

# Calls for Change Resonate at The Nurses' March in Washington

By [Terrey Hatcher](#) | May 13, 2022 8 minute read



Nurses traveled from across the country this week to gather at The Nurses' March in Washington, D.C., and raise their voices for change on International Nurses Day. [The Nurses' March](#) drew nurses from California to Connecticut as they rallied together to mourn nurses who lost their lives during the COVID-19 pandemic. The Nurses' March Executive Director Marla Barthen said she organized the event "because I felt the losses, and I knew that all my nurses were feeling the losses." Amid a day of remembrance and inspirational messages, nurses vowed to stand together to promote improvements in their work environment that would benefit them and their patients.

The issues that dominated The Nurses' March speeches were:

- Safe patient-nurse ratios that promote better care
- Protection from violence and abuse against nurses
- Higher nurse pay to match high demands and liability
- Work environments that support nurses' well-being

## Advocating for Safe Staffing Ratios

We spoke with nurses who traveled to the event to speak up for themselves and their colleagues. Strong feelings about high patient-staff ratios they have endured during the pandemic were ubiquitous. They said they care deeply about their jobs and feel taken advantage of by continued understaffing. Stephanie Gattas, chief executive officer (CEO) and founder of the [Pink Berets](#), an event sponsor, said, "Our nation fell to its knees with COVID-19. Our healthcare workers were the first to answer the call."

Nurses have dealt with grueling shifts and a shortage of protective gear. In light of those hurdles, Gattas said, "Having underpaid healthcare workers is an injustice. Understaffing is an injustice." The Pink Berets provides aid and relief to women in the armed services, veterans, first responders, and more.

Nurses discussed work environments where they have felt pressure to put aside their personal needs for food, bathroom breaks, and rest because they don't want to let down their colleagues and their patients when staffing isn't high enough to meet patient demand.

## Staffing ratios affect patient outcomes

Speaking at the march, Tina Vinsant, RN, a travel nurse with Trusted Health and host of the podcast [Good Nurse, Bad Nurse](#), said, "Studies have shown that patient outcomes are directly tied to safe staffing ratios." A meta-analysis of [hospital staffing and patient outcomes](#) in 2018 found that higher staffing levels were associated with reduced mortality, and fewer medication errors, ulcers, restraint use, infections, pneumonia, and other beneficial outcomes. A [National Nurses United survey](#) released in April found that 69% of hospital nurses surveyed said staffing has become worse recently, and 64.5% reported that their facilities are using excessive overtime to staff hospital units. At The Nurses' March, which was co-sponsored by Nurse.com, Vinsant said the high patient-nurse ratios are leading to nurse burnout and broken dreams.

"There is not a nursing shortage. There is a shortage of nurses willing to work at the bedside," she said. "A major part of the problem is that hospitals are not willing to do what it takes to get enough nurses at the bedside."



One of the nurses who came to The Nurses' March, Lisa Kjar, BSN, RN, CEN, CPN, TNC, Rapid Response Team at Emory University Hospital Midtown in Atlanta, shared her feelings of being undervalued. At the start of the pandemic, "The whole world stood still, and everyone was rendered helpless," she said, yet nurses didn't stop working. She and Ashley Teague, MSN, RN, Nurse Clinician III in the Primary Covid/Medical ICU at Emory Healthcare Midtown, tearfully shared their stories of having to watch patients die while their families could not be there because of infection control regulations to prevent the spread of the coronavirus. "One week, we lost 16 patients over a seven-day period," Teague said. Kjar stressed the toll that kind of repeated loss takes on a nurse. "Not only did we take care of them, but we walked them into their afterlife," she said. "The difference we make matters. We deserve to be treated with respect."

