

Truman Library exhibit transports you through story of US

BY CLIFTON TRUMAN DANIEL
Special to The Kansas City Star

When I was 12, my family drove from New York City to Independence to visit my grandparents, Harry and Bess Truman. Along the way, we stopped at the Civil War battlefield in Gettysburg, Pennsylvania. Up to that point, I had not been much of a history student. But standing on Little Round Top and looking into the Devil's Den, I was transported.

When I arrived at 219 North Delaware Street, I pulled all Grandpa's Civil War books off the shelves, threw them in the middle of the floor and plunked myself down to read. Grandpa, who nearly tripped over me, appreciated the plan, if not the execution.

The Truman Library currently is exhibiting 21 original documents from American history. "Opening the Vault: The Story of US," on loan from the National Archives, includes the original design of the Great Seal of the United States, the proclamation announcing the



File photo

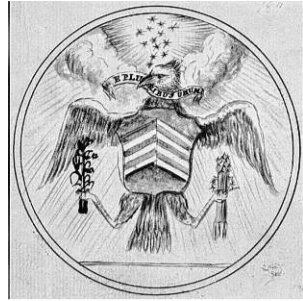
The documents on display in "Opening the Vault: The Story of US" prove that America is not just pages in a history book.

Treaty of Paris, which freed us from England's yoke, and the 1971 joint resolution proposing the 26th Amendment to the Constitution lowering the voting age from 21 to 18.

In between, you'll see a draft of the Senate revisions to the Bill of Rights, complete with quill pen run-throughs and senatorial scribbles in the margins. Next to that is the Louisiana Purchase Treaty, which Grandpa considered one of Thomas Jefferson's great achievements. The real estate transaction

doubled the size of the country, netting us nearly a million square miles of rich farmland at about 4 cents an acre. Jefferson's emissaries, Robert Livingston and James Monroe, paid \$15 million to Napoleon of France, who was getting ready to fight the English — again — and was "feeling depressed," as Grandpa put it, over a revolution in French-owned Haiti.

Of the 21 documents on display, 10 track this country's history with slavery and civil rights. Early items



National Archives

The original design of the Great Seal of the United States from 1782 is part of the exhibit.

— the Missouri Compromise, the Compromise of 1850 and the Kansas-Nebraska Act — reflect lawmakers' attempts to balance the influence of slave and free states, which ultimately helped fuel the Civil War. You will also see the telegram announcing the surrender of Fort Sumter, the opening salvo in a conflict that would claim up to 750,000 lives, making it this country's costliest war.

The Joint Resolution Proposing the 13th Amendment to the United States Constitution led to the amendment's adoption and freed the slaves. Earli-

er, in the 1857 Dred Scott decision, the Supreme Court ruled that Black Americans, free or enslaved, were not citizens and therefore not protected by the government or the courts. Forty years after the war, Plessy v. Ferguson established a legal basis for racial segregation.

Also included in the exhibit is Executive Order 9981, which my grandfather signed in 1948, abolishing segregation and discrimination in the U.S. armed forces. He had been outraged by reports of Black soldiers, having fought for this country in World War II, coming home to be beaten and lynched — and this was from a man who had grown up among Confederate-leaning family members, most of whom "thought it was a fine thing" Abraham Lincoln was assassinated.

Early in World War II, Grandpa, as head of the Senate Special Committee to Investigate the National Defense Program, had gotten wind that millions of dollars were disappearing into unincorporated areas of Tennessee and Washington. He had inadvertently stumbled upon the secret Manhattan Project to develop an atomic bomb, and had to be warned off by Secretary of

War Henry Stimson. Opening the Vault includes a Manhattan Project technical notebook recording the success of the world's first controlled, self-sustaining nuclear chain reaction on Dec. 2, 1942. One of scientists was so excited he wrote, "We're cooking!"

Before that weapon could be used on Germany, the Germans surrendered. The instrument of surrender, signed on May 7, 1945, went into effect the following day, May 8, my grandfather's 61st birthday. He often said it was the best present he ever received.

