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As this issue was going to press, Yale University School of Nursing (YSN) faculty and alumnae/i celebrated the life and contributions of Rhetaugh Graves Dumas, class of 1961, who passed away in the summer of 2007. Among the many contributions she made to nursing and education was her leadership in the development of clinical nursing research. While still a student at YSN, she conducted the first clinical trial of a nursing intervention (ever, anywhere) and received her first federal research grant before she completed her MSN degree. Since that time, Yale Nurses have made important contributions to the development of nursing science that meet Virginia Henderson’s definition of the rationale for the conduct of such research—to improve nursing care—and ultimately to improve the health of all people.

Yale University is one of the most distinguished research institutions in the world, and our School of Nursing is at the forefront of groundbreaking research in health-related behavior, improving self-management in people living with chronic illness, and in the development of new evidence to support nursing practice. Since its inception in 1923, YSN faculty and students have developed strategies to address the most pressing global health care problems. This issue of Yale Nursing Matters explores the depth of this research and the exciting studies being conducted to improve the health of the public.

These are great times in nursing science, despite the flattening of the budget at the National Institutes of Health. Our studies, along with the commitment of our faculty to moving from evidence to translation to practice and policy, deal with issues that are critical to solve if we are to rein in health care costs. We will soon be launching our new integrative center, the Center for Enhancing Outcomes for Vulnerable Populations, where such translation and dissemination of research findings can be facilitated. Should you like to help with these initiatives, I hope you will let me know.

Margaret Grey, DBPH, RN, FAAN
Dean and Annie Goodrich Professor
Dean Grey’s research selected as one of ten landmark studies in the history of the National Institute of Nursing Research

Margaret Grey, Dean and Annie Goodrich Professor, was recently listed in “Changing Practice, Changing Lives: 10 Landmark Nursing Research Studies,” a new publication from the National Institute of Nursing Research (NINR). Her groundbreaking study on coping skills training for children with type 1 diabetes was recognized as one of the ten most significant nursing research studies in the 22-year history of NINR.

“While it is a great honor for this research study to be included among the 10 Landmarks of NINR, this honor speaks to the importance of the clinical research being conducted at YSN on approaches to improving self-management of chronic conditions,” Dean Grey comments. “It is also important to note that this research was conducted with an interdisciplinary team of nurse practitioners, psychologists, and physicians in addition to the young people with diabetes who participated. All were responsible for the success of the study.”

According to the booklet, these landmark studies helped establish the foundation of NINR’s work and illustrate the varied expertise of nurse researchers. They span issues that continue to be of great importance to nurses and patients, such as symptom management, preventive health measures, health disparities, and enhancing the quality of health care.

The selected study is titled “Coping Skills Training Improves Teens’ Self-Management of Diabetes.” The publication lists the primary benefits of this research, including:
- to predict behavioral problems associated with teens diagnosed with type 1 diabetes
- to personalize coping strategies to promote diabetes management and quality of life
- to preempt long-term complications from diabetes and other chronic illnesses.

The article continues with a summary of the research, as well as implications. The full booklet may be downloaded at http://www.ninr.nih.gov/NewsAndInformation, and is found on the right-hand side of the page.

The National Institute of Nursing Research is part of the U.S. Department of Health and Human Services National Institutes of Health (NIH).

International Conference at YSN Draws Overflow Crowd

Over 115 nurses, nursing students, and faculty attended a conference on February 1 at Yale University School of Nursing entitled “International Nursing Collaboration: Challenges and Opportunities.”

This conference celebrated nursing’s contribution to international health programs and highlighted the important role of nursing research in the development of important capacity building in global health.

The event was hosted by the Center for International Nursing Scholarship and Education, and included keynote talks by William Holzemer, Associate Dean of International Programs at UCSF; Ann Kurth, Associate Professor of Nursing and Epidemiology at University of Washington, and Marjorie Muecke, Assistant Dean of Global Health Affairs at University of Pennsylvania. There were seven oral research and program presentations and 20 posters from students, faculty, and international health specialists from the Northeast Region.

“Speakers raised important issues such as nurse migration, nurse training, participating in global health nursing research, and the role of U.S. nurses in international settings,” said Susan Barringer, Associate Director of the Center for International Nursing Scholarship and Education. “It was a wonderful opportunity for both experienced practitioners and those new to the international arena to share experience, network, and explore common threads of interest.”

The day-long conference concluded with these powerful words from presenter Ann Kurth: “Global health inequity is the moral issue of our time, and nurses must stay at the forefront of the campaign to reduce it, and to achieve true health for individuals, families, and communities.”
YSN Students Awarded Downs Fellowships

Six YSN students were recently awarded Downs International Health Student Travel Fellowships, competitive grants administered by the Committee on International Health based at the Yale School of Epidemiology and Public Health. The students and their YSN mentors worked to develop nursing research proposals for the Downs Fellowship, and will be undertaking their projects overseas from June to August of 2008. This represents a record level of interest by YSN in this research opportunity and paves the way for other projects in nursing research in years to come.

The students and their research titles include:

Eden Garber '09, A Nutritional Assessment of School-aged Children around Les Cayes, Haiti

Jessica Pettigrew '09, Pica Practices Among Parous Haitian Women in La Romana, Dominican Republic

Erin Loskutoff '09, Reminiscence Facilitation Resource Guide to be used with Community-Dwelling Older Adults in Changsha, China

Rosha Forman '09, Adherence to AMTSL Guidelines: Current Practices and Beliefs of Zambian Skilled Birth Attendants

Marina McIver '09, Knowledge, Attitude, and Use of Emergency Contraception among Young Women in the Western Cape, South Africa

Regina Longinotti '09, Microbicide Acceptability among Reproductive Age Women in Georgetown, Guyana

YSN Doctoral Student Wins Prestigious American Heart Association Award

Janet Parkosewich '08, MSN, RN, CCRN, FAHA, Doctor of Nursing Science student at YSN, was presented with the American Heart Association’s Council on Cardiovascular Nursing 2007 Excellence in Clinical Practice Award. This award is presented to a Council member who has exhibited excellence in the clinical practice of cardiovascular nursing throughout his or her career.

This prestigious national award was presented during the Annual Council Dinner at the American Heart Association’s Scientific Sessions in Orlando.

The nomination for this award read in part, “Throughout her career, Janet has worked tirelessly to improve the care of people with cardiovascular diseases and has helped them to make lifestyle changes with long-ranging benefits. A cardiac clinical nurse specialist at Yale-New Haven Hospital since 1988, Janet’s practice truly embodies the multifaceted role of the clinical nurse specialist: driving innovations in practice, serving as a resource to colleagues across disciplines, and shaping the system of care to ensure quality and responsiveness to patients with heart disease. A former clinical director has described her as ‘one of the most talented and gifted advanced practice nurses with whom I have ever worked.’”

A leader in secondary prevention, Janet and her colleagues received the “Excellence in the Workplace Award” from the Connecticut Nurses Association for the Yale-New Haven Hospital Atherosclerosis Treatment Program. This nurse-driven program, conceived by Janet and a cardiologist, provides inpatient counseling based upon the AHA/ACC secondary prevention guidelines.
YSN SPOTLIGHT NEWS

Ruth McCorkle Presents to National Summit at Georgia Southwestern State University

Ruth McCorkle, Professor and Director of the Center for Excellence in Chronic Illness Care, recently presented “Moving Science to Practice in Caregiver Support: A National Summit” at Georgia Southwestern State University. The event included the 20th Anniversary Awards Gala of the Rosalynn Carter Institute for Caregiving.

Professor McCorkle presented a talk on “Evidence-Based Interventions for Cancer Caregivers.” The Rosalynn Carter Institute works to establish local, state, and national partnerships committed to building more effective long-term care systems and providing greater recognition and support for caregivers.

Florence and Henry Wald House Dedicated at CT Veterans Home

On November 7, 2007, the Connecticut Department of Veterans’ Affairs dedicated the Florence and Henry Wald House to provide a peaceful temporary home for many families involved with hospice care at their Rocky Hill facility.

Florence Wald, a former Dean at Yale University School of Nursing, founded Hospice Incorporated in Branford, CT, in 1971. This has since become a model for hospice care in the United States and abroad.

The dedication ceremony at the Rocky Hill Campus included remarks by Linda S. Schwartz ’84, Commissioner of the Connecticut Department of Veterans’ Affairs, YSN Dean Margaret Grey, and several Wald family members.

“Florence Wald serves as an inspiration to us at Yale University School of Nursing and to nurses throughout the world,” Dean Grey stated. “Her work in developing hospice in the United States has impacted millions of lives. In the same vein, the Florence and Henry Wald House here on the Connecticut Department of Veterans’ Affairs campus will provide compassionate care to the families of so many who have served our nation.”

YSN Professor leads teen pregnancy program for Health Week

Alison Moriarty Daley ’94, Associate Professor at Yale University School of Nursing, recently led an intensive and interactive teen pregnancy program for ninth graders at New Haven’s High School in the Community.

This program, part of New Haven’s “Health Week,” was the kick-off event for Mayor John DeStefano’s “Task Force on Teen Pregnancy Prevention.” Moriarty Daley was appointed co-chair of this committee in 2006.

In addition, Moriarty Daley was recently appointed as co-chair of the mayor’s “Teen Pregnancy Prevention Council.”

After many months of meetings, the task force implemented “Health Week” as a way to educate city students. Topics included reproductive anatomy, sexually transmitted infections, birth control, and decision-making.

Moriarty Daley used an interactive “Jeopardy” PowerPoint game to engage the students with questions and discussions having to do with sexuality and issues facing ninth graders.

Florence Wald serves as an inspiration to us at Yale University School of Nursing and to nurses throughout the world.
Taking the Uncertainty Out of Living with Prostate Cancer

BY JOHN POWERS

This program will help determine if older men with prostate cancer can achieve higher quality-of-life levels by living with the disease instead of undergoing treatment.

