

+ ANESTHESIA EXPERTS FOR RURAL HOSPITALS  
+ SELF-COMPASSION IMPROVES WELLNESS

# Duke Nursing

magazine

Summer  
2011  
Volume 7, No. 2



# PUSHING THE BOUNDARIES

Students and faculty forge partnerships in Africa

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**PUSHING THE BOUNDARIES**



Alumni and Friends,

We look toward the future as we prepare the next generation of nurse leaders. Our future work focuses on improving patient care outcomes, reducing disparities in health care, and meeting the health care demands of diverse populations. In order to succeed, the Duke University School of Nursing must push existing boundaries – limitations posed by tradition, culture, history, limited knowledge, and inertia.

In Africa, Duke students and faculty members are finding creative solutions to complex problems. By enabling nurses to move into expanded roles modeled upon the successful nurse practitioners in the U.S., they are challenging the traditional boundaries. As more Duke nursing students complete their clinical practice experiences in Tanzania, these nurse practitioner students are addressing the physician shortage by bringing new care models, thereby extending care to patients in need. Duke students, in turn, are learning how to overcome the care delivery challenges associated with limited resources and cultural differences. When they return to their studies at Duke, these students are better problem-solvers, a skill that will serve them well in their professional future.

Here at home, our faculty members are using innovative approaches to reach and teach nurses who cannot relocate to Durham to continue their education. Our nurse anesthesia specialty is now providing courses and faculty expertise

to nurses in rural North Carolina who are unable to leave their hometowns to pursue a Duke MSN. These nurses remain in their rural hospitals and clinics, where they are needed, and where they will ultimately provide highly-specialized nurse anesthetist care to underserved populations.

At the bench and at the bedside, faculty and students are conducting research that crosses the lines of traditional thinking. They are digging deeper to understand why patients do not adhere to medication regimens. They are looking beyond the losses individuals experience in caring for loved ones with dementia, to help caregivers capture and build upon positive moments and experiences. They are finding ways to improve elder care by examining the complex relationships among staff members, patients, and families that can hinder positive health outcomes in the transition from patient care in nursing homes to self-care at home.

As we push the boundaries and move into the future, Duke University School of Nursing's reputation is growing in stature, nationally and globally. We are known for our ability to innovate and work across disciplinary boundaries. We are creating the future. We are leading!

Catherine Lynch Gilliss, BSN'71, DNSc, RN, FAAN  
Dean and Helene Fuld Health Trust Professor of Nursing  
Vice Chancellor for Nursing Affairs

# faculty appointments



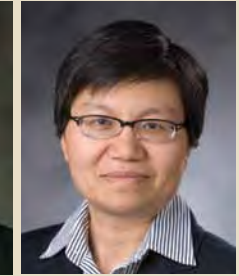
Anne Derouin



Shelly S. Eisbach



W. Michael Scott



Bei Wu

## New SON Faculty Appointments

**Anne Derouin, DNP'10, MSN'00, RN, CPNP** is an assistant professor teaching in the Accelerated Bachelor of Science in Nursing and Master of Science in Nursing degree programs. She has more than 25 years of experience in pediatric nursing and has strong ties to the Duke and Durham communities. She has been a clinical instructor at the School of Nursing for many years. For the past 12 years Derouin has provided primary care to adolescents through the school-based health centers at the North Carolina School of Science and Math, Southern High School, and Holton Community Resource Center in Durham, all affiliated with the Duke Department of Community and Family Medicine. Derouin serves as an adolescent clinical expert for the National Association of Pediatric Nurse Practitioners and is an advocacy fellow for the National Assembly of School-based Health Centers. She is vice president for the North Carolina School Community Health Alliance.

### **Education**

BSN University of Michigan  
MSN, DNP Duke University  
School of Nursing

**Shelly S. Eisbach, PhD, RN,** is an assistant professor teaching in the Doctor of Nursing Practice and Accelerated Bachelor of Science in Nursing degree programs. She came to Duke from Johns Hopkins University School of Nursing, where she was the Morton and Jane Blaustein Post-Doctoral Fellow in Psychiatric Nursing. At Hopkins she assisted Dr. Deborah Gross in conducting clinical research on treatment interventions for families of preschoolers with severe disruptive behavior disorders. She also examined the relationship between salivary cortisol and alpha amylase levels and stress among parent-child pairs receiving intensive outpatient psychiatric treatment at Hopkins.

### **Education**

BA, BSN Mount Mercy College,  
Cedar Rapids, Iowa  
PhD, MSN University of Iowa,  
College of Nursing

**W. Michael Scott, DNP, FNP-BC,** is an assistant professor teaching in the Master of Science in Nursing degree program. Since 2006 he has been director of clinics at Duke University School of Nursing, helping to design and implement clinic infrastructure to showcase the role of the nurse practitioner and overseeing the work of Duke nurse practitioners at Duke University Health System clinics. Scott has two decades of experience as a family nurse practitioner and is known for his work in rural health outreach in South Carolina. He served as an evaluator for the Commission on Collegiate Education in Washington, D.C., and subsequently was elected to the Board of Commissioners representing practice and served a two-year term as vice chair. Scott is a recipient of the American Academy of Nurse Practitioner State Award for Excellence for North Carolina in 2010, and he has been recognized as a distinguished alumnus of the College of Health and Human Sciences of Georgia Southern University.

### **Education**

BA Armstrong State College,  
Georgia  
DNP, MSN, BSN Georgia Southern  
University



Barbara S. Turner

## Turner Named Elizabeth P. Hanes Professor of Nursing

Barbara S. Turner, DNSc, RN, FAAN, Duke University School of Nursing professor and chair of the Doctor of Nursing Practice (DNP) Program, has been named Elizabeth P. Hanes Professor of Nursing, effective July 1, 2011.

Being selected for a distinguished professor is the highest honor that Duke University awards to its faculty members.

This professorship is named in honor of Elizabeth Peck Hanes, whose philanthropy, along with that of her husband, Frederic M. Hanes, MD, chair of the Department of Medicine from 1933 to 1946. Dr. Hanes provided funding for Hanes House, the original home of the School of Nursing and a dormitory for nursing students.

“Dr. Turner was the first associate dean and the original director of the research center for our school and hospital, and she is a trusted and visionary builder,” said **Dean Catherine Gilliss, BSN’71, DNSc, RN, FAAN.** “As the first program director for the DNP program, she crafted the proposal and led its approval process. But, this distinguished professorship recognizes her distinctive contributions to nursing science

in the care of newborns.”

Turner’s research focuses on the effect of nursing intervention on critically-ill newborns, including exogenous surfactant administration, endotracheal suctioning, high frequency ventilators, and airway management. She has published widely in journals, books, monographs, and computer-assisted instruction, and serves as a Section Editor in the journal *Heart & Lung*. She is active professionally in the American Academy of Nursing, American Nurses Association, North Carolina Nurses Association, and Sigma Theta Tau.

Dr. Turner earned graduate degrees in hospital administration and perinatal nursing prior to receiving a doctorate from the University of California at San Francisco. Following her retirement from the U.S. Army Nurse Corps, she established the Center for Nursing Research at Duke and held the position of associate dean of research for thirteen years. She has served as chair of the Doctor of Nursing Practice Program at Duke since its inception in 2008.

**Bei Wu, PhD**, is a professor of nursing and a member of the faculty of the Duke Center for the Study of Aging and Human Development and the Duke Global Health Institute. At Duke she will advance the international research portfolio, especially in China. She also holds adjunct professor and senior fellow positions at three academic institutions in China. Wu is a fellow of the Gerontological Society of America and the Association for Gerontology in Higher Education. She is the principal investigator for four National Institutes of Health-funded research projects focusing on cognitive function, depression, and oral health. Wu comes to Duke from the University of North Carolina at Greensboro, where she was an associate professor in the gerontology program. She also served as an adjunct clinical associate professor at the School of Dentistry of West Virginia University and held an adjunct faculty appointment at the School of Dentistry of the University of North Carolina at Chapel Hill.

### Education

BA Shanghai University, China  
MS, PhD University of  
Massachusetts-Boston

## TRANSFORMING NURSING EDUCATION

INSTITUTE FOR EDUCATIONAL EXCELLENCE  
AT DUKE UNIVERSITY SCHOOL OF NURSING

### Noted Educator Ken Bain to Speak at Transforming Education Conference



Ken Bain, PhD, award-winning educator and author of the international best seller, *What the Best College Teachers Do*, will give the keynote address at the second annual national conference on Transforming Nursing Education, hosted by the Institute for Educational Excellence at Duke University School of Nursing on October 21-22, 2011.

Bain is the vice provost for university learning and teaching, director of the Research Academy for University Learning, and professor of history at Montclair University in New Jersey. He is the founder of teaching and learning centers at New York University, Northwestern University, Vanderbilt University, and Montclair University.

FOR INFORMATION AND TO REGISTER, CONTACT CHARLENE DELOATCH  
AT (919)684-9289 OR CHARLENE.DELOATCH@DUKE.EDU

## HRSA Funds Scholarships for Nurse Practitioner Students

As part of an effort to grow the primary care provider workforce, Duke University School of Nursing has received a \$1.27 million grant from the U.S. Health Resources and Services Administration (HRSA). The five-year project at Duke will provide scholarships to nursing students in the full- and part-time Adult Nurse Practitioner (ANP) and Family Nurse Practitioner (FNP) master's degree programs.

Over the next few years, as health care reform becomes law, about 32 million Americans will suddenly gain health insurance. Nurse-managed clinics, staffed by nurse practitioners, will play a larger role in primary care, due to a shortage of primary care physicians and health care reform's increasingly team-based approach to patient care.

"Master's prepared ANPs and FNPs are equipped to serve as health care leaders, interprofessional consultants, and patient advocates" said Queen Utley-Smith, EdD, RN, chair of the Master of Science in Nursing degree program. "They have both the teaching skills and the clinical knowledge critical to improving patient health outcomes. This grant provides a wonderful opportunity for our students and will result in a greater number of expert clinicians in the primary care work force."

