



The Religious Nursing in the Lleida of the XIX Century: The Case of Daughters of Charity of Saint Vincent of Paul

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ABSTRACT

The city of Lleida that was reborn after the war of independence 1808-1814 had a diminished population and many wounded soldiers who remained in the city's hospitals [1-5]. In addition, there was a great lack of supply in the military hospitals of the seminary, general hospital and San Luis within the "Corregimiento" to which the city of Lleida Belonged. Fact that led the town hall to address the was commissioner of the French Army General Henriot asking for help [6,7]. To correct these deficiencies, during that month of may an auction of the bread supply was carried out , every neighbor was required to provide an ounce of threads for the hospitals, some 300 mattresses were requisitioned for the comfort of the patients and supplies were provided for the city's military hospital [8].

INTRODUCTION

The old Santa Maria Hospital or also known as the general hospital of the city, until the occupation depended on an independent Board of the town hall. With the arrival of the French, it was determined that the municipal corporation should establish people with specific control functions over the center. Francisco Piñol, Pedro Jordá, Jacinto Pallarés and José Sales were appointed; the first as administrator and the remaining three as vowels. Along with these administrative changes, new financing mechanisms were also adopted to ensure that facilities that cared for the sick and injured did not interrupt their services. To this end, much of the alms of the Pía Almoína¹ were assigned to these needs, especially so that the sick French military were assisted with everything necessary, early and with abundance [9]. The Santa Maria Hospital or general hospital, founded in 1445² and a reference center

for charitable assistance to patients in the city, had managed to improve the social image at the beginning of the 19th century after having improved the important structural deficits, situations of overcrowding that since the eighteenth century presented [10-20]. Part of these improvements in the social image and in the health conditions of the establishment were the result of the establishment of the daughters of charity as trained nurses and with rules that governed their day to day [21].

THE ARRIVAL OF THE DAUGHTERS OF CHARITY IN LLEIDA

The daughters of charity arrived in the city in 1792 as a result of an accumulation of coincidences and found a population mired in important changes arising from the hygienist thought of the time, to

¹The Pious Almoína was a cathedral establishment that was in the cloister of the Seu Vella and that had been created throughout the twelfth century to organize more effectively all the donations, alms and legacies.

²CAT AML Concells Generals, REG 418, F 53R.

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minimize the outbreaks of infection and epidemics [21]. Few years later, when the municipal water deposit was inaugurated in Lleida by order of the corrector Lluís of Blondel, enabling the supply of drinking water to the inhabitants of the city, and supplying all the city's sources. From the operation of the deposit, the "Font de l'Hospital³" in 1802, which provided drinking water to the establishment; helping to improve the health of the center [22-25].

They were initially installed in the old Hospital of Santa Maria to assist the poor and sick, and then extend their assistance to the children exposed in the Maternity House. The Bishop of Lleida aware of the serious sanitary deficiencies that the charity hospital in the city showed, promoted his establishment [26-28]. Bishop D Jerónimo María de Torres 1784-1816 understood that there was a situation of "decline in the income of this hospital and the impossibility of sustaining its institute, which has always been the collection and healing of all the patients presented to it without exception any" to which was the lack of nurses and servants in charge of fulfilling their obligations, so he saw in the daughters of charity the opportunity for said establishment to be seen in a disgusting way and that people did not want to go to him to remedy his ailments [29].

These first religious nurses of the establishment, found a center that had significant lack of recourse, of "unpunctual assistance of the sick due to lack of nurses and servants⁴" who promptly fulfilled their duties; and being the cause of which many neighbors die in their houses by the disgust that caused them the assistance that was carried out in the hospital. The sisters contributed with their arrival at the center, a health and spiritual care regulated by "Regals Communes Particulars" of the congregation that covered the needs of hygiene, food, clothing, among others [30,31]. The object of care for the sick was to "teach them to use their diseases, to prepare for death and to make strong resolutions to live better when they are cured" [32].

