

# In This Issue



4 AFT News Roundup

6 Class of 2024

8 Narcan Kits

10 Professional Practice Committee

**11** Union and their Benefits

12 Legislative Committee

**13** License Renewal Time

15 Male Trafficking

**18** Nursing Impacts on Vulnerable Population

20 CLC Endorsments

21 Health & Safety Committee

21 AFT Votes

22 Art Contest

23 Calendar of Events

24 Trending Topics In Nursing

AUTHOR GUIDELINES FOR THE ALASKA NURSE: The Editorial Committee welcomes original articles for publication. Preference is given to nursing and health-related topics in Alaska. Authors are not required to be members of the AaNA. There is no limit on article length. Include names and applicable credentials of all authors. Articles should be Microsoft Word documents. Photos are encouraged and should be high resolution. Please include captions and photo credits at time of submission. All content submitted to The Alaska Nurse becomes property of the Alaska Nurses Association. Submit all content by email to Geri@aknurse.org.



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To update your address, contact AaNA:
Phone: 907.274.0827
Email: aknurse@aknurse.org

The Alaska Nurse is produced in Anchorage, Alaska and published four times.

# From our President



As the fall leaves begin to show their bounty of colors, a new school year descends. And with it, the advent of local state and federal elections. Webster's dictionary defines civic engagement as communities working together or individuals working alone in both political and non-political actions to protect public values or make a change in a community. The goal of civic engagement is to address public concerns and promote the quality of the community. As nurses, we utilize these skills with our patients daily by advocating for their needs and safety while advancing our roles in our community. We serve by participating as agents of change through various mechanisms that include boards, organizations, and even the legislative arena.

This issue of the AK Nurse focuses on Civic Engagement; a topic in nursing that goes beyond the

bedside and can be seen throughout our legislative and professional practices. We will look at various committees and organizations that are making an impact on our patients' rights, promoting safe staffing ratios, safer working environments for healthcare, and civic activities that aid and serve our families and communities. We all can make a difference in the lives we care for, and it is up to us to lead the way to an undauntable future. I am always open to meet for a cup of coffee and a chat, so please contact me at any time.

Enjoy the Leaves and Stay Safe,

Shannon J. Davenport

Shannon J. Davenport, BSN, MSN, RN President, Alaska Nurses Association





# IN AFT HEALTH CARE: 'RACE IS NOT A RISK FACTOR'

"For much of my life, I'd viewed healthcare as the great equalizer," writes Dr. Brian H. Williams in

Discounted
long-term care
insurance program
for AFT members
and their families.





the Spring issue of AFT Health Care. "Black or white, rich or poor, we all likely need to see a doctor at some point in our lives, and I thought that medical care, like education, was designed to level the playing field. Even as a doctor who witnessed otherwise, I maintained that fallacious view for many years. But now I see the ways institutional racism undermines our healthcare infrastructure and patient care." This article was excerpted from his 2023 book "The Bodies Keep Coming: Dispatches from a Black Trauma Surgeon on Racism, Violence, and How We Heal" with permission from Broadleaf Books.

Read the powerful excerpt: www.aft.org/hc/spring2024/williams

# **AFT'**S NEW PHYSICIANS' ORGANIZING INITIATIVE AIMS TO TRANSFORM HEALTHCARE

On June 18, the AFT announced the launch of the Union Physicians of AFT, a dynamic new group aimed at uniting doctors. Faced with crippling burnout from administrative overload, frustration over financial barriers affecting their patients' capacity to pay, and lack of respect from corporate owners who put profits over patients, they're organizing with the AFT to fight back and make their voices heard.

I'm a union physician with AFT because I've seen doctors' voices being drowned out by administrators who center profits over patients. We took an oath to provide the best care we can for our patients, and it is increasingly difficult to do this when our voices and expertise are ignored.

–Jennifer Lincoln,MD, OB/GYN, Portland, Oregon



EXPLORE THE INITIATIVE: www.aft.org/news/aftsnew-physicians-organizing-initiative-aims-transformhealthcare

# AFT SUES MOHELA FOR FAILING 8 MILLION STUDENT BORROWERS

For too long, student loan servicer MOHELA has deflected calls from student borrowers asking for help,

illegally deducted payments from borrowers' bank accounts without permission, misinformed borrowers about payment deadlines, and failed to bill borrowers in a timely way so they could stay on track with their payment plans. For these bad actions and others, the AFT has sued MOHELA, to hold the student loan servicer accountable and help borrowers.

GET THE FACTS: www.aft.org/press-release/ embattled-student-loan-servicing-giant-mohela-hitgroundbreaking-consumer-protection

# PARTNERSHIPS IN POLITICS MEAN REAL SOLUTIONS FOR THE PUBLIC GOOD

The AFT is a solution-driven union, and one of the best solutions to education, healthcare, and public



service problems is to elect people who will work for the public good. At the AFT convention in July, Chicago Mayor Brandon Johnson, Chicago Teachers Union President and AFT Vice President Stacy Davis Gates, New York State Sen. John Mannion, and New York State United Teachers President and AFT Vice President Melinda Person showed us all how to partner successfully to advance policies that help working people in the most meaningful ways.