As of June 9, 2011, the phone number for the office of Duke Nursing Development and Alumni Affairs will change to **919-385-3100**.

Please use this number to reach any of the following offices:

- Duke University School of Nursing Development & Alumni Affairs
- Duke Cancer Institute Development
- Duke Children's Development
- Duke Medical Alumni Affairs
- Duke Medicine Development

Don't Lose Touch  
with Your Friends at Duke!



## Reuter-Rice Inducted as Critical Care Fellow

Karin Reuter-Rice, PhD, RN, CPNP-AC/PC, has been inducted as a Fellow of the American College of Critical Care Medicine (ACCM).

Reuter-Rice is faculty coordinator for the Neonatal and Pediatric Instructional Area and lead faculty member in the Pediatric Acute and Chronic Care Nurse Practitioner master's degree specialty. She holds a secondary appointment as assistant professor, Duke University School of Medicine Department of Pediatrics.



## Bailey Presents National Oncology Lecture

Donald E. "Chip" Bailey Jr., PhD, RN, presented the State-of-the-Science Lecture, "Illness Uncertainty in Adult Cancer Patients," in February during the Oncology Nursing Society 11th National Conference on Cancer Nursing Research.

"New discoveries are critical to improving patient and family outcomes," said Bailey. "The findings presented today represent one step in that process, and I hope they will lead to new interventions being translated into practice."

Bailey is an associate professor at Duke University School of Nursing, a fellow in the Duke Center for the Study of Aging and Human Development, and a John A. Hartford Foundation Claire M. Fagin Fellow. His research has been funded by the National Institute of Nursing Research and currently focuses on patients with prostate cancer and hepatitis C who elect watchful waiting as treatment for their disease.

## U.S. News Ranks Duke 7th in Graduate Nursing Schools

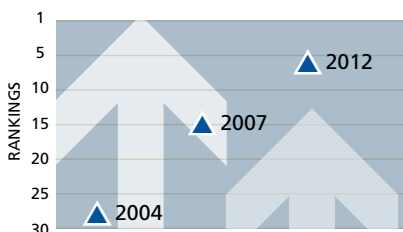
For the first time in its history, Duke University School of Nursing has broken into the ranks of the top 10 schools of nursing, ranking seventh nationally for 2012 according to *U.S. News & World Report*.

Duke's rise has been nothing short of meteoric, at 15th the last time nursing schools were ranked in 2007, and at 29th in 2004.

Specialized programs within the Master of Science in Nursing degree program were also ranked. Duke's pediatric nursing program ranked fifth, the adult nurse practitioner program ranked 10th, the gerontology program ranked 10th, and the anesthesiology program ranked 11th.

"Our *U.S. News & World Report* rankings reflect the esteem our peer institutions have for the high quality of our work," said **Dean Catherine L. Gilliss, BSN'71, DNSc, RN, FAAN**. "Over the last decade, we have assumed a national and international leadership position in the field of nursing. The accomplishments of our faculty and students are distinctive."

For the 2010 fiscal year, faculty members received \$3.8 million in training grants and \$4.4 million in research grants. The school has more than 730 students currently enrolled in one of four degree programs, including the Accelerated Bachelor of Science in Nursing (ABSN), Master of Science in Nursing (MSN), Doctor of Nursing Practice (DNP), and Doctor of Philosophy (PhD). Many programs are now available online and are meeting the needs of students in remote geographic locations in the U.S. and in sites around the world.



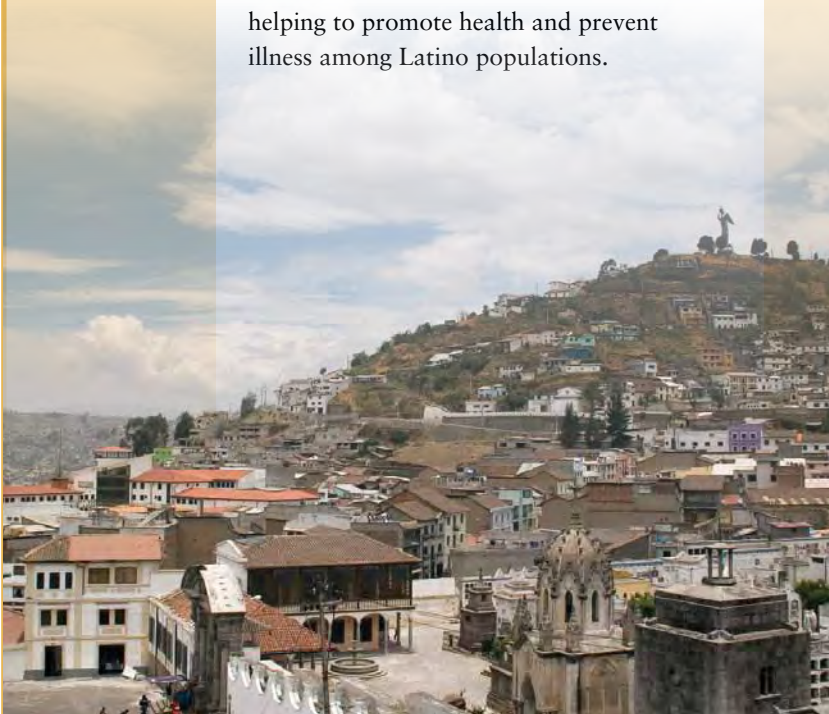
## Denman Wins Fulbright for Research in Ecuador

Susan Denman, PhD, RN, FNP-BC, has been awarded a Fulbright grant to help integrate evidence-based nursing principles into education and practice at the Universidad de las Americas (UDLA) School of Nursing in Quito, Ecuador.

In partnership with UDLA, Denman will help enhance the understanding and application of evidence-based principles at nursing schools in Quito, Cuenca, and Guayaquil. "We will also help nursing faculty, students, and clinicians develop research projects and presentations related to evidence-based practice," she said.

The Fulbright Program awards research and teaching grants to American faculty members and professors to conduct research, lecture, and consult with scholars and institutions in other countries. Funding is appropriated annually by the U.S. Congress and, in many cases, by contributions from partner countries and/or the private sector.

Denman has spent much of her career helping to promote health and prevent illness among Latino populations.



## Bowers Receives Associate Status in American College of Cardiology

**Margaret T. “Midge” Bowers, MSN’90, RN, FNP-BC**, has been selected for advancement to Associate of the American College of Cardiology (AACC), the highest recognition for nursing professionals in the AACC.

Bowers, who joined Duke University School of Nursing in 1998, is an assistant professor and co-coordinator of the Family Nurse Practitioner program. She has more than 30 years of experience in cardiac patient care and holds a secondary appointment in the Duke University School of Medicine, Department of Medicine, as a nurse practitioner in cardio-vascular medicine.

Bowers’ clinical practice focuses on congestive heart failure. She is principal investigator on a Duke Translational Nursing Institute-funded grant for the WEIGH-IN Study, which aims to understand the

relationship between daily weight and early symptom recognition among heart failure patients, as well as to evaluate how social support, adherence to medication and weight monitoring regimens, and patients’ ability to perceive symptoms impact hospital readmissions and mortality.



## Student Enrollment Sets Record

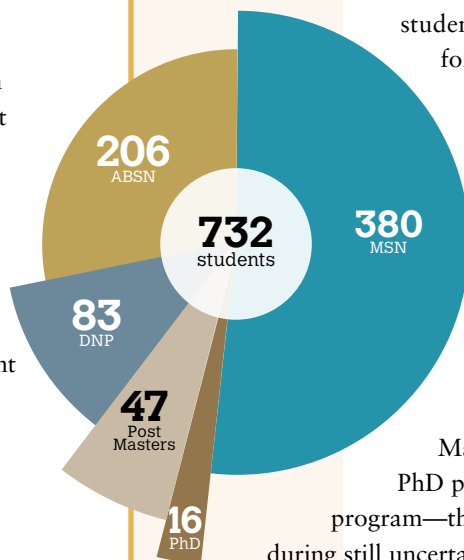
More than 700 individuals were enrolled as students for this past spring semester at Duke University School of Nursing, a record number in the school’s 80-year history.

Kristi Rodriguez, assistant dean of admissions and student services, said this marks the third straight year for record-setting enrollment.

“Our growth reflects not only the increasing demand for highly-skilled nursing professionals but also our growing reputation as a national leader in educating the next generation of health-care leaders in nursing,” she said.

Dori Taylor Sullivan, PhD, RN, NE-BC, CPHQ, FAAN, associate dean for academic affairs, emphasized that now that all four degree programs are up and running— Accelerated Bachelor of Science in Nursing (ABSN) program; Master of Science in Nursing (MSN) program; the PhD program; and Doctor of Nursing Practice (DNP) program—the school is emphasizing “controlled growth” during still uncertain economic times.

This year 380 students are enrolled in the MSN program. In addition, 47 are working toward a post-master’s certificate. Sixteen are part of the PhD program, and 83 are enrolled in the DNP program. The ABSN program, a bachelor of science in nursing degree for students who have previously completed an undergraduate degree, enrolled 206, bringing the student body total to 732.



Duke University School of Nursing ABSN students Stesha Selsky and Jeffrey Riorden study together at one of the new desks recently installed on the second-floor common area at the school.



## Distance Education for CRNAs Aims to Help Rural Hospitals

Duke University School of Nursing has received a \$646,514 federal grant to provide distance-based education for rural nurses who want to become certified registered nurse anesthetists (CRNAs).

Charles Vacchiano PhD, CRNA, is the author and project director for this Rural CRNA Initiative grant, the first of its kind in North Carolina. Two students enrolled in the program in January 2011 through partnerships with Southeastern Regional Medical Center in Lumberton, N.C., and Carolina East Medical Center in New Bern, N.C.