The "particular rules for the sisters employed in the hospitals" were included in the "particular rules of the offices of the daughters of charity", determining the purpose for which they should be established in hospitals and hospices, is to honor in them to God, assisting them bodily and spiritually, with sweetness, compassion, respect and devotion [33]. They had a training program based on both spiritual teachings and care for the sick and needy. This program included⁵: the acquisition of knowledge of a medical nature (developed by doctors), the performance of hospital practices in center's in the city of Paris, home health care for the sick and instruction in ethical, religious concepts and attitudinal. The latter was carried out through the study of the conferences of St. Vicenta of Paul. In none of the cases, the apprentice sisters could be responsible for more than 8 patients and were always under the tutelage of a more expert sister [34-36].

His arrival was not without conflicts with the rest of the staff that made up the staff of the center's workers. In the same constitutions of the year 1797, the administrative board of the establishment itself stated that "[...] if envy has dared to spread voices that have

been able to prevent the public against them [referring to daughters of charity]", reaffirming the idea that there was fear of loss of power and functions by the rest of the nursing staff with the arrival of the sisters. Idea that suggests that the work environment with which they began their work was not the most favorable [21].

Sister María Esperanza Blanc, Sister Rosa Grau, Sister María Paula Puig and Sister Antonia Burgoon were the first to establish themselves and electing the former as Superior [37-39]. A first contract was established on 30 November 1792 authorizing at that time several four sisters to perform the services Number that could rise according to the needs with the corresponding authorization of the administration [40]. In the handwritten copy of the contract, the 13 points to be followed by the daughters of charity in Lleida are described, specifying in the first one that they should be in charge of the regime and care of the poor patients of the hospital following their own rules. In the second, it is made clear to them that they would depend the administrators of the center, so they should be held accountable for the economic resources, including the clothes and real estate necessary for the care of both the sick and the exposed children.

The feeding of the sisters oversaw the establishment itself, as well as the clothing necessary for their dresses to demonstrate a situation of decency the costumes had to fulfil the mandate of the foundation itself, both in color and in the quality of the fabrics. Annually they received an amount that amounted to thirty-five catalan pounds. So, you can talk about a religious nurse who received a salary in exchange for their services [21]. These first sisters were increasing until reaching the end of the 18th century to a total of 118 daughters of charity who served in the old Hospital of Santa Maria [21].

CONTRIBUTIONS OF THE DAUGHTERS OF CHARITY TO A WARLIKE CONFLICT

It must be recognized that during this war period of the War of Independence of 1808-1814, many of the sisters of catalonia and Barbastro fled to Mallorca to take refuge from the repression of French troops⁶. Those of Lleida stayed together with the sick and the deposits in houses adjacent to the old hospital (since this was occupied by French troops) attending to the population and wounded soldiers [41]. Sister Maria Blanc came to attend both Spanish and French soldiers in Lleida between these years, intermittently, maintaining herself as Superior of the Congregation in the city [42].

COMPETENCE DEVELOPMENT OF THE DAUGHTERS OF CHARITY IN THE OLD HOSPITAL OF SANTA MARIA

After the contest, in 1818 the cover nor and vicar general Capitular, D José Vidal⁷, made a report about the arrival, functions and development of the work of the daughters of charity in Lleida. He described the center as one of the most important training centers for them, being the first House of the Daughters of Charity in

³The fountain occupied the southern wall of the inner courtyard of the Hospital of Santa Maria. It was the same Board of the centre which on 9 November 1801 requested a water lead for a fountain that was to be built. Drinking water began arriving on 10 May 1802.

⁴AMCM File Padres Paüles Madrid. Libro de entradas profesiones y óbitos de las hermanas de la casa de la Inclusa de la ciudad de Lerida start to the year MDC-CCXIX. f.66.

⁵HCSVP Archivo de Madrid. Anonymous nursing. History notes. Scoring facilitated by Sra. Angeles Infante. Daughter of Charity.

⁶HCSVP Anales de la congregación de la misión y de las Hijas de la Caridad. Volume LXIV. January 1957: 394-415.

⁷José Vidal was the vicar general capitular of the vacancy of the Diocese of Lleida after the death of Bishop D. Jerónimo María de Torres.

