Many of us recently attended the Oncology Nursing Society’s (ONS’s) annual Congress. This year, the venue in Philadelphia was terrific. The one event that surely attracts the largest audience every year is opening ceremonies. Upward of 6,000 attendees stream into a room more easily measured in acres than square feet to kick off the yearly ritual of research presentations, posters, discussion and instructional sessions, ancillary programs, product exhibits, and networking with old and newfound friends and colleagues. We are greeted by ONS officers and staff, the Congress Planning Team, a local chapter, and a commemorative resolution by a local dignitary (this year, Pennsylvania Governor Ed Rendell), and we take time to recognize the deserving winners of some of our most prestigious awards. A keynote address is always part of the ceremonies.

As someone who has listened to a great many opening/keynote addresses in my time as a nurse, I always look forward with anticipation to this ritual “checkered flag” for nursing meetings big and small. At one time, the keynote address was one of the Congress presentations we published in the Oncology Nursing Forum. Early in my tenure as editor however, this practice was abandoned when the choices for keynote speakers became a succession of keynote “professionals” whose presentations were essentially proprietary material—either that or the presentation was such that it did not lend itself to the printed word.

When I think about the purpose and value of a keynote address, certain words come to mind: substantial, relevant, inspirational, stirring. I expect a keynote address to get me and my fellow attendees fired up for the excitement and challenge of the days to follow—to set a tone for Congress that will resonate through the plenary and breakout sessions and provide us with words and sentiments that will continue to sustain us as we return to our jobs and families. In the past 17 years, few, if any, Congress keynote speakers have met these benchmarks. Some of the professional speakers have had direct and personal experiences with cancer and oncology nurses. Their presentations had a certain sense of credibility; however, because presumably one cannot make a living presenting only to oncology healthcare providers, their oncology experience was always a convenient context within which they delivered their motivational or carefully crafted message. Always they move across the stage, voices booming, delivering funny stories, poignant tales, and the inevitable bullet points of their message. For me, the message is lost almost as soon as I exit the hall. Thus it was with this year’s presenter—a former U.S. Navy Top Gun fighter pilot who has parlayed his experience into a theme for the motivational speech circuit. I think he was talking about zero errors on the job and teamwork and communication, but, for me, the messages got lost in the dizzying, unintelligible film clips from the cockpit of an F-15 fighter and the images of fighting and destruction that seemed discordant with the values and sensibilities of nursing (the “war on cancer” notwithstanding). It turns out the speaker’s mother is an oncology nurse, and she no doubt provided some allusions between the work we do and the lessons he learned in that cockpit; however, the associations were superficially and poorly developed, so the take-away message for me was artificial and forgettable. For yet another year, my hope and anticipation for something inspirational were dashed.

There is no shortage of topics and concerns that should be of interest to such a large group of nurses as we are and yet, year after year, the speakers deliver their own message and not ours. This is a serious time for nursing and health care. We are facing a catastrophic shortage of nurses and nursing instructors at a time when the needs for both are exploding. Physician groups seem more determined than ever to control and limit our scope of practice. For every patient we care for, another cannot access quality care because of a lack of insurance and resources. Increasing healthcare costs make the increasing cost of gas seem like a frivolous worry. In October, Medicare will stop reimbursing hospitals for eight hospital-acquired (and nursing-preventable) complications, with more to be added to the list in the future. Can we really afford to miss opportunities to confront these issues collectively?

We attend our annual meetings to get the knowledge we need to be better nurses and caregivers. Isn’t it about time to ask ourselves if we don’t also need to hear from keynote presenters who speak to the heart and soul of nursing and the issues we face and not simply line the pockets of someone on a motivational speakers list? There are more than two million nurses in the United States today and many more worldwide. Surely we can find one each year to open our eyes and ears, to stir up our better angels, to send us out to learn and grow with some sense of pride and righteousness about what we are and what we do and what we need to be.

I will be the first to acknowledge that this is my personal opinion on this topic and that it may well reflect my admittedly sometimes old-fashioned point of view about nursing, but we really need to ask ourselves—in this time of such professional, political, economic, and environmental gravitas—should we really be spending time listening to someone’s prepackaged shtick when we could instead choose to seek out those who can inspire us to achieve a better level of professional and intellectual functioning? I say we deserve better than we have been getting from our keynote presentations and it is time to consider something different.

We need to hear from keynote speakers who speak to the heart and soul of nursing and the issues that we face.