



Is There a Nurse in the House? Or the Senate!

THERE ARE 100 NURSES SERVING IN CONGRESS AND THE STATE LEGISLATURES.
COULD YOU BE NEXT?

BY GENEVIÈVE M. CLAVREUL, RN, PHD

ARE THERE NURSES IN THE HOUSE OF REPRESENTATIVES?

There sure are, and they're in the Senate, too. Many California RNs are familiar with Rep. Lois Capps (D-CA), one of the three nurses serving in Congress. However, how many of my readers are aware that 39 of our states have LVN/RNs (or retired LVN/RNs) serving in their state legislature? There are 10 states that have at least one nurse serving in elected office, 15

states have at least two nurses, five states have at least three, three states have at least four, two have at least five, and at least three states have six or more.

The states with the most nurses are: Montana, with six; Minnesota, with seven; and the state with the most is Washington, with eight nurses serving in the legislature. Unfortunately, California is counted among one of the 11 states that has no nurse serving in its State House.

These legislators told me that during their campaigns they found a profound lack of support from the nursing community.

NEARLY 100 NURSES

Should it interest nurses whether or not there are any nurses serving in elected office? The answer is simple: Nurses who achieve elected office are then in a position to advocate for our profession on an entirely different level. This subject intrigued me because I have in the past spoken with at least two of the three nurses who presently serve in the House of Representatives. So it was with these three nurses in mind that I began my research for this article.

I then stumbled upon a site that had been designed to support a nurse in her bid for elected office in the California legislature and I wondered, was Congress the only elective office where there were nurses?

I soon discovered that there were nearly 100 nurses in the various state houses. I had guessed that there would be some, but I must say I was unprepared for the number to be so large. Ninety-seven is not a number to be dismissed lightly, especially once you learn that many are entering their second or third term, or have served in more than one state, such as Rep. Peggy Wilson (R-AK), who first represented North Carolina and is now serving in the State House of Alaska.

After emailing all the legislators for whom I could find published emails, 37 legislators responded. (All four of the nurses in the Massachusetts legislature responded with either telephone calls or emails expressing their willingness to participate in my research.) I was excited to learn that most found their legislative role challenging and interesting enough that they sought out additional terms or, in some cases, higher office.

MOST STILL WORKING AS NURSES

I was surprised to learn how many of these nurses-turned-politicians not only maintained their licensure but continued to practice, many in their local hospitals. Their specialties ran the gamut from school nurse to geriatric, emergency nurse to psychiatric, and everything in between. Many of these nurse legislators held their RN and nurse practitioners license. Rep. Elizabeth Dennigan (D-RI) is not only a nurse, but a lawyer as well.

Maintaining a nursing career is possible for these politicians because most state houses have a part-time legislature, with only 120 days in which to conduct the state's business. Only a handful of the nurses I interviewed had been elected to a state house that had a full-time legislature (such as California).

Many, if not all, serve in some capacity or another on their state's health and human services committee, and at least one was their state's assembly whip or held some other equally distinguished leadership role in their state's legislature. Florida has two nurses in their state legislature, one who is not only a nurse but also a citrus grower, and the other won her seat after defeating a male incumbent from her same party. Now she's the Democratic leader pro tempore.

Many of these legislators said that they got their first exposure to public service through the local Parent Teachers Association (PTA), the local school board, the water board, from an appointment on a local commission, or by way of their volunteer work for their local church.

SUPPORT FROM THE NURSING COMMUNITY?

All but two shared with me that they had little to no support from their local nursing community, organizations, unions or associations when they made their first run for office. Of the two that did get help, it was more in line with troops on the ground, but little in the way of funds.

However, all acknowledged that with each consecutive run they seemed to get more support from the nursing community, but once again not so much in the form of campaign donations. Like we find so often in nursing, we expect our fellow nurses to "pay their dues," and this conclusion took even more concrete form after speaking with Rep. Peggy Wilson (R-AK). She told me that during both her first runs for each state house, she found a profound lack of support from the nursing community.

All the legislators who shared this observation also clarified that the nurses who did support them were usually friends and coworkers, but the nursing community at large seemed to keep them at a distance the first go-round.



