

National Black Nurses Association, Inc. NBNA NEWS

Welcome to the 2013 NBNA Exhibitors Showcase
and
Second Annual NBNA Career and Education Fair



NBNA President Deidre Walton Cutting Ribbon at
Exhibit Hall Opening

President's Message.....	1
Strengthening Workforce Diversity	2
Cleaning Up C. difficile: Prevention Tips	3
Health Resources and Services	4
Help-Seeking Patterns of Young Adults	5
Nursing Professionals and Child Maltreatment	6
Only One of its Kind in the Midwest	7
Genetics and Genomics Era Among Black Americans.....	8
NBNA Officers & Board nomination guidelines.....	10
NBNA Election results.....	11
Member Feedback & Conference Highlights & Members On The Move.....	12
Chapter Websites.....	36
Chapter Presidents	38
SUPPLEMENTS	
Flu Information	

Editorial Correction:

An article in the Special Edition of NBNA News, page 74, "Lest We Forget: The Bachelor of Science in Nursing Conundrum", included the following statement: "The Future of Nursing Proposal advocates that at a minimum: The Registered Professional Nurse be required to obtain a baccalaureate degree in nursing (BSN) within 10 years after initial licensure." The Editor recognizes the error in this statement regarding the achievement of a BSN within 10 years. Readers are provided with the specific recommendation as presented below.

Recommendation 4: Increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020.

Academic nurse leaders across all schools of nursing should work together to increase the proportion of nurses with a baccalaureate degree from 50 to 80 percent by 2020. These leaders should partner with education accrediting bodies, private and public funders, and employers to ensure funding, monitor progress, and increase the diversity of students to create a workforce prepared to meet the demands of diverse populations across the lifespan.

Details regarding all of the Institute of Medicine recommendations may be found at <http://thefutureofnursing.org/recommendations>.

NBNA NEWS

The NBNA News is printed quarterly; please contact the National Office for publication dates.

NBNA NEWS

8630 Fenton Street, Suite 330
Silver Spring, MD 20910
www.NBNA.org

Ronnie Ursin, DNP, MBA, RN, NEA-BC
Editor-in-Chief

NBNA NATIONAL OFFICE STAFF

Millicent Gorham, DN(Hon), MBA, FAAN(Hon)
Executive Director and Associate Editor
Estella A. Lazenby, CMP
Membership Services Manager
Frederick George Thomas
Administrative Assistant
Gessie Belzaira, MA
Administrative Assistant
Dianne Mance
Conference Services Coordinator

BOARD OF DIRECTORS:

Deidre Walton, JD, MSN, RN
President, Phoenix, AZ
Eric J. Williams, DNP, RN, CNE
1st Vice President, Los Angeles, CA
Lola Denise Jefferson, BSN, RN, CVRN
2nd Vice President, Houston, TX
Beulah Nash-Teachey, PhD, RN
Treasurer, Evans, GA
Martha Dawson, DNP, RN, FACHE
Secretary, Birmingham, AL
Debra A. Toney, PhD, RN, FAAN
Immediate Past President, Las Vegas, NV
Ronnie Ursin, DNP, MBA, RN, NEA-BC
Parliamentarian, Frederick, MD
Irene Daniels-Lewis, DNSc, RN, APN, FAAN
Historian, Redwood City, CA
Darnell Caldwell, SN
Student Representative, New Orleans, LA
Trilby A. Barnes-Green, RNC
New Orleans, LA
Keneshia Bryant, PhD, RN, FNP-BC
Little Rock, AR
Monica Ennis, EdD, MSHA, RN
Phoenix, AZ
Audwin Fletcher, PhD, APRN, FNP-BC, FAAN
Jackson, MS
C. Alicia Georges, EdD, RN, FAAN
Ex-Officio, Bronx, NY
Melba Lee Hosey, BS, LVN
Houston, TX
Deborah Jones, MS, RN-C
Texas City, TX
Sandra McKinney, MS, RN
San Jose, CA
Laurie C. Reid, MS, RN
Atlanta, GA
Col. Sandra Webb-Booker, PhD, RN
Chicago, IL





Dr. Deidre Walton, President
National Black Nurses Association

President's Message

NBNA continued to seek excellence as we gathered in New Orleans for NBNA's 42nd Annual Institute and Conference. Our theme, "Advancing the Profession of Nursing Through Education, Practice, Research and Leadership," was timely for the issues that are facing not only the nursing profession, but health care providers globally.

Dr. Mary Wakefield, Administrator, Health Resources and Services Administration, U.S. Department of Health and Human Services addressed the NBNA Presidents' Leadership Institute on July 31. on the implementation of the Affordable Care Act. The Institute is comprised of the 92 chapter presidents, 92 chapter vice presidents, NBNA Board Members and NBNA Past Presidents.

Highlighted during the conference were the excellent presentations during the plenary sessions, institutes, and workshops addressing nursing education, practice, research and leadership. The Chapter Presidents and Vice- Presidents received valuable information on dental health, domestic violence, succession planning and an outstanding presentation on parliamentary procedures from one of the authors of *Robert's Rules of Order* edition. Dr. Daisy Allen Harmon, President, Chicago Chapter NBNA, JoAnn Lomax, President, Milwaukee BNA and Birthale Archie, President, Kalamazoo-Muskegon BNA, presented a workshop entitled, "NBNA Midwest Chapters Embark on a Comprehensive Violence Intervention Program," during the Presidents' Leadership Institute.

The conference attendees were energized by the thought provoking keynote address during the Opening Ceremony from Dr. Karen Ragland-Cole, Vice-President of Pediatric Radiology at the Long Beach Memorial Hospital in Long Beach, California and by the Closing Session Speaker, Patricia Ross, MSN, RN, CLNC, (Colonel Retired US Army), Legal Nurse Consultant, and Sole Proprietor, Frontline Medical Legal Consulting Services as she addressed, "Crushing the Tide of Deadly Health Care Mistakes - A Nursing Imperative."

As the 2014 expansion of coverage mandated by the Affordable Care Act (ACA) becomes more imminent, one question that is resonating among providers and critical stakeholders is how health care providers, policy makers and payers will cope with expected increase in the consumers' demand for services.

One of the critical roles that nurses play in the final phase in implementation of the ACA, is consumer empowerment through education. One key area is enrollment assistance – helping consumers understand the process and their options. As an organization we must continue to be that "voice" for our communities. Until the gap is permanently closed in health disparities and health care disparities, we must stand up, speak and participate to ensure that there is equal access to quality patient-centered care for all.

Let us continue to embrace the need for diversity. We must continue our legacy of commitment and our path to excellence. Thank you for the honor to serve as the 11th President of the National Black Nurses Association – Together we are soaring like eagles!

Strengthening Workforce Diversity: An Innovative, Educationally Focused Initiative

Kenya Beard, EdD, GNP-BC, NP-C, ACNP-BC, CNE

THE DEMAND FOR NURSE educators who are prepared to graduate a more diverse nursing workforce will increase significantly as society becomes more ethnically and racially diverse. The consequences of minority underrepresentation in healthcare have already contributed to racial and ethnic health disparities. The quality of care that minority and low income groups receive is sometimes suboptimal and of poor quality (Agency for Healthcare Research & Quality, 2012). It's believed that a diverse workforce could help to remedy the poor quality of healthcare that too many minorities receive and promote the culturally competent care that's needed. More specifically, diversity could help facilitate better communication, and enhance care for ethnically and racially diverse patients (Institute of Medicine, 2004). However, minority representation in nursing is not where it should be. While African Americans, Hispanics and American Indians represent less than 10% of the total nursing workforce (U.S. Department of Health and Human Services, 2010), they constitute close to 30% of the U.S. population. More must be done to promote diversity in nursing as well as other health disciplines in order to meet the healthcare needs of this society.

Strengthening diversity in nursing has posed substantial challenges. Strategies to overcome barriers to recruitment, retention and graduation have typically focused on the academic deficiencies of minority students. However, few initiatives have celebrated the differences that diversity brings and focused on creating inclusive academic environments that promote inter-professional education models that support culturally responsive teaching. The Institute of Medicine (2010), in its Message from the 2010 forum on the Future of Nursing: Education, reported that schools should be committed to diversity and place greater emphasis on recruitment and retention strategies. The report emphasizes that institutions should focus more on how to best prepare and develop faculty with the knowledge, skills and abilities to use innovative technologies and best practices when teaching today's diverse learner. In addition, educational models should address issues related to diversity and social justice.

Society will benefit from educational initiatives that foster diversity and prepare nurse educators to meet the challenges of diversity. Hunter College has been recognized for the diversity of its students and faculty. The College received high marks for its diverse student population in the 2010 edition of the Princeton Review's "Best 371 Colleges" guidebook and ranked 4th for racial diversity in the Universities-Master's category (Ratings, Rankings & Awards, 2013). The Hunter-Bellevue School of Nursing appreciates how a diverse workforce can help assuage health disparities. To that end, the school of nursing has created a Center for Multicultural Education and Health Disparities to address the inequities that hinder workforce diversity. The



Center seeks to improve the health of the nation by preparing a diverse, culturally-sensitive healthcare workforce. The Center's mission is to disseminate educational research and best practices in pedagogy that promote an environment of inclusion and academic excellence for all students, while strengthening the capacity of academic institutions to recruit, retain and graduate students from diverse backgrounds.

Multicultural education is an educational initiative that seeks to strengthen multicultural awareness and the academic success of all students (Sleeter & Grant, 2009). The role of educators in facilitating the academic success of all students and their ability to strengthen diversity cannot be overstated. Thus, the cornerstone of the Center is the interdisciplinary faculty development models that integrate educational equity with teaching and learning. The Center will provide faculty with the resources and skills to adopt evidence-based pedagogical practices that lead to the graduation of a diverse student body that's prepared to meet the healthcare needs of this diverse nation. For more information on the Center, go to <http://www.hunter.cuny.edu/nursing>.

REFERENCES

- Agency for Healthcare Research & Quality (2012). National healthcare disparities report 2011. Retrieved from <http://www.ahrq.gov/research/findings/nhqrdr/nhdr11/nhdr11.pdf>
- Institute of Medicine. (2004). In the nations compelling interest; Ensuring diversity in the healthcare workforce. Retrieved from <http://www.iom.edu/CMS/3740/4888/18287.aspx>
- Institute of Medicine. (2010). A summary of the February 2010 forum on the future of nursing: Education. Retrieved from http://www.nap.edu/catalog.php?record_id=12894
- Ratings, Rankings and Awards. (2013). Retrieved from <http://www.hunter.cuny.edu/communications/media-relations/facts>
- Sleeter, C. E. & Grant, C. A. (2009). Making choices for multicultural education: Five approaches to race, class, and gender. (6th ed.). New Jersey: John Wiley & Sons.
- U.S. Department of Health and Human Services. (2010). The registered nurse population. Findings from the 2008 national sample survey of registered nurses. Retrieved from <http://bhpr.hrsa.gov/healthworkforce/rnsurveys/rnsurveyfinal.pdf>

Dr. Beard is a Macy Faculty Scholar and an Assistant Professor of Nursing at Hunter College in New York. Her research focuses on multicultural education and health disparities. She serves on the board of the Queens Chapter Black Nurses Association, and engages in activities that promote the recruitment, retention and licensing of ethnically and racially diverse nursing students. She believes that nurse educators should be prepared to create learning environments that meet the educational needs of all students.

Cleaning Up *C. difficile*: Prevention Tips for Nursing Professionals

Kim LaFreniere, PhD



Clostridium *difficile* infections, or *C. difficile* for short, have become endemic in U.S. hospitals and continue to pose significant and complex clinical and environmental challenges for healthcare personnel across the spectrum of care. The incidence of infection is increasing among established and new high-risk populations while becoming harder to kill and increasingly resistant to traditional treatments.

According to the U.S. Centers for Disease Control and Prevention (CDC), more than 14,000 Americans die of *C. difficile* each year, but recent investigative articles from *USA TODAY* show that federal reports severely underestimate the scope of the problem. Evidence from hospital billing data collected by the Agency for Healthcare Research and Quality links *C. difficile* to as many as 30,000 deaths a year— about twice the federal estimates.

While the statistics appear grim, *C. difficile* infections are preventable and there are a number of measures healthcare professionals on the front lines can take to fight *C. difficile* in their facilities. According to the most recent SHEA/IDSA Clinical Practice Guidelines for *Clostridium difficile*, the most important infection control measures to limit the spread of *C. difficile* include antimicrobial stewardship, hand hygiene, isolation and contact precautions and environmental cleaning and disinfection. It is important for nurses, infection preventionists and other healthcare professionals to be aware of these *C. difficile* infection prevention protocols. This fact is further evidenced by a recent survey of 1,087 infection preventionists conducted by the Association for Professionals in Infection Control and Epidemiology (APIC) which found that most respondents (70%) feel *C. difficile* prevention activities are increasing in their facilities. Ongoing monitoring and education is needed to successfully implement *C. difficile* prevention protocols.

Environmental surfaces play a critical role in the transmission of *C. difficile* since spores are able to survive outside the body for months and are easily spread via the hands of anyone who may have touched a contaminated surface or item. The CDC recommends the use of bleach or other U.S. Environmental Protection Agency (EPA) approved disinfectants to address environmental contamination in areas associated with increased rates of *C. difficile* and new research published in the journal of *Infection Control and Hospital Epidemiology* underscores

the critical importance of choosing the right cleaning agent for disinfection of *C. difficile* and using that product *correctly*. It is important to choose EPA-registered products with claims to kill *C. difficile* spores, such as Clorox Healthcare™ Bleach Germicidal Wipes which kill *C. difficile* spores in three minutes – the fastest contact time available, and are specifically designed with frontline healthcare professionals in mind. Clorox Healthcare™ Terminal Wipe Solutions are packaged in sturdy buckets with refill systems that allow facilities to save time and reduce costs associated with mixing and preparing dilutions, laundering soiled cloths and unwrapping individually wrapped packets.