LEARN MORE: www.aft.org/news/partnerships-politics-mean-real-solutions-public-good

# TOP NATIONAL OFFICERS RE-ELECTED, RECOMMIT TO REAL SOLUTIONS

On the final day of the AFT convention, delegates re-elected Randi Weingarten as president, Fedrick C. Ingram as secretary-treasurer, and Evelyn DeJesus as executive vice president. Additionally, 43 vice presidents were elected to the union's executive council.

READ ABOUT THE ELECTION: www.aft.org/news/topnational-officers-reelected-recommit-real-solutions

# CODE RED A SUCCESS FOR AFT'S HEALTHCARE MEMBERS

AFT's Code Red campaign is an overwhelming success for affiliates that focused their energy on



targeting staffing, workplace safety, training and infrastructure, and the accountability of healthcare corporations.

SEE THE SAFE STAFFING SUCCESSES: www.aft.org/news/code-red-success-afts-healthcare-members

# **AFT** CELEBRATES HISTORIC ORGANIZING WINS

The AFT believes organizing is the way to gain upward economic mobility and improve the lives



of working people, families, and communities. This has led to the union's unprecedented growth from 1.4 million members when Randi Weingarten became AFT president in 2008 to 1.8 million today.

CHECK OUT THE HISTORIC WINS: www.aft.org/news/aft-celebrates-historic-organizing-wins

# AFTER A STRIKE AND LOCKOUT, PROVIDENCE NURSES READY TO RETURN TO THE BARGAINING TABLE

In a historic show of solidarity, more than 3,000 nurses from the Providence Health system at St. Vincent, Hood River, Newberg, Willamette Falls, Milwaukie, and Medford hospitals in Oregon walked out on June 18 to conduct a three-day strike. The nurses,

Continued on page 7



# Congratulations Graduates!

THE ALASKA PACIFIC UNIVERSITY IN CORRELATION WITH THEIR PRACTICAL NURSING PROGRAM HAVE HAD GRADUATES FROM THREE LOCATIONS: THE MATSU VALLEY, FAIRBANKS, AND THE NEWEST COHORT IN JUNEAU. BELOW ARE THE PICTURES FROM THE THREE GRADUATING CLASSES.



# Fairbanks' second cohort had six students graduate

Pictured left to right:
Alicia Cole (Professor),
Rose Douglas,
Marianne Murray (Director),
Mehll Castillo,
Geneva Lamoureux,
Danielle Kern (Professor),
Staci Seagle (Professor),
Elizabeth Hentze,
and Alicia Lydon.
Not pictured: Elizabeth Kelley.

### From Juneau

Pictured left to right:
 Apakasi Luka,
 Keegan Carroll,
 Tasha Galletes,
 LoveAnn Truitt, Amanda
 Mosher Schmitz,
and Lawrence "Chase" Acuff.
Not pictured: Hannah Cinco.



From Mat-Su
Pictured left to right:
Sara Hutcheson,
Connor Monroe,
Ryann Kane,
Montanna Requa,
and Lydia Wood.



By opening programs such as the Practical Nursing Program, it allows individuals from across the state to pursue nursing careers while maintaining their ability to remain in their home.

CONTINUED FROM PAGE 5

represented by the Oregon Nurses Association, were entangled in negotiations for nine months, spending



more than 60 bargaining sessions addressing issues like unfair labor practices, healthcare benefits, and safe staffing. The strike marked a turning point. For

the first time, the nurses were united across different hospitals, collectively challenging the monolithic health system. "This is a truly historic moment for us within the Providence system," Smith says. "We've always had separate contracts, but now we stand together, demanding change."

STAY UP-TO-DATE ON THEIR NEGOTIATIONS: www. oregonrn.org/page/providence

# A BENEFIT OF MEMBERSHIP: LONG-TERM CARE INSURANCE

Did you know that 70% of people turning 65 can expect to use some form of long-term care during their lives? AaNA-AFT members and their eligible family members have access to special discounts on long-term care insurance solutions. AFT has partnered with Back Nine Planning to provide with a dedicated long-term care specialist and discounted rates not available to the broader public.

**ACCESS YOUR MEMBER BENEFIT: www.aft-ltc.org** 

# **AFT+ Member Benefits**

AaNA union members have access to a rich array of discounts, services, and benefits that go beyond the workplace. Benefits include exclusive financial products, trauma counseling, pet insurance, scholarships, and savings on travel, computers, prescriptions, cell phone service, and so much more!

Explore your benefits at www.aft.org/member-benefits

# NARCAN KITS

The AaNA has been building Narcan Kits this past year and will continue to have periodic volunteer opportunities for nurses to aid with volunteer hours. In the two sessions we have had we have been able to create over 3.260 kits that will be distributed throughout the state to organizations and communities to assist with the overdose prevention strategy that is being implemented nationwide to help with the growing opioid addiction crisis. Naloxone, also commonly known as Narcan, quickly reverses the life-threatening effects of an opioid (narcotic) overdose. Taking too much of an opioid can slow or stop your breathing and quickly lead to death. If naloxone is given quickly, it may save a life. Opioids are strong medicines and include prescription medicines like hydrocodone, oxycodone or morphine (used for pain), and street drugs like heroin. Many prescription drugs are now found on the streets, such as illegally manufactured fentanyl, which has fueled much of the U.S. overdose deaths in recent years.

