New York City. Some settlements also became important centres for international collaboration and exchange. Although settlements movement remained a specific formation for England and USA and was not wide spread in continental or Eastern Europe, English and American settlements did play an important role in pioneering public health nursing and social work in many Eastern European countries. For example, . Alice Masarykova (1879 – 1966), President of the Red Cross in Czechoslovakia and founder of social work education in her country, worked in the Chicago University Settlement in 1904, close to the Hull House Settlement. Since her stay in Hull House Settlement she had close contacts with Jane Addams and was supported later in difficult moments by her (Helen Rappaport 2001). Also, in the early twenties, several young Bulgarian women attended the Henry Street Settlement in New York to study public health and practice “field work” in the settlement: “...I will very probably take a course in public health” – the Bulgarian student Nevena Sendova wrote from Henry Street Settlement in April 1924 - “which I think will help me a great deal as I have had the field work at H.S.S...” (CSA, Fond 360к, op.1, a. e. 60, l. 57).

3 The beginning of the Sofia School for Nursing in Sofia

The first school of Nursing at Sofia was organized by the Bulgarian Red Cross Society in 1898 – 1900. As early as 1900 Sister Efrosina of the Russian “Obshtina of the Holy Trinity” (Sveta Trojzka Obshtina) , established a school under the Bulgarian Red Cross. Under Sister Efrosina the school was modeled after the German “Mother House” whereby the same Board managed the school, both students and graduates, and they were all housed under the same roof. . The length of the course was 1 year.

The Red Cross Society supported by Bulgarian Queen Eleonora (1860 – 1917, Bulgarian Queen since 1908) started in 1910 and provided the first training course in nursing for charity women. For this purpose a women’s society called “Samarjanka” (Samaritan Woman) was established. In the courses, women were trained to do some sanitary and nursing work and to help doctors. Instructors were doctors from the Bulgarian Red Cross Society. Soon after, regular courses started not only in Sofia but in other cities like Plovdiv, Russe and others. After meeting Mabel Boardman in 1913 (National Director of the American Red Cross and Nursing Service since 1905), Queen Eleonora initiated the modernization of the nursing education in Bulgaria. In 1914, she invited Helen Scott Hay, former Director of the Nursing school in Illinois with a notable history of working on behalf of the American Red Cross in Europe, to stay in Bulgaria to assist in attracting young women for the planned new School of Nursing in Sofia. In the Samokov’s American School’s periodical “Probljasuk” (“Shine”) she published an article about public health and public health nursing in the USA as well as about the necessity for young women in Bulgaria to be trained for this purposes (Helen Scott Hay, 1915). She explained the biopolitical activities of public health nurses in the outskirts, their care about poor people and the good advice they gave about how to live in a healthier way. She described the qualities of the public health nurse as someone who brings together professional skills, theory and sympathy to the poor. Helen Scott Hay stressed the most important target groups of the public health nursing should be children and young women. The public health nurse had to be a friend of the daughter and of the young mother in the family. She had to help also the poor to find work, heating and food during the winter time. She had to visit every house, to observe the living situation of poor families, to control their food and its preparation and the quality of the air in the rooms. Her work was also to prevent contagious diseases like tuberculoses. She had to be familiar with the real life of the poor in factories, shops and the outskirts : “she can help people, advise and rise them like nobody others” (Helen Scott Hay, 1915, p. 15). In conclusion Helen Scott Hay wrote that they were a lot of challenges for a young woman in this field of work: “Public health service and its importance become more and more evident from day to day. It means a conciliation for the poor, reduce of tuberculoses cases, of epidemics between children in schools, reduce of infant mortality” (Helen Scott Hay, 1915, p. 15).

The American Red Cross, the Rockefeller Foundation, the Near East Foundation and other international organizations contributed actively to introducing public health nursing as an important biopolitical agency in Europe especially in relation to the struggle of tuberculoses and other contagious diseases. This notion of nursing was in opposition to the old interpretation as a service closed in the hospitals. The American Elisabeth Crowell (1874 – 1950) also contributed to the development of the public health nursing and its spread in West (France) and in East Europe serving in the Rockefeller Foundation Institutions in Europe. As a public health nurse and social worker she was invited by Alice Masarykova in Czechoslovakia to help with the establishment of professional social work. (Elizabth Dwyer Vickers, 1996) The intensive discussions about high infant mortality rates and high

tuberculosis morbidity and their social aetiology raised the necessity of professional training of specialists prepared to combine hygiene, educational and social work.