## Dealing With Violence and Abuse

Nurses also recalled enduring physical and verbal abuse. Amanda Littleton, BSN, RN, CPN, a nurse in the Atlanta area, said she had been assaulted by patients with a punch in the face. Teague said she was assaulted by a patient who touched her breasts. "We are programmed not to prioritize safety reporting for ourselves," Teague said. Sandra Risoldi, DNP, APRN, MSN Ed, PMHNP-BC, founder of [Nurses Against Violence](#), an event sponsor, said, "Prevention is key. It is vital that we prevent problems before they get worse." Nurses do their jobs despite these challenges because, "We have compassion," Littleton said, yet she feels sometimes that compassion supersedes their own health and safety. A nurse aide attending the march, Paul Tomczuk, CNA, who works in the St. Louis area, said he had dealt with difficult and combative patients and had also been punched. He expressed concern that more nurses are getting burned out and leaving amid the challenges of high patient-nurse ratios, the stress of the pandemic, and the potential for patient violence.

## Pay Concerns Amid Stressful Work

On top of the existing challenges, nurses are hearing about legislators questioning their pay. A [letter in January from legislators](#) requested that federal agencies investigate staffing agency pricing to see if it is anticompetitive or violates consumer protection laws. Nurses have heard reports that legislators intend to cap their pay, but that information is not requested in the letter.

At a time when nurses are seeing some encouraging pay increases, the threat of legislators getting involved in limiting their pay has led to angry outcries. If legislators want to limit salaries, Tomczuk said, they should look at the salaries of hospital CEOs.

Our research shows that 25% of nurses reported pay increases amid the pandemic, as indicated in our [2022 Nurse Salary Survey Report](#), yet 9% reported decreases. Some nurses are realizing higher pay by becoming travel nurses, and many have chosen to travel during the pandemic. Tomczuk said higher salaries in recent years have been welcome after years of low pay. Rather than looking at limits, he said, "Let the market bear what it can."



## Supporting Diversity and Nurse Well-Being

Improving the healthcare work environment was another strong concern of attendees at The Nurses' March, as nurses continue to deal with high patient loads and loss of life. While nurses came together to mourn colleagues and patients lost during the pandemic, Cara Lunsford, RN, Founder and CEO of HOLLIBLU and Vice President of Community at Nurse.com, said, "The path to healing is to be able to sit in our grief." As nurses continue to care for patients with COVID-19, staff wellness is a strong concern. In a video speech, Janice Maloof-Tomaso, RN, asserted, "We also need to protect our colleagues' mental health and to keep our nurses alive." She called for more support from hospital administrators and annual mental health stipends for nurses.

Working in an inclusive environment is another important element of nurse wellness. "Representation does matter. However, adding diverse staff is just the beginning," said Bryanna Patterson, RN, speaking and representing the Rochester Black Nurses Association at the event. Nurses who are Black, Indigenous, and people of color (BIPOC) deserve to have access to power, leverage, and support in their roles, she said.

Patterson also called for adequate funding and tools to eliminate racism, which she asserts is "a public health crisis." To move inclusivity in nursing forward, Patterson said, "We must be the change we want to see in health care."

## Speaking Up for Future Improvements

When asked what changes they hope to see, a group of nurses from Michigan shared their thoughts. Frankie Mullins, RN, from Sterling Heights, who currently works in corrections health care, said she would like to see more training, more time allotted on the job for training, and adequate resources to provide a safe work environment. Gwendolyn Weber, LPN, who works in a skilled nursing facility in Gaylord, said that pressure to fill beds despite short staffing translates to nurses feeling a lack of management support to do the job the way it should be done. "Have management work the floor once in a while," she suggested, so they can really understand what nurses are going through. She also called for more training for managers to help nurses feel supported. When the patient census surges in the middle of a shift, nurse supervisors should be prepared, said Vicky Hilario, RN. She said she's tired of hearing, "It is what it is." Instead, "Supervisors need a backup plan to bring on more nurses." Trish Richardson, MSN, BSBA, RN, NE-BC, CMSRN, President-Elect of the [North Carolina Nurses Association](#) (NCNA), was quick to point out that the march and frank discussions about the healthcare system illustrated nurses' intent to make their needs clear. "We are not going back -- we are going forward. It is time to be heard," Richardson said. "We have to lift each other up!" said Risoldi. **Join our Nurse Community and connect with your peers!**