The new program is one of many funded nationwide by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) aimed at relieving a critical shortage of CRNAs,

who provide 80 percent of anesthesia care in rural hospitals. According to CRNA Program director, **Sharon Hawks, DNP<sup>10</sup>, MSN, CRNA**, the grants will help address a longstanding problem for rural hospitals, which serve as clinical training sites for Duke CRNA students but are not successful in recruiting them to work in a rural setting.

“Students already living in a community have an incentive to stay there,” says Hawks. “The distance-education students will acquire synchronous didactic education through the use of video conferencing. Distance students will receive the majority of their clinical education at the partner hospital located in their hometown community. Students will rotate to clinical sites outside of the community for clinical experiences not offered by the community hospital partner. In addition, distance students will also complete a rotation to Duke Hospital and Durham Regional Hospital, which both provide students with an opportunity to experience greater patient acuity, trauma, advanced technology, and collaboration with other disciplines.”

Nurse anesthesia faculty work closely with clinical preceptors at the distance sites to coordinate and monitor each student’s progress. The 60-credit-hour program requires 28 months for completion and awards the master of science in nursing with specialization in nurse anesthesia degree.

### DUSON to Host National Technology Conference

The National League for Nursing will hold its sixth annual technology conference at **Duke University School of Nursing on November 4-6, 2011.**

For information and to register, visit [www.nln.org/facultydevelopment/conferences/technology/index.htm](http://www.nln.org/facultydevelopment/conferences/technology/index.htm)

**November 4-6, 2011**



Brendan Doering dons a pair of scrubs and tours the Center for Nursing Discovery lab with his mother, ABSN student Sara Doering.



Charles and Kaleb Williams enjoy the ABSN Family Day Luncheon. Left, Camden Weber is all smiles in his "Future Nurse" cap.



## First Annual ABSN Family Day is Huge Success

More than 275 Accelerated BSN students and their families attended the first annual ABSN Family Day in March. Michael Relf, PhD, RN, FAAN, presented a lecture on nursing care in adult cardiac disorders; Margie Molloy, RN, MSN, and her staff gave presentations in the Center for Nursing Discovery lab; Sharon Hawks, DNP'10, MSN, CRNA, and CRNA students ran a mock anesthesia operating room; Helen Gordon, RN, CNM, MS, demonstrated Mind Maps, a new teaching technique; and health-related activities were offered to children of all ages.



Kristi Rodriguez, MEd, assistant dean of admissions and student services, paints the face of Gracie Myers Chalfant while her aunt, Chris Chalfant, looks on.



Above, Caroline Criswell, CRNA student, provides a hands-on demonstration to Guy Spillers in the mock anesthesia operating room. Left, ABSN student Guy Spillers and his family – wife Brandy and daughters Cambria and Maia – participate in all the kid-friendly activities.

## First PhD Graduates Value Collaboration at Duke

The Duke University School of Nursing awarded its first-ever PhD degrees during May graduation to two students who said the deep collaboration they had with departments across the university campus was something they greatly valued and was key to their success.

“I talked with people from medicine, psychiatry, social work, and philosophy about my research interests—as well as nursing,” said **Bomin Shim, PhD’11**, who researched positive relationships between caregivers and dementia patients. “I never expected that. They all were so open with their ideas, and it really broadened my views.”

**Mark P. Toles, PhD’11**, who researched how nursing homes can improve the level of transitional care when post-acute care patients return home after short-term stays, said the members of his multi-departmental dissertation committee “were a brilliant team who guided my research through each phase of the study.”

He likes Duke so much, in fact, that he’s staying to continue his transitional care research in a post-doctoral fellowship with Ruth A. Anderson, PhD, RN, FAAN, the Virginia Stone Professor of Nursing and a senior fellow in the Duke Center for the Study of Aging and Human Development.

Anderson said that from what she has found in existing literature, Toles is the first researcher to examine the quality of transitional care that nursing homes give to short-term patients.

Toles said about two million older adults each year spend two-to-three weeks at a nursing home for post-acute care, then return home where they are not prepared for changes in how to maintain their health.

“Nursing homes typically provide long-term care and lack expertise in transitional care,” he said. “I found that older adults suffer a lot when they return home, from problems that are easy to fix, like taking pain medication thinking it was a sleeping pill. The research is about helping older adults organize the complex education and follow-up arrangements needed for self-care at home.”

Multi-disciplinary teams are often in place in nursing homes, Toles said, and these include rehabilitation therapists, social workers, nurses, and more. “We need to understand the way staff members, patients, and families interact so we can improve efforts to prepare patients to return home.”

Says Anderson: “His work is significant because he really has begun to describe the problems and processes. His next study will look at multiple facilities, and then he’ll be able to develop approaches and interventions.”

Shim’s research focused on caregivers who found deep

satisfaction or meaning in caring for their spouses who have dementia. Most dementia caregiver studies tend to document the difficulties they face and the negative effects it can have on their own health. But Shim wanted to know the secrets to a positive relationship during caregiving, which she said results in better outcomes for both the caregiver and the person with dementia.

Her advisor, Linda L. Davis, PhD, RN, ANP, DP-NAP, FAAN, chair of the PhD Program and the Ann Henshaw Gardiner Professor of Nursing, said Shims’ research “is significant because, too often, research is focused on what people have lost, but her



Mark P. Toles, PhD’11, and Bomin Shim, PhD’11 received PhDs from Duke University School of Nursing on May 15th.

work is about what people have found.”

All of the 11 caregivers that Shim researched were Christians. Not all had strong religious beliefs, but, “they all had strong altruistic values and were living those values. Their values came not only from religious beliefs but from their family upbringing and the careers they had chosen, such as the military, where they valued caring for their fellow man.”

Davis said Shim’s research showed that “for many it was in the caregiving that they were able to find greater meaning.”

Caregiver support group leaders have asked Shim to compile a booklet of inspiring stories and tips for positive care giving experiences that they can share with other caregivers. First, Shim says, she’s raising her 6-month-old daughter and hopes to begin teaching nursing this fall at a university. She lives in Shoreline, Washington near Seattle. Her husband Cheoljin Kim is a radiation oncologist in South Korea.

Toles’ wife Tori is a psychiatric nurse at UNC Hospitals. They have a 13-year-old daughter and live in Chapel Hill.

– JIM ROGALSKI

# into AFRICA

SCHOOL OF  
NURSING FORGES  
PARTNERSHIPS  
FOR CHANGE



Rebecca Carson

BY JIM ROGALSKI

The younger ones are told about the *askari*—the little soldiers in their bodies that fight sickness—and the *wadudu*—the bugs that want to destroy them. That’s why it’s important to take your medicine every day, the doctors and nurses tell them: So your *askari* stay strong and the *wadudu* go to sleep.

The boy in front of **Rebecca Carson, PNP’10**, was older, perhaps 16. For him, the medical team at Kilimanjaro Christian Medical Center (KCMC) in Moshi, Tanzania spoke more plainly: You have HIV, they said.

He sat stoically with his father by his side. The boy understood the wicked truth of what he was told because he sees every day how HIV/AIDS is ravaging the people of Africa. Every day since his mother died when he was 2, the boy has taken medicine at the insistence of his father. That day he learned why.

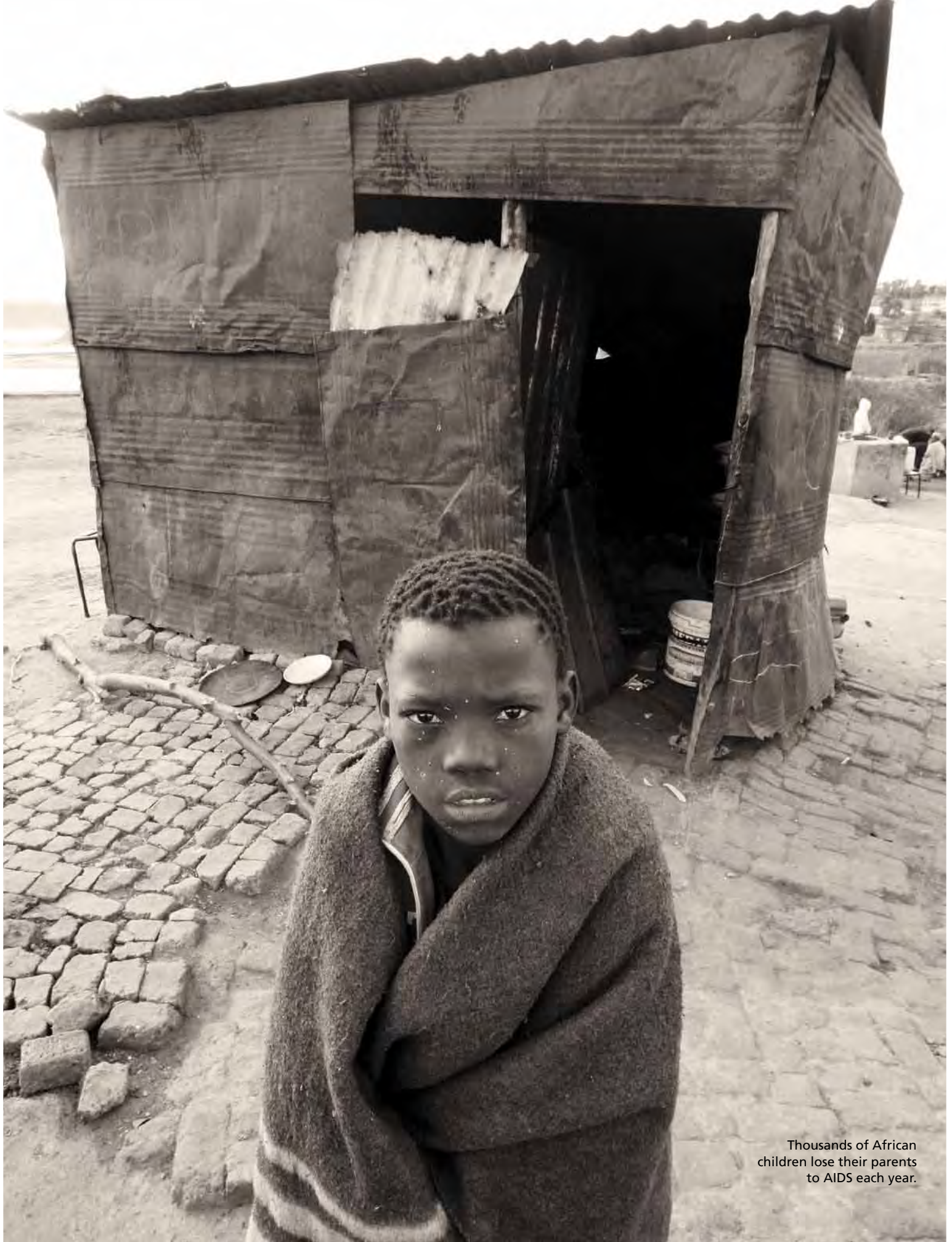
“He was so somber,” Carson recalls. “He was keeping a straight face but tears were pouring down his cheeks. To him it was a death sentence.”

