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Cultural Diversity in Nursing Practice Continues...

Alumnae/i Fund Contributor List 1992-1993

Susan Michaels-Strasser '95 (r) with daughter, Chloe, in Zimbabwe
From the Dean

It was not very long ago that I wrote to each of you to kick off our Annual Fund appeal and give you news of YSN. This issue of Yale Nurse provides you with more detail of all that good news. I hope you are able to capture the sense of accomplishment and anticipation reflected in these pages. This is truly a time of renewal and adventure for YSN. The place is alive with new ideas and programs.

This issue also carries the first of five annual updates on the YSN Capital Campaign. The Campaign will have two distinct opportunities for giving — The 75th Anniversary Fund and the Named Gift Fund. The 75th Anniversary Fund, described in this update, is designed for YSN reunion year giving. The Named Gift Fund is designed primarily for corporate and foundation giving as well as for individual philanthropists who are able to make a substantial targeted gift. The brochure for the Named Gift Opportunities is still under development and will be shared with you at a later date.

I am delighted that Sandy Bialos '71 has agreed to Chair the YSN Capital Campaign. As many of you know, Sandy is a past Chair of the Association of Yale Alumni (AYA) and has considerable experience to bring to this effort. Sandy’s classmate, Maureen Doran ’71, has agreed to co-chair the 75th Anniversary Fund effort. Maureen now serves as a member of the Board of Governors of AYA. Sandy and Maureen are already hard at work getting the Anniversary Fund, the first phase of the Campaign, underway. Our goal is to raise $75,000 each year for the next five years from reunion classes to create a large expendable scholarship gift fund for students. As usual, the challenge is to do this without diminishing Annual Fund giving.

I don’t usually use this column for fund-raising purposes; but, I want to convey our seriousness of purpose in this Campaign for YSN and our absolute need for your support. Among the many challenges that faced YSN in 1985, when I assumed the deanship, was the need to establish long-term financial stability. There were programmatic challenges to be sure and we have met many of them. We have developed a plan for fiscal responsibility within our annual operating budget which has allowed us to move forward with new programs and to revitalize existing programs. All of this has gained us hard-won respect and position within the University. Evidence of University support can be seen in the recent tenure appointment of Margaret Grey to an endowed professorship; and, with the appointment of the new Vice President for Finance and Administration, Joe Mullinix, the University has renewed efforts to find a permanent building for the School by July, 1995. But, true financial stability still alludes us. This will only come with a successful Campaign.

Yale has not had a Capital Campaign in a long time and it will be a long time before it launches another one. So, we have this one five year window of opportunity to put YSN on a firm financial foundation which will weather the test of time. Many of you may believe that you don’t have a significant role to play in this effort. But you do.

First, we need your contribution to the 75th Anniversary Fund, which we will seek on the occasion of your next reunion year. Evidence of alumnae/i support in terms of participation and actual dollar amounts is key to attracting more substantial named gifts from corporate, foundation,
Margaret Grey Returns to Launch YSN's Doctoral Program

Margaret Grey, DrPH, FAAN, CPNP, will join the faculty at YSN on January 1, 1994, as Independence Foundation Professor of Nursing and Associate Dean for Research and Doctoral Studies. A YSN graduate of the Class of 1976, Margaret returns to Yale from the University of Pennsylvania where she has been an Associate Professor of Nursing and Director of the Primary Care Graduate Program. She has also been the Chairperson of the Family and Community Health Division at Penn's School of Nursing. Her research has focused on the natural history of adaptation to chronic illness in childhood, with an emphasis on children with diabetes mellitus. Recently, she has begun work on an intervention project designed to help children identified as being at risk for adjustment problems. As Immediate Past President of the National Association of Pediatric Nurse Associates and Practitioners, Margaret was active in helping to form the Clinton Health Care Proposal. In addition to these endeavors, she maintains a clinical practice working with children with diabetes in New York City. Her responsibilities at YSN will include oversight of all research activities in the School and development and implementation of the new Doctoral Program.

According to Margaret, the School of Nursing will admit the first students to its newly approved Doctor of Nursing Science (DNSc) Program in September, 1994. The Program is designed to prepare expert clinical scholars who will advance knowledge development for nursing by conducting research on nursing phenomena and by leading the next generation of advanced practice nurses. Graduates of the program are expected to assume leadership roles in transmitting knowledge to advanced nurse practitioners and in extending the theoretical base of nursing through shaping responses to practice, political, economic, ethical, and other health care issues. The program has two focus areas, based on the faculty's areas of expertise:

- Human responses to chronic illness, and
- Family and social factors in primary care

Course work will be taken in the areas of philosophy of science and transmission of knowledge, methods of inquiry, and cognates of interest to the students' area of study. Further information about the program and application materials can be obtained by contacting the YSN Student Affairs Office at 785-2389.

Margaret's return to YSN comes at an exciting time for the School. "Given Yale's historical excellence in research and practice, the doctoral program is a logical extension of current offerings and will provide an opportunity for significant growth in student and faculty research," she states.

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Plans Underway for Reunion Weekend Program, June 2-4, 1994

As would be expected, this year's Alumnae/i Weekend theme MUST BE health care reform. Although an exact title is yet to be determined, it is clear that the many issues resulting from President and Mrs. Clinton's Health Care Reform Plan need to be clearly understood, as they relate to us both as nurses and as health care consumers.

This year's YUSNAA Board has many ideas for speakers, panels, and workshops. We are working hard to allow for leisure time to visit and renew ties. In planning, we have seriously considered the results of the survey from the last Yale Nurse, in which we asked alums to prioritize those factors that determine attendance. Many respondents listed "a desire to visit with friends" and "program content" as major influences on their decision to return to New Haven for reunions.

As the Board begins to make ITS plans for the weekend, so should YOU! If visiting with friends is important to you, call several classmates and come together. If program content is your interest, we can guarantee a program that will be not only informative, but also relevant. Health care reform is now, so join us in June and be informed.
Margaret S. Wacker has joined the YSN faculty as Program Director of the Adult Psychiatric-Mental Health Nursing Program at YSN. Maggie, as she is known informally, has been a psychiatric nurse for 31 years. She graduated from NYU with a BSN; earned an MS in psychiatric nursing from Adelphi University; an MA in anthropology from SUNY, Stony Brook; and a PhD in nursing from NYU. She has spent 24 years in private practice, specializing in biofeedback and family psychotherapy, and most recently was on faculty at the University of Rhode Island where she opened the first biofeedback laboratory in a college of nursing. Biofeedback, which is Maggie’s primary research interest, is the process of learning to gain control of involuntary processes and is used in pain management, as treatment for anxiety, and for general relaxation purposes. Wholism also has held a fascination for her over the years and she has developed skill in therapeutic touch, accupressure, guided imagery, and visualization.

Maggie’s professional accomplishments include service on the Joint Commission for Interdisciplinary Affairs, an ANA appointment in Washington, DC. The thrust of the Commission’s work came from the need for mental health disciplines to improve their collaboration in the delivery of psychiatric care. Maggie also served at an ANA Working Conference on Psychopharmacology to determine the basic psychopharmacological knowledge necessary at the various levels of nursing, from basic to prescriptive authority. She has developed a neurotransmitter video with Bernice McKay ’79 which they plan to use on a research project concerned with psychopharmacology compliance. Other contributions have been around pain management. She recently participated in a working conference of the New England Regional Genetics Group. This conference was devoted entirely to pain management of patients in sickle cell crisis. Published proceedings will be forthcoming. Additionally, Maggie and YSN faculty colleague Leslie Nield-Anderson have developed a research project concerned with relaxation through alpha brain wave generation and pain management of patients in sickle cell crisis.

Maggie is married to a psychiatrist who works for Harvard Community Health of New England and she commutes to YSN from North Scituate, Rhode Island. Her 26 year old daughter, Wittie Olivia, is an actuary and her 31 year old stepson is a computer analyst with IBM. She and her family have summered on Martha’s Vineyard for a number of years, and she has many yarns to spin about the locals on the Vineyard. Her interest in both weaving and quilting has grown over the years and any spare time is spent relaxing with these pastimes.

YSN is delighted to have Maggie on board. Her sense of humor and sparkle are a welcome addition to the Adult Division community!
Orientation Week at a Glance

During the first week of school in September incoming and returning students alike had a chance to get acquainted through program offerings and social events scheduled to bring the YSN community together in an informative, yet relaxed atmosphere. The annual picnic held at Yale Golf Course as part of the festivities is a particularly nice occasion shared by faculty, students, and staff in a beautiful location. There is always plenty of food that week, with wine and cheese, coffee and donuts, hamburgers and hotdogs. What better way to start off the school year!


At the Yale Golf Course picnic (l to r) Paul Galatowski, guest of Roz Melnicoff, along with Brian Geyser and Julianne Seymour. Stephen Seymour and blanket join his mom for the picture.

Jerusalem Makonnen (l) shares a moment with faculty members Heather Reynolds and Sharon Robinson.

Rebecca Froines and Melanie Morris have a chance to chat.

Yale Golf Course was a great setting for new students (l to r) Melissa Brown, Sha Vickery, Rebecca Froines, and Tracy Jeffers to get to know each other.

MATCHING GIFTS - A Great Way to Enhance Your Gift to YSN

If you or your spouse work for a matching gift company, you may be able to double — or even triple — the amount of your gift to the Yale School of Nursing. There are over 1,000 companies nationwide that support higher education through their matching gift programs. You can find out if a company has a matching gift program by checking with the personnel office. The personnel office can provide you with a matching gift form to complete and send in with your gift to YSN. Matching gifts are an easy and effective way of increasing support for the School.
HEALTH CARE REFORM: A Nursing Perspective

As the national health care reform movement took shape this year, many members of the Yale-New Haven community were consulted, including two leaders in the nursing profession, Judy Krauss, Dean of the Yale School of Nursing, who also is a psychiatric mental health nursing specialist, and editor of the journal, Archives of Psychiatric Nursing, and Diana Weaver, Vice President for Nursing at Yale-New Haven Hospital and president-elect of the American Association of Nurse Executives (AONE), share their thoughts about health care reform, nursing education and practice.

Judy Krauss states, “Health care has not been this political since Medicare and Medicaid were passed. Anything that consumes this much of our gross national product should be political. This spring, I wrote the American Nurses’ Association (ANA) position paper on the psychiatric and mental health aspect of health care reform which was submitted to the Clinton health care task force. We advocated for inclusion and parity of mental health benefits along with general health benefits, and submitted a detailed plan for implementation.”

“I joined Virginia Betts, president of the ANA, in a private meeting with Mrs. Tipper Gore, who is taking the lead on the mental health aspects of reform. It was a rather informal meeting. We sat around the fireplace in her White House office, and she served us tea and coffee. About halfway through the meeting, Mrs. Gore kicked off her shoes and curled up in her chair. It was just like sitting around somebody’s living room, talking about health care reform. However, it was a very substantive meeting — we discussed the contents of the ANA position paper, talked about integrating mental health into primary care settings, primary care nursing, training and education of nurses.”

