



From Your ANA President

All for one, and one for all

I RECENTLY RETURNED from an international nursing conference in Yokohama, Japan. It was an amazing trip. But I

must admit, although I was looking forward to the event and to visiting yet another country as president of ANA, I still find international travel somewhat disconcerting.

Once I began interacting with my nurse colleagues from around the globe, however, I felt I was at home—with kindred spirits. When it comes right down to it, we, as nurses, share two crucial goals. We all want the best for our patients and the best for our profession. And whether we are from the U.K. or Africa or Sweden, we know that having positive working conditions will help us achieve those goals, as well as safeguard our health and well-being.

One of my roles at the International Council of Nurses conference—which had the theme, “Nurses at the Forefront: Dealing with the Unexpected”—involved participating in a panel on international nurse migration.

The United States is considered a “destination country” for nurses who come here seeking opportunities to practice and, quite often, to improve their economic status. As a destination country, we have both an obligation and a challenge to meet the needs of the domestic nurse workforce, as well as the needs of foreign-educated nurses who come to our shores.

ANA takes this obligation very seriously as we seek to balance the demand for nursing services in our country and those in countries where nurse migration is a constant.

The reality is this: We do have a nursing shortage in our country. ANA believes one of the most effective strategies to solve the problem is by addressing the significant workplace issues that persist here—despite our country’s wealth. As you know, nurses in many workplaces still are struggling with unsafe staffing conditions, insufficient nursing staff support and wages out of alignment with the significant responsibilities and critical-thinking skills we employ every day. These are the same conditions that immigrant nurses often face in their home countries.

Another reality is that the United States’ health care industry has a long history of relying on foreign-educated nurses to address staffing shortfalls. ANA and its constituent member associations have always welcomed foreign-educated nurses to our country. We want to ensure these nurses are treated with respect, that our immigra-

tion laws are fair and, when possible, work with nurse employees to ensure equitable treatment.

We also know that immigrant nurses have much to offer as nursing care providers in the United States, and we have benefited from their desire to migrate. In a 2003 National Council of State Boards of Nursing study, foreign-educated nurses reported that they felt highly prepared from a clinical perspective to administer medications, provide direct care to two or more clients, and work effectively within a health care team. On the other hand, the same group felt less prepared to supervise care provided by others, provide direct care to six or more patients, and to appropriately utilize research findings in providing care and understanding clients’ cultural needs.

Recently, ANA and the International Centre for Nurse Migration held two major conferences to discuss strategies to create a positive work environment for all nurses and to facilitate the successful integration of internationally recruited nurses into the health care team, and will soon be publishing a document with recommendations to fulfill these goals.

What we already know, however, is that when integrating foreign-educated nurses into the environment, we should validate and value their contributions to the nursing care team, provide them small-group skills sessions to increase their comfort and knowledge base, and model autonomy and patient advocacy. We also believe that, when needed, we should strengthen foreign-educated nurses’ language and communication skills, which are crucial factors in our profession.

Finally, I think we should take on an “all for one, and one for all” philosophy when it comes to the global work environment. We need to share effective strategies and work together to ensure that nurses here and abroad, domestic and foreign-educated, are able to provide the care patients deserve under the best possible conditions. I cannot honestly say I look forward to my next 12-hour plus international flight, but I do look forward to meeting the many international colleagues and friends that share our great profession.

A handwritten signature in black ink that reads "Rebecca M Patton RN". The signature is written in a cursive, flowing style.

Rebecca M. Patton, MSN, RN, CNOR
President
American Nurses Association