According to the American Cancer Society (ACS), prostate cancer is the second most common form of the disease (skin cancer is first) in American men. The ACS estimates that during 2008, about 186,320 new cases of prostate cancer will be diagnosed in the United States. About one man in six will be diagnosed with prostate cancer sometime during his lifetime.

In addition to these striking statistics, men with prostate cancer face less than desirable traditional treatment options—radical prostatectomy and/or radiation. These treatments are often accompanied by significant side effects including incontinence and erectile dysfunction.

With a $30,000 grant from Yale Cancer Center through Institutional Research funds from the American Cancer Society, Meredith Wallace ’93, PhD, APRN-BC, Associate Professor at Yale University School of Nursing, is beginning a research study called “Uncertainty Management Intervention.” This program will help determine if older men with prostate cancer can improve their quality of life by living with the disease instead of undergoing treatment.

“There is a growing body of evidence that specific forms of prostate cancer are overtreated,” Wallace commented. “It is known that many older men, especially those with other chronic medical illnesses, are more likely to die with prostate cancer than because of it.”

In this study, an intervention will be developed to allow older men with certain kinds of tumors to live with the uncertainty of prostate cancer. Instead of the radical treatment, men will undergo “active surveillance,” and receive information on this process through an internet-based program.

Active surveillance or “watchful waiting” involves an intensive monitoring approach to the management of prostate cancer whereby a decision is made to regularly evaluate the disease status and initiate treatment only if disease progression is detected. While active surveillance appears to be a cost-effective and logical approach to avoid high costs and the side effects of treatment, it has been shown that living with cancer results in “intolerable uncertainty.” Wallace’s study will develop a process to help men rethink prostate cancer as a chronic illness rather than an instant killer.

“Despite this information and the growing body of research supporting active surveillance, it is difficult for a person to live with cancer. Nurses play an instrumental role in helping older men to understand and live with prostate cancer as a chronic illness,” added Wallace. “These men may be able to avoid expensive treatments with documented side effects and still live high-quality lives.”
Dr. Tish Knobf ’82 was recently awarded $2.2 million by the National Cancer Institute to devise new ways of making a woman’s post-cancer years healthy and fulfilling. Below are excerpts from an interview with Dr. Knobf, conducted by Colleen Shaddox of Yale University’s Office of Public Affairs.

Apart from the risk of recurrence, what kinds of health challenges do breast cancer survivors face?

**DR. TISH KNOBF:** Initially following treatment, many women experience persistent physical symptoms such as fatigue, menopausal symptoms, weight gain, and muscle aches. Psychological distress, including worry about recurrence and uncertainty, is common. There is uncertainty about recovery, not knowing what to expect, uncertainty about symptoms, and uncertainty about returning to life “the way it was before.” The strong support provided by family and friends tends to wane a bit as everyone wants the woman to “get back to normal” now that treatment has ended. This is often emotionally challenging for the cancer survivor. Late effects of cancer treatment are becoming an area of important concern. In 2007, the Institute of Medicine published a report on cancer survivors and made recommendations to assess and manage potential persistent and long-term treatment effects. One example of a treatment effect is women with breast cancer that I am interested in is bone loss, which may increase a woman’s risk of developing osteopenia or osteoporosis. Bone loss is associated with premature menopause caused by chemotherapy in younger women and hormonal therapy with aromatase inhibitors in postmenopausal breast cancer survivors.

Is follow-up care standard for breast cancer survivors?

**DR. KNOBF:** There are national guidelines for follow-up care, primarily related to surveillance, specifically to monitor risk of recurrence and detection of any new primary cancers, in the contralateral breast or elsewhere. What is lacking in our health care system is a structured program of information and support to help women transition from treatment, promote recovery, and adopt healthy lifestyle behaviors. Several survivorship clinics have been created, primarily at large comprehensive cancer centers, such as the Yale Cancer Center, but these serve only a small percent of adult cancer survivors. In a recent study that colleagues and I conducted, 45% of breast cancer survivors reported that they did not receive the information they needed at the end of treatment and managing persistent physical symptoms over the first year after treatment was a priority concern. Women consistently tell us they also need support and strategies to help them recover and reintegrate back into life after treatment.

You did a pilot exercise study with breast cancer survivors. Tell us a bit about what you learned there.

**DR. KNOBF:** The pilot study was a supervised program at a fitness center where women exercise three times per week for 45 minutes each time over four to six months. The purpose of the study was to evaluate if the exercise program was feasible—would women attend three times per week—and to evaluate if exercise could prevent weight gain, which commonly occurs in breast cancer survivors, and could it prevent bone loss associated with treatment. We learned that such an exercise program is feasible. Women are interested and motivated to help themselves become and stay healthy. We matched fitness centers to where the women lived or worked by their stated preference, which likely contributed to our high adherence rate, an average of 88% over the course of the study. We looked at weight, markers of bone turnover, and heart rate. Women also rated their quality of life and symptoms over time. In our sample of 25 women, we found no change in weight, no change in bone turnover, and significant psychological benefits. Women reported better emotional well-being, were less depressed, and felt more resilient and empowered.

The high attendance rate, three times per week for four to six months, is pretty amazing. Why do you think that was the case?

**DR. KNOBF:** I think that women had unmet needs for social support. The program sessions were offered in two hour blocks five days per week and women could chose three of those days. Thus, women exercised together. They got to know one another and felt a common bond. In addition, the exercise program was supervised by trained exercise personnel. Women feel secure doing exercise when there is someone there with expertise, which also fosters a sense of “I can do this” and motivation to return knowing that someone will be there monitoring their progress.

The National Institutes of Health has recently awarded you funding for a much larger study based on your pilot work. Can you tell us what these women are going to be doing?

**DR. KNOBF:** We will test two types of exercise and look at the persistent and potential long-term effects of treatment on health outcomes. Women will be randomly assigned into two groups: an aerobic-resistive program at a fitness center or an at-home health promotion exercise program. The aerobic-resistive exercise group will have three sessions per week at the fitness center and will do aerobic activity on two other days. The women in the at-home exercise group will receive instruction on the national recommendations for adults of 30 minutes of physical activity on most days of the week. Both groups will receive information on healthy eating and receive calcium and vitamin D supplementation.

The target outcomes for this study are factors that are associated with increased health risks, specifically bone loss, changes in weight and body composition (e.g., increased fat mass, loss of lean muscle mass) and metabolic factors (lipids, blood pressure, cholesterol, and insulin). We will also evaluate cardiovascular fitness, muscle strength, symptoms, and quality of life.

It is very important to acknowledge my co-investigators and consultants. Each person brings unique expertise, knowledge, and skill to the study and its success. Dr. Karl Insogna is Professor of Medicine at Yale University and his expertise is in bone physiology, bone densitometry, and osteoporosis. Dr. Barbara Smith has an established program in exercise intervention research with expertise in body composition outcomes. Dr. Lyndsay Harris is Director of the Breast Program at the Yale Cancer Center and is particularly interested in metabolic risk factors in breast cancer survivors. Dr. Kristopher Fennie, Research Scientist at YSN, provides statistical and analytic expertise. Consultants include Dr. Deborah Chyun ’82, Associate Professor at NYU (cardiovascular and diabetes); Dr. Jane Kerstetter, Visiting Professor, Yale School of Medicine, Section of Endocrinology (nutrition and bone physiology); and Dr. Robert Axtell, Professor and Director of Exercise Science at Southern CT State University.
Your study is 12 months long. Can you comment on why you made the exercise program so long?

**DR. KNOBF:** One of the reasons why we chose 12 months is because you need a longer duration of exercise to assess the potential effect on bone mass. We will measure outcomes at six and 12 months so we will be able to determine the effect of six months of exercise on other study outcomes such as physical functioning, strength, quality of life, and symptoms.

To some extent, this is a new issue for the health care system to deal with the increasing number of long-term cancer survivors. What do you think that means going down the road?

**DR. KNOBF:** There are an estimated 11 million cancer survivors. Women with breast cancer make up the largest group—about 22% of the entire cancer survivor population. Patients are living much longer. We not only want to decrease their risk of cancer recurrence, but also to promote health to decrease risks of other chronic illnesses, some of which may be directly related to effects of cancer treatment. There are published data suggesting that routine physical activity can reduce recurrence risk and improve survival for survivors of breast and colo-rectal cancers.

Is it difficult to get women to shift focus from being totally concerned about the cancer to thinking, oh, I have to be worried about other chronic diseases that may not have entered my mind before.

**DR. KNOBF:** The end of treatment has been described as a “teachable moment” for health promotion. Oncology providers are encouraged to prescribed as a “teachable moment” for health providers.

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“Women consistently tell us they need support and strategies to help them recover and reintegrate back into life after treatment.”

In general, what kind of reaction do you get from survivors when you approach them about this kind of survivorship work you’re doing?

**DR. KNOBF:** Overwhelmingly positive! I had women wanting to join the study well before I was prepared to start recruitment. Our health care system is predominantly focused on the treatment of disease. Cancer survivors have significant information and support needs, especially at transition times like treatment decision-making after diagnosis and when treatment ends. Supportive care research is very attractive to cancer patients and survivors. In some cases, this research actually fills a void in the care we provide. It also offers an opportunity to enhance care by determining the best type of intervention and “dose” (e.g., how much, how long, how much information is desired), to influence outcomes and the survivor’s quality of life.

You’ve talked a bit about the sort of dramatic fall off in care that a woman experiences when she finishes treatment, which you think would be a wonderful happy time and a time of relief, but not necessarily so.