Clorox Healthcare not only offers the most robust portfolio of EPA-registered, ready-to-use bleach products, but also is committed to providing educational resources that help equip nurses, environmental services leaders and housekeeping staff with the right tools to meet the diverse needs of their jobs.

Clorox Healthcare is a long-standing partner of APIC and recently partnered with them to release the “Guide to Preventing *Clostridium difficile* Infections.” This expanded edition is the latest in a series of educational resources designed to promote patient safety initiatives and healthcare-associated infection (HAI) reductions. It includes new sections on skilled nursing facilities and pediatrics, as well as information on the pathogenesis and changing epidemiology of *C. difficile* and environmental control measures.

More information on best practices and HAI prevention, the new 2013 APIC *Clostridium difficile* Implementation Guide and a variety of other educational resources is available to download for free at, www.CloroxHealthcare.com/cdiff.

Dr. Kim LaFreniere is an associate research fellow for the Clorox Professional Products Company and has more than 5 years of product development and clinical experience and expertise in infection prevention and control, environmental hygiene and skin antisepsis. For more information about healthcare-associated infection (HAI) prevention, including educational resources and product information, visit www.CloroxHealthcare.com.

Health Resources and Services Administration U.S. Department of Health and Human Services

Deborah Parham Hopson, PhD, RN, FAAN, Senior Advisor for HIV/AIDS Policy



WHETHER OR NOT African American and other uninsured patients will be able to benefit from the new health care reform law depends in no small part on what each of us does to get the word out in our communities. We have heard the statistics about health disparities; we often have higher rates of disease and are less likely to receive preventive care services. In addition, more than 20% of African-Americans are uninsured. So getting health insurance is especially important for the African-American community as it will allow many to gain access to previously unattainable health care services. About 90% of the currently uninsured will get some health insurance premium assistance in the new Marketplaces!

Nurses are essential to providing quality primary care to underserved communities. And we know that African American nurses are esteemed leaders and change agents with a high level of respect within our families and communities. Therefore, we need to capitalize on that authority by galvanizing our family members and patients to enroll in the ACA. The success of the Affordable Care Act and its expansion of access to health care would not be possible without you. The Marketplace will help millions of Americans find health insurance that fits their budget and meets their needs. With a single Marketplace application, individuals can see if anyone in their family qualifies for Medicaid, the Children's Health Insurance Program, or savings they can use right away to lower their health insurance premiums.

So what can you do to help? There are three things you can do right now.

1. Visit Marketplace.cms.gov, where you'll find brochures to share with colleagues and distribute at churches, mosques, schools and other community venues; posters, application checklists, fact sheets, and more. Marketplace.cms.gov is the website for health care providers – YOU!
2. Encourage your family, patients, students, and other community members to visit HealthCare.gov to set up an account and explore enrollment options. Assistance is available in more than 150 languages 24/7 toll-free at 1-800-318-2596. It is incredibly important get the word out to and enroll people age 18-35 i.e. your students, your siblings, your children.
3. Write a message for health center, hospital and other community newsletters, church, synagogue or mosque bulletins and local and school newspapers. We need you to help spread the word about the Health Insurance Marketplace – the new way for Americans to get coverage.

Remember: open enrollment begins October 1, 2013. Coverage begins January 1, 2014.

Resources to help with the Implementation of the Affordable Care Act from the Health Resources and Services Administration

Health Insurance Marketplace Basics

- The Health Insurance Marketplace is the new way for Americans to get healthcare coverage according to their budget and needs. Open enrollment begins October 1, 2013 online at Healthcare.gov, by phone at 1-800-318-2596, or in person at local health centers and other facilities.
- With a single Marketplace application, individuals can see if anyone in their family qualifies for Medicaid, the Children's Health Insurance Program (CHIP), or savings to lower their health insurance premiums and out-of-pocket costs.
- For state-specific information and resources and to sign up for email and text alerts, visit the State by State and How the Health Care Law Benefits You webpages on Healthcare.gov.

Ways NBNA Members Can Help

- Direct individuals to HealthCare.gov (Spanish: CuidadoDeSalud.gov) for state-specific information to sign up for email and text alerts.
- Direct consumers to the call center at 1-800-318-2596 (TTY: 1-855-889-4325) available 24/7 in 150 languages to ask questions, prepare for open enrollment, and starting October 1, sign up for private health insurance.
- Take advantage of Free Continuing Education Units via the Medscape module, "What the Healthcare Marketplace Means for Practices and Patients" (<http://www.medscape.org/viewarticle/782776>).
- Use materials available now for download at Marketplace.cms.gov. Order printed copies (while supplies last) of consumer materials to share with your community at <http://productordering.cms.hhs.gov>. Available materials include:
- Consumer Brochures, including "The Value of Health Insurance," and "About the Marketplace"

Marketplace Application Checklist

Fact Sheets
Drop-in articles / Op-Eds
Postcards/Posters
Infographics
PSAs
Talking Points
Questions & Answers
And more!

Help-Seeking Patterns of Young Adults Focus of New Study Identifying Key Points for Engaging Young People into Mental Health Treatment

University of Houston Graduate College of Social Work

Sarah Narendorf



HOUSTON, SEPTEMBER 4, 2013 – According to Sarah Narendorf, an assistant professor at the University of Houston Graduate College of Social Work, young adults with untreated mental disorders often find themselves seeking urgent care through expensive, psychiatric emergency room services.

By exploring the multiple factors that contribute to episodes of crisis care for young adults, Narendorf plans to identify how to engage young adults in treatment prior to the point of crisis.

She explores this topic in a new research study funded by a \$19,250 grant from the Hogg Foundation for Mental Health titled, “Young Adults Accessing Psychiatric Emergency Services: Exploring Help-Seeking Patterns and Preferences for Treatment.”

“While the incidence of mental disorders peaks during young adulthood, the rate of mental health service use declines by almost 50 percent from late adolescence to young adulthood,” Narendorf said. “Young adults who access psychiatric crisis services are often those that have been unable or unwilling to engage in less intensive outpatient services. This study is a first step in understanding the dynamics that lead young adults with mental health disorders to a crisis point.”

The aim of the study is to identify key points of intervention for young people with mental health problems prior to crisis care. Narendorf will collect data through qualitative interviews with young adults who have accessed crisis services in Harris County’s Neuropsychiatric Center (NPC). The study will examine qualitative narratives with forty young adults, ages 18-25, to explore the contribution of:

- individual factors (gender, race, perceived perceptions and self-stigmatizing attitudes creating embarrassment and fear of identifying with a mental illness)

- access factors (transportation, health insurance, location of mental health support groups or facilities)
- social network factors (friends, family, community helpers)
- structure of the mental health service system
- service use patterns ending in psychiatric emergency service use

Narendorf will explore the young adults’ experiences and preferences for mental health treatments, including the type of treatment, such as medication versus therapy, location, and involvement in treatment decisions to develop consumer-oriented models for promoting treatment engagement.

The research project by Narendorf was one of 10 selected from a pool of 38 applicants from 17 universities across Texas. The Hogg Foundation for Mental Health awarded the two-year grants, totaling \$192,130 to tenure-track assistant professors exploring different aspects of mental health in Texas.

“Young people are a particularly underserved population and Dr. Narendorf’s study on the treatment seeking behavior of young adults will help provide information about how mental health care can be improved for these individuals,” said Octavio N. Martinez, Jr., executive director of the Hogg Foundation for Mental Health.

The goals of the Hogg Foundation for Mental Health grants are to increase the pool of junior faculty conducting quality mental health research and to encourage the disbursement of research findings throughout the mental health community through presentations at state and national conferences and meetings.

**Permission granted for republication of this press release Melissa Carroll (mjcarrol@central.uh.edu)*

Health Resources... continued from page 4

- Host community meetings/Nursing Rounds in webinar, teleconference or in-person format to talk about the ACA. To help you with the presentation, access PowerPoint slides, talking points and other educational materials at <http://marketplace.cms.gov/training/get-training.html>. We can offer an Administration official to offer specifics and engage your members.
- Post the NEW Marketplace widgets (<http://marketplace.cms.gov/getofficialresources/widgets-and-badges/mp-badges-english.html>) in your email signature and on your school’s website.

- Connect through social media
Join the discussion at [Facebook.com/HealthCare.gov](https://www.facebook.com/HealthCare.gov)
(Spanish: [Facebook.com/CuidadoDeSalud.gov](https://www.facebook.com/CuidadoDeSalud.gov))
Follow [Healthcare.gov](https://twitter.com/HealthCareGov) on Twitter, @HealthCareGov
(Spanish: @CuidadoDeSalud)
Partnership with the Chicago Chapter National Black Nurses Association

NBNA, Nursing Professionals and Child Maltreatment (Formerly Child Abuse and Neglect) A Call to Action

Ellen Durant, MSHSA, BS, RN, 1st Vice President,
Chicago Chapter National Black Nurses Association



TODAY, BOTH IN the United States and around the world, child maltreatment (formerly referred to as “child abuse” and “child neglect”) is both a public safety and public health problem, as well as a human rights travesty; respectively, being an actual crime, a public health prevention priority (Better Start: Child Maltreatment Prevention as a Public Health Priority) and personal and societal tragedies

As defined by the Centers for Disease Control and Prevention (CDC), *child maltreatment* is any act or series of acts of commission or omission by a parent or other caregiver (e.g., clergy, coach, teacher) that results in harm, potential for harm, or threat of harm to a child. Under the CDC’s definitions, *child abuse* is considered an act of *commission* and *child neglect* is considered an act of *omission* (CDC, 2010c). Additionally, each state provides its own definitions of child abuse and neglect based on the minimum standards set by federal law. Most states identify four major types of maltreatment: *child neglect* and three forms of *child abuse* (consisting of *physical abuse*, *sexual abuse*, and *psychological/emotional abuse*). Any of the forms of child maltreatment may occur separately or in combination (Child Welfare Information Gateway, 2008). [NOTE: All 50 states, the District of Columbia, and all U.S. territories have mandatory child abuse and neglect reporting laws. These laws require certain professionals, to include nurses, and institutions to report suspected maltreatment to a child protective services (CPS) agency (DHHS, 2010a).]

With hope, this article is presented pursuant to the *NBNA Community Collaboration Model of Preventive Health Services*, which postulates that “nurses—in collaboration with individuals, community and organization partners—can influence the health actions of individuals and communities.” It has the dual purpose of educating/informing NBNA members and supporters on the escalating problem of child maltreatment (formerly referred to as child abuse and child neglect) and spurring NBNA members, as nursing professionals, and partners to collaborative action with the goal of helping local communities to better address the problem of child maltreatment

As professional nurses and NBNA members, the matter of child maltreatment can present challenging moral, ethical and legal issues. For example, in the course of providing care for child patients who are suspected victims of maltreatment, what should the professional nurse do: morally; ethically? And what are they required to do legally?

Of course, precedent to any action, as nursing professionals, we must be familiar with matters relating to child maltreatment and its impact upon the nursing profession. Particularly, in terms of the controlling legal definition of *child maltreatment*,

standard symptoms associated with child maltreatment, and reporting and other required actions to be taken by nursing professionals in cases where child maltreatment is suspected.

Professional nurses, and all NBNA members, need be competently aware of criteria that defines and/or identifies *child maltreatment* in nursing specialties relating to child health care and the delivery of child health care in designated facilities and institutions which are dedicated to child services, generally, and/or child health care services, specifically. For example, frontline nursing professionals who would/are regularly impacted by the problem of child maltreatment are school nurses, emergency room nurses and nurses who serve in dedicated pediatric facilities and institutions (such as children’s hospitals and clinics).

Still, and notwithstanding the need for frontline nursing professionals to be very well informed and trained on the matter of child maltreatment and in the delivery of nursing care/services to child maltreatment victims, (because of its potential impact upon the nursing professional, regardless of specialty), it behooves all professional nurses to be knowledgeable/conversant on the matter of *child maltreatment*, its practical component/aspect/categories and legal definitions and mandates, particularly, as related to professional nursing.

Statistics bear out the salient sad facts of child maltreatment. In 2009, an estimated 3.3 million referrals to child protective services (CPS) alleged maltreatment of approximately 6 million children. Of those, 62% were screened and maltreatment was found to be evident in 24% of those children (USDHHS, 2010).

Neglect was and is the most common form of child maltreatment. Although any of the categories of child maltreatment may be found separately, they often occur in combination. According to the Child Maltreatment 2009 report (USDHHS, 2010), CPS investigations determined the following that:

More than 75% suffered neglect.

More than 15% suffered physical abuse.

Fewer than 10% suffered sexual abuse.

Fewer than 10% suffered psychological abuse.

For 2009, more than half (58.3%) of all reports of alleged child maltreatment were made by professionals. The US Department of Health and Human Services, Children’s Bureau, notes that a “professional” means the person had contact with the alleged child maltreatment victim as part of the report source’s job. Of these professionals, the most common report sources were education personnel (16.5%), legal and law enforcement personnel (16.4%), and social services staff (11.4%) and medical personnel (8.2%). The remaining reports were made by nonprofessionals, including friends, neighbors, sports

Partnership with the Chicago Chapter National Black Nurses Association

Only One of Its Kind in the Midwest

ON MONDAY, AUGUST 20, 2013, Dr. Daisy Harmon-Allen, President of Chicago Chapter Black Nurses Association decided to have her annual mammogram completed at Roseland Community Hospital, as a prelude to the upcoming October Breast Health Awareness month to highlight the plight of the alarming high-rate of breast cancer deaths in African-American women, and evident by her willingness to come to Roseland Community Hospital for her annual appointment.