“I was also part of a group of about 30 deans of nursing from around the country who consulted with the health care team about educational reform. Currently, because most nurses work in hospitals, nursing education has disproportionately emphasized acute care education. We need to produce primary care providers and accelerate advanced practice nursing. That will shift the focus of nursing education more in the direction of community-based, ambulatory and primary care settings, yet maintain an adequate supply of acute care nurses. This administration will truly have a major impact on nursing education.

“The Clinton proposal is exciting because it is value-based. It is one of the few government policies in a long time to actually begin with a value statement. As a nurse, I have to say that the notion of universal access is extremely critical. And I daresay that most of the American public — whether they are providers or consumers of health care — can agree with it. While the political process could destroy it, I am optimistic that this plan will result in a significant positive change in health care delivery.”

Diana Weaver explains, “I am excited about the Clinton initiative and the move toward reform. It’s long overdue. The ANA, which is backing the Clinton plan, took the lead in crafting a statement about what nursing believed was appropriate and important in any health care reform scenario. Through AONE, I attended a forum of all the major nursing organizations in Washington in October to talk about how each of us views the changes from our various and unique perspectives.

“Probably the biggest sticking issue for the nursing organizations is the appropriate use of advanced practice nursing — both its provision and reimbursement. Initially, the Clinton reform movement did not talk a lot about “least-cost providers,” but AONE, the ANA, and other nursing groups have lobbied for specific language about advanced practice nursing. The American Hospital Association has backed us on that.”

“The primary reasons people seek a physician’s care are for a fever, cold, cough, or surgical follow-up care. These patients could initially be seen by a less expensive health care provider, with appropriate protocols for physician involvement. In general, this country has ignored the opportunities to use nurses effectively in advanced practice roles and to provide cost-effective primary care.”

“From my perspective, the reform movement will ultimately result in fewer nurses in hospitals, because more care will be provided in the community and at the primary care level. That is important for nurse executives and nurse educators to recognize. Historically, about 70 percent of nurses have worked in acute care hospitals, such as YNHH. We will have to figure out how to re-deploy these nurses. That effort will be a major challenge. The profession will have to emphasize a somewhat different set of skills. The acute, high intervention mentality is going to have to change. We need to prepare more nurses for community settings and educate and train them to be independent practitioners.”

“While I think there will be fewer nurses in hospitals, overall I believe there will be more need for nurses than ever before because nurses will finally be able to utilize all that they can do.”
Faculty Notes

James A. Fain, Associate Dean for Students, has been elected a Fellow of the American Academy of Nursing. He was inducted into the Academy in November of this year. Congratulations, Jim!

Marge Funk ’84, Associate Professor and Coordinator of the Cardiovascular Specialty; Janet Parkosewich ’85, Cardiac Clinical Nurse Specialist at Yale-New Haven Hospital (YNHH); and Cindy Johnson, Nurse Manager, YNHH, are the recipients of the Third Annual Critical Care Nursing Research Grant awarded by Hewlett-Packard and the American Association of Critical Care Nurses (AACN). This highly competitive and prestigious award will support their research, "Evaluation of Continuous Telemetry Observation on Selected Outcomes in Cardiac Patients." Irene Stukshis ’96, a staff nurse at YNHH and student in the CV Specialty at YSN, will act as Research Assistant for the study. Marge, Janet, and Cindy were recognized at the AACN Leadership Institute in Nashville, TN in October.

Gail Melkus, Associate Professor and Coordinator of the Diabetes Concentration, received the final payment of a $30,000 grant from Novo Nordisk Pharmaceuticals, Inc. at an award presentation held at YSN on November 15, 1993. The grant supports clinical research in diabetes which also involves support for student research assistantships. (L to r) Mary Alice Flint, Director of Educational Systems at Novo Nordisk; Dean Judith Krauss; Gail; Rick Allen, Novo Nordisk Senior Vice President of Marketing; Philomena Pappa, Institutional Sales Manager; and Stu Gottfried, Institutional Sales Director; were all on hand to make the award.

On October 20, 1993 at the Connecticut Nurses’ Association Diamond Jubilee Banquet, Dorothy L. Sexton, Professor of Nursing, was honored with the Josephine A. Dolan Award for Outstanding Contributions to Nursing Education. Dean Judy Krauss made the presentation speech, recognizing Dorothy’s long and outstanding career at YSN.

News from Delta Mu Chapter of Sigma Theta Tau

Delta Mu Chapter of Sigma Theta Tau has begun the 1993-94 year with the goal of addressing chapter goals, strategies, and schedules of events for the next few years. This year’s elected officers are:

- President: Doris Foell ’88
- President-Elect: Paula Milone-Nuzzo
- Vice President: Gina Plowright ’92
- Corresponding Secretary: Barbara Peluse ’90
- Recording Secretary: Mary Caffrey
- Treasurer: Lucy LaCava

The annual Fall Dinner and Program, held at 500 Blake Street in October, featured speaker Judith Kline Leavitt, RN, MEd, FAAN. Ms. Leavitt, co-author of Policy and Politics for Nurses, has been advisor to the President’s Health Care Reform Task Force and has had a distinguished career as an educator, consultant, and political activist. She spoke on, “When Nurses Have a Seat at the Policy Table.” The Silent Auction held that same evening raised $1500 to support research scholarships for students, faculty, and community members.

Induction of new members into the chapter will be held at 500 Blake Street in March, 1994. The Spring Dinner and Program, scheduled for April 6, 1994, will feature Barbara S. Joyce, RN, PhD, CS, Associate Professor, the College of New Rochelle School of Nursing, who has chosen, “Holistic Nursing Practice: A New Meaning,” as her address topic.

Lillian Hale, YSN Financial Aid Officer, works her magic in helping students finance their education. Lillian has been on board since Fall, 1992 and brings a wealth of experience from her previous position in the Financial Aid Office at the Yale Medical School.
CULTURAL DIVERSITY IN NURSING PRACTICE CONTINUES

Linda Demas '89

This issue’s features in Cultural Diversity in Nursing Practice present a picture of true diversity: focused studies in third world countries of Africa; a remarkable narrative of experiences in international nursing in the field; and, from “down under,” Yale nurses consult with Australian colleagues regarding health care reform in that country.

This past summer YSN’s two Downs Fellows gathered data in Africa in support of their master’s thesis research. Anne Kiwanuka '94 studied the feasibility of establishing a community-based nursing model in Uganda for assessing the needs of the pediatric HIV population. Susan Michaels-Strasser '95 collected data relative to the home care needs of rural Shona children with AIDS and their primary care givers.

Anne Kiwanuka '94

I finally returned to Uganda on July 14, 1993. I had come back to conduct AIDS-related research. I was very apprehensive because the last time I had been in Uganda was in 1981. I remember that day clearly because I remember telling myself that I would never step foot on Ugandan soil again.

From 1979 through 1981 I attended Makerere University in Kampala. Throughout that entire period, there was civil unrest in the country. A major war broke out my first year at the university. On campus we had no water and no electricity. At night the sounds of missiles and gunfire surrounded us. Eventually, the war ended with the overthrow of the brutal dictator, Idi Amin.

With Amin gone, Ugandans were very hopeful that the country would enter into a period of peace and democratic rule. However, the next four regimes continued the atrocities of the deposed dictator, and the country sank further into mayhem and chaos.

More than 500,000 Ugandans were killed during this time. In January of 1986, President Yoweri Museveni assumed power after fierce guerrilla warfare. Under his enlightened leadership, Ugandans have begun the arduous task of rebuilding a war-torn society after 25 years of dictatorship and civil war.

I provide this background because an understanding of the social and political upheaval that Uganda has recently undergone sheds light on how AIDS has been able to spread throughout the country so fast and so devastatingly. A few statistics reveal the

Mother and child at the well child clinic in Bukenero
dimensions of the epidemic. An estimated 800,000 adult Ugandans are infected with HIV virus (Uganda’s estimated population is 16.2 million). The disease is systematically wiping out the most economically productive members of the society, those between the ages of 20–40 years. Women and children form the fastest growing number of those found to be HIV-infected.

The purpose of my research in Uganda was to evaluate parents’ understanding of the steps involved in caring for HIV positive children at home. I did all my research at Mulago Hospital in Kampala. Clinic was held on Fridays. Even though the facility did not open until 10 am, most families arrived by 7 am. There were two nurses, one doctor, two counselors, and a pharmacist to care for about 30 patients per clinic day.

Counselors were available to work with families in need. Before a mother was told about her or her child’s status, she would receive pre-counseling. She would then return to the clinic after two weeks to get the results and also to receive post-counseling. Most mothers learned they were infected only after their child was diagnosed as being HIV positive. Several times I witnessed a mother suffering from AIDS walking the ten miles to the clinic without her child because she did not have transportation money and was too weak to carry the child.

In each interview I asked mothers what they felt was their greatest need. Time and time again most mothers said they needed money to feed their children the appropriate foods and to buy the necessary medications. Some mothers wondered if they could obtain funds that could help them set up a small cottage industry such as chicken farms, basket weaving, etc. anything to generate income. Perhaps their greatest fear was who would care for their children as they became progressively weaker and closer to death.

I learned so much about the pain and suffering of those afflicted with AIDS and I made many personal discoveries of how deeply this disease has touched the lives of Ugandan men and women. I discovered that most Ugandans, regardless of religion, ethnic, educational, or socio-economic background, know someone close to them who has died from this deadly disease. I cried when Ivan, a six year old orphan who is HIV positive, asked his grandmother if his mommy was angry at him and if she would ever come home. I felt despair when a beautiful young mother told me that she and her four year old son were newly diagnosed as HIV positive and that she was five months pregnant. This is the reality of the Ugandan tragedy. The urgent challenge for health care providers in Uganda is how to address the social implications of this debilitating disease.

Despite the very real problems that exist in Uganda, I was inspired and refreshed by the beauty of its land and its people. The Ugandan countryside is spectacular. The country is often referred to as the “pearl of Africa.” The weather is simply superb. Flowers are always blooming. Fresh tropical produce is in abundance year round. Imagine the sweetest juiciest pineapple, mangoes, papaya and passion fruit fresh from the garden for breakfast. Or tomatoes so red and sweet, you just wash them and pop them in your mouth. Everything is fresh. I enjoyed fresh beef and poultry, as well as fresh fish from Lake Victoria. For two glorious months I ate nothing canned or frozen.

What I enjoyed most about Uganda, however, was its people. Ugandans are extremely hospitable. Though they have suffered greatly, they appreciate life and live it fully. On a personal and professional level, I was grateful for the opportunity to work with Ugandan professionals.
Before beginning the PNP program here at YSN I worked for two years as a nurse in Zimbabwe, Southern Africa. This summer I was able to return to Zimbabwe for eight weeks as a Wilbur Downs International Health Fellow. This fellowship, sponsored by the Yale School of Medicine and also supported by the School of Nursing, provided me the opportunity to carry out a research project which would address a growing need I experienced while working in Africa before. It is also the basis for my Master's thesis.

