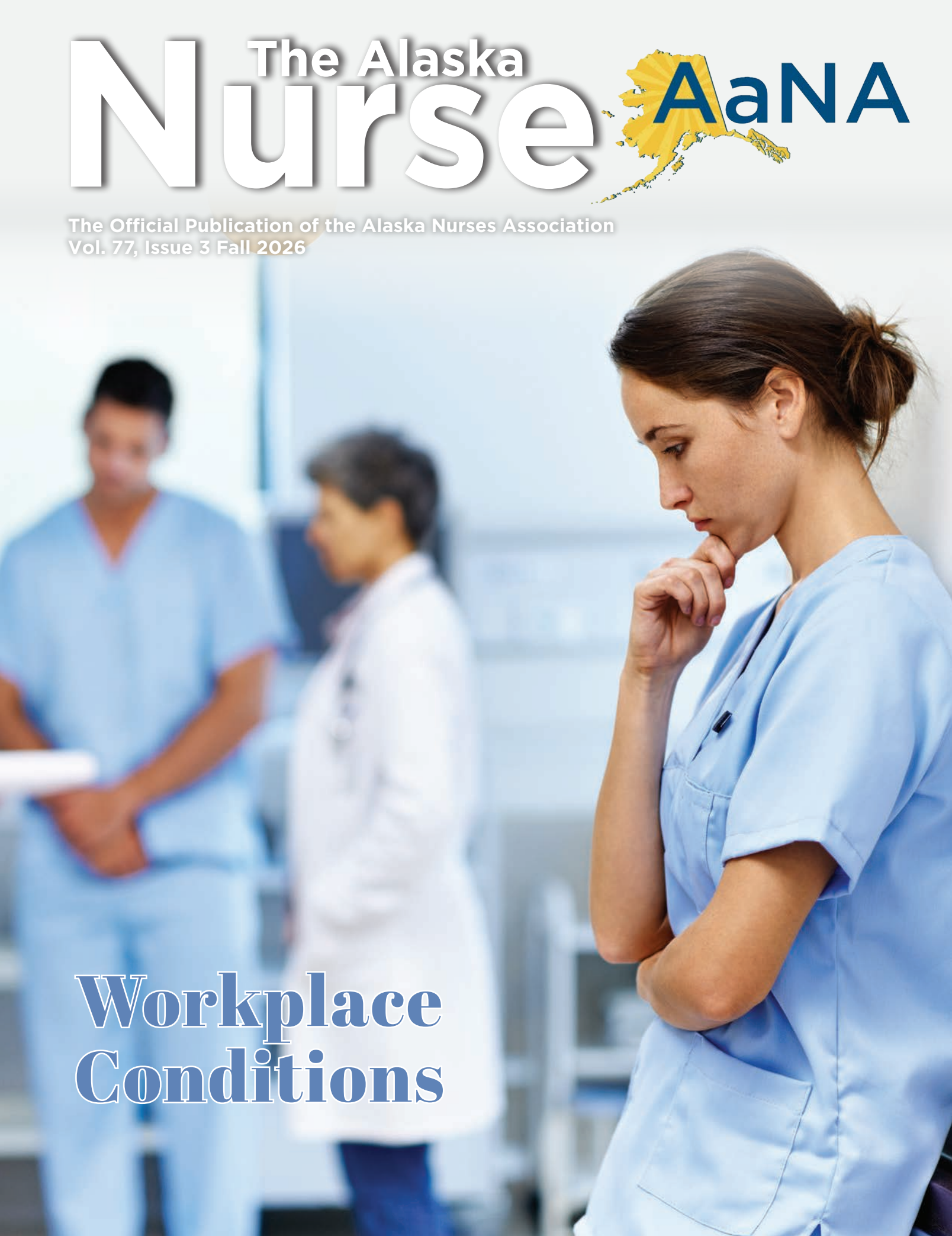


# The Alaska Nurse

The Official Publication of the Alaska Nurses Association  
Vol. 77, Issue 3 Fall 2026



## Workplace Conditions

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# From our President



As the long days of summer transition into the crisp air of fall, I am reminded of the meaning of Labor Day and its significance for nursing and healthcare. Nurses are the backbone of our healthcare system, yet many continue to work under increasingly difficult conditions due to chronic staffing shortages. Every shift, nurses are expected to care for more patients than is safe while managing complex medical needs, extensive documentation, and providing emotional support to patients and their families.

So how do we, as nurses, honor the principles of Labor Day—a day that recognizes workers and the labor movement that fought for better wages, safer working conditions, and reasonable working hours—and turn those ideals into meaningful change? The first step is embracing organizing and advocacy. By working collectively, communicating our shared interests, and participating in healthcare decision-making, we can strengthen our profession and improve patient care. Become active in your local elections, participate in your union, and broaden your understanding of the issues nurses face. Together, we can become powerful voices for change.

In this issue of AK Nurse, we focus on the impact of union organizing and advocacy in Alaska, explore what keeps us committed to this profession, and examine how we can become stronger advocates for ourselves, our colleagues, and our patients.

As a delegate to the 2026 AFT National Convention, I was inspired by the work nurses from across the country are doing. From Code Red campaigns for safe staffing, to the fight for better working conditions, to thoughtful discussions about the growing role of artificial intelligence in healthcare, I witnessed firsthand the power of nurses coming together to shape the future of our profession. That experience renewed my faith in our collective ability to transform healthcare so that the next generation of nurses does not have to face the same struggles we have endured. I am always open to meeting for a cup of coffee and a chat, so please contact me at any time.

Stay Safe and Keep Warm,

*Shannon J. Davenport*

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

## Be part of the movement to win safe staffing legislation in Alaska!



### Take the Nurse Staffing Survey

Fill out our NEW staffing survey to help us build a clear picture of staffing conditions in Alaska & strengthen our advocacy efforts.



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### Sign Up for Campaign Updates

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*A Union of Professionals*

## AFT Nurses and Health Professionals News Roundup

### ABOUT AFT

AFT is a union of 1.7 million professionals that champions fairness, democracy, economic opportunity, and high-quality public education, healthcare and public services for our students, our families and our communities. AFT is the national affiliate of the Alaska Nurses Association.

### AANA DELEGATES ATTEND AFT CONVENTION

Seven AaNA members served as delegates to AFT's national biennial convention, which took place July 16-19 in Washington D.C. In six packed sessions over four days, more than 3,000 delegates debated and passed resolutions on a range of pressing issues—from reclaiming the promise of public education, to protecting immigrant communities, to rebuilding public health, to preparing for the age of artificial intelligence, to tackling the affordability and student debt crises.

