



YOU MAKE A DIFFERENCE

**AJN** Off the Charts  
blog of the American Journal of Nursing

## Honoring Notable Black Nurses of History

Guest Author 2023-05-01T10:07:49-04:00



USS Red Rover hospital ship. National Library of Medicine.

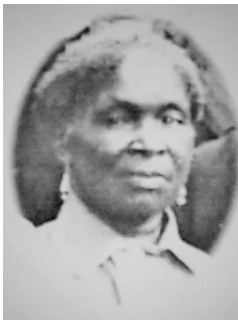
Nurses Week is scheduled to correspond with the birth of Florence Nightingale (1820-1910). We do this to honor her work in professionalizing and modernizing nursing. Her contribution to our profession is considerable, and it is right that we pay respect to her. But it is equally right that we put Nurse Nightingale in context so that Nurses Week can celebrate *all* nurses, and not just the often well-off white women on which most nursing history focuses. This four-part blog series during the month of May will honor a handful of women of color who accomplished remarkable things during Florence Nightingale's lifetime.

### **ANN BRADFORD STOKES**

Ann Bradford Stokes (1830-1903) was born into slavery on a Tennessee plantation. In 1863, she escaped and was taken aboard a Union hospital ship. She eventually became one of the first women to be listed as active duty personnel, and the one of the first Black women

to serve as a nurse in the navy. Along with five other Black women who had escaped slavery (Alice Kennedy, Sarah Kinno, Ellen Campbell, Dennis Downs, and Betsy Young Fowler) she cared for about 3,000 patients on the hospital ship with infected wounds, burns, and dangerous diseases such as typhoid and cholera. The conditions were terrible—summer heat and humidity, flies and mosquitoes, poor sanitation and hygiene. Stokes was also the first American woman to apply for and to receive a military pension for her services. There are no extant photos of Stokes.

## LUCY HIGGS NICHOLS



Lucy Higgs Nichols, Indianapolis, 1898, where she celebrated her government pension approval.  
New Albany Floyd – County Public Library

Lucy Higgs Nichols (1838-1915) was born into slavery, escaping with her daughter to the 23rd Regiment, Indiana Volunteers, when she was in her early 20s. She arrived exhausted and bleeding from scratches and cuts. Her “owner” arrived at the camp to reclaim her, but the soldiers protected her by forming a wall around her. She stayed with the men, working as a nurse on the front lines while they fought 28 major Civil War battles. She studied under the regiment surgeon, learning how to care for war wounds, foraging for herbs, and making medicine. When Lucy’s five-year-old daughter died after the surrender of Vicksburg, the men provided an elaborate funeral.

After the regiment was discharged from service in 1865, many of the men encouraged her to settle in New Albany, Indiana. She continued to care for them, and they continued to look out for her. In 1892, 55 surviving members of the regiment petitioned Congress for the pension which had been denied her. An act of Congress was passed in 1898, finally granting approval of her pension. After her death in 1915, she was buried with military honors.

## SUSIE KING TAYLOR

Susie King Taylor (1848-1912) was born into slavery and spent the early years of her life on a Georgia plantation. At age 14, she escaped to Union-occupied St. Simon’s Island. Despite harsh laws prohibiting formal education, Taylor not only attended school and obtained literacy, but started a school for Black children and soldiers, becoming the first Black teacher in Georgia to openly teach reading and writing to people who were Black.

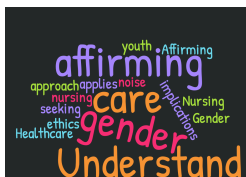


## These topics include:

- **Virtual Nursing as a Practice Model Innovation:** This Dialogue Forum will explore virtual acute care nursing. The recommended action is to create policy around virtual nursing that includes development of virtual nurse practice standards, collaboration on the development of technology to meet the nurse and patient needs, and data collection to understand the impact.
- **Gun Violence:** This Dialogue Forum will explore how gun violence is a cross-cutting social justice issue that affects our everyday lives, and disproportionately affects marginalized and minoritized communities contributing to health inequities. The recommended action is for ANA to promote nursing knowledge on the relationship between gun violence and public health, the risk and protective factor of violence, evidence-based strategies to prevent violence, and the role of nurses in promoting gun safety.
- **Addressing Nursing Documentation during a time of Crisis:** This Dialogue Forum will explore the need to reduce the documentation burden for nurses, particularly during a crisis. The recommended action focuses on the need to outline what nursing documentation should be essential during times of crisis with an all-hazards approach.