While working as a nurse in Zimbabwe, I was called upon to care for a growing number of people presenting to the hospital with symptoms of HIV infection and AIDS. The increase in AIDS-defining illnesses which I saw firsthand was dramatic. For example, when I arrived at this small rural hospital in 1988 our tuberculosis ward was often devoid of patients. By the time I left in 1990 the ward was full, with overflow patients put in the general ward and on floor beds. At that time we were also beginning to experience the dual problem of untimely maternal death and infected and orphaned children.

The purpose of my study was twofold. The first was to gain information on what home-care practices were being used by the rural Shona to care for their HIV infected children. The second was to delineate the greatest needs of the children and their caregivers so that home-based care programs could be developed to meet those needs. Additionally, this study attempted to uncover some of the myths and prejudices associated with AIDS among this population.

This past May I returned to Zimbabwe for the study with my two year old daughter Chloe in tow. I was met at the airport after a 16 1/2 hour flight by Dr. Anne Renfrew, with whom I had worked in 1989-1990. Dr. Anne was an important link in Zimbabwe in the extensive planning and in obtaining government approval for this study.

At the end of the hour's drive out to St. Paul's Mission, where I would be based for the next two months, I met an old friend, Apronia, on the dust road that leads to the mission. I handed Chloe to her from the truck window and she began to sing and dance with her in her arms. Bringing this "marungu" child was to be a high point for the people here, as very few are seen in this area. Apronia's daughter,
Longina, would be my translator and confidant for the next two months. Longina had worked for 4 years as Dr. Anne’s translator and was highly recommended as a competent translator, well-versed in medical terminology and pre/post test counselling of HIV infected people.

From the mission hospital I had a preliminary list of seven potential candidates for the study. From this small list, I quickly realized that I needed to do a lot of the groundwork myself in obtaining willing subjects, since only a couple of the mothers on the list had actually been told about the study, one child had already died and one mother had not yet been post-test counselled. Longina and I began by reviewing the format of the study and my intended structure of the interviews.

Our first interview was with a woman who was in the hospital along with her 18 month old son. Most interviews were conducted at the family’s home though. Over the next two months we walked a lot, but also rented a car and had a hospital truck at times.

The second interview is worth mentioning. I began the walk in the morning with high spirits, but over the next few hours I realized that it would be more difficult to reach some patients than I had anticipated. Since there are no street names and homes are not identified by a number, just locating people proved to be our biggest hurdle. We walked for about two hours along a main dust road with Longina asking people along the way for directions to Chigaramasimbe village.

One of Longina’s aunts lived along the way so we stopped to say hello and have some tea. In the Shona custom, visits are often unannounced and LONG. Longina introduced me to her aunt and then got to the task at hand of building the fire for the tea. I remembered that time doesn’t move so quickly here and that I’d better take a deep breath and SLOW DOWN. I realized that we might not get the interview today. Over the next hour we filled up on tea, popcorn and boiled sweet potato, while her relatives kept busy peeling dried maize off the cob. Sadza, the staple of the Shona diet, is made of this corn flour coarsely ground and cooked into porridge.

We then walked for another couple hours and asked for directions at the home of the village health worker. She was away but her son accompanied us through high brush, brought us to a clearing and pointed out the direction we should continue walking. Longina explained that this must be a new family to the area because people would normally know each other much better.

At midday I could feel the sunburn and fatigue setting in. I felt dejected and wondered if we would ever reach the home we had been searching for since early morning. We came upon a blind man sitting on his front porch also peeling dried maize. He was not able to help us but pointed us in the direction of the village chief’s house. At this home we were encouraged to go to the nearby primary school to ask the headmaster, who thankfully did assist us in locating a nephew of the family. The subsequent walk was again long but lively, as we were now accompanied by many inquisitive school children. As we made our way further and further from the school through winding paths in the bush we finally reached our destination, a small round house at the base of a hill alone on the outermost edge of Chigaramasimbe village.

This interview was one of the hardest in all respects. The distance was great and the mother quiet and difficult to engage. She was just beginning to believe the results of the blood test. Up until recently she had felt generally well, but was now losing weight despite being pregnant. She explained that she lives at this home with her three children, the youngest of whom is also sick, and her grandmother. The only person aware of the diagnosis was her husband whom she only sees one weekend a month. She could not explain why she had not told her mother. The separation of husband and wife is not uncommon in rural
Zimbabwe. Most husbands seek gainful employment in the capital city, since there are few jobs, except subsistence farming, in the rural areas. She explained that she must force herself to keep going and is motivated simply by the need to provide food for her children.

This woman’s situation is not unique. Most rural women with AIDS are on their own with little knowledge of this disease and miles from the nearest hospital or clinic. Since AIDS is chronic and incurable, infected mothers must often care for themselves and their sick children at the same time they are planting, harvesting and preparing the food which they need to survive.

Over the next two months we learned that many people had not told family or friends about their diagnosis of having AIDS for fear of abandonment or neglect. Some had not told anyone, like the lady from Chigaramasimbe, not even a spouse.

The goal I had set of meeting with 20 women was realized. We also spoke with eight people a second time to explore further beliefs and perceptions related to the causes of ill health and AIDS. Although the analysis of the research is not yet complete, it became obvious to me that meeting basic needs like food (sugar, cooking oil and milk) and school fees were more pressing concerns for the care-givers. AIDS was an added burden to already overworked and poor women.

I believe that nurses have unique contributions to make in AIDS research. The immediate needs of people with AIDS in Africa focus more on care than cure, especially when no advanced drugs are accessible to those infected with HIV. Also, in most areas of rural Zimbabwe, nurses are the sole health-care providers (excluding traditional healers). My long-term interest is to continue work in public health and program development in developing countries.

Well thought-out home-care programs are desperately needed to support the many people and families who are faced with the added burden of chronic illness amidst poverty.

Anne Hoff ’77 has enjoyed a varied career. Her practice for more than seven years as an “international nurse” profoundly affected her life. Anne’s practice today continues to reflect and utilize all she has learned. This is Anne’s story.

CULTURAL DIVERSITY...

Anne Hoff ’77

In March, 1980 as I prepared on ten days notice to work in a Cambodian refugee camp in Thailand, a recently returned intensive care nursery nurse warned me, “It’ll change your life.” I laughed and hoped that from my home-owning, career-tracked, two salary existence that she was wrong. I viewed this three month commitment as a once-in-a-lifetime opportunity from which I would return unscathed and satisfied that I had made a contribution to alleviating the dire situations on earth.

Seven years later, I had seen a bit of Africa during the Somalia emergency in 1981, a longer stint in Honduras in 1984, then El Salvador throughout 1985, with a brief return after the major earthquake in 1986. I had decided by that time that I needed to attempt to make my career in the US. By that time, also, the home-owning and second salary were history! My experiences had changed my life, had in fact made it difficult to feel close to people who had never worked overseas, never experienced that total immersion, who had never seen the unimaginable suffering and struggled to make any small but significant contribution toward alleviating that suffering.

Although we see brave and inspiring people every day in our own country, the degree of tenacity toward survival I witnessed elsewhere is a memory I live with every single day.

So what did I do? What about this “international nursing?” I did whatever seemed possible, according to human and material resources available at the time. In Thailand I was an inpatient nurse in a 100 bed field pediatric unit in a 120,000 person refugee camp. In Somalia I worked in a feeding center for malnourished kids and did
some curative services as well in a loosely organized 20,000 person camp. In both places malnutrition and infectious diseases were our most common diagnoses. We struggled to find time to move beyond curative services and begin sanitation, immunization, and community health worker training programs. We were debilitated by heat, illnesses of our own, difficulties with translation, and a practically nonexistent infrastructure.

In Honduras, working in two highly organized and well established Salvadoran refugee camps and able to function without a translator, I was able to begin to address the issues of preventive nutrition, prenatal services, monitoring the growth of well children, and training motivated workers (often either very young and/or very stretched in family responsibilities) in preventive and curative services, with the hope that when they returned to their own country they would be able to act as resources to their communities.

In El Salvador, working with national staff, the emphasis shifted from refugees to suburban and rural communities, which in wartime were experiencing the availability of even fewer resources than usual. We tried to identify community strengths and train health workers in clinical and preventive skills and in organizing for change. These were potentially seen as subversive activities, so we proceeded with care, offering mobile clinics, prenatal exams and classes, nutrition services, and a massive latrine construction project.

The work in each country was a combination of hitting the ground running; getting back to basics; assessing and reassessing strengths, weaknesses, successes, and failures; and in the acute absence of materials resources, attempting to maximize the human resources available. In each case the political milieu was tricky and the issue of who should receive help, according to the authorities, had to be dealt with repeatedly.

In my professional life since then I have been critical of the waste of both types of resources in the US health care system. Living in the San Francisco Bay area melting pot, I have more than adequate opportunity to use my Spanish (yes, acquired after grad school!) and to act as an advocate for cultural sensitivity toward so many of the clients we see. After several years on an oncology inpatient unit, I'm looking forward to synthesizing some of what I learned in my years overseas into my current position as a public health nurse.
In the following features, Donna Diers ’64 and Carol Ann Wetmore ’94 have not been confronted with primitive conditions, unskilled workers, and limited resources, but with DRGs, casemix management, and high technology. Dramatically different in context and scope, the experiences of Donna and Carol Ann demonstrate that YSN graduates and students are about making a difference. Differences can be defined in many ways and in many places. Read on . . .

CULTURAL DIVERSITY …

Donna Diers ’64

I first went to Australia in 1986 for the first International Conference on DRGs and hospital financing and management, where I, in fear and trepidation, presented a paper on nursing intensity. I fell madly in love with the country, made a lot of good friends and learned an enormous amount about a different country’s health care system and its issues. This story is not as compelling or engaging as some of the other stories about YSN alums in far away places in previous issues of Yale Nurse, but “mine own.”

In 1991, I was asked by a consortium of seven Sydney teaching hospitals and the health administration program of the University of New South Wales (NSW) to come out for three weeks to help develop institutional nursing capacity for casemix management. NSW was then looking to the day when the government would decide to set hospital budgets by DRG and they were building the human capacity to deal with that information. That day has, by the way, not come in NSW although it has in Victoria. (Would we would have done this capacity-building in this country . . . )

Some basic facts: Australia is this huge continent with very few people. It is nearly as large as the US. There are seven states: reading from the top of the map clockwise they are Queensland, then New South Wales, then Victoria, then South Australia (Tasmania is an island off the southern coast of Victoria), then Western Australia, then the “Northern Territories.”