**DR. KNOBF:** The end of treatment is filled with mixed emotions. Many women report that they feel abandoned and isolated as they begin their recovery journey. Women are generally well supported during cancer treatment by friends and family, and oncology health care providers. Women with breast cancer who receive adjuvant chemotherapy experience a four to six month, or longer of a steady relationship with oncology nurses and their oncologist.

Women report that while they’re on treatment they feel like they’re doing something to keep the cancer away. Once treatment is over, there is a surge of uncertainty and vulnerability, and fears of recurrence may heighten. You finish your treatment, and your oncologist typically says, “I’ll see you in three months.” Once women are home, waiting three months for a follow-up visit often seems very long and unsettling. It is during this time that I think we can begin to implement interdisciplinary supportive care programs to help cancer survivors transition off treatment to help them feel more secure in managing their symptoms and emotional health as well as provide strategies to reintegrate into life or begin to learn how to achieve a “new normal,” as many have described.

Last year, there was a report from the Institute of Medicine titled Cancer Survivor: Lost in Transition. How does your work fit with this report?

**DR. KNOBF:** This study is consistent with the Institute of Medicine’s recommendations for health promotion and risk reduction for survivors after treatment. The target population is female cancer survivors within the first few years of menopause and those with breast cancer taking aromatase inhibitors as adjuvant therapy. Both of these groups of women are at increased risk for bone loss, and may have other chronic illness risks as a direct result of cancer treatment or the effects of cancer treatment on physical and psychological health.

Robert Axtell, PhD, Professor of Exercise Science at Southern Connecticut State University, monitors an exercise program.

Tish Knobf ‘82, PhD, RN, FAAN, AOCN, is the American Cancer Society Professor at Yale University School of Nursing and a member of Yale Cancer Center. She is the Principal Investigator for this exercise intervention trial to improve physiologic health outcomes in an at-risk early post-menopausal cancer survivor population. The complete audio interview may be heard at nursing.yale.edu/News/Media.
Putting Heart Failure to Bed

Searching for the connection between sleep and functional performance in heart failure patients

BY SIOUX SALOKA
If only things were that simple.

Fortunately, that’s where Nancy S. Redeker, PhD, RN, comes in. Last summer she was named Professor and Associate Dean for Scholarly Affairs at Yale University School of Nursing. As a well-published sleep research expert, she knows all too well that for many people, getting a good night’s sleep is a lot more complicated than simply laying their weary heads down on a cool, inviting pillow.

Nearly 40 million Americans lose sleep each night to undiagnosed or often untreated sleep disorders. This puts them at risk for a litany of health problems, including hypertension, stroke, diabetes, and obesity, not to mention the impact of the resulting sleep deprivation. The National Sleep Foundation estimates that the effects of poor sleep cost us more than $100 billion per year in lost productivity. The National Highway Traffic Safety Administration says that over 100,000 traffic accidents every year are caused by sleep-fatigued drivers.

The sleep disorders research that Nancy Redeker brings to YSN poses much deeper questions about one particularly vulnerable demographic—the more than five million Americans (2% of the population) with sleep disturbances who live with the added complication and stress of heart failure. Statistics show that as many as 70% of chronic heart failure patients routinely suffer from potentially life-threatening sleep disorders. These disorders may also contribute to diminished functioning and quality of life.

For the past four years, Redeker has led a $1.6 million National Institute of Nursing Research-funded study on the relationship between sleep and functional performance in these patients. Her research targets the extent to which biological, behavioral, and perceptual sleep characteristics explain symptoms such as daytime sleepiness, fatigue, depression, daily function and physical activity.

Since sleep is a multidimensional biobehavioral phenomenon, Redeker employed a variety of research methods to measure its dimensions. They include polysomnography to measure the physiological aspects (including cardiorespiratory and neurologic variables necessary to diagnose sleep disorders like sleep apnea), wrist actigraphy to measure the behavioral aspects (sleep duration and continuity), and self-report measures, including diaries and questionnaires, to measure the subjective aspects.

She says that while these data collection tools are common in this kind of research, what makes her work innovative is the way in which she combined them all into one study—providing her with a more “holistic, detailed view.”

Another unique feature of her study is that, thanks to modern technological advances, the study’s participants were monitored in their own homes, rather than in a typical laboratory setting. She believes this offers greater benefits for both the patient and the study investigators because the patients were more comfortable and the investigators were able to collect data without interfering with the patients’ daily lives.

Ahh, sleep. . . . sweet repose . . . . that peaceful, healing retreat that’s been described poetically, if somewhat idealistically, as “the golden chain that ties health and our bodies together.” Even an old Irish proverb claims “A good laugh and a long sleep are the best cures in the book.”

Nearly 40 million Americans lose sleep each night to undiagnosed or often untreated sleep disorders.
to better understand how people sleep in their own homes, rather than in the artificial setting of the sleep laboratory.

Redeker’s decision to become a nurse may not come as much of a surprise since a love of nursing seems to run in her family. Her mother, her mother-in-law, and now, her daughter, are also nurses. But it is a little surprising to hear this authority admit, when she talks about how she chose to specialize in heart disease and sleep disorders, that she “accidentally walked into the field of sleep.”

She tells the story of how, some 25 years ago, she found herself working in a coronary care unit, surrounded by heart attack patients. “In those days,” she recalls, “people were not as focused on what happened to patients once they left the hospital. But I was very interested in what happened after these heart patients left the hospital to recover at home. I was interested in their symptoms, how they recovered their activity levels, and also in their behavioral issues, like anxiety and uncertainty.”

She began collecting data on how heart attack patients who had coronary bypass surgery handled recovery after surgery and soon discovered that one of their biggest problems was poor sleep quality. This interest set her on the path to sleep disorders research.

Redeker is now celebrating her twentieth year in higher education and is delighted to be at Yale because of the high caliber of the nursing students and “the opportunity to work more closely with outstanding nurse scientists working in the area of self-management of chronic illness.”

So what’s next for Dr. Nancy Redeker? While she’s currently engaged in analyzing her data from this study and will be presenting and publishing her findings later this year, she’s already in the process of writing a series of proposals to do clinical trials to examine the effects of teaching and coaching heart failure patients to use behavioral self-management strategies to address their sleep disturbance.

“At YSN, we must predict and respond to the rapidly changing forces in health care so that we stay responsive and ahead of the curve,” commented Margaret Grey, Dean and Annie Goodrich Professor. Redeker agrees wholeheartedly, adding, “At Yale, our goal is to promote better health care for all people. We do that in three important ways—first, by conducting cutting-edge research, next, by preparing our students to be leaders and change agents, and finally, we use the best evidence in our clinical practice.”

For nurses who might be considering getting into research, Redeker offers some words of wisdom: “Pick a topic that you love and make sure it’s something you can stick with for a long period of time. It takes a lot of perseverance. You don’t usually get it right the first time.”

Redeker brings her abundant talents to the fertile research environment of YSN from the University of Medicine and Dentistry of New Jersey, where she served as Professor and Associate Dean for Research at the School of Nursing. She holds a BA in Sociology from Rutgers, The State University of New Jersey, a BSN and an MSN in Nursing from Seton Hall University, and she received her Ph.D. in Nursing Research from New York University.

Hopefully, in the not too distant future, her contributions to the creation of viable sleep disorder interventions will enable chronic heart failure patients to self-manage many of their sleep disorder symptoms and enjoy a higher quality of life.
Using Technology to Help Teens Cope with Chronic Illness

Thanks to a grant of more than $3.4 million from the National Institute of Nursing Research, Yale University School of Nursing is using the internet to help teens cope with type 1 diabetes.

In early March, YSN launched an internet-based coping skills training program for adolescents ages 11-14 aimed at addressing some of the daily challenges of living with type 1 diabetes. The website, titled “TeenCope,” will provide information on coping skills to help teenagers learn how to deal with certain social situations and will allow them to interact with other teens with the illness.

“It helps teens to not feel so alone and helps them to know that there are other teens out there that feel the same way and are dealing with the same things,” said Robin Whittomore, PhD, APRN, an associate professor at YSN and the program’s co-principal investigator with Dean Margaret Grey. “It’s not just the interaction with the other teens, but it’s hearing that their feelings are normal since they may not have someone else in their school who they can share that with. They just need to have their own feelings validated by another voice.”
Phillip Simon (Project Manager, ITS), Robin Whitemore (Co-Principal Investigator, YSN), and Lisa McNellis (Art Director, ITS) review designs for the “TeenCope” characters.

Dean Margaret Grey’s initial research on coping skills training for adolescents with type 1 diabetes was recently identified as one of the top 10 Landmark Studies by the National Institute of Nursing Research.

The TeenCope website is divided into five weekly programs, and each session has a different focus or “coping skill of the week.” The skills range from managing stress to conflict resolution. The teens will be able to create their own profiles and join discussion groups with others on the site. Everything will be monitored by a health care professional to ensure the safety of the users.

The YSN researchers worked collaboratively with Yale University’s Information Technology Services (ITS) team and teenagers with type 1 diabetes to develop the site, which features a cast of diverse characters who suffer from the disease. A graphic novel format with animation is used and characters are placed in scenarios where they encounter problems and come up with solutions.

“Scenarios are presented on some of the common problems teenagers would come across,” Whittemore said. “Children, and teenagers in particular, with type 1 diabetes have a lot of challenges on a daily basis. They need to monitor their blood glucose and insulin dose daily; by the time they reach adolescence, some social situations get in the way. They may not want to tell their friends they have diabetes or they don’t want to take out their equipment in a group.”

Grey has developed and tested the coping skills training program at YSN for the past 10 years. When provided in-person, Whittemore said the program demonstrated a significant improvement in metabolic control and overall quality of life in adolescents with type 1 diabetes.

“Now we are seeking an alternate way to provide the program beyond our geographical area,” Whittemore continued. “We have found it challenging for teens to meet in a group setting because of increasingly busy schedules, and the internet program greatly helps with this.”

