Yale Nursing Matters

Enhancing university life

Advancing nursing practice

Preserving our core values
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**matter** n. Something that occupies space and can be perceived by one or more senses; a physical body; a physical substance, or the universe as a whole. A subject of concern, feeling, or action. Something printed or otherwise set down in writing. v. To be of importance or value. Signify.
Spring / Summer 2002
Nursing leaders are consumed with a life altering passion for work that matters. They do not simply choose a profession. They promise to adhere to the responsibilities of a calling. Nursing leaders promise not just to do something, but also to be something. They incorporate a new and essential facet into their identity. They change.

The great humanitarian Mahatma Gandhi said, “You must be the change you wish to see in the world.” For generations of nurses, YSN has been the engine of that change. Yale nurses have always understood that change is necessary to the advancement of their craft, and YSN remains a fertile environment for personal transformation and growth. But those who study nursing and conduct nursing research at Yale realize that the preservation, advancement, and enrichment of knowledge is not a means in itself, and must be deeply rooted in social responsibility. For clinicians, educators, and scholars, YSN provides the resources and the support networks that enable them to continue making a profound impact on the health of communities where they live and work, as well as on individuals and communities far beyond Yale’s walls.

YSN faculty honor their commitment to their craft. They also ensure the endurance of the school’s core values by providing the best education possible for each new generation of advance practice nurses, advancing leadership in nursing practice and health care reform, and setting the direction for the advancement of nursing science. These core strengths have always been, and continue to be the engine of our individual and institutional growth.

Aristotle wrote, “We are what we repeatedly do. Excellence, then, is not an act, but a habit.” The same can be said of nursing leadership at Yale. YSN was founded to advance nursing leadership, and this objective continues to remain central to the school’s development. YSN’s first dean, Annie Goodrich, was seized by this life-altering passion. She was the first to establish a school of nursing within a university, on an educational model, because she recognized that nursing was a high calling that demanded excellent preparation. “There is no knowledge too great to bring to it,” she said. “No vision that can encompass its possibilities.”

Catherine Lynch Gilliss, DNSc, RN, FAAN
Dean and Professor
Often working against deep-rooted traditions, faculty and students at YSN helped to expand opportunities for women on Yale campus to play a more integral role in University life. Annie Goodrich and her contemporaries helped build the foundation of female leadership at Yale. Following in their footsteps, Yale nurses have continued to attain positions of leadership at the highest levels of the University, and to help shape policies that give women a permanent and equal voice at Yale.

Among those who have helped advance gender issues at Yale is former YSN Dean Donna Diers, one of the first four women to be elected to the board of Mory’s Association. With her usual candor, eloquence, and humor Donna tells the story of a turbulent time in the University’s history, and of the controversial events of 1974 that have paved the way for generations of Yale women who now enjoy Mory’s very special traditions.
Donna Diers writes: When Yale College began to admit women in 1969, any number of institutional practices came into question, from lack of support of women's crew, to dormitory space and counselors, to the paucity of women's bathrooms in some of the older teaching buildings. One institution—The Mory's Association—came under particularly public fire.

Mory's is essentially an eating place organized legally as a club. While Mory's has no official Yale position, its membership qualifications tied it to the University, and to many at Yale, the club has become an integral part of University life. The club's time-honored traditions such as the carving of table tops, the consumption of colorful beverages in exotic containers, and the "Whiffenpoof Song"—"from the tables at Mory's to the place where Louie dwells . . ." have passed Mory's into popular culture.

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For many years, membership in Mory's was restricted to students and then graduates of Yale College, by definition male, and male faculty and staff. Important University committee meetings were held at Mory's, and if the committee happened to have a female member—most often the Dean of the School of Nursing—she had to be escorted by a man through the dining room on the first floor to the meeting rooms on the second.

Women undergraduates, supported by women faculty, especially in the Law School, challenged Mory's gender-admission definition. The protest was colorful. A group of women abandoned their bras on Mory's fence and threw paint on the lovely white building. The University cancelled sponsorship of meetings at Mory's. Letters were written to the Yale Alumni Magazine. The University discovered that Mory's did not have a furnace of its own and threatened to turn off the heat from the Yale steam system in the Graduate School next door. A successful suit was brought against Mory's liquor license.

The Secretary of the University, Sam Chauncey, worked with the Board of Mory's to craft a solution. Mory's would admit women undergraduates, faculty and staff in the same way it admitted men in those categories. The Board of 12 men would reconstitute itself; four men would resign their terms of office to be replaced by four women essentially selected by Chauncey to represent categories of faculty, administration, staff and alumnae, then stand for election as all members of the Board did.

That's where I came in.

It was 1974. I was a brand new Dean, the only female dean in the University. I got a call from Sam, one of the most valuable people one gets to

'De-gendering' Nursing

According to Donna Diens, the advancement of nursing has often been a metaphor for the struggles of women for equality, visibility, and respect. However, Diens is quick to admit that the nursing community has often neglected to place proper emphasis on the struggles of men in the profession. Michael Green, MSN '92, who entered YSN via the GEPN program following a successful career as an investment banker, agrees. Green speaks passionately about the need to attract more men into nursing by 'de-gendering' the profession. "Making nursing blind to gender is the key to bringing diversity to the profession," says Green. "In this, nursing still has a long way to go."

Green believes that one of the most significant barriers to making nursing more accessible to men is the social misconception that caring is an exclusively feminine trait. "The belief that women hold a monopoly on caring is a defect of the way we have been socialized," says Green. "Men have just as much potential for caring as women, and can administer to the needs of patients through nursing just as effectively."

While explaining that his own experiences with patients have been positive ones, and that patients have enjoyed seeing him in the role of care provider, Green admits that many health care professionals still resist the notion of a male nurse. He points to the irony that in nursing, an occupation that has been predominantly female, men have often had to struggle to gain the same type of recognition and respect that women have in other professional fields. "It is unfortunate that these issues still plague the profession of nursing," he says.

"All I ever wanted to do was to care for people," says Green. He explains that he has chosen to study nursing at Yale because he recognizes the importance of advancing care through science. "In order for nursing to be viewed by society as the highly skilled profession that it is," says Green, "nurses need to start thinking of one another as professionals, without regard to gender, ethnicity or race."
know. He said, "Donna, I'm sending over my bursary student. Write a check for $30 to Mory's. I want you to join the Board, but first you have to be a member."