“At this time – Susan McGann (2008) wrote - the term "public health nurse" covered a variety of workers in different countries, from health visitors and social workers to sanitary inspectors and charity visitors.¹⁵ Nurses were attracted to public health work by the positive aspects of preventive medicine and the challenges the developing field offered, and it was generally recognized that nurses were the most efficient deliverers of public health and health promotion”.(Susan McGann, 2008)

4 First Bulgarian visiting nurses 1920 – 1926

As discussed, in the 20's the high rates of infant mortality were recognized as an important social and health problem in Bulgaria. It became a focus of discussions and biopolitical measures of a lot of civic societies and state authorities. The Bulgarian Child Protection Union organized in 1925 supported by the International Child Protection Union had as its first aim the struggle against infant mortality. It was recognized also as an indicator for the modernization of Bulgarian society. Table 1 shows the position of Bulgaria in relation to a selection of other European countries and the USA in 1936.

Austria	93/1000
Belgium	79
Bulgaria	144
Great Britain	59
Germany	66
Greece	114
Italy	100
Portugal	149
Romania	180
Sweden	43
USA	56

Table One: Infant Mortality Rates per 1000 live born children (1936) (Mishajkov, 1941)

This relatively high infant mortality, as well as the other public health problems such as tuberculosis mortality were recognized to be caused by two main reasons: poverty and ignorance which needed a response involving systematic social and hygienic health promotion measures. The public health nurse were recognized as a central figure in this campaign. For example, in 1924 Boyana Christova, the first public health nurse in Bulgaria, was appointed to lead the first Children health Consulting Station in Sofia (Children Health Centre) opened by the Bulgarian Red Cross Society. In the years that followed, she also became the head of the Nursing Service of all new public and children health stations in

Sofia. She published many articles explaining the social mission, the tasks as well the first experiences of the public health nurses in Bulgaria. Boyana Christova also elaborated rules for the visiting nurses how to communicate with women in their homes. In 1926, she wrote the following. (Boyana Christova, 1926):

1. All the personality, the tone of speech and the good and proper way to give the education are the preconditions for the visiting nurse to be successful.
2. Have a smart outlook. A nurse, dressed in her uniform will have more authority for the mothers than if she is dressed in colored cloths andearrings, rings and other ...
3. Be honest in what you are saying. Your indifferent behavior will not attract the mother's attention.
4. Be careful, tactful in your activities and logical in your speech.
5. It is important to select the material you will speak about and to plan your activity.
6. The time for speaking depends on the necessity.
7. Do not leave although before staying in the visited home at least 15 minutes. Even in the most tidy home you will find something to say.
8. The good nurse can deal according to the situation and who can give advises which could be implemented.
9. Do not forget that every individual has to be treated separately.
10. Be interested in the personal life of the mother. Do not forget to ask questions about the others members of the family.
11. be a friend to the mother but do not allow her to speak about the others.
12. Speaking with her, do not criticize the neighbor housewife. Do not give occasion to speak about her.
13. Do show your empathy to the mother but parallel to this educate her to bear her destiny without protest.
14. Let her problems turn your attention. Do search the reasons, calm her and encourage her.
15. Do not promise material help if you know that we are not able to give it.
16. Your kind behavior is able to remove every debt and to inspire in the mothers total hope and belief in you.
17. Be careful, conciliate and parallel to this – demanding.

In 1926 the Nursing School in Sofia under the initiative of Hazel A. Goff (the new Director who led the School of Nursing) started the first course for visiting nurses (public health nurses) in Sofia. (SAS – F. 360, op.2, a.e. 24, l. 1-4)

The students were graduates of the School of Nursing. The first ten students graduated in the next year. According to the course rules they had to work at least three years after graduation as public health nurses. This marked the beginning of regular professional education for public health nursing in Bulgaria. The curricula included three groups of disciplines: hygiene, social and pedagogical science /psychological disciplines. The students had lectures in public health, child rearing, school hygiene, home hygiene, city hygiene and water supply, industrial hygiene, social diseases (especially tuberculoses, malaria, venereal diseases), sociology, social legislation, social administration and social assistance, sanitary legislation and administration, children rights, emigration, prevention and eugenics, psychology, pedagogy, psychiatry etc. They had also a practical education in home visits, in sanatoriums, sanitary services etc.(Tsakova, 1928)