Spain⁸. In the report, he described the qualities that the sisters had as well as this functions throughout Spain [43]. Among its qualities, charity with the patients stood out, their continuous vigilance, the way in which they applied treatments and remedies, as well as the zeal in which they were carried out. This form of work considered had been decisive when it came to change the perception that the population had regarding the hospital. To these qualities, he added charity and dedication in how they raised and educated the exposed children⁹.

The internal economic management of the hospital was also the responsibility of the sisters as indicated by different documentary sources, in which it is evidenced that they are the ones who receive money for the purchase, for example, of the daily food of sick and workers¹⁰ [21]. According to the "Diccionario Madoz", the Hospital of Santa Maria had a total of one hundred beds in 1844, of which fifty were occupied by elderly people suffering from arteriosclerosis and internal diseases, such as colds or diarrhea, the surgery room had 35 beds; and fifteen were occupied by patients suffering from venereal diseases or scabies [44].

The daughters of charity occupied their own rooms that were located in buildings adjacent to the hospital, but that contained direct communication with the same. The patients' beds had iron bars, boards, mattresses, covers, pillow and sheets; sixty beds being assembled for that year, becoming able to put between one hundred fifty and two hundred¹¹. In 1853, the patients used to be around fifty as a general mean, being assisted by seven sisters, a nurse and three servants, who helped them in their tasks. It was Sister Superior who led the interior administration of the house. In addition to them, the hospital had two doctors, as surgeon, an assistant who helped both priests, bleeding and minor operations. The apothecary was well stocked and assisted by a sister who depended on the apothecary. Everything related to the feeding and sustenance of both the sick, sisters and dependents required the supervision and intervention of one of the members of the administrative board, overseeing the Superior the expenses of the moment¹².

EMERGENCE OF NEW CONFLICTS

It was in 1878 when a moral conflict occurred in the hospital after Sr José Serra Dolset (hospital guard) was appointed, by order of the "Comisión Municipal de Beneficiencia" of Lleida, to "take care of the healing of sick and sick from surgery that are housed in this holy asylum". What would now enter into normality, caring for meant a violation of morality and good customs, as a result of this, the superior Prudencia Albaina herself filed a complaint on May 23, 1878¹³ to the bishop of the city, expressing the scandal that had led, for example, to the recognition by the latter of a young woman who even requested the discharge of the establishment. Event that can also be understood from the fear of the sisters to lose professional skills in the center [21,40].

This conflict was not the only one, but the beginning of a process of loss of power, of social image and even of change in

the social model that the establishment, and that greatly affected the daughters of charity, and that left developing in parallel to the political and social changes of the city's population. Process that was consolidated at the beginning of the 20th century, especially for the secularization of nursing.

WORK CONSIDERATIONS AS RELIGIOUS NURSES

There is a belief that religious nursing did not receive any kind of financial compensation for their work. In the case of the daughters of charity, it was not also. Already in the contract for the establishment of the sisters signed in 1792, an annual compensation of thirty-five catalan pounds was set for each of the sisters, in addition to everything they needed for their support. This salary in pounds remained constant for more than ten years in the case of the sisters, while the salary of the surges attending the hospital was decreasing¹⁴. According to localized documentation, as of the second half of the 19th century, this situation was reversed, receiving more salary for both practitioners and nurses, than the sisters themselves; situation that could be due to the socio-political change that was lived as well as of functions that in the regulations were given to the daughters of charity [21,40].

Through the historical documentary sources of the center, it is known that as of January 1, 1836, the nurse Jayme Torres charged 60 realis monthly in addition to having the possibility of eating in the center, in the case of the daughters of charity, they were paid 31 realis with 4 salaries¹⁵ for each of them [21].

CONCLUSION

The community of daughters of charity of Lleida were young women who after their incorporation as staff who attended a center of the city's public charity network, were subject to conflicts with the resto the staff they also cared for, the result of a feeling of grievance for economic and labor conditions, since being religious, the collective imaginary assumed that they did not obtain any type of salary except for their support. To this was added that their entry into the charity-assistance system meant the progressive replacement of former hospital workers who were disappearing due to their low salaries and darkness of the trade [45-52].

