Dr. Jacquelyn Taylor Connects Scientific Research to Clinical Practice
Letter from the Dean
YSN Spotlight News
Improving Health Care Through Cutting-Edge Research
Minding the Baby
Bench to Bedside, Lab to Lifestyle
A New Vision for Children with Autism
At-Homeness Improving Quality of Living for Seniors
Scholarship Recipients
Campaign Update
Truth of the Matter: Robert S. Sherwin
Grant Awards
Donor Profile: Chris and Elaine McLeod
I Am a Yale Nurse: Barbara E. Wolfe ’87
On Inspiration: Barbara Flynn Sideleau ’70
In Memoriam
What Does It Mean to Be a Yale Nurse?
Class News
Alumnae/i Board News
As a student at Yale University School of Nursing in the 1970s, I became a pediatric nurse practitioner and fell in love with nursing science. Back then, research methods and evidence-based practice were not a part of undergraduate curricula in nursing, so Yale provided my earliest exposure. I was hooked. Much as I loved practice and helping families, I soon learned that research and science provided the opportunity to help more than one family at a time. I must have been asked a thousand times why I didn’t just go to medical school if I wanted to practice and do research. I’ll take this opportunity to explain.

Nursing science deals with the “caring” aspects of care rather than the “cure.” Our science creates knowledge that contributes to the care of patients by nurses and other health professionals. The results help individuals, families, and communities to promote health, prevent disease, care for the acutely ill, and manage chronic conditions. While medicine may discover a “magic pill” to treat a disease, nursing science provides the knowledge to know how to help patients and families take that pill in the most optimum manner for the best health outcomes.

Clinical nursing research was born at YSN. The first clinical trial in nursing was conducted here by then-student Rhetaugh Dumas ’61. A major focus of our research has been on helping individuals and families manage chronic conditions, and especially on the development and testing of interventions. Such interventions range from physical activity for women following treatment for breast cancer, to use of the Internet for youth with diabetes, to improving care in hospitals.

In this issue of Yale Nursing Matters, you will read about current research being conducted at YSN. Dr. Lois Sadler’s work to prevent poor outcomes for teen mothers and their infants represents preventing health problems at its best. Dr. Larry Scahill’s work ranges from drug studies to parenting interventions for children with psychiatric disorders. Both Lois’s and Larry’s research teams are interdisciplinary. We include profiles of two junior faculty—Drs. Jackie Taylor and Sheila Molony. Dr. Taylor’s research on the genetics of familial hypertension has the potential to profile those at highest risk and to develop preventive interventions. Dr. Molony’s work on the concept of “at-homeness” for elders in nursing facilities may very well lead to new approaches to long-term care.

As with other scientific fields, the future of our science will depend on our ability to educate the next generation of nurse scientists to participate in the interdisciplinary research environment. In addition, the future will depend on increasing availability of funds to support research. With the economic downturn, this may be even more difficult than it has been in the past. It is clear that singular reliance on the National Institutes of Health is unlikely to be fruitful, and we need to develop other sources of support for such important research that will prevent disease and limit suffering.

As a clinician, I had always been committed to helping children and families. Becoming a scientist allowed me to help many children and families through my research findings. I didn’t want to develop the pill, I wanted to help even before the pill became available. Isn’t it obvious why I didn’t go to medical school?

Margaret Grey, DrPH, RN, FAAN
Dean and Annie Goodrich Professor
Angela Crowley Presents Urgent Issues in Child Day Care Safety

A recent forum sponsored by the Child Health and Development Institute of Connecticut presented findings from a landmark study co-authored by YSN Professor Angela Crowley, PhD, APRN, PNP-BC, FAAN. The study addresses a number of urgent health and safety issues affecting child day care centers and licensed family day care homes. The panel of day care providers, advocates, and parents put forward a number of pragmatic solutions with an emphasis on education.
YSN Receives Maximum Ten-Year Accreditation

The Commission on Collegiate Nursing Education (CCNE) recently granted YSN the maximum 10 years’ accreditation of its master’s degree program. The exit meeting of the CCNE review team was attended by a large gathering of YSN faculty, students, and staff, as well as Yale President Richard Levin, Provost Peter Salovey, and Deputy Provost Stephanie Spangler. “The CCNE expressed an extremely high level of enthusiasm at the close of their visit,” added Spangler. “It was clear that the visitors admired the academic programs, the faculty, and the students, and recognized the essential leadership provided by the School’s dean and her administrative team.”

Mary Moller Becomes President of American Psychiatric Nurses Association

Mary D. Moller, DNP, ARNP, APRN, PMHCNS-BC, CRNP, FAAN, YSN Associate Professor and Specialty Director for Psychiatric–Mental Health Nursing, began her one-year term as president of the American Psychiatric Nurses Association in October 2009. Moller said, “We are facing a critical juncture in time related to the future of psychiatric nursing. I’m committed to advocacy for psychiatric nurses in the areas of education, research, policy, and practice.”

APNA is a 6,500-member-driven organization with a strong infrastructure and member outreach program. Moller added, “Being the president as we begin a new decade will definitely be the highlight and peak of my 39-year career as a nurse.”

YSN Students Volunteer to Help Vets in Need

Four YSN faculty and 34 students traveled 30 miles to volunteer for Stand Down, a yearly event providing services for needy veterans. Begun in 1992, the one-day program is sponsored by the State of Connecticut to provide services for more than 1,200 homeless and needy veterans, transported from around the state.

YSN volunteers provided health education and screened for blood pressure, diabetes, tuberculosis, and respiratory health. More than 60 organizations assembled to provide health services; job, educational, and financial counseling; legal assistance; and housing referrals. Vets were also given haircuts, a hot meal, and new clothing.

The event was led by alumna Linda Spoonster Schwartz, RN, MSN ’84, DRPH ’98, FAAN (pictured above), Commissioner of the Connecticut Department of Veteran Affairs, who recently received the Archon Award from Sigma Theta Tau International, the Honor Society of Nursing.
Margaret Grey
Reappointed
as Dean of Yale University
School of Nursing

Margaret Grey, DrPH, RN, FAAN, has been reappointed to a second five-year term as dean of Yale University School of Nursing (YSN), effective July 1, 2010, President Richard C. Levin has announced. Dean Grey, the Annie Goodrich Professor at YSN, has been at Yale since January of 1993. During her first term as dean, she led the school to a number of accomplishments, achieving the maximum, ten-year reaccreditation from the Commission on Collegiate Nursing Education (CCNE), establishing a PhD program and seeing its first graduates, and reaching the school’s capital campaign fundraising goal well ahead of schedule.

“Faculty and staff alike expressed strong support for Dean Grey’s reappointment,” Levin commented in an email message to the YSN community. “The School of Nursing and the University are fortunate to have the services of this outstanding leader.”

“It is an honor for me to serve as Dean in this school which has been so influential,” Dean Grey stated. “The faculty, students, and staff are at the heart of what makes the school a dynamic, engaging, and forward-thinking place to be. I am looking forward to continuing to work with and educate the next generation of nursing leaders and scientists and to seeing the school reach new heights.”

YSN Faculty Advancing Technology in Nursing Education

After a competitive selection process, three YSN faculty have been chosen for a grant to integrate technology into nursing education. With funding from TIP-NEP (Technology Integration Program for Nursing Education and Practice), professors Geraldine Marrocco, EDD, APRN, CNS, ANP-C, Leslie Neal-Boylan, PhD, CRRN, APRN-BC, and Meredith Wallace, PhD, APRN-BC, are piloting the use of podcasts in nursing courses. YSN was granted the resources to record lectures, case studies, and conferences as podcasts and make them available online.

