



## **NCNA Looks Back At Its Racial History Part 3: 1980-Today, An Era Of Racial Progress**

**By: Dr. Phoebe Pollitt, RN**

### **Abstract**

*As part of the Board of Directors' new strategic priority, Relentless Inclusion, the North Carolina Nurses Association is spending much of 2023 on a multipronged effort to address racism within the nursing profession. A significant part of that effort includes owning and reckoning with the association's own racist past. NCNA asked Dr. Phoebe Pollitt, Vice Chair of the Nursing History Council, to take the lead on a series of articles for the Tar Heel Nurse examining the association's formation, evolution, and examples of events that could and should have been handled differently.*

Over the last 121 years, NCNA's culture has evolved from racial exclusion and discrimination to striving for racial inclusion, equity, and diversity. NCNA leaders and members are undertaking efforts to address the substantial challenges faced by minority nurses in North Carolina, while recognizing the strength and determination nurses of color have exhibited under difficult circumstances for over a century. Only by having a diverse, inclusive nursing workforce in North Carolina can NCNA meet its goals of serving the changing needs of its members, addressing nursing issues, and advocating for the health and well-being of all people. Reflections from NCNA leaders of color, along with archival materials, document slow but steady progress towards a more diverse and inclusive association.

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# TARHEELNURSE

THE OFFICIAL PUBLICATION OF THE  
NORTH CAROLINA NURSES ASSOCIATION

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### Black History Month celebrated at UNC-G

Helen S. Miller, former dean of the NCCU Department of Nursing, was guest speaker at the Black History Month Celebration at UNC-G School of Nursing on February 23. Mrs. Miller—historian, author and educator—shared her collection of stories.



Helen S. Miller

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2023 NCNA BOARD OF DIRECTORS  
Gerry Roberts, Sheila Cromer and Sandra Randkeman representing the future, past and present of NCNA leadership.

### on Practice, will be one of North Carolina's 39 delegates to the White House Conference on Families scheduled for June 5-7 in Baltimore, Md.

NCNA was among the organizations invited to designate a member to the North Carolina Task Force on the White House Conference.

**Janice Robinson**

### The process for selecting the 39 delegates to the Conference called for selection of 12 delegates through public lottery, appointment of 15 delegates by the Governor, and selection of 15 organizations which designate a delegate.

Mrs. Robinson is a member of the faculty of the UNC-G School of Nursing and was chairman of the NCNA Maternal-Child Health Division during the 1977-79 biennium.

### Malone Runs As Candidate for ANA Board

Dr. Beverly Malone, Dean of the School of Nursing at North Carolina Agricultural and Technical State University has been nominated for the Office of Director on ANA's Board of Directors.

**Dr. Beverly Malone runs for ANA Board of Directors**

### Lois Isler named to Nursing Board

Governor James Hunt, Jr. has appointed Lois S. Isler of Greensboro to the North Carolina Board of Nursing.

**Lois S. Isler**

### focuses on 'The 80s: Accent on Action'

Delegates as policies and directions for the future are formulated; Take fun and relaxing "health breaks" arranged by hostess nurses; Attend business meetings of practice divisions, educational forums, sections; Participate in planning for nurses to use the political arena to achieve professional goals; Buy for holiday giving at a "Country Store" filled with crafty items made by nurses;



Ingeborg Mauksch Barbara Nichols

CONGRESSMAN WILLIAM HEFLER, N.C. EIGHTH DISTRICT, IS ONE OF CONGRESSIONAL CANDIDATES ENDORSED BY NC-CAP, ANA'S POLITICAL ACTION COMMITTEE DURING HIS 2002 CAMPAIGN CONTRIBUTION TO THE HEFLER PRIMARY CAMPAIGN WAS \$100. IRINA HEFLER OF STATESVILLE, CATHY HUGHES, NCNA'S HOUSE-PAC AND MARY ANN FOLEY, NURSE-PAC SECRETARY, ALSO OF CHARLOTTE, IN-CAP CAMPAIGN CONTRIBUTIONS TO MICHAEL MITCHELL OF DURHAM, WHO LOSED TO TONY DENZEL, IN THE DEMOCRATIC CONVENTION IN THE SECOND DISTRICT, AND TO STEPHEN NEAL OF THE FIFTH DISTRICT.