They were women belonging to a society in which the role that women had was to decide between two outings, to dedicate themselves to the family under a vision of submission or to dedicate themselves to a religious life that allowed them to be trained in areas such as health or education. Therefore, we can talk about progressive women who, along with their main vocation of religious and spiritual character, also opted for the possibility of forming and liberating themselves from that patriarchal subordination against the canons marked for their gender, and that were very influenced for the revolutionary ideas that had permeated French society at that end of the 18th century [53-55].

This association of religious and women promoted the construction of an image of the nursing professional throughout

⁸AHN Consejos, 3381, 117r.

⁹AHN Consejos, 3381, 117v, 118r.

¹⁰CAT SAIEI DAH H.2.1.2/98. Box. Comptes. Sortides. Relació de despeses de l'Hospital del mes de gener de 1836. Includes the list of personnel expenses.f.2.

¹¹AGA Firm 44/05816. Gobierno de la Provincia de Lérida. Hospitals. Without foliar.

¹²AGA Firm 44/05816. Gobierno de la Provincia de Lérida. Hospitals. Without foliar.

¹³ADL Bisbe Tomas Costa i Fornaquera 1875-1889. Box nº 6 Hospitals Fraga and Lleida. Letter date May 23, 1878. Without foliar.

¹⁴AMCM. Sección HC Serie Casas siglo XIX. Box Hospital Sta. María de Lérida. Binder Inclusa. Manuscript without dating. Part of the contract the Hospital of Lleida. Fifth point.

¹⁵CAT SAIEI DAH H.2.1.2/98. Box. Comptes. Sortides. Relationship of personal hospital of the month 1836. Inclou the list of staff clearances. f.2r.

the 19th century, which was seen by society from charity, altruism or dedication to work as a result of self-denial; all of them concepts that have helped to make the profession invisible and therefore underestimate it [56]. Can it be concluded that being a woman, religious and dedicating herself to care has been a determining factor in the professionalization of nursing? Obviously the answer is yes, simply because of the fact that the care itself since the origin of humanity has been in the hands of women; likewise, factors such as the incorporation of men into the profession, the secularization of the profession must be considered, and in addition to the religious we owe the first curriculum of the nursing profession in Spain more than 100 years ago, which allowed entry in the health institutions of lay personnel [57-59].

The community of daughters of charity of Lleida demonstrated capacity for leadership and management of human and material resources, as indicated by the expense notes of the Hospital of Santa Maria, becoming prudent and capable in your internal organization of daily work; recalling that St. Vicent of Paul himself said that "a sister who insists on staying for a long time instructing a sick person, to the detriment of another would not act properly. You need to know how to order your time", remembering that they had to be careful when managing the economic resources for the poor, making the institutions in which they were installed profitable [60,61]. Despite the fact that the daily tasks were designated by the superior, it has been proven that the sisters specialized in certain care, diagnosis, treatment and administration services, as in the case of the sister Adelaida González¹⁶ who worked in the hospital pharmacy of Santa Maria in 1874 as a manager demonstrating their practical knowledge and her love for study [21]. The daughters of charity were not the only religious nurses in the nineteenth century in the city of Lleida, but those that had the greatest impact on the health and hygiene improvements of the population, as well as a congregation that deserves to be considered at the time of writing the history of nursing in Lleida [52].