The morality education of the first public health nurses was also stressed. (SAS, F. 360, op.2, a.e. 24, 1-4). They had to be prepared to work in harsh conditions: unbearable heat or cold, in “storms and reign”, not to expect to have free evenings. Despite the difficulties students were encouraged to become public health nurses in order to develop themselves as individuals and characters as young women in a proper way, to expand their view of life, to know real life of people in their natural conditions, to know how to “understand and be sympathetic to people”, to be tolerant to the failures of the others”.

Most of these professional values which were emphasised in the preparation of visiting nurses were transferred by the Americans and their experience and were broadly accepted by their Bulgarian students. To encourage young women, Hazel Goff wrote a brochure “What can a nurse contribute to Bulgaria”:

In this booklet Hazel Goff insisted of the high social mission a nurse has in society . She wrote:

- „1. Every person should be interested in the progress of his/her people.
2. Remember that the progress depends on the public health
3. The public health depends on the health promotion.
4. This is up to the nurses. But the preparation of nurses depends on the society” (Hazel Goff, 1926)

She criticized the old notion of nursing as something concentrated in the hospitals and isolated from the social life. She criticized the doctors who were not willing to collaborate with the nurses but only demand obedience. She insisted that nurses had to be strong individuals and have their own opinion and criticized nurses who only wanted to marry a doctor (Goff, 1926).

The graduates of the first course for public health nurses started their practice in the district children health centres in Sofia, Plovdiv and other towns. Public health nurses were supposed to visit people’s homes at least every week in order to ”make equal conditions for raising all children”(SAS, F. 360, op.2, a.e.46, 1.88). In this centres public health nurses introduced card

indexes and diaries of the home visits with descriptions of living conditions of the families and their houses. In the first year after the opening of the first children health stations in Sofia, they concentrated their work on the poor families in the working class outskirts. Visiting practices and teaching activities were much more frequent in the poorest outskirts like “Juchbunar” (the poorest district of Sofia) and “Poduene” then in the City Centre of Sofia. The volume of diaries, card indexes and publications based on the documentations of visiting nurses affords a glance at least at the quantity of their advising and controlling activities in the very beginning of their work. Some of this data is illustrated in Tables 2 & 3

Mai 1924 – end of 1925 (Sofia)

Time	Total Number	First Station City Centre	Juchbunar	Poduene	Others	Not at home
From the beginning	4684				470	108
For a Year	3969	84	3711	174		

Table 2: Number of home visits of Public Health Nurses in the Children Health Centers (Vatev, 1926)

Station	First Station City Centre	Juchbunar	Losentz	Poduene
Opening of the station	28. Mai 1924	29 August 1924	14. November 1924	14. April 1925
Visits Numbers	634	734	82	357

Table 3: Number of visits of the Children Health Centers 1924 – end of 1925 (Vatev, 1926)

During this time, the public health nurses visited predominantly the outskirts and children taken by their parents (mothers) to the children health stations for consultations came in this first year from all classes – clerks, craftsmen, workers etc. A summary of fathers occupation, provided in Table 4, demonstrates this point.

Occupation	City Centre (Gurko str.)	Juchbunar	Poduene	Losenetz	Total
Workers	19	147	29	5	200
Craftsmen	30	36	40	14	120

Clerks	50	28	17	2	97
Merchants	13	24	1	1	39
Teachers	2		3		5
Telegraph workers	3		2		5
Lawyers	3				3
Undertakers	2		1		3
Soldiers			2		2
Commissioners	2				2
Public prosecutor	1				1
Writer			1		1
Notar	1				1
Military Officer	1				1
Medicine Officer	1				1
Factory Owner		1			1
Bettler		1			1
Unknown	27	45	12	13	97
Total	155	282	108	35	580

Table 4: Parent's (father's) occupation of children visiting the Health Centers (Consulting Stations) 1924-1925 (Vatev, 1926)

In the next years the number of the home visits increased rapidly. Finally, after 7 years of work, the work of the public health nurse was officially recognized and the state introduced rules about the children health centers and the public health nurses activities. It was a recognition of the role of the children health stations as an important new element of the public health system and as indicated in the example from Sofia in Table 5, the numbers registered with the child health centers increased dramatically as a result of this formal recognition.