I said, "You've got to be kidding."

Sam made three similar phone calls that day, to Professor Ellen Peters in the Law School; Lisa Getman, one of the first women Yale College alumnæ; and Josie Broude, the Provost's long term senior staff assistant.

We received notice of the first meeting, which I recall as in the spring of 1974. Mory's Board meetings are always at noon. We four women did not know each other, although we all knew of each other. We showed up, one at a time. Two of us wore skirts, two wore pants. What I remember about that first meeting was the gentlemanly courtesy among the men, and at the same time the awkward social circumstance. Not only did we women not know each other, but we did not know the men. The bruises of the settlement were visible. Those first meetings hurt. We—all of us, women and men—were on our very best behavior.

We were put on committees. I was on the Admissions Committee. Ellen Peters was on the House Committee, which deals with the business. Josie was on the Art and Memorabilia Committee. It took years before the Art and Memorabilia Committee figured out a place to display the pictures of women team captains: up the stairs, which was symbolic; the women's rest room is upstairs.

After Mory's admitted women as members, women began to use the club for the same kind of social events, business lunches, and dinners that the men did. I remember vividly in those first few months hearing a group of men at an adjoining table moan that Mory's had gotten so much noisier with "those high pitched voices."

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I had taken the seat of a male member whose term was to expire the next year, so I was the first woman on a ballot. While Mory's has a technical membership of thousands, the number of people who actually vote in the Board election is much smaller. I was elected formally to the Board. We women members asked to see the returned ballots, not that we thought there was any miscounting, but because we thought there might be comments, and there were. The one I loved most was in a spiderly hand next to my name. It read, "Does her father know what she's doing?"

Serving on Mory's Board was a better graduate education in the core of Yale University than I could have ever received anywhere else.

When the club was forced to go co-ed, the worry was whether it would be possible to "keep Mory's Mory's." As the first women members, we worked to do just that, so that Mory's traditions would also pass to the women of Yale University.

YSN's history is a captivating tale of how Yale nurses have affected not only the health of individuals and communities, but also the role of women at Yale. Annie W. Goodrich, inaugural dean of YSN, in 1923 became the first female Dean at Yale. All eleven members of the first YSN faculty were also women. While Amy Solomon was the first female to register as an undergraduate at Yale College in 1969, Yale nurses had already been active on campus for forty-five years.

In 1924, the first class of nurses was admitted to Yale. These YSN students were characterized by their commitment to educational excellence, their desire to improve people's lives, and their leadership potential—character traits very similar to those exhibited among the students of Yale College. However, there was one significant discrepancy: while the Yale College class of 1924 was exclusively male, the first YSN class was entirely female.

"Nursing at Yale," wrote Donna Diers, "has called into question convenient societal assumptions about health-service delivery, health-care economics, and public policy, and has been a metaphor for the struggles of women for equality, visibility, and respect." While women and nurses today face a different set of challenges from those of decades past, what has not changed is YSN's resolve to meet those challenges, on campus, in the community, and around the world.

A visit to Mory's today reveals a fascinating glimpse of Yale's unique history. Since the election of the first four female members to Mory's Board, a number of women have continued the tradition of past members by carving their names into one of Mory's wood tabletops. Donna Diers too has taken the knife to the wood. The mark of her knife is evidence that the University can change while keeping its traditions intact, that the change is often born from the tenacity of Yale women, and that many of these women continue to have YSN roots. And while the carved letters of Donna's name are a permanent feature of Mory's, her legacy, like the legacies of Yale nurses past and present, has also been sewn into the very fabric of the University.

"Nursing at Yale has called into question convenient societal assumptions about health-service delivery, health-care economics, and public policy, and has been a metaphor for the struggles of women for equality, visibility, and respect."
Understanding Gender on Campus

Last year marked both the 300th anniversary of Yale and the 30th anniversary of the first graduating class with women from Yale College. In the last 30 years the University has taken significant steps to advance the roles of women on campus. However, according to Professor Kathy Knafl, the Yale community is only now beginning to deepen its understanding of the effects and implications of gender on campus.

Professor Knafl and Dean Catherine Giliss are on the Steering Committee of the Women's Faculty Forum (WFF), which emerged from the effort, during Yale's tercentennial, to highlight the accomplishments of women at the University and of Yale alumnas. The forum's first major initiative was to sponsor a series of events during the tercentennial celebration, including the Gender Matters Conference that celebrated the transformations wrought at Yale by women's presence over the past three decades. Since the tercentennial celebrations have concluded, faculty from across the University have continued to meet monthly to develop programs focusing on women's scholarship and to gather statistical evidence about gender issues at Yale.

"Research is a significant component of what WFF does," says Knafl. "We are studying the implications of gender on the Yale community in a systematic way by pulling in scholarship and research related to women that cuts across all fields of thought."

Another goal of WFF has been to introduce female faculty from across departments to one another's work. "The forum has provided me with an excellent opportunity to educate some very competent, successful, knowledgeable women as to what nursing is in the 21st century, and to dispel common misconceptions," says Knafl. "I found that my colleagues are fascinated about what advanced practice nurses do, and about the science of nursing."

While representing YSN—a school that has been advancing the role of women on campus since 1923, with a tenured faculty that is made up almost entirely of women—learning about the campus life of some of her colleagues has been a revelation for Knafl. She confides, "It is amazing to hear stories from women whose departments have only a handful of tenured women faculty, and some have no tenured women at all. This is so different from what I have grown used to at YSN."

Knafl admits that the creation of a University-wide organization like WFF has been long overdue. "This work should have started 30 years ago," says Knafl. "There is a great deal more to be done to increase our understanding of gender issues on campus and in the community."