Rep. Canavan (D-MA)



Rep. Cusack (D-FL)



Rep. Dennigan (D-RI)



Rep. Grimsley (R-FL)



Sen. Robson (D-WI)

Many of these nurses-turned-politicians not only maintained their licensure but continued to practice at local hospitals.

LESSONS LEARNED

The last two questions I asked all the legislators were: What advice would they share with a nurse who was considering a run for elective office? And what would they characterize as their best accomplishment or greatest challenge?

- Rep. Christine Canavan (D-MA) was understandably proud of having introduced a nurse-patient ratio for dialysis in 1993. She encouraged nurses running for office to proudly display their RN designation.
- Rep. Wilson felt that nurses are often qualified to hold elective office because we are taught to ask leading questions and are trained to develop “detective” skills, which serve a person well when in the state house.
- Rep. Becky Lockhart (R-UT) shared a similar opinion, but also urged nurses not to let their profession taint their actions.
- Sen. Sue Morano (D-OH) said she felt nurses were initially inclined to not participate in politics, but that they should become engaged and encouraged to seek elective office.

Several legislators were able to use their acumen to advance or, in some cases, protect the nursing profession in their state.

- Rep. Sandra Prater (D-AR) used her skills to defeat a house bill (HB 2300) that would have placed the advance practice nurse under the purview of the Arkansas State Medical Board.
- Rep. Kay Khan (D-MA) was able to sponsor legislation that would create a State of Massachusetts Board of Registration of Midwives and provide recognition for three categories of midwives: certified nurse midwife, certified midwife and certified professional midwife; in addition she is credited for forming a psychiatric caucus, which is focused on educating legislators.
- Sen. Judith Robson (D-WI) is her state’s majority leader and she has sponsored a bill to allow nurse practitioners to prescribe medication.
- Rep. Linda Upmeyer (R-IA) shared how not only were there no RNs when she came into office, but no MDs either. Her advice was to be patient and persistent and, when possible, find a mentor.

TRAILBLAZERS

The interviews left me with a profound sense of respect and awe that these women, many of whom were trailblazers, chose to take that leap from the bedside to the political ring. They spoke with enthusiasm about their work and experiences. They came from all walks of life, racial/ethnic groups, age groups and political parties.

So if you’re considering a run for an elective office, I would encourage you to seek out one or more of these individuals. If running for office is not your cup of tea, then perhaps you might want to consider supporting (either with a campaign donation or with sweat equity) a nurse who has announced his or her intention to seek elective office. In California I know of only Gabriella Holt, RN, who is running for a state assembly seat.

As nurses we are charged with and accept our role as the patient advocate. However we should also consider what role we can play in the campaigns of nurses seeking elective office. We should support them as they seek a role that will allow them to advocate for nursing on a whole new level. Remember, these legislators can provide a window into the soul of nursing for their fellow legislators and thus help educate them on the unique challenges and realities faced by nurses, whether at the bedside, in nursing management, in the clinic, doctor’s office, schools of nursing or wherever one might find a nurse practicing his or her profession. **WW**

AUTHOR’S NOTE: I would like to thank the many legislators who took the time to speak with me. I wish I had more room to share all their stories and words of wisdom. However, let me quickly, in no particular order, recognize the legislators by name who did participate: Sen. Pflug (R-WA), Rep. Wilson (R-AK), Rep. Dennigan (D-RI), Rep. Schulze (D-NH), Rep. Welch (D-IN), Rep. Callahan (D-MA), Sen. Franklin (D-WA), Sen. Black (R-TN), Sen. Miller (R-IN), Rep. Perry (D-ME), Sen. Vance (R-PA), Sen. Pariseau (R-MN), Rep. Keenan (D-VT), Sen. Morano (D-OH), Rep. Upmeyer (R-IA), Sen. Robson (D-WI), Rep. Cusack (D-FL), Rep. Grimsley (R-FL), Rep. Khan (D-MA), Rep. Prater (D-AR), Rep. Lockhart (R-UT), Rep. Canavan (D-MA), and former Rep. Colette Rosati (R-AZ).



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Rep. Lockhart (R-UT)



Sen. Morano (D-OH)



Rep. Prater (D-AR)



Rep. Khan (D-MA)



Rep. Wilson (R-AK)