

Chronological: Kauai Community College Nurses Outreach Program

Senator Daniel K. Inouye Papers
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news from

Senator DANIEL K. INOUE

topic:

FUTURE OF HEALTH CARE

date:

Speech to Kauai Community College
Nursing Graduates

release date:

August 12, 1989

You are about to embark on one of the most exciting adventures available to any of our citizens, a career in professional nursing. Over the past decade our nation's health delivery system has literally exploded. As a nation we spend more today on health care than any other industrialized nation in the world. In 1970 for every dollar we spent on health care we spent approximately \$2 on national defense and education combined. This year our health care expenditures are expected to exceed \$600 billion, or nearly 12 percent of our Gross National Product. Health care costs will now equal our nation's expenditures on both national defense and education.

Our nation's Medicare program alone, which is so important to our elderly and disabled, doubled in cost between 1980 and 1985, from \$30 billion to \$71 billion. This rate of increase far exceeds the rate of general inflation, and I might add that as a nation, we continue to spend more on health care than any of our industrialized neighbors. The Medicare baseline for this year already exceeds \$100 billion and the Administration has projected that early in the next century Medicare will become the largest domestic program in the federal budget, exceeding even Social Security.

And yet at the same time, we know that nearly 35 million Americans -- about one third of them children -- have no health insurance and millions more have very inadequate coverage. Further, I must point out that two-thirds of the uninsured are in our work force, or dependents of workers; these are not the unemployed or the homeless that we read about in the media. Stated another way, one out of every four Americans may be either uninsured or seriously underinsured.

Without question, health care today has become extraordinarily complex. Every day we read about new machines, new surgical procedures which we never thought were possible just a few years ago, and new diseases such as AIDS the likes of which no one had ever in the history of mankind contemplated before. We also know that with this progress comes new problems; the psychosocial problems, for example, of those diagnosed with Cooley's Anemia who never before expected to live until their teens. And the advances in diagnosis which have allowed our scientists and practitioners to develop special

interventions targeted towards urinary incontinence, which is the leading cause of admission to nursing homes.

At the same time, we have also become acutely aware of the tremendous variations that exist across our nation -- for example, that the rates of such common surgical procedures as tonsillectomies can vary as much as eightfold depending upon one's geographical location, with similar deviations for hysterectomies and prostatectomies. Similarly, we have become graphically aware of the variations in salaries, for example, between your practitioners and your medical colleagues.

Last year I was successful in having \$2 million made available during our deliberations on the Department of Defense Appropriations bill in order to provide military nurse anesthetists with a special \$3,000 pay bonus. I pointed out to my colleagues that your practitioners currently provided more care within the various Services than physicians did, and yet, while your colleagues were not receiving pay bonuses, their physician counterparts were receiving up to \$46,000 in annual bonuses. Do you realize that in Rural America, nurse anesthetists provide over 70 percent of all anesthesia required. Our nation simply can not survive without you and yet, the way we have historically treated you is absurd. Unfortunately, we never were able to convince the Armed Service Committees to release those funds, but I can assure you that now that I am Chairman of the Defense Appropriations subcommittee, we will see action.

If one reflects upon the truly impressive history of professional nursing, it readily becomes evident that your profession holds the key to our nation's future health care delivery system. We simply can not continue the current status quo, nor can we continue "business as usual". A recently released report developed at my request by the Office of Technology Assessment has pointed that the proportion of adolescents uninsured in our nation has grown by 25 percent since 1979. The Carnegie Council on Adolescent Development, on which I serve, recently stressed that: "Unfortunately by age 15, substantial numbers of American youth are at risk of reaching adulthood unable to meet adequately the requirements of the workplace, the commitments of relationships in families and with friends, and the responsibilities of participation in a democratic society.... One in four adolescents, or 7 million young people, are extremely vulnerable to high-risk behaviors and school failure, with an additional 7 million at moderate risk. The conditions of early adolescence have changed dramatically from previous generations. More and more adolescents 15 years old and younger are becoming sexually active, risking sexually transmitted diseases or pregnancy, and the birth of unhealthy, low-birthweight babies". As a nation, we have the highest teenage pregnancy rate of anywhere in the world, in fact, it is twice that of any other western nation.