Kathleen Knafl, Professor in the YSN Doctoral Program, plays an important role in advancing gender issues on campus.
Annie Goodrich and her contemporaries helped build the foundation of YSN leadership at Yale. Following in their footsteps, current YSN faculty are helping to advance life on campus, and to shape the future of the University by holding numerous positions of leadership at Yale. Here are some examples:

**Margaret Beal**
Member, Information Technology Advisory Committee

**Sally Cohen**
Associated Faculty, Yale Institution for Social Policy Studies; Member, Research Study Group on Childhood Issues

**Terri Clark**
Member, Institute for Social and Policy Studies, Bioethics Project

**Jane Dixon**
Member, Institute for Social and Policy Studies, Bioethics Project; Fellow, Saybrook College

**Angela Crowley**
First chairperson and current member of the YSN/YSM Child Care Committee

**Marjorie Funk**
Member, Committee on International Health; Fellow, Silliman College; Member, Standing Advisory Committee to the Provost

**Dean Catherine Gilliss**
Member, Standing Advisory Committee to the Provost; Member, Executive Committee, Yale Cancer Center; Member, Advisory Board, National Center of Excellence in Women's Health at Yale; Member, Amistad Steering Committee; Member, Board of Directors, Advisory Council RWJ Clinical Scholars Program; Member, Steering Committee, Women's Faculty Forum; Trustee, Sterling Medical Library; Fellow, Saybrook College
Margaret Grey
Member, Standing Advisory Committee to the Provost
Member, Conflict of Interest Committee

Ruth McCorkle
Program Leader, Cancer Prevention and Control Program, Yale Cancer Center
Member, Executive Committee, Yale Cancer Center
Member, Silliman College
Member, Oncology Nursing Council, YNHH Fellow, Program on Aging, Yale School of Medicine

Kathy Knafl
Member, Steering Committee, Women's Faculty Forum

Linda Pellico
Member, Information Control Group
Member, National Nursing Week Committee, Yale New Haven Hospital
Member, Humanities in Medicine, Yale School of Medicine

Tish Knobf
Member, Cancer Prevention and Control Program, Yale Cancer Center
Member, Breast Cancer Research Program, Yale Cancer Center

Sheila Santacroce
Member, Women and Trauma Core, Women's Health Research Initiatives, YSM
Member, Cancer Prevention and Control Program, Yale Cancer Center

Judy Krauss
Master, Silliman College
Member, Council of Masters: Chair, Residential College Services Committee; Member, Agenda Committee
Chair, Faculty Committee on Athletics
Chair, Yale College—Kingsley Memorial Trust Fellowship Committee
Member, President's Committee on University Security
Member, Board of Governors, Mor'y's: Member, Memorabilia Committee; Member, Nominating Committee

Ann Williams
Member, Advisory Committee on International Education
Trustee and Chair of Health Programs, Yale-China Association
Fellow, Saybrook College
ADVANCED PRACTICE REGISTERED NURSE NETWORK
There is rarely a free moment in nurse practitioner Clarice Begeman’s day as she directs the daily operations of the Body Shop, the school-based nursing facility at Wilbur Cross High School in New Haven, Connecticut. Throughout a typical week, Clarice Begeman, MSN/MBA ’90, administers routine physicals; treats injuries; educates adolescents on sexually transmitted diseases, family planning, and wellness; teaches young mothers about child safety and injury prevention; and acts as a nurse consultant at the School’s day-care center. On occasion, she is also invited to speak about the work of a nurse practitioner to students interested in pursuing careers in health. During one of these talks Clarice explains that “In order to effectively care for patients, you have to ask plenty of questions.”

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"Nursing practice is holistic," says Clarice. "You may be treating a sprained ankle, but at the same time you are also asking about what's going on in the patient's life. The psychiatric and social components are a vital part of effective care, especially in school-based nursing. Through continual probing and careful listening we may find out about violence in the home, depression, bad diet habits, substance abuse, and risk of exposure to sexually transmitted diseases. The knowledge we gain enables us to address these health risks before they become critical."

Clarice is one of 68 nurse practitioners who are advancing patient care through science by participating in practice-based research as part of the Advanced Practice Registered Nurse Network (APRN). Waiting for her next patient visit, Clarice studies a folder of information that she recently received from APRN. Among the forms in the folder is a survey tool that asks for a detailed account of her weekly workload. The feedback Clarice and other APRN members provide will help develop knowledge about the role of the APRN in urban and community-based primary care, which in turn will help develop better evidence to APRN practice. "I feel it is important to be a part of this network," says Clarice, "because nurses need to learn more about what their colleagues are doing, and to apply what they learn to their own practice. APRN is a great help in that regard because it asks the types of questions that nurse practitioners should be asking of one another, but often do not have the time or the resources to do so."

Practice-based research networks are made up of clinicians who are affiliated with one another for the purpose of studying clinically relevant issues. APRN is the first practice-based research network that conducts and facilitates research relevant to APRN primary care practice. Terry Deshefy-
Longhi, inaugural APRNet Project Manager, explains the need for a practice-based research network for APRNs. "APRNs have not had a research network of their own in which they could determine the focus and methods of research inquiry. Most networks to date have been governed by the physicians who support them, and the questions of interest to other primary care clinicians such as APRNs have generally not been pursued. As a result, little useful data exists on the practice of APRNs, especially with regard to those aspects of APRN practice that go beyond comparative analyses of the substitution of APRNs for physicians."

The aim of APRNet is to answer vital questions about APRN practice that will inform nursing practice, policy, and education. "We are developing new knowledge about patient populations that have traditionally had the most difficulty gaining access to good health care," says Dr. Margaret Grey, Associate Dean for Research Affairs at YSN, who directs APRNet. The establishment of a practice-based research network for APRNs has been one of Dr. Grey's goals since her faculty days at the University of Pennsylvania where she assisted with the development of the first network of nursing practices, Penn Nursing Network. In 1996, Dr. Grey received funding to convene a Conference on Nursing Research Networks held in Orlando, Florida, which brought together for the first time experts in primary care nursing practice and research, in computer management of large nursing databases, and in primary care research networks from the medical community. At this conference, the major APRN groups voiced their strong support for the development of an APRN research network. On the basis of this support, Dr. Grey submitted a proposal requesting funding from the Agency for Healthcare and Research Quality (AHRQ) in April 2000 to establish a regionally-based APRN research network in primary care settings in New England. Grey's proposal was the only one of the nineteen research network proposals that received funding. APRNet also received support from Dr. Grey's Executive Nurse Fellowship Program funded by the Robert Wood Johnson Foundation, with matching funds from YSN.