Those documents and a few others, including the Voting Rights Act of 1965, are not just pages in a history book. They're the real thing, the ideals and struggles of real people, the battlefield on which our democracy was, and continues to be, shaped.

You may not be able to pull them off the wall and throw them on the floor, but you will nonetheless be transported.

Clifton Truman Daniel is president Harry Truman's eldest grandson and is honorary chair of the Truman Library Institute. "Opening the Vault" runs through Memorial Day, May 25, at the Harry S. Truman Library and Museum in Independence.

As KC grows its nuclear weapons footprint, where are the Christians?

BY MARTIN J. DRESSMAN
Special to The Kansas City Star

So, where are the Christians?

I attended a training and a gathering before a formal public hearing May 7 regarding the impact of nuclear weapons production in Kansas City. The federal government is allocating new money for our area to support production of the next generation of nuclear firepower. In the hearing, representatives of the Department of Energy and National Nuclear Security Administration shared the summary of an environmental impact statement. It was billed as an opportunity for the public to weigh in.

Attendance was not robust. In reports from attendees, and in my own case, many of us did not find out about these meetings until days or hours before — in my case, with an unrelated search on the web focused on nonviolence. Interesting. It seems the ball got dropped all around.

Media coverage? None identified, even from local news outlets. The formal hearing with the representatives? It was held at a remote community center and limited in space. Did the agencies' intent play any role?

At both gatherings, I knew no one. At the hearing, there was one participant who identified as Christian clergy. A couple of others provided evidence of their knowledge of the impact of nuclear weapons production. Others used many of these experts' talking points. There were some emotional pleas to stop the production of nuclear weapons. No member of the public spoke in support of this expansion and its expense.

From my scope of the

two encounters, painfully, it all seemed just a formality. At most, 60 or 70 folks showed up. In the 80-plus years since Hiroshima and Nagasaki, the nuclear holocaust has haunted us. One of the speakers at the hearing has invested over 30 years in research and civil action to expose the cataclysmic potential of this arsenal. The result? The nuclear weapon industry continues to grow and refine its lethality.

In Kansas City, a 1.7-million-square-foot complex is being constructed for offices and manufacturing. Dubbed the Kansas City Non-Nuclear Expansion Transformation or KC NEXt project, it claims its purpose, in part, is to manufacture non-nuclear components used in U.S. nuclear weapons systems. What? Yes, the crafting is mind-numbing.

'PEACE THROUGH ATOMIC STRENGTH'

The country has spent tens and hundreds of billions on nuclear weaponry. Is that pro-life? What about the children? The hungry, the poor? And what about the planet? My gut tells me that, as in many military ventures, respect for life is not a guiding principle. Contrary to the slogan tagged to the bottom of the DOE/NNSA presentation slides — "peace through atomic strength" — my fear is that nuclear conflagration could come soon to a location somewhere in the U.S.A.

The 250 million-plus adults in the United States are apparently tolerant of this spending and violent potential, sought and engineered by the federal government. Maybe it's the promise of mutually assured destruction that dampens our resistance, gives us solace, conditions our complacency. What-

ever the case, there are not ample boots on the ground to demand that our nation terminate spending on the research, development and production of nuclear weapons. There never has been in all these 80 years.

What a feat has been accomplished that has instilled such fear, trust and obedience, even among the almost two-thirds of Americans who identify as Christian — many of whom call the United States a Christian nation. For all those years, even the Christian community in this country has been complicit in nuclear proliferation and pending genocide, not to mention its silence in response to so many other crimes against humanity that this nation has committed or supported in that time. In whose name?

Versed in the Jesus ethic, I wonder at how the church has not been out front from the beginning in standing against nuclear weaponry — and for that matter, against all war. To this day, where are the Christians? Even as few as 20 or 30 million of them showing up to share this message would likely make for a commanding statement calling to account the insanity of dependence on these weapons for protection. Such visibility, engagement and action could change the world — advancing peace, understanding and goodwill that the present Christian witness across the globe does not appear to be accomplishing.