**Explore highlights from the convention: [aft.org/convention](https://aft.org/convention)**



### HEALTHCARE RESOLUTIONS AT CONVENTION FOCUS ON ACCESS TO CARE

AFT delegates closed out the 2026 convention by passing resolutions aimed at fighting for a better life for all. From the RNs/Healthcare Workers Committee came resolutions to escalate affiliate Code Red safe staffing campaigns, increase access to mental health resources and programs for healthcare workers, and advocate for mandated protected time for healthcare professional in-services and mentorship. The Healthcare Access/Quality Committee resolutions aim to expand healthcare access and health equity for LGBTQIA+ communities, fight gun violence in schools and workplaces, and actively oppose the financialization of healthcare and protect essential health services while affirming healthcare as a human right, including support for Medicare for All.

**Take a look at the resolutions: [aft.org/about/resolutions](https://aft.org/about/resolutions)**

### ‘SHORTSIGHTED AND DANGEROUS’: OHIO NURSES CHALLENGE MATERNITY UNIT CLOSURE

A plan to close the inpatient maternity unit at Grady Memorial Hospital in Delaware County, Ohio, has

drawn opposition from the Ohio Nurses Association and Delaware County residents. Their concerns were aired at a Delaware City Council meeting on June 23, where testimony from nurses, patients and community members led the council to approve an emergency resolution opposing the closure.

**See how nurses fought back: [bit.ly/3Rzz2TW](https://bit.ly/3Rzz2TW)**

## HAWAII NURSES CHANGE THE CONVERSATION ON SAFE STAFFING

After years of being told that nurse staffing was a collective bargaining matter—something to be worked out between workers and management behind closed doors—nurses in Hawaii got the Legislature on record: We hear you. This year, after years of organizing, educating lawmakers, and bringing bedside realities into public view, the nurses succeeded in changing the conversation. In May, the nurses secured a formal legislative resolution, an



official acknowledgment from Hawaii's lawmakers that they understand what's at stake for patients and communities and know the issue demands continued attention.

**Learn about their successful strategy: [bit.ly/4c70DCI](https://bit.ly/4c70DCI)**

## SWEDISH MEDICAL GROUP HOSPITALISTS VOTE TO UNIONIZE

About 115 hospitalists at five Swedish Medical Group campuses across the Seattle area voted to unionize in May, the first group of doctors in the Providence healthcare system to organize in the state of Washington. The hospitalists voted to join Northwest Medicine United, AFT Local 6552, which represents hundreds of physicians and advanced-practice providers throughout the Northwest. "This is a major victory for patients across the Seattle area, who depend on physicians having a stronger voice in how care is delivered," says Dr. Clark Coler, a 32-year veteran at Swedish.

**Check out their victory: [bit.ly/4hIDXR](https://bit.ly/4hIDXR)**

## HEALTHCARE WORKERS WARN: AI IS NO SUBSTITUTE FOR HUMAN CAREGIVERS

Model legislation creating a licensing pathway for artificial intelligence systems to provide medical care is drawing opposition from nurses and physicians. They warn that reliance on these largely untested systems could threaten patient safety, strip independent clinical judgment and become a substitute for investing in healthcare workers and hospitals. As the legislation gains attention in states, AFT healthcare professionals are raising questions about accountability, safe staffing, and their role in shaping if, how and when such technologies will be implemented.

**Get informed about the worrying legislation: [bit.ly/3RGs2Vj](https://bit.ly/3RGs2Vj)**

## 'HOW MY UNION ORGANIZED TO LOWER HEALTHCARE COSTS FOR MEMBERS'

In this AFT Voices post, Kati Bassler shares how her local took on a hospital that raised mammogram rates after buying the area's only mammography center and then ran breast cancer ads. The union organized its members and shamed the hospital publicly. The result: a negotiated



insurance carve-out for affordable screenings. That foot in the door led to ongoing dialogue with hospital leadership and a foundation for tackling new fights.

**Read their inspiring story: [bit.ly/4fM6EXY](https://bit.ly/4fM6EXY)**

## SAVE MY HOME HOTLINE MEMBER BENEFIT

A dedicated Save My Home Hotline staffed by HUD-trained counselors is available free to all AaNA union members to discuss mortgage issues. The service is provided through the nonprofit Money Management International, which is accredited to provide counseling for union members facing foreclosure.

**Access your member benefit: [unionplus.org/benefits/home-auto/save-my-home-hotline](https://unionplus.org/benefits/home-auto/save-my-home-hotline)**

## 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](https://www.aft.org/member-benefits)

# WHAT DO I VALUE IN THE WORKPLACE?\*



After more than three decades in nursing, I have learned that the most valuable part of a workplace is not the newest equipment, the highest salary, or the most prestigious organization. It is the people and the culture they create.

The workplace I value most is one that is peaceful. A peaceful work environment does not mean there are no challenges, healthcare will always be demanding, but it does mean that the focus remains where it belongs: on our patients and on supporting one another. Personal drama, gossip, and organizational politics can quickly erode morale, distract from patient care, and contribute to emotional exhaustion. When nurses spend more energy navigating interpersonal conflict than caring for patients, everyone loses.

Equally important is teamwork. Healthcare is a team sport, and no single discipline can provide excellent patient care alone. I value working alongside nurses, patient care technicians, physicians, advanced practice nurses, therapists, pharmacists, environmental services staff, and countless others who recognize that every role contributes to patient outcomes. The strongest teams are built on trust, mutual respect, and the confidence that when help is needed, someone will step forward without hesitation.

One of the greatest indicators of a healthy workplace is leadership. In my experience, teamwork begins at the top and flows throughout the organization. Managers who lead by example create cultures where collaboration becomes the norm rather than the exception. The most respected leaders are not those who simply observe the workflow and identify problems before returning to their offices. They are the leaders who roll up their sleeves, answer call lights, assist with patient care, help transport patients, or lend an extra set of hands during difficult shifts. Their willingness to serve alongside their staff communicates a powerful message: we are all part of the same team.

Leadership by example also fosters psychological safety. Staff members feel more comfortable asking questions, admitting mistakes, seeking assistance, and offering ideas for improvement when they know their leaders are approachable and invested in their success. These behaviors strengthen trust and ultimately improve patient safety.

Today's workforce is also redefining what employees seek from their organizations. While compensation remains important, many nurses across generations prioritize meaningful work, flexibility, supportive leadership, professional development, and healthy work-life balance. Research suggests that newer generations entering the workforce place particular emphasis on authenticity, inclusion, collaboration, and organizations whose values align with their own (Nichols & Smith, 2024). Although generational perspectives may differ, the desire to feel respected and supported is universal.