APRNet began soliciting members in February 2001, and has since made great progress. A biannual newsletter and an informational brochure for member recruitment have been developed. An APRNet Member Advisory Board has been established, as well as a Community Advisory Board comprised of consumers of primary health care who represent the economic and racial/ethnic diversity of APRNet's members' caseloads. An article on the logistics of creating APRNet, titled "Establishing a practice-based research network of Advanced Practice Registered Nurses in Southern New England," was published in the May/June 2002 issue of Nursing Outlook. Another manuscript analyzing demographic and practice data obtained from a survey of each APRNet member.

"The survey tools APRNet develops will be able to identify what the major areas of concern are in APRNet practice, and to use gathered data to influence health care policy."
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is currently being prepared. Presently, APRNet is conducting two AHRQ-funded studies. First, the "APRNS Survey Study" is a national survey of APRNs that details their caseloads and their interactions with patients. Second, the "Data Privacy and Confidentiality Study" is a survey of patients and care providers that documents their knowledge and concerns about privacy issues in primary care. Preliminary results for both studies should be available later this year. "It is hard to imagine that only two years ago APRNet was just an entity on paper," says Terry Deshey-Longhi.

The establishment of APRNet reflects an outstanding and continuing commitment from the founding universities—Yale University, Boston College, University of Connecticut, University of Massachusetts at Amherst and at Worcester, and the University of Rhode Island. "Without the forward thinking of these institutions' administrators, APRNet would not be a reality," says Dr. Grey. Because of this cooperation, APRNet membership covers most of Southern New England, enabling APRNet to conduct primary care research in largely minority and underserved populations in urban and rural settings throughout the region.

Much of APRNet's progress is due to the enthusiasm and dedication of its members. "Partaking in APRNet research helps to guide my thinking about my practice in a more constructive and orderly way," says Nadine Seltzer, an APRN who manages Saint Joseph's Family Life Center in Stamford, Connecticut. The Center provides health services to adults and children over the age of twelve who are uninsured and who are without the financial resources to afford medical care. "Doing a complete assessment of every aspect of my practice forces me to continuously re-evaluate how I care for patients, and to incorporate all the elements of wellness into each patient visit," explains Nadine.

Many of Nadine's patients are immigrants, a number of them undocumented. "These are patients for whom language and financial barriers have often meant a barrier to proper health care," says Nadine. "With many of our patients we find that there have been significant gaps in care because they have no insurance. A number of our patients who live with diabetes, or hypertension, or asthma, have let their illness go unmanaged for extended periods, thus leaving themselves exposed to enormous health risk."

Along with Mary Beth Fessler, the other APRN at Saint Joseph's, Nadine has done much to establish a trusting relationship with patients who often come to her with very little trust in the health care system. "So much depends not only on what we say, but on how we say it," explains Nadine. "It is up to us to make our patients as comfortable as possible. Many of our patients feel ill-at-ease in voicing their health concerns in English, so we try to speak to them in their native language." Both APRNs at Saint Joseph's are multilingual, able to communicate with patients in Spanish, French, and Creole. Nadine tells of a particular patient from Haiti whose attitude changed because he and his care provider found a common ground. "This man came in, and I could tell that he was apprehensive about being in an environment that was unfamiliar to him," tells Nadine. "But when I spoke his name properly, as it should be pronounced in his native Creole, his face lit up. Immediately, we established an understanding. It was a wonderful thing to see. Sometimes just a word or two can make all the difference."

Nadine acknowledges that while her practice is unique, it shares many of the essential elements of good patient care with the other practice sites that are part of APRNet. "Nurses need to learn from one another," she says. "Broad-based research into what APRNs do will enable us to tap into each other's strengths, our knowledge base, and our resources, and to improve care for patients that are poor, vulnerable, and underserved—those who need our help most."
"APRNet is enabling us to paint a clear picture of how APRNs care for patients," explains Terry Deshefy-Longhi. "In our surveys we ask how many patients our members see every week, how many people are on staff in their practice, the actual time they spend with each patient, and the follow-up procedures for every patient visit. We also compile data on how clinicians are assessing patients. We ask if they are looking at cognitive impairment; developmental/functional impairment; mood behavior problems; substance abuse and other risk factors; and what kinds of preventative counseling our members provide."

APRNet is also in the process of developing a survey tool to gather data from clinicians and patients about confidentiality issues. "Our members are concerned with such issues as electronic data storage, the use of fine print on medical documents, and the sharing of information about adolescent patients with parents," explains Deshefy-Longhi. "The survey tools APRNet develops will be able to identify what the major areas of concern are in APRNet practice, and to use the gathered data to influence health care policy."

Dr. Grey explains that APRNet has the potential to improve APRN practice on national and international levels. "The vision of APRNet is that quality primary health care will be universal, particularly for underserved populations in under-resourced areas," says Dr. Grey. "While our network's focus thus far has been on southern New England, APRNet's success helps us to set the standard for the development of similar networks across the country, and possibly in other parts of the world. APRNet offers APRNs in different geographic areas and practice settings the tools to stay connected, and to learn from one another."
The YSN Experience,
the Fabric of Family

An ancient Chinese proverb states that "learning is a treasure that accompanies its owner everywhere." Learning nursing at Yale is a treasure that has accompanied generations of YSN graduates throughout their careers, and has guided them to great accomplishments.

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The School’s core values help shape the YSN experience, and continue to help YSN graduates make significant contributions to advancing health care. Maureen O’Keefe Doran, MSN ’71, outgoing Chair of the Association of Yale Alumni, and the 2002 recipient of YSN’s highest award, the Yale School of Nursing Medal, agrees. “One of the School’s key strengths, and something that has always impressed me about YSN, is its unwavering commitment to excellence in education,” says Maureen. “YSN faculty continue to consist of superb educators who are dedicated researchers and clinical practitioners. In these capacities the faculty serve as superb role models for YSN students.”

