

SUPPORTING OLDER ADULTS: LEGISLATIVE RESPONSIBILITY OF NURSES

Carol Amann, PhD, RN-BC, CDP, FNGNA

It is that time of year where we are bombarded with political ads, at times confusing messages and political platforms that are difficult to discern. That said, it is also a great time in our nation to let our voice be heard!

Despite the sheer volume of practicing professional nurses, political involvement of nurses has been conspicuously absent to date. Multiple research findings point to the lack of political preparation and knowledge that would allow nurse's to confidently move forward in this practice domain as the primary barrier to answering the call for action. Comments heard by nurses in reference to health policy and political involvement is it is not an area of interest, professional responsibility, or they lack expertise to actively participate. The American Nurses Association (ANA) Code of Ethics for Nurses Provision nine calls for nurses individually, and through professional associations, inclusive of academia to be actively involved as advocates for health care policy and social reform (Fowler, 2010; American Nurses Association, 2015). Additionally, the landmark report from the Institute of Medicine (IOM) titled *The Future of Nursing: Leading Change, Advancing Healthcare* (2011) calls for nurses to be an integral voice in health care reform. This holds especially true for our older adult population.

Advocacy refers to being more than a champion for our patients in the direct clinical setting. Through active participation with legislative and health care issues that directly affect patient care, nurses can effectively advocate for their patients. Yet, few nurses look to political presence as a method of advocacy. To care for our most vulnerable population, it is paramount that we, collectively become involved for the betterment of healthcare.

STAGES OF NURSING'S POLITICAL INVOLVEMENT

Cohen, Mason, Kovner, Leavitt, Pulcini, and Sochalski (1996), developed the Stages of Nursing's Political Involvement to analyze the political development and level of participation in the political processes of nurses. This framework which remains relevant today ranges from understanding the importance of nurse involvement in health policy and politics to active political participation. Cohen et al (1996), identified four stages of political involvement inclusive of

- a. **Stage 1** - *Buy in*, representative of nursing's recognition of the importance of political involvement
- b. **Stage 2** - *Self-interest*, which occurs when nursing students and professional nurses develop and use its political expertise related to the professions self-interest
- c. **Stage 3** - *Political sophistication*, recognition of the importance of activism on behalf of the public
- d. **Stage 4** - *Leading the way*, in the provision of true political leadership in broader healthcare interests that speaks to the public's interests

According to Cohen, et al (1996), this framework is considered to be fluid, whereby nurses can enter various phases singularly or in multiple phases of involvement depending on the political issue encountered. This conceptual framework of political development is pertinent for nursing professionals to guide individually and collectively their political acumen and to set goals for ongoing involvement in the political/health policy role (Figure 1).

Figure 1: Progress of Nursing Through Four Stages of Political Development
(Cohen, et al, 1996, p. 260)

	Stage 1 (Buy In)	Stage 2 (Buy In)	Stage 3 (Buy In)	Stage 4 (Buy In)
Nature of Action	Reactive with a specific focus on political or health policy issues	Reactive to nursing issues and broader issues	Proactive on nursing and other health issues	Proactive on nursing and other health issues
Language	Learning the political language	Using nursing jargon in concert with political language	Using parlance and rhetoric common to health policy deliberations	Introducing terms that reorder the policy debate
Coalition Building	Political awareness, occasional participation in coalitions or grass roots efforts	Coalition forming among nursing organizations	Coalition forming among nursing groups, active and significant participation in broader health care groups	Initiating coalitions beyond nursing for broad health policy concerns
Nurses as Policy Shapers (not commonly achieved)	Isolated cases of nurses being appointed to policy positions, primarily because of individual accomplishments	Professional associations activate nurses into nursing related lobbying positions	Professional organizations get nurses appointed to health-related policy positions	Many nurses sought to fill nursing and health policy positions because of value of nursing expertise & knowledge

levels undoubtedly strengthened the voice and presence of nursing within the public and health policy arenas.

Today, our voice is more important than ever. States where nurses are involved with the issues have more success in passing legislation for professional nursing practice and patient related issues than those states whose nurses are not invested in the political process.

GETTING STARTED

One of the easiest ways to become involved and to let your voice be heard is to register to vote and then be sure to vote! Every bill introduced on a state or federal level is resultant from an idea, and who better to generate ideas than nurses? Nurses are a tremendous resource for accurate and trustworthy information to protect those entrusted to our care and the healthcare we provide. In becoming involved, identify and begin by studying an issue of importance to you, our older adults, or our profession. Once completed move forward with your involvement; be it through letter writing, face to face meetings, grass roots action, or providing professional testimony. One current example of federal legislation that pertains specifically to older adults relates to our veteran nurses from World War II: "Nearly 120,000 nurses honorably served in the United States Cadet Nurse Corps during World War II, yet they are the only uniformed service members from that war who have not been recognized as veterans" (AONL, 2020, para 1). The U.S. Cadet Nurse Corps Service Recognition Act (S. 997) would provide honorable discharges, medal privileges and veteran burial benefits to those nurses who bravely served in the U.S. Cadet Nurse Corps. This time sensitive bipartisan bill is important due to the advanced ages of this population. Although the prognosis for passage is slim, currently positions of organizations and individuals are being solicited for input at <https://www.govtrack.us/congress/bills/116/s997> perhaps your input may push this issue forward!

In closing our time for involvement is now. Times are challenging for not only frontline providers and organizations, but for our older adults who depend on us to fight for their rights and care related issues. ●

GETTING INVOLVED

Aging is one issue that we, as nurses, have in common with society and our profession. It is essential that we lend our expertise and voice not only for ourselves but also for the aging population we care for. One way we can do this is through personal, group and association political involvement. Politically active nurses are vital to insure the health of our nation. With minimal participation that historically has been the norm, nurses are left to implement legislative, and workplace polices brought to fruition by outside forces.

The nursing profession has a long history of shaping public and health policy. Visionary nursing leaders, such as Lillian Wald and Margaret Sanger, in the 1900's, championed their respective causes with astuteness and sophistication. These health policy pioneers understood the consequences of the social, political and economic factors on the health and well-being of the public. Their ability to influence policy on various

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