Burnout continues to challenge the nursing profession. Heavy workloads, staffing shortages, emotional demands, and workplace conflict all contribute to fatigue and disengagement. Research examining burnout across generations emphasizes that supportive work environments, healthy work-life balance, and organizational commitment to employee well-being are essential for long-term workforce sustainability (Molwitz et al., 2026). Creating peaceful workplaces is therefore not simply about employee satisfaction, it is an important strategy for retaining experienced nurses and protecting the future of the profession.

An ethical workplace culture also matters. Employees are more engaged when organizations demonstrate fairness, social responsibility, and genuine concern for their workforce. Perceived socially responsible human resource practices promote trust, organizational commitment, and employee well-being while encouraging individuals to contribute beyond their required duties (Pham et al., 2024). Healthcare organizations that consistently model integrity, transparency, and respect cultivate stronger teams and better patient care.

Perhaps the characteristic I value most is genuine caring among coworkers. Nursing is emotionally demanding. We celebrate recoveries, grieve losses, support anxious families, and often carry those experiences home with us. Working with colleagues who truly care about one another makes difficult days more manageable. It means checking on a coworker after a challenging patient outcome, offering help before being asked, celebrating each other's successes, and extending grace during stressful moments. These seemingly small acts build resilient teams capable of delivering extraordinary care.

CONTINUES ON PAGE 8

# You can help Alaskans quit tobacco for good!

## YOUR VOICE MATTERS.

In Alaska, 65% of adults who were advised to quit by a physician or nurse said that advice helped encourage them to stop using tobacco or nicotine.



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A positive workplace culture is not created through mission statements hanging on the wall. It is created every day through the actions of every individual, from executive leadership to frontline staff. Respect is contagious. Kindness is contagious. Teamwork is contagious. When leaders demonstrate these qualities consistently, they become embedded within the culture of the organization.

As nurses, we often speak about patient-centered care. Equally important is creating staff-centered workplaces where healthcare professionals feel valued, respected, and supported. Organizations that invest in their people create environments where employees want to stay, patients receive better care, and teamwork flourishes.

The workplace I value is ultimately simple: one where people leave personal drama at the door, work together toward a common purpose, help one another without keeping score, and remember that caring for each other is just as important as caring for our patients. In a profession built on compassion, perhaps the greatest gift we can offer one another is the opportunity to work in a culture where everyone belongs and everyone succeeds together.

*Julie Cottrell, RN, BSN, CPAN, is a registered nurse with over 25 years of experience, including 18 years specializing in post-anesthesia care. She has practiced in diverse clinical settings, with a strong focus on patient safety, perioperative care, and recovery management. Julie earned her Bachelor of Science in Nursing*

*from Southern New Hampshire University and is currently pursuing her Master of Science in Nursing as a Family Nurse Practitioner at Hawai'i Pacific University.*

*In addition to her clinical work, Julie is passionate about education, advocacy, and integrative health. She has authored multiple articles for nursing publications, addressing topics such as GLP-1 therapies, stress in nursing, ADHD in healthcare professionals, and workforce challenges. Her writing reflects her commitment to evidence-based practice and improving both patient outcomes and nurse well-being.*

*Julie is also an entrepreneur with a growing interest in wellness, preventive care, and innovative healthcare delivery models. She is dedicated to bridging traditional and integrative approaches to support whole-person healing.*

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Written by Julie Cottrell, RN, BSN

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## How to Earn Contact Hours:

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# A THEORY OF IDIOPATHIC HIVES INDUCED BY RESOLUTION OF LONG TERM NERVOUS SYSTEM STRESS

By Anne Watanabe

It's estimated that 80-90% of chronic urticaria is idiopathic.<sup>1</sup> For years I've had very intermittent chronic urticaria and was never able to identify a cause. It was seemingly random, with no clear pattern and no identifiable environmental trigger. Sometimes I'd go years without a hives outbreak. When one recurred, I never identified any lifestyle change to explain it. Sometimes people suggested that it was stress induced, but each time I had a hives outbreak I did not feel particularly stressed.

However, I came to eventually identify a pattern that it was not during periods of high emotional stress but following periods of high emotional stress - after a significant enough amount of time had passed that my nervous system was noticeably more regulated. This led me to a theory that I have not yet been able to find any literature or studies on:

What if it's actually times of nervous system re-regulation after long term periods of chronic, heightened emotional stress and nervous system dysregulation that actually triggers many cases of idiopathic urticaria?

Immunosuppressant medications used to control allergic reactions are, after all, just synthetic forms of stress hormones: corticosteroids, epinephrine. If the body has adjusted to having higher levels of immunosuppressant stress hormones for long periods of time, wouldn't it make sense that when those stress hormones decrease and we enter a more parasympathetic state consistently, that the body might have a rebound effect and our immune system may overrespond?

My evidence for this theory is solely anecdotal, but I've informally asked this question and a number of people have identified that after periods of extremely high stress, such as divorces, they had large outbreaks of urticaria after the stress finally subsided. I've experienced something similar, and in particular I noticed that I had one outbreak right after getting an acupuncture treatment following a long period of severe emotional stress, even though I've never reacted to acupuncture treatments I've had at other times. When I had a somewhat emotionally stressful encounter the next day, my hives subsided. Given that acupuncture is often used to regulate the nervous system and treat stress and emotional trauma, I believe that my body was reacting not to the acupuncture itself but to the restoration of my parasympathetic nervous system.

I would love to see immunologists address this theory and conduct research on it, or just share opinions on the theory.

<sup>1</sup> Paul Schaefer, MD, PhD. American Family Physician. 2017;95(11):717-724.

"Acute and Chronic Urticaria: Evaluation and Treatment." <https://www.aafp.org/afp/2017/0601/p717>

*Anne Watanabe is a cardiology nurse and writer.*

# FIGHTING FOR SAFER WORKING CONDITIONS

## An Interview with Donna Phillips



Donna Phillips is a registered nurse with more than 30 years of experience in critical care nursing. Throughout her career, she remained dedicated to delivering high-quality, compassionate patient care while supporting patients and families during some of their most challenging moments. As a proud union member, Donna strongly believes in advocating safe staffing, professional nursing standards, and a positive work environment that benefits both caregivers and patients.

Over the years, Donna has helped build and strengthen the AaNA that serves as a powerful voice for nurses across Alaska. Through collective action and advocacy, she has contributed to efforts that protect nurses' rights and advance important workplace initiatives, including addressing mandatory overtime, promoting safe staffing ratios, and combating workplace violence in healthcare settings.