The YSN experience also has this distinguishing benefit: it enriches the fabric of family relationships and often inspires the younger generation to follow in the footsteps of their elders. Maureen Doran has always been a role model for her daughter, Alison Doran, and has cultivated in her the same curiosity and passion for nursing that has helped Maureen excel in her career. “A YSN education contributes to how one views the world,” says Maureen. “It has been a great joy for me to share that view with my daughter, Alison.” Alison will be entering the YSN GEPN program this fall. She explains that her mother’s frequent praise of YSN influenced her decision to study nursing at Yale. “Over the years, my mother instilled in me the notion that her education at YSN has allowed her to grow in her career in ways that may not have been possible had she attended another institution,” says Alison.

Katherine Upchurch Huntington, BS ’32 (left) who attended YSS during the deanship of Annie W. Goodrich, inspired her daughter, Dr. Debbie Ward, MSN ’77, (right) to pursue nursing at Yale.
Alison shares her mother's opinion that the students and faculty at YSN make the YSN experience unique and highly rewarding. "YSN's reputation as one of the premier graduate nursing institutions in this country brings the best faculty and students to its programs. I was able to see this for myself upon my initial visit to YSN. I was astounded at the quality and caliber of the students and faculty I met, and I know that some of the most enriching experiences I will have will come from my interaction with those people."

"Knowing Alison's keen interest in the sciences, her leadership skills, and her altruistic mindset, her decision to study nursing at Yale does not surprise me," says Maureen. "But it thrills me because I know what a superb education awaits her."

It has been said that the YSN community shares a common language. But when the younger generation chooses to follow in their elders' footsteps by studying nursing at Yale, that common language also weaves itself into the fabric of family relationships. Dr. Rhoda Lee Sun, MSN '58, found this to be so. Explaining that while her relationship with her niece, Virginia Sun, had always been close, that relationship blossomed following Virginia's decision to study nursing at Yale.

Virginia accompanied Dr. Sun on a recent trip to the People's Republic of China to educate Chinese nurses about Western nursing methods. The trip brought about a meaningful revelation for Dr. Sun. "As I watched Virginia deliver a speech in Mandarin to nurses in Nanjing about her education at YSN, I was extremely pleased at how much closer the experience of being nurses at Yale has brought us. And I felt honored that my niece had chosen, in some small measure, to follow in my footsteps."

Virginia Sun graduated from the YSN GEPN program in spring 2002. Her decision to study nursing at Yale was influenced by Dr. Rhoda Lee Sun. "I have frequently heard my aunt speak about the high quality of nursing education at YSN," says Virginia, "but until I enrolled in the GEPN program, I had very little idea about what advanced practice nurses actually did. When I was growing up, my aunt was just 'Aunt Rhoda' to me, and the fact that she was a leader in her profession had very little to do with how I related to her." According to Virginia, the relationship with her aunt acquired a new dimension when she enrolled at YSN, because the two women began to consult one another about issues in nursing. "My aunt is the first to admit that she is not as up to date as she would like to be on the latest trends in nursing science," explains Virginia. "This is where I am able to fill the gap." Tracing the influences in the other direction, Dr. Sun's experience in culturally competent health education has helped Virginia in defining her personal mission to work with Asian American cancer patients after her graduation from Yale. "During our trip to the PRC, I saw first-hand the impact of my aunt's work on an entire population.

Continued on page 22

"YSN faculty continue to consist of superb educators who are dedicated researchers and clinical practitioners. In these capacities the faculty serve as superb role models for YSN students."
of nurses who are trying to find a new direction for the nursing profession in a rapidly reforming PRC,” says Virginia. “Aunt Rhoda’s work epitomizes nursing leadership, and has inspired me to pursue my own interests in nursing.”

Dr. Sun and Virginia agree that YSN’s emphasis on the development of leadership skills has prepared them well for advanced careers in nursing. Virginia recalls the first time she heard Dean Catherine Gilliss speak about YSN’s role in cultivating nursing leaders. “Dean Gilliss’ words really brought home for me the significance of the professional role I had chosen. I understood that with the knowledge and experience I will gain at YSN, I will be able to go out into the community and really make a difference in people’s lives.”

According to Dr. Debbie Ward, MSN ’77, the continuous effort to expand the boundaries of the profession is what has distinguished Yale nurses as leaders. “What has remained unchanged at YSN is the caliber of its students and faculty who continue to be dedicated to advancing their craft,” says Dr. Ward. “Their dedication to nursing has not wavered.” Having graduated in the first YSN GEPN class, Dr. Ward is currently Associate Professor and Acting Director of the de Tornyay Center on Healthy Aging at the University of Washington School of Nursing. Dr. Ward is the daughter of Katherine Upchurch Huntington, BN ’32, who studied nursing at Yale when Annie W. Goodrich was Dean of the School. Dr. Ward recalls frequent conversations with her mother about the different challenges Yale nurses faced throughout YSN’s history, and how overcoming each new set of challenges has helped the school to continuously evolve. “Throughout YSN’s history, there have been numerous political battles, including threats to change and to eliminate programs—conflicts that reflected the class and gender struggles of the times,” says Dr. Ward. “Annie Goodrich and her contemporaries were particularly skilled in navigating those tricky waters, and have passed these skills to Yale nurses who succeeded them.”

Annie Goodrich and her contemporaries were passionate about their profession, and about the mission and the core values of the school. They were determined to advance the role of nursing in society. Subsequently, each new generation of Yale nurses inherited from the School’s founders political savvy, a strong sense of social responsibility, and a passion for their craft—character qualities that have helped them to set the direction for the advancement of nursing science. To focus on what has always been true of a place is to find its essence. And the essence of YSN is its people, past and present, whose ideas continue to shape how the world views nurses and how nursing science impacts the world.
The previous issue of *Yale Nursing Matters* introduced a new feature, a historical timeline that shed light on some of the important accomplishments of Yale nurses throughout YSN's history. However, the scope of contributions by YSN faculty and deans to the community and to Yale University is incredibly broad, and while concentrating on some accomplishments, the timeline neglected to bring to light a number of others. Initiatives such as YSN's early recruitment of men into nursing, the expansion of the School's clinical reach over time, and the diversification, expansion, and stabilization of the School's finances, all may have been explored in further detail in the timeline.