About 18 million people, but mostly in the cities that are the capitals of the states: Brisbane in Queensland, Sydney in NSW, Melbourne in Victoria, Hobart in Tasmania, Adelaide in South Australia, Perth in Western Australia, Darwin in the Northern Territories. There is an equivalent to Washington, DC, a federal (Commonwealth) city in Canberra, which is more or less half-way between Sydney and Melbourne.

Anyway, I spent an exhausting and wonderful three weeks living there and traveling all over Sydney to do all-day workshops in the hospitals in the consortium. On the same trip, there was a nursing conference about 300km north and west of Sydney, and Australian nurse colleagues and I drove in a van, singing American and Australian folk songs. I know all the verses to “Waltzing Matilda” now. At one point my friends made me sing the “Star Spangled Banner” in my awful reedy voice, a capella. The four of them joined voices in “Advance Fair Australia” in return. We watched the cockatoos in the fields and paid attention to the kangaroo crossing signs. I’ve also done conferences in a resort town south of Melbourne and Katoomba in the Blue Mountains, but I’ve spent most of the time in Sydney.

(L to r) Donna and student, Carol Ann Wetmore
What most struck me about the Australian health care system is the deep commitment to the community. Health planning depends on community need and health education is very highly developed. What is also stunning is the extent to which health care issues become political and election targets. The government seems much closer to the people than does ours, but there are fewer people and a larger congress. Nursing is very highly organized as a collectivity and nurses wield enormous political clout. To dramatize their issues, nurses have been known to chain themselves in their white uniforms to the fence in front of the Minister of Health’s office.

What I was achingly conscious of in the work I did there was not to tamper with another country’s system, and especially, not to graft US ideas or agendas where they did not fit. The work I was doing was going right straight into Australia public policy — no committees, task forces, debates. One wanted to get it right. Enough about the work.

The place is fascinating. There are so many things that are found nowhere else in the world, especially plants and animals. My favorite animal is the wombat. It is vegetarian, makes no sound, is not used for hide, food or mounting on the wall. The wombat merely is — a pig-sized animal with soft fur unlike any furry animal I’ve ever petted. Kangaroos are fun to watch but not so loveable. Koalas are very cute but mean little critters with an ear-splitting cry. They eat only one kind of eucalyptus, they hardly ever urinate, and like all marsupials, their babies have a rough beginning.

The flowers are incredible. Enormous, unusually scented, and there are many kinds that do not require water after they are picked. The bouquet simply dries up, never losing its petals or scent. (Israel is collaborating with Australia to import Australian plants to the Negev — a desert much like the Australian outback.)

The colors of the land are the ones one sees in Australian art, especially aboriginal art: a deep ochre (burnt orange), yellow, black, highlighted sometimes by the deep blue-green of the Pacific. The grass on suburban lawns is the same stuff we use for golf greens; no overgrown lawns there.

The people — oh, my, the people. I felt at home in Sydney. The people I got to know, especially the healthcare nurses felt like the people I grew up with in Wyoming. Australia is a “new” country, pioneering. There is a freshness of spirit, a kind of pushiness, lack of tolerance for mediocrity, and most of all — these people are very funny - wonderful senses of humor.

My very favorite moment was in an outdoor market/craft fair one sunny Saturday morning when my friends and I heard this strange noise and followed it to a man playing a five-foot long didjeridoo. The instument and the sound are totally indescribable and totally haunting.

My most recent trip was in August, 1993, when I spent ten days working with the university and hospital people toward an application to the State government (NSW) for funds to conduct a research/management project on casemix and quality management. If the project takes off, and it appears it will, I will have more chances to return to this country, and also have the chance to bring colleagues to us in New Haven, the first iteration of which is (or was, by the time you read this) in November. My Australian friends will have an American Thanksgiving dinner complete with turkey, dressing, fixings, creamed onions, pumpkin pie and Macy’s parade and football on the TV.

I do wish it did not take 30 hours to get from my house to Sydney...
Health care reform is a hot and happening topic, not only in the US, but around the world. In Australia this summer I saw firsthand how a single-payer system is working to maximize the services and benefits. I was invited by the Sydney Teaching Hospital Consortium to assist in the analysis of data from the New South Wales Nursing Intensity Study. The purpose of the study was to determine valid and reliable Australian DRG nursing service weights to permit greater accuracy in costing Australian DRGs. This means we were trying to determine the average number of nursing hours per patient per day for each DRG so that nursing costs could be calculated. It’s almost embarrassing to admit, but this sort of number crunching interests me and the opportunity to have the results put into use so quickly was exciting.

DRGs and casemix were introduced into the Australian health care industry in the 1980’s. Since 1988, hospital financing and budgeting have been evolving toward casemix system and this year the Australian Commonwealth will stage-in a casemix based payment system in New South Wales. Nursing involvement in the formulation of the system has been to make sure there is accurate cost information so that nursing costs per patient can be determined, cost effectiveness of nursing can be studied, and information systems can provide aggregated data to enhance both clinical and management decisions.

Donna Diers has acted as a consultant to the Consortium since its inception. My time in Australia was her brainchild with the help of her friend and colleague Debbie Picone, Director of Nursing at Concord Repatriation General Hospital and Project Director of the Consortium. Donna is a tough act to follow. The Australian nurses’ respect for Donna’s insight and approach was readily apparent.

Whatever my expectations of the YSN experience were, I must say they never included taking tea under the Sydney Harbor Bridge next to the Opera House, attending conferences on Bondi Beach as the surfers crash in, or trying to write my analysis on a lap-top in Tasmania. The warm welcome I received (at 6 AM Sydney time, some 2 days after I left Connecticut) set the tone for my twelve week visit. Nurses from teaching hospitals across Sydney welcomed me to their facilities, to attend patient rounds and meet nurses from different specialties. It was interesting to compare and contrast nursing practices. We learned something about each other’s environment while on rounds, as I dutifully put up the patients’ bed rails and amused the group. The liability environment there is rather different. If a patient falls out of bed, the consensus is that he should not be near the edge. There is no assumed or implied responsibility on the part of providers or environment. Personal responsibility is taken very seriously. It’s not a liability-lawyer-friendly place.

Another important aspect of my trip was to observe a single-payer system with the constraints of a global budget struggle with resource allocation. Greater Sydney has 3 million people, almost 18% of the entire Australian population. Sydney’s population is moving from the coast to the formerly less populated western suburbs. The Sydney Area Health Services planning board works diligently to identify the needs of the population while recognizing the fiscal constraints determined by the government. As in the US, acute care hospitals continue to account for the majority of health care costs in Australia. But the emphasis on prevention and community based resources is considerable and is viewed as an investment in the long term health of the population. By virtue of the central planning board, there is less duplication of services and a real concern for the coordination of programs available to the public.

My experience in Australia has enhanced my knowledge of health care and the systems in which it can be provided. I feel especially prepared to evaluate the various US proposals and to help shape the system to come. I can’t wait to go back. I still hear the kookaburras sing and see the sailboats on Sydney Harbor in my dreams. Aren’t the kangaroos crossing signs a hoot?

In the next Yale Nurse you will hear from Betsy Greig, ’79. She writes from the Ashram, Gurudeo Siddha Peeth, in India located near Catur in Ganeshpuri, the site of the recent devastating earthquake. Betsy is part of a mobile hospital unit which provides basic medical and preventive care to the people in the valley around Ganeshpuri.

That cultural diversity in nursing is not exclusive to third world countries was deftly illustrated by the Diers and Wetmore articles. But what about our alumnae practicing in culturally diverse settings within the boundaries of the US, where cultural sensitivity is paramount to delivery of care? Let us hear from you, as well!

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**CULTURAL DIVERSITY…**

**Carol Ann Wetmore ’94**

Treat Yourself to a YSN Pin

Maybe you just never got around to ordering a pin. Or maybe it was too expensive when you graduated, debt laden with no relief in sight. Or maybe you lost yours and don’t know how to order another. The good news is that you can order a pin from our official jeweler, J. O. Pollack Company in Chicago, IL. Simply contact the Student Affairs Office, (203) 785-2389, and ask for a pin order form. The authorized form will be sent to you and then you can deal directly with the company to order the appropriate pin. The current cost of a pin is around $65.00. Your pin is a symbol of success and professionalism. Order one now and wear it with pride.
YSN “Make a Difference Day” Event

Mary Jane Linnehan ’95

On October 23, 1993 students from the Yale Schools of Nursing and Medicine (YSN and YSM) participated in “Make A Difference Day.” A national community volunteer day sponsored by USA Today Magazine, it was designed to encourage community participation by local groups across the country. Last year students from YSN provided health promotion activities, winter coats, and hygiene items at a New Haven soup kitchen. This year the project entailed renovation of a local shelter for homeless women and children run by the agency, New Haven Home Recovery. Located in New Haven, the shelter is a large home, housing up to ten families in private bedroom-bathroom units. The agency also provides scattered housing units to women who are HIV+ or have AIDS, and their children.

The Make A Difference Day project consisted of three phases. First, through solicitation of local businesses, YSN students succeeded in obtaining 15 new carpets, 25 gallons of indoor paint, painting supplies, 4 new table lamps, and the donation and free installation of window shades and mini-blinds for the entire housing facility. YSN then sponsored a “Household Goods” drive to benefit the shelter. Through the generous donations of students and faculty at YSN and YSM, 25 large bags full of items were delivered to the shelter: donations included linens, kitchen supplies, appliances, and personal hygiene items.

On the day of the event itself, the third phase occurred. Eighteen students from YSN and YSM and some of their family members proceeded to the shelter and set to work renovating as much of the facility as possible. The current residents of the house were invited and encouraged to join the efforts, and several women and children were active participants in the project. For the younger children, child care and activities were provided by the students throughout the day. At the end of eight hours of work, six units had been cleaned, painted, carpeted, and accessorized in bright, matching colors. Extra paint and supplies were left with the facility staff, as residents intended to complete other rooms in the near future.

Although the project required only four weeks of planning and one day of work, it is clear that the efforts will have a lasting effect for the women and children needing residence in the shelter. The project was a great demonstration of community collaboration: between Yale students and local businesses; between students at Yale Schools of Nursing and Medicine; and among the students, staff, and residents of the shelter. Further, based upon the success of the project and the needs of the residents, it is hoped that YSN can establish an ongoing working relationship with the shelter. An outreach program is currently being designed whereby students will visit the shelter bi-monthly to provide health screenings, information, referrals, and group sessions on topics of interest to the residents. This was a job well done, and one that will have a memorable effect upon all of those involved.