For Carson, it was among the most emotionally difficult conversations she’d had with a patient. She comforted the boy and assured him that he can still fulfill his dream of becoming a pilot and achieve anything he wants to in life if he just remembers to take his anti-retroviral medicine every day.

The boy simply said he wanted to go home.

#### MUTUAL BENEFITS

Like the dozens of Duke nursing students who each year participate in two- to six-week service, education, and research programs in developing countries around the world, Carson found personal and professional nourishment from her six-week pediatric nurse practitioner clinical work in Tanzania. She



Thousands of African children lose their parents to AIDS each year.



Duke University School of Nursing's global health mission is to address health disparities and care for the sick both locally and abroad.

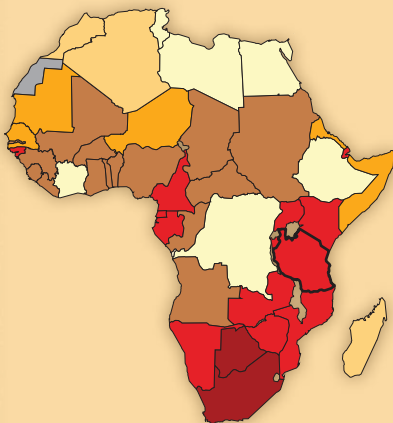
**26** Number of students who have gone to Africa for clinical work and teaching to fulfill degree requirements.

**42.7** million people live in Tanzania

**1.4** million live with AIDS/HIV, **5.6** percent of the population

**1.3** million orphans have been created due to AIDS/HIV in Tanzania

## HIV estimated prevalence in Africa



attended rounds in the KCMC pediatric ward, treated infants and counseled parents in a well-baby clinic, and provided primary and palliative care in the KCMC pediatric outpatient department. She treated patients with conditions she would rarely, if ever, see in the U.S., such as congenital hypothyroidism, rheumatic heart disease, rabies, malaria, and tuberculosis.

“I am much more aware of the strain that disease and chronic illness can have on a family,” she said. “It has given me a much bigger heart for the disenfranchised.”

In Africa, the disenfranchised are many, the health care needs are staggering, and the opportunities to provide care, counseling, and education are infinite. This is why the school of nursing is passionately forging new partnerships with hospitals, clinics, and nursing schools around the continent. The school's global health mission is to address health disparities and care for the sick both locally and abroad, and in the process, give nursing students valuable experience by enhancing their diagnostic and problem-solving skills and challenging them to find creative solutions to simple and complex health care problems.

“To be a global citizen is very important,” said Dorothy Powell, EdD, RN, FAAN, the associate dean for Global and Community Health Initiatives at the school of nursing, who seeks out and secures distance-learning opportunities for nursing students. “Our students need to be able to offer their services to anybody, and that means they have to have opportunities to serve people who are different than they are. They become adaptable to new situations and are able to have impact in a meaningful way.”

This kind of cultural immersion is translatable to anywhere Duke nursing graduates go, Powell said, whether it's a rural clinic in Mississippi, a hospital in a major city, or a country with scant resources and a vastly different culture and traditions.

In addition to KCMC and its numerous

regional clinics and nursing school, the school has established partnerships, or is in the process of developing them, with Marangu Lutheran Hospital, Kilema Hospital, Machame Hospital, and Muhimbili University.

And this August, the school begins a promising new alliance with the humanitarian project Teamwork Ministries City of Hope, a self-sustaining 50-acre children's campus located in the remote village of Ntagatcha in western Tanzania. It includes a 300-bed orphanage for children whose parents have been lost to HIV/AIDS, a medical center, schools, a farm, and a skills training center. The mission of City of Hope is to give its children just that—hope in the desperate world surrounding them—and to provide education and work skills training that will help shape them into community leaders.

Ten Duke students in the Accelerated Bachelor of Science in Nursing (ABSN) degree program will have a two-week experience at City of Hope shaped around health promotion, disease prevention, and screening services. The plan, which Powell designed, also has the students conducting an environmental assessment and compiling a health promotion guide to assist providers there.

For City of Hope leaders, Duke's commitment is a God-send.

“There is much we can learn from Duke that will help us better serve the people in the community,” said John N. Chacha, D.Min, a native of Tanzania who is the founder and executive director of Teamwork Ministries International based in Martinsville, Va., which launched the project. “And there will be immediate benefits with Duke helping to provide care.”

Chacha hopes the Duke nursing students experience personal growth and see the possibilities for bringing hope and inspiration to the people of Africa.

“I hope it encourages them to get involved in fighting poverty and the health issues that accompany poverty,” he said.

Powell first made contact with Chacha through Duke nursing alum **Ashley Joyner Hase, BSN'82**, and her husband **Steve, T'82**, who are on the board of directors of City of Hope. The Hases have given \$50,000 to the School of Nursing's Office of Global and Community Health Initiatives to provide travel stipends to nursing students for overseas placement in impoverished communities like Ntagatcha.

"We want to help facilitate the attitude that there is hope and there can be transformation, even in settings of great poverty and despair," Ashley Hase said. "And we also want to provide for students to be in settings to improve their nursing skills while contributing to patient care."

For her Tanzania trip, Carson received a Hase International Travel Scholarship. She said she is grateful to the Hases for helping to make the trip possible.

Powell's efforts to broaden the school of nursing's push into Africa—and especially Tanzania—is aided by the long history Duke Medicine has in Tanzania, through noted Duke AIDS researcher John A. Bartlett, MD, and other researchers, students and faculty who spend time at KCMC and other hospitals in Moshi. The Duke Global Health Institute established a presence there when it launched five years ago.

"The Duke name is well known in Moshi," Carson said, "because they do so much for the hospitals and the people. For me it was a sense of pride that I could tell people where I was from. Duke should be very proud of what they are doing there."

#### MAKING PROGRESS WITH HIV/AIDS

Marangu Hospital in Moshi is a small, 45-bed facility that serves a population of

more than 200,000. It has three doctors, 14 nurses, around 30 support staff, and a steady flow of patients who come to receive anti-retroviral medications or be screened for HIV/AIDS.

This is where **Anisha Jones, ABSN'11**, met a family of three whose story touched her in a way she didn't expect by bringing into clear focus both the gravity and the optimism of the African situation.

She spent a two-week undergraduate clinical rotation at Marangu and Kilema hospitals performing HIV/AIDS screenings. One day at Marangu, an HIV-positive couple came in with their 8-month-old daughter, who they wanted tested yet again.

The couple spoke no English, but when they were told in Swahili that their child remained HIV-free, the joy on their

faces transcended language.

"They couldn't stop laughing and smiling," Jones said. "I was so glad that I could be a part of that moment."

More deeply, Jones took comfort in the case for its illustration of the positive strides being made in HIV/AIDS prevention and care.

"Most people might think that the baby would have been HIV positive," Jones said. "But just because the mother is positive doesn't mean her baby will be. If a pregnant woman tests positive for HIV she will receive treatment in an effort to prevent transmission to the baby. This is a huge change from how it used to be."

Her time in Tanzania "was the best experience I've had in my life, she said. "I got to see another culture and a health care environment without all of the amenities that we take for granted here, like gloves and hand sanitizer." In her

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"We want to help facilitate the attitude that there is hope and there can be transformation even in settings of great poverty and despair."

ASHLEY JOYNER HASE



Several ABSN students and faculty pose for a group shot last year during their two-week clinical experience in Tanzania.



Anisha Jones spent two weeks in Tanzania working in a community health clinic.

# Mostly, I remember the children

## LASTING THOUGHTS FROM MY TIME IN TANZANIA

BY REBECCA CARSON, PNP '10

After returning to the United States, my adventures in Tanzania become tinted pink by the rose-colored glasses of my memory. The frustrations of everyday life do not stand out in my mind and I more readily remember the beauty and joy of the community in which I lived. I forget about the constant power outages and the toilet that leaked into my living room and instead remember the blooming flowers, Mount Kilimanjaro peeking out of the clouds, and Tanzanians shouting “Karibu! Welcome!” to me in the streets.

Learning as a nurse practitioner student was difficult since the profession is not recognized in Tanzania. I straddled the balance between learning alongside the doctors and still connecting with the nurses, and what I learned was that communication is sparse between the disciplines. The nurses were frustrated when their concerns were not heard by the physicians, and the physicians did not utilize the nurses to their potential. I see so much potential for advancement of nurses and improved patient outcomes if they simply collaborated and communicated.

I was readily aware of the color of my skin. I was called a “mzungu,” or white person, in the streets. My skin color is associated with economic prosperity, and as I learned more and more Swahili, I realized that I was being beckoned to come into shops and spend my money. It did not matter to them that I was a broke graduate student from Duke. And in the hospital, my skin color was associated with Western medicine that can cure all maladies. But there is only so much that Western medicine can do if the families wait too long to seek medical attention. Sometimes there was nothing more to say than “pole,” I’m sorry, and plan for palliative care.