### 1. What are the biggest concerns that come up for Alaska nurses when it comes to their workplace conditions?

Most of the concerns we receive from Alaska nurses have to do with inadequate staffing. We have a link on our website for any nurse to report any unsafe work conditions. Most of the reports come from our unionized nurses but any nurse can report unsafe conditions—not only staffing, but also violence in the workplace, missed meals and breaks, etc. The link can be found at: <https://aknurse.org/report-an-unsafe-assignment/>

### 2. How do those concerns vary depending on location and setting – urban / rural, hospital vs non-hospital settings?

Anchorage has typically been the hub of healthcare for AK. As the bed situation is tight, there are times when sicker patients need to remain in their local hospitals. In some cases, providers from an Anchorage-based facility assist with monitoring and care of patients outside of a higher level of care facility. Rural hospitals generally need to stabilize patients prior to transport if they require higher levels of care.

### 3. In what ways is the union able to advocate for nurses' working conditions, both on an individual basis and on a systems basis?

Nurses in a union have rights that others do not have. They have the right to a union officer for any investigatory meetings and a right to progressive discipline.

Contractually, we have Labor-Management committees that meet monthly or quarterly to work on issues of concern for the nurses. Staffing is generally a primary concern of that and is talked about at these meetings. Skill-mix and training programs are also of concern. If you have new nurses who can't be adequately trained and supported by mentors, we find they leave the hospital or nursing all together.

### 4. What improvements have you seen in workplace conditions over the years related to union advocacy?

The Mandatory Overtime Limitations for Nurses AS 18.20.400 - AS 18.20.499 (HB 50) was passed April 18, 2009 after working with legislators for 3 legislative sessions (6 years).

This issue became more of an issue when facilities began to see a decrease in retention after the state got rid of the defined benefit program. There were less nurses at to cover shifts, so the answer was just to mandate a nurse to stay and extra 4-8 hours after their scheduled 8-hour shift. Workers for the State of Alaska who were Tier 1 or Tier 2 employees felt the burden as they did not want to give up all they had done to have a decent pension from the state. Newer nurses simply would leave and go for higher pay at other facilities.

In other facilities, this was a problem for specialty areas like ICU, ED, NICU and OR where specialized training was required to care for the patients. If a facility had a sick call or a "hole" in the schedule it was easier to mandate someone to stay than call and find a replacement.

Other legislation AaNA has testified in support of and worked on with legislators-HB 312: "An Act relating to arrest without a warrant for assault in the fourth degree at a health care facility; and relating to an aggravating factor at sentencing for a felony offense against a medical professional at a health care facility."

Healthcare workers have often been led to believe that violence on the job is just "part of the job". That narrative is changing as we have greater protections when it comes to law related to violence in the workplace.

**No-Warrant Arrests:** Under House Bill 312, police in Alaska can arrest a suspect without a warrant for fourth-degree assault (a misdemeanor) inside a healthcare facility if there is probable cause, provided the perpetrator is stable or not actively seeking treatment. [1, 2]

**Enhanced Sentencing:** The law establishes that knowingly assaulting a medical professional while they are performing their job duties serves as an aggravating factor at sentencing, allowing prosecutors to pursue stricter felony penalties. [1, 2]

**Reporting Rights:** Individual workers always retain the right to report physical attacks or threats to local law enforcement, and hospitals can facilitate direct communication with local authorities or magistrates. [1, 2, 3]

Most recently we saw care model changes that would increase the nurse-patient ratios on some of the nursing units. The union stopped one facility from changing the PCU patient-to-nurse ratio from 5:1 and returned it to 4:1. Through collec-

tive action and education of our communities and law makers we were able to assist in drafting legislation that would make mandated patient-to-nurse ratios and nursing assistant-to-patient ratios. Last legislative session, the SB 283 had a hearing in the Senate Labor and Commerce. We hope to elect legislators and a governor who will assist with the passage of a bill to assist us in protecting and providing care to our patients.

## 5. What is the union still fighting for related to workplace conditions?

Adequate staffing is a primary concern of the union. Without adequate staffing, many workplace issues arise, such as:

- Missed meals and breaks:

Without adequate nutrition during a 12-hour shift, nurses have increased fatigue, low blood sugar and potential delays in care due to nurses' own needs not being met.

- Increases in workplace violence: I feel that increases in workplace violence are directly related to frustrations that people feel when systems have too many barriers to care. Often, nurses are unable to deliver care in a timely fashion due to inadequate support and resources for meeting patients' needs. When patients' conditions change quickly, nurses need to reprioritize care delivery, and this can leave patients and families uncared for

*Bio:*

*AaNA Hall of Fame*

*Donna Phillips has served as a tireless advocate for Alaska's nurses and patients for over two decades. Phillips began her nursing career in 1979, working in Illinois and Texas before finding her passion of critical care nursing. For six years, Phillips worked as a travel nurse, taking assignments across the country before landing in Anchorage, Alaska in 1994 and beginning as a staff*

*nurse in the adult critical care unit at Providence Alaska Medical Center.*

*Phillips played an instrumental role on the first Providence Registered Nurses negotiations team, serving as a leader in the effort to secure a fair first contract for the nurses working at the hospital after their successful strike.*

*Phillips is an active participant in AaNA's legislative committee, working diligently for over six years for the 2010 passage of the "No Mandatory Overtime for Nurses" bill. In 2018, Phillips helped to champion a bill addressing workplace violence in healthcare settings, protecting nurses and healthcare professionals across Alaska.*

*She has served in many leadership positions within both her former local bargaining unit, Providence Registered Nurses, and the Alaska Nurses Association. Phillips has served as*

*Labor Council Chair for a total of 24 years, and as Treasurer of Providence Registered Nurses, a position she has held for over 25 years total. Over the years, she has also held the positions of Health & Safety Officer for Providence Registered Nurses and Treasurer of the AaNA Board of Directors, and has served on the Anchorage Central Labor Council and as a Vice President of the Alaska State AFL-CIO.*

*Phillips facilitated AaNA's successful affiliation with the American Federation of Teachers in 2015. Since then, she has served in her appointment by President Randi Weingarten on the AFT Program and Policy Council for Nurses and Health Professionals. In 2020, Phillips was elected as a Vice President to the AFT executive board. Phillips earned her associate degree from Kishwaukee College and a bachelor's degree in nursing science from the University of Illinois at Chicago.*

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# WHEN CARING TAKES A TOLL

## Simple Practices to Support Nurse Well-being



By Becky Michalski, BSN, RN, C-IAYT

### INTRODUCTION

You finish charting, glance at the clock, and realize the coffee you poured six hours ago is still sitting on the desk - cold and untouched. You can't remember the last time you went to the bathroom. Before you can stand up, another call light turns on.

