This editorial was written in the early days of January at the start of the Spring semester. A confluence of activities, events, and happenstance led me to the topic—a graduate level health care policy course that I am currently teaching; my recent appointment to the American Association of Colleges of Nursing (AACN) Health Care Advisory Committee; my conversations with two Jonas Policy Scholars (Shannon Halloway and Sarah Oerther), and the release of Michael Wolff’s (2018) *Fire and Fury*—a tell-all book about the Trump presidency. It seems like policy is all around me.

It’s also all around you. I often wonder: Do others, who perhaps do not have policy so “front and center” in their consciousness, see the importance of policy? I often cringe when I hear students, practicing nurses, and other health care providers say, “I don’t do policy” or “I don’t like policy.” Where do these beliefs come from? Is it apathy, discomfort, or something else entirely? Perhaps it is uncertainty of how to be actively involved, or maybe it stems from the diminution of the importance and relevance of one’s expertise. Instead of focusing on “not doing policy,” I thought I would focus on how to do policy—how to lean-in toward policy. The purpose of the current editorial is to explore how two emerging nursing scholars became interested in policy. Through this dialogue, we offer recommendations and suggestions on how to get involved.

Mona Shattell (MS): Shannon Halloway and Sarah Oerther, thank you both for agreeing to share a little bit about your policy journeys. Let’s start by learning a little bit about your nursing background and your current work.

Shannon Halloway (SH): My clinical background is in the care of older adults in multiple settings, spanning from critical care to community settings. I attended Pacific Lutheran University where I received a BSN in 2010, and I graduated from Rush University with a PhD in Nursing Science in 2016. I’m currently a postdoctoral research fellow at Rush University College of Nursing. My research focuses on health behaviors, especially physical activity that can prevent cognitive dysfunction in at-risk older adults. I have a special interest in women, racial/ethnic minority populations, and older adults with cardiovascular disease.

Sarah Oerther (SO): For 10 years, I served as a floor nurse and a Senior Poison Specialist at Cincinnati Children’s Hospital. I have been trained in drug abuse prevention and occupational health. I earned a BSN from the University of Cincinnati in 2004 and two Master’s degrees (nursing and education) from Xavier University in 2008. Currently, I am a PhD student in the School of Nursing at Saint Louis University in St. Louis, Missouri. I’m working on my dissertation that is about health-promoting mothering practices of immigrant Muslim women. I plan to use research to support nursing practice for improved health promotion and disease prevention among vulnerable populations.

MS: Thanks for sharing a bit about your clinical and academic experiences. How did you become interested in policy?

SH: My interest in policy piqued during my doctoral program, when I was a Jonas Nurse Leader working with the Illinois Healthcare Action Coalition on issues related to diversity in the nursing workforce. I also experienced policy issues on a personal level while I was a caregiver for my grandmother in her later stages of life, specifically issues surrounding “aging in place” and end of life. Those complementary experiences made me realize, as a practicing RN, how crucial it was to be involved in policy. If I wanted the care of our patients and the health of Americans to improve, I had to understand policy and help us work toward creating better policies. Because of my interest and drive, I applied for and was accepted into the Jonas Policy Scholars Program, an initiative of the American Academy of Nursing (AAN), which has really given me an in-depth look and practical experience in how one nursing organization influences policy.

SO: How did I become interested in policy? In 2017, I was invited by Dean Teri Murray, PhD, APHN-BC, RN, FAAN, to attend the AACN Student Policy Summit in Washington, DC, where I lobbied for the entire profession of nursing with my dean and other deans from across the United States. I met with the legislative staff of Missouri Senators Roy Blunt (R) and Claire McCaskill (D) to advocate for the reauthorization...
of Title VIII, which provides scholarships for workforce development programs. We spent the evening networking during a Congressional reception on Capitol Hill. We also attended didactic sessions focused on the federal policy process and nursing’s role in professional advocacy. I learned from Suzanne Miyamoto, PhD, RN, FAAN, “nurses are non-partisan because everyone gets sick. We may have different solutions, but our voices matter” (personal communication, March 2017). This experience piqued my interest in health care policy, and Dean Murray encouraged me to apply to the AAN Jonas Policy Scholars Program. I was thrilled to discover I was selected summer 2017.

MS: You both mention the Jonas Policy Scholars Program and AAN. Please tell the readers a little bit about the Jonas Policy Scholars Program and how this program supports the work of the expert panels.