Contributing Businesses
(located in New Haven unless otherwise noted):

Grand Paint Co. (Branford), Raymond Pagliaro
Sherwin Williams Co. (Branford), Mike Jessey

Unger’s Floor Covering Inc., Arnold A. Unger
Connecticut Surplus Carpet Co., John Chiaro
Plaza Carpet Inc., David B. Willis
Joe’s Carpet Sales and Service (Milford),
   Joe and Sue Jaser
Discount Carpet Center, Willy Kaoud
A Well Dressed Window, Linda Spector
Mill Supply (Hamden),
   Al Tannebaum
The Lamp Shoppe (Hamden), Jackie Kaywood
Grand Light and Supply Co. Inc.,
   Jeffrey Heath

Participating students:
Melissa Brown YSN
Katy Cottingham YSN
Tracy Creaser YSN
Maureen Davis YSN
Eric Frehm YSM
Abike James YSM
Tracy Jeffers YSN
Bob Kalus YSM
Mary Lemley YSN
Jack, Christopher, and Michael Lemley (YSN affiliates)
Mary Jane Linnehan YSN
Jayme Radding YSN
Kelly Shine YSM
Amy Taylor YSM
Eileen Whyte YSN
Lani Wishnie YSN
Ariel Yellin YSN

Back row (l to r): Melissa Brown, Maureen Davis, Ariel Yellin. Front row (l to r):
   Christopher Lemley, Mary Lemley, Michael Lemley, Mary Jane Linnehan, and Lani Wishnie.
Stephanie Hertig '94 represented YSN as Banner Bearer at Yale President Richard C. Levin's inauguration held on October 2, 1993.

The following students are recipients of new scholarships for the 1993-94 academic year:

**American Indian Graduate Center**
Veronica Smith

**Baystate Medical Center Auxiliary**
Stephanie Sherman

**Connecticut Nurses' Association**
Karin Thompson

**Indian Health Service Corps**
Veronica Smith

**Leopold Schepp Foundation**
Katy Cottingham
Melanie Morris
Amy Robohm

**Litchfield High School Scholarship Association**
Judith Toussaint

**Manchester Memorial Hospital Credit Union**
Anne Kiwanuka

**National Health Service Corps**
Kristen Homer
Karin Klein

**National Institutes of Mental Health**
Jere Dittrich
Judith Toussaint

**Navajo Nation**
Veronica Smith

**Nurses' Educational Funds**
Candace Mix

**Oberlin College Alumni Association**
Karin Wyse

**Veterans Administration**
Tim Clarke
Raymond Lenox
Karin Thompson

**Women of Evangelical Lutheran Church of America**
Susan Michaels-Strasser

**Women's Club of Enfield (CT)**
Patricia Brennan

**Yale Club of New Haven**
Sandra Peccerillo

**CORRECTION:** In the last issue of Yale Nurse Karen Wyse (far right) was incorrectly identified as Susan Peters. Apologies to both.

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### NCLEX Daily Rumors

Our Three Year Program students and newly graduated BSN incoming students recently awaited the news that would seal their fate – the scores from the NCLEX exam taken in July. As the days dragged by and the tension mounted, a list appeared on the fourth floor announcing the latest daily “rumor”:

Results were mailed yesterday.

Results will be mailed in reverse alphabetical order by state (WA, WV, VA, VT...)

Hillary wants to review the results first.

Everyone who took the exam on the computer received 95%. NCLEX is investigating the statistical anomaly.

At the request of the New Haven police, results are being withheld from those with unpaid parking tickets.

“Military time” was used on test booklets.

My cat ate all the stamps.

Remember the doctor who stood up at Yale and was booed? He's got the scores.

The ambiguity of the exam grew like mold, ate up the paper, and the exams never reached the test scoring site.

If you took the exam in California, the license you got in the mail is a FAKE, but the FBI will figure it out from your fingerprint card.

“When I say stop...STOP!” Some people didn’t.

As expected, the YSN contingent all passed. Congratulations new RN's!
Dear Colleague,

As a nursing leader, I know you are deeply committed to the caring values of our profession. No one better exemplifies these values than Virginia Henderson. Her life work symbolizes the finest in caring, teaching, writing, and research in nursing. She, as no other, has dedicated her life to uncovering the nature of nursing.

On behalf of the Virginia Henderson Fund Steering Committee, I am writing to ask your support of her work, for the rest of her lifetime and to carry on her ideals in the future. We are contacting you first, as part of a limited leadership mailing, in the hope that you will help us move rapidly toward the goal of raising $350,000 in her name.

Virginia has often said that the real hero or heroine in nursing is the person who sticks by the ill patient day after day and never loses the desire to help. We believe that it is time for us all to honor Virginia as one of the true heroines of nursing for keeping the patient paramount in all that we do. At the young age of 96, she continues to sustain us with encouragement, insight and inspiration from her writings. She wishes her work to continue beyond her lifetime. Her life has been dedicated to the principles of both education and experience in nursing, person-centered care, and individual self-determination.

Virginia has described herself as an egalitarian Jeffersonian Democrat. She has spent a lifetime of selfless dedication to nursing in pursuit of these ideals with little concern for her own financial security. She now resides in a supported living community, The Gables, in Guilford, Connecticut where she lives in her own apartment, surrounded by familiar and treasured things. She enjoys having visitors and hearing news of family, friends, and nursing — and, her wonderful sense of humor and charming nature is ever-present!

We wish to establish a Charitable Gift Annuity in Virginia’s name which will provide her with a lifetime income and, according to her wishes, will commit any remainder to be used to establish a fund in her honor at the Yale School of Nursing, dedicated to the principles of her work. This vehicle will allow Virginia to remain at the Gables for her lifetime and will enable her to live in modest comfort and dignity.

We have worked with Yale University to adapt the Charitable Gift Annuity concept to our goals. Usually such gifts are established by a single individual, for a substantial sum of money, at a specific point in time. The University is obligated by law to fix a specific annuity rate for guaranteed income to the recipient and to provide each donor with tax documents. Since our goal is to raise $350,000 through the generosity of many donors, we have modified the procedure to allow for multiple contributions over a defined period of time. In effect, we will be creating numerous small annuities which, when taken in combination, will act as a single annuity for Virginia’s benefit.

We are asking all donors to make their contribution within a three month period, beginning February 1, 1994 and ending April 30, 1994. We have established this time frame for two reasons. First, and most important, we want Virginia to be able to benefit from this effort as soon as possible — clearly, annuity payments can only be made on cash in hand. Second, the
Paperwork involved with annuity gifts makes it prohibitive to spread contributions over a long period of time. However, if the only way you can make a gift is with pledge payments spread over a longer period of time, please contact David Hilyard, whose number is listed at the bottom of the contribution form, to make special arrangements. Unfortunately, it is not administratively feasible to accept credit card charges for annuity gifts nor can we process a gift of under $100.

We hope you will join us in support of Virginia and her ongoing vision by making a generous leadership contribution to the Fund. Please return your contribution with the enclosed form.

Judith B. Krauss, RN, MSN
Steering Committee

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VIRGINIA A. HENDERSON FUND
P.O. BOX 1890, 55 Whitney Avenue, New Haven, CT 06508

I enclose a contribution of:

- $5,000
- $2,000
- $1,000
- $ 500
- $ 100

I prefer to contribute $__________

To a Charitable Gift Annuity with Yale University for the lifetime benefit of Virginia A. Henderson and the future benefit of the Virginia Henderson Fund at the Yale School of Nursing. It is my understanding that Miss Henderson will receive from Yale University each year a fixed and guaranteed income based on the value of my gift. It is my further understanding that I as a donor will be entitled to a federal income tax charitable deduction equal to approximately 60% of the value of my gift and that the specific amount of my tax deduction will be sent to me.

Date

Donor’s Signature

Donor’s Name (Print)

Address

PLEASE NOTE: If you wish to make your gift with securities rather than cash or if you are contemplating a gift of more than $20,000, please call David Hilyard at 203-432-5855 before making your gift as special income or gift tax rules may apply. Please also call if you would prefer to make a pledge to the Virginia A. Henderson Fund to be fulfilled at a later date.
Class News

Anna Tuthill White ’37, celebrates her 80th birthday in December this year. Up until she experienced some recent health problems, Anna had been actively involved in nursing education at Cape Cod Community College and is well known to and respected by professional nurses in her area.

Vera V. Yordon ’51, is the recipient of the 1993 Florence S. Wald Award for Outstanding Contributions to Nursing Practice awarded by the Connecticut Nurses’ Association. V.V. has been actively involved in health promotion through nursing practice for 44 years. She has been a public health nurse; taught childbirth and parenting classes; and brought health care to a parish church, to homeless shelters and to schools.

Linda Goodhart ’76, is the co-author of a book entitled, Another Kind of War Story: Army Nurses Look Back to Vietnam. The book is a collection of poetry, prose, and pictures of the experiences of five Army nurses. It evolved out of the authors’ association with a Vet Center support group. Profits from the book are dedicated to the Vietnam Women’s Memorial Project. Copies of the book are available for $12.00 plus $3.00 for postage and handling from AKOWS, 1324 Oak Street, Lebanon, Pennsylvania 17042.

Andree de Lissier ’79, is the executive director of The Den, a support center for grieving children. The group meets at Greenwich Country Day School every Tuesday night and is open to residents of Fairfield and Westchester counties. Andree has two goals for the children: to help them realize that death and grief are natural occurrences and to show them that they have the capacity to heal themselves.

John Roberts ’80 and Naomi Feingold ’88, proudly announce the birth of their daughter, Eva Caroline Roberts, on June 25, 1993. Eva joins her sister, Miriam Isabel Roberts, who will be three in November. The family resides in Milton, MA. Naomi is a staff midwife at Cambridge Hospital and John is an adult nurse practitioner at Neponset Health Center.

Danuta I. Bujak ’81, is an instructor of medicine and clinical research coordinator at New York Medical College at Westchester County Medical Center in the Division of Rheumatic Diseases and Immunology. In May, 1993 she presented a poster, “Fibromyalgia and Chronic Fatigue Syndrome Induced By Lyme Disease,” at the European Symposium on Lyme borreliosis at St. George’s Hospital Medical School in London, England. This poster was also chosen for a podium presentation at the Arthritis Health Professions Association meeting in San Antonio, Texas in November and she will also offer a workshop, “Lyme Disease in the 1990’s,” at this meeting. An article which Danuta co-authored, “Lyme Disease: An Infectious and Post Infectious Syndrome,” was accepted for publication by the Journal of Rheumatology.

Luc R. Pelletier

Luc R. Pelletier ’82, is the Associate Director of Clinical Quality Improvement with American Psychmanagement of California, Inc. He maintains an adjunct faculty appointment as Assistant Clinical Professor at the UCLA School of Nursing. Recent publications include, Pelletier, L.R., Beaudin, C.L. (1993) When a client commits suicide: how to help staff cope. NurseWeek, August 9, 1993; and Rockwell, D.A., Pelletier, L.R., Donnelly, W. (1993) The cost of accreditation: one hospital’s experience. Hospital and Community Psychiatry, 44 (2), 151-155.

Laura Mahony ’83 and Amy Gelband MacDonald ’91, have opened The New River Birth Center, a freestanding birth center in rural West Virginia (Scarbro).

Major Diane Kessler-Grzejka ’85, is the clinical nurse specialist in cardiovascular nursing at Tripler Army Medical Center in Hawaii.