**There is no charge for this meeting  
Attendees will receive 1.5 continuing education credits**

[CLICK HERE TO REGISTER](#)



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## April Member Meeting - Gender Affirming Healthcare: Nursing Ethics Through the Noise

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Ian Wolfe was the presenter. Ian is the current vice chair of the ethics advisory board for the American Nurses Association (ANA) Center for Ethics and Human Rights.

He used a conceptual roadmap to navigate through the issue of gender affirming healthcare, focusing on what is known about this kind of healthcare and how the Nurses Code of Ethics can guide us through this issue. And, he reminded us that “good ethics start with good facts.”

The recording of this meeting is now on the MNORN website.

[Click here to access the recording](#)



## Why Ethics Matter: The Practical Aspects of the Code of Ethics for Nurses

**A free On-Demand Webinar: Register now to watch immediately - or anytime, anywhere!**

Nurses regularly face patient care situations that can challenge their personal and professional moral code. **These situations not only have implications for the safety and well-being of your patients and their families but also for your own personal well-being.** These ethically challenging situations can be particularly difficult during your early years as an RN. The Code of Ethics for Nurses can help you make appropriate and effective decisions that respect your patients' needs and rights while also maintaining your professional ethical standards.

**Attendance is FREE for both ANA members and non-members.**

[CLICK HERE TO REGISTER](#)

**Registration is required for all viewers, including individuals and groups.\***

**After registering, you may watch this webinar anytime, anywhere as many times as you like. To continue to provide free programs on important topics, we ask that all viewers register prior to viewing.**

This 90 minute, on-demand webinar will use a case-based analysis using an ethical decision-making framework that focuses on four critical areas: Moral awareness, moral motivation, moral judgement, and moral action. **Real-world cases will provide action-oriented approaches for ensuring you are:**

- Caring for all individuals and respecting human dignity
- Protecting patient health and safety by challenging questionable practices
- Promoting social justice and identifying racism in the profession
- Supporting an ethical environment and a culture of excellence
- Respecting your duty to self, versus the duty to others, when there is a considerable environmental risk

**After viewing this webinar, you will have a stronger connection to these approaches so you can easily use them in your day-to-day nursing practice.** Provisions in the Code of Ethics for Nurses and ANA Ethics position statements will be highlighted to illuminate how these concepts can be used in a practical way.

**Who should attend:** Nurses in the early years of their nursing careers working in all specialties and practice settings

**Additional information:** This program is informational only; no CNE is being awarded. After viewing the webinar, personalized documentation of viewing will be available for download.

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## The National Student Nurses Convention was held April 12 - 16 in Nashville, TN.

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### Here are the 12 resolutions our soon-to-be colleagues adopted.

1. Increased awareness and reporting of violence against nurses
2. Raising awareness for suicide assessment in post Covid-19 patients
3. Increasing awareness of the prevention of skin cancer through sun protective measures
4. Increasing awareness of supportive nurse leadership to manage moral distress, job satisfaction, and nurse retention
5. Mental health urgent care to improve patient flow and outcomes
6. Increased utilization of individual professional liability insurance in nursing practice
7. Increased awareness of the need for accessibility to quality lactating spaces
8. Implementing parent programs that ensure continuous education through adolescence following a Type 1 diabetic diagnosis
9. Installing metal detectors at hospital entrances
10. Increasing awareness and education about Adderall abuse among adolescents
11. Promoting awareness surrounding support services for expectant parents carrying their unintended pregnancy to term

12. Increasing awareness of mindfulness in nursing schools to decrease stress and post-graduation burnout



## Public Comment Period: The nurse's role in addressing global climate change and human health

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**Climate Change and Health was a dialogue forum topic last June at the ANA Membership Assembly.** Recommendations adopted by the voting representatives included:

1. ANA, C/SNAs and IMD include climate crisis and its consequential impact on human and population health as an essential component of their policy platform.
2. ANA revise and establish as an official position the 2008 House of Delegates Statement on Global Climate Change and Human Health.
3. ANA, C/SNAs and IMD promote nursing knowledge on the relationship between climate change and human and population health. Consider ideas such as:
  - a. Share information/educational resources/toolkits to educate nurses on this topic, including methods for decreasing medical waste.
  - b. Healthy Nurse, Healthy Nation™ challenges which focus on climate friendly healthy actions.
  - c. Integrate information on the impact of climate change on health in nursing school curricula.
4. ANA, C/SNAs, and IMD should establish partnerships at the national and state level with other organizations already active in climate change and health

Recommendation #2 resulted in the establishment of a task force to revise the 2008 House of Delegates position on Global Climate Change and Human Health. MNORN members Teddie Potter and Kathi Koehn have served on the task force.

We now have a draft of the proposed position statement, [The Nurse's Role in Addressing Global Climate Change and Human Health](#). The American Nurses Association seeks public comment on this draft before finalizing it.

Public comments are a vital way for allowing all to participate in the development and refinement of important policies of our profession.

**To make comments, click on the link:** [https://fs30.formsite.com/ANA\\_NursingWorld/zmzcedqtho/index.html](https://fs30.formsite.com/ANA_NursingWorld/zmzcedqtho/index.html) . You need not respond to each topic. Instead, respond to the topics that are



most relevant to you. Comments can be in agreement, suggested wording changes, or a differing point of view. All comments are welcomed.

**The deadline for comments is June 5, 2023, at 4 pm CT.** Thank you, in advance, for taking the time to help this document be relevant to nurses and the public.

# Environmental Justice in Practice

*Exploring the ways that public health professionals can play a role in environmental justice efforts*

May 11th, 2023  
Sanctuary Covenant Church  
2018 Aldrich Ave. N  
Minneapolis, MN 55411

6-6:30 PM Networking  
6:30-8 PM ANHE Fellow & Local  
Leader Panels

In partnership with the Minnesota Environmental Justice Table and Health Professionals for a Healthy Climate, AHNE will be co-hosting an event in Minneapolis for environmentally-conscious health professionals to talk about what the public health field can do to improve the health and well-being of their communities.

Hear from AHNE's Fellows as well as learn about the local environmental justice fight against the HERC directly from community leaders.

Nurses who attend this event will be eligible to receive one hour of Nursing Continuing Education (CE) credit for participation.

**Held in partnership with:**



Alliance of Nurses for Healthy Environments • [envirn.org](http://envirn.org) • [instagram: @we.are.anhe](https://www.instagram.com/we.are.anhe) • [twitter: @enviRN](https://www.twitter.com/enviRN)



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## Notice of Vacancies in State Boards, Councils and Committees

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May 1, 2023 — The Office of the Minnesota Secretary of State today released notice of vacancies for various state boards, councils and committees that are accepting applications. Minnesotans are encouraged to apply and serve in demonstration of public service. The newest vacancies are listed below, and the full list of **1091 vacancies / 649 positions** can be found on our website [Open Positions](#).

Applications may be submitted online and must be submitted within 21 days of the “Publish Date” listed on our [Open Positions page](#), to be assured of full consideration by the appointing authority. Appointing authorities may choose to review applications received by the Secretary of State after the 21 day application period.

**CURRENT VACANCIES INCLUDE:** Please visit our website for complete descriptions and all other vacancy listings previously posted.

### **Behavioral Health Planning Council**

Vacancies: 1 Seat -- Providers of Substance use disorder services to the LGBTQ and/or underserved communities

### **Board Of Medical Practice**

Vacancies: 1 Seat -- Public Member

### **Drug Formulary Committee**

Vacancies: 1 Seat -- Licensed Healthcare Professionals

### **Occupational Safety And Health Advisory Council**

Vacancies: 1 Seat -- Public Member

## HOW TO APPLY

Visit the [Open Positions page](#).

Scroll down to find the correct Agency/Board/Council.

Choose the correct seat type, and click button that says APPLY

The system will walk you through creating an application profile.

Page 2 of the application will now allow you to attach the following documents:

- Letter of Interest
- Resume or Biography

Applicants are encouraged to use the online application as the Appointing Authority will have access to your information as soon as it is submitted.

Applications submitted via downloadable application may experience some delay in reaching the Appointing Authority.