Dorothy Day, co-founder of the Catholic Worker Movement and a noted critic of militarism, capitalism and preparation for war, is said to have proclaimed: "Our problems stem from our acceptance of this filthy, rotten system." Those words speak reality to power in ways that we, yet to this day, appear not to have eyes to see nor ears to hear.

Martin J. Dressman is a retired social worker. He lives in Prairie Village.

State line affects health care in KC; Missouri, fix the inequity

BY NAZ NAMI
Special to The Kansas City Star

In Kansas City, the state line is part of everyday life. People cross it for work, school, groceries and doctor visits. Most of the time, it doesn't feel like a barrier. But in health care, it quietly shapes who gets seen, how quickly and by whom.

As an advanced practice registered nurse working in Missouri, I spend much of my time caring for patients in psychiatric crisis. Many arrive in emergency departments during some of the most difficult moments of their lives: severe depression, psychosis, overwhelming anxiety or thoughts of suicide. What they need is timely, specialized care. What often happens instead is waiting.

Not long ago, I cared for a patient who had been in the emergency department for more than three weeks. She was calm but withdrawn, sitting under bright lights, unsure of what would happen next. Her family had already asked multiple times when she would be transferred to a setting where she could receive appropriate psychiatric care. The answer was the same each time: We were still waiting for availability. Situations like this are not rare. I have sat with patients who remain in emergency rooms for extended periods, not because their needs are unclear, but because there are not enough available providers to move their care forward. Staff work hard to manage safety and comfort in a setting that was never designed for long-term psychiatric care.

At the same time, just a short drive away in Kan-

sas, nurse practitioners are practicing in a system that allows more flexibility after a structured transition period. That difference affects where providers choose to build their careers. It affects whether they stay in a community long-term. It affects how many patients they are able to see.

In a region like Kansas City, those choices matter.

Many APRNs are not looking to leave patients behind. They are trying to practice in a way that reflects their training and allows them to respond to the needs they see every day. When that isn't possible, some look to nearby states where policies better support that goal. Over time, that movement becomes visible. Clinics have a harder time recruiting. Appointment waitlists grow longer than months. Emergency departments carry more of the burden, especially for patients who already face barriers to care.

For patients and families, it often feels like the system is simply too full.

NURSE PRACTITIONERS CAN SHORTEN WAIT TIMES

Missouri has taken steps to grow its health care workforce, but policy plays a role in whether that workforce stays. Missouri Senate Bill 1016 now in Jefferson City offers a path that reflects what many other states have already put into practice. It allows nurse practitioners to move toward independent practice after a period of structured collaboration.

That approach supports both experience and access. It recognizes that clinicians develop their skills through guided practice while also acknowledging the need to expand capacity in communities that are already

stretched. For Kansas City, this is not a distant policy discussion. It shows up in appointment availability, in emergency room wait times and in whether patients can access care before a crisis escalates.

I think about the patients who could have been seen earlier, and the families trying to navigate a complicated system while worrying about someone they love. I think about the providers who want to stay and serve their communities but are weighing where they can do that most effectively. The state line will always be part of Kansas City. But access to care should not feel different depending on which side of it someone lives on.

Missouri has the opportunity to make changes that support both patients and the clinicians who care for them. S.B. 1016 offers a chance to move in that direction. It is not a perfect solution, but it is a meaningful step toward improving access to care across the state.

This legislation has come close before. Each time it stalls, the consequences are not abstract. They show up in emergency rooms, in delayed care and in the steady loss of providers who choose to practice elsewhere. If access to timely care matters to you, this is the moment to act. Call your state senator. Ask where they stand. Policies like this do not fail quietly. They fail while patients continue to wait.

Missouri has the workforce. What it does next will determine whether that workforce stays.

Naz Nami is a Missouri-based psychiatric-mental health nurse practitioner who works with patients in crisis and advocates for policies that improve access to mental health care.

Today in **OPINIONS**

ALTERNATE IDEAS: Subscribers can find expanded editorial and commentary columns on the issues of the day in the Edition's Opinions section by going to kansascity.com/edition.