Nancy Tommasini ’87, gave a presentation on, “Assessment and Management of Panic Disorder in the Medical Setting,” on October 21, 1993 at the Annual CNA/CSNA Convention in Rocky Hill, CT. Nancy was married last summer to Gary Plotke and they are expecting their first child next April.

Captain Amy Erter ’89, is stationed in Hawaii to complete the clinical portion of her program in anesthesia school.

Major Stacy Young-McCaughan ’89, gave the keynote address entitled, “Working Smarter: Using Nurse Research to Improve Clinical Practice,” at the recent annual research day at Tripler Army Medical Center in Hawaii in September, 1993.

Dorothy Wholihan ’89, is currently working as Director of Health Education at Matoso Clinic in a remote part of Kenya on Lake Victoria, a long way from her previous job as Oncology CNS at the Bronx VA Medical Center in New York City. Since leaving Yale she has published articles on, “Reminiscence in Hospice Care,” American Journal of Hospice and Palliative Care; and “Cancer Prevention in Home Health Nursing,” and
"Home Health in Rural Kenya," in *Home Healthcare Nurse*. She and her husband will be returning to the States in January for the birth of their first child!

**Lois Ravage-Mass, 90** has been named director of hospice programs at Visiting Nurse Services of Connecticut, Inc. (VNSC). VNSC is the area’s largest non-profit visiting nurse association, serving towns in Fairfield, New Haven and Litchfield counties. Prior to her appointment, Lois was the Oncology Clinical Nurse Specialist for VNSC and the Hospice Coordinator for the agency’s Hospice at Home program, specializing in the care of cancer patients and patients who are terminally ill.

**Amy Edwards ’91**, is a Clinical Nurse Specialist in Cardiac Physiology at New Britain General Hospital in Connecticut.

**Didi Loseth ’91**, has been Co-director of the Cancer Pain Initiative for the State of Connecticut since January 1993. This is a multidisciplinary group of professionals dedicated to improving cancer pain relief within the state. Didi also continues to commute to New York City to Memorial Sloan-Kettering.

**Eileen McAdoo ’91**, had a baby boy, Thomas Ryan McAdoo, on September 7, 1993, weighing 7 lbs. 10 oz. Eileen continues as a Program Instructor in Cardiovascular Nursing, Medical-Surgical Nursing Program, at YSN.

**Catherine Burd ’92** is working as a Cardiovascular Clinical Nurse Specialist at Overlook Hospital in Summit, NJ. Cathy replaced Dorothea (Doe) Dunn ’54 who retired from Overlook after 15 years of service. Doe was one of the first clinical nurse specialists to practice at Overlook and was instrumental in establishing acceptance of and respect for the advanced practice role there.

**Vanna Dest ’92** has been named Radiation Oncology Clinical Nurse Specialist at The Hospital of St. Raphael in New Haven.

**Cynthia Lee Miller ’92**, was married to Richard Edwin Lovell on September 11, 1993 in Madison, Wisconsin. They reside in Battle Creek, Michigan.

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**Shirley Girouard Named Executive Director of American Nurses Association**

Shirley A. Girouard ’77 has been appointed Executive Director of the American Nurses Association and officially assumed her post November 1, 1993. Shirley most recently was Executive Director of the North Carolina Center for Nursing in Raleigh and is also an adjunct assistant professor at UNC School of Nursing in Chapel Hill. In a recent press release she stated, “I look forward to the personal and professional challenges inherent in the role of Executive Director. The nursing profession is well-positioned to continue to enhance its important contributions to the health of all and to play a major role in shaping the health care system of tomorrow. I am excited about being a part of this effort at the national level.”

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**IN MEMORIAM**

- **Mattie Duling Lynch ’32** died on September 10, 1993.
- **Thelma Chase Bevin ’34** died on March 29, 1993.
- **Martha P. Jayne ’36** died in 1993.
- **Ethel Hansen Grass ’41** died on November 1, 1993.
- **Mary Nowack Vanrhonezelen ’52** died on August 8, 1993.
The generosity of alumnae/i through the Reunion Scholarship Funds has increased endowed scholarship support. The 75th Anniversary Fund will complement those endowments with expendable term scholarships. Sandy Bialos '71, former Chair of the Association of Yale Alumni (AYA), and Maureen Doran '71, currently a member of the AYA Executive Board, are co-chairing the 75th Anniversary Fund effort. This fall Sandy and Maureen have been talking with class agents and reunion volunteers from each of the classes celebrating reunions this June. The reunion volunteers will be contacting their classmates beginning in January to invite them to make special 75th Anniversary Fund gifts in honor of reunion. Gifts to the 75th Anniversary Fund may be pledged to be paid over five years. We hope this year's reunion classes will contribute $75,000 toward the overall goal. Each group of reunion classes for the next four years will also work to raise $75,000.

Future issues of Yale Nurse will keep you informed about the progress of the 75th Anniversary Fund. These are exciting times at the School and for nursing. With the continued generosity and strong support of its alumnae/i, YSN will have many reasons to celebrate 75 years of excellence in 1998!
Dear Fellow Alums:

I am – as always – impressed with and sincerely grateful to all of you who “come through” year after year with your annual gift to the Alumni Fund. This year I am especially proud of our record of 54% participation! We absolutely topped the list of Graduate and Professional Schools in this category, exceeding the next highest school by a whopping 4%.

Dean Judy Krauss, the students who are the primary beneficiaries of your generosity, and I wish to thank you publicly in these next few pages. My dream is to fill up many more pages in the years to come!

Mary Jane Kennedy
Chairman, YSN Alumni Fund

YSN Alumnae/i Contributor List, 1992-93

1926
Doris P. Allison
Wina L. Gauya
Priscilla A. Kublanov

1927
Marjorie W. Beckley
Priscilla W. Halpert
Aura E. Kepler

1929
Marian Wenrich

1930
Antoinette H. Daniels
Edith M. Windeler

1931
Eleanor T. Copley
Mary E. Curtis
Ruth L. Fanselow

1932
Mary F. Ceary
Xenia B. Hom
Dorothy A. Huey
Barbara A. Kavanagh
Margaret M. Scammon
Lucy S. Schultz
Priscilla B. Ward
Isabel H. Wegman
Helen Wesebe
Elizabeth H. Wilson
Marguerite L. Young

1933

1934
Lillias D. Adams
Thelma C. Bevin
Katherine T. Leahy
Martina C. Lynch
Lucille O. Pond
Frances S. Shaffer
Mary H. Shaw
Helen D. Stringer
Iva Torrens
Elizabeth P. Walter

1935
Abigail D. Avery
Laura R. Bloom

1936
Anita E. Angier
Elizabeth R. Bell
Aldyth L. Claiborn
Elizabeth S. Comer
Elizabeth B. Cooper
Ruth W. Dean
Eleanor G. Howells
Martha P. Jayne
Ruth G. Kirkpatrick

Mildred T. Briggs
Mrs. John T. Cowles
Ruth D. Crawford
Katherine F. Fine
E. Jean M Hill
Gwynne Hill
Pauline B. Hirsch
Virginia H. Hulbert
Dorothy L. Ingraham
Anne MacKay Leffingwell
Ruth E. Lightfoot
Jane F. McConnell
Raidie P. Merdinger
Margaret H. Rodgers
Patricia Walsh
Eleanor S. White
Mildred B. Yale
YSN Alumnae/i Contributor List, 1992-93

1937
Catherine Bastress
Harriet N. Cressy
Marjorie Morse Crusen
Ovidia T. Evensen
Mayda B. Gill
Rosemary F. Henshaw
Mona C. Hull
Elizabeth G. Merwin
Ruth P. Ogden
Eleanor F. Pence
Katherine S. Rekers
Elizabeth N. Robb
Marion C. Sanford
Anna A.T. White

Nette I. Lawrence
Anna W. MacNeish
Emily W. Mendillo
Mrs. Edward W. Phifer, Jr.
Dorothy Thomas Pinkerton
Stephany J. Steck
Virginia W. Warthin
Naomi M. Weiss

Ruth Groves
Helen E. Hallfors
Eleanor P. Hutt
Katharine Ketcham
Eleanor R. Kinney
Lorraine M. Kohler
Alice Blinn Larkin
Louisa P. Leonard
Janet M. Lumpkin
Barbara B. Moran
Elizabeth H. Nelson
L. Elisabeth Oster
Marion I. Richardson
Marion W. Rudd
Barbara Russell
Esther A. Savage
Estelle A. Siegel
Marjorie Peck Somers
Jessie Parkinson Spear
Ruth S. Whiting

1938
Marjorie F. Allen
Mrs. Hiram E. Armstrong
Eleanor C. Battin
Nelliana Best
Miriam M. Blomquist
Margaret H. Carson
Dorothy M. Craig
Margaret N. Damon
Jeanette F. Dillabough
Elizabeth E. Erickson
Mary S. Evans
Marion H. Fasanella
Genevieve F. Fraga
Sage A. Hall
Emma F. Hanks
Mary C. Haring
Evelyn L. Harman
Mrs. Charles R. Harms
Margaret Hulburt
Louise Darby Malmo
Betty N. McKeown
R. Ann Miller
Elizabeth H. Pettis
Delora A. Pitman
Anna C. Scholl
Mrs. Edward D. Spilman
Mary S. Symonds
Rachel H. Turney
Eleanor F. Voorhies
Ethel G. Wagner
Nancy Cole Wallick
Edna Z. Welker

1939
Lois R. Areson
Kathleen M. Barrett
Kathryn S. Bixby
Eleanor H. Bogle
Ruth C. Buckner
Frances W. Cheney
F. Janet Hankins Doenecke
Marian Draper
Mary S. Gates

1940
Marjorie F. Allen
Mrs. Hiram E. Armstrong
Eleanor C. Battin
Nelliana Best
Miriam M. Blomquist
Margaret H. Carson
Dorothy M. Craig
Margaret N. Damon
Jeanette F. Dillabough
Elizabeth E. Erickson
Mary S. Evans
Marion H. Fasanella
Genevieve F. Fraga
Sage A. Hall
Emma F. Hanks
Mary C. Haring
Evelyn L. Harman
Mrs. Charles R. Harms
Margaret Hulburt
Louise Darby Malmo
Betty N. McKeown
R. Ann Miller
Elizabeth H. Pettis
Delora A. Pitman
Anna C. Scholl
Mrs. Edward D. Spilman
Mary S. Symonds
Rachel H. Turney
Eleanor F. Voorhies
Ethel G. Wagner
Nancy Cole Wallick
Edna Z. Welker

1941
Margaret H. Berger

1942
Rhea Y. Bardin
Frances B. Brezina
Betty J. Criscuolo
Elizabeth B. Decker
Janet L. Dickson
Marian D. Dubrule
Rachel B. Glike
Barbara A. Guptil
Margaret D. Kaminsky
Marjorie M. Kenney
Elizabeth W. Maines
Elizabeth H. Martens
Eula M. McDowell
Nancy Hooker Peters
Delia M. Pitkin
Claire L. Sanderson
Margaret M. Schoenknecht
Lois B. Stokes
Janet S. Walker
Jean G. Williamson
Olga Louis Zagraniiski