- Naloxone is a safe medicine, is not addictive, and will not hurt someone who does not have opioids in their system. Naloxone is also powerful and works quickly.
- Naloxone replaces the opioids from their receptors in the brain. This allows someone who is having an opioid overdose to begin breathing normally.
- Most people usually wake up within 1 to 3 minutes of receiving naloxone. However, it only reverses an opioid (narcotic) overdose and will not reverse overdoses from other drugs like cocaine or methamphetamine.

# A NARCAN EMERGENCY KIT MAY CONTAIN:

- a naloxone (Narcan Nasal Spray)
   device that contains the medicine.
   Each spray device delivers one dose
   of medicine. Brand names include
   Narcan and Kloxxado.
  - ▶ injectable generic naloxone along with syringes and needles

Know the signs of an overdose



FACE is clammy to touch and has lost color.
Has trouble speaking. Center part of their eye very small,
sometimes called "pinpoint pupils."



**BODY** is limp. Fingernails or lips are turning blue or purple.



**SLEEP** is deep and person cannot be woken. Will not respond to your voice or touch.



**BREATHING** is slow or has stopped.



**HEART** is slow or has stopped.

Stop an overdose. Save a life. Carry naloxone.





# PROFESSIONAL PRACTICE COMMITTEE



The professional practice committee answers questions related to nursing practice and any Alaska scope of practice questions and gathers facts to help nurses who have questions about whether they are practicing within their nursing scope in Alaska. Most recently, we have worked with the AaNA legislation committee to educate legislators, the public, and other nurses about the nursing compact and why it is not good legislation for Alaska. This committee has been available for testimony during the legislative session to answer questions about nursing legislation. Our next big project will be to have the Alaska legislators establish staffing ratios for the state of Alaska. This committee will be researching what other states have done to enact staffing ratios in their states and will utilize other Alaskan nurses to give us input so our ratios are realistic and keep nurses from being overburdened when staffing shortages occur. We need these ratios to keep nurses and the public safe. We report to the AaNA board of directors monthly.

If you have an interest in any of these topics, please feel free to contact Beth@AKnurse.org



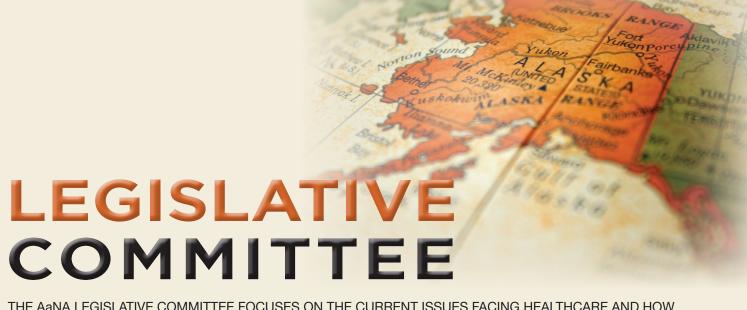
What is a union you may ask; a union is a democratic organization formed by workers who come together to use their strength to have one unified voice in their workplace. They usually have the same trade or profession. Through their union, workers can negotiate from a position of strength with employers over wages, benefits, workplace health and safety issues, job training and other work-related issues. Unions can be in the private or public sector. They were established after the National Labor Relations Act of 1935, also known as the Wagner Act. This act guarantees unions the right to collective bargaining.

Belonging to a union is a form of activism. Unions allow the workers to stand up for their rights as workers. There are pros and cons to organizing a union to represent workers' rights and negotiate terms of their contract. Unions offer protections to write grievances, strike when terms of the contract are breached, allow workers to return to work after striking and have representation for work complaints, and decrease workplace bullying.

Non-union employment is authoritarian and unionized employment is democratic in nature. The Union leaders are voted in by the Union members in a democratic way. Know your Wagner rights. Below you can find your protections under the Wagner Act.

Labor Day is the celebration of laborers. And what better way to celebrate what workers in America have done for the working class, belong to a union and be unified. Labor Day is an annual celebration of the social and economic achievements of previous American workers. Labor Day is always observed on the first Monday in September. This is also the day when labor activists pushed for a federal holiday to recognize the vast achievements workers have made to America's strength, prosperity and well-being as a nation. By belonging to a union, you are contributing to the history of American workers that have united for change.

Belonging to a union offers many opportunities to make permanent change in your board of nursing legislation such as delaying the Nurse Licensure Compact (NLC) and we are against HB 149 and SB 67, because we the nurses realize that we are not experiencing a nursing shortage. we are experiencing a staffing crisis and those are two very different issues facing nursing today. Our union also offers a quarterly magazine filled with a lot of important information for Alaskan nurses such as license renewal reminders, continuing education opportunities at no additional cost to members, online and in-person events i.e., monthly union meetings, book club, Tuesday Talks where various topics are CONTINUED ON PAGE 12