[Paper applications](#) may be submitted by email to: [Official.Documents@state.mn.us](mailto:Official.Documents@state.mn.us) or by mail or in person to:

**Office of the Minnesota Secretary of State**  
**180 State Office Building**  
**100 Rev. Dr. Martin Luther King, Jr. Blvd.**  
**St Paul, MN 55155-1299**

Increasingly, nurses are expected to contribute to the scientific literature. Yet for many nurses, the path to publication is not always clear. Join our panel of experts as they detail the steps to success, from getting started through clarifying your topic, conducting your literature review, revising your draft, and navigating the editorial process. Bring questions of your own for a live Q&A with our panel.

**June 13, 2023, 6:00 pm - 7:00 pm CT**

**OBJECTIVES:**

- Describe the need for the nursing voice in scholarly publications.
- Understand the basic premise of writing for publication.
- Discuss the process in identifying researchable questions for publication including basic literature search.
- Describe key points to successfully navigating the editorial process.

**AGENDA**

- **6:00 pm** Introduction: Why Do Nurses Need to Write for Publication?  
*Fidelindo Lim, DNP, CCRN, FAAN*
- **6:05 pm** Understanding the Writing Process  
*Joy Jacobson, MFA*
- **6:15 pm** Conducting the Literature Review  
*Bridget Jivanelli, MLIS, AHIP*
- **6:25 pm** Refining the Topic  
*Fidelindo Lim, DNP, CCRN, FAAN*
- **6:35 pm** Navigating the Submission & Editorial Process  
*Maureen "Shawn" Kennedy, MA, RN, FAAN*
- **6:45 pm** Audience Q&A
- **7:00 pm** Adjourn

This program is free of charge.

**[FOR MORE INFORMATION AND TO REGISTER](#)**



## The Nightingale Tribute

Every spring ANA collects the names of nurses who have passed in the past year to be honored in the Nightingale Tribute Book at the Membership Assembly. If you would like to honor a nurse who has died since June 2020, please notify MNORN at [kkoehn@mnorn.org](mailto:kkoehn@mnorn.org)

Please include the nurse's full name and date of death. MNORN must submit names to ANA by **May 22nd**.

### Nightingale Tribute

When a calming, quiet presence was all that was needed, He/She was there.

In the excitement and miracle of birth or in the mystery and loss of life, He/She was there.

When a silent glance could uplift a patient, family member or friend, He/She was there.

At those times when the unexplainable needed to be explained, He/She was there.

When the situation demanded a swift foot and sharp mind, He/She was there.

When a gentle touch, a firm push, or an encouraging word was needed, He/She was there.

In choosing the best one from a family's "Thank You" box of chocolates, He/She was there.

To witness humanity — its beauty, in good times and bad, without judgment, He/She was there.

To embrace the woes of the world, willingly, and offer hope, He/She was there.

And now, that it is time to be at the Greater One's Side, He/She is there!

Nursing is a calling, a way of life. Nursing is a service profession that cannot be lived in isolation. Nurses rely on each other for the synergistic effect of teamwork in our efforts of care giving. It is appropriate that we honor our colleagues not only during their career, but also at the end of life's journey.



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## Are You Going to the ICN Congress in Montreal?

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If you are thinking about it, there is still time to register.

There are several MNORN members who are already planning to go..... If you have already registered, let us know you are going. [kkoehn@mnorn.org](mailto:kkoehn@mnorn.org)

If you haven't registered yet, remember that as a member of MNORN, you are a member of ANA. And as a member of ANA, you are a member of the ICN. This means you qualify for the member registration rate!

The International Council of Nurses is a federation of more than 130 national nurses associations, representing 28 million nurses worldwide. It's an amazing experience to be at a conference made up of nurses from all over the world!



# MONTREAL

## ICN CONGRESS 1-5 JULY 2023

Nurses together: a force for global health

Organised by



International Council of Nurses

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Canadian  
Nurses  
Association

# REGISTER NOW!

[www.icncongress2023.org](http://www.icncongress2023.org)

#ICNCongress / #ICN2023 / @ICNurses



## Wanted: More Nurses in Office

More women are entering politics, but few are nurses.



Figure: Healing Politics, a nonprofit that encourages civic engagement among nurses, joined the May 12, 2022, national nurses' march in Washington, DC, for better and safer working conditions. Photo courtesy of Lisa Summers, Healing Politics.