1943
Elsie S. Adelson
Florence M. Alexander, PhD
Mary Sisson Barrett
Helen Langdon Clark
Florence O. Coggins
Dorothy J. Cole

1944
Florence H. Eger
Mary N. Greenberg
Frances E. Hendrix
Harriett Hicok
Esther G. Howes
Mary S. Ivins
Mary M. Jones
Grace N. Knight
Irene B. Landis
J. Virginia Miles
Lois D. Morse
Carolyn M. Myrick
Mary Jane C. Nickerson
Edwiga R. Peppler
Muriel B. Petruzzelli
Caroline W. Pinckney
Mildred S. Sanford
Phoebe S. Stebbins
Maxine P. Sweetman
Tyrrell R. Thayer
Sophie S. Thompson
Mary C. Ungberg
Elizabeth B. Wesner
Harriett J. White
Barbara H. Zovichian
YSN Alumnae/i Contributor List, 1992-93

1945
Sara S. Amsel
Margaret D. Barrer
Hilde K. Cherry
Ann K. Clark
Madeleine R. Crowley
Kathryn S. Crowther
Adah R. Davis
Grace K. Fellows
Mary S. Fishler
Alice M. Forman
Elizabeth S. Grigg
Rosamond B. Hansen
Marian Hartman
Mrs. Nathan Smith Haw
Barbara L. Holman
Elizabeth W. Hutchinson
Miriam M. Kearney
Elizabeth C. Louis
Ruth K. Mance
Marion C. Martin
Joan B. Matheke
Julia W. Meinikheim
Janet W. Meter
Anne S. Milo
Katherine L. Muhly
Mary K. Ochiai
Priscilla C. Parke
Amelia F. Roe
Eunice B. Schaeffer
Margaret L. Schleske
Mary E. Stilson
Marian C. Stone
Eileen M. Vastola
Dorothy B. Webber
Katharine S. Welch

Mary A. Burns
Helene L. Byrns
Elsie E. Calhoun
Lillian L. Calvert
Charlotte P. Charbeneau
Muriel C. Clement
Anne F. Conkle
Vivian S. Crabtree
Harriet A. Craig
Frances D. Crane
Virginia P. Cummings
Patricia M. Curran
Nora Anne Donn
Elouise C. Duncan
Barbara Ellis, Ret
Ethel S. Fishel
Marion R. Fleck
Suzyanne C. Gardner
Constance G. Goodman
Eleanor H. Grunberg
Eleanor H. Haldane
Selma B. Hardeman
Edna E. Harwood
Helen B. Hildebrandt
Justine W. Kellher
Wenonah H. Koch
Anne G. Kramer
Mildred W. Laftery
Grace R. Lett
Juliet P. Lofton
Josephine B. Lutz, PhD
Nancy C. Marder
Barbara E. Mathews
Catherine T. McClure
Margaret O. McLane
Joan B. Mennie
Jeanne E. Mercier
Dorothy D. Miller
Marin C. Miller
Erica B. Miller
Jean B. Milligan
Mary H. Morser
Martha M. Newton
Mary W. O'Brien
Mildred N. Peake
Elizabeth M. Plummer
Reva Rubin
Mary R. Saunders
Alice S. Schmid
Lois R. Severy
Charlotte N. Shedd
Leslie I. Sheehan
Wanda H. Smith
Margaret M. Sparkman
Charlotte B. Sparling
Angela C. Stempel
Betty D. Sullivan
Jean B. Trumpp
Rae D. Walk
Clintie C. Webber
Frances W. Wrzesinski

1947
Blanche M. Adams
Priscilla O. Anderson
Virginia W. Armimio
Jeanette Atkins
Marjorie P. Bancroft
Priscilla B. Behnken
Elizabeth F. Blanchard
Georgianna H. Booth
Margaret M. Breg
Mrs. Leo Broudy
Louise G. Buclhey
Linda W. Burdett
Dorothy D. Cannon
Constance R. Cole
Carolyn B. Dean
Mary J. DeWe
Gellestrina Teresa DiMaggio
Mary Ellis
Priscilla N. Estes
Ruth K. Fitzpatrick
Jane C. Frame
Jeanette U. Gies
Clarice O. Hargiss
Shirley M. Henley
Ann K. Hillier
Janet S. Hine
Barbara D. Johnson
Thelma L. Joseph
Barbara A. Kane
Mary A. Kelly
Dorothy G. Kibbe
Rose C. Longo
Madeline McKenna, Ret
Mabel Pelikow Mendel
Julia S. Morris
Frances A. Nash
Mary C. Osborne
Sylvia Paige
Shirley E. Parkhill
Jewel Q. Patton
Mrs. Vincent P. Perlo
Lois W. Peyton
Josephine T. Philbin
Evelyn H. Piersol
Carol P. Salmonson
Nilda Shea
Evelyn H. Shopp
Dorothy Shuster
Margaret T. Silverman
Elizabeth T. Smith
Barbara W. Stephenson
Mary Joanna Thawley
Lois P. Thayer
Gladys Day Thompson
Ruth M. Welt

1948
Elizabeth C. Barmett
Ethel D. Bell
Charline T. Bridge
Gail G. Church
Victoria S. Conn
Dorothea H. Edwards
Eugenia S. Finnegan
Katherine D. Foster
Marion M. Gates
Nancy J. Hill
Frances B. Howard
Sydney P. Johnson
Evelyn K. Jones
Marjorie M. Jones
Rosalind L. Jones
Ruth K. Lawson
Mary B. Lempek
Katharine W. Lynn
Virginia B. Martin
Clarice R. McCarter
Polly P. McClure
Elizabeth O'Connell
Marjorie L. O'Rourke
Elizabeth B. Sanderson
Mildred B. Simpson
Virgina S. Sirinides
Carol G. Terken

1949
Margaret M. Allman
Nancy W. Cook
Dorothy B. Coover
Ruth C. Gardner
Mary K. Hirata
Esther L. Hoffman
Margaret D. Kleyn
Dorothy S. LeBar
Margaret E. McGehee
Barbara B. Meggers
Ruth A. Miller
Harriett H. Mitchell
Anne L. Moffett
Mary E. Murphy
Priscilla C. Normark
Mary H. Otis
Gertrude H. Parkhurst
Mary D. Pruitt
Wilma C. Reed
Ruth S. Rohman
Mary Wylie Stoltz
Helen E. Tashjian
Marjorie R. Wessen
YSN Alumnae/i Contributor List, 1992-93

1950
Barbara B. Allard
Evelyn H. Anderson
Esther S. Appler
Eunice B. Asleson
Helen S. Brandon
Mary B. Bronzan
Virginia M. Brown
Jean O’Brien Butler
Stephanie C. Cleveland
Mary C. Colwell
Aryne J. Dick
Martha B. Downie
Elizabeth B. Falkenstein
Isabel W. Field
Ruth F. Fisk
Norma A. Gardner
Rosalie D. Gittler
Yukie T. Gross
Neva M. Hale
Frances J. Hindley
Barbara M. Hunt
Margery M. Krieger
Harriet S. McConnell
Elizabeth F. Orser
Virginia M. Paulson
Mary L. Perier
Adele G. Read
Ruth F. Shroyack
Evelyn C. Slopanskey
Nancy P. Thomson
Theresa S. Valentine
Janice S. Vordale
Elizabeth D. Weinacht
Mary M. Winfrey
Mary S. Wolf

1951
Mrs. Ralph D. Alley
Emily T. Bartels
Betty O. Bowman
Elizabeth Dyer Brewster
Irene O. Burns
Mary B. Floyd
Yuka Y. Fujikura
Ramona Garshelis
Justine R. Glassman
Gertrude V. Graham
Janice G. Green
Jean L. Hopkins
Elizabeth M. Houlihan
Ann O. Howland
Margaret M. Lundebjerg
Mary M. Lyons
Mary Vesta Marston-Scott
Sheila G. McClelland
Marie M. Milliken, PhD

1952
Shirley R. Morley
Jane S. Mulaik
Myrthel S. Nelson
Virginia W. Nelson
Doris M. Preus
Mary Pryor
Mary B. Richards
Ann P. Schnell
Elinor M. Schulte
Evelyn M. Soriano
Mildred K. Taylor
Pamela P. Tisza
Ann W. Walters
Carolyn B. Wheeler
Alice B. Willett
Jo Anne S. Woolsey
Vera V. Yordon
Cicely L. Zeppa

1953
1954
Phyllis C. Beard
Doris Bloch
Maria R. Bosnak
Beverly B. Brethauer
Jacqueline P. Cannon
Eleanor M. Crispell
Dorothea L. Dunn
Laverne F. Elliott
Diane D. Frost
Isabelle E. Lobek
Frances M. MacDougall
Rhoda K. Martel
Martha M. Mohler
Louisa M. Murray
Julia P. Pace
Joan K. Parsons
Jean E. Robinson
Merlyn I. Robinson
Mary Stack-Dunne
Margaret M. Styles
Marian S. Vita
June S. Wentz
Lois C. Yaffee
Jean W. Youngen

1955
Vivienne P. Jacobson
Janet H. Lord
Nancy A. Maass
Martha C. Newton
Miriam C. Niederman
Marie C. Pepe
Jeanne P. Piccirillo
Phoebe J. Samelson
Corinne M. Schultz
J. Doris Somerville
Alphonse Charles Sootkoos
Helen Lowe Stover
Evelyn A. Sturmer

1956
Mary Jo Manley
Lorraine M. McManus
Evelyn B. Mitchell
Fotine D. O’Connor
Frances D. Park
Marguerite G. Quinn
Mary Patricia Randles
Adelia E. Robertson
Cynthia B. Robinson
Gordon Sawatzky
Margaret D. Todisco
Patricia A. Vergara
Caroline R. Weiss
Elmo G. Winger

1957
Joceline K. Alexander
Madalon O’Rawe Amenta
Janet E. Angerson
Joan E. Bircher
Dorothy P. Bittner
JoAnn Tietje Briggs
Mary S. Brodish
Mavis Chittick
Elizabeth A. Clarke
Marcia Curtis
Mary R. Dalbey
Carol C. Ferris
Lois F. Geeslin
Eleanore L. Hayden
Helen P. Hopton
Dorothy K. Johnson
Frances M.E. King
Barbara N. Klaus
Hui-Chen Ku
YSN Alumnae/i Contributor List, 1992-93