We would like to take this opportunity to correct information that had been misstated in the timeline. In the series of photographs on page 5, one indicated it was of former Dean Elizabeth Seelye Bixler, while it was actually of pediatric nursing students. The text of the timeline on pages 6-7 neglected to clarify that the Center of Excellence in Chronic Illness Care was conceived during Dean Judith Krauss' term, with Ruth McCorkle recruited as its first director in 1998. Similarly, the Center for Health Policy was conceived under the leadership of Dean Krauss, with Sally Cohen named as its first director. During Dean Catherine Gilliss' term, 'Ethics' was added to the Center's title, the mission was revisited to fully encompass ethics, and the Center became a free-standing entity. Under the leadership of Dean Krauss, YSN also established the School's first Office of Research Support. In highlighting the history of the establishment of four endowed chairs at YSN, it is important to clarify that three endowed chairs were established between 1985 and 1998, and one endowed chair was established in 2001. Former Dean Donna Diers was named to the first endowed chair in 1990, when Dean Krauss negotiated with then Yale University President A. Bartlett Giamatti to convert the Annie Goodrich Endowment from a visiting professorship to a permanent chair. The Independence Professorship was established in 1990, with Margaret Grey named as the first incumbent in 1993. The Helen Porter Jayne and Martha Prosser Jayne Professorship was established in 1995, with the first incumbent, Ann Williams, named in 2001. And the Florence Schorske Wald Professorship was established in 2001, with Ruth McCorkle named the first incumbent.

The link between our past and our future is an important element of YSN, and a source of pride for all who study nursing and conduct nursing research at Yale. The scholarship section that follows is a testament to the intellectual talents and dedication of our faculty. We hope that you enjoy reading this issue, and we look forward to continuing to keep you informed of the School's accomplishments, past and present, and the impact of these accomplishments on the health and well being of society.
FACULTY PUBLICATIONS

ALEXANDER, IVY


BEAL, MARGIE

Steinberg, D. & Beal, M. (In press). Homeopathy and women’s health care. Accepted for publication in the *Journal of Obstetric, Gynecologic, and Neonatal Nursing*.


BURST, HELEN VARNEY


CHYUN, DEBORAH


**COHEN, SALLY**


**DIXON, JANE**


**FUNK, MARGE**


**GILLIS, CATHERINE**


**GREY, MARGARET**


FACULTY PUBLICATIONS


GUSTAFSON, ELAINE


HAMRIN, VANYA


KNAFL, GEORGE


KNAFL, KATHLEEN


Krauss, J. (2002). The relief of suffering in mental illness. Archives of Psychiatric Nursing, 16 (2), 49–50


McCorckle, Ruth


FACULTY PUBLICATIONS


Milone-Nuzzo, Paula


Minarik, Pamela


Moriarty-Daley, Alison


Olsen, Douglas


Olsen, D. (2001.) [Response to case study]. Nursing Ethics, 8 (6), 559–564.


Pasacreta, Jeanne


Pasacreta, J. Recent events highlight importance of mental health services. Editorials printed in the New Haven Register (September 2001) and Nursing Economics (October 2001) following the events of September 11th.

Pellico, Linda


Ryan-Krause, Patricia


Sadler, Lois


**SANTACROCE, SHEILA**


**SCAHILL, LARRY**


**SWARTZ, MARTHA**


**WILLIAMS, ANN**


Funded Research

Ament, L. (Principal Investigator). Evening Primrose Oil as a Cervical Ripening Agent. Funded by Yale School of Nursing (Intramural grant), 2000-present, $4,000

Bova, C. (Principal Investigator). Fennie, K., Williams, A., Dieckhaus, K. Development of an Instrument to Measure Patients’ Trust of Health Care Providers. Funded by The Program for the Study of Health Care Relationships/Donaghue Foundation, 10/15/01-10/14/02, $41,142

Chyun, D. (Principal Investigator), McCorkle, R., Mellokas, G. Psychosocial and Behavioral Outcomes of Screening for Silent Cardiovascular Disease in Type 2 Diabetes. Funded by Yale School of Nursing (Intramural grant), 2000-present, $4,500

Dieckhaus, K. (Principal Investigator), Williams, A., Bova, C., Fennie, K. Admission Enhancement Using an Internet-based Reporting System and Rapid Provider Feedback. Funded by The Program for the Study of Health Care Relationships/Donaghue Foundation, 10/15/01-10/14/02, $2,222 (subcontract with University of Connecticut)

Cohen, S. (Principal Investigator), Krauss, J. Program for the Study of Health Care Relationships. Funded by the Donaghue Foundation, 7/1/00-12/31/03, $2,926,095

Funk, M. (Principal Investigator). Arrial Fibrillation in Patients After Cardiac Surgery. Funded by NIH/NIHHG (K24HL04261), 9/1/99-8/31/04, $92,288

Gallo, A. (Principal Investigator), Knaff, K. Parents’ Interpretation and Use of Genetic Information. Funded by NIH/NIHHG, 8/17/01-7/31/05, $1,05,067 (subcontract with University of Illinois)

Gilliss, C. (Program Director). The Beatrice Renfield/Yale School of Nursing Clinical Research Initiatives. Funded by the Beatrice Renfield Foundation, 3/6/02-2/28/06, $250,000

Gilliss, C. (Program Director). Lyder, C. The Elder Prime Program. Funded by Tower One Foundation, 7/1/99-8/31/03, $90,000

Given, B. (Principal Investigator), McCorkle, R. Family Home Care for Cancer: A Community Based Model. Funded by NIH/NCI (R01CA79280), 4/1/99-10/31/02, $285,568 (subcontract with Michigan State University)

Grey, M. (Principal Investigator), Olsen, D., Dixon, J. APNNet: NAMCS Data and Privacy/Confidentiality Issues. Funded by NIH/AHRQ (U01HS1196), 9/30/01-9/30/02, $150,000

Grey, M. (Principal Investigator), Funk, M., Williams, A., McCorkle, R. Self-Management Interventions for Populations at Risk. Funded by NIH/NINR (R29NR5706), 9/15/01-8/31/04, $742,350