YSN Professors (left to right) Leslie Neal-Boylan, Meredith Wallace, and Geraldine Marrocco display their award check at the TIP-NEP conference, hosted by Duke University.

NEW FACULTY

Shelley Yerger Hawkins, DSN, FNP-BC, GNP-BC, FAANP, joined YSN as an associate professor in the fall of 2009, after completing a two-year postdoctoral fellowship focused on the prevention and management of chronic illnesses at the University of North Carolina at Chapel Hill School of Nursing. She is a certified family and geriatric nurse practitioner and a fellow in the American Academy of Nurse Practitioners. Her research is focused on using telemedicine to deliver behavioral change interventions for older adults with diabetes.

Allison Shorten, RN, RM, MSC, PhD SYD, FACM, is an associate professor and an Australian registered nurse and midwife. She researches determinants of birth outcomes, including models of care, health insurance, costs, practitioner styles, and the cascade of intervention. Her work translating evidence from research into a decision aid has evolved into “Birth Choices,” a booklet utilized by hospitals around Australia to help women make informed decisions about their method of giving birth.

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YSN Professors (left to right) Leslie Neal-Boylan, Meredith Wallace, and Geraldine Marrocco display their award check at the TIP-NEP conference, hosted by Duke University.
Yale University School of Nursing (YSN) faculty and students are engaged in cutting-edge scholarship with the goal of “better health care for all people.” Our well-established bio-behavioral and community-based research and evidence-based practices address health concerns of people suffering from a broad range of chronic disorders and those who are vulnerable to health problems for a variety of reasons, such as advanced age and socio-economic status. YSN’s scholarship improves the lives of diverse individuals and families across the lifespan and in all states of health. Stellar examples of the impact of YSN scholarship include the research of the faculty featured in this issue of *Yale Nursing Matters*.

Improving Health Care Through Cutting-Edge Research

At Yale and across the nation, there is a growing interest in bringing discoveries from the laboratory and the bedside into the community through CTSAs—Clinical and Translational Science Awards—funded by the National Institutes of Health (NIH). Lois Sadler, YSN Assistant Dean for Academic Affairs, plays a strategic leadership role in the community engagement and research activities of Yale’s CTSA, the Yale Center for Clinical Investigation (YCCI). These activities are designed to address health priorities identified by community residents, such as smoking, violence, asthma, obesity, diabetes, the elimination of health care disparities, and the mental health needs of children and families.

YSN is also collaborating with YCCI to develop NetHaven, an interdisciplinary practice-based research network led by Martha Swartz, YSN Associate Dean for Clinical Affairs; Laurie Bridger, Medical Director of the Fair Haven Community Health Center; and myself. NetHaven evolved from APRNet, founded by Dean Margaret Grey as a network of advanced practice nurses who were engaged in research and evidence-based practice. Recent NIH funding enabled us to create an organizational structure that will facilitate health promotion and disease prevention research and promote evidence-based practice in primary care practice settings in the greater New Haven area.

I am thrilled to be responsible for the YSN Office of Scholarly Affairs, supporting all YSN research and clinical scholarship. Dean Grey and I work closely with YSN faculty to identify and implement strategic directions for YSN scholarship. Our team assists faculty and students with preparing grant submissions and progress reports. We also provide guidance to match research areas with funding opportunities, lead peer review activities, advise on human subjects concerns, facilitate collaborations, provide statistical support, and offer ongoing educational and networking opportunities related to scholarly activities. I am pleased to report that YSN faculty recently secured $8.8 million in support of new research, including $3 million from the American Reinvestment and Recovery Act.

In the pages that follow we are pleased to share examples of the many ways that YSN contributes to “better health care for all people” through superb scholarship.

The Office of Scholarly Affairs includes Assistant Director for Research Activities Sarah Zaino, Research Scientist Kris Fennie, Associate Dean Nancy Redeker, Senior Administrative Assistant Fran Hackerman, and Associate Research Scientist Sangchoon Jeon.
Focusing on the critical time from the last trimester of pregnancy through the baby’s second birthday, the “Minding the Baby” program (MTB) is making an impact in the lives of young families throughout New Haven.

MTB is an intensive home visiting program for young mothers and their infants that integrates health, parenting, and mental health services into a single intervention. The program is a collaborative effort of Yale University School of Nursing (YSN), the Yale Child Study Center (YCSC), and the Fair Haven Community Health Center (FHCHC). A second site is in development at the Cornell Scott–Hill Health Center.

“Our goal is to help new parents to develop the capacity to understand and respond to their children’s needs and emotions and to develop secure attachment relationships, in order to ensure the health of both parent and child,” commented Lois Sadler, PhD, PNP-BC, FAAN, Associate Professor at YSN and the YCSC, and co-director of the MTB program.

“MTB participants are primarily very young parents who, for a variety of reasons, may not be able to take advantage of other parent support programs in the schools or community. That is why we bring those services to them in their homes.”

The home visiting program was originally developed in 2001–2002, by Yale faculty Lois Sadler; Arietta Slade, PhD; and Linda Mayes, MD, in close collaboration with FHHC practitioners Laurel Schader, MD; Kate Mitcheom, MSN ’81, CNM; and Karen Klein, MSN ’95, PNP; along with FHHC Executive Director Katrina Clark, MPH ’71. The developers were searching for additional supportive and preventive services for first-time young parents and their infants.
A team consisting of a pediatric nurse practitioner and a clinical social worker visits the family’s home on a weekly basis for the first year, then every other week for the second year. They focus on forming a therapeutic relationship with mother and baby, while providing information, coaching, and direct health, mental health, and case management services. The nursing component of the program has continued to grow and develop over the past eight years, benefiting from the expertise of founding pediatric nurse practitioner Denise Webb, YSN ’02.

MTB is an intense intervention at a crucial stage of the lives of the baby and young parent. MTB innovated a focus on “reflective parenting,” or the ability of the parent to understand the infant’s behavior in terms of underlying mental states—the thoughts, needs, emotions that the infant is experiencing. This emphasis on reflective parenting was integrated by MTB co-director Arietta Slade, a child psychologist and expert on infant attachment and parental reflective functioning.

In a separate study, MTB co-director Linda Mayes, the Arnold Gesell Professor of Child Psychiatry, Pediatrics, & Psychology in the YCSC, has also studied brain changes in both first-time and experienced parents utilizing MRI brain scans of new parents while listening to a baby cry or looking at faces of a baby.

“Over the past decade, there has been considerable interest in determining whether there are neurological changes when a parent assumes responsibility of caring for a child,” Mayes commented. “Babies are highly rewarding, and caring for a baby activates reward centers in our brain. At the same time, are there special neural adaptations required for parents to assume the responsibility of caring for a baby? We are currently studying what happens to the brain centers related to reward and stress as parents respond to their new role.”

“The results indicate that something special happens in parents’ brains at the birth of their first child, making them particularly receptive to creating new neural pathways and developing a way of relating to their child,” Mayes continued. “This is one of the reasons why we begin our intensive intervention in late pregnancy with the child psychologist and expert on infant attachment and parental reflective functioning.

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Assistant Professor Jacquelyn Taylor is searching for genetic causes of high blood pressure in African American women.

“In clinical translational science, or ‘bench to bedside,’ after you’ve done the work in the laboratory, you want to see how the results will impact the individual. We don’t just stop at the molecular level.”

In the world of bench science, nurse scientists are unusual. But the lab is right where you’ll find Yale University School of Nursing (YSN) Assistant Professor Jacquelyn Taylor, PhD, PNP-BC. Dr. Taylor was one of the first cohort of 15 junior nursing faculty to receive the Robert Wood Johnson Foundation (RWJF) Nurse Faculty Scholar award in 2008.

