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1989 CONVENTION

The Address of the President of the New York State Nurses Association

Juanita K. Hunter, EdD, RN

"... the professional nurse acts in the public interest locally and globally ..."

Two years can be at once an eternity and a fleeting moment in time depending upon the context and one's perspective on a given situation. As I complete my term of office as the 37th President of the New York State Nurses Association and present to you my last presidential address, I am filled with a sense of accomplishment and regret. And the words which I will share with you have been framed by the challenges, successes, failures and above all the hope that I have experienced and that I continue to hold for the profession of nursing and this professional Association. It has been my privilege to serve as the president of the leading and largest nurses Association in the state.

Challenges

During these past two years we have collectively shared time and talent to face recurring issues such as the nursing shortage, declining enrollments in nursing schools, the Labor Health Industry Task Force Report, the threat of the RCT proposal, the LPN intravenous therapy issue, the nurse practitioner legislation and the question of who shall be the member of ANA. Each of these issues individually and collectively has had the capability of setting new directions in health care, nursing philosophy, nursing practice, and nursing education. These challenges have been ongoing, awesome at times, and have on occasion evolved into specific opportunities for creative leadership and exceptional achievements by this Association.

As I have recently reflected on these past events and their outcomes as I prepared this address, I have asked myself more than once if it

was truly necessary to invest so much of our physical, emotional, organizational energies and resources in addressing these current issues. As I sought to answer my own question I referred to several important and historic nursing documents. The primary source I utilized was the ANA 1980 Nursing: A Social Policy Statement. Within this document, professional nursing is described as a social contract between society and the nursing profession. It further states: "... Society grants the profession authority over functions vital to itself and permits them considerable autonomy in the conduct of their own affairs. In return, the professions are expected to act responsibly, always mindful of the public trust ..."

This social contract reflects the interdependent nature of the relationships between the profession and the society it serves. Thus, the professional nurse acts in the public interest locally and globally and contributes to health care improvements and the nursing profession. This document mandates collective professional efforts in behalf of ourselves and our clients.

A second source I utilized to answer my question was the New York State Nurses Association bylaws. State nurses associations perform an essential function in articulating, strengthening, and maintaining this social contract. The state nurses associations, and in this instance NYSNA, further specifies this work in bylaws which state that the functions of this Association shall be among others, to: a) promote nursing and health services of a nature commensurate with human needs; b) propose and effect a system of delivery of nursing care; c) identify and promote standards of nursing education, practices and services; and d) act and speak for nurses and nursing in the state.

And my third source of reference was the book authored by Dr. Veronica Driscoll, *Legitimizing The Profession of Nursing: The District Mission of The New York State Nurses Association (1976)*, which records the history of NYSNA. In

this book, Dr. Driscoll summarized the leadership of NYSNA in fulfilling the social contract between nursing and society. This leadership was demonstrated through the care with which the first SNA (NYSNA), formed its organization and membership structure in 1901. Organization and membership in 1901 were perceived to be issues which would have implications for the future of other state and national organizations. These issues proved to be controversial in 1901 and continued to be so in 1987, 1988 and 1989. Further, this history documented that NYSNA led the movements to secure: (a) statutory recognition of the profession of nursing (1901-1903); (b) restriction of the title "nurse" (1913-1920); (c) control of the practice of nursing (1933-1938); and (d) delineation of the independent and distinct practice of nursing.

After a brief review of these three key sources, I concluded, indeed it was necessary to expend those energies over the past two years on those issues which clearly reflect our purpose, mission, and philosophy about the profession of nursing. By engaging in these activities, NYSNA has continued to demonstrate a unique ability to pinpoint and isolate the importance of and to influence those critical incidents. These events then have the potential for directing actions to alter or change the current situation in the direction toward positive gains to achieve professional status and a health care system commensurate with human needs.

Successes

At the beginning of my term of office, I pledged to work on three goals I outlined for my presidency. They included: (a) improve the image of the professional Association; (b) develop a liaison with key consumer groups; and (c) develop coalitions with other nurse organizations.

Throughout the past two years we have achieved many successes and have made great strides in our ability to communicate with our many publics beyond the language of nursing, particularly with consumers and to dialogue about common interests and concerns with other health care professionals. Of particular significance is our

increased positive dialogue with the LPN educators, the Medical Society of the State of New York.

Likewise, we have increased our collaboration with other nurse organizations and have demonstrated an increased willingness to share information, resources, and sometimes power to achieve common goals. This has been demonstrated through legislative initiatives, co-sponsorship of various programs, and support of public rallies. We have developed and supported strong consumer advisory councils at both state and district levels. However, we have only scratched the surface of this new way of doing business. Change is often painful and accompanied by strong needs to preserve the status quo. You, the membership, have continually offered suggestions for expansion of these efforts and I thank you for those suggestions.

I am proud that we have established a mentorship program, a student nurse award, and that our outreach to nurses outside of NYSNA has increased. We should all feel proud that NYSNA has maintained a high visibility throughout these past two years in addressing the nursing shortage. The Arden House Consortium Report was outstanding and it continues to serve as the prototype for outlining the steps to resolving our recruitment and retention problems. We have truly been leaders in charting the future course for health care and have assisted others to articulate these same concerns.

We have increased our visibility and interactions with key political and other leaders including Governor Mario Cuomo and his staff, and Chancellor Bruce Johnstone in the State University of New York. These doors have been opened to us because of our persistence and perseverance. We have expanded our interest in mentorship to include participation in the New York state mentorship Program. The potential for future and further opportunities to enhance the image of nursing and NYSNA through such efforts are limitless.