“By using internet-based coping skills training, adolescents are much more likely to get online on their own time than go to a clinic for a meeting,” Grey said. “We have found that 40–50% of kids could not meet with a group due to their activities. Now we are able to connect with them on their own time, and we now reach 90% of the eligible children.”

“We thought it would be great to see if we can translate this to the internet,” Whittemore said. “Adolescents are particularly technology savvy, so a program provided over the internet may be appealing and effective in this population.”

In order to determine if the TeenCope program is helpful to teens with type 1 diabetes, it will be compared with an internet-based education program, called Managing Diabetes. The Managing Diabetes program was also developed by the Yale ITS team, in collaboration with Grey and Whittemore’s research team. This program provides age-appropriate education content on nutrition, exercise, glucose control, and new technology. The teens will spend one year in their respective program before switching to the other program for six months, which means the entire research period will last 18 months. Important health outcomes such as metabolic control, psychosocial adjustment, and quality of life will be evaluated.

The study is evaluating the internet programs in a multi-site clinical trial involving 300 adolescents from different areas in the United States, including Yale’s Pediatric Diabetes Program, the Children’s Hospital of Philadelphia, the University of Miami, and the University of Arizona.

“It is exciting for us to connect adolescents with type 1 diabetes from all around the country, and we hope teens think so too,” added Whittemore. “Adolescents with type 1 diabetes are at risk for deteriorating metabolic control as well as psychosocial issues. Providing the TeenCope program over the internet is an innovative medium to engage and connect adolescents, and most important, has the potential to improve their physical and emotional health.”
According to co-principal investigator Robin Whittemore, the characters evolved over a ten-month period that included artist pencil sketches, focus groups with teenagers, collaborative meetings with the research team and the information technology team, as well as voiceovers by student actors.

“We really wanted to come up with a cast of characters where a teenager with type 1 diabetes would be able to relate to at least one of them,” stated Whittemore. “Our goal was to develop personalities that were realistic and believable to teens.”

The initial project involved brainstorming with a cast of teenagers that would cover the range of typical adolescents—different appearances, different family structures, of diverse ethnic and racial groups, some involved with sports and others with different extracurricular activities.

Once the personality of each character was identified, artist Kelsey Doherty sketched out some rough drawings, using paper and pencil, for the group to review.

“Once we had the initial sketches, our research and technology team was able to refine the details of each character,” Whittemore added. “This included things like hairstyle and color, clothing styles, and attitude.”

Doherty had scanned the initial drawings into his computer, where they were used as a template for creating the still panels or animation directly in the Adobe Flash program.

A number of teenagers with type 1 diabetes were brought in to evaluate the characters and several of the sessions. The feedback was overwhelmingly positive.

“The teenagers loved the characters we had developed and wanted to know more about them,” said Whittemore. “These focus group meetings encouraged us to add more personality to the characters with realistic and accurate personas.”

Teen actors were then recruited through Epoch Arts, an “arts for youth” organization in East Hampton, Connecticut, to record the voices for the characters. Doherty then combined the audio files and drawings, and created a Flash file with the voices, sound effects, and motion.

“This has been an incredibly creative and challenging process. We are really excited about the characters that we have created for teens with type 1 diabetes,” Whittemore concluded. “That is one of the premises of our research—to provide virtual role models to teenagers through the internet.”

To see samples of the TeenCope animations, please visit nursing.yale.edu/News/Features/13.
It Takes a Village to Write a Dissertation

BY DANIEL CHAMPAGNE

"The faculty at YSN has always treated me like a ‘colleague-in-the-making’ and that makes all of the difference."

In the acknowledgments section of her doctoral dissertation, Terry Deshefy-Longhi ’09, wrote “To paraphrase an often-used quote, it takes a village to write a doctoral dissertation.” And she couldn’t be more thankful that so many people at Yale University School of Nursing have helped make up a large part of that village.

“When I look back and see what I was like then and now, it is a transformation,” she said. “YSN has enabled me to see myself as an independent researcher, and the faculty have helped me acquire the necessary skills to be one. Most importantly, they taught me how to get those skills,” she said. “They taught me how to find the resources that I need as a researcher of families dealing with chronic illness.”

Deshefy-Longhi’s dissertation, titled, “Nonverbal Communication Accuracy in Couples Living with Parkinson Disease,” focuses on determining “how accurately partners of people with Parkinson Disease (PWP’s) can assess specific emotional intentions from the nonverbal cues of their PD mates, when the verbal content of the PWP’s messages is controlled.”

She chose YSN to pursue her doctoral program in part because it afforded her the opportunity to do research in her chosen field of family health and chronic illness.

When she arrived at YSN, she was paired with Dr. Kathy Knafl as her dissertation advisor. But when Knafl left for a position at the Oregon Health and Science University, Deshefy-Longhi thought she might have to leave YSN to find appropriate faculty for her dissertation. That’s when she truly discovered the diversity of the faculty.

“Kathy actually stayed on as a reader, but I thought I would have to leave and go to another school to find the faculty that could help me. The beauty of Yale University School of Nursing, I discovered, is that the faculty are diverse in their interests as well as experts in their fields, so I was able to get the guidance I needed right here.”

She was paired with a new advisor, Jane Dixon, and sought additional help from other Yale University departments. She found a psychology professor, Dr. Marianne LaFrance, to help her understand the communications aspect of her research.

Deshefy-Longhi also said that being at YSN gave her the confidence to reach out to other researchers in a way she would never have done on her own. She has been in communication with researchers in her field in Australia, the United Kingdom, and across the United States.

“The faculty at YSN has always treated me like a ‘colleague-in-the-making’ and that makes all of the difference,” she said. “They are saying ‘we are right here beside you, and we’re walking with you on this journey.’ That’s the kind of support I received from the faculty, administration, and technical staff at YSN, and it is difficult to find the words to say ‘thank you’ to everyone involved.”
## Funded Research

<table>
<thead>
<tr>
<th>YSN Investigator(s)</th>
<th>Title of Project</th>
<th>Funding Source</th>
<th>Funding Dates</th>
<th>Total Award</th>
</tr>
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<tr>
<td>Connolly, C. (PI)</td>
<td>A History of the Tuberculosis Preventorium, 1900-1945 (R01LM008575)</td>
<td>NIH/NLM</td>
<td>9/30/04-9/29/07</td>
<td>$156,037</td>
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<td>Dixon, J. (Site PI)</td>
<td>Measuring Self-Management of Type 1 Diabetes in Youth (R01NR08539)</td>
<td>NIH/NINR (subcontract with University of Massachusetts)</td>
<td>9/1/05-ongoing</td>
<td>$810,506</td>
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<tr>
<td>Funk, M. (PI), Fennie, K., Grey, M., Reynolds, H. &amp; Sadler, L.</td>
<td>Reducing Health Disparities by Self &amp; Family Management (P20NR08349)</td>
<td>NIH/NINR</td>
<td>9/30/02-ongoing</td>
<td>$1,210,674</td>
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<td>Funk, M. (PI)</td>
<td>Association of the Availability of ST-Map Ischemia Monitoring Software with Nurses’ Attitudes, Quality of Care, and Patient Outcomes</td>
<td>Philips Medical Systems</td>
<td>11/10-ongoing</td>
<td>$300,000</td>
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<tr>
<td>Grey, M. (PI)</td>
<td>The Beatrice Renfield Yale School of Nursing Clinical Research Initiatives</td>
<td>The Renfield Foundation</td>
<td>5/1/02-ongoing</td>
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<td>Grey, M. (PI), Melkus, G.</td>
<td>Preventing Type 2 Diabetes in At-Risk Youth (R01NR08244)</td>
<td>NIH/NINR</td>
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<td>$2,954,827</td>
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<td>Grey, M. (PI), Whitemore, K.</td>
<td>Internet CST for Adolescents with Diabetes (R01NR04009)</td>
<td>NIH/NINR</td>
<td>9/17/07-ongoing</td>
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<tr>
<td>Knobf, T. (PI), Fennie, K.</td>
<td>Exercise Intervention to Improve Health in Postmenopausal Cancer Survivors (R01CA122638)</td>
<td>NIH/NCI (subcontract with Michigan State University)</td>
<td>11/01-ongoing</td>
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<td>Knobf, T. (PI), Melkus, G.</td>
<td>Building a Foundation for Health for Breast Cancer Survivors</td>
<td>Lance Armstrong Foundation</td>
<td>11/10-ongoing</td>
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<td>American Cancer Society</td>
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<td>$70,000</td>
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<td>Knobf, T. (PI)</td>
<td>Cognitive Function in Women with Drug or Surgery Induced Menopause</td>
<td>Oncology Nursing Society</td>
<td>10/1-ongoing</td>
<td>$75,000</td>
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<td>McCorkle, R. (PI)</td>
<td>Nursing’s Impact on QOL Outcomes in Ovarian Cancer (R01RO07778)</td>
<td>NIH/NINR</td>
<td>8/1/04-ongoing</td>
<td>$1,838,906</td>
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<td>McCorkle, R. (Site PI)</td>
<td>Family Home Care for Cancer—A Community Based Model (R01CA079280)</td>
<td>NIH/NCI (subcontract with Michigan State University)</td>
<td>4/1/03-ongoing</td>
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<td>McCorkle, R. (Site PI)</td>
<td>Automated Telephone Monitoring for Symptom Management (R01CA00724)</td>
<td>NIH/NCI (subcontract with Michigan State University)</td>
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<td>Redeker, N. (PI)</td>
<td>Sleep and Functional Performance in Heart Failure (R01RO08022)</td>
<td>NIH/NINR</td>
<td>7/1/07-ongoing</td>
<td>$243,895</td>
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<td>Sadler, L. (PI)</td>
<td>Home Visiting with High Risk Teen Mothers (R21HD04589)</td>
<td>NIH/NICHD</td>
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<td>Santacroce, S. (PI), Grey, M.</td>
<td>Managing Uncertainty in Childhood Cancer Survivorship (R21CA016458)</td>
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<td>$294,300</td>
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<td>Scahill, L. (PI)</td>
<td>RUPP-PI Program at Yale University (U01MH66764)</td>
<td>NIH/NIMH</td>
<td>8/21/02-ongoing</td>
<td>$2,640,005</td>
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<td>Scahill, L. (Site PI)</td>
<td>Risperidone and Behavior Therapy in Children with Pervasive Developmental Disorder—Follow-up Evaluation</td>
<td>Autism Speaks (subcontract with Ohio State University)</td>
<td>1/1/07-ongoing</td>
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<td>Scahill, L. (Site PI)</td>
<td>Behavior Therapy for Children with Chronic Tic Disorders (R01MH070802)</td>
<td>NIH/NIMH (subcontract with Tourette Syndrome Association)</td>
<td>8/5/04-ongoing</td>
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<td>Scahill, L. (PI)</td>
<td>Behavior Therapy for Adults with Tourette Syndrome (R01MH069874)</td>
<td>NIH/NIMH</td>
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<tr>
<td>Whitemore, R. (PI), Grey, M., Melkus, G.</td>
<td>A Lifestyle Change Program to Prevent Type 2 Diabetes (R34DK070949)</td>
<td>NIH/NIDDK</td>
<td>9/15/05-ongoing</td>
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<td>Zawalich, W. (PI)</td>
<td>Phosphoinositide Hydrolysis and Beta Cell Secretion (R01DK14130)</td>
<td>NIH/NIDDK</td>
<td>7/1/03-ongoing</td>
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</table>
## Grant Awards