2010 ANA HOUSE-PAC VICE PRESIDENT  
2010 ANA HOUSE-PAC VICE PRESIDENT

Incumbent Congressman Stephen L. Neal (5th District) received a political action committee of the American Nurses' Association contribution of \$1,000. Shown presenting the NC-CAP check to Co-Chair Mary Lou Moore, left, and Sandra Randkeman. Winston-Salem's Neal is seeking reelection in the November general elections.

INCUMBENT HOUSEPAC MEMBER SANDRA RANDKEMAN, IN A FIVE YEAR TERM, WAS REELECTED TO A SECOND TERM AS HOUSEPAC VICE PRESIDENT.



# NCNA Looks Back at Its Racial History

## Part 3: 1980-Today, An Era of Racial Progress

By NCNA Member Dr. Phoebe Pollitt, RN; Nursing History Council Vice Chair

**Editor's Note:** As part of the Board of Directors' new strategic priority, Relentless Inclusion, the North Carolina Nurses Association is spending much of 2023 on a multipronged effort to address racism within the nursing profession. A significant part of that effort includes owning and reckoning with the association's own racist past. NCNA asked Dr. Phoebe Pollitt, Vice Chair of the Nursing History Council, to take the lead on a series of articles for the *Tar Heel Nurse* examining the association's formation, evolution, and examples of events that could and should have been handled differently.

Over the last 121 years, NCNA's culture has evolved from racial exclusion and discrimination to striving for racial inclusion, equity, and diversity. NCNA leaders and members are undertaking efforts to address the substantial challenges faced by minority nurses in North Carolina, while recognizing the strength and determination nurses of color have exhibited under difficult circumstances for over a century. Only by having a diverse, inclusive nursing workforce in North Carolina can NCNA meet its goals of serving the changing needs of its members, addressing nursing issues, and advocating for the health and well-being of all people.

Reflections from NCNA leaders of color, along with archival materials, document slow but steady progress towards a more diverse and inclusive association.

### Timeline of racial progress 1980-2000

#### 1980s

After the election of President Ernestine Small (1979-1981), a new era of racial progress ensued at NCNA. The *Tar Heel Nurse* published more stories and photographs of African American nurses than ever before. An article highlighting Lois Isler, a Greensboro nurse practitioner and the first African American nurse appointed to the NC Board of Nursing since Helen Miller in 1965, was published on the front page of the Winter, 1980 issue.

The next issue (Spring, 1980) featured a story on Janice Robinson, another African American NCNA member serving as delegate to a White House Conference on Families.

Accomplishments of African American nurses Sadie Webster, Dr. Vercie Eller, Helen Miller, Janice Robinson, Lois Isler, Dr. Ora Strickland, Miriam Whiteside, Carolyn Henderson, and Cathy Hughes were publicized and President Small wrote a President's Message in several issues accompanied by her photograph.

Perhaps the most pertinent THN item printed in 1980 was from the NCNA Committee on Human Rights, which published a questionnaire in the September/October 1980 issue inviting

members to an open forum to discuss discrimination at the 1980 Annual Convention (below).

#### Forum scheduled to hear discrimination problems

Minority nurses: NCNA is listening! Come and share your problems and concerns at the 1980 convention. The Committee on Human Rights forum on October 12, 5-7 p.m., is your opportunity to relate discrimination/equal employment opportunity problems you have encountered as a minority nurse. Bring your ideas on how NCNA can address these issues.

The Committee invites you to send written comments/concerns in advance of the forum to: Charlotte Daily, Chairman, 3226 Woodlea Drive, Greensboro 27406.

Results were published the next year (Sept/Oct, 1981) and indicated "Few respondents listed barriers to belonging to NCNA, but those who did cited financial reasons and questioned the value of belonging."