THE AaNA LEGISLATIVE COMMITTEE FOCUSES ON THE CURRENT ISSUES FACING HEALTHCARE AND HOW THEY CORRELATE TO OUR LOCAL, STATE, AND NATIONAL LEGISLATION. THE LOCAL LEVEL CAN ENCOMPASS LABOR WALKS FOR LOCAL MAYORAL/ASSEMBLY CANDIDATES TO WORKING WITH OUR UNION BROTHERS AND SISTERS IN AFL-CIO EVENTS. THE STATE AND NATIONAL LEVELS ENTAIL FIGHTING FOR THE RIGHTS OF NURSES TO INCLUDE SAFE STAFFING RATIOS TO THE NURSE LICENSURE COMPACT AND CERTAIN LEGISLATIVE BILLS THAT WILL IMPACT HEALTHCARE WHILE CREATING RELATIONSHIPS WITH OUR SENATORS AND REPRESENTATIVES TO AID IN FUTURE ENDEAVORS. THE LEGISLATIVE COMMITTEE IS COMPOSED OF AANA MEMBERS FROM ALL GENRES OF HEALTHCARE THAT INCLUDE BOTH UNION AND NON-UNION ROLES IN NURSING. BY BEING AT THE FOREFRONT OF LEGISLATIVE ACTIONS, WE CAN HELP SHAPE OUR HEALTHCARE'S FUTURE AND PROVIDE SAFER POLICIES AND PRACTICES FOR ALL NURSES.

FOR MORE INFORMATION, PLEASE CONTACT SHANNON@AKNURSE.ORG OR SARA@AKNURSE.ORG

CONTINUED FROM PAGE 11

discussed for one hour and CEU's are earned, attending the BON meetings for volunteer hours, and mental health first aid meetings so nurses learn how to care for themselves like they care for their patients. Our union just won a great contract for the next three years at PAMC (Providence in Anchorage) and PHKMC (PeaceHealth in Ketchikan). At PAMC, wage increases, longevity increases for nurses who have been employed for over 32 years, better benefits such as 100% wage on short term disability, safer staffing ratios in high acuity units such as emergency departments and critical care units. When an issue comes up nurses have the option of completing an unsafe assignment form online at the AaNA website so that the union can document unsafe assignments and negotiate for safer staffing ratios on the next contract or write up a grievance on an unsafe assignment so that it

deters management form allowing unsafe staffing from occurring. If you have an idea, please bring it up at the next union meeting. All union meetings for PAMC nurses are held every 3rd Thursday of the month online via zoom from 4pm-6pm. Contact local union president, Terra Colegrove for more details. terra@aknurse.org

Ketchikan Nurses union meetings are the first Thursday of the month. Contact local union president, Jori Nicholson for more details. jori.nicholson@yahoo.com

RNs United at Central Peninsula General Hospital contact local union president Jenipher Young for more details. jenipher.ak.rn@gmail.com

We all have a voice, take advantage of your union benefits, you have paid for it. The more nurses get involved in the union, the bigger the voice we have in our state.



# IT'S LICENSE RENEWAL TIME!

By the Board of Nursing Team within the Division of Corporations, Business, and Professional Licensing

August 7, 2024

All nurse licenses and nursing aide certifications issued by the Alaska Board of Nursing must renew biannually in the evennumbered years. For 2024, the Certified Nursing Aide (CNA) renewal cycle has been completed; and the Licensed Practical Nurses (LPN) renewal cycle is in progress. All LPN licenses must be renewed before the September 30, 2024 license expiration date. Additionally, Registered Nurse (RN) and Advanced Practice Registered Nurse (APRN) licenses expire on November 30, 2024 and must be renewed before that date. Renewal applications become available 60-90 days prior to the respective license's expiration date.

Nurses will be notified when their license renewal cycle opens. Nurses who have opted

for electronic communications will receive a notice via the email address on file, and those who have not will receive their notice at the mailing address on file. You can ensure you'll received your notification by accessing your MY LICENSE account today and confirming your notification preferences, email address, and/or mailing address on file are current. If you do not see your renewal notice, doublecheck your junk or spam folders. Please be aware that lack of a notification notice does not waive the requirement to renew the license timely. Licenses that are not renewed on or before the expiration date will be required to go through the reinstatement process. It is illegal to work with a lapsed license, so if a license lapses, a nurse must discontinue work in Alaska until the CONTINUED ON PAGE 14

license is reinstated.

While completing the renewal application, make sure to read all questions carefully and if any supporting documentation is required, provide as quickly as possible. The renewal fee is \$200 or \$100 for licenses that were issued less than one year before the expiration date.

The majority of nurses can renew their license online through the MY LICENSE system in MyAlaska once their license type renewal period opens. Nurses who are ineligible for online renewal can access hardcopy applications on the Board of Nursing's Applications & Forms webpage - which must be mailed to the address listed at the top. Hardcopy applications cannot be accepted via email. Common reasons why you might not be able to renew online include answering "yes" to a professional fitness question that requires more information, or a need for an updated fingerprint card requested previously that has not yet been received.

For an LPN renewal application to be filed timely, it must be submitted online or postmarked by September 30, 2024. RN and APRN renewal applications must be submitted online by November 30, 2024, or postmarked by December 2, 2024 (since November 30th is a Saturday). We encourage all licensees to renew as far in advance as possible to allow adequate time if a licensee runs into any issues accessing their MY LICENSE account or any other delay in the renewal process.

If an application and fee have been submitted timely, but the application is incomplete, the license expiration date will be extended by up to three months to allow the nurse to continue work while the remaining pieces of the application are submitted or processed. The extension is not available for any renewal applications submitted late.

A nurse can confirm their license has been renewed by checking their MY LICENSE account or by searching for their license through the State of Alaska's online Professional License Search.