Grey, M. (Principal Investigator), Funk, M., Mellokas, G., Chyun, D., Sadler, L., Williams, A., Scalisi, L. Nursing Intervention for Youth with Chronic Illness-Disability Supplement. Funded by NIH/NINR (R01NR04005-05S1), 3/1/01-5/31/03, $162,000

Grey, M. (Principal Investigator), Caprio, S., Gilliss, C., Knaff, K., Mellokas, G. Preventing Type 2 Diabetes in High Risk Teens. Funded by NIH/NIDDK (R15DK5248), 9/30/00-8/31/03, $313,342

Grey, M. (Principal Investigator), Tamborlane, W. The Effect of Continuous Glucose Monitoring System on the Incidence of Hypoglycemia and Metabolic Control in Children and Adolescents with Diabetes. Funded by Juvenile Diabetes Foundation, 5/1/00-4/30/05, $1,440,807

Grey, M. (Principal Investigator), Knaff, K., Gilliss, C., Monsod, T. Nursing Intervention for Youth with Chronic Illness. Funded by NIH/NINR (R01NR04009), 3/1/01-5/31/03, $2,053,476

Katz, D. (Principal Investigator), McCorkle, R. Meditation and Massage at the End of Life. Funded by NIH/NINR (R28NR6009), 9/30/01-8/31/03, $14,415 (subcontract with Griffin Health Services)

Knaff, K. (Principal Investigator). Dixon, J., Grey, M. Assessing Family Management of Childhood Chronic Illness. Funded by The Study for Health Care Relationships/Donaghue Foundation, 10/15/01-10/14/02, $49,438

Knoff, T. (Principal Investigator), DiPietro, L., Insegna, K. Evaluation of an Exercise Intervention on Physical Function, Symptom Distress, and Bone Mass in Premenopausal Women with Breast Cancer Treated with Adjuvant Chemotherapy. Funded by Yale School of Nursing (Intramural grant), 2002-present, $5,000

Knoff, T. (Principal Investigator). Professorship of Oncology Nursing. Funded by American Cancer Society, 7/1/02-6/30/04, $105,000

Lyder, G. (Program Director). Yale Program for the Advancement of Chronic Wound Care. Funded by Bristol-Meyers Squibb/ConvaTec, 4/1/02-9/30/04, $1,000,000

McCorkle R. (Principal Investigator). Interventions to Enhance Quality of Life Outcomes in Ovarian Cancer. Funded by Yale School of Nursing (Intramural grant), 2002-present, $5,000

McCorkle, R. (Principal Investigator), Knaff, K. Adaptation and Quality of Life Among Long/Term Survivors of Cervical Cancer. Funded by the NIH/NCI/Connecticut Department of Public Health, 10/31/00-12/31/02, $282,901

McCorkle, R. (Principal Investigator). Living with Lung Cancer: The Women's Perspective. Funded by the Oncology Nursing Foundation, 7/1/06-6/30/02, $11,000

Mellokas, G. (Principal Investigator), Grey, M., Chyun, D. Self-Care Interventions for Black Women with Type 2 DM. Funded by NIH/NINR (R01NR05431), 7/1/01-3/31/06, $1,593,367

Milone-Nuzzo, P. (Principal Investigator). Focus Groups to Determine Perceptions About Physical Activity in Three Culturally Homogeneous Groups. Funded by Yale School of Nursing (Intramural grant), 2002-present, $4,070

Pasacreta, J. (Principal Investigator). Psychosocial Sequela to Predisposition Genetic Testing. Funded by NIH/NICD (K07CA76959), 9/13/00-8/31/03, $254,880

Sadler, L. (Principal Investigator), Moriarty, T., Sadler, L. Intensive Care for Teens with Negative Pregnancy Tests. Funded by the Donaghue Foundation, 1/1/01-12/31/02, $739,073

Sadler, L. (Principal Investigator), Grey, M., Swartz, M. Transition to Motherhood in Teen Mothers in High School. Funded by NIH/NIMHD (R15HD39170), 8/1/00-7/31/03, $165,560
Scalill, L. (Principal Investigator). Hamrin, V., Findley, D. Parent Management Training for Children with Tourette Syndrome. Funded by NIH/NINR (R51NR07537), 5/1/01-4/30/03, $163,500


Schwartz, L. (Principal Investigator). USAF Ranch Hand Study. Funded by Vietnam Veterans Assistance Fund, 10/26/01-9/30/02, $60,000

Schwartz, L. (Principal Investigator). Ecological and Health Consequences of the Vietnam War. Funded by NIH/NIEHS (R03ES1168), 9/14/01-9/30/02, $40,001

Schwartz, L. (Principal Investigator). McCorkle, R., Ross, C. The Vietnam Nurse Health Study. Funded by TriService Nursing Research Program, 7/20/00-7/29/03, $140,688

Talley, S. (Principal Investigator). Understanding Changes in Primary Care Practices with Seriously and Persistently Mentally Ill Clients. Funded by Yale School of Nursing (Intramural grant), 2001-present, $3,000.

Williams, A. (Principal Investigator). Nursing Intervention to Improve Antiretroviral Adherence. Funded by NIH/NINR (R01NR047444), 9/30/07-8/31/02, $1,544,102

Zawalich, W. (Principal Investigator). Phosphoinositide Hydrolysis and Beta Cell Secretion. Funded by NIH/NIDDK (RO1DK41290), 7/1/99-6/30/03, $1,390,021

FUNDING TRAINING

Ament, L. (Program Director). Lyder, C., Milone-Nuzzo, M. Nurse-Midwifery Graduate Clinical Education. Funded by HRSA/Division of Nursing, 7/1/01-6/30/04, $865,469

Gilliss, C. (Program Director). Professional Nurse Traineeship Funded by HRSA/Division of Nursing, 7/1/01-6/30/02, $125,685

McCorkle, R. (Program Director). Interdisciplinary Research Training in Breast Cancer. Funded by the Department of Defense, 7/1/00-6/30/04, $749,432

Talley, S. (Program Director). Psychiatric Mental Health Nursing. Funded by HRSA/Division of Nursing, 7/1/01-6/30/04, $443,804

Williams, A. (Program Director). Connecticut AIDS Education and Training Center. Funded by New England AIDS Education and Training Center/University of Massachusetts, 7/1/01-6/30/02, $132,309