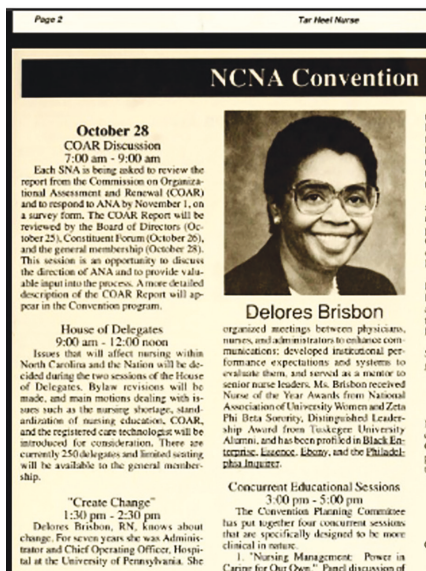
While NCNA has always accepted Native American nurses as members, including Eastern Band Cherokee Indian nurses Lula Owl Gloyne, Frela Beck, and Ernestine Walkingstick, the first article published about a Native American nurse from North Carolina was in the Nov/Dec, 1980 issue. NCNA leaders recommended Eva Sampson, a Lumbee nurse, to be the organization's representative to the State Board of Education's Health Education Study Commission.

ANA President Barbara Nichols was the first African American keynote at an NCNA Convention in 1981 (July/Aug issue).

In 1982, North Carolina became the first state in which nurses elected fellow nurses to the Board of Nursing. Of the 8 nurses initially elected, 2 were African Americans: Ernestine Small and Lois Simmons-Isler.

A short piece about Helen Miller's (Dean of the Nursing Department at NCCU) retirement appeared in the May/June 1982 issue.





In 1985, District 11 celebrated Black History Month.

In 1986, Delores Brisbon became the second African American to be a featured speaker at the NCNA Convention (left).

In 1986, Dr. Beverly Malone came to North Carolina as Dean of the nursing school at NCA&T in Greensboro. She was appointed Vice

Chancellor of the University in 1994. Dr. Malone was very active in NCNA until she left North Carolina to serve as the second African American president of ANA, and later as CEO of the British Royal Society of Nursing and Chief Executive Officer of the National League for Nursing. In 1988, the THN highlighted her successful run for a seat on the ANA Board of Directors.



**FIRST PERSON FEEDBACK**

*NCNA leaders of color offer their perspective on the association's progress with diversity and inclusion.*

**Carolyn Henderson, MSN, BSC, RN  
Member since: 1971**

**Past roles:** Member of the NCNA Board of Directors, Chair of the NCNA Commission on Education, Member of the NC Foundation for Nursing Board of Trustees, various committees

"During this period, there were very few Black nurses represented as members and even fewer represented in NCNA leadership. With such little minority representation, I was not optimistic about pursuing leadership involvement in NCNA. My observation was that most Black nurses were joining the Black Nurses Association where leadership was more easily accessible. I chose to continue membership in NCNA and ANA to hopefully increase minority the membership representation and involvement in these nursing professional organizations."

"During the 70s, very few minorities held elected office or were appointed to positions as chairs of committees. As a minority member, I was not motivated to seek election nor was I approached until the 80s when Dr. Russell Eugene 'Gene' Tranbarger, former NCNA president, my UNCG graduate school preceptor and Director of Nursing at Moses Cone Hospital in Greensboro, asked me to consider running for NCNA Secretary. I chose not to run and decided to increase my representation on various NCNA committees which included, but were not limited to, Education, History, CE, Nurses on Boards as well as serving several years as a delegate to nursing conventions. In the past 40 years, I have seen progress in minority leadership which has included NCNA presidents Dr. Ernestine Small, Ms. Sandra Randleman, Dr. Ernest Grant and now Dr. Meka Ingram as well as in the current NCNA Board of Directors and committees."

