Yale Nurse: Yale University School of Nursing Alumnae/i Association Newsletter, Fall 2003

Yale University School of Nursing

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Yale Nurse
Yale School of Nursing
Alumnae/i Association Newsletter

FALL 2003

2003 Graduation
and Alumnae/i Weekend
As I begin my second term as Dean, I am more familiar with the responsibilities of my office and the rhythm of the work. I am now fully aware that this is the recurring issue of the Yale Nurse covered by a celebratory photo from our June graduation, issued in September, as our doors open to new and returning students. This is the issue that most reminds me of the cycle of our YSN lives.

We are in the business of preparing advanced practice nurses for careers in service, education and scholarship. You could say we are in the business of preparing alumnae/i. And yet, as I reviewed the work of my first term, I was impressed that alumnae/i did not play a larger role within the school. We are going to do something about that.

Alumnae/i represent a major resource of thought and action to YSN and we intend to recommit to involving alumnae/i in the work of the school. The reconstituted Alumnae/i Association Board represents a first step. That group, now comprised of nationally distributed alumnae/i, will take on much greater significance in advising YSN and creating a network for our students and alumnae/i. This year Lisa Hottin, Director of Development and Alumnae/i Affairs, and I will be visiting alumnae/i throughout the country to learn how you would like to be involved with YSN and to share news of our exciting activities. We are proud that over 50% of our alumnae/i regularly contribute to the support of our programs. We know our relationship is strong, but we are committed to strengthening it even more.

When I began my deanship at YSN, outgoing Dean Judith Krauss wisely advised me that I would be "the new dean" until I had completed a cycle of five reunion celebrations, one with each of the anniversary classes. I have now completed that cycle, and am delighted to report that this "old dean" is ready and waiting to meet with all of you again. Over these five Alumnae/i Weekends, many of you have told me that you see what an exciting place YSN is today, and you wish you could return to YSN now. You can. You need not wait for Alumnae/i Weekend and/or even your 5 year anniversary. Come any time. Come often. Sit in our classrooms. Visit with our newly constituted Alumnae/i Board. Come learn how, in 2003, we continue to improve health care for all people.

Catherine Lynch Gilliss, DNSc, RN, FAAN
Dean and Professor
Dr. Linda Burnes Bolton
Gives Commencement Address

The Commencement Address for 2003 was presented by Linda Burnes Bolton, PH, RN, FAAN. Dr. Bolton is Vice President and Head Nursing Officer for Cedars Sinai Medical Center in Los Angeles, California. She currently serves on the US Health and Human Services National Advisory Council on Nurse Education and Practice.

Linda Burnes Bolton’s passion for nursing began early in life when she spent much of her childhood in and out of hospitals for asthma treatments. “The individuals who touched my life the most were the nurses. They told me asthma would not impair me. They gave me hope and encouragement,” she said.

Linda’s career as a nurse began in 1970 when, for the first time, she experienced the death of a 16-year-old leukemia patient. “I was only three months out of school. It was a life-changing moment for me,” she said. “It was then that I knew I needed to learn more about how I could help. I am passionate about humans and how they can help each other.” And there began her quest for knowledge — a quest she compares to a turning and twisting river.

After earning a master’s degree in nursing and public health and a doctorate in public health, Linda became an executive at Cedars-Sinai Hospital in Los Angeles. “It’s a huge responsibility, but it humbles me every second,” she said. “I have the best of all worlds. I can stay in touch with patients, nurses and doctors. I am connected to the community because of my research. And I stay connected to academia.” Through her work with the National Black Nurses Association, she is cofounder of the Community Collaboration Model, which is setting the framework for improved community health. The model focuses on the power of a community to heal itself through collective knowledge, skills and commitment. Health care providers are part of the process — the community owns it.

While her days are long and sometimes hectic, Linda spends a few moments each morning reflecting, “I thank God for seeing another day. Leadership can take a physical and emotional toll on you. To be a good leader you need a sense of belonging and a sense of self — where you are in the universe, what your purpose is,” she said. Her desire for reflection also takes her fishing, one of her other passions, because when you are fishing, “you are one with the water and one with nature,” she said. “I just love it.”