The goal of the new RWJF grant is to develop the next generation of national leaders in academic nursing by supporting the research endeavors of junior faculty. This prestigious award gives Taylor three years to focus on her genetics research. She is investigating the interaction between genetics and behavior on high blood pressure among African American women, who are at greatest risk for cardiovascular disease.
Before coming to Yale, Taylor served on the faculty of the University of Michigan School of Nursing for three years, leading the Pediatric Nurse Practitioner program, which meant teaching and advising students from the undergraduate through PhD levels. She was drawn to YSN because of the faculty’s breadth of knowledge in both diverse populations and pediatrics, led by YSN Dean Margaret Grey, now her research mentor, and herself a national leader in pediatric research.

Taylor came to YSN in 2007, recruited by YSN Associate Dean Barbara Guthrie, PhD, RN, FAAN, who had been impressed by Taylor while they were both at the University of Michigan. “She excels in research, practice, and in service,” Guthrie explained, citing Taylor’s work with a mobile health clinic in Detroit, in which she precepted nursing students in the community to provide health care to children.

“I see Jackie not only as an emerging scholar, but also as an emerging leader in nursing research,” Guthrie added. “Her scholarship far exceeds her chronological age and, in fact, that of many senior researchers. She is a perfect example of how an accelerated academic trajectory is creating the next generation of leadership.”

Taylor now conducts her research in the state-of-the-art laboratory of famed geneticist Richard Lifton, MD, PhD, Chairman of the Department of Genetics at Yale University School of Medicine. She also collaborates with other leaders in the field, such as Dr. Sharon Kardia at the University of Michigan School of Public Health, and Dr. D. C. Rao at Washington University (St. Louis) School of Medicine’s Department of Biostatistics. They provide ongoing mentorship and access to genetic data from large hypertension-related epidemiological studies.

Few nurses are involved in the field of hypertension genetics, although Taylor began her lab work as an undergrad while investigating hypertension in rats in the physiology department at Wayne State University School of Medicine. She says other researchers find her presence surprising. “They expect nurses to do more qualitative or questionnaire-type research and not basic science, but we are at the bench,” Taylor said.

So what makes nursing scholars unique? “The difference is, nurses are the ones who actually treat patients and make clinical recommendations based on that research. In clinical translational science, or ‘bench to bedside,’ after you’ve done the work in the laboratory, you want to see how the results will impact the individual. We don’t just stop at the molecular level.”

Using her perspective as a nurse, Taylor is searching for genetic warning signs of hypertension and for effective ways of altering the behaviors that may affect blood pressure of entire families. “Rates of high blood pressure are very high among African American women,” she stated. “Many people don’t realize they have high blood pressure until they have had a stroke or heart attack.”

Taylor points to staggering statistics for African American women, who have the highest prevalence of risk factors among any ethnic-gender group, including cardiovascular disease (49%), high blood pressure (47%), being overweight (80%), and obesity (51%). Indicators for African American girls are equally alarming, with an obesity rate of 23%, compared with 13% of Caucasian girls.

Taylor is searching for genetic markers among women who have been diagnosed with hypertension, and then looking for those markers in their undiagnosed children. “Hypertension has only been looked at as an outcome,” Guthrie added. “She is looking for possible causes for these disparities in hopes of finding treatments.”

Taylor’s aim is to delay or prevent the onset of high blood pressure for children, who are usually overlooked for the disease. “If we can start the interventions early, we can prevent problems down the line,” Taylor explained. “This is a chronic illness that is fatal in the long term.”

Taking behavior into account in a previous study, Taylor would surprise participants with phone calls to ask what they had eaten in the past 24 hours. She says the women were sometimes shocked at their own reports, and were eager to do better. In the spirit of bench to bedside, Taylor hopes to develop a hypertension prevention study that combines the needs of parents and children. “Parents are stressed, and by the time they are finished doing everything for their children, they have forgotten about their own health,” she concluded. “We should ask children to get involved in helping their parents eat healthy, buy groceries, and exercise together, to help reinforce good habits for the whole family early on.”
Lawrence Scahill and Karen Bearss developed a training manual to help parents of children with autism and related disorders.

Autism has received a great deal of attention in recent years, but Scahill says that reports of increased prevalence are not well founded. The apparent increase, according to Scahill, is due to four factors. The first is that, 15 years ago, the case definition of autism was broadened, resulting in a wider range of individuals being counted. Second, methods of assessment have greatly improved, so that the differential diagnosis between autism and other conditions is more precise. This is especially true for individuals at the lower and higher ranges of intellectual function.

The third factor is that, until recently, estimates of prevalence have been based on those who came to a clinic for help. “For any psychiatric disorder, when you go out into the community and assess large numbers of children, you will find unidentified cases—children who never made it to a clinic,” noted Scahill. And finally, when figures for prevalence are cited, they often refer to all subtypes, not just autism. Autism alone is estimated to affect 2 children per 1000, whereas all PDDs affect as many as 6.7 per 1000.

As recognition of children with PDDs has improved, Scahill and his colleagues have gone beyond the question of identification to ask, “Once we find these kids, what are we going to do to help them?”

Scahill’s latest work builds on over a decade of research spent testing the effectiveness of various medications, behavioral interventions, and combinations of the two. In 1999, he launched the first large-scale, multi-site study of the antipsychotic medication risperidone in children with autism. The study of 101 children was funded by the National Institute of Mental Health under the Research Units on Pediatric Psychopharmacology (RUPP) initiative.

In comparing risperidone to placebo, investigators found the medication dramatically improved behaviors such as tantrums, aggression, and self-injury. Gains were stable over time without the need to increase dosages, and symptoms returned if the drug was taken away. “This first study created a model of investigation and provided useful guidance to clinicians,” Scahill added. Although the drug was well tolerated, risperidone is often associated with weight gain and a potential for metabolic problems related to obesity. This is an area of concern and of ongoing study.

The most recent RUPP study broke new ground yet again, this time by combining medication with a systematic program of parent training. “Historically, drug research and behavioral interventions have existed in parallel, and not in combination,” Scahill said. “Because risperidone has already been shown to be effective in reducing maladaptive (negative) behavior, we were looking for ways to promote adaptive (positive) behavior through parent training.” The study included 124 children ages 4 to 13 with PDDs and serious behavioral problems. The subjects were randomly assigned to a combination of risperidone and parent training, or risperidone only.

Although both groups improved over the six-month trial, children receiving combination therapy showed greater reductions in tantrums, aggression, and self-injury, compared
to the group who received medication alone. Another surprising result was that the combined treatment achieved these results at a comparatively lower average dose of risperidone.

Published in the November 2009 issue of the *Journal of the American Academy of Child and Adolescent Psychiatry*, the six-month trial was conducted at Yale University, Ohio State University, and Indiana University, with Yale as the coordinating site.

Considering that the RUPP study was conducted in three states, the positive outcome also proved that the parent training program can be delivered reliably at different sites. “This shows that the intervention is exportable—and ready for dissemination,” Scahill said.

Based on the success of that study, Yale is collaborating with four other sites to concentrate on parent training alone, in a group of younger children. The National Institute of Mental Health has funded the $7.5 million, five-year study of 180 children aged 3 to 6 years. “Given the age of these children, there is no medication involved in this study,” noted Scahill. The children will be randomly assigned to either six months of parent training or six months of standard parent education about autism. This is the first large-scale, randomized trial to evaluate parent training for young children with PDD.