REFERENCES

1. Tejero Costa F. Una aproximació a la demografia fragatina segles XIV- XX. Institut d'Estudis Fragatins, Fraga.
2. Lladonosa VM, Casals BQ, Pons JMA (2009) La Construcció de la modernitat a Lleida: Manuel Fuster Arnaldo i el seu temps. En Lleida: Institut d'Estudis Ilerdencs 135.
3. Ased y Villagrasa MI de (1963) Un folleto sobre la toma de Lérida por los franceses, editado en Zaragoza el año 1810. Institut d'Estudis Ilerdencs. Lerida 8-18.
4. Lladonosa PJ (1980) La Lleida napoleònica. Curial Edicions Catalanes. Història de la Ciutat de Lleida 1. Barcelona 293.
5. Sánchez i Carcelén A (2008) La Guerra del Francès a Lleida 1808-1814. *Hisp NOVA Rev Hist Contemp* 8.
6. Sánchez CA (2012) Las consecuencias económicas de la ocupación napoleónica en Lérida. *HISPANIA*. LXXII 501-534.
7. Sánchez CA (2008) Lleida al inicio de la dominación napoleónica 1810. *Sociedad Extremeña de Historia, Centro de Estudios del Estado de Feria. Actas del Congreso Internacional Guerra de la Independencia en Extremadura, II Centenario 1808-2008 IX Jornadas de Historia en Llerena*. Llerena 467-480.
8. Alvarez PJM (1947) Notas para el estudio de la Guerra de la Independencia en Lérida. Consejo Superior de Investigaciones Científicas, Instituto de Estudios Ilerdenses. Aportación al estudio de la Guerra de Independencia en Lérida. Lérida 94-112.
9. Fernández SG (2003) Imágenes de la caridad catedralicia. Orígenes y evolución funcional de las pinturas de la Pía Almoína de Lleida. *Arte* 2: 87-125.
10. Lladonosa PJ (1974) Noticia histórica sobre el desarrollo de la medicina en Lérida. *Lerida CO de M de la P de Lérida: Colegio Oficial de Medicos de la Provincia de Lerida* 525.
11. Lladonosa PJ, Capítol IV, Barrinou El (1979) La Plaza de la Catedral (antaoño del Pes del Rey, después del Hospital). Las calles y plazas de Lérida a través de la Historia II. 2nd edn. Lérida 25-35.
12. Reventós CJ (1996) Els hospitals medievals cristians i la seva evolució vers els hospitals moderns. *Història dels Hospitals de Catalunya I. El hospitals i la societat catalana*. Barcelona 72-126.
13. Sanahuja P (1944) Historia de la beneficencia en Lérida: La Almoína de la Catedral. *Ilerdencs I d'Estudis. D mecanoscrita. E inèdit*. Lleida 367.
14. Lladonosa PJ (2007) Capítol III. Els carrers de l'antiga moreria i Barrinou de Sant Llorenç. *Universitat de Lleida, La Paeria. Ajuntament de Lleida. Els carrers i places de Lleida a través de la història*. Lleida 174-183.
15. Domínguez AC (1981) Gènesi de la professió. Orígens de la professió. Ediciones Rol SA. La Infermeria a Catalunya. Barcelona 15-52.
16. Sanahuja P (1944) Historia de la beneficencia en Lérida: La Almoína de la Catedral. Institut d'Estudis Ilerdencs, Document mecanoscrit 900.
17. Camps SM (1981) Santuaris lleidatans amb tradició mèdica. Lleida: Seminari pere mata. departament de medicina legal i toxicologia. Facultat de Medicina. Universitat de Barcelona.
18. Milà MMD (1984) Algunas noticias sobre el antiguo Hospital de Santa Maria. Instituto de Estudios Ilerdenses. Lleida 9.
19. Conejo da PA (2002) Precedents històrics. Tradició hospitalària medieval a Lleida. Naixement i constitució de l'hospital general de Santa Maria. Institut d'Estudis Ilerdencs, Diputació de Lleida. L'Antic Hospital de Santa María, Lleida 53-68.
20. Hernandez HMC (1988) Las Hijas de la Caridad en Lérida. Las Hijas de la Caridad en España 1782-1856 Documentos. Salamanca 93-121.
21. Tejero Vidal LL (2017) Las Hijas de la Caridad de San Vicente de Paúl en el Hospital de Santa María, la Casa de Maternidad y la Casa de Misericordia de Lleida 1792-1936. Aportaciones a la enfermería. Universitat de Lleida.
22. Sánchez i CA (2007) Absolutisme i Liberalisme a Lleida 79: 1814-1828.
23. Lladonosa PJ (2007) Capítol XI. El desenvolupament urbà als arenys del Segre i del Nogueroles. En: *Universitat de Lleida, La Paeria Ajuntament de Lleida, Els carrers i places de Lleida a través de la història*. Lleida 707-751.
24. Vall CC, Zaragoza CC, Gabriel R (2001) Fonts històriques (segles XVIII-XIX). Ajuntament de Lleida. L'Aigua dels dies Fonts de Lleida, segles XVIII-XIX. Lleida 17-55.
25. Sánchez CA (2007) Capítol 3. L'àmbit urbanístic de la ciutat de Lleida a la guerra del Francès. Pagès Editors. La Guerra del Francès a Lleida La insurgència lleidatana contra Napoleó i les seves conseqüències Lleida 1808-1814: 45-49.
26. Hernandez HMC (1988) Las Hijas de la Caridad en Barbastro. Las Hijas de la Caridad en España 1782-1856 Documentos. Salamanca 65-91.
27. Daydi L (1920) Las primeras fundaciones. Casa Editorial de Arte Católico. José Vilamala. BL de Marillac y SUS HIJAS. Barcelona 285-294.
28. Mas NCM (1958) Expansión de las hermanas en el país. Hospital de Lérida, antes llamado de Santa María y ahora Hospital Provincial de Santa María. Jomogar. Fundación de las Hijas de la Caridad en España. Madrid 44-55.