Linda has always believed in the potential of African Americans, and she’s working to promote nursing as a profession of choice, particularly among men. She grew up in a housing project and is committed to leaving something behind. “Each one of us has the potential to make things better for the time that we are here,” she said.

The following is the Commencement Address to the Class of 2003 presented by Dr. Linda Burnes Bolton.
Good day to Dean Gillis, faculty, graduates and their families and friends and colleagues. It is my pleasure to share this fabulous day with you. Each time I have the opportunity to share the experience of "beginning" for individuals, groups or communities, I feel privileged.

As you embark on the beginning of your nursing career I am pleased to offer a few thoughts for your consideration and inspiration.

Beginning a new career that involves human caring requires knowledge, leadership, vision, and courage. Hanson describes the beginning process as "an adventure awaiting that has only just begun." The possibilities from beginnings are awesome. You are excited, afraid, ready, and reluctant. You look forward to the journey and the mystery of what is yet to come and the anticipation of what is to come propels you forward.

You are beginning your professional career standing on the shoulders of those who began before you with courage, anxiety, and feelings of wonder. My first recommendation to you is lift your voice today and every day of your professional sojourn into nursing to inspire others to engage in the life work of human caring. If you are obtaining a MSN or doctorate—you are beginning.

Today we are faced with many challenges in the health care industry and society. We are conflicted by ever increasing priorities. More attention is required to meet the basic needs of humans—food, shelter, education and health. Fewer resources exist, such as hospital beds, appointments for primary care and facilities to provide care in the United States and the world. Dramatic shortages in nursing, pharmacy, imaging, and physicians exist. Increased demand for health care from an aging, chronically ill, and more informed society will continue to shape the need for nurses and other health professionals.

You are beginning your career at a time when leaders are required to develop an efficient and effective health care delivery system as well as individuals to provide care within the system. As you begin the work of human caring, it is important that you lift your voice and your spirit to create bold and robust human interaction experiences for all those you meet. You have the opportunity to
influence patients, their families and friends, and the public. If you begin by first acknowledging that your role as a learned member of society is to inform and lead others to support initiatives that benefit the public, then you will fulfill your societal and professional nursing commitment.

Every time you reach out to utilize your knowledge and skills acquired from university education and clinical practice, to instill compassion and caring in your interactions with humans that you contact, and reach to support others on their health and healing journeys, you share in the wonder of a new beginning. It may be birth of a newborn or the death of a senior, the joy of working again after injury, or the ability to hear the ocean roar that you will share with others. You will bear witness to human fragility and human growth. You will not be alone. Many others will stand and soar beside you to nurture others. And so you begin.

You are beginning a career within a health care delivery system in chaos. The cost of delivering care in acute and community settings is increasing faster than growth of the economy. The number and quality of health professionals to provide care is inadequate to meet current and future demand. All the reports from researchers, policymakers, and members of the profession agree that increasing the supply of nurses will not enable the health care delivery system to meet demand for service, pay for service, or satisfy consumers or providers of health care.

The aging and growth of the inhabitants of the universe will continue to grow exponentially. To meet this demand we must begin again. We must envision a brave new health care delivery system shaped by a commitment to human caring within an ever changing environment. If the universe continues on its current evolution, humans will live longer and new ailments and diseases will threaten their existence.

Nursing and the health care system must also evolve to address the demand for caring and healing in the future. I believe that we can create a reinvigorated delivery system, assisted by technology designed by nurses and health care professionals.

The new system will be built on scientific theorems from multiple disciplines. We will call upon the disciplines of engineering, physics, informatics, ergonomics, biologists, physiologists, psychologists, humanitarians, sociologists, physicians, pharmacists, educators, and nurses to design and deploy systems that enable a brave new world.