For many nurses, this isn't an extraordinary shift. It's simply another day at work.

Nursing has always been a physically and emotionally demanding profession, but today's healthcare environment asks even more of us. We care for increasingly complex patients while facing staffing shortages, unsafe patient ratios, and long shifts, all while balancing family responsibilities and everyday life outside the hospital. Nurses care deeply for others, and more often than not, our own needs end up at the bottom of the list.

The conversation around burnout has become increasingly common in healthcare, and for good reason. At the same time, many of the wellness strategies we hear about can feel hard to put into practice. After a long shift and trying to keep up with everyday life, finding an extra hour for self-care isn't realistic for most of us.

The good news is that supporting our mental and physical well-being doesn't mean adding something big to our day. After more than twenty years as a nurse, I've learned that I don't need one more thing on my to-do list. What I need are simple practices that fit into the life I'm already living. They're the same practices I rely on myself and now regularly share with my patients and fellow healthcare professionals. Over time, those small changes can make a meaningful difference.

### HELPING YOUR NERVOUS SYSTEM RECOVER

Our nervous system is designed to help us respond to stress. During an emergency, we want our heart rate to increase and our senses to become more alert. As nurses, this response helps us act quickly when our patients need us most.

Stress is an unavoidable part of life. The challenge is when we stay in that stress response for hours, days, and sometimes years without enough opportunities to reset and recover. Over time, this can contribute to fatigue, poor sleep,

irritability, muscle tension, and compassion fatigue. Many nurses know the feeling of arriving home physically exhausted but mentally wired - replaying the day in our minds or thinking about tomorrow's shift.

Fortunately, our nervous system is remarkably responsive. One of the simplest tools we have to help shift our stress response is something we carry with us every moment of the day - our breath. A few slow breaths, paired with gentle stretches, can begin to shift us toward the relaxation response. Think of these as resets throughout your day, giving your body and mind a chance to settle before moving on to the next task.

### FOUR PRACTICES THAT FIT INTO A NURSING SHIFT

#### 1. TAKE SHORT BREATHING BREAKS

Inhale gently through your nose for a count of four and exhale for a count of six. Repeat three to five times. When the exhale is slightly longer than the inhale, it helps activate the body's relaxation response. Research suggests that a regular slow breathing practice can reduce stress, lower heart rate, and improve emotional regulation.

Try this before entering a patient's room, before scanning medications, or after a difficult conversation. You can even set a reminder on your smartwatch, if you have one. Three slow breaths probably won't change your shift - but they might change how you show up for the next patient.

#### 2. TAKE A MOMENT TO MOVE

By the end of a shift, many of us carry physical tension in our necks, shoulders, hips, and lower backs. Look for opportunities throughout the day to incorporate simple stretches. Try a few shoulder rolls while waiting for the computer to load, a gentle neck stretch as you wash your hands, or reaching overhead and leaning side to side before walking into a patient's room. It doesn't have to be complicated. Even thirty seconds of movement is better than none, and your body will likely thank you for it.

#### 3. PROCESS THE DAY BEFORE YOU DRIVE HOME

One practice that has helped me - and one I now regularly recommend - is keeping a small notebook in the car. Before driving home, I take two minutes to reflect on three questions:

- What is one thing I did well today?
- What felt hard?
- What is one thing I'm grateful for?

Research suggests that gratitude practices can improve well-being, increase resilience, and help shift our attention toward moments of connection and meaning, even during stressful times.

Gratitude isn't about pretending everything is okay. Some shifts are simply hard. It's about noticing that even on those days, there may have been a moment of kindness or something that reminded you why you became a nurse in the first place.

#### 4. PRACTICE MINDFULNESS WHERE YOU ALREADY ARE

Mindfulness is simply noticing what's happening right now. That can be harder than it sounds, especially when our minds are busy replaying what already happened or thinking about what's coming next. Our brains are naturally wired to look for problems and potential threats - a tendency that helps us anticipate changes and respond quickly for our patients, but can also leave us mentally drained if we never step out of that cycle.

One of the easiest ways to return to the present is by noticing our senses. Feel your feet on the floor. Sense the warm water as you wash your hands. Notice the taste of your coffee or the smell of your tea. Take one slow breath before entering the next room.

Our thoughts naturally pull us into the past or the future, but our breath and our senses are always happening right here, right now. Even a few moments of noticing can help interrupt the stress cycle and reconnect us with the present.

### SUSTAINING YOURSELF

As nurses, we often think of self-care as something we'll get to when life slows down. But perhaps it's more helpful to think of it as sustaining ourselves for the work we do. Just as we maintain our clinical knowledge and technical skills,

we can also build simple habits that help us stay healthy, grounded, and present.

Nursing asks a lot of us. While we can't always change the demands of the job, we can look for opportunities to pause throughout the day. A few slow breaths. A gentle stretch. A quiet moment before heading home. These practices may seem small, but over time they can help us feel a little less overwhelmed, a little more present, and better equipped to continue doing the work that matters so much to us.

### CONTINUE THE PRACTICE

If you'd like a little extra support, I've created a free online resource library with guided breathing exercises, gentle movement sessions, and meditations designed for busy lives.

[www.rootedradianceyoga.com](http://www.rootedradianceyoga.com)

Sometimes the smallest practices are the ones we're most likely to return to - and over time, those small moments can make a meaningful difference.

*Becky Michalski, BSN, RN, C-IAYT is a registered nurse with more than 20 years of experience in cardiac, post-surgical, and rehabilitation nursing. She is also a Certified Yoga Therapist who teaches therapeutic yoga, breathwork, and guided relaxation for patients, caregivers, and healthcare professionals through Rooted Radiance Yoga.*

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## 2-MINUTE RESET FOR BUSY NURSES

- ✿ Place both feet on the floor.
- ✿ Roll your shoulders a few times forward, then a few times back.
- ✿ Take five slow breaths, making your exhale a little longer than your inhale.
- ✿ Bring to mind one thing you're grateful for.
- ✿ Take one more slow breath, then head back into your day.

## Editor's Note

It's been one year since I became Editorial Chair for this magazine. I'm proud to say that for this issue, we had more submissions than for any other! Some pieces in this issue relate directly to our theme of Workplace Conditions, such as Julie Cottrell and Becky Michalski's articles. An article by Jasmine Monroe and Vi Pangunnaaq Waghiyi offers educational resources for breast cancer prevention for Alaska Native communities, and the health impacts of militarism and colonization. Another piece by a nurse navigating idiopathic hives posits that her experience of hives could be related with nervous system regulation after periods of intense stress. An interview with the union's own Donna Phillips shines a light on what

the union is doing to impact working conditions throughout Alaska.