(*includes ongoing and completed during period 7/1/07-2/29/08*)

### Ongoing Pilot Studies Funded Under Parent Awards

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<tr>
<th>YSN Investigator(s)</th>
<th>Title of Project</th>
<th>Funding Source</th>
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<tr>
<td>Fennie, K. (PI)</td>
<td>Health Care Needs of the Transgendered</td>
<td>Reducing Health Disparities by Self &amp; Family Management (P20NR08349)</td>
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<td>Fennie, K. (PI)</td>
<td>Translation of a Hospice in Prisons Model to a VA Setting</td>
<td>The Beatrice Renfield-Yale School of Nursing Clinical Research Initiatives</td>
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<tr>
<td>Guthrie, B. (PI)</td>
<td>Towards the Development of an Intergenerational Health Promotion Intervention for Adjudicated African-American Women and Their Adolescent Daughters</td>
<td>Center for Self and Family Management of Vulnerable Populations (P30NR08999)</td>
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<tr>
<td>Jaser, S. (PI)</td>
<td>Community and Coping in Adolescents with Type 1 Diabetes and Their Mothers</td>
<td>Center for Self and Family Management of Vulnerable Populations (P30NR08999)</td>
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<tr>
<td>Knobf, T. (PI)</td>
<td>Breast Cancer Survivorship Rehabilitation: Development of an Educational-Support Nursing Intervention</td>
<td>The Beatrice Renfield-Yale School of Nursing Clinical Research Initiatives</td>
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<tr>
<td>Scailhill, L. (PI), Ryan-Krause, P.</td>
<td>Anxiety Disorders in Primary Care: Needs Assessment and Feasibility of Brief CBT</td>
<td>The Beatrice Renfield-Yale School of Nursing Clinical Research Initiatives</td>
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<tr>
<td>Swartz, M. (PI), Meadows-Oliver, M.</td>
<td>Clinical Outcomes of a Pediatric Asthma Outreach Program</td>
<td>The Beatrice Renfield-Yale School of Nursing Clinical Research Initiatives</td>
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<tr>
<td>Williams, A. (PI)</td>
<td>Demonstration of a Nursing Intervention to Improve the Medication Adherence of Patients with HIV/AIDS</td>
<td>The Beatrice Renfield-Yale School of Nursing Clinical Research Initiatives</td>
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### Funded Training

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<tr>
<td>Cohen, S. (PD)</td>
<td>Nursing Management, Policy and Leadership (D09HP05311)</td>
<td>HRSA/Division of Nursing</td>
<td>7/1/05-ongoing</td>
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<td>Funk, M. (PD)</td>
<td>Yale University School of Nursing Doctoral Program in Nursing (P200A060051)</td>
<td>US Department of Education</td>
<td>8/14/06-ongoing</td>
<td>$506,688</td>
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<td>Grey, M. (PD)</td>
<td>Research Training in Self and Family Management (T32NR08346)</td>
<td>NIH/NINR</td>
<td>4/1/04-ongoing</td>
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<td>Grey, M. (PD)</td>
<td>Professional Nurse Traineeship (T32NR08346)</td>
<td>NIH/NINR</td>
<td>7/1/07-6/30/08</td>
<td>$873,538</td>
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<td>Guthrie, B. (PD)</td>
<td>Developing Scientists for Careers in Interdisciplinary Health Disparities Research</td>
<td>Josiah Macy Foundation</td>
<td>7/1/07-ongoing</td>
<td>$560,511</td>
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<td>Wallace, M. (PD)</td>
<td>Creating Careers in Geriatric Advanced Practice Nursing</td>
<td>American Association of College of Nursing</td>
<td>9/1/06-ongoing</td>
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<td>Williams, A. (PD)</td>
<td>Connecticut AIDS Education and Training Center</td>
<td>New England AIDS Education Training Center/University of Massachusetts</td>
<td>7/1/07-6/30/08</td>
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### Funded Doctoral/Postdoctoral Research

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<th>Funding Dates</th>
<th>Total Award</th>
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<tr>
<td>Haozous, E. (Doctoral Student)</td>
<td>Understanding the Cancer Pain Experience in Southwestern Native Americans (DSCN-04-164)</td>
<td>American Cancer Society</td>
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<td>Molony, S. (Postdoc)</td>
<td>Claire Fagin Fellowship</td>
<td>Hartford Foundation</td>
<td>7/1/07-ongoing</td>
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<td>Novick, G. (Doctoral Student)</td>
<td>Women’s Experience of Group Prenatal Care (F31NR009910)</td>
<td>NIH/NINR</td>
<td>9/18/06-ongoing</td>
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<td>Van Cleave, J. (Doctoral Student)</td>
<td>Exploration of Symptoms and Functional Status in Older Adults During Cancer Treatment</td>
<td>Hartford Foundation</td>
<td>9/1/06-ongoing</td>
<td>$100,000</td>
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<tr>
<td>Williams, A. L. (Doctoral Student)</td>
<td>Prevalence and Determinants of Mind-body Therapies Use (F31AT003535)</td>
<td>NIH/NCCAM</td>
<td>9/1/07-ongoing</td>
<td>$122,916</td>
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<tr>
<td>Williams, A. L. (Doctoral Student)</td>
<td>Development and Testing of Determinants of Meditation Practice Inventory</td>
<td>Mind and Life Institute</td>
<td>2/1/08-ongoing</td>
<td>$15,000</td>
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<tr>
<td>Womack, J. (Doctoral Student)</td>
<td>Contraception &amp; Metabolic Changes in HIV-positive Women (F31NR009886)</td>
<td>NIH/NINR</td>
<td>5/1/06-ongoing</td>
<td>$85,232</td>
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</table>
Record numbers of students are applying to schools of nursing around the country in response to a much publicized nursing shortage. Yet hundreds of well-qualified applicants are turned away. There are just not enough faculty to teach these new students.

The nursing faculty shortage is now a serious problem at academic institutions throughout the United States. Finding qualified faculty to fill all the positions is a growing challenge for undergraduate as well as graduate and post-graduate programs. Yale is no exception.

"Among the most pressing needs at YSN is the ability to attract the highest quality senior faculty. YSN is committed to educating advanced practice nurses and nurse scholars, providing them with the best possible education, experience, and preparation. But this is necessarily dependent upon the intellectual leadership of our faculty," explained Dean Margaret Grey.

The Beatrice Renfield Foundation has long championed nurses. Now the Foundation is helping to address the need for more qualified faculty by creating an endowed fund to recruit visiting scholars to YSN. The Beatrice Renfield Visiting Professorship will provide the necessary resources in perpetuity to recruit senior-level nursing scholars for a limited term to pursue their academic and research endeavors.

“We are grateful to the Beatrice Renfield Foundation for this important faculty post,” remarked Dr. Barbara Guthrie, Associate Dean for Academic Affairs. “An endowed visiting professorship will not only allow us to add value to our academic program by introducing visiting scholars to it, but will also help us to build a pipeline of prospective senior faculty recruits to our ranks.”

The Beatrice Renfield Visiting Professorship in Nursing strengthens YSN’s reputation of excellence in nursing education and scholarship. It is a lasting testament to Ms. Renfield’s devotion and commitment to nurses and to their education.

Beatrice Renfield (1914–2002) believed that excellence in nursing is the foundation of quality health care.
The Nursing Tomorrow campaign builds support at a vital time for both the School and for nursing as a whole. In an era of change, YSN remains committed to preparing students for careers as nurse clinicians and nurse scholars capable of improving practice through sound clinical judgment, scholarship, and research. At the same time, YSN’s faculty is actively expanding the foundations of theory and research on which the profession depends. These overlapping missions are further united by a shared dedication to compassionate clinical care in the local, national, and international community.

EDUCATING TOMORROW’S PRACTITIONERS & SCHOLARS BY:

• Ensuring that economic hardship will not bar a qualified applicant from YSN by raising financial aid endowment and increasing our need-based and merit-based aid.