Year	Born	Registered in the	%
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		Health Station	
1924	4973	203	4
1925	4931	431	9
1926	4881	783	16
1927	5131	876	18,6
1928	5009	1073	25
1929	4893	1196	25,5
1930	5497	1905	39,4
1931	5281	1630	36,6
1932	4944	1785	37,1
1933	5173	2635	50,9

Table 5: Annual Number of Children born in Sofia and registered in the Children Health Stations enters Sofia (1924 -1933)(CSA, F. 372 , op1, a.e. 1085, l. 53)

5 First descriptions of living conditions

It is from the annual reports of the public health nurses that one gains insight into how the practice developed, The use of home visiting practice as a tool to share expertise, to control and to improve living standards and health promotion in the outskirts were recognized as the most important element of the public health nursing. The homes in the small streets in Sofia peripheries were usually described by the visiting nurses as damp, underground, narrow, in most of the cases reduced to only one room serving for kitchen, living room and laundry at the same time. This image which was spread in the 20's was supported by many reports of the first public health nurses submitted to official meetings and published in the newspaper "Sister" . Nurse Lazarova was one such commentator: 'Bulgarian society is not aware today that there is a special women's institute, ... public health nurses, which is totally dedicated to the struggle of tuberculoses'– the public health nurse N. Lazarova wrote. - 'Specialized in the struggle of tuberculoses, the public health nurse researchs all local preconditions and factors which cause the cases of tuberculoses. She researchs the cases of ill persons as well as the cases of death in certain district, she makes easier the care about ill persons by her frequent visits in their homes, she researchs his/her real situation and gives advises'. (N. Lazarova, 1926, p.246)

In her writing, she described the image of a typical poor home in the outskirts – described as a place similar to a "stable"- for domestic animals, a home which is not a real "home". This type of reference to the homes of the poor by middle class women is common in many histories of social care, not only in Bulgaria. (See for e.g. : Stephen A. Webb, 2007). Such an attitude indicated the power relationship between the visiting nurse and the "clients". The descriptions made by the public health nurses from the children health centers are very similar

to this reinforcing again a classist attitude and approach in the work. (See for e.g., Vatev, 1926)

A poem dedicated to the public health nurses written by the nurse Olga Zapolska in 1928 presented the ideal image of this profession shaped in this first years and propagated among the Bulgarian nurses society. This poem presents a picture of a poor family in the 1920's – after the First World War: the father is fallen in the war, the mother has tuberculoses, there is no heating in the winter, little children are hungry. In this hopeless situation the visiting nurse appears bringing warmth, food and hope. (Zapolska, 1928) Olga Zapolska presented the visiting nurse as a woman who knows how poor people live. This image shows the connections of social and health problems a public health nurse was expected to solve. The clients – first of all mothers and children - were described as passive objects of her help. Clients didn't express their own feelings in their words: they expressed only gratitude and hope. The public health nurse was described in the terms of the “social motherhood” more as a missionary rather than than as a professional.

“A Visiting Nurse (Zapolska, 1928)

Nobody asks since many years

What is she doing, where she lives

In towns and poor districts

She is sowing health everywhere

Who [is she] – people asks

Isn't she that women,

Who goes with her bag in her hands

Everywhere, even in the poorest slums

With a good smile on her face.

Here where a cruel poverty is embedded

In every deep and wet room

Where a poor family lives

Without a summer shine, without heating.

During outdoor the wind is sougning,

And it is snowing,

The windows and doors are squeaking

Even inside the snow fall on children's heads.

Children cry, hungry, weak and pale

Those little helpless children

During the young mother is coughing and moaning

The father was killed in the dreadful war.

She, the poor woman with her bony hand

Is pressing the smallest child to her breast

She thinks about the dead coming soon

She closes her eyes and humbly sigh:

O Good, please take pity at least on the children

[she prays]And dreaming so she waits her last time

Her pain is cruel and she is moaning silent

Without raising her voice.

But suddenly somebody is knocking slightly on the door

The door squeaks and somebody opens it

A female figure came in and asked

But nobody answered.

- Who are you and why are you silent?