Henderson recalled the election of Dr. Ernestine Small, the first African American president of NCNA, this way:

"Dr. Ernestine Small, a Black professor, was my thesis advisor at the University of North Carolina at Greensboro (UNCG). I do believe that Dr. Small was accepted as a qualified candidate for the position; however, there were clusters of nurses who were skeptical of this possible minority representation of NCNA. Dr. Small's professional, educational and knowledgeable experience prevailed, and she was elected."



Other "firsts" occurring in the 1980s include Cathy Hughes' election to Chair of NCNA's Nurse PAC in 1981, the first African American to hold that position (left).

In 1982 Pam Joyner, a UNC-Chapel

Hill student, was selected as Student Nurse of the Year by the Student Nurse Association of North Carolina. And in 1989, Mary James, Dean of Health Programs at Fayetteville Technical Community College, was the first documented African American nurse to be awarded with a Nurse of the Year honor when she was named NCNA's Nurse Educator of the Year.

After 80 years as an organization and 30 years after its merger with the North Carolina Association of Negro Registered Nurses (NCANRN), NCNA was reaching a new level of inclusiveness.

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**President's Message**

WOW! Have the past two years gone by FAST!! The saying is... "time flies when you're having fun." And, yes these last two years have been filled with the kinds of fun which challenged me and kept me energized.

Some major challenges this organization faced successfully included (1) planning, developing and adopting a Strategic Plan which will be implemented immediately (2) planning and developing a RE-ACT team (and what a team!) who directed the passage of third party reimbursement for nurses in North Carolina (what an undertaking!) and (3) at the final meeting of the 1991-1993 Board of Directors it was announced that NCNA had signed an agreement to assume the management of the North Carolina Foundation for Nursing (NCFN) — a move I believe will continue to progress nursing in North Carolina. Yes, during my tenure as President-Elect and as member of the Board of Directors, I have become familiar with challenge and the need to maintain energy and enthusiasm



Sandra Randleman

forts in this area. We must roll up our sleeves and put the energy behind our voices. Our

ardless of ethnic diversity, gender or specially and emphasize our need to support each other across the state. Today, I would request that we expand this unity and support the services provided by nurse members. For example, we could employ the services of nurse members who are in independent practice such as nurse practitioners, nurse midwives, clinical nurse specialists or are nurse entrepreneurs such as management consultants, nurse attorneys, day care owners, home health owners, etc. To support them strengthens our unity because we become a powerful TEAM (Together Everyone Achieves More). Such nurse-to-nurse support could even encourage other nurses to join our organization.

Last in my line-up but most important is the element of **Response**. I will be very conscious of the need to "listen and hear" your messages, to respond to your concerns even when all desires cannot be met and to provide an increased opportunity to meet informally with your president. To accomplish this,



**FIRST PERSON FEEDBACK**

*NCNA leaders of color offer their perspective on the association's progress with diversity and inclusion.*

**Cherry Beasley, PhD, MS, RN, FAAN**  
Member since: 1974

**Past roles:** Various district officer positions and committees

"I was amazed at first about the lack of minorities active in and serving as leaders in NCNA. Being an American Indian (AI), I had hoped to have more role models from my race ... I was never denied opportunities because of my race. Still, there were no intentional efforts to include AI nurses nor to acknowledge the large number of AI in the NC population.

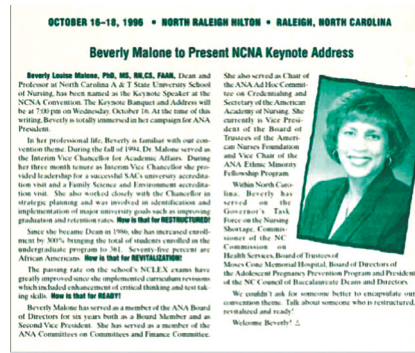
"While the lack of AI was disappointing, it did not surprise me. I was surprised by the level of involvement of Black nurses and the lack of acknowledgment of the issues they faced in nursing. I found this very apparent as I watched members who had been leaders in the NC Colored Nurses Association not be leaders in NCNA.