Within the new health care world that you will help to create, nursing will continue to rise as a discipline. You will use technology to decrease the burden of care delivery. You will remove the hunting and gathering aspects of nursing and replace it with increased time for nurturing the human body and spirit. You will rejoice in the quest for knowing and use pristine science to guide your practice. You will remove the shackles of our current experience—30% time spent in documentation; 29% time spent hunting and gathering or ready and waiting; 10% time spent on non-valued communication, leaving only 31% time for human caring and personal rest.

Remember that the essence of nursing is human caring. To enable you to sustain the journey we must remove the barriers to human caring in our current environment. It is essential that we create new practice environments within acute, long term, and community care settings that enable nurses and other health care professionals to do what they are educated and compelled by science, ethics, and the needs of the human populace—to provide quality human caring through personal interaction. We must find time to be present with our patients, our universal sisters and brothers.

Technology can assist. Imagine a world where information regarding one’s previous history, interactions with the health delivery system, diagnostic and treatment data are available and protected to the health care team. This will improve access to care, decrease time spent requesting and documenting the same health
information across settings. Evidence regarding effective interventions is available on interactive tools, integrated with documentation systems. Collaborative practice environments are robust, clinical, and functional.

Service outcomes are achieved in an effective and efficient manner.

You invite your friends, strangers, colleagues to begin again to value humans by teaching and nourishing the human spirit. You help to enlighten the world through your commitment to human potentiation. You have the time to perform this mystifying and joyous work, because the repetitive, non-cognitive, tedious part of nursing is diminished.

You are a knowledge worker. As a knowledge worker you lift your voice to demand change that promotes environments which enable you to provide safe, satisfying, quality care that results in positive clinical and service outcomes. Your quest for knowing and tolerance for ambiguity and uncertainty compels you to constantly reinvent the practice, while staying true to the art of human caring. As a knowledge professional, you are committed to calling the circle—the ancient ritual of inviting in diverse voices—to address societal issues that limit human growth and development. As a learned member of society you use your knowledge and skills to open the door for those who cannot push it open due to physical, emotional, social, or environmental limitations. As a professional who knows and treasures the wonders of the human spirit and physical being, you remain committed to the journey of learning, caring, giving, uplifting, and nurturing that is NURSING.

Believe in the Possibilities
And so you begin. You begin on a new path of life. You will be tired. You will be exhilarated. You will rejoice. You will be saddened. You will find financial and spiritual rewards. You will accomplish this and more.

But first, you must call the circle. Circle calling is an ancient ritual as identified by Christina Baldwin.

When there is a beginning—a new life, a new experience, opportunity for improvement or challenge—people of all faiths, cultures and ideologies have Called the Circle. They invite others in to take the first step—to lay new tracks—to move forward on co-creating the practice environments that will invigorate and sustain our professional contributions to our patients and society.

Congratulations on your beginning as nursing professionals. I encourage you to lift your voices and invite others in as you begin. Share the wonder of human caring. Demand and help shape new practice environments enabled by technology. Nursing is a profession worth doing well, as we are a discipline committed to promoting healing. Nursing can meet its societal contract—to use knowledge, skill, and commitment to benefit humans and humankind through co-creation of a healthier delivery system, enhanced by the wisdom of multiple disciplines and the resolve of a knowledgeable populace.

Today, I Call the Circle. I invite faculty and members of the profession to join with the new graduates, their families and friends, employers, payors, members of government, scientists, humanitarians, and philanthropists to create nurturing and healing environments for nurses and other health professionals to practice. I hope that as you graduate and begin your professional journey, you will Call the Circle. Call out to family, friends, colleagues, and strangers to nourish you so that you may nurture others. Remember, nursing is a profession worth doing well. It is best done in an enlightened and enhanced environment supported and valued by society.

Congratulations on your achievements thus far.
Class of 2003
"To the nurse, working in the different levels of the social structure, in touch with the fundamentals of human experience, is given a unique opportunity to relate the adventure of thought to the adventure of action..."

Annie Warburton Goodrich
AWARDS AND PRIZES

Outstanding Young Researcher Receives The 2003 Anthony DeGuida/Delta Mu Research Prize

Yale School of Nursing awarded the 2003 Anthony DeGuida/Delta Mu Research Prize to Shiu-yu (Katie) Lee. Katie received the award as part of the Commencement ceremony on May 26, 2003.