Dr. Harmon-Allen is a “willing worker” in many endeavors, including her faith base community organizations. When she was informed about the Philips Micro-Dose Mammography System and the breast cancer death rate that is up to 55 deaths per 1,000 in the Greater Roseland Communities of Chicago, Dr. Allen said without hesitation, “I will be there to get my annual mammogram, so that women will know that they should have their annual Mammography screening done because it the best gift that a women can give themselves. The new Philips Micro-Dose Mammography system is very quick, and does not pinch nor is it painful,” Most importantly, the results are sent to the primary physician and patient within three days. Roseland Community Hospital is on the far south side of Chicago, received the grant award of the Philips Micro-Dose Mammography System in August of 2012.

The Philips System is the only one of its kind in the Midwest, and the sixth system of its kind in the country and is the latest in digital technology. Patients are put at ease with the heated pad that is contoured to the shape of the body and the system delivers 40-50% less radiation to the patient than other technology now on the market. Additionally, physicians appreciate the fact that the resolution quality is 2-3 times that of similar systems. Partnership with CCNBNA will help close the gap and breast cancer disparities among African American women and allow them to receive detection and treatments.



coaches and relatives (USDHHS, 2010).

And though medical personnel are credited with generating less than 10% of the total number of maltreatment reports, it illustrates the fact that nursing professionals need current information and ongoing training on child maltreatment issues, recognizing indicators and symptoms of child maltreatment and knowing the circumstances where suspected cases of maltreatment must be reported. For these reasons, nursing professionals, generally, and NBNA members, particularly, need to be able to:

Define child maltreatment and its two primary components, *child abuse* and *child neglect*, according to the Centers for Disease Control and Prevention and according to local and/or state authorities.

Recognize physical and behavioral symptoms and indicators of child maltreatment.

Identify situations in which suspected cases of maltreatment must be reported.

Discuss the legal consequences for failing to report suspected cases of maltreatment.

Discuss procedures for placing a child into protective custody.

These child maltreatment competencies are critical for today's nursing professionals, generally, and are requisite for NBNA members and a successful NBNA collaborative effort to help address the problem of child maltreatment.

A brief perspective on advancing the genetics and genomics era among Black Americans

Ida J. Spruill, PhD, RN, LISW, FAAN

Yolanda Powell-Young, PhD, RN, BC, CPN, CNS



Ida J. Spruill

The movement of human genetics and genomics from theory to practice has been relatively swift. Sixty years ago we were introduced to James Watson and Francis Crick's double helix architecture for deoxyribonucleic acid (DNA). Ten years ago researchers announced the completion of the Human Genome Project. Today, developments generated from genetics-grounded research are being used at every level of medical intervention. For example, the recent media coverage of Angelina Jolie's decision to undergo preventative mastectomy presented how the results from genetic testing may be used to ascribe cancer risk and inform personalized treatment options. At St. Jude Children's Research Hospital chemotherapy treatments for selected pediatric cancers are being guided by the results from DNA sequencing and individual genetic profiles. Beyond neonatal screening, research data advanced the national collegiate athletic association's current requirement for sickle cell screening as a primary preventive for athlete's care. Interventions based on individual genetic architecture include rapid detection and treatment of heat illness, hydration guidelines, and environment based work-rest cycles.

Despite the well documented potential of genetics-based research to advancing personalized medicine, participation rates in genetics and genomics research and testing among persons of Black ancestry remain less-than-optimal. In response to the critical implications of low diversity on research outcome measures, the National Institutes of Health (NIH), the nation's medical research agency enacted a policy covering the topic of minority inclusion in federally funded research. The NIH mandates the involvement of members from ancestral and ethnic minority groups in all clinical research studies unless the nature of the research makes it inappropriate to do so (National Institutes of Health (US) Office of Extramural Research, 2001). Researchers estimate that the average sample size proportion for Black Americans in genetic studies is approximately 2.5% (Murphy & Thompson, 2009).

Immortalized events like the Tuskegee Syphilis Study and more recently, the Henrietta Lacks chronicle, continue to preserve the long-standing mistrust that Black Americans hold regarding the medical and scientific communities. Moreover, the conduct of genetics and genomics research and testing raise new ethical and legal challenges that future study participants must consider. Commonly referenced are discrimination, and the potential for misuse of genetic

information that could negatively impact employment and insurability practices (Armstrong et al., 2012; Council for Responsible Genetics, 2001). Another topic of deliberation is the use of pediatric specimens in perpetuity (Budimir et al., 2011; Hens et al., 2013; Kaufman et al., 2008). The American Academy of Pediatrics, the Institute of Medicine, and the President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, among others, have questioned the rationalization and benefits of genetic testing among children and adolescents (Ross et al., 2013). Another newly documented topic of concern for Black Americans within the current human biorepository design is the context and process of informed consent versus the opt-out procedure (Kerath et al., 2013).

Many believe that the misuse of genetic information from research and testing is highly conceivable and would, in all likelihood, disproportionately impact the most vulnerable populations. There is little doubt that the scientific enterprise of genetics and genomics will continue to revolutionize healthcare, and as such, will continue to thrive. Individuals of Black ancestry are an integral part of the American landscape. In order to fully understand the impact of genetic variation on disease risk between and within populations it is essential that Blacks in America be equitably represented in genetics and genomics research.

Utilization of genetics and genomics testing is also crucial to the future health of Black Americans. For example, predictive genetic tests can help establish risk for certain disease. Carrier testing can provide probabilities of genetic disease for each pregnancy. Information suggests that regardless of formal education level, Black Americans are less knowledgeable about genetic testing (Singer, Antonucci, & Van Hoewyk, 2004).

Even so, Black Americans usually verbalize positive beliefs about genetic; but have prohibitive concerns that may well be alleviated through genetics and genomics education and awareness (Long, Thomas, Grubs, Gettig, & Krishnamurti, 2011).

Creating awareness for genetics and genomics research and testing, and tracking membership perceptions regarding various aspects of medical genetics have been a course of action for the NBNA spanning several years (Spruill, Coleman, & Collins-McNeil, 2009). Data published in a recent issue of the *Journal of Nursing Scholarship* (Powell-Young & Spruill, 2013) suggest that many nurses affiliated with the

NBNA recognize the potential for misuse of genetic information is a reality for Black America. However, these nurses acknowledge the importance and need for participation by Black Americans in genetics research and testing. More importantly, the membership overwhelmingly voice support for a NBNA generated genetics and genomics awareness initiative.

NBNA is a leading advocate for healthcare issues impacting medically under-served communities, and in a singular and strategic position to provide education regarding the scientific value of participation in genetics and genomics research and testing. Over the years, and most recently at the 2013 annual conference, members have communicated a willingness to participate in a national curriculum to increase genetic literacy. A proposed agenda would include identifying members who desire additional evidence-based content for incorporating genetics and genomics into nursing curriculum, nursing practice and nursing research. Recognizing and acknowledging past barriers to our well-being helps us move authentically toward a healthier future.

REFERENCES

- Armstrong, K., Putt, M., Halbert, C. H., Grande, D., Schwartz, J. S., Liao, K., Shea, J. (2012). The influence of health care policies and health care system distrust on willingness to undergo genetic testing. *Medical Care*, doi:10.1097/MLR.0b013e31824d748b
- Budimir, D., Polasek, O., Marusic, A., Kolcic, I., Zemunik, T., Boraska, V., Rudan, I. (2011). Ethical aspects of human biobanks: A systematic review. *Croatian Medical Journal*, 52(3), 262-279.
- Council for Responsible Genetics. (2001). CRG: Update of 1997 position paper on genetic discrimination.
- Hens, K., Van El, C. E., Borry, P., Cambon-Thomsen, A., Cornel, M. C., Forzano, F., PPPC of the European Society of Human Genetics. (2013). Developing a policy for paediatric biobanks: Principles for good practice. *European Journal of Human Genetics*, 21(1), 2-7. doi:10.1038/ejhg.2012.99; 10.1038/ejhg.2012.99
- Kaufman, D., Geller, G., Leroy, L., Murphy, J., Scott, J., & Hudson, K. (2008). Ethical implications of including children in a large biobank for genetic-epidemiologic research: A qualitative study of public opinion. *American Journal of Medical Genetics. Part C, Seminars in Medical Genetics*, 148C(1), 31-39. doi:10.1002/ajmg.c.30159; 10.1002/ajmg.c.30159
- Kerath, S. M., Klein, G., Kern, M., Shapira, I., Witthuhn, J., Norohna, N., Taioli, E. (2013). Beliefs and attitudes towards participating in genetic research - a population based cross-sectional study. *BMC Public Health*, 13, 114-2458. doi:10.1186/1471-2458-13-114
- Long, K. A., Thomas, S. B., Grubs, R. E., Gettig, E. A., & Krishnamurti, L. (2011). Attitudes and beliefs of African-Americans toward genetics, genetic testing, and sickle cell disease education and awareness. *Journal of Genetic Counseling*, 20(6), 572-592. doi:10.1007/s10897-011-9388-3
- Murphy, E., & Thompson, A. (2009). An exploration of attitudes among Black Americans towards psychiatric genetic research. *Psychiatry: Interpersonal & Biological Processes*, 72(2), 177-194.
- National Institutes of Health (US) Office of Extramural Research. (2001). NIH policy and guidelines on the inclusion of women and minorities as subjects in clinical research – amended, October, 2001. Retrieved July/2013, 2013, from http://grants.nih.gov/grants/funding/women_min/guidelines_amended_10_2001.htm
- Powell-Young, Y. M., & Spruill, I. J. (2013). Views of black nurses toward genetic research and testing. *Journal of Nursing Scholarship*, 45(2), 151-159. doi:10.1111/jnu.12015; 10.1111/jnu.12015
- Ross, L. F., Saal, H. M., David, K. L., Anderson, R. R., American Academy of Pediatrics, & American College of Medical Genetics and Genomics. (2013). Technical report: Ethical and policy issues in genetic testing and screening of children. *Genetics in Medicine*, 15(3), 234-245. doi:10.1038/gim.2012.176
- Singer, E., Antonucci, T., & Van Hoewyk, J. (2004). Racial and ethnic variations in knowledge and attitudes about genetic testing. *Genetic Testing*, 8(1), 31-43. doi:10.1089/109065704323016012
- Spruill, I., Coleman, B., & Collins-McNeil, J. (2009). Knowledge, beliefs and practices of African-American nurses regarding genetics/genomics. *Journal of National Black Nurses' Association*, 20(2), 20-24.

NBNA Newsletter

NBNA NEWSLETTER CRITERIA FOR SUBMITTING ARTICLES:

- 500-750 Word Article
- Title of Article, Author's Name and Credentials (Alison Brown, MSN, RN)
- Three-line biographical sketch & author's headshot photograph (high res)
- Resources where appropriate
- Send all articles, member news, chapter highlights, pictures, and other information to nbnanews@nbna.org.

National Black Nurses Association 2014 Election

IN THE EVEN NUMBERED years the 1st Vice President, 2nd Vice President, Treasurer, Three (3) Board Members at-large, the Student Representative and three (3) members of the Nominating Committee are to be elected.

All candidates must demonstrate evidence of having implemented the philosophy, goals, and objectives of the National Black Nurses Association, Inc. on a local or national level. Except for the Student Representative, all board candidates must have attended three (3) NBNA Conventions in the last five (5) years, one of which was the previous year. The Nominating Committee nominees must have attended two (2) NBNA Conventions in the last four (4) years.

FIRST VICE PRESIDENT

- Hold a valid license to practice or is retired
- Graduate of an accredited school of nursing
- Has a minimum of five (5) years experience in nursing
- Has full command of the English language
- Has previous organizational leadership experience
- Is a member of a chapter or is a direct member
- Has served on a chapter committee
- Has served as a chapter board member
- Has demonstrated evidence of participation in community activities (church, school, civic)
- Has the flexibility in work enabling him/her to attend Board and executive committee meetings
- Has other nursing organization experience
- Has served in previous leadership positions
- Has previous NBNA Board experience
- Has served in the capacity of president of local chapter or other nursing organization (preferred not required)
- Has management/administrative experience
- Has previously served as an officer of NBNA
- Has worked on several NBNA committees
- Has demonstrated ability to speak to global issues concerning the health care industry, health regulation and policy; health delivery, health care professionals and consumers

SECOND VICE PRESIDENT

- Hold a valid license to practice or is retired
- Graduate of an accredited school of nursing
- Has a minimum of five (5) years experience in nursing
- Has full command of the English language
- Has previous organizational leadership experience
- Is a member of a chapter or is a direct member
- Has served on a chapter committee
- Has served as a chapter board member
- Has demonstrated evidence of participation in community activities (church, school, civic)
- Has the flexibility in work enabling him/her to attend Board and executive committee meetings
- Has other nursing organization experience
- Has served in previous leadership positions
- Has previous NBNA Board experience
- Has served in the capacity of president of local chapter or other nursing organization (preferred not required)
- Has management/administrative experience
- Has worked on several NBNA committees

- Has demonstrated ability to speak to global issues concerning the health care industry, health regulation and policy; health delivery, health care professionals and consumers

TREASURER

- Has demonstrated knowledge, skill, and expertise in fiscal management
- Has served as an officer or board member of a local, regional, or national organization
- Graduate of an accredited school of nursing
- Has a valid license to practice or is retired
- Has a minimum of three years experience in nursing
- Has full command of the English language
- Is a chapter member or direct member
- Has demonstrated evidence of participation in community activities (school, civic, or church)
- Has other nursing organizational experience
- Has flexibility in work enabling him/her to attend Board and Executive committee meetings.
- Has served in previous leadership positions
- Has attended at least three (3) NBNA Conferences in the last five (5) years; one of which was the previous year
- Has served on a chapter committee
- Has served as a chapter committee member

BOARD MEMBER –AT- LARGE

- Graduate of an accredited school of nursing
- Hold a valid license to practice or is retired
- Has a minimum of one year in nursing (clinical, teaching, or administrative)
- Has full command of the English language
- Is a chapter member or direct member
- Has served on a chapter committee
- Has served as a chapter committee member
- Has demonstrated evidence of participation in community activities (school, civic, or church)

STUDENT REPRESENTATIVE

- Is an unlicensed student enrolled in an accredited RN or LPN/LVN program
- Able to remain in office one school year before graduating
- Has served on boards of directors locally or within student organizations
- Is a member of a chapter
- Has full command of the English language
- Has demonstrated evidence of participation in community activities
- Has a minimum "C" average

NOMINATING COMMITTEE MEMBER

- Graduate of an accredited school of nursing
- Has a valid license to practice or is retired
- Has a minimum of one year experience in nursing
- Has served as an officer, board member or member of a nominating committee on a local, state, or national level
- Has full command of the English language
- Is a chapter member or director member
- Has demonstrated evidence in participation in community activities (school, civic, or church)

- Has attended at least two (2) NBNA Conventions in the last (4) years
- Has served as a chapter officer/board member
- Has served on a Nominating Committee of a chapter
- Has served on a Nominating Committee of another organization

If you are interested in being of service to NBNA, request an application from the NBNA office by calling (301) 589-3200 or send an email to info@nbna.org. Complete the application and send it back to info@nbna.org AND consultantpresider.1@juno.com.