¹⁶AMCM File Fondo Padre Nieto. Binder Inclusa. Notes from some deceased brothers in the old Hospital of Lleida. Mechanoscrit document.

29. Hernandez ZMC (1988) Las Hijas de la Caridad en España 1782-1856. Documentos. En Salamanca: CEME 138.
30. Carmen RHCSM (1991) Luisa de Marillac, pionera de unos servicios públicos y humanizadores. Editorial CEME. Luisa de Marillac. Salamanca 211-236.
31. Flinton M (1978) Luisa de Marillac y los enfermos. Editorial CEME. Vicente de Paul y los enfermos. Salamanca, 53-71.
32. Paúl SV (1983) Conferencia 10. Conferencia del 16 de marzo de 1642. Sobre el servicio a los enfermos. Editorial CEME. Conferencias Espirituales a las Hijas de la Caridad. Salamanca 68-72.
33. Hernández MF (2015) Aportación los/as religiosos/as a la enfermería. Colegio Oficial de Enfermería de Cantabria. Un siglo cuidando a la sociedad Centenario del reconocimiento oficial de la enfermería en España. Santander 89-98.
34. Hernández MF. Las hijas de la caridad en la profesionalización de la enfermería. *Cult Cuid* 39-49.
35. Medrano PJ (2012) Las Hijas de la Caridad, la vida en la congregación: Reglas para la vida y el trabajo. IV Congr Virtual sobre Hist las Mujeres.
36. CM Una mirada a los orígenes (1997) An la Congregación la Misión y las Hijas la Caridad 105(2): 107-12.
37. Sánchez i CA (2007) Capítol 9. La formació d'una nova junta patriòtica a Lleida. La Guerra del Francès a Lleida La insurgència lleidatana contra Napoleó i les seves conseqüències 1808-1814. Lleida 131-148.
38. Villanueva J (1851) Carta CXV. Noticia de las parroquias, conventos, hospitales y cofradías de la ciudad de Lérida y sus inmediaciones. Imprenta de la Real Academia de la Historia. Viaje literario a las Iglesias de España Tomo XVII Viage á Lérida y Barcelona. Madrid 94-95.
39. Infante MAHC (2013) Llegada de las Hijas de la Caridad a Madrid: 3 de septiembre de 1800. Somos Vivencianos.
40. Tejero Vidal LL, Torres Penella C (2011) La profesionalización de la enfermería en Lleida a partir de las Hijas de la Caridad. *Cult Cuid* 3er Cuatrimestre Año XV 31.
41. Nicolas MCM (1988) Vicesitudes durante la guerra de la Independencia. Padre Felipe Sobies: 1808-1814. Editorial CEME, Notas para la Historia de las Hijas de la Caridad en España Tomo II: 1800-1850. Salamanca 57-73.
42. Infante MAHC (2015) Las Hijas de la Caridad en la sanidad militar y en la historia de la enfermería. An la Congregación la Misión y las Hijas la Caridad 123(4): 327-343.
43. Gestió de Serveis Sanitaris, Hospital de Santa Maria. La Història de la Infermeria a Lleida. Lleida; 2001.
44. Madoz P (1847) Diccionario geográfico-estadístico-histórico de España y sus posesiones de ultramar 10. 2nd edn. Madrid: Est. literario-tipografico de Madoz y P, Sagasti L: 1846-1850.
45. Hernández F, Moreno MA, Pinar ME. De las hijas de la caridad y su formación. *Híades Rev Hist la enfermería* 2: 169-178.
46. García BS (2013) Los cuidadores del Hospital Civil de Málaga 1890-1940. *Rev Cuid Digit Iltre Col Of Enferm Málaga* IV. 2nd edn, pp. 1-16.