I plan to start my career in the United States, because I am aware that health care disparities exist in our own backyards, and I want to provide excellent care for the children in my community. Tanzania changed me in a way I could not have imagined—it opened my eyes and my heart to providing care for the entire family. Don’t just write a prescription; give the family food to nourish their bodies, too. Don’t just write a referral form; give them bus money to get there.

What will I take with me from Tanzania? After the red dirt has long been washed from my feet, and my sun-kissed cheeks have faded from being hidden indoors for the winter, I still remember the children. I remember their big heads sticking out of the tops of kangas (cloth wraps) on their mamas’ backs. I remember their big bellies and curious stares at my white skin. I remember feeling helpless in the face of limited resources and poor access to care. I remember how sick the children were and wished for folic acid, vaccines, and well child visits.

It will take a long time and a lot of resources to eliminate the health disparities that exist in Tanzania, but we must remember that health is not a privilege, it’s a human right.



**Top, Rebecca Carson plays with a boy at the Kilimanjaro Christian Medical Center in Moshi, Tanzania, where she spent six weeks in a pediatric nurse practitioner clinical experience. Bottom, Carson poses with an infant she cared for in a well-baby clinic.**



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current practice as a nurse in the Duke University Hospital neuroscience unit, “I don’t complain about the small stuff because I know there are people in much worse situations. Going to Tanzania really solidified that for me. It has given me a different outlook on life.”

#### TEACHING AFRICAN NURSES

The School of Nursing’s touch is not limited to Tanzania, but is being felt continent-wide, especially in the education and training of nurses.

Associate Professor and Assistant Dean of Undergraduate Education Michael V. Relf, PhD, RN, ACNS-BC, AACRN, CNE, FAAN, has led the effort for the continent’s widespread adoption of consistent training and core competencies to enable nurses to move into expanded roles similar to nurse practitioners in the U.S. That is especially important with respect to administering anti-retroviral drugs, which many nurses currently do without adequate training.

This task shifting of some duties away from physicians to nurses is greatly needed due to massive shortages of physicians, especially in rural areas, Relf said.

“Nurses are the largest part of the health care environment, and in some rural areas they are the only providers,” Relf said. “A physician might come by once a week or once a month, and many nurses are performing tasks they were not trained to do.”

In Africa, there currently is no role equivalent to a nurse practitioner, and gender stereotypes make it difficult for some to accept increased health care responsibilities for women. Carson noticed this on her first day there.

“I had a difficult time in my first couple of days there explaining that I needed to follow the doctors and not the nurses,” Carson said.

Initially working with colleagues at Georgetown University prior to coming to Duke in 2008, Relf was



Patients await treatment at a clinic at Kilimanjaro Christian Medical Center in Moshi, Tanzania.

the principal investigator for the core competencies project.

Shortly after arriving at Duke, Relf brought together 35 nurse leaders from sub-Saharan countries to address nursing needs around HIV/AIDS prevention and care. He took more than a dozen trips to Africa to facilitate meetings, gather evidence, and keep the process moving.

“It was amazing when we brought these nurses together how they very quickly found commonalities and shared best practices with each other. They were clearly focused on what they needed to do,” Relf said.

In 2010 the panel adopted a set of core competencies that also were endorsed by The Elizabeth Glaser Pediatric AIDS Foundation and the Association of Nurses in AIDS Care. They currently are being incorporated into nursing curriculums in multiple African countries.

On the student front, two Duke masters of science in nursing education students recently returned from Africa where they completed a four-week capstone teaching experience. **Jessamy R. Fisher, MSN’11**, taught the Harvard Referencing System and ethics in nursing to students in the KCMC bachelors of science in nursing degree program.

“Having the opportunity to jump in and teach nurses in a totally different environment gave me an opportunity to challenge myself and think differently. I had to think of creative ways to get information across in that environment. I can use that in my practice as a nurse educator.”

Fisher is an emergency department nurse at the University of California-Los Angeles Medical Center, where she acts as a preceptor. She wants to get more involved in staff development and clinical training and hasn’t ruled out teaching at a nursing school some day.

“Tanzania really broadened my perspective in terms of what nursing education is,” Fisher says. “I probably got more out of it than they did.”

#### A BEAUTIFUL PLACE

Three months after she returned from Tanzania, Carson sat at a desk in a common area at the school of nursing recounting her time in Africa. She remembered the vegetables being the most delicious she’d ever eaten, the parachichi (avocado), maembe (mangos), and mananasi (pineapple) the sweetest tasting fruit.

Day trips to remote waterfalls, a safari in the Serengeti National Park, shopping adventures to small villages, and the ever-present beauty of snow-peaked Mt. Kilimanjaro looming out the window of her simple bedroom are cherished memories.

“I am pretty sure we sang the entire soundtrack to *The Lion King* from start to finish,” she said of her eventful Serengeti safari.

These are things she remembers every time she puts on the large, round, silver earrings she was wearing that day, purchased from a female street vendor in the village of Arusha.

She touched an earring and was silent for a moment, perhaps thinking about the other side of being in Africa—the frequent power outages, the muddy streets and sidewalks after it rains, overcrowded clinics and wards with dozens of children looking up at her with their big brown eyes.

Or perhaps she was wondering what ever happened to that 16-year-old boy who just wanted to go home. ♦

# “Bad” Patients May Benefit from Greater *Self-Compassion*

People high in self-compassion accept their role in negative events without being overwhelmed or consumed by negative emotions.

by John M. Brion Jr.,  
PhD, RN, CHES

The angry young man was well known to the staff of the emergency department; he was what some referred to as a “frequent flyer.” His presenting symptom was always the same: extremely elevated blood sugar. This was frustrating for the staff of a busy emergency department with many critically ill patients. The young man’s illness was chronic, but controllable. His blood glucose levels could be stabilized, if only he would monitor them and take his insulin as prescribed. Despite frequent instructions about how and why he should follow his regimen, he refused to cooperate. He was a classic example of a non-compliant, “bad patient.”

More out of frustration than curiosity, one day I asked, “Why don’t you just take your insulin like you’re supposed to? You know that would keep you from having to come here so often.”

The young man responded angrily.

“I’m too young to have to take medicine all the time, and when I do take it just reminds me that I’m sick.”

Suddenly it all made sense: this young man was not being a “bad patient,” he was grieving. He had lost the image of himself as young, healthy, and immortal, and he was struggling to incorporate everything his illness—with its implications for his own wellbeing and necessary lifestyle changes—represented. At the very core of his grief was the sense of shame and self-blame that so often accompanies a patient’s early struggles with chronic illness.

Until staff began to approach this patient as someone coming from a place of grief and loss, rather than one of defiance, we could not help him. He needed to begin to deal with the feelings that kept him from owning his illness and adhering to his medical regimen.

The lesson learned from this patient stayed with me and served as

the impetus for research into grief, self-compassion, and medication adherence in collaboration with Mark Leary, PhD, professor of psychology and neuroscience at Duke, and others.

One obstacle to adherence may involve non-acceptance, anger, and the self-denigration that many patients experience after learning that they have a serious illness, particularly one for which they may feel some personal responsibility or one that is stigmatizing. Research has shown that feeling ashamed about a medical problem is associated with lower treatment adherence.

One study of highly adherent individuals indicated that acceptance of being HIV-infected was a crucial step in becoming adherent to HIV treatment regimens. Patients who initially struggled with adherence indicated that it was not until they had accepted and “owned” their illness that they were able to engage fully in treatment.

One psychological factor that may relate to improved adherence to health and medication regimens is self-compassion. A self-compassionate focus is characterized by showing caring and kindness toward oneself during difficult times, recognizing that difficult experiences are common in most people’s lives, and acknowledging negative life experiences without judgment.

Research shows that people high in self-compassion deal with negative life events more successfully than people who are low in self-compassion. Self-compassion predicts healthy emotional and cognitive reactions to both minor and major life events, lessens reactions to negative feedback, and buffers people against negative self-feelings in relation to distressing life events.

Self-compassion is associated with psychological well-being and bears a close resemblance to, but is not the same as neuroticism, self-esteem, depression, and coping styles. Self-compassion is not about self-indulgence or avoiding personal responsibility. People high in self-compassion accept their role



John Brion

in negative events without being overwhelmed or consumed by negative emotions.

Evidence about self-compassion suggests that it should be associated with adaptive responses in chronically ill populations. Virtually everyone initially responds to knowledge that they have a serious illness with strong negative emotions. If unchecked, these initial negative reactions foster denial, avoidance, and an unwillingness to face the problem. This leads to ineffective coping tactics that undermine treatment adherence.

People who approach their diagnosis with self-compassion are more likely to accept the problem, strive to treat themselves with concern and kindness, and maintain equanimity. Given that self-judgment and negative affect are associated with less self-care

among medical patients, a self-compassionate focus should promote more positive self views and adaptive responses, hopefully including treatment adherence.

Dr. Leary and I have created a 12-item instrument to measure self-compassion in a patient population. This instrument has been piloted in a population of people living with HIV. Preliminary data indicate that higher self-compassion is related to engagement in care, medication adherence, psychological well-being, and avoidance of harmful and unhealthy behaviors. These findings indicate that self-compassion may indeed play a pivotal role in an individual’s successful adaptation to living with HIV and possibly other chronic illnesses.

Future research will focus on developing and putting into practice interventions to increase self-compassion as a way to help patients successfully adapt to illness. ♦

*John Brion, PhD, RN, CHES, is an assistant professor teaching in the Accelerated Bachelor of Science in Nursing degree program and a nationally recognized expert in HIV and medication adherence, community-based health promotion, and psychosocial adaptation to chronic and terminal illness.*

## Family's Blog is Classroom Resource for Maternity Students

**B**en and Jessica Garvin of Minneapolis, Minn., have allowed students in the maternity course taught by Helen Gordon, MS, RN, CNM, assistant professor, to use their family's blog as a classroom resource for the past five years. Beginning with the birth of Arthur, now 5, and continuing with Lewis, now 3, and on through the birth of twins, Bailey and Netta, the Garvins have provided a real life window into their exhausting, hilarious, and ultimately rewarding family life.