Katie Lee’s passion for clinical research is expressed through the excellence of her work. The recipient of this year’s prize has the qualities necessary for a successful research career: motivation, perseverance, a strong work ethic, ability to overcome unexpected challenges, creativity, and responsiveness to consultation and critique. An outstanding student in the doctoral program, her performance reflects her strong commitment to learning and to becoming an independent nurse researcher. Her dissertation serves as a first study in a program of research with Asian women with breast cancer.

According to her YSN mentors, Katie Lee’s study described the process Chinese women diagnosed with breast cancer used to make decisions about their cancer treatment is superb in both breadth and depth. In order to do the study, she had to translate the data collection instruments into Chinese. This work involved multiple rounds of translation and back-translation of seven instruments, evaluation of translation quality by expert judges, testing of the translated instrument, and qualitative exploration with 10 of the participants. In addition, she had to use several creative approaches to solicit the cooperation of multiple clinical facilities throughout the northeast region to recruit her subjects. A major strength of her study is that it builds on prior research of treatment decision-making processes in Canadian, American, and Swedish women with breast cancer. This is the first study to focus on Chinese women. Her findings about treatment decision making in early stage breast cancer are directly relevant to clinical practice, as little is known about this fast growing immigrant population. Her research will lead to improved culturally sensitive interventions to facilitate decision making for Chinese women with breast cancer.

Completing the doctoral program in four years of full-time study, Katie seemed to thrive on an enormous amount of hard work. Like Anthony, she has loved doctoral study and has made the most of her time at Yale.

Annie W. Goodrich Award for Excellence in Teaching

Patricia Ryan-Krause '81, Assistant Professor in the Pediatric Nurse Practitioner Specialty, is the recipient of the 2003 Annie W. Goodrich Award for Excellence in Teaching. The Award is given out annually to a YSN faculty member nominated by students to recognize the tradition of excellence in teaching set forth by Ms. Goodrich. Pat received the award during Commencement ceremonies on May 26.

Pat exemplifies the YSN philosophy of “practice what you teach and teach what you practice.” She is a Pediatric Nurse Practitioner who draws on her extensive clinical experience to incorporate real-life examples into her teaching. As a clinician at a busy medical practice, Pat’s relationship with her physician colleagues serves as a remarkable example of collaborative practice. Her work has had a great impact on the health of communities. Her research continues to improve the care of children in our community and nationwide.

Pat has repeatedly demonstrated her commitment to her students and their learning. A high level of professionalism is conveyed to her students in all that she does.

Commencement 2003
Milton and Anne Sidney Prize Awarded to Alice Love DeMallie

The Milton and Anne Sidney Prize is given annually at Commencement to a graduating student whose research praxis, in the judgement of the faculty, best exemplifies the School’s commitment to clinical scholarship and its mission to contribute to better health care for people through systematic study of the nature and effect of nursing practice. This year’s recipient of the Milton and Anne Sidney Prize is Alice Love DeMallie.

Alice creatively used a social history methodology to identify components from the work of the Henry Street Settlement nurses over 100 years ago that could inform the practice of modern-day nurse practitioners who want to integrate strategic home visits into their provision of primary care.

Her work was rich with primary source documents from rare book libraries at Columbia University, the New York Public Library, the Henry Street Settlement Archives, and the Lillian Wald papers. She went to secondary sources to fully understand the social, political, economic, and health care context of that time, from 1893 to 1912, and in that place, the Lower East Side. To enhance her environmental understanding of this neighborhood, she toured the area and worked part-time as a staff nurse with the Visiting Nurse Service of New York.

Alice conceptualized that we had something to learn from the relatively independent home visiting practice of the Henry Street Settlement nurses that would be pertinent to home visiting for primary care purposes by nurse practitioners today. She was brilliant in her analysis of the components of direct access to home nursing care, such as door-to-door case finding, “friendly calls,” “neighborliness,” and “penny postcards.” Her analysis extended to the translation of past clinical practice of the Henry Street nurses into contemporary realities and needed practice and policy changes. Finally, she extrapolated her findings beyond implications for nurse practitioners to those interested in using nursing’s historical wisdom to design better models—nursing models—of primary care.