SH: The Jonas Policy Scholars Program is supported by the AAN, with funding by the Jonas Center for Nursing and Veterans Healthcare. The Program aims to recruit doctoral and post-doctoral nursing students for a 2-year fellowship experience with the Academy. The fellowship is beneficial to all—as Jonas Scholars, we gain valuable experience working with the Academy’s expert panels to inform and shape policy while being mentored by senior nurse researchers and practitioners. The Academy gains support for the busy expert panels and creates a pipeline of early-career nursing scholars who will contribute to shaping practice, education, and policy relevant to nursing. My work with the Women’s Health Expert Panel has given me a frontline perspective on how nursing organizations influence policy, including practical experience writing position statements, calls-to-action, op-eds, and blogs; and collaborating with influential nursing and non-nursing professional and lobbying organizations.

SO: The AAN currently has more than 20 Expert Panels, which are organized around population- or health-related foci. The expert panels are one of the major forces within the Academy. The Jonas Health Policy Scholars Program was spearheaded by Deborah Gross, DNSc, RN, FAAN, because she saw this program as a way to mentor junior scholars and a way to provide extra support to the Expert Panels. As a Jonas Policy Fellow, I am enjoying working with the Psychiatric/Mental Health/Substance Abuse Expert Panel. A recent highlight for me was when I had the opportunity to attend a meeting with Elinore McCance-Katz (first Assistant Secretary for Mental Health and Substance Use) with the co-chairs from my Expert Panel. This hands-on experience taught me how to approach someone in a governmental agency for a “specific ask.” Also, I am participating in background research and currently assisting in drafting a journal article with nurses on my Expert Panel. I’m learning how to “give voice” to patient issues, and I’m benefiting from practical coaching in how to speak up in a manner that demands attention to advance my priorities.

MS: Thank you. Each of you have found a way to feed your interest in health policy through a formal program, the Jonas Policy Scholars Program. What other recommendations do you have for nurses and other health care providers who are interested in getting more involved in policy who might not have the time, interest, and support needed for that level of commitment?

SH: Social media is a great way to start to become involved in policy, and it’s really very simple. I use Twitter® (@ShannonHalloway) to stay informed on key policy issues and also to engage in conversations with individuals. I find this to be crucial to follow current news since trending issues evolve rapidly. All government departments, lobbying groups, and professional organizations have Twitter handles, and it only takes a few minutes each day to stay on top of the latest news stories and updates. Recently, I had the privilege of being a Public Voices Fellow as a part of The OpEd Project. The Fellowship trains underrepresented experts (especially women) to take a stance as thought leaders in their fields, mostly through publishing op-eds. Through this program I get trained and am provided support to publish op-eds in mainstream media. After only 3 months into the program, I have already published several op-eds on key policy issues—the effects of loneliness on health, Alzheimer’s disease prevention, and dementia awareness in younger age groups.

SO: Get involved…in ANYTHING related to policy. Policy is one of the most practical ways of making change (local, state, or federal levels). First, if you don’t use social media you can sign up for e-mail alerts from nursing orga-
nizations such as the American Nurses Association to help you stay more informed. Second, there are marches and demonstrations being held on a regular basis. Last year the March for Science was in Washington, DC, but most states had local sister marches. Third, get to know members of Congress. Visit their websites to learn more about the legislation they sponsor. Let your members of Congress know they can contact you if they have questions about a certain topic related to health care. Policymakers often need an emotional story to make a connection between the “research” and the “real.” That’s why a narrative is necessary. And that’s why nurses have so much potential to influence policy, because we have TONS of great, and sometimes painful, stories from our work with patients. As nurses, we need to tell our stories. Persuasively. Passionately. Convincingly. Finally, there may be a local or state advisory board around health care topics that you can join.

It’s important to remember that we are among the most trusted professionals, and we need to leverage that trust to advance health policy, which is grounded in evidence. Don’t forget students can get involved as well. Nursing students can start to get more involved in policy by asking their deans to allow them to attend the AACN Student Policy Summit in Washington, DC. This conference is open to baccalaureate and graduate nursing students enrolled at AACN member institutions (access http://www.aacnnursing.org/Policy-Advocacy/Get-Involved/Student-Policy-Summit).

MS: You both have given some concrete ways to engage in policy, from structured programs, such as the Jonas Policy Scholars Program and the OpEd Project, to the simple and free “Twitter” way. And, those of you who know me or have followed my work, I appreciate social media and Twitter for all that it can do for policy (Shattell & Darmoc, 2017).

CONCLUSION

We have heard from Shannon and Sarah a little bit about their journeys toward policy. We hope that more of you lean in toward policy. As Sarah said, nurses have much to share. Let’s not deny policymakers our valuable knowledge.

REFERENCES

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