"Our students don't have exposure to home visits and do not have the opportunity to understand how much a new baby impacts family life," says Gordon. "We read the blogs and have discussions in class about what we're seeing. It's a great way to make use of current technology and an easy way to provide a richer experience and



Jessica Garvin with twins Bailey and Netta

expand our classroom walls!"

The birth of the twins, Netta and Bailey, gave students in the Accelerated Bachelor of Science in Nursing degree program an invaluable perspective on how a family prepares for a birth, as well as planning in the hospital after the birth and before the family is discharged from the hospital. Gordon says it also helped her students understand why new parents are so fatigued and paved the way for a discussion of the dangers of postpartum depression.

A sample blog from Jennifer Garvin documents her demanding life with the new twins:

"I often tell people that the only way I keep my sunny disposition while caring for the twin babies AND the preschool age boys is with LOTS OF HELP," she writes. "I never refuse help..."



Ben Garvin with Arthur, Bailey, Netta, and Lewis



Jessica has her hands full!



Bailey is the "B" baby because she was in the B position in utero, and was born breech and slightly larger than Netta.

"Today was going to be a sob story post about how all I did was nurse and nurse and nurse and nurse, but in retrospect I did a lot more than I thought. I managed to get two loads of laundry put away. I made a batch of chocolate chip cookies and a nice glazed pork chop dinner with roasted squash. I emptied the dishwasher. I loaded the dishwasher. I washed the diaper covers. I set up the boys for painting and put away yesterday's awesome train track..."

"I shed a few tears when the girls woke up only ten minutes into their nap for the third time, but Netta got herself back down and I nursed Bailey back to sleep long enough to get 10 minutes of shut eye myself. So, all in all, not a bad day for this stay-at-home mom."

Gordon keeps a collage of blog photos on her office door and says faculty and students enjoy following the blog and watching the babies grow long after the maternity class is over.

*Photographs by Ben Garvin*

# Duke Nursing Alumni Association 2011 Awards

## *Linda Mayne Markee, BSN'63* Humanitarian



Linda Mayne Markee, retired, has dedicated the last 18 years to helping rural, underserved communities in Haiti. She and her husband, **Joseph E. Markee, MD'65**, founded the Christian organization Haiti Foundation of Hope in 2005. The foundation has a school system comprising 1,000 students and a medical clinic that serves 15,000 local residents in the Terre Blanche area.

### What role has the School of Nursing played in shaping your career?

I think the School of Nursing always had a commitment to excellence. We don't do anything just half way, and there's an emphasis on the completion of work. I've seen a lot of people come to Haiti, and they'll work for a short period of time or work on one project only. But they don't go very far. I think that with Duke, we also looked at the whole patient. If I'm just going to be down there for a week, I can only treat the acute problem, but when you commit to excellence, it's a bigger vision.

I'm just thankful that I'm an example of how the nursing education can sometimes be used in different ways, in ways I

never would have dreamed of when I was at Duke. I had no vision of international nursing or of international work. It was just a different time.

### What accomplishments are you most proud of?

Haiti Foundation of Hope. I'm very proud of the Haitian leadership and the community health workers. I think about how when we started the clinic in 2007; nobody working there had worked in a clinic before, except the nurse. There's all the dynamics of working in a clinic, down to keeping the patient charts and organizing them. Just to see the progress that they have made and how they treat the patients. They are so kind and loving. They treat the patients just like Christ would. Having lived in Haiti, I know that's not the common way. There's almost a hierarchy in Haiti, so to see this clinic operating in this way, I'm just so proud of everyone. Not proud of myself—I'm proud of what they are doing and the way that they're serving the poor, the poorest of the poor.

### How do you feel your work will impact others in the long term?

I didn't choose this but I have become a model for a lot of young women and men, especially women. My mother actually died when she was 56. She died of ovarian cancer. When I was 56 I went to live in Haiti, in Léogane, for two years, and I thought a lot about my mother. I've never had a role model for these years of my life, but I have the opportunity to be the role model. I have a lot of people who are watching what we're doing and talking about retirement in a different way. I don't call this retirement. I call this working but not for money. We're fortunate that we can work in an area where we have passion. What could come of that—influencing younger people—I think it's a positive thing for the world that we live in.

*by Bernadette Gillis*

To make a nomination please send an e-mail to [amelia.howle@duke.edu](mailto:amelia.howle@duke.edu) or call 919-385-3150 and note the person's name, name of the award, and a statement about why you believe they are qualified.

# *Eileen Tomaselli Lake, BSN'81, PhD, RN, FAAN*

## **Distinguished Alumna**

Eileen Tomaselli Lake is an associate professor of nursing, associate professor of sociology, and associate director of the Center for Health Outcomes and Policy Research at the University of Pennsylvania. One of her primary research studies examines the outcomes of very low birthweight infants in neonatal intensive care units throughout the U.S., and another highlights the contributions of the nurse's work environment and clinical nursing expertise to the quality and safety of patient care.

### **What role has the School of Nursing played in shaping your career?**

I believe that my education at the school of nursing is the foundation of everything I do today, because the pillars of the Duke program were science and theory. It's through that base I was able to develop over the years to become a researcher. Then of course Duke was just a wonderful university, a beautiful place. The School of Nursing was a very close knit, family community, not just the students and the faculty, but also the staff. The whole school in that sense was my community.

### **What accomplishment are you most proud of?**

I'm proud that my work has highlighted the contributions of nursing to patient care quality and safety. The overarching accomplishment has been to show that if we support nurses to have their high scope of practice, then we get the best quality care. That is my biggest picture about my contributions. Then I am very proud of having a family of my own.

### **How do you feel your work will impact others in the long term?**

We just now recently passed health care reform, which means we're extending health coverage to millions more people who haven't had it before. It makes giving value for the best price very urgent. I think the long-term impact of my work will be to elevate the place of nursing in the health care equation to give nurses a greater decision-making role and to have the nurse's voice at the table when a hospital is deciding which information system to implement or which quality im-



provement program to implement. I think providing this evidence that shows the contributions of nursing in those settings will open the doors to nurses being in more roles of authority and decision making.

For parents and babies, I hope that every baby and every parent will get the best quality nursing care. And I hope we can show there are differences in the nursing care, depending on the nurses' qualifications and the nurses' work environment. We have shown how the role of nursing care makes a big difference in critical outcomes for babies. Right now I'm working on a manuscript in which we show that babies born in hospitals with an accreditation for nursing excellence or in nursing magnet hospitals have lower rates of mortality, infection, and hemorrhage than babies born in non-magnet hospitals. This will help hospital managers make decisions about considering the benefits to their babies and the babies' families of pursuing an accreditation like the magnet accreditation. My work is really aimed at showing the difference the nursing profession makes in order that we can then have the greatest gain for our patients.

# Duke Nursing Alumni Association 2011 Awards

## *Donna Allen Harris, BSN'71, RN* Trailblazer in Nursing



In 1967 Donna Allen Harris became the first African American to enter the Duke University School of Nursing. Since graduating from Duke in 1971, she has worked in positions in hospital nursing, a variety of positions in community health nursing, and in nursing research. She currently is a clinical research nurse, focusing primarily on a study led by **Diane Holditch-Davis, BSN'73, PhD, RN, FAAN**, Marcus E. Hobbs Distinguished Professor of Nursing and associate dean for research affairs, on the long-term effects of infant massage and skin-to-skin kangaroo care for preterm infants.

### What role has the School of Nursing played in shaping your career?

I've done school nursing. I've done community health. I've done nursing research. I've worked with social service departments. I've had just a variety of experiences with the BSN that I'm not sure I would have had the opportunity to do otherwise. I know the Duke name opened doors for me being black, especially in the early years after graduation. I just have my BSN. But to me, to have been able to have had the variety of nursing experiences I've had with a BSN,

had to have been in part because I'm a Duke graduate even as times changed and master's degrees were wanted for various positions.

### Which accomplishment are you most proud of?

I would say that projects in nursing research and community health have been the ones that I am most proud of. It's a match to what I feel my strongest nursing skills are, and they're geared towards community health and preventive health nursing. To me, prevention is preferable to treatment. As a profession, I believe that nursing should educate, monitor, and encourage people—maybe empower is a better word—to manage their health problems. That's what I like doing. An example would be one of the first projects I worked with in nursing research. It involved working with African-American women with children with HIV. Many of these women had just been diagnosed. Having symptom-specific information to share with them about what they could do to live well with HIV, in the privacy of their own homes, is what I'm talking about.

### How do you feel your work has impacted others?

I'm working on a grant right now, where the moms were asked whether the study made a difference. "Did it change you as a mother?" "Did it change you as a person?" So many of the mothers made comments along the lines of not knowing that they could communicate so early with their babies or that they could see the difference their presence and the interventions made on their babies' health. Just seeing that...watching the moms see the benefit of doing the kangaroo care, and the bond growing between mom and baby...that's what it's all about.

As for being a trailblazer, even though I don't think of it that way, I did something new and made it acceptable. The door was opened for others. One of the next two African Americans who came in was **Gayle Bridges Harris, BSN'72, MPH**, who is now the health director of the Durham County Health Department. Opening the door for other people to meet their career goals, and fulfill their dreams is a big part of what trailblazing is about. If I had failed miserably, I don't know that the door would have been closed, but it may have been a little harder to open. Because I was successful, others could enter more easily.



# *Ruth A. Anderson, PhD, RN, FAAN*

## Distinguished Contributions to Nursing Science

Ruth A. Anderson is the Virginia Stone Professor of Nursing, research development coordinator for the Office of Research Affairs, and a senior fellow in the Duke Center for the Study of Aging and Human Development. Her research focuses on how better management practices can directly influence the quality of patient care. She is a principal investigator of the CONNECT study, which examines how a special intervention that focuses on better staff communication can prevent falls in nursing homes.