Rogers Recognized with the Charles King Jr. Memorial Scholars Aid Prize

Angela Rogers’s goal upon entering Yale was to bring her experience and background in anthropology, international development, public health, and human rights to the field of nursing. During her time at Yale, she has accomplished this goal through her exceptional clinical and academic work, her energy and dynamism, and her unending commitment to vulnerable populations around the world.

As a Down’s Fellow in East Timor, now one of the newest and poorest nations in the world, Angela conducted a study about the response to childhood illness. She surveyed 352 households in Dili, and interviewed traditional healers, health care workers, and the lay public. In meeting the challenge of rebuilding the war-torn health infrastructure of East Timor, the government will use her findings.

As a Yale-China Association Chia Fellow, Angela helped develop research projects for two visiting nurses from China and hosted them during their stay in New Haven. She then traveled to China and assisted in the data collection and data entry for these projects. The results of these studies will lead to improvements in public health in central China.

Many in the YSN community remember Angela for co-leading the successful fundraising project to build a much-needed clinic building in Nicaragua for Mama Licha, a health and human rights activist who has served her community as a midwife and nurse for 34 years.

Her photographs of people from around the globe have touched so many, having been exhibited at the School of Nursing, the Yale Physicians Building and in the most recent issue of Yale Nursing Matters. In the text accompanying the photographs, she reminds us of our obligation to defend human rights worldwide.
The Human Touch: How Women Saved Healthcare

On April 30th, a standing room only crowd came to hear Pulitzer Prize Winning journalist Anna Quindlen present the 2003 Sybil Palmer Belos Lecture. More than 300 alumnae/friends, faculty, students and staff listened with rapt attention to Quindlen’s presentation entitled, “The Human Touch: How Women Saved Health Care.”

The following is a transcript of Ms. Quindlen’s presentation. The video of the lecture is available by accessing YSN’s website at www.nursing.yale.edu/news/video.html

When I was asked to give the Belos lecture by the Master of Stillman College, formerly the Dean of the Nursing School, I looked at the list of those who had provided the lecture in the past and noticed something startling and that was that I had no business being on it. Never in my life have I felt more like a civilian. And that’s how I am here today...as a civilian, pure and simple.

I was having breakfast with a friend last week and I mentioned that I forgot virtually everything these days. I think the issue came up because I had forgotten the name of her teenage son who I have known since he was 3 years old. I did not even feel that bad about that because that morning I had forgotten my own home phone number.

I was able to admit that to her because she is “one of us.” You know what I mean...lots of you here today are one of us. We share the same great educational backgrounds and jobs, privileged existences and lucky children. We all have too many pairs of black pants. We exercise on the treadmill. We run into one another on the street or in bookstores. I wind up talking a lot to groups that include a lot of “us.” One of my small securities is that if I forget my reading glasses, there will probably be at least a dozen people in the audience who have the same magnification numbers as mine that they have gotten at the drugstore. So, will all the 2.5’s raise your hand?

One of the great things we all have in common along with our male colleagues and our children and our families is that we have lived through the greatest social and political revolution in the last century in this country. That was the rebirth of feminism and the subsequent extraordinary changes in the lives of women like us and our daughters and our granddaughters and our sons and our grandsons, too. When I
was growing up, there were no girls in Little League. There were no alter girls. Most big law firms had never had a woman partner. Most hospitals had never had a female surgical resident. There were no women in the Senate or on the Supreme Court. Great Britain had never had a female Prime Minister.

I could never have imagined how different the world would be by the time I was 50 years old. I would never have imagined that we would come to take for granted, so that they were barely notable, female cops and firefighters, female rabbis and ministers, female senators and judges, female partners and surgeons, and female editors and columnists. I could never have imagined that my two boys, when they were little would be talking in the back seat of the car one day, driving home from a visit to one of my good friends who happened to be their pediatrician, and that Chris would say to Quinn, “When I get big, I might want to be a doctor.” Quinn would reply “Don’t be stupid, Christopher. Only girls could be doctors.”