Scahill and co-investigator Karen Bearss, PhD, Associate Research Scientist at YSN and the Yale Child Study Center, have been working for two years to revise the RUPP parent training manual, now adapting it for preschool-aged children. Parent training gives parents a set of skills designed to reduce the child’s maladaptive behavior and promote adaptive behavior. This parent training program builds on the work of Yale Professor of Psychology Alan E. Kazdin, PhD, and Carolyn Webster-Stratton ’72. Their methods of parent training have proven effective for children with disruptive behavior, but have not been tried before in children with PDD. Children with PDD present a particular challenge because their everyday living skills often fall well below their age and IQ.

Bearss and Scahill recently filmed over 30 video vignettes to accompany the updated manual. Using actors, the videos demonstrate ways of dealing with frequent challenges encountered by parents of children with PDD—some techniques are more effective than others.

For example, a child may throw an explosive tantrum while getting dressed. The parent wants the child to participate in getting dressed and to master the tasks involved. “In the face of the tantrum, the mother understandably backs off from the demand on the child and does the work herself,” Scahill observed. “This ends the conflict, but the child didn’t learn the skill.” Training helps the parent understand the purpose of the child’s disruptive behavior and find new ways to help the child improve those life skills.

“We aren’t just interested in reducing problem behavior; we also want to improve their everyday living skills. We are hoping to avert the use of medication in these young children before their negative behaviors become set,” explained Scahill.
At-Homeness
Improving Quality of Living for Seniors

by John Powers

Dr. Sheila Molony, Assistant Professor at Yale University School of Nursing (YSN), has found one common and consistent theme when interviewing nursing home patients: “This is not home!” This is the case whether or not the patients classify themselves as “happy” at the nursing home. “At-homeness” is a term Molony first encountered in writings from the 1970s by David Seamon, PhD, Professor of Architecture at Kansas State University. Seamon uses the term to refer to a taken-for-granted situation of comfort and familiarity in the world in which one lives. In Molony’s work, home is a gestalt or accumulation of place-based experiences that come together, where that place becomes meaningful and even healing. In her current research, Molony uses the term “at-homeness” to distinguish the experience of “home” from a discrete physical place. At-homeness is an individualized experience of home, which may or may not be located in one dwelling.

“The goal here is to improve the quality of living in a certain situation, which is relational and includes not only the place where one lives, but also the history and context of one’s life and health,” commented Molony. She views at-homeness as a component of quality of life and a dynamic concept, particularly for frail older adults who are experiencing simultaneous transitions in health and residence. “This is different from some definitions of ‘quality of life,’ which are more static,” she explained.

The goal of Molony’s research is to improve at-homeness by creating place-based, individualized experiences for nursing home and assisted living residents. She hypothesizes that at-homeness improves health outcomes and creates the potential for thriving (the opposite of the medical concept of failure to thrive). She began researching the topic during her PhD work back in 2000–2004. Molony expanded her empirical study of at-homeness during her postdoctoral work as a Claire M. Fagin Fellow, working with Dr. Lois K. Evans at the University of Pennsylvania School of Nursing. Included in her doctoral work was a 22-question instrument that led to the published Experience of Home (EOH) scale. Future plans call for Molony to expand this instrument and make it more useful for those with severe disabilities or cognitive impairment.

“During my early work on this concept, I read literature and studied people who lost their homes in natural disasters and refugees who longed for an idealized home of the past,” added Molony. She found examples that have stuck with her:

• Women who cared for severely disabled children day in and day out, without relief or respite, and literature about women living in situations of domestic violence. For both, home was “a prison.”
• The maximum-security prison Alcatraz, which had an audio tour where former prisoners narrated their experience. One prisoner talked about the day the prison closed and they wanted him to leave. He had an important role there, knew everyone, knew the routines, etc. He didn’t want to go; the prison had become home.

• Homeless individuals who carry possessions that symbolize some important piece of their identity—a cup, a blanket, a Bible. The fewer the possessions, the more important they were. It seems some of “home” lives in those symbols.

In essence, Molony’s work is examining the transactions between a person and their environment that matter. Building on Benner and Wrubel’s work on “The Primacy of Caring,” she has found that what matters is different for each individual, in each context.

“Most older adults have an experience of at-homeness within a particular dwelling, so when they are in a dwelling that gives that same feeling, it potentiates the ability of any additional interventions to create a healing environment,” Molony stated. “That is why the physical space and design are very important.” They are also important because some spaces and physical designs are warm and welcoming, foster comfort, and enhance mobility and function, while others feel cold, sterile, or foreboding, create barriers to mobility, or impede self-care. Physical design also influences whether places invite and welcome people to sit down and chat. “Also significant is whether they have windows,” she explained, “to view nature, physical symbols of spirituality, symbols of caring, symbols of identity, or symbols of past homes.”

“So the house is important, but it isn’t just about the house,” she continued. “To create at-homeness, we must know each individual in context, and know what matters. We have to come to understand how at-homeness can exist in a prison, or in a blanket, or in the freedom to leave a particular place. We must also understand how skillful management of health conditions is needed to optimize the engagement of older adults with their environment and remove barriers to at-homeness.”

A key component of Molony’s at-homeness study includes “small houses,” a new and innovative nursing home model that seeks to create a home for residents. The basics of the small-house concept are to provide a nursing home-level of care within a home setting. At the heart of the model is the delivery of individualized, person-centered care within small, self-contained homes or communal apartments for 10–12 people with private rooms and bathrooms for each individual. The concept includes a home configuration including a front hall, living room, dining room, and den; access to outdoor spaces; and amenities that reflect residential finishes. Education and support for staffing models that enable staff to deliver person-environment centered care are also essential.

“True homes are where we feel a part of something meaningful, where we are respected, connected, and protected,” Molony continued. “We experience comfort and stability in the midst of uncertainty. It is a place where we can reconnect and reconcile health and life changes. It is a place of refuge, relationships, mastery, and familiarity that reduces the energy burden needed to navigate the outside world. The small-house model is about weaving these ideas into the very structure and design of a building, into the very fabric of a newly formed social group, and into the goals of the long-term care system. New collaborations between nurses, long-term care leaders, and architects are beginning to change the landscape of nursing home care.”

Recently, Molony was named the Director of Nursing Research at the Overlook Institute in Northampton, Mass., sponsored by the Masonic Health System. The site includes a 120-bed traditional nursing home, which is transitioning to 12 “small houses,” and a training center. The institute will be a center of innovation, research, and education where best practices in person-environment centered care are implemented, evaluated, and disseminated. The institute will also provide experiential and instructional opportunities for future small-house model adopters.

“In essence, all of this research is to raise the quality of living for people at this stage of their life, and feeling at home is a major component of this,” Molony added.
The following 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**
Amanda Conley
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Excellence at YSN begins with outstanding students. The NURSING >> tomorrow campaign offers an opportunity for the School to strengthen its financial aid resources—an area of pressing need. Yale Nurses are among the world’s best-educated practitioners and scholars. Your help is needed to ensure a commitment to excellence for the next generation of Yale Nurses.