Certified 2013 NBNA Election Results

Eligible Voters	2,633	Final Paper Ballots	619
Total Returns	1,211	Final Web Ballots	592
		Percent Returned	45.99%

PRESIDENT	VOTES	PERCENT	
Deidre Walton	638	52.9%	Winner
Eric J. Williams	564	46.8%	
Write-in	3	0.2% *	
Azella Collins	1		
Rosie Calvin	1		

SECRETARY	VOTES	PERCENT	
Martha A. Dawson	638	53.7%	Winner
Ida J. Spruill	549	46.2%	
Write-in	1	0.1% *	

BOARD OF DIRECTORS	VOTES	PERCENT	
Monica Ennis	675	56.8%	Winner
Laurie C. Reid	673	56.6%	Winner
Sandra Webb-Booker	631	53.1%	Winner
Angela M. Allen	501	42.1%	
Maria A. Dudley	389	32.7%	
Write-in	191	16.1%*	
Beulah Hadrick	184		
Brenda Ross	1		
Deidre Woods Walton	3		
Miriam Moses	1		
Saundra Austin-Benn	2		

STUDENT REPRESENTATIVE	VOTES	PERCENT	
Darnell Caldwell	672	57.3%	Winner
Tennille Hicks	499	42.5%	
Write-in	2	0.2% *	
Deidre Woods Walton	1		

NOMINATIONS COMMITTEE	VOTES	PERCENT	
Vanessa Auguillard	679	57.7%	Winner
Joyce R. Spalding	600	51.0%	Winner
Barbara A. Crosby	552	46.9%	
Bernadine (Midge) Julun-Jacobs	406	34.5%	
Write-in	8	0.7% *	
Bernadine Midge Julun-Jacobs	1		
Beulah Hadrick	2		
Deidre Woods Walton	1		
Eunice Gwamesier	1		
Mary Kelly	1		
Toni Oats	1		
Vanessa Armstrong	1		

*A member may have checked write-in and left text field empty.

Note to the President

President Walton,

"Thanks so much. I am overly humbled and will be celebrating for all my NBNA and nurse colleagues as I accept this award. The work we do is hard, yet rewarding. I am blessed to have people like you and our NBNA colleagues who inspire me to continue to keep growing. It is because of you all that I am a staunch advocate for patients, families and nurses everywhere I go. Thank you for being that inspiration to me and so many others. All the best."

-Kenya Haney, BSN, RN

Conference Comments:

"I've had a paradigm shift and am now working towards achieving a graduate degree."

-Katrina Clark

"I went (to the conference) with expectations, had fun, brought back information, and was not disappointed."

-Margaret Worthy

"I thought the conference was great, I had a good feeling at all times. The financial report was great and the discussion was very informative and timely. I enjoyed the institutes but the times were a concern to get to as many as possible. I'm retired but the conference was great, great, great."

-Alma Hobbs Spears

Greater Houston BNA member
NBNA member since 1978

As a first time attendee and President of a newly established Chapter, I was truly impressed and left the conference motivated to dig deeper within myself. I have a greater desire to embrace my community to impart more education on wellness and share the importance of the Affordable Care Act to people of color and other ethnic groups. Looking forward to the next conference and so proud to be a part of the National Black Nurses Association!!

-Ellen Matthews, President

Bayou Region Black Nurses Association

This was my first time attending the conference and it was a great experience! I would like to suggest creating promotions and advertisements that cater to nurses under the age of 40. Creating promotions such as offering a discount off of the conference registration or a gift card to members who bring another nurse that's under 40 to the conference is one way to increase the attendance of younger nurses. Creating plenary sessions that are specific to nurses under 40 is another way to attract younger nurses.

-Danielle Houston, Secretary

Black Nurses Association of Baltimore

Continuing Education sessions should be broken up to 2-hour sessions each. It will allow attendees to move among institutes and still receive CE credits.

-Janelle Dominique,

Member, New England Black Nurses Association

Terasa Banks, RN, First Coast Black Nurses Association (Jacksonville, FL)



I was so excited to attend my first conference in New Orleans! I joined my local NBNA chapter as a student in 2007, but this was the first time I'd been able to attend. The mentoring and professional development I continue to receive is invaluable to me, and I look forward to paying that honor and privilege forward to a new group of nurses. I'm happy to say I recently completed my BSN and celebrated at the conference. I was completely overwhelmed by my experience! First of all, to be in the presence of so many accomplished nurses was inspiring. I attended the Obesity Institute; I took that information to heart, especially the presentations of what other chapters had done to improve their members' health status and healthy weight goals. The exciting schedule of events was loaded with so much to do and see! And the city itself was amazing--I had an opportunity to take a tour of the Lower 9th Ward that was devastated by Hurricane Katrina. To see some new growth and revitalization in the city was encouraging. The closing session about medical errors was a call to arms for me. I felt such pride in my chosen career and responsibility for my patients that resonates with me still. I couldn't wait to get home to tell my co-workers all about it. I left the conference thinking about my own practice; how can I be more involved in my community? How can I take my practice and skills to the next level? How can I help someone else reach their goals? I'm looking forward to not only next year's conference, but to experience new growth and passion for my work. Thank you, New Orleans chapter and NBNA for a life-changing experience!

**Members of the First Coast Black Nurses Association
(Jacksonville, FL)**



**NBNA Institute and Conference Perspective from Chicago
Chapter NBNA**

I am pleased to give feedback from the CCNBNA members who attended the 41st NBNA conference in New Orleans, Louisiana. The conference was educational as well pleasurable. Also, we applaud Drs. Betty Davis Lewis and Sandra Millon Underwood for planning a professional conference.

The presentation on Gun, School and Domestic Violence's radiated throughout conference. The members that heard about the presentation felt these issues should be a plenary session for our next conference. Moreover, the American Red Cross session educated our nurses on how to build resiliency with special populations after disasters such as, elderly individuals with functional access needs including mental health and Military families. Not to mention,

Dr. Barbara Nichols was a wealth of information and her presentation was well received. The United Health group spoke on the monetary incentives Nurses can earn when they develop excellent nursing skills that can create innovations that save the corporation dollars. Also it was very good information.

The opening session highlighted the talents of our National President, Dr. Deidre Walton. Her articulation of the landscape for nurses under the new Affordable Care Act was enlightening. Dr. Karen Ragland-Cole gave concrete examples of the opportunities for nurses as a result of legislative changes with the ACA which was very enjoyable.

To emphasize on the business meeting it was the report of the Finance Committee and the trust committee bottom line positive that was Phenomenal!! The report on the audit without infractions was exceptional.

Swag the Runway was newest NBNA activity. Members obviously enjoyed that evening. It was recommended that we make it a part of the conference in Philadelphia 2014; perhaps with competition of various Chapters. Applause to our own, Dr. Daisy Harmon-Allen, for representing the Chicago Chapter on the Runway. Kudos! Trilby A. Barnes, Green R.N., Conference Hostess.

Dr. Audwin Fletcher did an excellent job on the bylaw amendments. The Members Speak session was executed in the most professional manner and everyone intact. Kudos to President JoAnn Lomax, President Birthale Archie, and Dr. Daisy Harmon-Allen on their presentation at the President Institution. Congratulation to Dr. Janice Phillip presented a well done advocacy on Breast Cancer. The Ecumenical Service was uplifting. The NBNA choir was heavenly and Pastor DeRouen message touched our hearts. We were delighted to see our own CCNBNA member Dr. Sander Webb-Booker installed as a NBNA Board member. First time attendee: Emily Jones, BSN, RN, Ways and Mean Chair, enjoyed herself immensely, and looking forward to the next conference. Special, special, thanks to Dr. Ronnie Ursin for his professional growth as our National Parliamentary: "A Job Well Done!"



Shirlynn LaChapelle (far left), Nicole Randolph (far right), and friends in attendance at the 1st Annual Gala of the Minneapolis Black Nurses Association



Dr. Deidra Walton, NBNA President, speaks at the 1st Annual Gala of the Minneapolis Black Nurses Association



Dr. Deidre Walton, NBNA President and Dr. Sonja Fuqua, NBNA Direct Member and member of the Eliza Pillars Registered Nurses of Mississippi



Dr. Deidre Walton, NBNA President, and Dr. Audwin Fletcher, NBNA Board Member, with members of NBNA and the Eliza Pillar Registered Nurses of Mississippi

Highlights from the 25th Quadrennial Congress held in Melbourne, Australia



Dr. Deidre Walton, NBNA President and Dr. Irene Daniels Lewis with nursing colleagues at the 25th Quadrennial Congress: Equity and Access to Health Care of the International Council of Nurses (ICN) in Melbourne, Australia held in May 2013. The ICN is a federation of 134 national nurses associations representing the millions of nurses worldwide. Operated by nurses and leading nursing internationally, ICN works to ensure quality care for all and sound health policies globally.



Dr. Karen Daley, President – American Nurses Association and Dr. Deidre Walton in attendance at the ICN 25th Quadrennial Congress

NBNA Conference Highlights from the Black Nurses Association of Greater Washington, DC Area, Inc

Twenty-six members of BNA GWDCA accompanied President Diana Wharton & Vice President Sonia Swayze to New Orleans for the 2013 NBNA Institute and Conference. Members participated in educational sessions and NBNA Business meeting providing critical input into the operations of NBNA related to changes to Bylaws amendments.

Senabou P. Dallil, Howard University student, was awarded the Dr. Lauranne Sams (NBNA Founder/First President) Scholarship for scholastic achievement & community service. The Margaret Pemberton (member of BNA GWDCA) Scholarship provided to NBNA was awarded to Darnell Caldwell a student from the New Orleans BNA. BNA GWDCA Past President Dr. Veronica Clarke Battle received many accolades for her service



Past NBNA Presidents, Drs. Linda Burnes Bolton and C. Alicia Georges converse with nursing colleagues at the ICN 25th Quadrennial Congress



Dr. C. Alicia Georges, Past NBNA President and Dr. Dorothy Powell at the ICN 25th Quadrennial Congress

as NBNA Board Member (2006-2009) and four years of service as NBNA Secretary (2009-20013). Evonne Waters represented the UnitedHealth Foundation which gave \$40,000 in nursing scholarships to NBNA. Evonne joined Margaret Pemberton, also listed as a NBNA Sponsor, and Jacqueline McDaniels at the sponsor's table during the President's Masquerade Gala.

Members presenting or moderating at the conference included:

- Dr. Phyllis Sharps, who discussed "Mentorship" at the Presidents' Leadership Institute for chapter Presidents and Vice Presidents.
- Evonne Waters presented an interactive discussion, "Educating Emerging Nurse Leaders to Influence Healthcare Policy: One Day at a Time" at the Founder's Leadership Institute.
- Margaret Nelson and Patricia Tompkins moderated workshops on Global Health and Emergency Medicine, respectively.

Five first-time attendees were overwhelmingly positive about their experiences at their first NBNA Institute & Conference. They found New Orleans, LA, with its wonderful food and great music, the perfect venue. More importantly, they were impressed by the depth of education and experience exhibited by institute and workshop speakers and presenters. Katrina Clark wrote, "I've had a paradigm shift and am now working towards achieving a graduate degree." Additionally, Margaret Worthy stated, "I went with expectations, had fun, brought back information, and was not disappointed."



BNA Greater Washington DC Area delegates and members (left to right): S. Swayze, D. Wharton (President), P. Sharps, M. Worthy, L. Jennings, P. Tompkins (not a delegate) & J. Ugorji



J. McDaniels, E. Waters (also pictured below) & Margaret Pemberton at President's Gala



Evonne Waters shows her DC style during the Opening Ceremony at each year to celebrate members and sponsors for their continue support for NBNA.

CCNBNA members attend the 50th Anniversary of the 1963 March on Washington. “Just Do Something”

CCNBNA member, Rozlyn Walls, RN, was not born when the original 1963 March on Washington launched. Yet, as a child, she heard stories about the march from her parents who attended the 1963 march. Their stories about the quest to end discrimination, segregation, and the promotion of social justice were implanted in her consciousness as a youth.

When the local radio station sent a call for participation in the re-enactment, she automatically reached back into the deep well of wisdom to get her CCNBNA mentor to be a part of this delegation. Mrs. Juanita Mumford has been her mentor through the LPN, RN, BSN and now MSN programs of study. She was more than happy to accompany Rozlyn and once again, be a part of history. Mrs. Mumford had attended the 1963 March on Washington. Later when Dr. King came to Chicago's Marquette Park to march for open housing, Mrs. Mumford's father was sent to jail. Looking in the face of this mob at 13, she realized racism and segregation was real.

This generation's speakers, who included past and present civil rights activists and politicians, highlighted the violence against Blacks due to police brutality, the threat of suppression of voting, and economic depravity. The more things change the more things stay the same. The world for Blacks looks a lot like 1963.