At 4 million strong—more than 1% of the U.S. population—nurses are underrepresented in elective office. If their representation were proportional, five nurses would be serving on Capitol Hill today. With the 2021 retirement of Eddie Bernice Johnson, the first RN elected to Congress, three nurses are currently in Congress: Lauren Underwood (D-IL), Cori Bush (D-MO), and Jen Kiggans (R-VA). The math is similar in state legislatures, where nurses hold 68 of the nearly 7,400 seats. And their presence is not evenly distributed: 16 states, including California and Illinois, have no nurses in their legislatures.

At a time when health challenges loom large in policymaking circles, some nurses think more members of their profession should be playing a direct role. “Nurses have all the skills and experiences to be fantastic legislators,” says Darlene Curley, EdD, RN, FAAN, who served in the Maine House of Representatives from 2002 to 2007. “They can set priorities. They can collaborate. They are good listeners, and they can find solutions with other people.”

As part of her graduate work, Curley combed state legislature and nursing association websites in 2021 and 2022 to identify sitting representatives who had graduated from an accredited school of nursing and held an RN license at some point in their career. A document she compiled about nurses in state legislatures in those years, as well as a 2023 update, can be found at [www.nursingworld.org/practice-policy/advocacy/state](http://www.nursingworld.org/practice-policy/advocacy/state). Curley's numbers for the current legislative session indicate that a two-decade downward trend in representation of nurses continues. She found eight fewer nurses in state office than before the November 2022 elections, and two fewer states with any nurses in their legislatures. Citing American Nurses Association data that are no longer publicly accessible, Curley says 97 nurses were serving in state legislatures in 2012.

The lack of nurses in elected office seems out of line with recent trends and public sentiment. Women make up at least 85% of U.S. nurses and, since 2016, women have run for

office in unprecedented numbers. According to the Center for American Women and Politics, more than one in four federal elected officials are women this year, representing a nearly 10-fold increase in women's representation over 50 years. Women also accounted for almost one in three statewide officeholders. In addition, nurses consistently rank as the nation's most trusted professionals, and health-related issues—such as protections for patients who have preexisting conditions, the cost of prescription drugs, access to abortion care, and policies related to the COVID-19 pandemic—rank high among voter concerns.

### **BARRIERS TO POLITICAL INVOLVEMENT**

What's stopping nurses from throwing their hats into the political ring? In addition to traditional barriers, such as a lack of time or money, many nurses are not involved with political parties—and some don't even vote. “Legislators tell us, ‘There are lots of nurses, but you don't vote, and you're not involved in the process,’” says Kimberly Gordon, DNP, CRNA, who explored this question as part of her doctoral project.

Gordon defies that stereotype. She has been politically active for years, initially as a member of the North Carolina Nurses Association and later as federal political director of the North Carolina Association of Nurse Anesthetists. In those roles, she met regularly with her representatives about full practice authority, among other concerns. In 2015, she took her advocacy in a new direction: running the campaign of Sharon Pearce, DNP, CRNA, for the North Carolina House of Representatives. Pearce lost the race, but the two remained politically engaged. They went on to earn DNP degrees and used the opportunity to study what kinds of support could induce more nurses to make the leap into politics.

### **CIVIC ENGAGEMENT**

On May 12, 2022, thousands of nurses gathered in Washington, DC, to demand safer working conditions and oppose caps on nurses' pay. Gordon attended the march with Lisa Summers, DrPH, MSN, who was an adviser for her and Pearce's doctoral projects at the Yale School of Nursing.

Summers sees the anger generated by the COVID-19 pandemic as an opportunity to help nurses connect the dots between policy, politics, and practice. “The protesters were holding pizza boxes saying: No more pizza parties. Safe working conditions,” she recalls, but few had ideas about how to achieve that goal. “We would ask them, ‘Are you seeing your legislators? What is your ask? What types of policies would change that? Are there any nurses in your state legislature?’ Not a single nurse we interviewed could answer that question,” Summers says.