I'm grateful for all of the skill, expertise, care, and enthusiasm the healthcare worker-writers have put into issues over the last year. I'm equally grateful for the nurse readers across the state of Alaska who engage with the magazine! We're looking for ideas for themes for next year ~ if you have an idea for a theme or article, please reach out to [mat@aknurse.org](mailto:mat@aknurse.org).

With care,  
Mat



## ELECTIONS REMINDER

**Remember to vote in our annual elections!**

Board & Labor Council: August-September  
Providence Bargaining Unit: November-December

We will use a secure online voting platform. Members will receive a postcard AND an email with an invitation to vote.

**Please make sure your contact info is up-to-date**

Union Members:  
Update your mailing address with your employer  
Update your personal email address with AaNA

Professional Members:  
Update your mailing address and your personal email address with AaNA

**Visit [aknurse.org](http://aknurse.org) for nominations & voter info**

**Questions? Email [andrea@aknurse.org](mailto:andrea@aknurse.org)**

# NURSING NARRATIVES

## The Black Cloud was the System Cracking

By Mat



Nursing Narratives offers nurses a unique opportunity for nurses to tell stories. This past May, the stories were particularly heart-wrenching: one by a nurse watched her father go into cardiac arrest, another administered cardiac massage on a 15-year-old's heart while his mom watched. And still, the storytellers made the audience laugh, with the characteristic jaded, dark humor of nurses who've seen everything. Laughter is how we get through our shifts and support each other; it's a way we care for each other even as we're going through some of the most painful moments of our lives.

One storyteller and nurse, Abby, used sarcasm and irreverence to keep the audience engaged while laying bare the systemic failures we, as nurses, are most affected by. She told us that, for years, she was convinced that she had a black cloud following her in her career and said, "If you know anything about nursing, it's part science, part...curses." As she continued to realize how the healthcare system was failing her and her patients alike, she said, "Maybe the black cloud wasn't a curse. The black cloud was the system cracking."

Abby acknowledged that the healthcare system positions nurses to believe our value is in being strong enough, good enough, to care for others. It preys on our empathy and compassion to work ourselves past our breaking points. Nurses take on more and more labor with fewer and fewer resources, and we, still, somehow convince ourselves that we are the problem.

Abby's story called on all of us to push against the system that "serves injustice," and to do more than just cope with things as they are. I hope that as nurses tell our stories and connect with one another, we can collectively push against the normalized failures of the healthcare system to create workplace conditions where everyone can give and receive the care they need.



# PROTECTING OUR MAMAQS Across Alaska\*

Access to education about exposures to contaminants is essential for protecting public health in our communities in Alaska. Alaska Community Action on Toxics (ACAT) was founded in 1997 in response to a request for assistance from Sivuqaq (also known as St. Lawrence Island) elder Annie Alowa who was fighting for justice to address military contamination on the Island. Her community faced serious health harms including cancers, low birth weight babies and miscarriages among the families closely associated with Northeast Cape. The US Department of Defense established two Air Force bases at Gambell and Northeast Cape on Sivuqaq during the Cold War. After the war ended, they left tens of thousands of drums full of oil, solvents, pesticides and many other chemicals to rot in the tundra and dumped contamination directly onto the land and waters. They left this toxic legacy of contamination, polluting the water, the air, the animals and the soil with no clean-up plan and no responsible comprehensive safety guidelines for the communities who for millennia have lived from the land and the Bering Sea.

In addition to military pollution, industrial contaminants from all around the world are carried to the arctic through air and ocean currents creating a hemispheric sink of chemicals that enter our food webs. Many of us, especially women and children are exposed to harmful chemicals in personal care products & household items without our consent. Certain chemicals found in perfumes, body cream, baby products are associated with cancers, thyroid dysfunction issues, development and cognitive delay (EWG 2026). This creates a case of environmental & public health injustice for the people of Sivuqaq and the North. That is why we partnered with community leaders, elders, youth, and health professionals to create educational materials with the purpose of sharing knowledge, empower leadership and youth and to work toward environmental health & justice through trainings, gatherings, reports, scientific articles, toolkits and fact cards.

Protecting Our Mamaqs: An Environmental Health Toolkit for breast cancer prevention & protecting the health of the people living with breast cancer was created for the Community Health Aide Program (CHAP) to tailor education to our Alaska Native communities. The long-term goal of this project is to

reduce the risk of breast cancer among Alaska Native women. Education and prevention are essential for creating healthy communities. This toolkit on environmental links to breast cancer, as well as prevention, identifies what it is, chemicals of concern, and an environmental health history and assessment form. Breast cancer is the most common cancer and cause of cancer-related death among women worldwide. In Alaska, female breast cancer is the most common cancer diagnosed among Alaska Native women. Between 1974-1994, the incidences of breast cancer (diagnosis of new cases) increased by 105% among Alaska Native women. One study from the U.S. Centers for Disease Control and Prevention (CDC) found that the incidence rates for invasive breast cancer in women under the age of 40 years is 58% higher in Alaska Native women compared to non-Hispanic white women in the same region. <https://www.akaction.org/protectingour-mamaqs/>

In Alaska, Yugtun is the leading Alaska Native language and is spoken by over 19,000 Central Alaskan Yup'ik people. To best serve our communities, we translated our breast cancer prevention fact cards into Yugtun and plan on translating them into Inupiaq and St. Lawrence Island Yupik next. By providing translated fact cards, we bridge the gap between western medicine and our traditional way of life. The top eight (8) chemicals of concern and exposure routes translated include: flame retardants, personal care products and cosmetics, persistent organic pollutants (POPs), occupational exposures, air pollution, pesticides, plastic packaging, traditional foods, diet and nutrition.

In October 2025 we presented the newly released Yugtun fact cards, by Rosalie Lincoln (one of the Yugtun trans-



lators) and Dr. Catherine Moses on our monthly Collaborative on Health and Environment-AK webinar. While voting materials are translated into Yugtun, there are not a lot of other materials readily available in Yugtun or other Alaska Native languages. Our goal with this project is to remove language barriers so that Alaska Native people have access to important public health information and ways to prevent exposures to harmful chemicals and products linked with cancer and other health harms.

To build power and strengthen our communities, we hold Indigenous Women and Girls Gatherings where we provide a safe space to share information and build leadership. The gatherings also serve as a place to voice our concerns about local issues such as healthcare, exposure to environmental contaminants, and opposition to mining and other development that affect our communities, fishing, hunting and food gathering locations. We also began tailoring education on breast cancer prevention to middle school and high school students. Early prevention and education are key to making informed decisions about your lifestyle.