Is there somebody healthy and alive?

Tell all pains to me

I will help you immediately

The woman burned a candle, she burned the stove,

She brought milk, bread, firewood

For the little children she prepared

Warm nourishing food .

They were warmed and nourished, encouraged

The fear disappeared from their faces

They looked at the nurse

With gratitude and request

The ill mother with her shining eyes from the disease

followed every step

She thinks that the Good sent

This patron so nice and good

This day she was brought to the hospital

Under a doctor's care

Her health improved soon

And she could come back to her home.

Not only here, but in the hall town

The nurse gives her help every day

She walks everywhere,

She sees how bad people live

A deep poverty here

Diseases, suffering and hard live there

She is willing to sow health and welfare

Everywhere”

31. 3. 1928

The first decade of the public health nurses practice in Bulgaria 1924 – 1934 was a very hard time for the first generation when the profession was established. They were young women from the middle class in Bulgaria - highly educated, trained often abroad – in USA, England or other countries – and capable of speaking foreign languages. They didn't fear to enter the poor houses and they managed to communicate with the strange world of the outskirts in Sofia and to create regular contacts with families there. Their work contributed not only to aims of health improvement, but also the to use of social knowledge about living conditions in the working class homes. Their work – their descriptions of single cases and publications - raised the public attention to poverty, to the dangerous hygiene parameters, to the lack of municipality measures to improve at least the sanitary situation in the poor districts. In so doing, the beginning of the public health nursing system led onto the development of professional social work which is discussed in the next section.

6 First professional social workers in Bulgaria after 1934

There were no professional social work in Bulgaria until 1934. During the First World War Sofia municipality tried to introduce the so called Elberfelder system of Municipality social

assistance. In the years after the war, municipality social services were introduced in the cities of Sofia, Plovdiv and others on district base. The registration of poor families occurred in categories and social support was provided by municipality commissions. This activity was not paid professional work; it was an honorable, voluntary activity. The members of the commissions (only men) offered some kind of client's support, which was discussed in the municipality council. Members of the municipality councils in the smaller towns where people knew each other often discussed the way of life of the "clients", their clothes etc. in order to agree the necessary kind of support. The activities of social support were not professional and their justice and quality were based not on their professional standards but on their publicity as well as on the public authority of the commission's members in the local community.

This situation which marked a transitional period from a non professional pre-modern to a professional social assistance system changed in 1934 after a military coup d'état. The municipality system was centralized by the new military government which aimed to bring the municipalities under state control. The military government had also an ambitious modernization program. This affected also the municipality social services which were reorganized. For example, in Sofia capital's municipality a service of eight female professional social advisors was introduced to replace the honorable social assistance work. According to the municipality rules, every female social advisor was responsible for a specific part of the town. Given that trained persons were required, the

first eight municipality social advisers who were hired were public health nurses. Those eight social advisers thus became the first professional social workers in Bulgaria.

In that time, the professional training for social work was just in its beginnings. In 1932, the Bulgarian Women's Union opened a High Social School for Women. Its organization and curricula followed in general the program of the Alice Salomon School in Berlin. The High Social School for Women introduced in the curricula professional methods and procedures of social work established in West Europe and USA as well as the practice education of female students in detailed social observation of the living conditions in the working class homes in the Sofia outskirts. The curricula included also disciplines for interpretation of both systematic and non-systematic poverty: juridical and economic disciplines, social security systems etc. It took several years for the School to be officially recognized in 1936 and several years more for the graduates to be hired in the city social services.

The female social advisor - a public health nurse in the first years after 1934 - became a key figure in the social assistance system. She had to visit regularly the families in her residential district, to collect and to prove data about families. She proposed a decision for every case which was taken by the chief of the department. According to the prescriptions of the Sofia municipality rules, she had to fulfill her work with "empathy, devotion and love" (Pravilnik, 1939). The female social advisor had also a professional uniform and as well as tram card for free for her visits. In 1941, a new position was introduced in the hierarchy of the social service office: a senior female social advisor - instructor. This change was motivated by the very high importance given to the social work by the authorities (Pravilnik, 1939). The senior social advisor-instructor had to have worked for at least 5 years and in this way, the social advisor's occupation came to be accepted as a long term profession.