"There has been progress within NCNA in the past 40 years, even within the past 20 years, to being more diverse, inclusive, and equitable. One example is the change in membership and being part of committees that asked, 'Why are we not getting more minority nurses to join' or 'Is our slate diverse and inclusive?' NCNA is now beginning to address the question of equity. Examples are the Diversity, Including, and Equity task force and the topics at conventions, Nurses Days at the Legislature, and regional meetings."

**1990s**

In 1991, Sandra Randleman (now Wilder) was elected to the Board of Directors of the NCNA. Two years later, her presidential election marked continued racial progress as the second African American to lead NCNA (left).

In 1992, the THN featured an article on Dr. Beverly Malone's successful run for a seat on the Board of Directors of ANA.



In 1995, Dr. Ernest Grant, future president of NCNA and ANA, was elected to the NCNA Board of directors for the 1996-1998 term.

Dr. Malone gave the keynote speech at the NCNA Convention in 1996 (left).

In 1999, Veronica Roundtree was the first African American elected as president of the NC Association of Nursing Students.

**2000-today**

Articles and photographs about African American and Native American nurses continue to be regularly featured in the THN. Occasional articles discussed racial aspects of health care.

The March/April 2000 issue of the THN included survey results from the Kaiser Family Foundation about race, ethnicity and medical care.



The 48<sup>th</sup> NCNA President, Eileen Kohlenberg, passes the gavel to Ernest Grant following his installation as the 49<sup>th</sup> President of NCNA.

Dr. Ernest Grant graced the cover of the May/June 2002 issue when he was named an Honorary Nursing Practice Winner by the ANA. Seven years after this honor, Dr. Grant became the third African American and first man elected NCNA President in 2009 (above).

Since 2015 the THN has published a regular column focused on NCNA history which has included biographies of nurses of color (Charlotte Rhone, Ernest Grant, Helen Miller, Ernestine Small, Virginia Dixon) as well as articles about the schools of nursing open to African Americans in the Jim Crow era and a brief history of the North Carolina Association of Negro Registered Nurses. Five nurses of color, out of 22 total nurses, have been inducted into the NCNA Hall of Fame. Four of the past 21 NCNA presidents have been African American nurses.

For over 10 years, the Board of Directors of the NCNA has been a model of inclusion, often being more diverse than the NCNA membership and the nursing workforce in our state. Tina Gordon, the NCNA Executive Director recently noted:

“Currently, 4 out of 9 board members are nurses of color. The board immediately prior had 4 out of 10 BIPOC nurses and 3/10 men. NCNA has also had work groups/task forces of various types working on issues related to diversity and inclusion at least 3 or 4 times in the last 15 years and the House of Delegates approved an updated bylaws provision in 2013 that allows appointments to the board to enhance diversity on the board if the election does not yield diverse representation.”



### FIRST PERSON FEEDBACK: NEXT STEPS

The nursing leaders quoted throughout this piece were asked how NCNA can be more inclusive, diverse, and equitable in the future.

**Carolyn Henderson** said: “Although NCNA has made and is making progress in the areas of diversity inclusion, continuous efforts and proactive approaches should remain in the strategic and futuristic vision of the organization.”

She suggested a list of opportunities to enhance inclusivity in the future:

- Include representation of minorities as NCNA employees.
- Consider increased visibility and participation in HBCU nursing schools and department activities.
- Continue to seek minority professionals as NCNA presenters during NCNA Conventions, webinars, workshops, etc.
- Maintain board and committee representation.
- Enhance minority mentorships with potential leaders.

**Cherry Beasley** recommends that: “NCNA needs to bring the conversation to the forefront. While the history articles have been informative; I am not sure they thoroughly represent the struggles that nurses have encountered when addressing the



### FIRST PERSON FEEDBACK

*NCNA leaders of color offer their perspective on the association's progress with diversity and inclusion.*

**Naomi East, RN, MSN**  
Member since: 1975

**Past roles:** Member of the NCNA Board of Directors, Northwest Regional Director

“I am Asian, Pacific Islander, but I suppose I did not really feel that I was different or an ‘NCNA member of color’ or marginalized. I did not experience or see racism in NCNA.