The truth is that the business in which I have spent virtually my entire adult life has changed. I began in the news business more than 30 years ago, when it was still basically a business of who, what, when, where and why. There was almost none of what we now routinely describe as “lifestyle reporting” or “science and medical reporting” or “profiles” or “first person journalism.” You had the news, and you had the sports.

Male reporters wrote those stories. You had the social pages written by women for women. There was a lot about clothes. There were some recipes and there were many, many wedding and engagement announcements; none of which included the line “the bride, who will keep her own name.”

Any newspaper or news magazine that stuck to that formula is probably defunct today. Now, we include analysis, background service pieces, “how-to” columns, opinion, community and national news, everything from “How to Save Iraq” to “How to Save a Cream Sauce,” with some reality TV thrown in.

Now, I can stand here today and tell you that change came about because of brilliant editors and reporters who, working in the business, realized that news reflected ALL the interests and ALL the lives of ALL the people, was inherently more interesting and satisfying. But that would only be partly true. It is truer to say that in the news business now, we operate always with one eye on the television screen, and its capacity to change an “extra, extra, read all about it” into a “heard that already” with just a single breaking newscast.

It is truer, too, that as American newspapers and magazines floundered and sometimes failed all around us, we began to understand that if we lost the good will and the loyalty of our consumers, then all of us were lost forever. We listened to the readers and that saved the business. After all, if a columnist pontificates in the forest and there is no one to hear her, there is indeed no sound.

The health care business is changing too in ways both large and small. We do not know exactly what health care in America will look like by the end of the 21st century. We do not know now whether there will finally be any kind of legislative action. What was once called socialized medicine, and is now called universal healthcare, will become part of this country as it has in other countries. But we do know, I think, that as surely as the old ways of writing and reporting news stories has changed, and in some cases has slipped away entirely, so too will the ways in which health care is delivered and seen by the people. In fact, it is already changing.

One of my closest friends was, for several years, the associate chief of staff of a large urban hospital. She spearheaded a program in which a substantial amount of primary care, particularly in clinics, is done by nurses who have actually been given admitting privileges at that hospital.

Another of my friends has just celebrated the 20th anniversary of a nurse midwifery program that was fought tooth and nail by the obstetrical community when she first began it.

We have all talked about how the groundswell of public opinion about health care has been a product of anger over cost and the inefficiency and ham-handedness of insurance companies. Both of those things are absolutely true. People are frightened of becoming seriously ill because they do not know how they will ever pay their bills. They are frustrated by arguing with some nameless, faceless clerk over whether a mammogram is an essential service or not.

I can give you economic reasons why news organizations flounder too. I can tell you about all the retailers that failed, leaving papers with so many fewer advertisers to run those big display ads that keep newspapers afloat. I can talk about how classified ad lines have shrunk to a shadow of its former self over recent years because employers were not hiring and houses were not selling.

But that is not really, fundamentally, why we had to change the way we did business in the news business. We had to change the way we did business because readers, real actual people, had lost faith in us. They believed that the Press, as we get called whenever we are in trouble, was snotty and high-handed. They believed we were out of touch, and that we did not cover the world the way they saw it or write about the things that were really important. That does not mean that journalists needed to compromise their standards. It meant that they always had to remember and, if you will, honor the people inside of the stories. I mean, the war in Iraq is not only policy. It is men, women and dying children. That is why the imbedded reporters gave us something so valu-
able despite the fact that many of us have qualms about what they actually provided in the way of news.

The New York City subway system is not a system. It is a "people mover." Crime is not a statistic. It is one rape and one murder after another. Newspapers and magazines have lost the confidence of readers, their audience, their consumers.

In the same way, we have a perceived crisis in healthcare too, not just because of cost, not just because of insurance, but because a significant number of consumers believe that the system does not even see them as human beings.

I was talking the other day to a man who has had AIDS for many years, and I told him I was going to be here today and he said to me "Tell them, all of them, to treat the patient and not the file."