My goal to increase communication with membership was implemented in several ways. First, the President's Column in *Report* met the original goal of ongoing dialogue with the mem-

"We increase our power when we reach out, include others, extend ourselves beyond our organizational boundaries ..."

bership but also evolved to include opportunities to solicit member input regarding current important issues. Secondly, my travels to district nurse associations, although costly in time and finances proved to be a very worthwhile endeavor. These visits reaffirmed that there is a need for the elected leadership to participate in regional and local activities to discuss and to become apprised of the specific needs of our members. These visits also provided a mechanism for minimizing the gap that exists between written information made available to our membership, and incorporation of that information into district professional activities. The face to face dialogue between the president and the district membership led to improved collegiality and mutual problem solving. Additionally, these visits have highlighted the existence of geographic variations within New York which represent physical barriers to collective actions and thus separate us physically as well as psychologically. Continual attention should be given to developing alternative available strategies which not only recognize these barriers but will encourage greater participation of NYSNA members who reside in rural areas and upstate New York. NYSNA must be perceived as an organization which equally represents all 30,000 members regardless of place of residence, or race or ethnic background.

Further, I believe our relationship with the district associations should continually be refined, improved, and developed into a model that can be adapted for use with other professional nurse associations and for potential collaborative relationships with other organizations. The district are the link to the grassroots within our profession and can and should be considered and utilized as the vehicle for leadership development, professional socialization, increased membership and increased leadership within NYSNA.

Unfinished Business

The mingled sense of regret which I experience in leaving the office of president can more appropriately be articulated as "work in prog-

ress" or "unfinished business." As I have attempted to summarize and evaluate these two short years, for my professional life and for the life of this organization, it is appropriate to start this reflection from the perspective of the past, present, and future. The NYSNA of the past has been the leader, the trendsetter and has earned this reputation with dynamic, bold actions and outstanding leadership. The NYSNA of the present continues in this tradition but certain events within the past two years suggest the need for timely reassessment, reconsideration, and some modification of the image we hold of ourselves in relation to others. Also, we must realistically assess our ability to independently effect proactive change in the health care delivery system and to determine how we should approach planning for the future we hope to create for professional nursing and health care in the 21st century. We have ten short years to engage in these readiness activities. A vision of that tomorrow must be concretized in some form of a strategic plan. Further, that future plan must include other nurse colleagues and in particular, the specialty nurse organizations and nurses at other levels. We have yet to formally recognize this potential for increasing nurse power within New York state. We increase our actual and potential power when we reach out, include others, extend ourselves beyond our organizational boundaries, and recognize their contributions to the health care system.

Further, we must increase membership and interest in our professional activities through creative and meaningful outreach to all nurses in New York state. An annual report card to every nurse in New York state might be a start. Leadership development within our Association must become a priority if we wish to attract and excite nurses about working to achieve the goals of this professional Association and demonstrating our own identified philosophy of encouraging cordial relations among nurses. And so I leave you this unfinished business.

To Dr. Naegle, incoming president, I hope you will share my love of nursing, my energy and persistence in completing work started, my inability to readily accept no for an answer and my dream of a truly powerful professional nurses

association in New York state.

To the board of directors, I hope you will continue my commitment to the goals of a volunteer association and a true partnership between elected officials and staff within this organization. I also leave my hope that each succeeding board of directors will accept the challenge and responsibility to foster a community of nursing within this state to engage in critical self-appraisal, to openly, objectively, and tirelessly work toward resolution of common problems with other nurses and further, to boldly and creatively build on our glorious past yet design and implement new models for integration within nursing, the professional Association, for health care, and for nursing care of the future.

To the membership I leave my belief that you are the key participant in the thrust for a more powerful NYSNA. By your very presence here you have demonstrated your faith in your profession, a belief in ideals, and a willingness to participate in actualizing the notion of collective power. You have the authority to elect Association leaders to act in your behalf, to speak for nursing in this state and to guide and direct your input, involvement and decision-making. Select your leaders wisely. Exercise your power of

participation. You are the ambassadors of this Association, the role models for this profession and you are the essential components in this business we call nursing.

In summary, during the past two years NYSNA has faced many challenges which threatened our ability to have appropriate control over nursing practice, nursing education and the future evolution of nursing care. Our efforts to confront these situations have brought new opportunities to increase our effectiveness and to broaden our sphere of influence within New York state. Current trends indicate that we must continue to re-examine our relations with other nurses and increase our outreach efforts to effect increased nurse power. In doing this, we have the opportunity to share our professional dreams and ideals. I leave you with these words from Carl Schurz, and I quote: "Ideals are like stars. You will not succeed in touching them with your hands, but like the seafaring man on the desert waters, you choose them as your guides and following them, you reach your destiny." I thank you once again for the opportunity to serve as the 37th president of this great Association.

“The Air Force discovered a way to detect lupus anticoagulants with a spider’s venom — and I found a breakthrough in my career.” Lieutenant Josephine Siciliano

Air Force technologists found that the venom of a brown recluse spider can help detect lupus anticoagulants. It's a breakthrough! And it highlights a tremendous environment for a nursing professional, where the learning never stops and the working conditions are excellent. I discovered something else, too: a feeling of respect, a knowledge that my skills are valued."

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