“I believe that there has been progress within the NCNA in the last 40 years, when it comes to being more inclusive, diverse, and equitable organization. I think this movement was similar to forces that was specific to helping other minorities be more inclusive.”

‘ism’ of our society. NCNA needs to lead the charge to have the nursing workforce look more like the populations we serve. One idea would be to have regional meetings that provide intentional opportunities to discuss: ‘The value of Diversity, Inclusion, and Equity in Nursing in general and NCNA specifically?’ ‘What would a Diverse, Inclusive, and Equable organization be defined?’ and ‘What differences would we see in the organization’s budget, conventions, and meetings if we increase our commitment to diversity, inclusion, and equity?’”

**Naomi East** offered a list of suggestions geared towards recruiting the future nursing workforce in North Carolina:

- In the media, show pictures/videos of minorities in the role of RN.
- In high school and middle school career days, showcase diversity of RNs in different roles.
- Showcase nurses of color discussing their careers in organizations/churches for folks of color.
- Provide scholarships/awards/mentorship for students interested in health careers.

*continued on page 12*

**Ernest Grant** thinks that: “There definitely has been some progress and more can be done. Having a more diverse and inclusive staff is one way for the organization to work towards achieving equity. I also think that occasionally reviewing its history will ensure that it doesn’t repeat itself.

“[There should be] a deliberate effort to have more nurses of color serve in positions of leadership, perhaps hosting meetings and events in communities of color; historic Black or indigenous universities or at historical buildings that acknowledge the contributions of BIPOC individuals, and land acknowledgements prior to the start of any NCNA sanctioned meetings.”

He concluded his remarks on this hopeful note:

“I have not experienced or seen racism in NCNA. I think as an organization, it has been at the forefront of supporting all of its members regardless of the color of their skin.”



As NCNA reflects on its own racial history, it is also working towards a brighter and more inclusive future. In July, the association hosted a virtual listening session designed to give members the opportunity to discuss how racism impacted NCNA from their perspectives. NCNA will continue this important conversation at the 2023 Annual Convention, September 14 & 15, as the primary topic for the Statewide Membership Forum will be “Racial Reckoning.” We hope you can join us in-person for this important discussion.

**Correction:** in Part Two of this series, which ran in the Summer Issue of the *Tar Heel Nurse*, we inadvertently referred to Marjorie Land as Margaret Land. We regret the error. ■



**FIRST PERSON FEEDBACK**

*NCNA leaders of color offer their perspective on the association’s progress with diversity and inclusion.*

**Ernest Grant, PhD, RN, FAAN**  
**Member since:** 1986

**Past roles:** NCNA President, NCNA Board of Directors (multiple roles), NCNA Cabinet on Marketing Chair, various district officer positions and committees

“I think nurses of color who are members of NCNA have felt that they do have the opportunity to participate in and have a voice in how the nursing profession is practiced in NC. I remember as a nursing student who attended an HBU nursing school, being told by my professors that if you’re going to consider yourself to be a professional nurse, you have to belong to your professional organization. When we were assigned to attend the local district meeting or the state meeting, we saw our professors at those meetings. They (the professors) were not there to just check the role to see which of their students were there, they were actively participating in the meetings...being at the mics, asking the tough questions and being respected by their fellow colleagues. In short, they were showing us as students how to be a professional nurse and have your thoughts and opinions count! When I chaired the Membership Committee, it was a little difficult to get nurses of color to join NCNA. I think it was because of a perceived notion that NCNA did not have anything to offer nurses of color. Once I was able to explain that NCNA was there to represent ALL nurses and pointed out ways in which the association did, they would join and become ACTIVE members of the organization. I think having several nurses of color who served as president also helped to break down any perceived barriers.”

**Gardner-Webb University**

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