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Healing our hazardous environment

By Kathryn V. Hall, MS, RN, Brenda M. Afzal, MS, RN, and Barbara Sattler, DRPH, RN

SINCE 1950, at least 70,000 new chemical compounds have been invented and dispersed into our environment. Only a fraction of these have been tested for human toxicity. We are, by default, conducting a massive clinical toxicology trial, and our children and their children are the experimental animals.

— From *Raising Children Toxic Free: How to Keep Your Child Safe from Lead, Asbestos, Pesticides, and Other Environmental Hazards*

Our bodies are becoming reflections of our polluted air, water, soil, and foods and the toxic chemicals in everyday products. In the last several years, the

Why we need environmental health task forces—and how to get started creating one

Centers for Disease Control and Prevention's National Health and Nutrition Examination Survey has measured toxic chemicals in the blood, urine,

and breast milk of thousands of Americans. The findings: We all have hundreds of these chemicals in our bodies. And fetal cord blood contains similar contaminants.

We now recognize the environmental hazards we and our patients encounter in our workplace—the chemicals in floor strippers, pest-control substances, and sterilants—as well as the healthcare products that cause unnecessary chemical exposure. As a result, we have become interested in more responsible purchasing and other initiatives.

Nursing initiative

In 1995, the Institute of Medicine Committee was formed to study nursing, health, and the environment. The committee brought together nurses who have expertise in practice, research, education, and policy with professionals from other disciplines to explore how nurses could deal with environmental threats to health. The committee concluded that nurses should be involved in environmental health and made several recommendations:

- Environmental health should be re-emphasized in the scope of responsibilities for nursing practice.
- Nurses should participate as members and leaders in interdisciplinary teams that address environmental health problems.
- The concept of advocacy should be expanded to include advocacy on behalf of groups and communities, in addition to advocacy for individuals and their families.

As nurses became increasingly aware of the connections between the health of the environment and the health of their patients and themselves, they looked to their associations for information and tools. But most nursing associations didn't have the structure that allowed them to respond to environmental health concerns and to support their members' need for information.

To establish an entity in state associations that



would increase their involvement, the Maryland Nurses Association, along with a 10-state American Nurses Association (ANA) Constituent Member Association (CMA) Partner Group, developed a document called "Guidance For Developing an Environmental Health Task Force." This new entity would allow associations to take a leadership role in protecting the health of their members, patients, and communities and in developing and supporting environmental health policies in their states.

Questions of the month

To shape the idea of an environmental health task force, we focused on one question a month:

- If we want to make an impact on environmental health in our states, what internal structure or process do we need to be effective?
- How would you go about identifying and engaging members with expertise and interest in environmental health issues?
- How can we identify and partner with environmental organizations active in our state?
- How can your association identify and address legislation on environmental health issues?

Creating the guidance document

After receiving funding to develop the document, the Maryland Nurses Association asked interested CMAs to complete a survey on their environmental health efforts. The Maryland Nurses Association then selected nine CMAs to join the partner group: Alabama, Connecticut, Florida, Michigan, New Jersey, New York, Ohio, Oklahoma, and Washington.

The group set up a series of conference calls—each focusing on a "Question of the Month." (See *Questions of the month*.) Each state had the opportunity to address the question from their states' perspective and to provide information about their experiences. The key components for forming the new entity, or Environmental Health Task Force, included organization structure and support, identification and selection of initiatives, identification of organizational partners, available resources, and strategies for addressing initiatives.

Much work has been accomplished since the project was initiated in June of 2005. The guidance document was completed and can be downloaded from the Maryland Nurses Association's website. The document was also published and distributed to the presidents and executive directors attending the 2006 ANA Constituent Assembly. And several members of the partner group have begun to develop their own

environmental entities in their associations; others have received funding to support environmental initiatives in their associations.

Using the guidance document in your association

The Environmental Health Education Center of the University of Maryland School of Nursing, which worked closely with the Maryland Nursing Association, is now initiating an effort to help CMAs and other interested nursing associations use the guidance document. Over the next year, 10 more associations will be invited to participate in discussions and workshops and learn about resources and funding available to assist in developing an environmental entity. Interested associations should contact the authors.

Meeting our obligations

Our patients, families, and communities are threatened by environmental pollution in our homes, workplaces, and communities. We have an obligation to learn about the threat, engage our nursing skills, speak the truth, and guide

public policy for healthy environments. Establishing environmental health task forces in our nursing associations helps us take a giant step toward meeting those obligations. ★

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For a complete list of selected references, visit www.AmericanNurseToday.com.

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