Similarly, we do not seem presently capable of effectively responding to the fact, as recently reported by the American Medical Association NEWS, that the suicide rate among elderly Americans has increased sharply in this decade, increasing 21 percent for those 75 to 84 years old, while the suicide rate for all Americans increased by 5 percent. What kind of a nation are we, if we do not collectively care enough about our families to ensure the well being of our elderly.

Yet, at the same time, you and I know that prevention is the key to a significantly higher quality of life for all of our citizens. Back under President Carter the Surgeon General of the United States reported that "Of the 10 leading causes of death in the United States, at least seven could be substantially reduced if persons at risk improved just five basic habits" -- that is, if they would merely improve their lifestyle. Similarly, earlier this year the Federal Government's Prevention Services Task Force, which is a panel of truly expert scientists and clinicians, reported that substituting behavioral interventions in ways to maintain good health is "more likely to reduce morbidity and mortality in this country than any other category of clinical intervention". Let me repeat that, "than any other category of clinical intervention". And this is the strength of your profession: prevention and behavioral interventions.

We know from the National Commission to Prevent Infant Mortality report that our nation ranks 15th in the world in saving the lives of its babies. Each year 40,000 American infants die before their first birthday. A child born in Japan, Finland, Hong Kong, Ireland, Australia, Canada, Singapore, or any of twelve other industrialized nations has a better chance of surviving his or her first year than a child born in this country. The lifetime cost of caring for a low birthweight infant can reach \$400,000; the cost of prenatal care - which might prevent this low birthweight condition in the first place -- can be as little as \$400. Prevention is the key; public health nursing is the key; and yet, for far too long, we have made this a very low priority.

Injuries alone kill more than 140,000 Americans each year with one person in three suffering a nonfatal injury. Injuries kill more Americans aged 1-34 than all diseases combined and are the leading cause of death up to the age of 44. Injuries cause almost half of all deaths among children aged 1-4 and are especially fatal among the elderly, whose rate of fatal injury is nearly double that of adolescents and young adults. And yet, I understand that less than two cents of every federal dollar for research on health is targeted towards injury prevention.

The Department of Health and Human Services has reported that "families have a very strong preference for insurance plans that cover preventive care". But we simply do not make them available. Several years ago I asked a witness who was

appearing before our Appropriations subcommittee how much we were spending on preventive care, as compared with curative care. The answer came back that at that time we were spending \$1440 per capita on curative care and less than 50 cents per person on prevention. I understand that these figures have improved slightly, but I am afraid that the underlying priority is still the same.

You are the hope of the future. The time has come for society and its elected political leadership to finally recognize your professionalism and clinical expertise. Our nation needs you. Your profession has a truly outstanding track record in serving our nation for many, many decades. I congratulate you on your choice and look forward to continuing to work closely with your leadership. Aloha.

Sen. Inouye to speak at graduation ceremony

KAUAI, Kauai — U.S. Sen. Daniel Inouye is scheduled to be the keynote speaker at a special graduation ceremony for nurses Saturday at Kauai Community College.

The eight graduates will be the first to receive bachelor of science degrees through an outreach program offered by the nursing department of the University of Hawaii-Manoa.

Aug. 10, 1989.



Eight earn Bachelor of Science degrees from KCC

Sen. Dan Inouye, left, welcomed eight Kauaians into the nursing profession on Friday as they graduated with Bachelor of Science degrees from Kauai Community College.

Inouye described nurses as an integral part of health care and said they were responsible for helping him to recover over a two-year period in the hospital after he was injured in World War II. Inouye, an amputee, attributed much of the success of his rehabilitation to nurses.

He also said they are integral in preventive medicine, including teaching people about good nutrition and exercise. He said that prevention is an efficient way to deliver health care, keeping costs down. However, only \$1 of every \$100 spent on health care is for prevention, he said, noting that he plans to lobby Congress to change this trend.

He said it was a public health nurse who helped his brother, when he was a young boy unable to talk and put aside as a "moron." The nurse discovered that he "was tongue tied," and a physician was able to free his tongue. Inouye's brother has become a successful part of the community as a result of the nurse's attention to his problem, the senator said.

He saluted the K.C.C. graduates with the "gratitude of the country" for advancing their education and choosing the nursing profession. The graduates, from left to right, are Cheryl Tennberg, Lorraine Savaria, Valerie Annala, Linda Baylino, Donna Sandberg, Antoinette Torres and Rowena Nishimori.

Not pictured is Charlene Ono.