We are grateful for the generosity of our donors for creating the following new endowment funds for financial aid during the NURSING >> tomorrow campaign:

- Milton & Anne Sidney Prize and Scholarship (2005)
- Helen Langdon Clark Scholarship (2006)
- Susan Kent Lamar Scholarship (2006)
- Martha Prosser and Helen Porter Jayne Scholarship (2006)
- John Alden Bennett and Dora Gibbs Bennett Scholarship Fund (2007)
- Helene Fuld Health Trust Scholarship (2007)
- Rhetaugh Dumas Scholarship (2008)
- Gustafson Family Scholarship (2008)
- Mary Ann Lillie Scholarship (2008)
- The McLeod Blue Skye Nursing Scholarship (2008)

To learn more about how you can support a future Yale Nurse, contact Lisa Hottin, Director of External Relations, at 203.785.7920 or lisa.hottin@yale.edu.
Partners in Improving the Health of New Haven and Beyond

BY ROBERT S. SHERWIN, MD

The Yale Center for Clinical Investigation (YCCI) was launched in 2006 with the goal of translating research findings into practice, creating a central home to support health-related research across the entire campus, with the main focus on research and education. Within YCCI, we have created a unique environment for training the next generation of clinicians and scientists to work in multidisciplinary teams. Along with our institutional and community partners, YCCI is committed to improving the care of patients locally and worldwide. The center fosters the translation of disease-related discoveries from bench to bedside, and from clinic to community. Because the vast majority of health care happens not in hospitals but in the community, one of YCCI’s most important goals is to transform discoveries into practical benefits. YSN plays a vital role in growing the linkages between laboratory research, clinical research, and translational research in the community. As YSN Dean Margaret Grey has stated, “We share with YCCI a collaborative vision to promote interdisciplinary research that has the possibility of actually changing the health of people in New Haven and surrounding areas.”

From the initial planning for YCCI, YSN has been an important partner. We are fortunate to have a strong school of nursing known for its biobehavioral and community-based research initiatives. In keeping with its mission of “better health care for all people,” YSN established the Advanced Practice Registered Nurses’ Research Network (APRNet), the first practice-based research network for advanced practice nurses. APRNet has served as a model for engaging community-based health care practitioners in research and facilitating the translation of research findings into clinical practice. YCCI and YSN are now collaborating to form a new, larger, interdisciplinary practice-based research network known as NetHaven. This effort is led by faculty from the School of Nursing and the Fair Haven Community Health Center. Funded through a Clinical Research Network Feasibility Award from the National Center for Research Resources as part of the National Institutes of Health Roadmap Initiative, the new organization will merge APRNet’s infrastructure and community practices with YCCI resources and expertise in study design, analysis, and regulatory support.

In addition to this initiative, YSN has provided leadership to the development of strong community-based research at Yale. Yale School of Medicine has long been known for its basic research and clinical research. The expertise of YSN’s faculty, and the leadership of Dr. Lois Sadler, is assisting YCCI to engage others in community-based research aimed at solving health problems identified by the community. YSN faculty are lending their considerable clinical research expertise to address areas such as smoking, violence, asthma, obesity, diabetes, the elimination of health and health care disparities, and the mental health needs of children and families. Their efforts are part of a broader initiative to link evidence-based methods and new research findings from researchers at Yale who are leaders in their respective fields to improved outcomes for health issues that are critical to the community.

Finally, YCCI and YSN support training for the next generation of clinical and translational scientists. YSN PhD students train in interdisciplinary teams to learn research. A number of YSN junior faculty have been named YCCI scholars and have benefited from protected time to develop their research with the guidance of mentors. Several senior faculty have, themselves, served as mentors for scholars from various fields.

YCCI has benefited from the expertise of the YSN faculty. Ultimately, the ability to translate research findings to the community to enhance practice will result in better health outcomes. Clearly, this partnership will benefit many.
<table>
<thead>
<tr>
<th>YSN Investigator(s)</th>
<th>Title of Project</th>
<th>Funding Source</th>
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<td>Alonzo, A. (PI)</td>
<td>Acute Coronary Syndrome and Care-Seeking Delay (R01HL085328)</td>
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<td>Crowley, A. (PI)</td>
<td>Promoting Healthy Nutrition and Physical Activity (K08MCO8277)</td>
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<td>11/08–6/30/09</td>
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<td>Funk, M. (PI)</td>
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<td>Coping, Parenting and Maternal-Child Adjustment in Adolescents with Type 1 Diabetes (23Dko88454)</td>
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<td>Moller, M. (PI)</td>
<td>Outcomes of Psychiatric Case Manager Training on Medical Adherence, Progression through the Four Phases of the MAP Recovery Model, and QOL in Patients with Schizophrenia</td>
<td>AstraZeneca Pharmaceuticals</td>
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<td>Sleep and Functional Performance in Heart Failure (R01R0008022)</td>
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<td>Cognitive Behavioral Therapy for Insomnia in Stable Heart Failure (R21R011387)</td>
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<td>Multi-site Collaborative Study for Adherence, Virologic and Clinical Outcome (R01MH078773)</td>
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<td>Smoking Cessation and the Natural History of HIV-Associated Emphysema (R01HL090315)</td>
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### ONGOING PILOT STUDIES FUNDED UNDER PARENT AWARDS

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<td>Allen, N. (PI) [postdoc]</td>
<td>Changing Physical Activity Behavior Using Problem-Solving Skills and Physiological Feedback in Women with Type 2 Diabetes</td>
<td>Center for Self and Family Management of Vulnerable Populations (P30NR08999)</td>
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<td>Andrews, L. (PI), Redeker, N.</td>
<td>Self-Management Intervention for Insomnia in Stable Heart Failure: Protocol Development</td>
<td>Center for Self and Family Management of Vulnerable Populations (P30NR08999)</td>
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<td>Jaser, S. (PI)</td>
<td>Communication and Coping in Adolescents with Type 1 Diabetes and Their Mothers</td>
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### FUNDED TRAINING

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<td>Josiah Macy Foundation</td>
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<td>American Association of College of Nursing</td>
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### FUNDED DOCTORAL/POSTDOCTORAL RESEARCH

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<td>Hartford Foundation</td>
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<td>Murphy, M. (Doctoral Student)</td>
<td>Evaluation of Diaper Dermatitis in Pediatric Patients with Cancer (DSCN-09-140)</td>
<td>American Cancer Society</td>
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<td>Novick, G. (Doctoral Student)</td>
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<td>Williams, A-I. (Doctoral Student)</td>
<td>Development and Testing of Determinants of Meditation Practice Inventory</td>
<td>Mind and Life Institute</td>
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“I wanted to give back to Yale in a way that would make an important impact on health care.”

Good health is more than a lifestyle for Chris and Elaine McLeod. It is a commitment to educating the next generation of health care providers.

Chris understands firsthand the value of quality health care. A recent patient at Yale-New Haven Hospital, Chris was cared for by a top-notch team of nurses and doctors. “The care was terrific. It made me realize that nursing goes well beyond the personal touch. With the introduction of new technologies, nursing is now a far more complicated and specialized profession than it was a generation ago.”

Educating the next generation of nurses is key to improving the delivery of health care, and preparing nurse faculty is essential to advancing new knowledge in the profession. That is why Chris and Elaine McLeod have created the McLeod Blue Skye Scholarship Fund at YSN. The fund supports students in the doctoral program.

“We are deeply appreciative of the McLeods’ generous gift to benefit our PhD students,” said Nancy Reynolds, PhD, RN, FAAN, Professor and Director of the Doctoral and Postdoctoral Programs at YSN. “Research conducted by nurses provides a unique understanding of health care for vulnerable populations. While Yale has one of the top nursing PhD programs in the world, we are financially limited in the number of students we can admit. With gifts such as the McLeod Blue Skye Scholarship, we are better able to grow the program and to cultivate outstanding nurse scientists and future leaders.”

Education has always been top priority for the McLeods. Chris credits his parents for instilling in him an appreciation for education while he was growing up in Shelton, Conn. Chris went on to graduate from Yale College in 1977 with a dual degree in economics and engineering and applied science, and later earned a master of science in management from the Sloan School at MIT. Chris currently is CEO of 454 Life Sciences, a Roche Company. The company developed the innovative Genome Sequencer™ system for ultra-high-throughput DNA sequencing, used in research fields ranging from cancer and infectious disease to paleontology.