• Promoting the recruitment and retention of students of color and advancing a more diverse YSN and health care workforce through new financial aid resources and programmatic funding

• Securing critical support for programmatic and clinical initiatives, including the incorporation of new technologies in the classrooms and laboratories

• Strengthening YSN’s international activities including visiting scholars exchanges and increasing aid to students to pursue international clinical rotations

• Identifying financial aid resources to prepare nurse scholars through YSN’s new PhD program

• Augmenting our faculty resources through endowed professorships allowing YSN to improve recruitment and retention of senior faculty in a time of nursing faculty shortages

If you would like to learn more about how you can help, go to http://nursing.yale.edu/Development. Or contact Lisa Hottin, Director of External Relations, at 203-785-7920.
Jean E. Johnson '65 MSN, PhD, is considered by many to be the quintessential nurse researcher and the progenitor of modern nursing research. Her research findings have dramatically improved patient care. Dr. Johnson has documented that patients do best when they understand their treatment, and when the information they receive from health care providers is presented in clear, structured, concrete terms, and not emotion-laden. Dr. Johnson has played a leadership role in shaping the nation’s health care by serving on numerous research and advisory committees for the National Institute of Health, the Institute of Medicine, the American Cancer Society, the Department of Defense Breast Cancer Research Program, and the American Nurses Association’s Council for Nurse Researchers. She has received numerous recognitions and awards, including YSN’s Distinguished Alumna Award in 1980, and was recognized as a Living Legend of the American Academy of Nursing.

Why I Give to YSN

Jean E. Johnson '65 MSN, PhD, FAAN

Jean Johnson ’65, would love to say that she knew nursing was going to be her lifelong career but, alas, she cannot.

When she was an undergraduate at Kansas State University—a farm girl, by her own description—she had to decide between majoring in home economics by itself or home economics and nursing. The decision was tough, so she flipped a coin. Nursing was the answer. “It was purely by accident, or by luck, I should say,” Johnson said.

Luckily for the nursing profession—and Yale University School of Nursing—that coin fell the right way.

Looking back on a long career, Johnson thought so well of her Yale experience that she has included YSN in her estate plans.

“I have made this gift to Yale University School of Nursing in gratitude for my experiences there, which opened a whole new world to me. I discovered research in nursing at Yale and I knew that was what I wanted to do for the rest of my career. I hope my gift will help some students to find that research is as exciting and rewarding as I have found,” she commented.

Johnson’s gift will be well spent, said Dean Margaret Grey.

“Gifts in support of research at YSN assist intramural grants, student research, and doctoral students. Faculty intramural grants have provided critical funding for innovative research in areas of clinical practice, health care policy, and educational innovation. Funds to support student research will help defray costs incurred by our students in completing their master’s praxis or doctoral dissertations,” Grey said.

Things have come a long way from Johnson’s early days in nursing. She is known for her work as one of the first to conduct modern nursing research.

“I soon recognized in my career that we didn’t have the knowledge base to underpin the practice of nursing,” she said.

It was at the Yale University School of Nursing, where she received a master’s in nursing degree in 1965, that Johnson made what she believes was the biggest contribution of her illustrious career. It was an act that was, at its heart, bred from a mix of humanity and science.

When Johnson began her research, medical providers did not provide patients with information about what to expect during procedures or often even about their illness—it was simply not done. Johnson’s research showed that if you informed patients of what to expect during a medical procedure in concrete terms, those procedures would go much more smoothly. In addition, patients recovered more rapidly as a result of the treatment.

“Now it is simply expected that you would explain to a patient what they would see, hear, and feel during a procedure, surgery, and treatments for cancer,” Johnson said.

Johnson’s continued support of YSN is a result of its history of excellence as a teaching and research institution. “The Yale University School of Nursing has always been a leader in nursing research. I was greatly influenced by that,” she said. “It opened up a world to me that I didn’t know existed.”

For more information about making a planned gift to YSN, contact Lisa M. Hottin at 203.785.7920 or lisa.hottin@yale.edu
The following students received scholarships, fellowships, and grants for this academic year. We gratefully acknowledge the generosity of the many donors and organizations who have made these scholarships possible.

Florence G. Blake Scholarship
Ashley Atkins
Annie Berman
Bridge Cota
Eden Garber
Jillian Grant
Jessica Helt-Cameron
Christa Jennings
Jillian Kannengieser
Linda Lawson
Tana Le
Kun Lu
Molly Selfridge
Jessica Van Byssum

Helen Langdon Clark Scholarship
Veronica Egbunike

Class of 1937 Memorial Scholarship
Fabian Alvarado
Stacy Azeredo
Katherine Bickel
Tina Renneisen
Ilyas Saloom
Michelle San Pedro
Leah Swalley
Carissa Tufano

Class of 1991 Reunion Scholarship
Michelle Coutts
Amber Harris
Bernadette Kuhnsman
Eddie Meraz

Annie and Albert Coffin Sr. Scholarship
Katharine Adelstein
Meghan Carr
Loren Fields
Charles Primich
Emily Williams

Jacqueline Olive French Scholarship
Asefah Faraz
Kristin Riley

Helen E. Halfors Scholarship
Meghan Chase
Daniel Hayes
Sara Koening
Christina Martinez
Elizabeth Sheets
Bethany Skelton

John Hartford Foundation
Ashley Harmon

Martha Prosser and Helen Porter Jayne Scholarship
Meaghan Hamilton
Sarah Kleinman
Brandon Ko
Mary Megan Koski
Vanessa Nazario

Evelyn Krueger Jones Scholarship
Deanna Barney
Jill Burns
Rachel Graber
Susan Silverman

Susan Kent Lamar Scholarship
Andrea Hawkins
Melissa Jenkins
Kerry Williams

Barbara M. Landauer, YSN Class of 1941, Nurse Practitioner Scholarship
Kristin Alphin

MC Foundation
Sharon Lucas
Kara Gillich
Jennifer Hulse

Arthur H. and Evanita S. Morse Scholarship
Eva Garcia
Anna Peterson
Katie Simms

Gertrude H. Parkhurst Scholarship
Jennifer Greil
Allison Kenyon

Margaret Perry Pearce Scholarship
Natanya Hildebrandt
Margaret Laragy
Yunji Lee
Monica Miller

Ruth Warren Pearson Scholarship
Julia Dickinson
Kamberlyn Dunbar
Kristyn Magulak
Jessica Murtagh
Uchenna Omokaro

Elizabeth Kurtz Puzak Scholarship
Nila Hollis

Elizabeth N. Robb Scholarship
Lisa Arnold
Everol Ennis
Elizabeth Gribble
Heather Howard
Taffany Hwang
Jenna LoGiudice
Emily Miller
Lindsay Neptune
Glen Ordinario
Phylise Seldin
Suing Siambong
Valerie Simenson
Lauryn Slomkowsk
Elizabeth Stoffers
Victoria Tolentino, Jr.
Rebekah Wheeler

Tabitha W. Rossetter Scholarship
Sara Baldauf-Wagner
Katherine Cocca

Emily Donelson
Jennifer Fow
Regina Longinotti
Heather Yates

Dorothy L. Sexton Scholarship
Allyssa Graham
Chelsea Hoffmann

Tudor Foundation-Rabinowitz Scholarship
Joan Flores
Delise Robertson
Katherine Roeltgen
Christopher White

Eleanor C. Wisser Memorial Scholarship
Sarah Cummings
Regina Gordon
Emily Sheren

Yale Club of New Haven
Annie Berman
Michelle Coutts
Kelley Delaney
Everol Ennis
Maura Fischer
Farrell Godbout

YSN Alumnae/i Fund Scholarship
Ayelet Amittay
Brenda Bednar
Kathleen Bennett
Molly Breitbart
Soaia Bur
April Camiling
LumOč Chet
Noreen Cipriano
Sarah Comeaux
Jodie Deignan
Kelley Delaney
Sarah Delaney
Yuelei Dong
Sivan Doron
Mara Evans
Meghan Fashjian
Christina Fleming
Kimberly Gallion-Exum
Janel Druge
Donna Diers ’64 is the Annie W. Goodrich Professor Emerita and former Dean of Yale University School of Nursing.

When I think of nursing research, and I do that a lot, I can’t help but think about how it started for me.

This is many thousand years ago, before the “evidence based practice” movement, before there were Cochrane Collections of meta-analyzed studies, before there was a National Institute for Nursing Research in NIH (whose first nurse Director was Ada Sue Hinshaw, YSN ’63. This is not a coincidence).

This was, in fact, at the dawn of clinical nursing research, only we students didn’t realize it was that early in the morning. Research simply was, enthusiastically taught by Robert C. Leonard, feistily supported by Florence Wald ’41, MS ’56 as Dean, definitively placed in context by Virginia Henderson, and brilliantly practiced by Rhetaugh Dumas ’63.

As I write this in February, we have just celebrated Rhetaugh’s memory with a fine afternoon of reminiscences and an enduring exhibit. Her death last summer came at the end of a career notable for its orchestration of themes: research, mental health service, and leadership. To me, the greatest of these was research.

Rhetaugh came to YSN to “learn about new work in mental health,” she wrote in her admissions essay. She was referring to Ida Orlando’s mental health concepts for nursing practice and we mourn Ida’s passing this year as well. Rhetaugh’s first study of the effects of preoperative preparation on postoperative recovery was a term paper in her research methods class in her first year. With Bob Leonard’s urging and energy, she turned that into a research grant application before she had even finished her graduate program. We found that document as we were searching the archives for exhibitable material. The PI’s credentials were listed as “Master’s Degree candidate, degree to be awarded June 1961.” Eventually there were three replications by Rhetaugh of the original study, for a grand sample size of 51, reported in an article by Dumas and Leonard in Nursing Research in 1963, and recognized as the first genuine randomized controlled clinical trial (RCT) in nursing.