### What role has the School of Nursing played in shaping your career?

I believe that I have been much more successful at Duke than had I stayed where I was before, because of Duke's strong faculty and research intensive environment. Duke really does support you and gives you the resources you need for teaching and to do your research in a way that doesn't exist everywhere. My colleagues are a big part of that. My life would be different without the team of people that I began working with on the case study and still work with on the intervention project.

### What accomplishment are you most proud of?

One of my proudest moments was when I was out in one of the sites where we were doing the CONNECT intervention and I was introduced as the person who wrote the materials used in the class. At the end of the session, one of the nurse aides had our flyer with the local intervention strategies in her hand and said, "How did you know to write this? This is exactly what we need." What made me feel really good was the research process we used. It was so essential to have the funding to do those case studies, because without the case studies, we couldn't have written what was on that piece of paper. It gave me such confidence in the method we used. We really know nursing homes quite well. We know how they work. It's really rewarding to see that the intervention is so well received. People really did enjoy it because it really connected with them at a level where it made sense to them.



### How do you feel your work will impact others in the long term?

Besides reducing falls in nursing homes, I hope there are secondary benefits of nursing home staff's participation in this intervention—one being that they're happier at work because they have better relationships with coworkers and they know how to improve those relationships. Another factor is that the nurse aides talked about their confidence improving. In the focus groups the words, "my opinion counts," came up a lot. Those kinds of statements show feelings of self-esteem and self-efficacy. They know how to do their job and that what they're doing is valued.

And I hope as a result of those things, the intervention could reduce the turnover in these nursing homes that start practicing the CONNECT strategies they learned. The turnover in nursing homes is very high, much higher than in any of the other clinical settings. It wreaks havoc on the patients and the nursing homes' ability to deliver care. So anything that would help stabilize the workforce could be really important.

For complete bios of all awardees please visit [nursealum.duke.edu](http://nursealum.duke.edu) and click on Alumni Awards.

# Kneedler

## Early Public Health Leader Endows Nursing Scholarships at Duke



### ACCOMPLISHMENTS

First public health nurse in  
Caldwell County

Chief of the North Carolina  
Public Health Service

Chaired the committee for  
Western Carolina University's  
school of nursing

On the committee that originated  
the national Head Start program

ALTHOUGH **MARY KING KNEEDLER, N°36**, only “wandered into nursing” after her dream of becoming a “teacher, missionary, or movie actress” was squelched by the Great Depression, she discovered in public health nursing a rewarding career that allowed her to serve her community, state, and nation.

Kneedler, who died in June at the age of 97, left a legacy to help future nurses achieve their aspirations through a bequest commitment of \$100,000 to the Duke University School of Nursing. Her bequest will be added to the Mary King Kneedler Scholarship Endowment at the school, which she created in 1998 with a gift of \$25,000. That initial gift was matched through a challenge grant by The Duke Endowment for a total of \$50,000.

Kneedler graduated from high school at the beginning of the Great Depression. Although she had hoped to enter college to become a teacher, her family could not afford college tuition. She learned that tuition at Duke University School of Nursing was only \$100 a year, and so in 1933 she applied and was accepted.

The work was extremely challenging, and only 11 members of her entering class of 35 made it to graduation in 1936. Kneedler found that hospital nursing, especially the operating room, was not for her, and she became interested in public health. Soon after graduating from Duke, she enrolled at the Peabody Teacher's College in Nashville, Tenn., for public health training.

In 1937 Kneedler accepted a job as the first public health nurse in Caldwell County. Typhoid fever had reached epidemic proportions across North Carolina, and people were clamoring for immunizations. According to an article in the *News-Topic* of Lenoir, N.C., she remembered giving as many as 1,500 shots

in one day and normally worked six days a week, from 8:00 in the morning until 6:00 or 7:00 at night, providing care for mothers and children.

It was during this hectic time that Kneedler met and married her first husband, Robert Bailey, a furniture salesman. Bailey soon enlisted to fight in World War II, became a tank commander, and was killed in action in 1945.

Kneedler decided to further her education and enrolled in the School of Public Health at the University of North Carolina at Chapel Hill in 1946, graduating a year later with a bachelor's degree in public health. After several years of working in Alamance County, where she became supervisor of public health nursing, she went on to receive a master's in public health nursing administration from Teacher's College at Columbia University in New York.

Kneedler then served as a nursing consultant to the State of North Carolina, eastern area, and was responsible for the state's tuberculosis program for a year before becoming chief of the North Carolina Public Health Service in 1954, a position she held for nine years.

Kneedler remarried and she and her husband Jay Kneedler joined the faculty at Western Carolina University, where Kneedler chaired the organizational committee for WCU's school of nursing. She was appointed by President Lyndon B. Johnson to serve on the 13-member committee that originated the Head Start early childhood education program and well-baby clinics, and from 1960 to 1961 she was a member of the U.S. Surgeon General's consultant group on nursing. ♦

# Historic Gift Will Name School of Nursing Building for Pearson, BSN'84

Christine Siegler Pearson, BSN'84, will have the Duke University School of Nursing building named in her honor thanks to a historic \$15 million gift from her husband, J. Michael Pearson, MBA, E'81.

The gift, the largest ever to the School of Nursing, was informally announced at the Chancellor's Gala on May 5, to a standing ovation from top philanthropic supporters, including Mr. and Mrs. Pearson, faculty, and community leaders. The official public announcement followed the next day.

"This generous gift recognizes the school's recent growth and progress in leading nursing education and research," said Dzau.

Currently the school has 732 students enrolled, the largest number in its 80-year history, and the faculty has more than doubled under the leadership of Dean Catherine Gilliss, BSN'71, DNSc, RN, FAAN. This spring, *U.S. News & World Report* ranked Duke 7th among nursing schools nationally, a significant jump from 29th in 2004 and 15th in 2007.

Christine Pearson is a member of the last class to complete the traditional BSN program at Duke before the program closed.

"My recent involvement with the Nursing Alumni Council has made me aware of the wonderful advances that have occurred in the school," said Pearson. "I have renewed respect and appreciation for Duke University School of Nursing and all of its activities that result in improved health care."

Dean Gilliss noted the emotional and historical significance of having the building named to honor an alumna. "I am deeply moved by Mike Pearson's generous gift in honor of his wife, Christine," she said. "This is a transformative gift, and we are grateful beyond words."

Michael Pearson is the chairman and CEO of Valeant Pharmaceuticals International, Inc., headquartered in Mississauga, Ontario, Canada. The Pearsons have four children: Andrew, a freshman at Duke, Morgan, who will enter Duke's freshman class in Fall 2011, and 14-year-old twins Trevor and John.

The School of Nursing building that will be named for Christine Pearson was completed in



Dean Catherine Gilliss and Christine Pearson

2006. The 59,000 square-foot, silver LEED-certified building sits prominently on Trent Drive and faces what will become the new Oval Courtyard Garden that unites Duke Clinic, three new patient care and educational buildings—Duke Cancer Center building, Duke Medicine Pavilion, and the School of Medicine Learning Center—and Duke University Hospital.





Barbara Nims and Shelley Lane

## Reunion Inspires Giving Back

Barbara Nims, BSN'71, and Shelley O'Neill Lane, BSN'76, don't know each other, but they share some significant traits: Both live in New York City; both are attorneys; both say that their experience at Duke University School of Nursing was transformative. And both recently gave significant gifts to the School of Nursing Reunion Giving Program.

Nims recently gave \$40,000 in honor of her 40th reunion, and Lane gave \$25,000 in honor of her 35th reunion.

One of the few differences between them is that Nims practiced intensive care nursing for 5 years in the U.S. Army and 5 years as a civilian nurse before going to law school, whereas Lane took the legal route straight after Duke. The School of Nursing, they say, prepared them well to excel in life.

"The school instilled a set of values that are still with me today," Nims says. "That doing good work is important, and if something is worth doing it's worth doing well in every aspect of your life."

Lane adds that, "the educational process was such that you developed great work habits and a love of learning."

Gifts to the Reunion Giving Program go to the School of Nursing Annual Fund, which helps to provide scholarships, curriculum enhancements, and keep the school at the leading edge of nursing education.

## 2011 Reunion Recap

More than 175 alumni, friends, and faculty gathered on campus for Nursing Reunion Weekend April 8-9, 2011.

Dean Catherine L. Gilliss, BSN'71, DNSc, RN, FAAN, and Kathy E.V. Gallagher, BSN'75, the 2010-2011 Nursing Alumni Association president, presented School of Nursing Awards to Eileen Tomaselli Lake, BSN'81, PhD, RN, FAAN; Ruth A. Anderson, PhD, RN, FAAN; Linda Mayne Markee, BSN'63; and Donna Allen Harris, BSN'71, RN.

Other weekend highlights included the 2011 Distinguished Contributions to Nursing Science Lecture presented by Anderson and a faculty/alumni panel discussion on nurses responding to the need for primary care.



Members of the BSN Class of 1966 gather for a photo in the Mary T. Champagne Courtyard.



The BSN Class of 1976 celebrates their 35th reunion during the Welcome Reception.

## 1960s

**Sheila Rice Evans, BSN'66**, continues working part time as the quality improvement manager and nurse trainer for Interim Healthcare in Durham. She has retired twice, but says she “seems to get pulled back in to help out.” Her husband Seth is in phased-in retirement at UNC-Chapel Hill. They have four grandchildren and live in Chapel Hill.

**Ellis Quinn Youngkin, BSN'61**, says that despite retiring in 2007 after more than 40 years of nursing, she continues to get job offers, which she says “is evidence of the need for well-prepared nurses.” She remains active in writing, having published in 2010 a research study in applied nursing science and a nurse practitioner handbook. Next year she will have published the 4th edition of a women’s health primary care textbook that she co-wrote with three colleagues. She and her husband **Carroll, T'62**, live in a retirement village in The Villages, Fla. They have two children and seven grandchildren.