“I have been very fortunate in my career, and I wanted to give back to Yale in a way that would make an important impact on health care,” explains Chris. “I knew Yale School of Nursing was a leader in nursing education. I learned that the School had an exceptional PhD program that was preparing researchers and faculty. I knew I could help. And, of course, Elaine was a big influence.”

Elaine McLeod is a pediatric nurse who graduated from the University of Connecticut. She and Chris met in high school, married after college, and moved to Boston. Chris is quick to point out that Elaine supported him through graduate school with a job at the Visiting Nurse Association in Boston. After graduate school, Chris and Elaine relocated to Stamford, Conn., where they raised their two children. Elaine currently works with a pediatric practice in Branford, Conn.

The name of the McLeod Blue Skye Charitable Foundation harkens back to Chris’s Scottish heritage and to his passion for education. “My family originates from the Isle of Skye in Scotland. It is a tribute to my family who gave me the gift of a good education. The image of a ‘blue sky’ reminds me of ‘clear sailing.’ I like to think that, with a good education there are no limits, there’s nothing but blue sky ahead.”
I Am a Yale Nurse

On Inspiration

What Does it Mean to Be a Yale Nurse?

Class News

In Memoriam

I Am a Yale Nurse

Dr. Barbara E. Wolfe ’87

By Dan Champagne

While majoring in nursing at Syracuse University, Dr. Barbara E. Wolfe had a strong interest in psychiatry. But it wasn’t until she arrived as a student at Yale University School of Nursing that she decided to turn that interest into a career. In fact, she can pinpoint the exact location where she made her decision.

It was while she was studying on Unit 10-5 of Yale-New Haven Hospital, a psychiatric evaluation unit, and Unit 10-8, an adolescent psychiatric unit, where Wolfe said she received “an early introduction into working with people with eating disorders.” After earning her MSN in psychiatric nursing from YSN in 1987, Wolfe earned her PhD in nursing, with a focus on eating disorders, at Boston College.

She is now the associate dean for research and professor at Boston College’s Connell School of Nursing. She has received an R01 research grant from the National Institutes of Health and National Institute of Mental Health (NIMH) to study serotonin regulation in eating disorders. Wolfe’s research focuses on the psychobiology of eating disorders, particularly the relationship between neurotransmitter functioning and mood, impulsivity, and eating behavior. She is looking at the regulation of serotonin in anorexia nervosa and its relationship to treatment response.

“What I’m hoping to do in my career is influence and improve the care for the people who suffer from these illnesses,” Wolfe said. “These are pretty devastating illnesses for people and their families. In terms of individuals, they suffer from life-threatening situations. One piece of my work is to contribute to the care, and advance the science of neurobiology.”

According to the NIH, anorexia nervosa is “characterized by emaciation, a relentless pursuit of thinness and unwillingness to maintain a normal or healthy weight, a distortion of body image and intense fear of gaining weight, a lack of menstruation among girls and women, and extremely disturbed eating behavior.” Between 0.5 to 3.7 percent of girls and women will develop anorexia nervosa in their lifetime, and about 0.5 percent of those individuals will die each year as a result of the illness.

Wolfe said her research has found there is a high co-occurrence of depression and higher levels of impulsivity in women who have eating disorders, both of which are implicated in the central serotonin function. This suggests the serotonin in their bodies isn’t working properly.

She said if you give a patient with bulimia a selective serotonin reuptake inhibitor (SSRI), a type of antidepressant, it can be therapeutic for them, but it doesn’t work the same way in patients with anorexia in low-weight states.

Wolfe explained SSRIs are meant to block serotonin, which forces more to be available at the cellular level. When people diet, they can decrease the amount of the amino acid tryptophan, which produces serotonin in the brain. If there is no serotonin in the brain, there is nothing for the SSRIs to act on.

Wolfe is now studying 5-Hydroxytryptophan (5-HTP), which is what tryptophan converts into before it converts to serotonin, as a way to get the drug to act on that conversion so it can augment the effects.

Many of the study’s subjects are people in therapy for eating disorders, while others are struggling with the disease but have yet to seek treatment.
“By participating in the research study, they might decide they are ready to seek treatment,” Wolfe said. “We often get them to that point. It’s really a privilege to be able to do this,” she added. “These people are often, for the first time, sharing their stories. Many of the stories are very difficult, and the fact that they’re willing to share them in the name of science and hopefully enter treatment is a very valued connection. I’m really thankful to all of those who participated. We couldn’t do this without them.”

Wolfe said many of the research subjects come back to participate in multiple studies, including some who return when their eating disorders are in remission.

“Some really have heartwarming stories,” she stated. “Their perseverance in helping us understand, so others don’t have to go through what they’ve gone through, is really commendable.”

In that Wolfe’s research focuses on eating disorders in women, she noted that while there are sociocultural issues that contribute to eating disorders, she believes there is a biological component and genetic predisposition as well. She also said there is not enough serious attention paid to eating disorders.

“Part of it might be stigma, and the issue of denial plays a role,” Wolfe said. “It’s something people might not think they have. That’s part of the illness, and it’s really hard for families dealing with this.”

Along with being a certified advanced practice registered nurse, Wolfe is a member of the American Psychiatric Nurses Association and served as its president from 2003 to 2004. She is also a member of the Eating Disorders Research Society, Sigma Theta Tau International Honor Society of Nursing, and a fellow in the American Academy of Nursing.

In 2004, Wolfe received the Nancy Valentine Excellence in Leadership Award from the New England Chapter of the American Psychiatric Nurses Association and won the Excellence in Nursing Research Award from the Massachusetts Association for Registered Nurses in 2007. Her research has also been featured in many publications, and she contributed a chapter to the fifth edition of Primary Care of the Child with a Chronic Condition, co-authored by Patricia Jackson Allen, YSN’s director of the pediatric nurse practitioner specialty.

Wolfe began her research on eating disorders in 1992, and while she has been researching the disease for nearly 20 years, she still points to YSN as where she got her start.

“What I really liked about Yale was that they had a focus on neurobiology, which really interested me,” she said. “At that time, it wasn’t eating disorders I was interested in, but neuroscience.”

She also acknowledged some of her former professors at YSN for helping begin her career in research. She called Donna Diers, former dean and Annie W. Goodrich professor emerita at YSN, “an inspiration.” Diers authored the first book in the United States on the subject of clinical nursing research methodologies.

“It was the first time I really said, ‘Hey, nurses can actually be scientists,’” Wolfe said. “It was really inspiring.”

She said Sandra Talley, associate professor of nursing at YSN and academic liaison and research nurse at Connecticut Mental Health Center in New Haven, was a great help during her time at YSN.

“I was very fortunate to have very stellar teachers at YSN,” Wolfe said. “I will be forever grateful for that. It was a very clinically focused program. Without having that clinical foundation, I wouldn’t be where I am today.”
On Inspiration: Barbara Flynn Sideleau ’70

BY LUC R. PELLETIER ’82

Dr. Barbara Flynn Sideleau, EdD, MSN, received her BSN from the University of Bridgeport, MSN from Yale in 1970, and EdD from Columbia. She was one of the founding faculty members of Fairfield University School of Nursing, where she taught psychiatric nursing from 1970 to 1991. Dr. Sideleau co-edited and wrote numerous chapters for what became the definitive psychiatric nursing textbook, Comprehensive Psychiatric Nursing, through four editions. The book twice received the National League for Nursing Book of the Year award and was translated into several languages. She was a licensed family therapist and maintained a private practice.

During my undergraduate education at Fairfield University, Barbara Flynn Sideleau ’70 was a major influence in my choice of nursing specialty. After exposure to the other clinical nursing specialties, I found a home in psychiatric–mental health (PMH) nursing, due, in large part, to Barbara’s mentoring. During our PMH rotation, we were given an opportunity to work with persons challenged with mental illness and substance use disorders. The compassion and dignity she showed toward these patients was truly inspiring. In observing her practice, I was able to make a meaningful connection with patients.