There are two bachelor degree programs available on Kauai: the nursing program at KCC and the public administration program, sponsored on weekends at KCC by West Oahu College. (Photos by Dennis Fujimoto)

Garden Island

Vol. 17, No. 1, 1954

Malouye lauds nursing profession



*School of Nursing
Recognition
Ceremony*



*Outreach B.S. Program for Nurses in Kauai
University of Hawaii at Manoa
Lihue, Kauai, Hawaii*

**Outreach B.S. Program
for Nurses in Kauai
University of Hawaii at Manoa
School of Nursing**

Recognition Ceremony

August 12, 1989
3:00 p.m. - 5:00 p.m.

BACHELOR OF SCIENCE

Mrs. Valerie Amneus
Mrs. Jaeda Elvenia*
Ms. Rowena Nishimori*
Mrs. Charlene Ono
Ms. Donna Sandberg*
Ms. Lorraine Savaria†
Mrs. Cheryl Tennberg*
Mrs. Antoinette Torres

†With Distinction

*Non Nursing Requirements to be Completed.

Program

Master of Ceremony
Mr. Richard Carmichael, *Coordinator at Kauai*

Invocation

Welcome
Dr. Mary Jane Amundson, *Interim Dean*

Representative of Faculty and Community Agencies
Mrs. Carolyn Rice, *Faculty*

Introduction of Keynote Speaker
Dr. Jean L. J. Lum, *Professor*

Keynote Address
Honorable Daniel K. Inouye, *United States Senator*

Student Address
Mrs. Antoinette Torres

Presentation of Nurses
Dr. Edna M. Grexton, *Professor and Director
of Grants Management*

Presentation of Leis/Pins
Dr. Mary Jane Amundson
Mr. Robert L. Anders, *Faculty*

Closing Remarks
Mr. Richard Carmichael

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And yet at the same time, we know that nearly 35 million Americans -- about one third of them children -- have no health insurance and millions more have very inadequate coverage.

Further, I must point out that two-thirds of the uninsured are in our work force, or dependents of workers; these are not the unemployed or the homeless that we read about in the media.

Stated another way, one out of every four Americans may be either uninsured or seriously underinsured.

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We also know that with this progress comes new problems; the psychosocial problems, for example, of those diagnosed with Cooley's Anemia who never before expected to live until their teens.

And the advances in diagnosis which have allowed our scientists and practitioners to develop special interventions targeted towards urinary incontinence, which is the leading cause of admission to nursing homes.

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Today, we have more physicians than ever before -- 585,597 in the United States alone, and approximately 5.1 million worldwide. Yet, we know that very few of us really have access to the quality of care we want for our loved ones.

A recently released report developed at my request by the Office of Technology Assessment pointed out that the proportion of adolescents uninsured in our nation has grown by 25 percent since 1979.

The Carnegie Council on Adolescent
Development, on which I serve,
recently stressed that:
"Unfortunately by age 15,

substantial numbers of American youth
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● One in four adolescents, or 7 million young people, are extremely vulnerable to high-risk behaviors and school failure, with an additional 7 million at moderate risk. The conditions of early adolescence have changed dramatically from previous generations.

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More and more adolescents 15 years old and younger are becoming sexually active, risking sexually transmitted diseases or pregnancy, and the birth of unhealthy, low-birthweight babies."

As a nation, we have the highest teenage pregnancy rate of anywhere in the world, in fact, it is twice that of any other western nation.

Similarly, we do not seem presently capable of effectively responding to the fact, as recently reported by the American Medical Association NEWS, that the suicide rate among elderly Americans has increased sharply in this decade,

increasing 21 percent for those 75 to 84 years old, while the suicide rate for all Americans increased by 5 percent. What kind of a nation are we, if we do not collectively care enough about our families to ensure the well being of our elderly.

Yet, at the same time, you and I know that prevention is the key to a significantly higher quality of life for all of our citizens.

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 reported that "Of the 10 leading
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A child born in Japan, Finland, Hong Kong, Ireland, Australia, Canada, Singapore, or any of twelve other industrialized nations has a better chance of surviving his or her first year than a child born in this country.

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Injuries cause almost half of all deaths among children aged 1-4 and are especially fatal among the elderly, whose rate of fatal injury is nearly double that of adolescents and young adults.

And yet, I understand that less than
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Your profession has a truly
outstanding track record in serving
our nation for many, many decades. I
congratulate you on your choice and
look forward to continuing to work
closely with your leadership. Aloha.