

Elizabeth Ricci, RN, PHN Oral history 2010

Interview with Elizabeth Ricci (0:00-8:39)

JT: My name is Juliette Tinney I'm a UNCW student nurse. This is Wilmington, NC on October 28th, 2010 and these are nursing interviews for the Public Health Association Conference.

Good afternoon, how are you?

ER: Good afternoon, I'm great.

JT: And what is your name?

ER: My name is Elizabeth Ricci

JT: Okay, and where were you born?

ER: I was born actually in New Jersey, lived in Pennsylvania.

JT: And when were you born?

ER: Well, do we have to say that? (Both laugh) I was born in 1955.

JT: Ok, and where did you grow up?

ER: I grew up in New York and Pennsylvania and spent some of my childhood overseas.

JT: Great, and why did you decide to become a nurse? And what most attracted you to nursing?

ER: When I was done with high school I just felt that nursing was what I wanted to go into, and this was in the 70s and I knew I could get a job and that was important. And personality wise, just the whole nurturing, helping thing is how I think I originally got into nursing.

JT: And where and when did you go to nursing school?

ER: I went to nursing school in Reading, Pennsylvania at Albright College, a four year program. I graduated in 1977.

JT: Great, and tell me a little bit about your nursing education, especially as it relates to community and public health.

ER: My actual education in the 70s in that school was not very detailed and I did not think that I would go into public health after going through nursing school. You dealt a lot with the home health, how it's viewed now with the elderly, doing home visits, that type of thing. So no I wasn't really excited about public health. I wanted to be an intensive care nurse and go out to critical care when I graduated.

JT: Great, so why did you decide to become a public health nurse?

ER: Well, when we moved here to North Carolina in the 80s I had been a critical care nurse since I graduated, for ten years. And I came to North Carolina, it was a little different. I'd done all my work in an inner-city Philadelphia six hundred bed hospital, came to North Carolina and the local hospital had less than a hundred beds. So I was like, a little concerned that this was where I

wanted to be. So I ended up not working for a little while. I did get my NC license. Then just through some connections I found that there was a job opening at the health department. So I became a maternity care coordinator, which is the home visiting for high-risk maternity. Once I did that I just really fell in love with public health. I've been in that public health for twelve years. For all the times that I worked in critical care, it really didn't impact the families. You didn't know the families, you maybe saw them for twelve hours. But working with families that I saw every day, I would see these people in the grocery store, they may have lived in my neighborhood, and I really felt that I could make an impact and had that ability through public health that I never had as a critical care nurse.

JT: Great. So tell me about your first job in community health.

ER: I was a maternity care coordinator, which is called an MCC, working with, my very first client was a fourteen-year-old pregnant teen and her mom. That was a little different for me having worked in critical care, but it was really exciting to see the impact that you have working one on one with a family and actually seeing the change, working over time. You work with those families for one to two years, and we work with them after the children are born as well. So that was something that really got to me and was in my heart, that I can really help and had an impact. And many of my clients, and I no longer do (maternity care) I'm in administration now, still come and see me than when I did public health with the teens. And their graduated and they've got kids, but they're doing a lot better. And they still come and talk to me, and I'm like, I can't believe that you remember me, that I had an impact, you know, ten years ago on you.

JT: That's wonderful. So what is your current position?

ER: I'm the director of nursing at the Duplin County health department in Kenansville.

JT: So tell me your most memorable story about community health nursing. Or a couple of memorable stories. It doesn't have to be just one.

ER: I guess just as an administrator, of course I have a lot of feelings of working with clients one on one and that was rewarding, but I think what really keeps me in public health is that as nurses we do so many things and it's never the same thing every day. I think that one of the stories that really shows how public health mobilizes and really keeps in the business, because when we have communicable disease outbreaks, several years ago when we had flu vaccines that were in shortage, just being able to as public health, handle that with people coming in and demanding things that you know you don't have, and having to work with the community and help them belay their fears and also serving them the best way we can. I think when we had, you know, seven hundred people at our door for vaccines, maybe we had a hundred doses. How do you handle, make everybody happy? So I think working through that, through just being honest with

the people and talking about what can they do and how we can serve them showed me that public health nurses can really do a lot of things. So that's probably, when we have communicable disease outbreaks, how we all have to pull together and the community pulls together to help each other. We've had large (unintelligible) outbreaks, of course the H1N1 issues where we've had to mobilize a lot of staff and partner with our other agencies in the community to serve the community. And that's what I really like, that we work together to serve people that we live with. My neighbors, the people that my kids grow up with.

JT: So is there one specific memory that is truly memorable?

ER: Not with this man taking pictures in my face (both laugh).

JT: Take your time.

ER: Probably some of the most memorable are working with the very young teen parents, and them having them doing, seeing in themselves that they were able to handle something they couldn't. They became apparent that they were able to handle a situation with their child, and it gave them that empowerment that they could succeed and have goals and do that with some help. And I think that's probably the most, not a specific person but several times over, that's been most memorable to me.

JT: So if you had to do it all over again, would you be a community health nurse?

ER: Definitely.

JT: And why?

ER: Because it is just something that I'm sure, someone's said before that you love it or hate it. We're certainly not getting paid big bucks. I can make a lot more in the hospital, and probably made more as a nurse thirty years ago than I am now. But is true, the passion that you can impact the people that you live with, your community, and really make a better place for the future generation and that's really why I'm in public health.

JT: And is there anything else you would like to share with the nurses in the future who are interested in community health nursing in 2010?

ER: I think it's important that as young nurses you go out and get experience and try to figure out what it is that fits you, and changing jobs several times is okay. But when I think that when you're really ready to have an impact and make a difference in your life is to choose public health in one form or another, because you really will make a difference in your community and it will make a difference in you.

JT: Thank you so much.