In the midst of a competitive, grueling program of study, Barbara often stood apart. With her, I experienced for the first time unconditional positive regard; and over the years, I have come to understand this to have been unconditional love. She expected excellence, yet owned the part that she played in my education—that of steward, guide, and coach. She was as interested in what I had to say as I was in her opinion and thoughts. Most of all, she helped me to grow as a person, and over the years, to grow as a professional nurse.

I developed an independent study during my second year at YSN. During this time, I returned to Fairfield, where I participated in accreditation preparation and taught PMH nursing content. Around this time, I was honored to have been invited to write a chapter in Comprehensive Psychiatric Nursing. I was able to contribute to subsequent editions of the book, which initiated a career as a writer, editor, and reviewer.

After graduating from YSN in 1982, I continued my correspondence with Barbara, and learned that she had suffered a stroke in 1991. Shortly thereafter, I visited her in Trumbull and was so saddened by the effects of the stroke on her body, speech, and mobility. Sitting next to her, she looked at me intently and made a motion for me to “come on.” I translated this to mean, “Tell me what you’re up to.” I was right—she smiled as I recounted my recent accomplishments. Those moments, along with the kindness she showed me as a student, will stay with me forever.

In April 2009, I received a call from Barbara’s daughter, Michelle, who told me that she had died. Barbara had struggled with the aftereffects of the stroke for close to 18 years. We reminisced on the phone about this remarkable woman, and joked about standing in line outside Barbara’s office to have a moment with my teacher and her mother.

I am the person I am today because of the mentoring that Barbara so freely provided. Her influence and inspiration have been sustaining in my 30 years in nursing. My love and heartfelt thanks to you, Barbara!

Luc R. Pelletier ’82, APRN, PMHCNS-BC, FAAN, is an administrative liaison at Sharp Mesa Vista Hospital and core adjunct faculty with National University in San Diego, California.
For ten years, I have volunteered as a nurse practitioner in a rural health program in the western highlands of Guatemala. I am forthright about the fact that I do this for myself. Guatemala is a country of contrasts: mountainous beauty next to impoverished misery; a warm and gentle people with a dark history of oppression and violence. It is also a winter relief from the line-up of coughs, colds, and body aches of my patients. I enjoy the time out of context, the home visits with pecking chickens, improvised remedies, and exam rooms with a single dangling bulb.

To reach one of our villages, San Martin, the healthcare team must hike up a mountain, past fields of dried cornstalks and beans terracing up to the clouds. We encounter wiry old men and small boys carrying firewood bundles twice their size, strapped to their foreheads. I think of arguments with my boys about unloading the dishwasher. We arrive with a plastic tub of medicines and supplies. A long line of women wearing intricately woven tunics, with children in tow, waits outside the dusty room that is the community center, church, and makeshift clinic.

These clinics, or consultas, are not typically life-saving events. People come with aches, coughs, and diarrhea to get free Tylenol, vitamins, and parasite medication that they could not afford. Though we occasionally see very sick children, malnourished pregnant women, and ravaging skin infections, we mostly treat parasites that will return the next month. Even faced with such dire need, it’s not easy to figure out how to truly be of help.

One young woman, eyes fixed to the ground, complains of a headache for two weeks since her baby was born. She is withdrawn, exhausted, and speaks limited Spanish—mostly Cakchiquel, the local Mayan dialect. Asking basic questions about her symptoms, I notice she does not have her baby with her. Village mothers always carry their infants wrapped on their backs until they can walk on their own. I sense this woman needs more than the usual medicine, and gently ask if something is wrong with her baby. Crying, she tells me her baby has a curse. I ask her to take me to the baby. With a translator, we walk to a one-room house of bound vertical branches with a corrugated tin roof. Inside, an emaciated infant lies crying through a jagged, opened mouth split up to the side of his nose.

I explain to the mother that she has done nothing wrong. Her son, Simcum, has a cleft palate, a common birth defect in Guatemala. An operation can repair it. She is hesitant, not convinced. I know that a local nutrition project has the soft nipples, bottles and formula available, that no villager can afford, which will keep the child alive for now. The next day I return with a local health promoter and a mother with her two-year-old daughter who recently had a cleft palate surgery. We reinforce the instructions on formula preparation, no small feat in a house with an open fire for cooking and no clean water supply. The mothers talk while the toddler’s smile tells more than I could ever say.

The following year I returned to San Martin to see Simcum playing outside the house, burying his bright eyes in the skirts of his pregnant mother. Though I did not participate in the surgery, or in the long task of nursing him back to health, clearly this child would not be alive if I had not paid attention to his mother’s pain and if she had not dared to share her shame with me.

In recent years, my work in Guatemala has moved on to the training of local health promoters to care for ordinary problems in their communities—a better plan for improving infant mortality than relying on a chance encounter with an American nurse.

In my own community, with its wealth of resources, these experiences remind me of the importance of slowing down, paying attention, creating a space where the patient trusts you will listen. The stories I am allowed to share are the most wonderful part of my work as a nurse practitioner.
Spearheaded by Jane Manning ’56, the Class of 1956 came out with their yearly newsletter. It contains updates from many graduates on their families, travels, community activities, and of course, their grandchildren. If you’d like information on how to create a newsletter for your class, contact Jane at manning.preston@gmail.com.

Maureen Doran ’71 and her husband, Kip (MED ’73), joined the Peace Corps in April of 2009 and are serving in Ramotswa, Botswana. Working in the life skills program, Maureen teams with the high school guidance faculty on programming to help kids make smart, healthy life choices, with a focus on HIV prevention. Kip is assigned to a government office in charge of the region’s HIV programming, helping to define goals and giving educational presentations to health colleagues.

Cheryl Tatano Beck, MSN ’72, CNM ’82, was the featured speaker at a one-day workshop on postpartum depression held in November at Indiana State University’s College of Nursing. A story on Syracuse.com recounts the day Ann Wiles ’49 lost a car tire on a turnpike and remained the picture of calm. The story begins: "Ann Wiles rarely gets rattled under pressure. She’s been a nurse since 1949…"

In October, Deborah Ward ’77 began her appointment as associate dean at the Betty Irene Moore School of Nursing at the University of California, Davis. Deborah was appointed as the school’s first faculty member in September 2008.

Nancy Kraus ’78 is now Treasurer for the New York State Association of Licensed Midwives, the lobbying arm for the state’s midwives. She has also become Co-Clerk of the Purchase Friends Meeting, Nancy says, "This is what happens when you have an empty nest—you become even busier!"

Richard Jennings ’79, Clinical Assistant Professor in the Department of Obstetrics and Gynecology at the NYU Medical Center, was featured in the May 2009 Profiles in Excellence of the New York City Health and Hospitals Corporation. His uncommon choices led to a surprising 30-year career as a midwife providing intimate care to thousands of women seeking natural childbirth.

Margaret Flinter ’80 was featured in American Profile magazine for her work with low-income, uninsured people. She helped CT’s Community Health Center grow from a single location to 12 sites. "The challenge is understanding the stress, difficulties, and economics that patients face," she says. "The reward is the satisfaction of having made a difference in their life and health."

Luc R. Pelletier ’82 recently published a chapter entitled “Quality Improvement and Healthcare Safety” in D. L. Huber (Ed.), Leadership and Nursing Care Management. He was also appointed to the National Quality Forum National Voluntary Consensus Standards for Patient Outcomes, Mental Health Steering Committee, a consensus project seeking to identify outcomes of mental health care provided by our nation’s health care system.

