PUBLIC POLICY INVOLVEMENT
BY NURSE PRACTITIONERS

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ABSTRACT: The purpose of this study was to determine the level and
type of public policy involvement, as well as perceptions regarding public
policy involvement of nurse practitioners. A four-page survey was mailed
to a sample of 600 certified nurse practitioners, randomly selected from
the American Academy of Nurse Practitioners’ database. A three-stage
mailing procedure yielded a 73% response rate. Most (59.6%) were in-
volved in three or less public policy activities. The most frequently indi-
cated activities included voting (87%) and giving money to a campaign
(57%). Lack of time was the most frequently cited barrier, while improving
the health of the public was cited most often as a benefit. Overall, nurse
practitioners felt they had limited knowledge on how to go about changing
public policy, were somewhat interested in public policy issues, believed
the actions of public policymakers were very important, and believed
these actions influenced the public’s health. The majority (79%) had re-
ceived some information/education on public policy change. Those most
active in public policy had high public policy efficacy expectations and
perceived a high number of benefits to public policy involvement.

INTRODUCTION

Changes in public policy could be influential in changing the health
behavior and health status of many Americans. Nurse practitioners, who
receive an education based on the health model to prevent illnesses and
promote health, have an opportunity to advocate for public policy changes
that may have a positive effect on the health and lifestyle of Americans. These
changes could be facilitated faster if they are made through adjustments in
public policy.2,3
Public health policy affects all areas of our lives on a daily basis. Some of the most successful interventions in public health policies include fluoridation of drinking water, installation of airbags in motor vehicles, etc., things not under direct public control. The active involvement of nurse practitioners in public policy could prove to be an important step in facilitating behavior and lifestyle changes in individuals. Joel stated that nurses are a vital political resource, and have been fulfilling the role of patient advocate for quite some time. Nurses have been referred to as the "sleeping giant" of healthcare. The nurse to population ratio in the United States is the highest in the world. Nurses form the largest occupational group working in health services. Therefore, they have the potential to be influential advocates for public health. Warner identified four areas where nurses could advocate for policy change: prenatal and postnatal care, the care of the mentally ill (adults and children), care of the elderly, and care of the disabled and chronically ill.

Nurses are currently involved in the political process at the national level in Washington, DC. As of 1993, there were hundreds of nurses in the Executive Branch of government, approximately one dozen in the Legislative Branch, and an undetermined number employed as lobbyists. Although there are many nurses in government, Sharp pointed out that only a few of them are actually involved in the health care reform process.

One way to be effective in public policy is for nurses to advocate change in financing and organizing of health care for the general population, especially for the underserved populations. Additionally, to be effective in the political arena some studies suggest that nurses need further education in health care policy issues, and recommend the inclusion of a course on political involvement as part of the nursing school curriculum.

A comprehensive review of the literature revealed that the political activity of nurse practitioners is not very extensive. Most studies assessing public policy involvement of nurse practitioners have focused on health care reform, prescriptive authority, and reimbursement issues. These studies suggest that they are active in areas where they can attain personal benefits, not areas that benefit the general population.

Lack of involvement in public policy by nurse practitioners could limit the ability of the profession to have a larger impact on the health and well-being of the public. Thus, understanding factors predictive of nurse practitioners’ involvement in public policy could identify areas where changes could be made, thereby, increasing the opportunity for greater political participation.

The present study utilized the self-efficacy model of behavioral change to investigate the involvement of nurse practitioners in public health