Phyllis O. Lawrence
R. Jeannine Lyerly
Anna-Louise W. McKown
Helen S. Miller
Florence L. Olsson
Tanya K. Ratney
Janice R. Salter
Barbara H. Schneider
Lois G. Swander
Priscilla R. Ulin
Marjorie L. Wallace
Elizabeth N. Winkel
Jane M. Wylie
Phyllis Lawrence Shelia T. Myers Roger Powers Audrey C. Ralph
Elaine M. Carty Carrie Conser Barbara E. Goddard Eileen C. Hodgman Andrea G. Joubert Mary Jane Kennedy Charlotte W. Smedley Elizabeth A. Strutzel Karen A. Westbrook
Virginia Nehring, PhD
Charlotte Houde Quimby
Ann W. Rhinelander
Beckett M. Rodgers
Mary E. Teague
Carol D. Tessman
Linda P. Vieira

1958

Dorothy M. Allin
Janet Glover Bell
R. Pendleton Camp
Chang-Loi T. Cheng
Katharine R. Dreymuss
Jane S. Ergood, PhD
Adelaide B. Fazzone
Carmella S. Lattizori
Jean W. Loh
Eleanor P. Montanari
Irene Prisloe
Shirley H. Tenney
Muriel W. Test
Sally Ann Yeomans

1959

Winifred T. Carrity
Suzanne K. Kusserow
W. Annette Massey
Elizabeth T. Richard
Elizabeth S. Sharp

1960

Ruth G. Elder
Ruth Monser

1961

Martha E. Barden
Claudette B. Barry
Elizabeth F. Enloe
Joyce Cameron Foster
Jeanne S. Neideck

1962

Virginia M. De Luca

1963

1964

1965

1966

1967

1968

1969

1970

1971

1972

1973

1974

1975


1964 Donna Kaye Diers Bernice S. Hibbard Angela Barron McBride, PhD Joyce K. Simonowitz Carolyn K. Zackin


1966 Roberta Fitzgerald Louise W. Hedstrom Joyce W. Light Ruth Schmidt Kathleen D. Stokes


1968 Kathleen D. Bernau

1969 Elizabeth A. Burki, PhD Sandra R. Haldeman Agathokleia R. Luckner Mary Lee Mantz Nancy Koehne Spring


1974 Doris Banchik Mary J. Belisle Sharon Bidwell-Cerone Cynthia D. Butler Virginia Cleary Ruth W. Gee Philip Edwin Thomas Gower Patricia J. Harris Penny Hatcher Jean McCormick Patricia M. Mellen Barbara E. Meyers Dottie S. Needham Catherine Scala Marianne K. Scanlon Susan Willis

1975 Elizabeth A. Braun Clare E. Collins Jo Ann Love Helena McDonough Valerie G. Oreffe Ruth M. Ouimette
YSN Alumnae/i Contributor List, 1992-93

1976
Christina W. Stephenson
Nancy Strafford-Hesko
Virginia E. Tay
L. Ann Traub

1977
Carol M. Battin
Barbara M. Caporaal-Katz
Margaret J. Cushman
Janice G. Davey
Karen C. Duggan
Linda J. Goodhart
Margaret J. Grey
Susan I. Molde
Cecilia W. Mukai
Ann Kyoko Nakamoto
Brenda S. Penner
Barbara-Jean Sullivan
Victoria H. Wirth

1979
Karen A. Mills
Lyne Morishita
Jo-Anna L. Rorie
Clyde P. Sanchez
Dorothy Jo Sanchez
Judith Shindul-Rothschild
Rosemary B. Silk
Janet S. Taft
Winifred W. Thomas
Patricia Trotta

1981
Dorothy C. Kent
Marianne H. Lewis
Nancy E. Loomis
Joan Monchak Lorenz
Linda J. Norton
Kathryn Porterfield
Bonnie J. Rudolph
Susan Sumner Stengrevics
Tracy Carol Wittreich

1982
Patricia D. Barry, PhD
Mary Wilson Bassis
Beatrice R. Burns
Andree L. deLisser
Martha Driessnack Driessnack
Patricia W. Emmons
Judith A. Fardig
Julie B. Follo
Denise Gaunya
Richard F. Jennings
Elizabeth Delfert Selvaggio
Johnson
Ronald L. Krauss
Debi McCaffrey
Marjorie A. Miller-Mayer
Debra H. Nichols
Sheila H. Pavlis
Sylvia M. Rasie
Lois S. Sadler
Barbara Lee Sellers
Karen M. Suchanek
James J. Sullivan
Judith C. Tierny
Judith M. Treistman
Antoinette V.B. Tyndall

1983
Danuta I. Bujak
Claudia J. Buzzi
Kathleen M. Comeau
Christina G. Conforti
Lauren S. Corbett
George Daneri
Pamela L. Driscoll
George T. Eckenrode
Elizabeth A. Ercolano
Jane M. Fall
Mary Jane Galvin
Dana K. Higgins
Jane M. Hirsch
Cheryl L. Izen
Nina J. Kleinberg
Cheryl T. Marsh
Susan DeBarba Megas
Sheila F. Norton, CNM
Theresa M. O'Connor
Margaret L. Plunkett-Shedd
Claudia Reid Ravin
Leslie S. Robinson
Patricia A. Ryan
Dian E. Sparling
Patricia Urick
Susan P. Wood

1984
Patricia B. Adams
Ann Ritchie Atherton
Suzanne Ballard
Margaret W. Beal
Bruce Carmichael
Annabel G. Ching
Deborah Ann Chyun
Donna L. Couillard-Getreu
Ann Cousins
John H. Cunningham
Lisa M. De Dominicis
Joan A. De Maio
Linda Degutis
Joan King Dreyfus
Laura F. Foerst
Linda Foxworthy
Deborah D. Frank
Rachel M. Frazin
JoAnn L. Graziano
Michelle F.P. Johnston
Mary Kathryn Knobf
Kristen M. Kremer
Jill McCary
Janet P. McMahon
Faith Minard
Catharine Moffett
Janet Mullen
Kathleen Verch Murphy
Eileen O'Connor
Luc R. Pelletier
Mary A. Quindlen
Elizabeth Nicholl Reasoner
Christina Rickenback
Catherine R. Schwoeb
Heather L. Spear
Patricia Tauber
Polly Wallian

1988
Patricia M. Antos
Julianne Bava
Susan E. Bogar
Catherine Anne Buck
Margaret E. Colby
Bernice Coleman
Lorraine C. Donner
Anne Elizabeth Enos
Jeanne M. Erickson
Anna Fisher
Nancy B. Hall
Barbara J. Humke
Diane M. Iannini
Audrey G. Knight
Jan Kriets
Regina F. McNamara
Linda Knight Morse
Susanna Peyton
Deindre O. Rea
Rebecca V. Reed
Joyce B. Ricker
Eileen Sherburne
Lisa Summers

1989
William R. Blouin
Susan K. Davis
Bernadette M. Forget
Mary V. Hatton Gibson
Beth Elissa Goldberg
Sarabeth Gottlieb
Vickie Greene Healey
Marsha E. Kaye
Nancy Kraus
Martha Anne MacAloon
Virginia M. Mason

28
<table>
<thead>
<tr>
<th>Year</th>
<th>List of Alumnae/i</th>
</tr>
</thead>
<tbody>
<tr>
<td>1985</td>
<td>Mary G. Bast, Kathleen C. Diamond, Grace P. Erickson, Mary Jane N. Fitzpatrick, Laurie A. Friedman, Elisabeth Blish Genly, Sheila Gillespie, Margaret C. Haggerty, Kristin Hale, Allegra J. Hamman, Tonya H. Howard, Diane L. Kessler, Deborah Kay Mayer, Norma D. Mcnair, Deborah L. Meredith, Jacqueline Rugg, Elon G. Shlosberg, Libet D. Streiff, Mary Ann Thompson, Joanna J. Townsend</td>
</tr>
<tr>
<td>1986</td>
<td>Katrina Alef, Marilyn Kay Ashmann, Paula E. Carmina, Paulette D. Cranwell, Judith D. Floyd, Elaine M. Gustafson, Kristin Harris, Judith C. Hays, Sharan H. Howe, Marcia Ullman Koff, Kelly C. Mack, Madeline B. Mann, Whitney Ann Pinger, Constance L. Pittman, Diane M. Robertson, Elizabeth Flinn Tracey</td>
</tr>
<tr>
<td>1988</td>
<td>Blanche Camille Agostinelli, Suzanne Byers Black, Elisabeth Anne Brennand, Barbara Bagdasarian Brewer, Doris Lee Foell, Kathleen Ann Koenig, Susan K. Lamar, June Muzyk Lowrey, M. Patricia H. Rahn, Jane Z. Reardon, Kerry Hartnett Richardson, Marti Woolery Sharan, Elizabeth Ruth Shore, Anne Evans Spang, Cathlynn P. Vintzileos, Helen Mahoney West, Lauri Gayle Winter</td>
</tr>
<tr>
<td>1990</td>
<td>Susan J. Armstrong, Susan P. Barr, Clarice H. Begemann, Melissa T. Chase, Ann C. Connelly, Martha K. Czelusniak, Anne DeSanto, Eileen Flynn, Margaret S. Hutchinson, Mary Elizabeth Kerman, Loueua C. Mabe, Margaret Helen Orr, Cynthia Kay Perry, Kara Anne Pitt, Kristina Ann Price, Lois Ravage-Mass, Susan Louise Wilson, Katherine Young, Mary L. Yursha-Johnston</td>
</tr>
</tbody>
</table>

**FRIENDS/FACULTY**
- Margaret Armstrong (Faculty)
- John J. Bacek
- Jeanie Brittlefield (Friend)
- Ms. Virginia A. Henderson
NOMINATION
FOR DISTINGUISHED ALUMNAE/I AWARDS 1994

The tradition of honoring outstanding alumnae/i was started at the time of YSN's 50th Anniversary celebration in 1973. It is a very special opportunity to honor colleagues and classmates who have distinguished themselves with special talents and achievements. The YUSNA Board again solicits your nominations of YSN alums who you feel should be recognized in this way. These awards will be presented at the Reunion Banquet in June. The deadline for receipt of your nomination is March 1. Please send all nominations to Barbara Reif at the above address.

Review the criteria below and provide as much specific information as possible to indicate the ways in which your nominee meets these criteria. You may wish to solicit help from your friends or colleagues. A curriculum vitae would be helpful, if one is available. The committee will also seek additional information on nominees where necessary.

Criteria for eligibility for nomination:

Achievement and outstanding contributions to any of the following categories:
- Teaching and scholarship
- Clinical practice
- Leadership
- Research in clinical nursing
- Community/Society
- YSN growth and development

Explanation:
1. How is the achievement or contribution beyond the normal expectation of the activity or position?
2. How is the achievement or contribution unique and innovative, having more than local impact?
3. Describe how the service to YSN/community/profession is continuous and sustaining?
4. How do the activities contribute to the development of new dimensions and directions in nursing?

Your NOMINEE ____________________________________________ CLASS ________

Your Name ____________________________________________ Class ______

Address _________________________________________________

Phone (____) ____________________________