## 1970s

**Kim Kingzett Behm, BSN'76**, is a clinical manager for Animas, a Johnson & Johnson diabetes company. She also is an instructor at Cleveland State University, where she teaches a course on intensive diabetes management. She has been active in nursing in the field of diabetes for nearly 30 years and is a longtime certified diabetes educator. She and her husband Michael have three sons—John, Patrick, and Daniel—and live in Chagrin Falls, Ohio.

**Nancy Munn Short, BSN'76, B'91**, continues working as an associate professor at the Duke University School of Nursing, where she teaches primarily in the Doctor of Nursing Practice degree program. She participates on multiple research grants in an advisory capacity related to disseminating results to thought leaders and policy makers. This year she will travel to New Zealand to study health disparities among the Maori people—New Zealand’s indigenous population. She and her husband Wilbert have three grown children and live in Durham.

## 2000s

**Renee Twersky, ABSN'07**, has taken a new job as the administrative officer in ambulatory care services at the Durham Veterans Affairs Hospital. She acts as the chief operating officer for all ambulatory clinics, including specialty and primary care on the main campus and community-based clinics in Durham, Raleigh, Greenville, and Morehead City. She lives in Hillsborough, N.C.

# Patterson, BSN'74 Finds the Perfect Blend of Horses and Nursing

When **Laura Lynn Zelaites Patterson, BSN'74**, joined the Duke University Equestrian Team as a freshman, she was the only team member who didn’t own her own horse.

“I had a passion for riding, but not much experience,” she says. She took lessons and quickly found she had a natural aptitude for English riding and jumping, and she enjoyed competing with the Duke team for all four undergraduate years.

Her love of horses slowly turned into a professional career. She accompanied her husband, **Clif Patterson, MD**, to Panama, where he was a flight surgeon with the U.S. Army. She began purchasing, training, and selling young race-horses. Later, the couple returned to the Boston, Mass., area, where she worked as a nurse, developed as a rider, and ultimately competed at the highest levels of the sport of three-day eventing, which includes the disciplines of dressage, cross country, and show jumping.

Patterson had been a member of Sigma Theta Tau International Honor Society of Nursing as a nursing student. This allowed her to keep her professional credentials current by doing research during her stint in the horse world. In 1983 she and Clif returned to North Carolina—he as a facial plastic surgeon and otolaryngologist with Raleigh Eye, Ear, Nose, and Throat Specialists, and she to work in the Duke University Hospital Pediatric Intensive Care Unit. After 10 years at Duke, she moved to Duke Raleigh Hospital, working part time as a critical care nurse in the Level I Post Anesthesia Care Unit.

When not working at the hospital, Patterson spends her time in Southern Pines, N.C., where she rides, trains, and competes her new horse, Fifty Caliber, or “Pete” as he is known around the barn. She also is involved with rider safety issues in equestrian competitions and so is able to use her nursing education outside of the hospital setting.

The Pattersons maintain a townhome in Raleigh and a cottage in Pinehurst, N.C. They have a grown daughter, Meggan, who lives and works in Boston.

— MARTY FISHER



Laura Patterson and Fifty Caliber, a.k.a. “Pete” warm up for their cross country run at the Southern Pines Horse Trials I in March. They finished 5th in their division.



# Share your memories!

Help celebrate 80 years of teaching, research, and service at Duke University School of Nursing by sharing your memories of your time in nursing school at Duke.

[nursealum.duke.edu](http://nursealum.duke.edu) (click "Share Your Memories")

## obituaries

### 1930s

**Vera Thomas McCulloch, N'35**, died December 10, 2010, in Tallahassee, Fla. She was 97. Her career included serving as assistant dean of nursing at Duke University Hospital. She also was a life member of the Tallahassee Garden Club and volunteered at her children's school clinics. She was preceded in death by her husband of 67 years, **David J. McCulloch, MD'43, HS'43, '45-'47**, and her son David. She is survived by two daughters, four grandchildren, and three great-grandchildren.

**Mary Hickman Vaughan, N'37**, died March 4, 2011, in Clarksville Va., after an extended illness with Alzheimer's disease. She was 94. She and her late husband, **William Thomas Vaughan, T'30**, both worked at Duke for approximately 10 years; she worked in the alumni and records office and he managed the East Campus dining halls for women. Later she worked at the Duke University Law School and in real estate. She was a benefactor to the Asiatic Arboretum at Duke Gardens, creating a memorial that had a view across the pond where she and William met for lunch while at Duke. She is survived by a son, **William, A'73, S'96**; a daughter, **Carolyn "Caroline," WC'71**; one grandson; one great-grandson; and a sister, **Elizabeth Boynton, WC'51**.

### 1940s

**Mary Elizabeth Green DeWees, BSN'43**, of Sylva, N.C., died January 4, 2011. She was 92. After graduating from Duke, she completed graduate work in psychiatric

nursing and became director of nursing at Highland Hospital in Asheville, N.C. She also held positions with the American Red Cross, Jackson County Cancer Clinics, and Southwestern Community College. She retired from nursing in 1983. She was preceded in death by her husband, Philip E. Dewees, MD. She is survived by two sons, three daughters, and seven grandchildren.

**Ruth Hawes Fordham, BSN'45**, died February 3, 2011, in Cincinnati, Ohio, after a short illness. She was 89. She was a member of the American Red Cross and a charter member and past president of both the Wyoming County (W.Va.) Medical Auxiliary and the Twin Falls Ladies Golf Association. She was heavily involved in local garden clubs. As president of the Woodland Garden Club, she helped raise more than \$2,500 to re-landscape the grounds of Mullens City Hall in Mullens, W.Va., after a devastating flood in 2001. She is survived by her husband of 65 years, **George Francis Fordham, MD'44**; one son; one daughter; two granddaughters; and four great-grandchildren.

**Betty Jo Harrison Frauenhoff, BSN'47**, died February 27, 2011, at her home in Stuart, Fla. She was 86. She and her first husband, Harold Davidson, MD, were founding members of Rolling Hills Country Club, where she won the women's club championship four times. She was active in the Evansville, Ind., community, serving in numerous roles, including as president of the Vanderburgh Southwest Medical Auxiliary and as a board member of the Welborn Hospital Foundation and the Indiana Women's Seniors Golf Association. In 1982

she married Jim Frauenhoff, and later they each won many golf championships in Stuart. She is survived by four children, two stepdaughters, 12 grandchildren, and two great-grandchildren.

**Edith Emily Smith, BSN'47**, of Louisville, Ky., died February 10, 2011. She was 87. She worked as a registered nurse with the local Veterans Affairs Hospital. She is survived by three nephews, a niece, three great-nephews, three great-nieces, and three great-great-nieces.

**Edith Irene Osborne Blackwell, N'49**, of Grayson, Ga., died January 7, 2011. She was 84. She worked as a registered nurse for much of her career and retired from Grady Memorial Hospital in Atlanta. She was preceded in death by her husband Edwin Hughes Blackwell. She is survived by two daughters, six grandchildren, and sisters **Lucy Osborne Whiteley, N'44**, and Jackie Osborne. Memorials may be made to Duke University School of Nursing, c/o Sallie Ellinwood, 512 S. Mangum Street, Suite 400, Durham, NC 27701.

### 1950s

**Wanda Earnhardt Brandt, N'54**, of Spencer, N.C., died March 20, 2011. She was 79. She was instrumental in setting up the recovery room at Rowan Memorial Hospital in Salisbury, N.C., and retired from the Veterans Affairs Medical Center in Salisbury after 30 years of service. She also worked at the Rowan Prison Camp. She was preceded in death by her husband Thomas E. Brandt Sr. She is survived by two sons, eight grandchildren, and six great-grandchildren.

# Annual Fund Keeps Student on the Road to a Nursing Career

At one point **Julie Neboh, ABSN'11**, was ready to sell her car to keep from going into too much debt as an Accelerated BSN student. Fortunately, a scholarship from the Robert Wood Johnson Foundation put a stop to that.

Scholarships are helping her again as she pursues a Doctor of Nursing Practice (DNP) degree at Duke while also working full time as a clinical nurse I at Duke University Hospital.

Scholarships have put Neboh on the path to her dream of working as a nurse practitioner in a community based clinic, focused on meeting the physical, mental, and emotional needs of her patients.

“Not having help could be the barrier that keeps someone out of school,” she says. “For me, the scholarships have been a lifesaver. I wish I could individually thank everyone who contributed.”

Your gift can mean the difference between running out of gas or making it all the way to the finish line for our students!



Julie Neboh, ABSN'11

“I wish I could individually thank everyone who contributed.”

Make your gift online at [nursealum.duke.edu](http://nursealum.duke.edu).



**INSIDE:** Historic gift will name nursing building for alumna + DUSON ranks 7th in graduate nursing education

## Graduation 2011

### First Duke Nursing PhDs Awarded

Two PhD in nursing degrees—the first ever at Duke University—were among a total of 124 degrees conferred in four disciplines during May 15 graduation ceremonies. The school also awarded 50 accelerated bachelor of science in nursing degrees, 47 master of science in nursing degrees, 10 post-master’s certificates, and 15 doctor of nursing practice degrees.

After the university-wide ceremony was held at Wallace Wade Stadium, the nursing degrees were presented at a private ceremony at Page Auditorium. Between the two ceremonies, approximately 800 students and their families attended a luncheon on West campus.

The guest speaker was nationally noted nurse scientist Pamela H. Mitchell, PhD, RN, FAHA, FAAN, of the University of Washington (UW) in Seattle, who talked about the cycle of science that takes new discoveries and applies them to improving human health.

Mitchell is professor of biobehavioral nursing and health systems in the UW School of Nursing; and director of the UW Center for Health Sciences, Inter-professional Education and Research.