The female social advisors were also a member of the district councils for social support, which coordinated the social assistance activities of state, municipality and private charity

organizations. The council included representatives of state authorities, municipality and civic charity organizations in order to prevent a misbalance of the social support among the poor population. (Pravilnik, 1939)

The ‘public health nurses turned social workers’ were prepared for some of their tasks as district social advisors. They were prepared for the home visits and the expertise of the social and sanitary living conditions as well as for the administrative bureaucratic work. They knew the social institutions such as orphanages, elderly people houses, sanatoriums or hospitals and they could recommend or direct people who needed this kind of support. They were prepared also to give hygiene advice to families or to help young mothers rearing their infants. Their knowledge of preventing tuberculoses and other contagious diseases as well their competences of combating the very high infant mortality made them also important for the social assistance system in the 1930’s in Bulgaria.

Archive documents left by the social assistance service of Sofia Municipality in the late 30’s give some information about the cases and the practical work done by female social advisers as first municipality professional social worker in Sofia and in Bulgaria.

The archive documents are client’s letters and formularies - requests for social support, which documented a wide variety of single cases of social need. There were cases of poor single mothers and single fathers who asked for support for their children or for institutional care, cases of unemployed, ill, homeless or disabled persons, of single poor elderly people etc. Many of the cases were complicated and had to be studied by the social worker because of different reasons: changes of addresses, ill persons who were in the hospital during the social worker’s home visit, old persons sheltered by relatives for a while, contradictions in the information given by neighbors and so on.

This formularies are first documents which afford a glance into the development of the process of early social work in Bulgaria. While the records do not give detailed descriptions of the actions of the social worker, they show steps in the process of social work and show a concern that practice become more transparent and possible to be retraced. In their records, social advisers mentioned moments of their visits in the client’s home, they described poverty they saw as well as conversations with the clients and with their neighbors. The short descriptions often present the distance or the personal empathy of the social worker to the client. And if we compare the social adviser’s statements written in the case formularies in the time 1937 – 1940, we can see a slight tendency to more detailed description. (SAS, F. 1к, op.4, a.e.1106). The language of the statements also changed slightly whereby in the beginning, it was an exception for the social worker to take statements about the personalities of the clients but within a few years, clients began to be described in terms like: “morally corrupted”, “leaning to criminality”, „using bad influence”. This moral language was used especially when the cases were single women and children.

It was not easy for a young woman practice this new profession, to go every day in the poor streets and homes, to study and to suggest social assistance for the different cases, to negotiate between the people and the authorities and to offer the kind of the support. Their responsibility were very important because their statements were the basis on which the cases were solved. In the most of the cases documented in the archives, the clients were supported according to the report of the social advisor.

There were clients who didn't agree to the statements and to the kind of support provided. There were also neighbors who didn't approve the support of their neighboring families and wrote letters to the municipality against the social adviser. This way the work of a social adviser was constantly controlled not only by the authorities but also by clients and other citizens.

In 1939 hundreds poor citizens from a Sofia district who were not satisfied by the work of a municipality social adviser (public health nurse of her education) signed two petitions one after another against her. (Popova, 2009). They complained that she regularly hurt them. They wanted the former female social advisor (also a public health nurse) who was described by them as acting "like a mother" for the people. The petition pointed out that the municipality social assistance system with its procedures and rules was accepted by the poor population in its coherence to certain personal qualities of the social worker which were closed to the image of an ideal public health nurse: "sympathetic", "staying to late night" in the homes of the needy.

In the end of the 1930's the Municipality Social service started to appoint graduates of the High Social School for Women as female social advisors. In the 1941/1942 the first training course for female police was organized by the Police Direction in order to improve the protection of neglected children and young prostitutes. The Child Protection Union started training courses for "assisting social services" – first of all for the children institutions. The professional social work and its training become more differentiated for the different target groups.

The public health nurses as first social worker had their important role in the first steps of social work in Bulgaria when social work was not separated from the hygiene preventing work and health promotion. In the 1920's they managed to establish the new profession of public health nursing as well as opening the new vocational field for social professions with their methods of social observations, regular home visits and social case work. It was not easy for those young women to be accepted in the people's homes, to establish those new activities in Bulgarian society and to make them a necessary common practice. In the end of the 30's the profession of the social worker finally was separated as a professional field independent from its previous connection to public health. Nevertheless traces of the early social workers image which united hygiene and medical competences with social support continued to exist in the society in the next years and marked the popular expectations for social work in the years that followed.