The year before, Summers and Gordon cofounded Healing Politics, a nonprofit and nonpartisan educational organization with a mission to build a culture of civic engagement among nurses and motivate and train them to run for office. The organization's name

reflects its founders' belief that, as empathetic listeners and consensus builders, nurses have a distinct contribution to make at this moment. "I'm not naive enough to think that we're going to end the partisan divide," Summers says, "but I think the skills nurses bring could shift the needle in that direction."

### **DECIDING TO RUN FOR OFFICE**

Minnesota state senator Erin Murphy, MA, RN, grew up in a politically engaged family and, as an eighth grader, volunteered for the successful campaign of a friend's father. Still, many years passed before she threw her own hat into the ring. Despite her experience leading the Minnesota Nurses Association, Murphy says, "I thought, like many women, I wasn't prepared enough."

The challenge of advocating for a dying parent's care finally pushed Murphy to take the leap into politics. She soon discovered that the nursing process had prepared her well for legislating. As a nurse, she also knew how to collaborate and treat people with respect. "All of the decisions that we make in public policy, they're not unilateral," she says. "You have to be able to work with other people."

The nurses Gordon interviewed for her doctoral project shared similar views. They reported that nursing had honed their communication skills, whether from talking to patients who could neither read nor write or to chief executives. They knew how to negotiate, find solutions, and synthesize large amounts of data, and nurses said their experiences caring for patients often shaped their political platforms.

### **PREPARING NURSES TO RUN**

At the same time, nurses' lack of previous political engagement sometimes made it difficult for them to secure their party's endorsement and left them feeling like outsiders when they did, Gordon found. These candidates don't just need motivation to run, they also need training.

In 2018, there were almost 600 U.S. candidate training programs, which teach people how to run a campaign, according to Gordon and Pearce's research. Yet, they found that nurses were unlikely to take part in schools dominated by lawyers and businesspeople. "The 'see-it-to-be-it' piece makes such a big difference," says Gordon. Summers proposed a campaign school where nurses could hear from other nurses who had already run. The three made plans to launch such a school in 2020. Due to pandemic constraints, however, they hosted a stripped-down, online version of their curriculum in 2021. Forty-seven nurses and midwives from 26 states enrolled.

Healing Politics will finally inaugurate the campaign school, as originally envisioned, this month at Duke University's Polis: Center for Politics. In addition to addressing nurses' biggest



fear—fundraising—the three-and-a-half-day training will cover grassroots organizing, communications strategies, and ethics, among other topics. The organizers hope participants will leave not just with new skills but with the confidence to enter the political arena.

“Nurses are concerned that they only know about health,” Summers says. She reminds them that the average lawyer running for office doesn't know about agricultural policy either. Meanwhile, nurses have the advantage of understanding the social determinants of health. “You know the importance of WIC [the Special Supplemental Nutrition Program for Women, Infants, and Children], you know transportation policy and how it affects access to health care, and you know about climate change and its impacts on human health,” she tells them.

Murphy agrees. “Our health care system needs its nurses to tell the truth about what patients are experiencing,” she says. “Nurses should run.”

Curley is focused on seeing a nurse in every state legislature. “The first step would be to have nurse candidates on the ballot in all 50 states in 2024,” she says. “If you have an internal voice, everyone else in the legislature has to listen to you.” As nurses become increasingly vocal about working conditions and public health, that's a real possibility.—

Nicole Fauteux

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## Health & Democracy Index

Did you know that when communities vote they influence policy decisions that have an effect on their health? [The Health & Democracy Index](#), developed by [Healthy Democracy](#), [Healthy People](#), recently published an analysis comparing 12 health indicators to how accessible voting is in each of the 50 states. The conclusion? **“States with more inclusive voting policies and greater levels of civic participation are healthier.”** Alarming, the inverse is true: Citizen of states with exclusionary voting laws and lower levels of civic participation are less healthy.

Another headline from the report: [Low Voter Participation Drives Health Disparities](#). Nurses and midwives understand the social determinants of health and how those drive health disparities. We understand how those factors can impact voting and a host of other areas of social engagement.

But, we are also skilled at addressing those issues! You can [go to the report and look at data from each state.](#)

Read the Healthy People Initiative recommendations and think about what you can do to increase civic participation in your community.



## Discover CE Courses That Just Click



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**QUICK**

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**ENGAGING**

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Treatment using Quit Partner



Accreditation information found at [CoursesThatClickMN.com](https://CoursesThatClickMN.com)