After the renewal process is completed, a nurse may receive a notification from the Board of Nursing that states that they have been randomly selected for audit. If you receive this notification, please respond to the request for documents timely per 12 AAC 44.660. You will be asked to supply documentation to verify the continuing competency requirements you attested to having met on your renewal application. For example, if you state on your renewal application that you met the continuing competency requirements through 320 hours of employment and 30 hours of CEUs, you will need to have your employer complete a Board of Nursing Verification of Employment form and you will provide copies of your earned CEU certificates. The CEU certificates must include your name, date completed, hours earned, and nursing certifying body. If you are using professional activities to meet continuing competency requirements, you will need to have the appropriate organization(s) complete the Board of Nursing Professional Activities form attesting to the volunteer duties and hours spent with their organization.

If you have questions about renewal, visit the Board of Nursing website or email boardofnursing@alaska.gov.

To keep informed about Board of Nursing business and license renewals, please sign up to receive optional communications here and/or through the Nursys e-notify system.





By Fevee Fontejon LPN, RN Baccalaureate Student at Saint Martin University, Lacey, WA Paper Written as Promoting Population Health Social Determinant Assignment Associate Professor Dr. Burdette-Taylor PhD, MSN

# **Trafficking in Person**

United States (U.S.) Trafficking Victims Protection Act of 2000 (TVPA) defines trafficking in persons as the recruitment, transportation, harboring, or receipt of individuals through coercion or deception for exploitation, such as forced labor, sexual exploitation, domestic servitude, or organ harvesting (U.S. Department of Justice, 2023). This exploitation can occur regardless of whether the victims are physically moved. Human traffickers often resort to violence, false promises of employment or education, and abuse of authority to deceive and control their victims. This practice is commonly referred to as "modern slavery." This pervasive crime affects individuals of all genders, ages, and backgrounds.

Despite increasing global awareness of human trafficking, male victims often remain hidden due to misconceptions and stereotypes. These victims endure unimaginable suffering, trapped in a cycle of abuse and manipulation. Male trafficking represents a significant social injustice closely tied to disparities in healthcare. Understanding the complexities of trafficking among males is essential for addressing healthcare inequities, as it exposes a world marked by trauma, exploitation, and systemic biases. This paper aims to shed light on the critical issue of trafficking among males to promote equitable healthcare and confront the realities of exploitation head-on.

# **Implicit Bias Impact on Under-Identified Victims**

Males are increasingly recognized as victims of human trafficking, with both boys and men experiencing a 26% increase in victimization from 2019, according to the 2022 CONTINUED ON PAGE 16

Global Report on Trafficking in Persons. Despite this rise, convictions dropped by 35% in 2020. The report highlights that 40% of all identified victims of human trafficking are males, shedding light on a previously overlooked demographic (UNODC Research, 2023). Male trafficking victims are exploited in various ways, including forced labor in sectors such as agriculture, construction, manufacturing, and domestic work. Additionally, they are subjected to sexual exploitation, forced begging, and coerced recruitment into armed groups. Despite the prevalence of male trafficking victims, societal misconceptions and stereotypes often lead to their neglect.

Social services, healthcare, and legal systems tend to focus primarily on assisting female victims, particularly those who have been sexually exploited. This disparity arises partly from the stereotypical belief among policymakers and healthcare that males are typically perpetrators, not victims of trafficking, or that they are less susceptible to exploitation. Such misconceptions are reinforced by traditional gender norms that emphasize male strength and resilience. Consequently, male trafficking victims face significant barriers to identification, protection, and access to support services. The stigma surrounding male victimization, coupled with the reluctance of victims to self-identify, further complicates their situation. Many fear judgment, shame, or retaliation, particularly in cases of sexual exploitation, where societal attitudes toward male victimhood can be particularly harsh. Moreover, systemic factors such as poverty, discrimination, and inadequate legal protections exacerbate the health disparities experienced by male trafficking victims. Addressing these challenges requires a concerted effort to challenge stereotypes, improve awareness, and provide tailored support services to male victims of trafficking.

# Factors Sustaining Modern Slavery Industry

At its root, human trafficking is a criminal enterprise primarily driven by financial gain. Male trafficking industry thrives based on supply and demand, with traffickers exploiting vulnerable individuals for profit, while buyers perpetuate the cycle of abuse through their demand for exploitative services (Cockbain & Bowers, 2019). Human traffickers' prey on the vulnerabilities of their victims, targeting individuals with unmet needs or desires, such as economic hardship, lack of social support, or aspirations for a better life. Through coercion, deception, and violence, traffickers lure their victims into situations of exploitation, often promising false opportunities or resorting to threats and manipulation to maintain control. The demand side of trafficking is heavily perpetuated by buyers from diverse backgrounds and socioeconomic statuses. They are driven by various motivations such as ignorance, addictions, or a callous indifference towards the suffering of their fellow human beings. Whether seeking cheap labor, commercial sex, or other forms of exploitation, these buyers fuel the demand for trafficked individuals, contributing to the profitability and perpetuation of the modern slavery industry. The cycle of exploitation persists as traffickers capitalize on the demand for their illicit services while buyers, knowingly or unknowingly, enable and sustain the exploitation of these vulnerable individuals (U.S. Department of State, 2023).