References

Pamela Abbott and Liz Meerabeu 2003: *The Sociology of the Caring Profession*, Routledge (first edition 1998).

Boyana Christova and Helen Scott Hey 1933: (on the occasion of her death November 1932), *Sestra*, N 5, January 1933.

Helen Scott Hay 1915: *Grizhata za obshtestvenoto zdrave* (The Care of the Public Health), *Probljasuk*, N 1-2, August 1915, p. 15-17

Boyana Christova 1926: *Saveti kum sestrite posetitelki* (Advises to the visiting nurses), *Sestra*, v.2, p. 28

Grace Hay Schryver 1930: *A History of the Illinois Training School for Nurses 1880 - 1929*, Published by the Board of Directors of the Illinois Training School for Nurses in Chicago.

Martha Vicinus 1985: Settlement Houses: A Community Ideal for the poor: in: Independent Women, Work and Community for Single Women 1850-1920, Virago Press Limited. pp. 211-246.

Christian Promitzer, Marius Turda, Sevasti Trubeta 2011: Health, Hygiene and Eugenics in Southeastern Europe to 1945, CEU Press Studies in the History of Medicine, CEU Press, Budapest – New York.

Milena Angelova The History of social work in Bulgaria 1900 – 1960, The History of Social Work in Eastern Europe 1900 – 1960, Research Report - Bulgaria - Final Report.

Svetla Baloutzova 2011: Demography and Nation. Social Legislation and Population Policy in Bulgaria, 1918 – 1944, CEU Press Studies in the History of Medicine, CEU Press, Budapest – New York

Popova K. From Visiting Ladies Towards Municipality Female Social Advisors: Women in Home Visiting Practice in Bulgaria (1915 – 1939), in: Vesna Leskosek (ed.), Teaching Gender in Social Work, ATHENA Ser

Elizabeth Dwyer Vickers, Frances Elisabeth Crowell 2009: An Evaluation of a European Nursing Experience, A thesis submitted to the Department of History College of Arts and Social Science The University of West Florida ,In partial fulfillment of the requirements for the degree of Master of Arts, 1996, http://etd.fcla.edu/WF/WFE0000064/Vickers_Elizabeth_Dwyer_199612_MA.pdf, University of Utrecht, p.127-145.

Hazel A. Goff Director of the School of Nursing by Bulgarian Red Cross Society, Kakvo mozhe da stori milosurdnata sestra za Bulgaria (What a nurse can contribute for Bulgaria), Sestra, 1926, N 7 and 8, p. 235 – 238. (Edited also as a booklet).

Stephen A. Webb 2007: The Comfort of Strangers: Social Work, Modernity and Late Victorian England – Part I., European Journal of Social Work, Vol. 10, Number 1, March 2007, pp. 39-55 Part II , June 2007, pp 193-209

McGann, Susan 2008: Collaboration and Conflict in International Nursing, 1920-39, Nursing History Review

Dimitar Mishajkov 1932: Osnoven kurs po demografia, Sofia, 1941, p. 200. See also Ilija Janulov, Sozialna zashtita na dezata (Social Child Protection), Sofia, S. 12-13.

N. Lazarova 1926: Rabotata pri Tuberculoznija Dispanser (The work of the Tuberculosis dispensary), Sestra (Sister), Vol. 7 and 8, March and April 1926, p. 246-247.

Prof. Dr. Stefan Vatev 1926: Dejnosta na zdravno-saveshtatelnite stanzii za majki i deza v Sofia, (The activities of the children health centers in Sofia) Sestra, vol. 2, February 1926, N 6, p. 216 – 222.

Olga Zapolska 1928: A Visiting Nurse, a poem, Sestra, Vol. 6, p. 14-15

PSSMD 1931: (Pravilnik za suveshtatelnite stanzii za majki i deza), Durzhaven Vestnik (State Newspaper) , N 217, 19. 12. 1931

Pravilnik (Rules) za nachina na rabota pri obshestvenoto podpomagane v Bulgaria 1939, Central State Archive, F. 588, op.1, a.e.90, 1.1-5. (Municipality rules for the social assistance department) Sofia.

SAS – State Archive Sofia

CSA – Central State Archive

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