Mrs. Mumford educated Rozlyn about Mr. Bayard Rustin, the principle organizer for the 1963 March on Washington. Just like today, he was discriminated against because he was thought to be a homosexual and a radical. He was labeled a communist.

Rozlyn and thousands of other young people recognized the forces of 1963 still exist today. The take home message for the young was to pursue your dreams. For the 150,000 plus crowd, the message was “Go home and Do Something”.



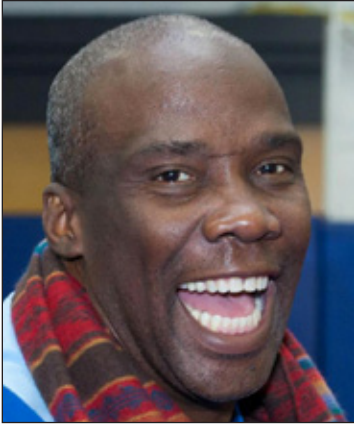
Rozlyn Walls, BSN, RN (left) and Juanita Mumford, MSN, RN (right)

Rozlyn was so impressed by the mix of the crowd. It was a true representation of today's USA. The crowd of over 150,000 was a mixture of all ages, sexualities, and races. Rozlyn's fire has been relit; she is committed to mentoring younger nurses, registering people to vote and completing her education.

Mrs. Mumford, a retired nursing instructor, will continue to mentor young and future nurses, and assist them in becoming all that they can be. She will continue to play an active role in improving her community by working with Operation Push and registering voters. Another generation is committed to the struggle for equality and humanity. We will Keep Hope Alive.

BNA Member, Austin Nation, Presents HIV/AIDS Educational Play

Austin Nation, MSN, RN, PHN, Bay Area BNA



I had the opportunity to present my work, an HIV/AIDS educational play titled “We’re All God’s Children” at the NBNA Conference in New Orleans. The production targets the faith-based community and addresses stigma as well as providing enlightening statistics about the new face of the epidemic in America - the African-American community. As a registered nurse living with this disease for over 25 years, this project is something that is near and dear to my heart and what a pleasure it was for me to share with my professional colleagues and have it so wonderfully received by the audience, including my chapter president Neesha Lambert and past president Kimberly Scott. I am honored and deeply touched by this experience and it was indeed one of the highlights of my life. I am humbled and immensely blessed by the outpouring of love and support around this often sensitive subject matter. More importantly, I want thank and acknowledge NBNA for welcoming this kind of non-traditional presentation and my UCSF doctoral classmates Sharon Smith (San Diego), Holly Jones (San Diego), Gina Robinson (San Francisco) in addition to new cast member additions Kendrick Clack (Fort Bend) and Norine Siglar (San Diego).

NORTHERN NEW JERSEY BLACK NURSES ASSOCIATION 21TH ANNUAL AWARDS AND SCHOLARSHIP BRUNCH

THEME: Advancing the Practice of Healthcare through Education, Research, and Leadership

KEYNOTE SPEAKER: Lynn Parker, RN, MA, NP-BC

Author of: *What Did the Doctor Just Say: How to Communicate with Healthcare Providers, Get Better Care, and Prevent Medical Errors Before They Happen*

SATURDAY, NOVEMBER 16, 2013

10 AM – 2PM at Newark Marriott Hotel • Newark Liberty International Airport • Tickets: \$65

For more information contact: President – Rosemary Allen-Jenkins – NNJBNA71988@yahoo.com

Brunch Chair - Larider Ruffin – lariderr@yahoo.com • Robbie George – Ticket Committee - 973-762-7539

CONGRATULATIONS!

to 2013 NBNA Nurse Educator Award Recipient



Dr. Kenya Beard, RN, EdD

Assistant Professor

Hunter-Bellevue School of Nursing

City University of New York

and

Josiah Macy Foundation Faculty Scholar, 2012-2014

An outstanding nurse educator advancing multicultural equity pedagogy
Diana J. Mason, PhD, RN, FAAN and Barbara Glickstein, MS, MPH, RN
Co-Directors, Center for Health, Media & Policy
at Hunter College, City University of New York



Celebration! Birmingham Black Nurses Association 2013 NBNA Community Service Award Recipient

Birmingham Black Nurses Association, in partnership with VITAS Innovative Hospice Care presented “Missing our Mothers: Daughters Remember” on May 4th at the Harbert Center in Birmingham. The event honored daughters and encouraged them to celebrate memories of their mothers. Over 120 daughters from Birmingham and surrounding areas attended the breakfast.

BBNA celebrated National Nurses Week with its annual wreath laying ceremony. The ceremony commemorated the legacy of **Pauline Fletcher**, the first Black registered nurse in Alabama. A formal dinner and CEU presentation followed the wreath laying. The week of celebration also included a Professional Organizations Fair at UAB Hospital and continuation of the chapter’s membership and recruitment drive.

Dr. Jennifer Coleman, BBNA president, has been selected as an on-site evaluator for the Commission on Collegiate Nursing Education (CCNE). She attended CCNE Evaluator Training in Reston, VA in May 2013. Dr. Coleman is among the inaugural reviewers for the Virginia Henderson International Nursing Library’s online research repository.

BBNA members attended an annual “Pink Hat & Tie Luncheon” on June 1, 2013. The luncheon calls attention to breast cancer awareness and education and was sponsored by Brenda’s Brown Bosom Buddies.

Four students from BBNA’s Mentorship Program were accepted for podium presentations at NBNA 41st Annual Institute & Conference. Nursing students **Juanita Jones** from UAB School of Nursing and **Isis Johnson** from Jefferson State Community College also received scholarships during the conference. **Kim Rutley-Campbell** received the NBNA 2013 Staff Nurse of the Year award.

BBNA members served as official hostesses at the Birmingham Man Up Breakfast! held on June 15th. The city of Birmingham sponsored the event to emphasize family advocacy and to honor outstanding fathers and sons.



Dr. Jennifer Coleman and President-elect **Mary Williamson** are Project Power Ambassadors for the American Diabetes Association (ADA). They attended ADA training and Mary Williamson presented the first community education session on June 15th at Faith Church in Birmingham. BBNA received an NBNA Preventive Health Action Team grant and are focusing on diabetes prevention and education.

Tammy Davis presented a breast cancer awareness and education session at the monthly meeting of Brenda’s Brown Bosom Buddies on July 18th in Alabaster, AL. Tammy Davis presented, *Heart Failure Treatment Disparities* during the Cardiovascular Institute at the NBNA 41st Annual Institute & Conference in New Orleans, LA.

BBNA recently completed its annual summer fan drive. Members donated electric fans to the *Spirit of Luke Ministries* for its monthly trip to residents of the Alabama Black Belt region. The Black Belt community for the month of July was Fort Deposit in Lowndes County. Elderly residents and others in need of assistance received an electric fan to help cool their homes during the summer heat wave. Team BBNA participated in the recent American Heart Association HeartWalk 2013 and the annual Sickle Cell Walk.



Pictured (left to right): Ashley Wagner, BSN, RN; Jennifer Coleman, PhD, RN, CNE, BBNA President; Juanita Jones, nursing student; Isis Johnson, nursing student; Mary Williamson, BBNA Vice President) at NBNA Conference Opening Ceremony, August 2013, New Orleans, LA.



Dr. Jennifer Coleman and Rev. Henry Ford

The Birmingham Black Nurses Association (BBNA) has been participating with the Spirit of Luke/A Promise to Help medical ministry since 2010. The ministry was founded by **Dr. Sandra Ford** and her husband **Rev. Henry Ford** of Birmingham, Alabama. Over the past years the BBNA have donated school supplies, women/girls feminine hygiene items, food, clothing, and their time providing nursing services, teaching breast cancer awareness education classes, educating on stroke prevention, diabetes, let's move/obesity awareness, and healthy lifestyle. The Spirit of Luke ministry travels on the first Saturday of the month to the underrepresented and impoverished areas of the southern Black Belt counties of Alabama. These counties have little to no medical services in their areas and a majority of the persons in the area are minorities who are either **underinsured or uninsured.**

The ministry traveled on Saturday, June 29th to Fort Deposit. The Birmingham Black Nurses Association had a **Fan Drive** and donated fans to the community. As Rev. Ford states "We had a wonderful mission trip, our Physicians and medical team examine, treated and gave away free medicine to 40 patients, our Optometrist performed eye exams on 20 patients and gave out free glasses, our Pharmacist filled prescriptions and gave free counseling to more than 30 patients. The clothing ministry gave away over 100 bags of clothes. The food ministry "a plate and a prayer" fed over 70 people and the evangelical team shared the love of Jesus with all who came to the clinic and to many in the community as we knocked on doors, passed out tracts and prayed for the sick and the loss. What a mighty God we serve."

Lindsey Harris, MSN, RN, has been appointed as the Assistant Nurse Manager of the Benign Gynecology/ Gynecology/ Oncology. This leadership role provides support through the coordination and delivery of patient care, personnel management, physician/interdisciplinary collaboration, and general administrative duties.

Martha A. Dawson, DNP, RN, FACHE, was elected Vice President of the Birmingham Regional Organization of Nurse Leaders. Dr. Dawson has been appointed as an adjunct faculty at the University of Alabama at Huntsville and the University of Alabama at Tuscaloosa in the graduate programs. Dr. Dawson is the Coordinator for Nursing and Health Systems



Rev. Henry Ford and Deborah Bedford-Zimmerman

Administration at the University of Alabama Birmingham. She is pleased to share that the Nursing and Health Systems Administration (NHS) Program was ranked #10 by US News and Report. This is the second time the NHS Program has ranked in the top 10 under Dr. Dawson's leadership. The NHS program at UABSON is also one of the fastest growing nursing leadership programs in the nation. Dr. Dawson has also joined the Alabama Health Action Coalition (AL-HAC) to assist with grant writing and fund development.



Kim Rutley-Campbell, MSN, MAE, RN, CNL, CRRN, CHPN, CTN-B, CHES, completed the University of Alabama at Birmingham School of Nursing Clinical Nurse Leader Master's degree on August 1, 2013. The Clinical Nurse Leader (CNL) is the newest nursing role developed by the American Association of Colleges of Nursing. The national movement to advance the CNL is fueled by the critical need to improve the quality of patient care and better prepare nurses to thrive across the health care system. Kim successfully passed the Clinical Nurse Leader (CNL) National Certification exam on August 9, 2013 and is now nationally certified as a Clinical Nurse Leader. Kim was awarded the staff nurse of the year award at the NBNA Conference in New Orleans, Louisiana on August 2, 2013. Also, Delta Epsilon Iota Academic Honor Society has selected **Kim Rutley-Campbell** for membership in the local chapter at the

University of Alabama at Birmingham. Delta Epsilon Iota was established in order to recognize and encourage academic excellence in all fields of study. The organization promotes the principles of Dedication, Enthusiasm, and Initiative among students participating in higher education throughout the United States. Students qualify on the basis of academic achievement or scholastic ranking within the top 15% of their class.

Deborah Andrews, MSHSA, RN, immediate past President of Birmingham BNA, attended a meeting of the Volunteers of America, in Washington D.C., in June as a representative of NBNA. The focus of the meeting was “**Facing the Invisible Wounds of War**”, for the increasing number of veterans returning from Iraq and Afghanistan. Panelist held discussions on the need to address critical issues regarding access to care, mental health issues, homelessness and other barriers to building a stronger civilian lives. The Volunteers of America and others are seeking ways to provide support and services to our veterans. Deborah recently launched two new businesses in the Birmingham area: **CACE Staffing Solutions**, CACEs’ mission is to provide Competent, Available, Clinical, Employees and; **Infinite Technology Solutions, LLC.**, an innovative staffing and scheduling software business.

Carthenia W. Jefferson, JD, BSN, RN, was elected in June 2013 as the President of the Alabama Lawyers Association (ALA). “Recognizing that certain segments of the population have historically been unrepresented or underrepresented in the legal arena, and recognizing that justice is a blind concept, yet sometimes unjustly administered, the Alabama Lawyers Association, (formerly known as the Alabama Black Lawyers Association) was organized in 1971.” Carthenia was appointed in July 2013 as the Parliamentarian of the Alabama State Nurses Association (ASNA) and she serves on the Commission on Professional Issues of ASNA. She along with **Dr. Martha Dawson** and **Tammy Davis** wrote a grant and receive funding for the second year from the North Central Alabama Affiliate of Susan G. Komen for the Cure (“Komen”) for Breast Cancer Awareness Education.

Direct Members

Congratulations! to **Kenya Haney, BSN, RN**, as a recipient of the 2013 Excellence in Health Care Award, in recognition of professional achievements and commitment to the St. Louis community. Kenya received her recognition on April 26, 2013 at the 13th Annual Salute to Excellence in Health Care Awards Luncheon, hosted by the St. Louis American Foundation. Kenya is the Cardiac Service Line Manager at Barnes-Jewish St. Peters Hospital Progress West HealthCare Center.

Northern New Jersey Black Nurses Association

Sandra Austin-Benn, MSN, APN, BC, received the Lifetime Achievement Award on March 22, 2013 from the Society of Psychiatric Practice Nurses. Sandra is also the recipient of the New Jersey League for Nursing Nurse Recognition Award. The recognition is given for outstanding commitment to the profession of nursing and the many contributions to nursing and healthcare. Sandra will receive the award in November 2013.

Council of Black Nurses, Los Angeles

Alice Benjamin, MSN, RN, ACNS-BC, PCCN, was elected to the Board of Director of the American Nurses Association/California for the 2013-2015. Alice is a board certified Clinical Nurse Specialist with over 15-years experience in cardiovascular health. She is a community health activist and involved member of several professional nursing and community organizations. She is also an American Heart Association spokesperson and freelance news on air health expert and writer.