Bob recalled in an email to me that Florence Wald asked for his assistance when the Chairman of the Department of Surgery at Yale New Haven Hospital went up in smoke that a nurse was doing research on his patients without his knowledge, consent, or approval. Bob extinguished the fire. They had the even more important ally in Anna Ryle ’33 as Director of Nursing at YNHH who would brook no interference with YSN’s right to do research in her hospital.

In the early 1960’s, YSN students either did clinical experiments or analyses of nurse-patient interactions, reflecting the emphasis on understanding this aspect of nursing using the theories of Ida Orlando and Ernestine Weidenbach. I did one of the interaction studies, carrying around a tape recorder for years. This is a kind of research that never quite goes anywhere although my classmate, Angela McBride ’64 took the work to its logical extreme to inform operational definitions of nursing approaches for her experimental study of the effect of nursing on patient pain.

Oh, those were heady days! We were out there showing that nursing made a difference in well-designed and executed clinical trials, the gold standard. We weren’t exactly popular in the wider nursing community, still stuck in studies of “the workers rather than the work” in Virginia Henderson’s immortal words. But our master’s theses became presentations at national meetings, and articles in nursing journals. Nursing Research was only 11 years old when Rhetaugh’s work was published. The curious bibliophile might note how many articles in that journal in the 1960s came out of Yale articles by Rhetaugh, Angela, Perry Mahaffy ’64, Roslyn Elms ’63, Barbara Anderson ’62, and Jean Johnson ’65.

I didn’t come to YSN to study nursing research and I don’t imagine many of our master’s students do today. But I got hooked on the possibilities and the challenge and the sheer joy of making nursing visible in ways understood by the scientific community outside the discipline.

As the stories in this issue show, nurse researchers at YSN are still pushing forward the boundaries of nursing’s gifts. Researchers today can’t get by with an almost-master’s credential, and the contemporary rules of engagement for competitive funding are brutal. It must be the love of the work that keeps us going.

Surely I didn’t know, nor did any of us those many thousand years ago, where nursing research might lead me.

The study I’m working with now has a sample size of 10 million.

In New Zealand.

The study is an extension of Barbara McCluskey’s ’03 DNSc dissertation. With a grand team of colleagues, we are studying the relationship between nursing resources and patient outcomes to make a difference in public policy for health in that gorgeous, graceful country.

Who woulda thunk it?
Show, Not Tell

In 1970, Carolyn Webster-Stratton ’72 flew directly from Africa to New Haven to begin her education in a unique, new program at YSN. She left a small African village where surgical equipment was sterilized in a fire behind a mud hut hospital and where nine out of every ten babies died from malnutrition before one year of age. She arrived at Yale, where she would become a pediatric nurse practitioner and continue working with families from different cultural backgrounds.

Webster-Stratton grew up in Stratford, Ontario, and attended nursing school at the University of Toronto, where she almost majored in anthropology.

“I think I wanted to do more than ‘observe’ as an anthropologist,” Webster-Stratton comments. “I wanted to be more of an active participant with families.”

Always attentive to cultural differences, she had the opportunity to practice in Sierra Leone in West Africa. It was there that Webster-Stratton began the basis for her lifetime of research. She used a small generator-driven slide projector in the tribal community to help mothers learn about basic nutrition and sanitation. Webster-Stratton has never forgotten the power and impact of a visual message.

She also received her MPH from the Yale School of Public Health at the same time she was studying at YSN (one of the first to receive a dual degree at YSN). In addition to writing her thesis, “Delivering of Health Care to the Cree and Ojibwa Indians in Northern Canada,” she also practiced among the Navajo Indians through a program offered by the Yale School of Medicine. Webster-Stratton developed a manual for Navajo women who went from hogan to hogan giving information about breastfeeding and child development. Later, after spending two years practicing among the Haida and Tlingit Indians of Alaska, she came to the conclusion that showing parents how to play with their children was more effective than telling them how to do it.

When she arrived at the University of Washington in 1976 to teach in the nurse...
practitioner program, she began the process of videotaping families to show them what worked with their children and what didn’t. Today, Webster-Stratton is a professor of nursing at the University of Washington where, in 1980, she completed her doctoral dissertation in educational psychology on the effectiveness of videotape modeling parental education as a therapeutic tool. Using the videotapes as a way of promoting positive parenting interactions and teaching parents about appropriate discipline became the basis for Webster-Stratton’s video learning systems that are now used throughout the world.

Founded by Webster-Stratton in 1984, the University of Washington Parenting Clinic develops, evaluates, and improves cost-effective, widely applicable, and theory-based early intervention programs that are designed to prevent and treat early onset oppositional defiant disorder (ODD) and conduct disorder (CD) in children (http://www.son.washington.edu/centers/parenting-clinic/). Funded completely by research dollars from National Institute of Mental Health (NIMH), National Center for Nursing Research (NCNR), Head Start, and other grant sources, the clinic does not charge its clients. Currently, the clinic is focusing on treating children with ADHD. “Our clinic focus varies by the interventions we are studying, according to what grants we have received,” explains Webster-Stratton. She says she has been able to find a way to do the clinical work she wants to do, to evaluate the outcomes of her interventions through randomized trials, and most importantly, to provide care for free.

Webster-Stratton is also the developer of “The Incredible Years Series,” the video learning programs (DVDs) that resulted from more than 30 years of research. Separate programs have been developed for training teachers, parents, and children. Webster-Stratton uses her highly studied, effective method of changing behaviors for promoting children’s social, emotional, and academic competence and for reducing behavior problems. She also has developed a curriculum for children, called the Dinosaur School, that uses video vignettes to teach certain behaviors. These video clips are then used as the catalyst for discussion in groups led by a facilitator or teacher, who must be trained in the method. The children also practice their new social skills using a variety of small group practice activities and games. Webster-Stratton has authored numerous research articles; books for parents, children, and teachers; and book chapters (see www.incredibleyears.com). In fact, her programs are disseminated globally and have been translated into many languages, including Norwegian, Danish, Russian, Spanish, Dutch, and Chinese. In any culture, Webster-Stratton says, these interventions are set up to build on parents’ and teachers’ strengths and to teach them strategies to use with the goals that they have set for themselves.

Long concerned with the disconnect between research and practice, Webster-Stratton credits Donna Diers ’64 with her commitment to evidence-based practice. “While at Yale, I had amazing clinical opportunities and faculty, including Kit Nuckolls ’41, and there were only three of us in the PNP track [also Beckett Rodgers ’72, Ruth Burton ’72]. But probably the most important person at YSN for me was Donna, who was my thesis advisor and mentor. She convinced me to do what I was most passionate about.” Diers encouraged Webster-Stratton to do her thesis on the barriers of delivering modern health care to the Ojibwa Indians on Hudson Bay in Northern Canada, an experience that furthered Webster-Stratton’s cultural awareness and commitment to a collaborative process of bringing about change, be it in a community or a family.

Webster-Stratton and her husband, a physician whom she met at a lecture about Africa while at Yale, did not envision themselves as academicians. Her husband, John Stratton, Yale Medical School ’73, is also a professor and teaches cardiology at the University of Washington Medical School. “But, in my world, becoming an academian has meant being able to practice exactly how I envisioned when I went to Yale to become a PNP,” says Webster-Stratton, “and that was getting advanced knowledge so that I could show families and fellow clinicians how to change behavior and practice—and do that in a way so that families did not have to pay.

“This is what I love about nursing—the intimacy and closeness of sharing in families’ most private moments and the possibility of collaborating with them and supporting them to feel good about their decisions so that they can feel empowered.”
Class Notes

Kit Rich Dreyfuss ’87 writes “I have been in touch with a couple of classmates who are contemplating a return to New Haven for this reunion. I was president of my tiny little graduating class of 1958, but I’ve lived on the west coast for most of my post-Yale years. I would welcome hearing from my classmates. You can reach me by email at kdreyfus@ucla.edu.”

Mary Lee Mantz ’69 retired in June 2007. She spent 21 years teaching midwifery students at Yale and medical students at the University of Vermont, as well as working in private clinical practice in New Haven and Hyannis. The next 17 years she spent living in Uganda, Zimbabwe, and Ethiopia—working in International Public Health managing RHC projects in several African countries followed by working with the post-Communist countries of Eastern Europe, mainly Russia, Romania, and Albania. Mary Lee received YSN’s Distinguished Alumna/i Award in 1994. She makes her permanent home on Cape Cod, Massachusetts. You can contact Mary by email at m.mantz@worldnet.att.net.

Margaret Fletter ’80 helped to create the first family nurse practitioner residency program in the country. The 12-month residency was developed under the auspices of the Weitzman Center for Innovation in Community Health and Primary Care. The Weitzman Center is the research and development area of the Community Health Center, Inc., one of the largest federally qualified health centers in the nation. The residency program is designed for newly graduated and certified family nurse practitioners who intend to practice and lead in the complex environment of the more than 1,000 community health centers across the country. The inaugural residency class includes recent YSN graduates Rachel Gollnick ’05, Sarah Long ’05, Laura McDonald ’07.

Carrie Essex ’00 sent us the following: “It has been seven years since I graduated from YSN, and I am starting to feel the desire to go back to school. I am currently applying to the William F. Connell School of Nursing Ph.D. Program, and I am hoping to focus on the role of PNP’s in diagnosing and treating childhood depression in the primary care setting. Since graduation things have been very good. I spent the summer immediately after graduation living and working in Botswana for a Harvard AIDS-related project, but I mainly followed the pediatricians at the country’s largest hospital. I was able to see both inpatient and outpatient care, and do a small research study on maternal awareness of an HIV diagnosis. Overall it was a wonderful experience.