The Arctic's Plastic Crisis: Toxic Threats to Health, Human Rights, and Indigenous Lands from the Petrochemical Industry is another publication we created that highlights that the Arctic is now a hemispheric sink for Persistent Organic Pollutants (POPs) and the Arctic's growing microplastics crisis. Indigenous Peoples' lands, waters, and health are damaged through exploitation for minerals, oil, and gas, coupled with a rapidly warming climate. Food security, environment, and

human health are threatened by climate change and the increasing concentrations of toxic chemicals and plastics that are accumulating in fish, wildlife, and people from local and global sources. <https://www.akaction.org/publications/the-arctics-plastic-crisis/>

Alaska Community Action on Toxics is a statewide environmental health and justice non-profit organization, dedicated to research and advocacy to protect public health in Alaska and the world. Our mission is: We believe everyone has a right to clean air, clean water, and toxic-free food.

Annie Alowa was a midwife, community health aide, and advocate for health and justice. We honor her work in everything we do.

### Bios:

*Jasmine Monroe is Inupiaq, Yupik, and Cherokee from Elim, Alaska. She studied at the University of Alaska Fairbanks and works to protect her community from threats of uranium mining. Jasmine started working with ACAT in 2015 as an intern and has remained a dedicated supporter of the organization; she has been working as the Water Quality and Community Health Protection Coordinator for the last two years.*

*Vi Pangunnaaq Waghiyi is a Sivuqaq Yupik Grandmother and Native Village of Savoonga Tribal Citizen. Since 2002, she has worked with ACAT and serves as Environmental Health and Justice Director. She was appointed by President Biden to the White House Environmental Justice Advisory Council (WHEJAC) in April 2021 and was inducted into the Alaska Women's Hall of Fame during 2024. She is a nationally recognized environmental justice leader and is frequently invited to speak locally, nationally, and internationally.*



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<sup>2</sup> Environmental Working Group, the Toxic Twenty Cosmetic Ingredients and Contaminants, accessed at [http://cdn3.ewg.org/sites/default/files/u352/Toxic%2020%20List.pdf?\\_ga=2.36293026.364182527.1554126027-937396664.1520601435&\\_gac=1.259664632.1553597903.CjwK-CAjwm-fkBRBBEiwA966iZF139RiUrtNyeYyEiYAnOqpk3GtURCnR-jqAsTCXwDcJ1oSlgOTy1BoCOKcQAvD\\_BwE](http://cdn3.ewg.org/sites/default/files/u352/Toxic%2020%20List.pdf?_ga=2.36293026.364182527.1554126027-937396664.1520601435&_gac=1.259664632.1553597903.CjwK-CAjwm-fkBRBBEiwA966iZF139RiUrtNyeYyEiYAnOqpk3GtURCnR-jqAsTCXwDcJ1oSlgOTy1BoCOKcQAvD_BwE)

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<sup>6</sup> Wingo, P. A., King, J., Swan, J., Coughlin, S. S., Kaur, J. S., Erb-Alvarez, J. A., . . . Arambula Solomon, T. G. (2008). Breast cancer incidence among American Indian and Alaska Native women: US, 1999–2004. *Cancer*, 113(S5), 1191–1202. <https://doi.org/10.1002/cncr.23725>

Protecting Our Mamaqs



The Arctic's Plastic Crisis





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THE ALASKA CLUB



# TO OUR VENDORS



# Love a NURSE 5K

A DAY TO CELEBRATE, SUPPORT AND HONOR  
THE INCREDIBLE NURSES IN OUR COMMUNITY.



# 2026 ALASKA LABOR VOTER GUIDE

The Alaska AFL-CIO vets all candidates for public office and endorses those who will stand up and fight on behalf of Alaska's working families. After analyzing candidate questionnaires and conducting candidate interviews, the Alaska AFL-CIO, Anchorage Central Labor Council, and Fairbanks Central Labor Council encourage our members to vote for the following candidates:

## State House

HD 2 - Rebecca Himschoot  
HD 5 - Kathy Simpler  
HD 6 - Brent Johnson  
HD 9 - Ky Holland  
HD 10 - Chuck Kopp  
HD 11 - Danni Hall  
HD 12 - Calvin Schrage  
HD 13 - Lisa Keller & Felix Rivera  
HD 14 - Alyse Galvin  
HD 15 - Denny Wells  
HD 16 - Carolyn Hall  
HD 17 - Zack Fields  
HD 18 - Cliff Groh  
HD 19 - Genevieve Mina  
HD 20 - Andrew Gray  
HD 21 - Donna Mears  
HD 22 - Ted Eischeid  
HD 23 - Ruby Jones  
HD 24 - Gina Wall  
HD 25 - Steven Merritt  
HD 26 - Jeanne Troshynski  
HD 30 - Sandra Loomis  
HD 31 - Maxine Dibert  
HD 32 - Will Stapp  
HD 33 - Pepper McFarland

HD 34 - Joy Beth Cottle  
HD 35 - Ashley Carrick  
HD 36 - Crystal Jones  
HD 38 - Nellie Jimmie  
HD 39 - Neal Foster  
HD 40 - Robyn Frier

## State Senate

SD C - Louise Stutes  
SD E - Cathy Giessel  
SD G - Elvi Gray-Jackson  
SD I - Löki Tobin  
SD K - Bill Wielechowski  
SD Q - William Hunt  
SD S - Bryce Edgmon

## US House

Bill Hill

## US Senate

Mary Peltola

## Governor

Click Bishop

# ALASKA UNION STRONG

# WRITE FOR THE ALASKA NURSE MAGAZINE!

## CALL FOR ARTICLES



### Article Submissions

Submit by sending a pitch or completed piece to [mat@aknurse.org](mailto:mat@aknurse.org) by January 17.

### Submission Guidelines:

Articles should be your own original work. Any material made with AI must be disclosed.

- Articles typically range from 400 to 1,200 words, but word count is flexible.
- Submit all articles in Microsoft Word or Google Doc format.
- Include the full names and credentials of all authors. Author photos are appreciated when possible.
- Photos are encouraged! Please submit high-resolution images along with photo credits and captions.
- If applicable, include a list of references or sources used in your article.

Feel free to share our call for articles with interested friends and colleagues. **We look forward to featuring your article in an upcoming issue!**

Do you have a perspective to share or knowledge that could benefit your fellow nurses? **The Alaska Nurse magazine is looking for contributors for our upcoming issue!** Whether you're a seasoned writer or just passionate about a topic, this is a great opportunity to highlight your work, share your experience, and connect with nurses across Alaska.

