

suffering from a lack of healthy food and exercise, and my children were developing an increased attachment to the TV.

I've lost 60 pounds since last March. After losing 15 pounds, I stopped snoring (much to my husband's relief); by the time I lost 30 pounds, my cholesterol had gone from 228 to 134. In early October, 11 days before my birthday, I hit my goal. My whole family is now eating better and exercising more.

My experience has made me realize that, as a nation, we need to initiate change. This can be done in a sensitive way, but it needs to be done now. I never believed I had it in me to make such a change, but I did, and other Americans must, too. The health of our nation depends on it.

*Laurie Esdale, RN
Sandwich, MA*

DIFFERING HEALTH CARE VISIONS

In "The 2012 Republican and Democratic Health Care Platforms" (*Policy and Politics*, October 2012), Joyce Pulcini does a disservice to nurses. All of the analysis relates to how nurses can benefit as an interest group. While touting many of the benefits of the Patient Protection and Affordable Care Act (ACA), she fails to mention the many new challenges that hospitals and physicians (and thus nurses) face.

Even if the rosy picture she painted were remotely accurate, nurses should still oppose the new legislation. No doubt our spokespeople would justify voting for the candidate who promised to legislate higher wages for nurses. But nurses are also citizens, and as such should be concerned with deterioration of individual responsibility, the utter disregard for constitutional principles (especially enumerated powers and federalism), and the long-term price (financial and otherwise) of continued government interference in

the most private of matters. Transforming citizens into subjects is too high a price to pay for many of us.

The ACA is hardly a boon for the health care industry, despite the few benefits it offers certain groups. Moreover, many working nurses I've encountered—in Texas and Philadelphia—disapprove of this attempted takeover of American health care.

*Joanna L. Whitesell, RN
Philadelphia*

This article helped me to better understand health care reform in the United States. The U.S. elections are a lot more exciting than ours here in Canada, so we tend to take a great interest in what happens south of our border. It was helpful to read this article and see the two candidates' health plans laid out so clearly.

Here we have universal health care and only pay out of pocket for cosmetic procedures and some eye exams. It's difficult to understand how Americans can be charged thousands of dollars for health care while living with the fear of losing their homes or acquiring huge debt to pay their health care bills.

*Janet A. Zablocki, RN, IBCLC
Toronto, Ontario, Canada*

Thank you for publishing this excellent article. I used it as a basis for class discussions with my graduate students about the presidential election and the ACA.

Nurses everywhere should breathe a sigh of relief that the election results will mean the ACA can be implemented, and nursing's vision of quality health care for all will finally be realized in health reform. As a profession, we can be proud that the American Nurses Association has advocated—for many years but especially now—for universal access and equitable and preventative health care. Not only will many more of our

patients have insurance coverage and access to better care under this health reform, the law now recognizes how nurses are critical players in an improved delivery system, as leaders, managers, and clinicians.

We must continue to translate our beliefs and values into political action. And because the opponents of health reform have spread so much disinformation, we must continue to explain the benefits of the law to our patients and nurse colleagues. Joining with our nursing organizations to advocate full implementation of health reform is more important now than ever.

*Mary Ann Hart, MSN, RN
Cambridge, MA*

Where are the comments from nursing leaders who oppose the health care plan advocated by President Obama?

*Andrew V. Battles, MBA, BSN, RN
Kansas City, MO*

Author Joyce Pulcini responds: My intent in this article was to be as balanced as possible. I solicited comments from key nursing leaders based on their prominence, not on their opinions.

IN FAVOR OF PRIMARY NURSING

In 38 years, I've practiced in just about every care-delivery system ever dreamed up. Returning to team or functional nursing would be an enormous mistake ("It Takes a Team," October 2012).

Primary nursing—with a reasonable patient assignment load—is most satisfying, because primary nurses regularly confer with the interdisciplinary team—the only team that patients (and this professional nurse) really need.

With primary nursing, the buck stops here, with me, and that's how I hope it will stay.

*Theresa Stephany, MSN, RN-BC
San Diego ▼*