# Public Health Initiatives Addressing Male Trafficking

Addressing the modern slavery industry requires a comprehensive effort to disrupt both the supply and demand sides of trafficking. Traffickers should face stricter penalties, such as lengthier prison sentences, substantial fines, public and asset forfeiture while buyers should face criminal charges, non-waivable

fines and fees, and long-term imprisonment along with businesses complicit in trafficking. Trauma-informed care workshops are essential for healthcare providers and first responders so they can address the complex trauma experienced by trafficked males. It is important for healthcare providers and policymakers to recognize the signs of trafficking, such as restricted movements, signs of violence, or sudden changes in behavior, and not punish victims for things they were forced to do under the trafficking duress. Legal and healthcare agencies should protect victims from further victimization by preventing punitive measures by recognizing that coercion and exploitation are inherent in trafficking situations and, instead, provide them with the support they need to recover. This includes housing, medical care, counseling, legal help, and reintegration support. The community needs to challenge biases that prevent men from being recognized as victims and make sure everyone gets the help they need. Investing in research is key to understanding trafficking better and finding ways to stop it. By studying different patterns of trafficking and figuring out how many people are affected, stakeholders can develop more effective strategies and allocate resources for prevention, detection, response, and support (Polaris Project, 2023). By refusing to take part in exploitative practices, pushing for policy changes, and supporting victim services, the community's involvement can make a major difference and ultimately save lives.

### Conclusion

In conclusion, male trafficking represents a grave violation of human rights, exploiting vulnerable individuals for profit and causing profound physical and psychological harm. Health disparities among male victims further exacerbate their already challenging circumstances, as limited access to

healthcare and social stigmatization contribute their marginalization. Addressing disparities requires stringent law enforcement measures, targeted victim support, and initiatives to challenge societal norms that enable trafficking. Advocacy is essential in raising awareness, empowering communities to combat trafficking, and prioritizing the protection of male victims. Despite their immense challenges, male trafficking survivors demonstrate remarkable resilience in overcoming their experiences and rebuilding their lives. Significant change and a brighter future for every person impacted by human trafficking can be achieved by standing up for their rights and offering the assistance they require.

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# NURSING IMPACTS ON A VULNERABLE POPULATION



Unfortunately, there are many reasons people become unhoused. The U.S. Department of Housing and Urban Development (HUD) defines homelessness as "an individual or family who lacks a fixed, regular, and adequate nighttime residence...the person is literally without a home." There are several subcategories, which include individuals at imminent risk of homelessness, individuals fleeing domestic violence, or those who are considered homeless under other Federal Statutes (Development, 2024). The Anchorage Coalition to End Homelessness' most recent data for June 2024, reports just over 3,000 individuals in Anchorage who are unhoused. That number includes 167 families and 166 veterans (Homelessness, 2024).

People experiencing homelessness also experience barriers to accessing healthcare including transportation, limited financial resources, stigma and discrimination, substance misuse, and insufficient mental health treatment. The local Emergency Departments frequently default as the primary care providers for these patients as they experience poor physical and/or mental health conditions related to those barriers. As nurses, caring for this patient population can bring challenges that go beyond the immediate interventions.

Developing trust with patients and their families is a key component for nursing care that we are taught in nursing school. Comorbid conditions and behaviors can interfere with the development of that trust relating to a

# How Many People Experience Homelessness in the U.S.?\*

# 1. 25 million

Experienced sheltered homelessness at some point in 2020, the last year for which complete annual HUD data are available



# 1.29 million

People experiencing
homelessness
served by the health
center program
administered by the
Health Resources and
Services Administration
within HHS, including
Health Care for the
Homeless programs,
according to 2020 HHS
data

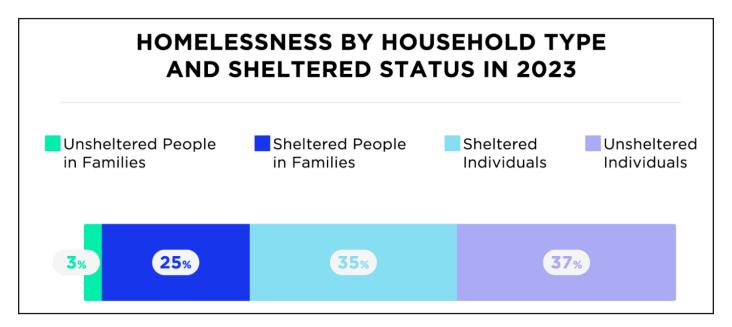
# 1.28 million

Students (not including their parents or siblings not enrolled in K-12 schools) experienced some form of homelessness during the 2019-20 school year, according to Department of Education data

# 582,462

Experienced
homelessness on a
single night in January
2022—a .34% increase
from 2020—according
to HUD's annual Pointin-Time Count

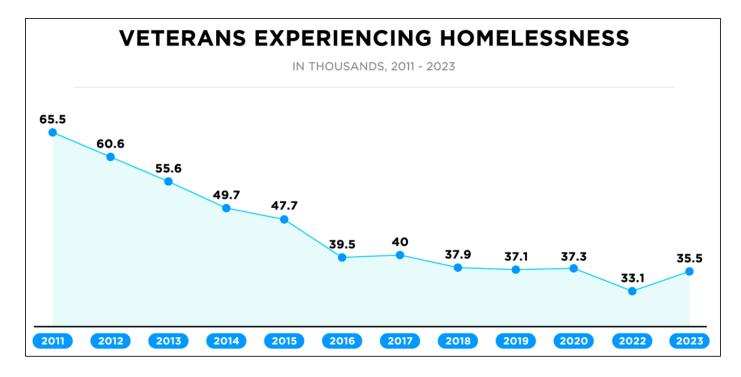
\*The data in this graphic does not reflect the COVID-19 pandemic.



variety of factors including prior negative interactions with the healthcare system, perceptions of discrimination, or impaired judgment.