Black Nurses Association of the Greater Washington DC Area

Rutgers University College of Nursing provided an honor to **Veronica Battle (Clark-Tasker), PhD, MBA, MPH, RN**, by naming the program’s alumni award in her honor. **Dr. Veronica Clark-Tasker Alumni Award** is awarded to an alumnus who is committed to higher education for self and others, exemplifies the mission by mentoring, recruiting, teaching, and being a role model in providing service to the community. The recipient of the Alumni Award is also an active participant in professional organizations.

Tri-County Black Nurses Association

Ida Spruill, PhD, RN, FAAN, a founding member and first president of Tri-County Black Nurses Association receives the Ethics in Focus Award from Clemson University, Clemson, South Carolina. Dr. Spruill of Charleston is the first recipient of the Clemson University Robert Rutland J. Institute for Ethics’ “Bringing Ethics into Focus” Award. The recognition was presented at the Institute’s 10th anniversary event on campus. The award recognizes significant efforts to bring about a more ethical environment in South Carolina.



Black Nurses Association of Baltimore



Tasha Brown, BSN, RN, Financial Secretary BNAB, was inducted into the Mary Mahoney Honors Society. Tasha graduated with a BSN with Honors from Copping State University in May 2013. Tasha currently functions as an LPN at Total Health Care in Baltimore MD, with a specialty in Substance Abuse.

Nerland Robinson, RN, was recognized as the 2013 Nurse of the Year by Upper Chesapeake Health. Nerland is currently a Medical-Surgical nurse at Upper Chesapeake Medical Center.

New York Black Nurse Association

New York Black Nurses Association held the 25th National Black Nurses Day Celebration in February 2013. The event was sponsored by Coler-Goldwater Specialty Hospital & Nursing Facility, Roosevelt Island, New York. The Keynote was **Dr. C. Alicia Georges**, founder. We were honored by the presence of **Rev. Dr. Deidre Walton**, NBNA President and **Millicent Gorham**, NBNA Executive Director. **Dr. Wesley Willis**, NYBNA Member was awarded the chapter's Service Award. **Bernice Headley** presented the bi-annual Maggie Jacobs Award. **Bernice Simmons**, **Sabrina Newton** and **Mirian**

Moses completed the Heart Smart Class at Trinity A.M.E. Church conducted by NYBNA Board Member, **Rev. Dr. Rose Ellington Murray**.

Dr. C. Alicia Georges, past NYBNA and NBNA President, was presented a proclamation by NBNA President, **Dr. Deidre Walton**.

Jean Straker is the Faith Leader for John Hus Moravian Church Christian Health Fellowship partnership with New York University FAITH Program. FAITH stands for Faith-based Approaches in the Treatment of Hypertension. FAITH is a 5-year program sponsored by the National Institutes of Health. FAITH is a research study designed to help people of African descent improve their high blood pressure.

Dr. Wesley Willis was awarded the chapter's Service Award at the 25th National Black Nurses Day Celebration sponsored by Coler-Goldwater Specialty Hospital & Nursing Facility, Roosevelt Island, New York.

Hayward S. Gill, Jr. was pictures in nurse.com as part of the Helene Fuld College of Nursing, New York, Mentorship Program in March 2013.

Bernice Headley and **Mirian Moses** attended NYC Council Speaker Christine Quinn's Annual Women of Faith Breakfast at Union Theological Seminary. Dr. Oz, speaker, spoke on the effectiveness of spiritual intervention in healing. The event was held on March 15, 2013.

Concerned Black Nurses of Central New Jersey

The Concerned Black Nurses of Central New Jersey was one of the Honorees at the 2013 Asbury Park/Neptune National Association for the Advancement of Colored People (NAACP) Freedom Fund Dinner Dance in February 2013 for Outstanding Leadership and Community Service.

Southeastern Area Pennsylvania Black Nurses Association

Dr. Roberta Waite, Assistant Dean of Academic Integration and Evaluation of Community Programs at the Drexel University College of Nursing and Health Professions, was named a 2013 Philadelphia Tri-State Nurse.com Nursing Excellence Regional Finalist in the Advancing and Leading the Profession category in May 2013.



Westchester Black Nurses Association

The Westchester Black Nurses Association joined the American Heart Association Heart360 Project. The focus of the project is to mentor members of the community to track their blood pressure, physical activity and weight data and advise the participant about the data.

The Westchester Black Nurses Association along with other community partners, co-sponsored an events given by Sister to Sister International, Inc., in collaboration with Kingdom Cultural Center a screening of the Award Winning Film, Soul Food Junkies by acclaimed Activist & Film Director, Byron Hurt on Friday, March 8, 2013. The events was to educate and encourage the community to eat healthy, weight control, healthy life style changes and still enjoy the food their love to eat and growth up with. This events discussion focuses on the community's relationship with soul food. There was a questions and answers segment along with a panel discussion. Participation from experts included a black female physician, a Zumba instructor, registered dietitian and diabetes educator and the vice-president of the Westchester BNA.

Mary Simon, RN, WBNA vice-president, attended the 42nd Annual Conference Weekend sponsored by the New York State Association of Black and Puerto Rican Legislators, Inc. held in Albany, New York. The theme was, "Together We Can." During this 4-day event, Mary had the chance to attend the labor luncheon, varies workshops and the gala scholarship dinner and the 31st Annual Leadership Breakfast given by the Westchester Black Women's Political Caucus. Mary also attended the 25th Annual National Black Nurses Day celebration on February 22, 2013. The theme of the celebration was, "After 25 Years Is There a silver Lining?" The event was presented by: New York Black Nurses Association, Inc., Queens Country Black Nurses Association, Inc., Caribbean American Nurses Association, Inc., Kappa Eta Chapter, Inc. of Chi Eta Phi Sorority, Inc., Theta Chi chapter, Inc. of Chi Eta Phi Sorority, Inc. Mary participated in the Westchester Women's summit held by the Westchester women's Agenda on March 2, 2013.

Mary Simon, RN, WBNA vice-president and Fellow of the NYU Leadership for Black Nurses, assisted in a health fair along with other fellows at the Community Board #3 in the Bronx, focusing on blood, weight health education and healthy eating. The events were held in March 2013.

Northern Connecticut Black Nurses Association

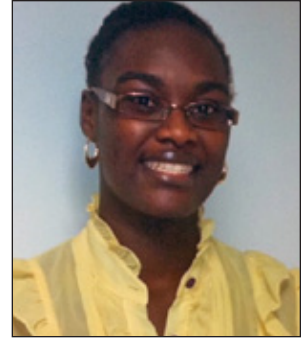


Lisa Davis, MBA, BS, RN, President NCBNA and Deputy Commissioner for the State Department of Public Health, was selected by the Connecticut Department of Public Health to receive a 2013 Nightingale Award. The Nightingale event was held at the downtown Hartford Marriott on May 9, 2013. Ms. Davis has administrative oversight of the state

public health laboratory, administrative services, certificate of need process, population health statistics, the Department's

strategic mapping process, and state health assessment/state health improvement plan.

Muriel Appram, student nurse, received a scholarship from Chi Eta Phi, Chi Chapter on June 22, 2013. Ms. Appram will be entering her senior year in the nursing program at the American International College in Springfield CT, and works at St. Francis Hospital and Medical Center in Hartford CT as a Pharmacy Technician.



Chicago Chapter National Black Nurses Association

President **Dr. Daisy Harmon Allen** made a presentation on gun violence at the 41st NBNA Conference, President's institute. Also she presented at the School District 88- Bellwood Illinois.

The Health Policy Committee, under the leadership of **Juanita Patrick, MS, RN**, is educating the public on the Affordable Care Act. Stressing the key role nurses will play. On a local talk show, WVON, members stressed being vigilant in monitoring the ACA due to patient access issues due to limited healthcare capacity and refusal to accept Medicaid. Strategic partnerships have been established with Illinois District 7 **Congressman Danny K Davis**.

Donna Calvin, PhD, RN and **Debra Hawkins, MSN, RN**, went on a Medical Mission to Nigeria. Both are Advance Practice Nurses and with the collective of the delegation provided health service to 500 plus Nigerian citizens. On December 31, 2013 a delegation of Chicago practicing Nigerian nurses will join as members of CCNBNA. Thanks to **Debra Hawkins, MSN, RN** and **Daisy Harmon Allen, PhD, RN** for establishing the collaboration.

CCNBNA has formed a collaboration with the American Legion Auxiliary, Bellwood Unit 500. Together the partnership has fed 200 Hungary veterans and provided 500 hygiene packets to veterans in the Hines VA hospital once a month.

CCNBNA received a \$1,000 grant from NBNA for the Obesity Project funded by Coke Cola. CCNBNA partnered with School District 88 Bellwood Illinois where **Dr. Daisy Harmon Allen** is President of the School District 88. In addition, Monroe Baptist Church pastored by **Rev. Caliph Wyatt**, is also a partner. The Obesity Project will be featured on the CCNBNA website and Facebook.

CCNBNA has collaborated with Bellwood Illinois community health fair and **Sandra Jones, SN**, was the coordinator. Healthy eating education materials were provided to the students and hypertension and parenting tips to parents. Provident Cook County Hospital and CCNBNA have formed a partnership for health awareness for staff and public. Highlights have been Diabetes and Hypertension Screening. Back to school physicals were also done. Under the leadership of Community Policy Chair, **Toni Oates, BSN, RN**, members provided first AID services to thousands of participants at the African Chicago Fest.

Captain Ret. Regina Powell and **Roslyn Wall** received the Presidential Award.

Black Nurses Association of Greater Houston

BNAGH held its second annual retreat May 11, 2013. Our Motto was Community Health Promotion and Professional Development. The purpose of the retreat was to facilitate the ability of our chapter to relax and step back from our usual activities to have concentrated discussion, dialogue, and strategic thinking about our chapter's future. Our objectives were:

- a. Strategic Planning of annual goals and objectives;
- b. Get to know each other better; and
- c. Team-building.

The members that attended the retreat were: **Dr. Ruth Caggins**, President, **Vivian Dirden**, **Sylvia Moore**, **Carson Easley**, **Sadie Newman**, **Beverly Joseph**, **Debra Shannon**, **Flora Johnson**, **Ruth Charlot**, **Vern Washington**, **Sammie Dawson**, **Carolyn Montgomery**, **Betty Baldwin**, **Dora Culberson**, **Patricia Boone**, **Jacquelyn Tims**, **Demetria Lewis Locking**, **Angelia Nedd**, **Sharon Shakesnider**, **Dr. Bettye Davis-Lewis**, and **Verna Simmons-Robinson**.

On June 1, 2013 a Community Health Fair was held at the Hiram Clark Multiservice center through the joint effort of Black Nurses Association of Greater Houston, Congressman Al Green, City Councilman, **Larry Green**, State Representative **Alma Allen**, **Senator Rodney Ellis**, and the South Houston Coalition. Many vendors were on hand in an effort to assist with the health disparities among the unserved and underserved of the community. They included WIC, Bureau of Aging, ABC Dental, St. Lukes Diabetes, St. Lukes Stroke Center, MD Anderson Cancer Center, Houston Police Department, Houston Fire Department, The Department of Mental Health, Sickle Cell and Walgreens. The health fair was well attended.

Texas Black Expo, the largest African American Tradeshow in the State of Texas, strengthens business and inspires youth to build better lives was held June 22 and 23, 2013 at the George R. Brown Convention Center in Houston, Texas. The Theme this year was, "Living Strong Health and Wellness." The following members of Black Nurses Association of Greater Houston assisted with the blood drive and provided first aid for the participants of the tradeshow: **Daisy McKinney, RN**, **Patricia Boone, RN**, **Cynthia Brown, RN**, **Barbara Cooper, RN**, **Vern Washington, RN**, **Debra House-Shannon, RN**, **Beryl Shorter, RN** and **Sadie Newman, RN**.

New England Regional Black Nurses Association

Sharon Callender, RN MPH, and past president of NERBNA, recently completed an abstract entitled "Transforming access in an underserved urban community through novel collaborations." Her abstract was selected and confirmed for oral presentation during the 141st APHA Annual Meeting (November 2nd-6th, 2013) in Boston. Please join us in congratulating her on this most recent achievement.

Gaurdia E. Banister, RN PhD will be inducted as a Fellow of the American Academy of Nursing (<http://www.aannet.org/>) in October 2013. Becoming a fellow of the AAN is one of the highest honors a nurse can receive from the profession of nursing. Of the 3.5 million nurses in America, only approximately 200 are Fellows. "The American Academy of Nursing (AAN) is an organization dedicated to serving the public and

the nursing profession by advancing health policy and practice through the generation, synthesis, and dissemination of nursing knowledge. To accomplish the mission, it is important that the Academy attract to its Fellowship the profession's best and brightest; in other words, those whose involvement can assist in meeting the organization's goals. Admission to the Academy requires evidence that the individuals have made outstanding contributions to nursing and/or health care and that they have the potential to make a continuing and positive impact on the Academy."

Central Carolina Black Nurses Council

Erma Jean Smith-King, PhD, MBA, RN, CNE, successfully achieve certification as a nurse educator in May 2013. Certified Nurse Educator credentials are granted by the National League for Nursing – Academic Nurse Educator Certification Program.

Atlanta Black Nurses Association

The Atlanta Black Nurses Association hosted their third Annual Prayer Breakfast. The theme was, "Each One. Reach One. Teach One- Preparing Nurses for the Future." **Dr. Mary Gullatte**, vice President of Patient Services and Chief Nursing Officer, Emory University Hospital-Midtown, served as the Keynote speaker.

Congratulations to President **Laurie Reid** for two awards: the Women on Fire Award from the Bennett College Alumni Association in Atlanta and the Public Health Service Award from the Gamma Chi Chapter of Chi Eta Phi Nursing Sorority.

Best wishes to **Lynn Houston Bell** as she starts her PhD in Nursing Science program at the University of Phoenix.