**Each issue of our magazine features a different focus related to nursing and healthcare.** Articles do not have to fit the theme and can be personal, educational, or just plain interesting. In 2026, we're particularly interested in book reviews, visual art, poetry, and personal stories – see below for details.

We welcome a wide range of formats, including well-researched articles, profiles, personal essays, and more. If you have something to say related to one of these topics, or a fresh idea we haven't thought of yet, we want to hear from you!

## SUBMISSION OPPORTUNITIES

- **BOOK REVIEWS:** We're interested in reviews of books related to nursing, care work, disability, healthcare, and more. There is no minimum / maximum word count. Please send a pitch in to [mat@aknurse.org](mailto:mat@aknurse.org) if you'd like to write a book review.
- **VISUAL ART AND POETRY:** We'd love to highlight the work of nurse artists. Poetry can be submitted by email. Art can be scanned, or you can send a photo of your art for us to print. A wide variety of visual art will be accepted, including but not limited to: collage, paintings, earrings, sketches.
- **RECIPROCITY:** Tell a short story in your own words! This column will center personal narratives by nurses, those we've cared for, and people who inhabit the intersection of both nurse and patient. The goal of this column is to encourage reciprocal understanding between those of us who give and receive care. Word count limit: 500 words.

## WINTER 2026 - Refusals

Submission Deadline: October 19

When certain institutions, classes, and people have much more power than others – such as with state violence, genocide, labor struggles, and in the case of nurses caring for patients in medical and psychiatric institutions – often, the greatest power people have is to refuse.

We're interested in articles including, but not limited to, themes around:

- Patients refusing care
- Nurses refusing doctors orders
- Healthcare workers refusing exploitation
- Indigenous people refusing colonization

Please email [mat@aknurse.org](mailto:mat@aknurse.org) if you'd like to pitch or submit an article, or if you have any questions.

Check our website for more details:  
<https://aknurse.org/write-for-the-alaska-nurse-magazine/>



*We look forward to featuring your article in an upcoming issue!*

# AaNA Calendar of EVENTS

## Upcoming Events

### Improving Lives Conference

- Alaska Mental Health Trust Authority
- September 17-18, 2026
- BP Energy Center, Anchorage
- [improvinglivesalaska.org](http://improvinglivesalaska.org)

### Wheezin', Sneezin' & Itchin' in Alaska

- Asthma & Allergy Foundation of America, Alaska Chapter
- September 18-19, 2026
- Dena'ina Center, Anchorage
- [conference.aafaalaska.com](http://conference.aafaalaska.com)

### Palliative Care Alaska Network's 10th Annual Symposium

*(in-person & virtual option available)*

- Advancing Compassion: The Future of Palliative Care in Alaska
- November 7, 2026
- Anchorage

### Alaska ENA Conference & CEN Review

*(in-person)*

- April 22-24, 2026
- BP Energy Center, Anchorage
- [connect.ena.org/ak/home](http://connect.ena.org/ak/home)

### Nursing Narratives

*(in-person)*

- Hosted by AaNA
- September 30, 2026
- Tickets go on sale in late August!
- Bear Tooth Theatrepub, Anchorage
- [aknurse.org](http://aknurse.org)

### 2026 Trending Topics in Nursing Conference

*(in-person)*

- Hosted by AaNA
- September 30 - October 2, 2026
- BP Energy Center, Anchorage
- [aanaconference.org](http://aanaconference.org)

### Alaska Board of Nursing Meeting

- May 6-7, 2026
- Virtual
- [nursing.alaska.gov](http://nursing.alaska.gov)

### AaNA General Assembly

*(hybrid)*

- Hosted by AaNA
- October 2, 2026
- BP Energy Center, Anchorage
- [aknurse.org](http://aknurse.org)

### Medications for Addiction Treatment Conference

*(virtual)*

- The Future of MAT in Alaska
- October 13-15, 2026
- [matconference.com](http://matconference.com)

### Alaska Board of Nursing Meeting

- November 4-6, 2026
- Agenda Deadline: October 2
- [nursing.alaska.gov](http://nursing.alaska.gov)

## Recurring Events

### All Alaska Pediatric Symposium

- November 13-16, 2026
- Marriott Anchorage Downtown, Anchorage
- [a2p2.org](http://a2p2.org)

### Alaska Board of Nursing Meeting

- February 3-5, 2027
- Agenda Deadline: January 4
- [nursing.alaska.gov](http://nursing.alaska.gov)

### Book Club

*(virtual)*

- Hosted by AaNA
- Meets every other month
- Contact hours available
- Email [krista@aknurse.org](mailto:krista@aknurse.org) to participate
- [aknurse.org](http://aknurse.org)

### Tuesday Talks

*(virtual)*

- Hosted by AaNA
- September 15, 2026 at 6 PM
- November 17, 2026 at 6 PM
- Free contact hours available
- [aknurse.org](http://aknurse.org)

## AnNA Meetings

### Board of Directors

*(virtual)*

- Held on 4th Wednesday of each month at 4:30 PM
- Email [geri@aknurse.org](mailto:geri@aknurse.org) if interested in attending

### Labor Council

*(virtual)*

- Held on 4th Thursday of each month at 4:30 PM
- Email [geri@aknurse.org](mailto:geri@aknurse.org) if interested in attending

### Providence Registered Nurses Bargaining Unit Meeting

*(virtual)*

- Held on 3rd Thursday of each month at 4 PM
- Email invites sent to members each month

### Ketchikan Registered Nurses Bargaining Unit Meeting

- Held on 1st Thursday of each month at 5:30 PM
- Text invites sent to members each month

### RNs United (Central Peninsula Hospital) Bargaining Unit Meeting

- Email [jenipher@aknurse.org](mailto:jenipher@aknurse.org) for meeting dates

## License Renewal Deadlines

**LPNS:** September 30

**RNS & APRNS:** November 30

Visit [www.aknurse.org/events](http://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](http://www.aknurse.org). Send information to [editor@aknurse.org](mailto:editor@aknurse.org)

## **EMPOWERMENT**

Creating opportunities for nurses to be dynamic and powerful leaders

## **ADVOCACY**

Serving as a voice for nurses across the state and promoting access to health care for all Alaskans

## **REPRESENTATION**

Advancing the economic and general welfare of nurses

## **PROFESSIONALISM**

Fostering high standards of nursing practice, education and professional development

## **INTEGRITY**

Promoting integrity and ethical behavior for all nurses



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