Assessing the immediate and long-term needs of those experiencing homelessness may be the stepping stone to establishing trust. Nurses can contact their Case Management and Social Work colleagues to address needs outside the hospital setting. These needs can include obtaining medications, ongoing care of chronic conditions, or establishing transportation for follow-up appointments. Further, nurses can advocate for some basic needs by providing necessities in real-time: warm clothing in the winter, dry socks, feminine hygiene products, and, most of all, offering compassion.

Nurses bring a special skill set to the community-based outreach programs. We understand how homelessness impacts basic health and how negatively impacts chronic conditions that are difficult to control, even with housing. For example, poorly controlled diabetes can impact a person's feet. The average unhoused person walks approximately five miles a day, and becoming an advocate for good foot gear can help decrease foot issues for both diabetics and non-diabetics. Examples could include reaching out to shoe outlet stores and local podiatrists to participate in donating shoes/boots and foot care clinics at community events. Nurses can offer their skills and assist with frostbite checks during winter. They can evaluate the areas that are most vulnerable to



frostbite, such as fingers and toes, and ensure that proper protection against frostbite is available: hats, gloves, hand warmers, toe warmers, good boots/shoes, and dry socks.

There are so many different reasons why a person or a family becomes homeless. It has been said many times that most people do not choose to be homeless. As nurses, we care for patients from all socioeconomic

backgrounds and understand the needs of our patients during their time of crisis and beyond. This helps to establish trust and facilitate holistic nursing care that can assist this vulnerable population in receiving optimal treatment while experiencing complex mental, physical and social health issues.

https://www.security.org/resources/homeless-statistics/

# **CLC ENDORSMENTS**

The following list of endorsements are for the upcoming State Senate and State House Races. The Alaska AFL-CIO sends this list up to the National AFL-CIO which allows us to conduct our member to member program. By participating in Labor Walks, Candidate calls, and supporting our local candidates for the House and Senate, we are building future relationships that can aid in legislative and community issues in healthcare. See below the proposed candidates for each district and area. This is an opportunity to have your voice heard and to play a role in providing better healthcare and opportunities for the communities we serve.

The following candidates have been endorsed by your Anchorage CLC this election cycle:

House District 09 Ky Holland
House District 10 Chuck Kopp
House District 11 Walter Featherly
House District 12 Calvin Schrage
House District 13 Andy Josephson
House District 14 Alyse Galvin
House District 15 Denny Wells
House District 16 Carolyn Hall
House District 17 Zack Fields
House District 18 Cliff Groh
House District 19 Genevieve Mina
House District 20 Andrew Gray
House District 21 Donna Mears
House District 22 Ted Eischeid
House District 23 Jim Arlington

Senate District F Janice Park
Senate District J Forrest Dunbar
Senate District L Kelly Merrick

Addidates please
or Shannon
ion. Or reach out

To participate in Labor Walks to support Labor candidates please reach out to Donna Phillips, donna@aknurse.org or Shannon Davenport, shannon@aknurse.org for more information. Or reach out to Alex Baker at the AK AFL-CIO, baker@akaflcio.org

# HEALTH AND SAFETY COMMITTEE

As the Health and Safety Officer for the Alaska Nurses Association, my role is to monitor the health and safety of our members. My role includes participating and completing the 10-hour OSHA General Industry Safety and Health training course, which covers healthcare-related topics such as blood-borne pathogens and workplace violence.

One duty as a Health and Safety Officer is to review the Log of Work-Related Injuries and Illnesses (Form 300 or OSHA 300) for one Anchorage hospital. The OHSA 300 classifies work-related injuries and illnesses and describes each case's extent and severity. A public posting of an abbreviated form, known as the OSHA 300A, is available to staff members at this hospital. This tool helps identify trends in work-related injuries that healthcare workers

sustain. OSHA can review these trends and make recommendations.

Occasionally, these recommendations become OSHA standards, such as the bloodborne pathogen standard. The Bloodborne pathogen standard is part of the 2000 Needlestick Safety and Prevention Act and a regulation that prescribes safeguards to protect workers against health hazards related to bloodborne pathogens.

Other trends identified in the past several years are exposure to communicable diseases (COVID-19) and injuries sustained during workplace violence incidents. Based on these trends, OHSA wrote and published guidelines that assist and protect healthcare workers and the communities they serve.