Bernice Coleman ’83 has been appointed to the Advisory Committee on Organ Transplantation by Kathleen Sebelius, Secretary of the US Department of Health and Human Services. The committee was established to ensure that the system of organ transplantation is grounded in the best available medical science and to assure the public that the system is as effective and equitable as possible.

Norah Sullivan ’93 is an ARNP in the Addictions Treatment Center of the Puget Sound VA Medical Center. For the past 11 years, she has worked part-time as a sexual assault nurse examiner for Harrison Medical Center in Bremerton, WA. Norah lives on a small island in Puget Sound and rides her motorcycle on the ferry to work in Seattle. She recently spent two weeks in Nairobi, Kenya, on a trip sponsored by the US Department of Justice in response to the post-election violence of 2007. Norah was one of three Americans training 28 nurses, physicians, psychiatrists, and clinical officers as sexual assault forensic examiners, who soon formed a new professional forensic organization called SAFE KENYA.

Richard Beaulieu ’94 recently completed the doctoral program at UCSF School of Nursing and successfully defended his dissertation, entitled “The Experiences of Young Adult Couples with Emergency Contraceptive Pills.”

Lucinda Canty ’94 gave birth to Ryan Anthony McDonald on October 10. He weighed 6 lbs., 7 oz., and was born at Saint Francis Hospital in Hartford, CT.

Michelle DeSisto Glowny ’94 and her husband, Steven, are the new proud parents of a baby girl, Gwendolyn Mia, born July 18.

In October, Sandra Conklin ’91 was invited to teach Advanced Physical Assessment in Vietnam as a faculty associate with Friendship Bridge (FB), a nonprofit, nongovernmental program that helps women create their own solutions to poverty. Nurses from FB have collaborated with Vietnamese colleagues to develop the country’s first master’s in nursing program. Sandra is currently Director of Nursing Services at Wyoming Medical Center.

Kandi Hudson ’91 graduated with her doctorate in educational leadership from the University of Phoenix in April of 2009. Her dissertation was on the impact of hope on nursing student retention and academic success. She presented at the International Nursing Administration Research Conference in October. Kandi credits Yale, and the late Dorothy Sexton, for giving her a love of learning and a solid research background. Dorothy was her primary thesis adviser at YSN and a staunch supporter of her doctoral efforts.

Jordan Hampton ’98 and Paul Sullivan welcomed their daughter Grace Hampton Sullivan on September 9. Jordan writes, “I am so grateful to have the opportunity to experience parenthood, with all the joys and challenges that accompany it.” She works full time as a PNP running the MGH-affiliated school-based health center at Chelsea High School (MA), “with a new respect for all the teen moms I counsel.” Jordan reported on her 1998 classmates:

Lizanne Backe ’98 is living in Nahant, MA with her husband and children Isabella and Henry.
Ellen Coletti ’98 is living in Boston with her husband and two children, and is working with Boston Public Health Commission school-based health centers.

Evelyne Delori ’88 is living in Arlington, MA, with husband John Riley ’88 and sons Nico and Patch and working as an FNP at Lowell Community Health Center.

Amanda Skinner ’98 finished her MBA and is living in CT with husband Kalter.

Susan Langerman ’99 was named Clinician of the Year at Yale Health Plan.

Karen Mera ’01 has recently accepted a job at the State Department as a Foreign Service Health Practitioner. Karen will train in Washington, DC, for two months before heading to her first post.

On September 14, Katy Tierney ’02 gave birth to son Milo with partner Tracy Weber Tierney ’02. Katy and Tracy’s older son, Jake, is excited to have a new brother. Just four weeks after Milo was born, the whole family moved to a new house in Cheshire, CT.

Courtney Marshall ’03 will complete a psychiatric NP post-master’s at the University of Maryland this spring. She is working part-time as a research coordinator for the Center for Sexual Medicine at Sheppard Pratt in Baltimore and hopes to make use of her specialties in the field of sex therapy.

An interview with Amy Romano ’04 appeared on YSN student blog nursemidwifeintraining.blogspot.com. Amy, a certified nurse midwife and YSN student, spoke about her path to midwifery and life after YSN.

Alison Hawkins Yez ’05 gave birth to her son, Henry Theodore, on September 20, at 8 lbs., 9 oz., and 22 inches long.

Sayaka Ogata ’06 had her article “Making Nurse Practitioners Legal in Japan” accepted for a poster presentation at the 6th International Nurse Practitioner/Advanced Practice Nursing Network Conference to be held in Brisbane, Australia, in September 2010. Sayaka is dedicated to helping Japan’s movement to expand the role of nursing and establish the nurse practitioner profession.

Amanda Swan ’06 published the article “Acute HIV Infection in Primary Care: Don’t Miss the Signs and Symptoms” in the journal Advance for Nurse Practitioners.

Lisa Tangedri ’06 is serving in Afghanistan as a Navy nurse. Lisa currently works in Kandahar at a Role 3 multinational hospital, which she calls “a shack with limited resources and capabilities,” alongside personnel from several countries. So far, Lisa has worked as an RN in the ICU and trauma team, taking care of coalition soldiers, local nationals, and detainees. She has also worked in the primary care tent with two nurse practitioners to keep up her NP skills and license. Lisa was inspired to join because of the mentoring she received from a retired Navy Nurse Corps Captain at Yale-New Haven Hospital.

Emily (Schlechte) Croce ’07 had a busy and exciting 2009. In March, she received the 2008 Journal of Pediatric Health Care Leah Harrison Award for Excellence in Clinical Writing for the article “Supraventricular Tachycardia in the Pediatric Primary Care Setting;” co-authored by Nicole Boramanand ’99 and Marjorie Funk ’84. Emily married Steve Croce in May; with Sandra Sterling ’07 as her maid of honor. In August, she became president of the Central Texas Alliance of Pediatric Nurse Practitioners, and in November, she started a new job in pediatric dermatology that is a blend of clinical and academic work.

Jessica Densmore ’07 gave birth to baby girl Burke Indigo Donovan on September 13.

Tina Renneisen ’08 loves her new job at the Yakima (WA) Valley Farm Workers Clinic, providing therapy and medication management to the families of migrant farm workers and other underserved populations.

Since graduating in May, Bridget Cota ’09 has moved to Pacific Palisades, California, and is working as a pediatric nurse practitioner at St. John’s Well Child & Family Center in Los Angeles.

Regina Longinotti ’09 and Taylor Dansby welcomed Isla Grace Dansby to the world on June 20.

Dear YSN Alumna/us:

As a member of the YSN Alumnae/i Association Board of Directors, I am excited to have the opportunity to meet more YSN alums who live in my community, Portland, Oregon. Our alums are spread throughout the country, and not everyone can make it back to New Haven to reconnect. Several of us on the Board decided to open our homes to fellow alums this spring in cities across the US.

In the nursing field, we have so much to discuss that impacts our profession on a state-by-state basis. These casual receptions will give us a chance to network professionally and discuss challenges and opportunities particular to our communities. YSN alums’ careers are so varied and full of leadership in research, clinical practice, and policy, these gatherings are sure to be fun and stimulating.

Please join us in our homes and meet fellow alums for hors d’oeuvres and drinks!

— Erin Shawn, FNP ’03

To find a YSN reception in your area, go to nursing.yale.edu/Alum/Board/board_news.html

For more information and to RSVP, contact Elizabeth Roscher at 203.737.2137 or elizabeth.roscher@yale.edu.
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Deadline June 30, 2010
Linda Foxworthy ’82 (second from right) walks with local health promoters into the village of Panamaquip, Guatemala.

Full story on page 25.