Congratulations to **Karen Rawls**, President Elect, Georgia Nurses Association-Metro Atlanta chapter, for her new position in the Nursing Education Department at Grady Health Systems.

Mary Dawson and **Georgette Peterson** participated in a Conversation on Leadership with former Atlanta Mayor, Shirley Franklin.

ABNA celebrated National Nurses Week with Public Health Nurses at the Centers for Disease Control and Prevention. The theme was, "Public Health and Health Care Collaboration: Nursing Innovation and Opportunities," supports CDC's efforts to strengthen the partnerships between public health nurses and clinical nurses. Presenters included **Dr. Mary Wakefield**, Administrator of HHS Health Resources and Services Administration; **Kim Ryan, MBA, RN, CEO**, Eastside Medical Center; and **Dr. Susan Swider**, Appointee to President Obama's Advisory Group on Prevention, Health Promotion, and Integrative and Public Health; and a diverse panel of other speakers.

ABNA nurses provided screenings and health information for the following community Events: Towers High School, Women of Distinction, Fair hill Baptist Church, and the Morehouse College Student and Faculty health fairs; Kappa Alpha Psi Southern Regional Province health expo; Omega Psi Phi 5K/Run Walk; Southern K Ranch Rodeo; and the African Methodist Episcopal Church Sixth District's Annual Conference.

New England Regional Black Nurses Association, Inc. Salutes “Excellence in Nursing”

Webster’s Dictionary defines “excellence” as the quality of being excellent; state of possessing good qualities in an eminent degree; exalted merit; superiority in virtue; that by which one excels or is eminent. Every year NERBNA recognizes Black Nurses who exemplify this definition through their Excellence in Nursing Practice, Leadership, Education/Teaching, and Research. In addition to the significant contributions to the nursing profession and the workplace, the nurses highlighted in this article have made a difference in the lives of their patients.

Nominated by their various institutions, these nurses demonstrate their understanding of the increasing needs of ethnically racial and culturally diverse populations and how nursing plays a pivotal role in advocating for and insuring that every individual receives optimum health care. They use their skills to “think out of the box”, by developing initiatives, programs, and protocols that challenge the “status quo” and set the

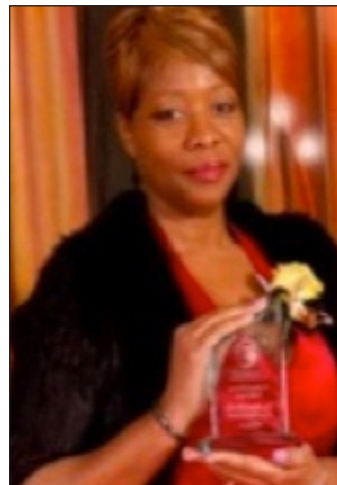
standards by which evidenced-based nursing is practiced, taught and learned by current and future nurses. These nurses are visionaries. They understand the importance of working in partnership and collaboration to improve nursing care, enhance education and advance research across the various health care disciplines who work together to promote and provide optimum health care for patients.

This work is not limited to the confines of the organizations they work for. Their outreach efforts and volunteer work here and abroad, have provided needed services and support to those often disenfranchised by the system. They are committed change agents, selfless role models, and leaders in their field.

During National Nurses Week, NERBNA salutes the 2013 Excellence in Nursing Awardees, its members, and all nurses for their continued dedication and commitment to the nursing profession.



Education/Teaching
Marion Winfrey, EdD, RN



Nursing Practice
Cheryl Tull, BSN, RN

CONTINUED ON PAGE 25 

South Eastern Pennsylvania Area Black Nurses Association

The South Eastern Pennsylvania Area BNA generously supported NBNA’s Program committee members, **Dr. Beulah Nash, Terry Lee, Dr. Bobbie Perdue, Dr. Sandra Booker** and **Diane Holiston** during their recent Focus Group Training session in Philadelphia. **Monica Harmon** and **Dr. Lucy E. Yates** secured a meeting site for the group at University of Pennsylvania School of Nursing. They were joined by **Arlene Branch** and **Karen King Shannon** for the one day session which was provided by the Denver STD/HIV Prevention Training Center. NBNA members and Treasurer, **Dr. Beulah Teachey, Terry Lee, Dr. Bobbie Perdue, Dr. Sandra Webb Booker** and **Diane Holiston** gained and shared rich knowledge and information regarding the role of focus group activity within the research and program worlds.

Linda Webster, MSN, RN, was named 2012 Educator of the Year by the Pennsylvania Association of Practical Nursing Administrators.

Monica Harmon, MS, RN, and **Linda Webster** will begin doctoral studies at Widener University, Chester, PA.

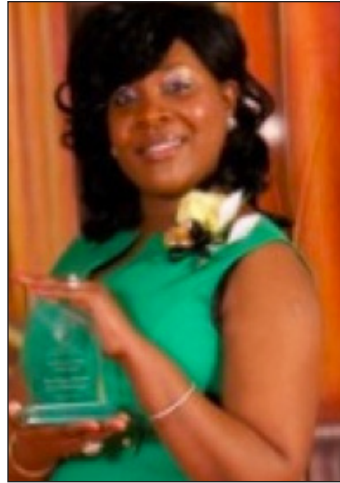
Kathleen Minor, Juanita Tunstall, Stephanie Tunstall, Monica Harmon and **Dr. Lucy E. Yates** volunteered as monitors during NBNA’s very informative and highly charged Health and Wellness Regional Summit in Philadelphia in April 2013. This summit provided a wealth of information about strategies to promote healthy behaviors within the work setting and the community.

Dawn Collins, SN, will graduate 1199 Practical Nursing Program and enter the Community College of Philadelphia registered nursing program.

Grace Arrington, RN, obtained a Master of Science in Management from Gwynedd Mercy College in May 2013.



Education/Teaching
Michelle Renaud, MSN, RN



Nursing Practice
Christine Brown, ADN, BS



Nursing Practice
Ketline Edouard, MSN, RN



Nursing Practice
Sheran Woodroffe, ASN, RN



Nursing Practice
Cheryl Xavier, ASN, RN



Nursing Practice
Sheryl Fernandes, BSN, RN



Education/Teaching
Clara Gona, PhD, FNP-BC, RN



Education/Teaching
Makeda Kamara, CNM, MEd, MPH, RN



Nurses of the Year Awardees were presented with awards by VITAS Innovative Healthcare



Middlesex Regional Black Nurses Association (New Jersey) being chartered



New Chapter: Bayou Region Black Nurses Association



Greater Phoenix Black Nurses Association



Sands Hill, North Carolina BNA being Chartered



Kalamazoo-Muskegon Black Nurses Association



Black Nurses Association of the First State



Galveston County, Gulf Coast BNA



Honolulu Chapter wins the Dr. Poindexter Youth Award



Carolyn Teneyck (left) and Lola Jefferson (right) pictured with a participant at the MedImmune Breakfast



Dr. Mary Wakefield presents at the Presidents Leadership Insititue



Beverly Morgan - ELNEC



Chicago Chapter NBNA gathers for the Opening Ceremony



Birmingham BNA board members attend the Presidents' Leadership Institute



Dr. Barbara Nichols (center) Deborah Jones (right) NBNA Board member with guests at the NBNA conference



Deborah Jones and Dr. Beulah Nash-Teachey dialogue with Dr. Mary Wakefield, HRSA administrator



Birthale Archie, president, Kalamazoo-Muskegon BNA, presenting at the Presidents Leadership Institute speaking on violence prevention



Chris Brannon (left) and Dr. Joyce Newman Giger (right) engage with NBNA conference participants



Attendees at the Geriatric ELNEC



Attendees at the Geriatric ELNEC



Dr. Sandra Millon Underwood engages with NBNA members at the writers workshop



Chris Weber, exhibitor, Children's Mercy Hospitals and Clinics

Dawndra Jones, exhibitor, University of Pittsburgh Medical Center



Liberty Mutual exchange information with exhibit hall attendees

Worldpoint Exhibitor



Brass Band leading the Second Line at the Opening Ceremonies

NBNA President leads the Second Line at the end of the Opening Ceremonies



ALABAMA

Birmingham BNA www.birminghambna.org

ARIZONA

Greater Phoenix BNA www.bnaphoenix.org

CALIFORNIA

Bay Area BNA www.babna.org

Council of BN, Los Angeles www.cbnlosangeles.org

Inland Empire BNA www.iebna.org

San Diego BNA www.sdblacknurses.org

South Bay Area of San Jose BNA www.sbbna.org

COLORADO

Eastern Colorado Council of BN (Denver) www.coloradoblacknurse.org

CONNECTICUT

Northern Connecticut BNA www.ncbna.org

Southern Connecticut BNA www.scbna.org

DELAWARE

BNA of the First State www.bnaoffirststate.org

DISTRICT OF COLUMBIA

BNA of Greater Washington DC Area www.bnaofgdca.org

FLORIDA

BNA, Miami www.bna-miami.org

BNA, Tampa Bay www.tampabaynursesassoc.org

Central Florida BNA www.cfbna.org

First Coast BNA (Jacksonville) www.fcbna.org

St. Petersburg BNA www.orgsites.com/fl/spnbna

GEORGIA

Atlanta BNA www.atlantablacknurses.com

Concerned NBN of Central Savannah River Area www.cnofcsra.org

Savannah BNA www.sb_na.org

HAWAII

Honolulu BNA www.honolulublacknurses.com

ILLINOIS

Chicago Chapter NBNA www.chicagochapternbna.org

INDIANA

BNA of Indianapolis www.bna-indy.org

KENTUCKY

KYANNA BNA (Louisville) www.kyannabna.org

Lexington Chapter of the NBNA www.lcnbna.org

LOUISIANA

Baton Rouge BNA www.mybrbna.org

Shreveport BNA www.sbna411.org

MARYLAND

BNA of Baltimore www.bnabaltimore.org

MASSACHUSETTS

New England Regional BNA www.nerbna.org

MICHIGAN

Greater Flint BNA www.gfbna.org

Saginaw BNA www.bnasaginaw.org

MINNESOTA

Minnesota BNA www.mnbna.org

MISSISSIPPI

Mississippi Gulf Coast BNA www.mgcbna.org

MISSOURI

Greater Kansas City BNA www.gkcbblacknurses.org

NEVADA

Southern Nevada BNA www.snbna.net

NEW JERSEY

Concerned BN of Central New Jersey www.cbncnj.org

Concerned BN of Newark www.cbnn.org

Northern New Jersey BNA www.nnjbna.com

NEW YORK

New York BNA www.nybna.org

Queens County BNA www.qcbna.com

Westchester BNA www.westchesterbna.org

NORTH CAROLINA

Central Carolina BN Council www.ccbnc.org

OHIO

Cleveland Council of BN www.ccbninc.org

Columbus BNA www.columbusblacknurses.org

Youngstown-Warren (Ohio) BNA www.youngstown-warrenobna.org

OKLAHOMA

Eastern Oklahoma BNA www.eobna.org

PENNSYLVANIA

Pittsburgh BN in Action www.pittsburghblacknursesinaction.org

Southeastern Pennsylvania Area BNA www.sepabna.org

SOUTH CAROLINA

Tri-County BNA of Charleston www.tricountyblacknurses.org

TENNESSEE

Nashville BNA www.nbnanashville.org

TEXAS

BNA of Greater Houston www.bnagh.org

Metroplex BNA (Dallas) www.mbnadallas.org

WISCONSIN

Milwaukee Chapter NBNA www.mcnbna.org

ALABAMA

BIRMINGHAM BNA (11)
Dr. Jennifer Coleman
Birmingham, AL
MOBILE BNA (132)
Dr. Yolanda Turner
Mobile, AL
MONTGOMERY BNA (125)
Tonya Blair
Montgomery, AL

ARIZONA

GREATER PHOENIX BNA (77)
Angela Allen
Phoenix, AZ

ARKANSAS

LITTLE ROCK BNA OF ARKANSAS
(126)
Cheryl Martin
Little Rock, AR

CALIFORNIA

BAY AREA BNA (02)
Nesha Lambert
Oakland, CA
COUNCIL OF BLACK
NURSES, LOS ANGELES (01)
Dr. Lovene Knight
Los Angeles, CA
INLAND EMPIRE BNA (58)
Sandra Waters
Riverside, CA
SAN DIEGO BNA (03)
Sharon Smith
San Diego, CA
SOUTH BAY AREA BNA (San Jose)
(72)
Sandra McKinney
San Jose, CA

COLORADO

EASTERN COLORADO COUNCIL OF
BLACK NURSES (DENVER) (127)
Chris Bryant
Denver, CO

CONNECTICUT

NORTHERN CONNECTICUT BNA (84)
Lisa Davis
Hartford, CT
SOUTHERN CONNECTICUT BNA (36)
Katherine Tucker
New Haven, CT

DELAWARE

BNA OF THE FIRST STATE (133)
Eunice Gwanmesia
Dover, DE

DISTRICT OF COLUMBIA

BNA OF GREATER
WASHINGTON, DC AREA (04)
Diana Wharton
Washington, DC

FLORIDA

BIG BEND BNA (Tallahassee) (86)
Hester O'Rourke
Blountstown, FL
BNA, MIAMI (07)
Dr. Lenora Yates
Miami Gardens, FL
BNA, TAMPA BAY (106)

Rosa Cambridge
Tampa, FL
CENTRAL FLORIDA BNA (35)
Constance Brown
Orlando, FL
CLEARWATER/ LARGO BNA (39)
Audrey Lyttle
Largo, FL
FIRST COAST BNA
(JACKSONVILLE) (103)
Sheena Hicks
Jacksonville, FL
GREATER GAINESVILLE BNA (85)
Voncea Brusha
Gainesville, FL
PALM BEACH COUNTY BNA (114)
Dr. Louise Aurelien
Royal Palm Beach, FL
ST. PETERSBURG BNA (28)
Janie Johnson
St. Petersburg, FL