Williams, A. (Program Director). AIDS Counseling and Testing Project/Perinatal Training Project. Funded by Connecticut Department of Public Health, 1/1/01-12/1/02, $200,000

Williams, A. (Program Director). Targeted Provider Education Demonstration Project. Funded by New England AIDS Education and Training Center/University of Massachusetts, 9/30/00-9/29/02, $39,809

FUNDING DOCTORAL AND POSTDOCTORAL RESEARCH

Chen, C. Nutritional Status of Community Dwelling Elders. Funded by NIH/NINR (F31NR08072), 6/1/02-5/31/04, $75,574

Kanner, S. The Response of Children to a Sibling with Diabetes. Funded by NIH/NINR (F31NR07590), 9/27/99-6/26/02, $86,659

Lacey, K. Diabetes and Cardiac Risk Factor Management After MI. Funded by NIH/NINR (F31NR07532), 11/15/98-11/14/02, $121,572

Lee, S. Treatment Decision-Making for the Primary Treatment of Early Stage Breast Cancer in Chinese-American Women. Funded by American Cancer Society, 8/1/02-7/31/04, $30,000

Porter, P. Breast Biopsy and Distress: Testing a Reiki Intervention. Funded by American Cancer Society, 8/1/02-7/31/04, $30,000

Sullivan-Bolyai, S. Homeward: A Support Intervention for Mothers. Funded by Friends of the National Institute of Nursing Research (NINR), 11/1/01-9/30/02, $20,000

Sullivan-Bolyai, S. The Parent Expert: A Post-Diagnosis Intervention. Funded by NIH/NINR (F31NR07503), 8/1/00-8/15/02, $77,604

Whittemore, R. A Nurse-Coaching Intervention to Facilitate Lifestyle Change. Funded by American Association of Diabetes Educators, 12/1/01-11/30/02, $10,000

Whittemore, R. An Intervention for Lifestyle Change in Type 2 Diabetes. Funded by NIH/NINR (F31NR07822), 9/1/01-8/31/03, $95,485
Knowing what I know now, would I do it again?

Would I choose nursing, over, say, journalism or miniature making, teaching English or playing cocktail piano in smoky bars? Or even professional basketball. Tall women now have interesting career choices....

Would I choose again the terror of caring for my first patient?

Her name was Mrs. Gibson and she was in Room 108 on the south wing of Presbyterian Hospital in Denver and she was facing surgery to remove one of her very large breasts and I was 19 years old and nearly breastless in my spanking new uniform and cap. I was supposed to bathe her and comforting.

Would I choose my first job sensibly? Even before I had passed State Boards (now NCLEX) I was to be the Chief Nurse at a Campfire Girls camp in the mountains above Denver. My first case was tick removal, which I knew how to do with a lighted cigarette. My second was acute homesickness, easily cured with a phone call to Mom. My third was to hold the head of the handsomest wrangler as I removed a bit of something from his eye in full view of 60 pre-teen girls.

I've never been so popular before or since.

Would I again choose psychiatric nursing? Would I succumb to the intricacies of how the mind and person works, from my first experience as a student nurse in a huge state hospital in Colorado on a men's ward where the treatments were either electric or insulin shock?

Would I choose again to emigrate across half the country to the Yale Psychiatric Institute (YPI) to study psychiatric nursing and practice it at a world class hospital then changing the way it thought about nursing under the vision and leadership of the late Anna T. Baziak (tsw '57). She was Director of Nursing, only 5 years older than I was. Would I even recognize that I was in a World Class environment with psychiatrists who wrote definitive books and nurses who got federal research grants?

And then as a faculty member, would I choose again to mine my own and other's experience to begin to build a science of practice? Would I even have known back then that's what we were trying to do?

Would I have chosen to try to speak about the personal experience it is to care? Would I have chosen to live in the vast range of scientific, political and policy issues, the issues of the rights and privileges and obligations of women professionals? Would I have chosen nursing if I had known how deep the sexism and nursism and public discrimination and invisibility are? And how much fun it would be to fight those monsters?

Would I have chosen nursing if I had known the excitement of pushing forward the boundaries of human service and participating in changing the health care system, shaping it?

Would I have chosen nursing if I could have anticipated the experience of being in the company of those who do this work?

You betcha.

Wouldn't you?

And if I had it to do once more, knowing what I know now, I would fall in love with nursing all over again.
The Yale School of Nursing Medal was created in 2002 and is the first recognition award of its kind established at the School. The Medal is awarded to selected individuals who have contributed their time, resources, and talents to advance the School’s mission, to preserve and to carry forward the School’s core values, and to raise public awareness of YSN’s important role at the University, in our community, and around the world. Through their extraordinary efforts, these individuals have helped to build stronger linkages between Yale University and YSN. Their example has enriched YSN and the University community, and has helped to define nursing leadership.

During this inaugural year, the Yale School of Nursing Medal was awarded to three individuals:

**Saundra Thomson Bialos, MSN ’71**, has established the finest example of the leadership Yale University could expect from a Yale Nurse. Sandy helped to lead YSN’s efforts as Co-Chair of the “And for Yale” Campaign. Under her leadership, YSN entered a new phase of commitment to leadership, scholarship, and research. It is due, in part, to her unique gifts and her contributions in service that YSN and Yale University enjoy such a close partnership, bringing nursing and the vision of the University closer together.

Maureen O’Keefe Doran, MSN ’74, has generously given of her extraordinary leadership talent and her time to YSN and to the greater Yale University community. YSN celebrates her accomplishments as Chairperson of the Association of Yale Alumni throughout the University’s historic year-long Tercentennial Celebration during 2001. In a year mixed with celebration and tragedy, Maureen’s sensitive leadership crafted a more cohesive relationship between YSN and the University.

**Donna Kaye Diers, MSN ’64**, was the Dean of YSN from 1972 to 1984. She forged new alliances with the University, expanded YSN’s intellectual resources, and increased the School’s visibility on Yale campus and in the community. In her address to the Yale Corporation Council in February of 1981, Donna noted that “nursing is a part of Yale, contributing to its grandeur, its reputation, its standing, its glory, its status, its power, its presence...” We could not have said it better.