When I returned to Boston from Botswana, I worked part time at Westwood Lodge, a local psychiatric facility as an RN on the pediatric unit, and part time as a PNP at the practice where I am currently still employed. I enjoy my job greatly, I know that I was meant to be a PNP, but I have also enjoyed precepting students the last few years, which is what spurred my interest in earning a Ph.D. I hope eventually to be able to teach more full time.

On a personal note I also was married and have two little girls now. I can’t help but include a picture… I miss Yale, and I greatly value all my time and experiences there.”

Mary Lou Siefert, ’01, DNSc ’05 has been appointed Assistant Professor of Adult Health at The William F. Connell School of Nursing at Boston College.

Suzanne Strebler ’06 writes “shortly after graduating I took a job at the University of Oxford to work on a treatment trial for eating disorders (a placement was set up at the Yale Center for Eating and Weight Disorders during my final year, which was amazing!). Working on a trial has been interesting (insanely rigorous!) and enjoyable. The group has written a treatment manual which will be published this spring. I wanted to say thank you—I am grateful for my time at YSN... for your teaching, support and wisdom. It has been tremendous to work on this book and I certainly could not have done it without all of you.” Suzanne can be reached at Suzanne.Strebler@psych.ox.ac.uk.

Alison Hawkins Yes ’05 gave birth to her first child John Oliver “Ollie” was born on December 15, 2007 at 2:45 pm weighing 7 lbs 3 ounces and 20.5 inches long. He is healthy and my husband, Brandon, and I are enjoying parenthood. I will be returning to work part-time at Kids First, a primary care pediatric practice owned by Children’s Hospital of Philadelphia. I also became a Happiest Baby on the Block Certified Instructor. I hope that my classmates from the Pediatrics Specialty ’05 will stay in touch. My email is alison.yes@gmail.com.

Whitney Moore Ewing ’05 is working part-time at Advance Pediatrics. Her son was born last spring; Jackson Wainwright Ewing, May 3, 2007, weighing 7 lbs, 15 ounces, and measuring 20 inches.

Anna Tiesch ’05 is working on the primary care test committee board for the PNCB. She was recently in South Carolina to work on the Role Delination Study. Anna also published a couple of articles—another one coming out in March or April issue of Clinician Reviews—and another one still in the editing process. Her most recent article was published in the March 2007 Advance.

Suzanne Strebler ’06 writes “shortly after graduating I took a job at the University of Oxford to work on a treatment trial for eating disorders (a placement was set up at the Yale Center for Eating and Weight Disorders during my final year, which was amazing!). Working on a trial has been interesting (insanely rigorous!) and enjoyable. The group has written a treatment manual which will be published this spring. I wanted to say thank you—I am grateful for my time at YSN... for your teaching, support and wisdom. It has been tremendous to work on this book and I certainly could not have done it without all of you.” Suzanne can be reached at Suzanne.Strebler@psych.ox.ac.uk.

Barbara Wolfe ’87 has been appointed Director of the Center for Nursing Research at Boston College’s Connell School of Nursing. The Center serves as an institutional resource for faculty and students and is designed to strengthen the research productivity of faculty, increase interdisciplinary research and scholarship, and communicate research findings to facilitate research utilization in nursing practice and in educational settings.

Anna Ahn Volpintesta ’96 has recently changed her name from “Crystal.” She is married to Dr. Edward Volpintesta, who is a family physician in Bethel, Connecticut.

Mary Lou Mantz ’69 writes “I have...”

Deidre Carroll Erukar ’00 writes...”

My husband Jonathan Erukar (Yale Med, ’01, orthopaedic surgery residency, ’06), our son Samuel and I spent the last academic year in Boston where Jonathan completed a Spine Surgery Fellowship. We also gave birth to our second son, Benjamin Holden Erukar, on May 18, 2007 at Brigham and Woman’s Hospital in Boston. He was 7 pounds and 21 inches long and we are all doing well. We moved to Lake Forest, Illinois in August (where I am originally from) and Jonathan is an attending spine surgeon at the Illinois Bone and Joint Institute in Highland Park and Bannockburn, Illinois. We are laying down our roots here and the transition has been busy but very exciting, especially with two little boys under 18 months. You can reach Dede at dcerulkar@yahoo.com.
From our students

Suzette Stone ’09 Student Director to the YSN Alumnae/i Association
Yale University School of Nursing has a powerful legacy that is composed of an amazing collection of alumnae/i and current students. As a student, I think it is hard at times to think about life beyond Yale. It has been my pleasure to serve on the Alumni Board. We are working on ways to connect current students with alumnae/i. At events such as the annual alumnae/i banquet or the recent speed mentoring event held last October, students are able to meet and greet alums. These are wonderful opportunities for students to see beyond the NCLEX, the piles of reading, and the clinicals. The alums are inspiring and they give definition of what it means to be called a Yale nurse. I look forward to this next year serving with the Board and finding more ways for connection and networking.

I invite all alumnae/i to get involved, connect with students, and reach out to the next generations of Yale Nurses. I can be reached at suzette.stone@yale.edu.

In Memoriam as of February 29, 2008

IDA JEAN ORLANDO (1926–2007)

Former YSN faculty, Ida Jean Orlando Pelletier, died on November 28, 2007. She received her nursing diploma from New York Medical College, Lower Fifth Avenue Hospital, School of Nursing, her BS in public health nursing from St. John’s University, Brooklyn, NY, and her MA in mental health nursing from Teachers College, Columbia University, New York. Orlando was an Associate Professor at Yale University School of Nursing (1954–1961), where she was Director of the Graduate Program in Mental Health Psychiatric Nursing. While at Yale, she was the project investigator of a National Institute of Mental Health grant entitled: “Integration of Mental Health Concepts in a Basic Nursing Curriculum.” It was from this research that Orlando developed her theory, which was published in her 1961 book, The Dynamic Nurse-Patient Relationship. She furthered the development of her theory at McLean Hospital in Belmont, MA serving as Director of a research project: “Two Systems of Nursing in a Psychiatric Hospital.” The results of this research are contained in her 1972 book, The Discipline and Teaching of Nursing Process. Orlando held various positions in the Boston area, was a board member of Harvard Community Health Plan, and served as both a national and international consultant. She was a frequent lecturer and conducted numerous seminars on nursing process.

by Norma Jean Schmeiding, from www.uri.edu/nursing/schmeiding/orlando

New Staff

Elizabeth (“Liz”) Roscher joined the Development and Alumnae/i Affairs Department on March 1. Liz is YSN’s Annual Fund and Alumnae/i Affairs Officer and is responsible for planning, directing, and implementing the School’s annual reunion and young alumnae/i giving programs. She is also responsible for all aspects of alumnae/i relations for YSN and serves as the Managing Officer of YSN’s Alumnae/i Association.

A graduate of George Washington University, Liz majored in political science and was a dedicated student caller for the University’s Annual Fund Telephone Outreach Program. She was so successful for GW that when she graduated she was the student manager for the program, supervising and motivating 15 to 25 student callers per shift.

Liz most recently served as Assistant Director of Annual Giving for Beloit College in Beloit, Wisconsin. At Beloit, she managed all aspects of the phone and Class Agent programs. She was part of a team of professionals who collectively contributed to the College’s most successful fundraising year in its history.

She was involved in many aspects of the Beloit Fund including direct mail and e-solicitations, senior class gift program, Class Agent communications and outreach, web development, and alumni and parent events.

She is no stranger to advanced practice nursing. Liz’s mother is a nurse practitioner in Maine.
YUSNAAn Board News

The Yale University School of Nursing Alumnae/i Association (YUSNAA) has been representing YSN alumnae/i for more than 70 years. The Alumnae/i Association’s mission is four-fold:

- To further and strengthen the interests of YSN
- To promote professional standards and educational advancement of nursing
- To promote fellowship among graduates of the School
- To increase the visibility of the School within the University

The Alumnae/i Association is governed by a Board of Directors, and this group is currently working in some exciting areas. Because students become lifelong members of YUSNAA after one semester at YSN, the Board is developing ways to facilitate the connection of YSN students to the school and to YUSNAA. Toward that end, alumnae/i will be surveyed about their willingness to mentor and precept students. A student-alumnae/i mentoring event is scheduled for April and another, more formal event will take place during the Reunion Weekend ’08. This event will create an opportunity to evaluate how the alumnae/i can best assist those just entering the profession.

A subcommittee of the Board will also meet in April to discuss nominations for the Distinguished Alumnae/i Award to be presented at the banquet during Reunion Weekend ’08. Nomination forms and criteria for submission will be sent to all alums in advance of the June 30 deadline for nominations. Nomination forms are also available at: http://nursing.yale.edu/Alum/Distinguished.

YUSNAA Board members meet a minimum of four times per year, twice in New Haven and twice on conference calls. An election for new members is held annually during Reunion Weekend. If you are interested in serving on the Board or getting involved with Board activities, please contact Bonnie Baloga-Altieri ’89 balogabl@umdnj.edu, immediate past president and chair of the Board’s Nominating Committee. The current members of the Board include:

President          Judith R. Lentz ’76
President-Elect    Judy A. Beal ’75
Immediate Past President  Bonnie Baloga-Altieri ’89
Student Director   Suzette Stone ’09
Secretary/Treasurer Bethany Golden ’03

Directors            Virginia Brown ’50
                      Ruth Chen ’99
                      Peg Cushman ’76
                      Linda Juszczak, DNSc ’99
                      Priscilla Kissick ’56
                      Erin Shawn ’03

AYA Delegates     Elizabeth Letts ’95
                      Perry Mahaffy ’64
                      Carol Ann Wetmore ’94

Ex-officio          Nina Relin Adams ’77
                      Tracy Weber Tierney ’02

Eligibility information and nomination forms available at http://nursing.yale.edu/Alum/Distinguished

For more information, contact Liz Roscher at 203-737-2137 or Elizabeth.roscher@yale.edu