GEORGIA

ATLANTA BNA (08)
Laurie Reid
College Park, GA
COLUMBUS METRO BNA (51)
Gwendolyn McIntosh
Columbus, GA
CONCERNED NATIONAL BLACK
NURSES OF CENTRAL SAVANNAH
RIVER AREA (123)
Dr. Beulah Nash-Teachey
Martinez, GA
SAVANNAH BNA (64)
Wanda Jones
Savannah, GA

HAWAII

HONOLULU BNA (80)
Dr. Patricia Burrell
Aiea, HI

ILLINOIS

CHICAGO CHAPTER BNA (09)
Dr. Daisy Harmon-Allen
Chicago, IL

INDIANA

BNA OF INDIANAPOLIS (46)
Sandra Walker
Indianapolis, IN
NORTHWEST
INDIANA BNA (110)
Mona Steele
Merrillville, IN

KANSAS

WICHITA BNA (104)
Peggy Burns
Wichita, KS

KENTUCKY

KYANNA BNA, LOUISVILLE (33)
Brenda Hackett
Louisville, KY
LEXINGTON CHAPTER OF THE
NBNA (134)
Jitana Benton-Lee
Lexington, KY

LOUISIANA

ACADIANA BNA (131)
Jeanine Thomas
Lafayette, LA

BATON ROUGE BNA (135)
Tonya Washington Nash
Slaughter, LA
BAYOU REGION BNA (140)
Ellen Matthews
Thibodaux, LA
NEW ORLEANS BNA (52)
Trilby Barnes-Green
New Orleans, LA
SHREVEPORT BNA (22)
Carletta Lamb
Shreveport, LA

MARYLAND

BN OF SOUTHERN MARYLAND
(137)
Kim Cartwright
Temple Hills, MD
BNA OF BALTIMORE (05)
Dr. Ronnie Ursin
Baltimore, MD

MASSACHUSETTS

NEW ENGLAND REGIONAL BNA (45)
Margaret Brown
Roxbury, MA
WESTERN MASSACHUSETTS BNA
(40)
Gloria Wilson
Springfield, MA

MICHIGAN

DETROIT BNA (13)
Nettie Riddick
Detroit MI
GRAND RAPIDS BNA (93)
Earnestine Tolbert
Grand Rapids, MI
GREATER FLINT BNA (70)
Virginia Adams
Flint, MI
KALAMAZOO-MUSKEGON BNA (96)
Birthale Archie
Kentwood, MI
SAGINAW BNA (95)
Archia Jackson
Saginaw, MI

MINNESOTA

MINNESOTA BNA (111)
Shirlynn LaChapelle
Minneapolis, MN

MISSISSIPPI

CENTRAL MISSISSIPPI BNA (141)
Tangela Hales
Brandon, MS
MISSISSIPPI GULF COAST BNA
(124)
Dr. Romestrius Moss
Gulfport, MS

MISSOURI

GREATER KANSAS CITY BNA (74)
Jean Winfield
Kansas City, MO

NEBRASKA

OMAHA BNA (73)
Dr. Aubray Orduna
Omaha, NE

NEVADA

SOUTHERN NEVADA BNA (81)
Ann Hall
Las Vegas, NV

NEW JERSEY

CONCERNED BN OF CENTRAL NEW
JERSEY (61)
Sandra Pritchard
Neptune, NJ
CONCERNED BLACK
NURSES OF NEWARK (24)
Lynda Arnold
Newark, NJ
MID-STATE BNA OF NEW
JERSEY (90)
Rhonda Garrett
Somerset, NJ
MIDDLESEX REGIONAL BNA (136)
Cheryl Myers
Plainfield, NJ
NEW BRUNSWICK BNA (128)
Barbara Burton
New Brunswick, NJ
NORTHERN NEW JERSEY BNA (57)
Rosemary Allen-Jenkins
Newark, NJ
SOUTH JERSEY CHAPTER OF THE
NBNA (62)
Gail Edison
Williamstown, NJ

NEW YORK

NEW YORK BNA (14)
Jean Straker
New York, NY
QUEENS COUNTY BNA (44)
Hyacinthe McKenzie
Cambria Heights, NY
WESTCHESTER BNA (71)
Altrude Lewis-Thorpe
Yonkers, NY

NORTH CAROLINA

CENTRAL CAROLINA COUNCIL (53)
Helen Horton
Durham, NC
SANDHILLS NORTH CAROLINA
BNA (138)
LeShonda Wallace
Fayetteville, NC

OHIO

AKRON BNA (16)
Sandra Lee Flowers
Akron, OH
BNA OF GREATER CINCINNATI (18)
Marsha Thomas
Cincinnati, OH
CLEVELAND COUNCIL BNA (17)
Peter Jones
Cleveland, OH
COLUMBUS BNA (82)
Pauline Bryant
Columbus, OH
YOUNGSTOWN WARREN BNA (67)
Lynn Hines
Youngstown, OH

OKLAHOMA

EASTERN OKLAHOMA BNA (129)
Phyllis Collins
Tulsa, OK

PENNSYLVANIA

PITTSBURGH BN IN ACTION (31)
Jacqueline Blake
Pittsburgh, PA

SOUTHEASTERN
PENNSYLVANIA BNA (56)
Juanita Jones
Philadelphia, PA

SOUTH CAROLINA

MINORITY BNA OF FLORENCE, SC
(139)
Dr. Rhonda Brogdon
Florence, SC
TRI COUNTY BNA OF
CHARLESTON (27)
Dr. Debbie Bryant
Charleston, SC

TENNESSEE

MEMPHIS-RIVERBLUFF BNA (49)
Linda Green
Memphis, TN
NASHVILLE BNA (113)
Shawanda Clay
Nashville, TN

TEXAS

BNA OF GREATER HOUSTON (19)
Vivian Dirden (Interim)
Houston, TX
FORT BEND COUNTY BNA (107)
Yvonne Olusi
Missouri City, TX
GALVESTON COUNTY GULF COAST
BNA (91)
Leon McGrew
Galveston, TX
GREATER EAST TEXAS BNA (34)
Pauline Barnes
Tyler, TX
METROPLEX BNA (DALLAS) (102)
Dr. Becky Small
Dallas, TX
SOUTHEAST TEXAS BNA (109)
Denise Sanders Boutte
Port Arthur, TX

VIRGINIA

BNA OF CHARLOTTESVILLE (29)
Dr. Randy Jones
Charlottesville, VA
CENTRAL VIRGINIA BNA (130)
Janet Porter
Richmond, VA
NBNA: NORTHERN VIRGINIA
CHAPTER (115)
Joan Pierre
Woodbridge, VA

WISCONSIN

MILWAUKEE BNA (21)
JoAnn Lomax
Milwaukee, WI
RACINE-KENOSHA BNA (50)
Gwen Perry-Brye
Racine, WI

DIRECT MEMBER (55)

*IF THERE IS NO CHAPTER IN YOUR
AREA

Understanding the Facts about Influenza



Help Protect Yourself and Your Family from the Flu

Influenza, also called “the flu,” is a serious, contagious disease, which can lead to illness, hospitalization, and even death. Every year, more than 200,000 people, primarily among the elderly but also some young children, are hospitalized from the flu. Getting vaccinated is the best way to protect yourself and your family from flu viruses and to help prevent the spread of influenza. ^{1, 2}

Symptoms of the flu: ²

The flu is not a cold:

Sometimes the flu is confused with a cold, because they have similar symptoms. But, The flu usually comes on quickly with some, or all, of these symptoms:

- Fever
- Cough
- Sore throat
- Runny or Stuffy Nose
- Body Aches
- Headache
- Fatigue (feeling very tired)
- Sometimes vomiting and diarrhea (more common in children than adults)

If someone in your family is experiencing symptoms that you think might be the flu, call your healthcare provider.

How does the flu spread? ²

The virus spreads mainly by droplets from the nose and mouth that land on or are inhaled by anyone nearby. You can also get the flu if you touch a surface with the flu virus on it, like a door or railing, and then touch your nose, mouth, or eyes.

The best way to prevent the flu is to get vaccinated.²

The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 months and older should get the flu vaccine every year. To protect yourself and your children against the flu, make sure yourself and your children are vaccinated.

Who should get vaccinated? ²

The CDC's Advisory Committee on Immunization Practices (ACIP) voted for "universal" flu vaccination in the U.S., meaning that everyone 6 months and older should be vaccinated every year. This includes parents, kids, grandparents, and other family members.

Everyone 6 months and older should get the flu vaccine each season. In particular, people at higher risk for serious complications from the flu; children younger than 5, especially children younger than 2, older people, pregnant women, American Indians and Alaskan Natives, and people with long-term health conditions, such as asthma, diabetes and heart disease.

You should know:

• There are 2 types of flu vaccines²

The "flu shot" is given with a needle and contains an inactivated vaccine (killed virus).

Nasal spray flu vaccine (sometimes called LAIV or "live attenuated influenza vaccine") is administered via the nose and contains a live, modified virus.

No one vaccine is right for everyone. So, talk to your doctor about which is best for each member of your family.

- Vaccines that help protect against all four influenza viruses contained in the vaccines (quadrivalent = two A viruses and two B viruses) will be available in the 2013–2014 flu season.
- You cannot get the flu from the flu vaccine. The viruses in the vaccines are made not to cause infection.
- Some people may experience some side effects from the vaccine (stuffy nose, fatigue, mild fever) but it is not the flu. These symptoms are usually minor and usually go away in a few days.

Where can I get the flu vaccine?

You can get the flu vaccine at many different locations, including:

• healthcare professional's offices • pharmacies • schools • clinics • local health departments • urgent care clinics • hospitals • college health centers • some employers

Do I need to get the flu vaccine every year? ²

The CDC recommends getting vaccinated every year, whether or not you received the flu vaccine last season. Flu viruses are constantly changing and new viruses can appear every year. The flu vaccines are formulated yearly for the changing flu viruses.

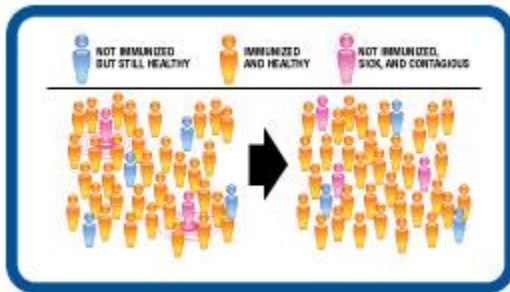
Get vaccinated early! The CDC recommends getting the vaccination as soon as the vaccine is available in your community. The flu season can begin as early as October and you can get the vaccination at any time throughout the flu season. Even getting vaccinated later in the season can help protect you and your family.

Vaccinating Children Can Help With "Community Immunity"

Immunizing enough of the population in a community to create a shield of protection that can provide secondary protection for individuals who have not been vaccinated is referred

to as “community immunity.” People do not get vaccinated for many reasons, including that they may be too young, too old, or that they have an underlying medical condition. In order for “community immunity” to be effective, enough people, in particular children in the community (vast majority of the population) must be vaccinated.³

The illustrations from the National Institutes of Health (NIH) National Institute of Allergy and Infectious Disease (NIAID) at right show how “community immunity”⁴ works to control contagious diseases, like the flu.



If enough individuals can be vaccinated, potential benefits include the indirect effect of reducing flu among persons who have close contact with susceptible individuals and of reducing overall spread within communities.³

Other ways to help protect your family from the flu⁸

Yearly vaccination is the best way to prevent the flu. But, the CDC offers these everyday tips to stop the spread of germs:

- Cover your mouth and nose with a tissue when you sneeze and then throw the tissue away after you use it.
- Stay away from sick people and try to keep anyone in your house who is sick in a separate room, if you can.
- Wash hands often with soap and water.
- Avoid touching your eyes, nose, and mouth.
- Wipe down surfaces in the bathroom and kitchen and wash your children’s toys with a household disinfectant.⁵

Did You Know?

- The flu is an infection of the nose, throat, and lungs caused by influenza viruses
- The flu is a potentially serious contagious disease that can cause illness, hospitalization, and sometimes death.
- Children 2 to 17 years old are nearly 2 to 3 times more likely to be infected with the flu than adults.⁶
- School-age children are the main spreaders of the flu virus to other children, adults, and older people.⁷
- More than 200,000 people, primarily in the elderly, in the United States are hospitalized each year because of the flu: ¹

1. CDC. Seasonal Influenza (Flu) – Q & A: Seasonal Influenza-Associated Hospitalizations in the United States. Available at: <http://www.cdc.gov/flu/about/qa/hospital.htm> Accessed on January 10, 2013.
2. CDC. Seasonal Influenza (Flu) – Key Facts About Influenza (Flu) & Flu Vaccine. Available at: <http://www.cdc.gov/flu/keyfacts.htm> Accessed on July 8, 2013.
3. Nield, LS, et al. Herd immunity: another good reason to vaccinate. *Consultant For Pediatricians*. 2009;8(10).
- 4 National Institutes of Health. Community Immunity (“Herd” Immunity). Available at: <http://www.niaid.nih.gov/topics/pages/communityimmunity.aspx>. Accessed on May 30, 2013.
5. CDC. Seasonal Influenza (Flu) – How To Clean and Disinfect Schools To Help Slow the Spread of Flu. Available at: <http://www.cdc.gov/flu/school/cleaning.htm> Accessed on December 6, 2012.
6. Glezen WP, Taber LH, Frank AL, Gruber WC, Piedra PA. Influenza virus infection in infants. *Pediatr Infect Dis J*. 1997;16:1065-1068.
- 7 Glezen WP, Couch RB. Interpandemic influenza in the Houston area,1974–76. *N Engl J Med* 1978;298:587-592.
8. CDC. Seasonal Influenza (Flu) – CDC Says Take 3 Actions To Fight The Flu. Available at: www.cdc.gov/flu/protect/preventing.htm Accessed on July 8, 2013.