# GET INVOLVED WITH AFT VOTES

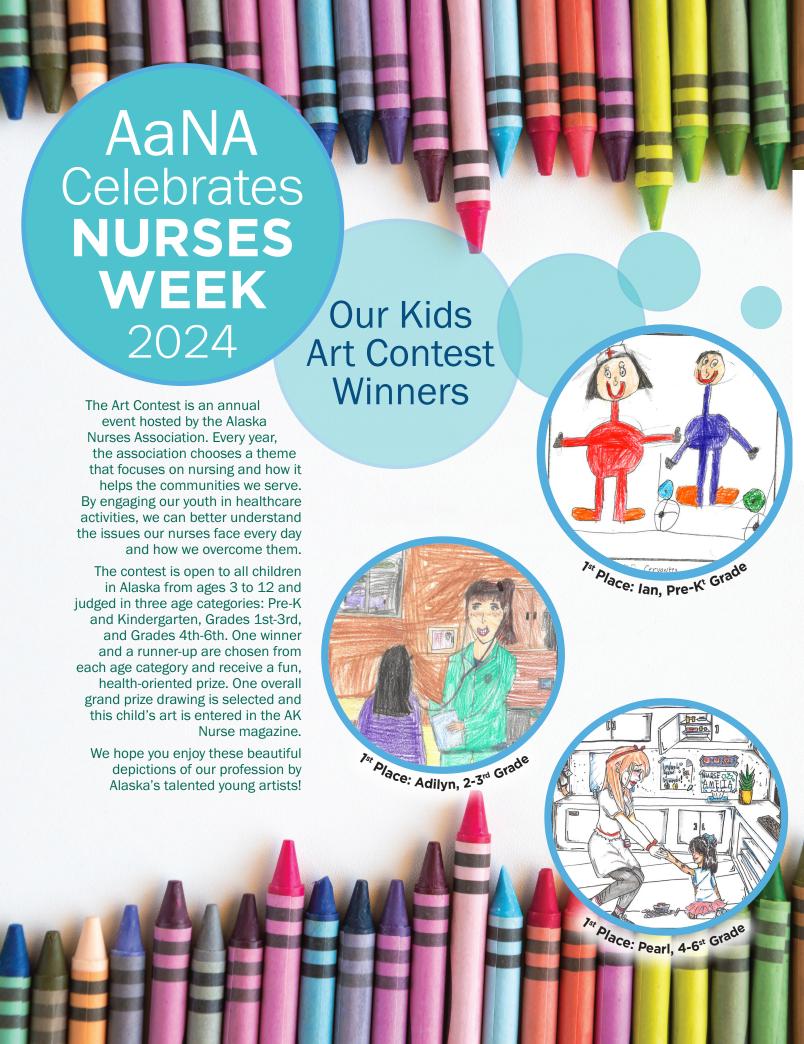
AFT Votes provides comprehensive information about the upcoming election, including candidate endorsements, background on key issues, and voter resources. AFT is committed to supporting candidates who align with our priorities, including:



- Electing pro worker, pro public education candidates
- Protecting the right to organize
- Defending our democracy and freedoms
- Demonstrating the value of belonging to a union
- A strong economy

AFT offers tools to help members volunteer and engage in the electoral process. We can't do this alone: we need your help to win the elections and ballot measures we support!

For detailed insights and updates, visit https://aftvotes.org/



# Calendar of Events

### **LPN License Renewal**

July 30 - September 30, 2024 nursing.alaska.org

### **RN & APRN License Renewal**

September 30 - November 30, 2024 nursing.alaska.gov

# 18th Annual Asthma and Allergy Conference

in-person

September 6-7, 2024 Alyeska Resort, Girdwood www.aafaalaska.com

## TUESDAY TALKS **virtual**

Hosted by AaNA September 18 @ 6 PM Contact hours available www.aknurse.org

# **Alaska Nurse Practitioner Association Annual**

Conference in-person

September 26-27, 2024 BP Energy Center, Anchorage anpa.enpnetwork.com

### **Alaska Health Fairs**

in-person

Volunteer opportunity Multiple dates and locations alaskahealthfair.org

### Book Club virtual

Meets every other month Hosted by AaNA Contact hours available www.aknurse.org

### **Improving Lives**

Conference in-person

Alaska Mental Health Trust Authority September 17, 2024 Dena'ina Center, Anchorage improvinglivesalaska.org

# **Nursing Narratives**

in-person

Hosted by AaNA October 2, 2024 Beartooth Theatrepub, Anchorage www.aknurse.org beartooththeatre.net

### **2024 Trending Topics** in Nursing Conference

in-person

Hosted by AaNA October 3-5, 2024 Alaska Pacific University, Anchorage www.aanaconference.org

### 2024 General Assembly

hybrid

Hosted by AaNA October 5, 2024 Anchorage & Virtual www.aknurse.org

### 2024 General Election

Remember to vote! November 5, 2024 7 AM to 8 PM Statewide elections.alaska.gov

### **Alaska Board of Nursing** Meeting hybrid

November 6-7, 2024 Anchorage nursing.alaska.gov

### **All Alaska Pediatric** Symposium hybrid

November 8-9, 2024 Marriott Downtown, Anchorage a2p2.org/pediatric-symposium

### **TUESDAY TALKS**

virtual

Hosted by AaNA November 19 @ 6 PM Contact hours available www.aknurse.org

### **Holiday Helping Hands**

AaNA Holiday Assistance **Program for Members** November - December 2024 www.aknurse.org

Visit www.aknurse.org/ events for frequent updates and information on AaNA events and local continuing education opportunities.

Want to list your event in The Alaska Nurse Calendar of Events and at www. aknurse.org. Send information to geri@aknurse.org

# TRENDING TOPICS IN NURSING

# Save the Dates!



Alaska Nurses Association



Unique, engaging presentations by local experts

Affordable contact hours just in time for renewal

Member discounts, scholarships & earlybird savings

Swag bags, silent auction & more!

# OCTOBER 3-5, 2024

Learn more at www.aanaconference.org