47. Arias BM (2011) Palomas blancas entre el amor y el dolor. El cuidado, las Hijas de la Caridad y el Hospital Gómez Ulla. *Sanid Mil* 67: 141-176.
48. Medrano PJ (2010) Las Hijas de la Caridad, la expansión desde Francia y establecimiento en España. Llegada a Jaén. II Congr Virtual sobre Hist las Mujeres.
49. Barceló PJ (2014) Capítol III. La persistència del model local de fundacions hospitalàries a Catalunya. Universitat Rovira i Virgili, Poder local, govern i assistència pública: el cas de Tarragona [Tesis] Departament d'Antropologia, Filosofia i Treball Social Medical Anthropology Reserch Center. Tarragona 185-286.
50. Gallego CG (2009) El proceso de profesionalización sanitaria y la transición demográfica en Mallorca 1848-1932. 79-89.
51. Amezcua M (2015) Diez Tesis para una Historia de la Enfermería visible. *Index de Enfermería* 24(4): 199-201.
52. Tejero Vidal LL, Torres PC (2013) Agrupaciones de Enfermería para atender la salud comunitaria de Lleida en el siglo XIX. Colegio Oficial de Enfermería de Madrid, El asociacionismo en la enfermería y su influencia en el desarrollo de la profesión 150 años de historia del Colegio de Enfermeras de Madrid 1862-2012. Madrid 651-657.
53. Nelson S, Gordon S (2006) Moving beyond the virtue script in nursing: Creating a knowlegde-cased identity for nurses, Cornell University Press, The complexities of Care, New York, USA, pp. 13-29.
54. Azcárate GSCM (2015) Abrazar el futuro con esperanza. An la Congregación la Misión y las Hijas la Caridad 123(4): 311-326.
55. Hallam J (1998) From angels to handmaidens: changing constructions of nursing's public image in post-war Britain. *Nurs Inq* 5: 32-42.
56. Canals J (1984) Capítol VIII. De minyones, conques i monges. Universitat de Barcelona, La desfeminització de la infermeria: Tecnologia, ideologies i divisió sexual del treball en l'evolució d'una professió Tesis de licenciatura inédita. Tarragona 43-51.
57. De la Rosa ER, Zamora MG (2012) Cuidados invisibles: ¿son suficientemente reconocidos? *Index enfermería Digit* 21(4): 219-223.
58. Germán BC (2004) Género y Enfermería. *Index enfermería Digit* 46: 7-8.
59. González IME (2010) El título de enfermera en España a través del análisis documental: el caso de las Siervas de María, Ministras de los Enfermos. *Temperamentvm* 12.
60. Paúl SV (1983) Conferencia 114. Conferencia del 11 de noviembre de 1659. Servicio a los enfermos - Virtudes de sor Bárbara Angiboust. (Reglas para las hermanas de las parroquias, art. 6-11). Conferencias Espirituales a las Hijas de la Caridad. Salamanca 952-959.
61. Paúl SV (1983) Conferencia 115. Conferencia del 25 de noviembre de 1659. Servicio de los enfermos. - Avisar a la Señorita Le Gras cuando caiga enferma una hermana. - Cuidado con el dinero destinado a los pobres. - Resumen de las reglas comunes que se refieren más especi. Conferencias Espirituales a las Hijas de la Caridad. Salamanca 959-968.