Let's face it, that is why there is this push, for example, towards family physicians and nurse practitioners. Because, whether it is completely accurate or not, the perception among the public is that family practice doctors and nurse practitioners treat the whole person as a person, as a human being, not as a collection of parts to be passed from one specialty to another.

While, once upon a time in the not so distant past, the delegation that my friend made of substantial authority at a big hospital, the nurses, would have been greeted with a huge patient uproar. Now, polls show that people are confident that with nurses, they will get something approaching tender loving care. That is what they want.

The parallels to my business are so clear, particularly to electronic journalism, to television. Thirty years ago, television and news coverage was still a kind of a miracle. So was so much of what happens, for example, in the operating room. Twenty four hour news...oh my god! Artificial hips...what a world! But after the miracles always come the demands. More news, with more business or more weather or more politics or even a channel that shows nothing but debates on the floor of Congress all day long from morning until night!

Medical miracles, sure. Give us transplants! Give us Taxol! But see us too!

Treat the patient, not the file.

It is interesting that the great social revolution of feminism I mentioned earlier should dovetail with these new demands on the medical establishment. But in many ways, that is no accident.

I am not sure exactly when all of this reached a critical mass. When we consumers realized something astonishing. A system originally seen to be run by men for men, at least if we looked at surgical suites, hospital administrators and at clinical trials, is in fact a system that is now basically "gyno-centric" in most ways that matter.

When someone took the time to quantify this, surveys bore out what we could tell anecdotaly: women use the health care system far more often than men. For example, they actually go and have physicals and do not make it seem like the Bataan Death March. [Sorry, that was a comment on my own marriage.]

They use the system far more often than men whether it is for pregnancy, menopause, maintenance or the care of others, their own parents, their own children.

Today the biggest chunk of health care is today consistently provided by a profession that is still overwhelmingly female, and that is nursing. Even physicians are becoming disproportionately female in certain specialties. By 2010, women doctors are expected to be a third of the profession. But they will be represented much, much more than in family practice. They are different from their male colleagues and the physicians of the past in more than their gender. Studies show that they tend to spend more time with their patients, listen more, and show more empathy. A recent survey showed that 90% of female physicians favor universal health care, as opposed to about 40% of their male colleagues.

So we have seen the future and it is this...not only are women using health care more, they are providing it more. Not only are they providing it more, they are guiding it more, including all those users. Increas-
ingly, we will be bringing traditional female values to our male colleagues rather than the other way around.

Certainly this groundswell for change has come from women and the reason why that should be so should be manifest. We have spoken up because we have had so much to talk about. We have been, overwhelmingly, the patients who come in for what we now know is one of the most common causes of emergency room visits in this country...domestic violence or spousal abuse. We are the patients who receive silicone breast implants, implants Dow Corning marketed without sufficient testing and with some suggestion from its staff scientists that the implants might have significant problems. We were the people who got the Dalkon Shields.

But instead of the quiet and docile patients of some generations past, female patients are now more outspoken. We started with childbirth that was, many of us thought, demeaning to women and bad for babies and about the lack of enough safe and reliable methods of birth control. Now we are militant about the fact that many of the doctors we see do not seem to have a clue as to how to deal with menopause other than to prescribe Premarin. Some of us have become activists about an entire lifespan of medical issues, from pediatric care for our young kids, to family planning for our adolescent daughters, to birth control and maybe estrogen therapy for ourselves, to care for our aging mothers.

Women often still, according to Arlie Hochschild’s book The Second Shift, buy all the groceries, do all the home decorating and do all the Christmas shopping. Women often are the only disseminators of health care in their families.

So it is clear that our perspective will have to help determine how health care will look in the future. We are why there is such a push on for a holistic look at human beings from birth to old age. Because that is the way, given how busy we are, we all try to deal with our lives from beginning to end. But sometimes, until now, we had to run from pediatrician to dermatologist to gynecologist to ENT.

Sometimes, as I have gone about those medical rounds, I have been reminded of a trip I had made to the former Soviet Union in 1987. There were no supermarkets at that time, so that you stood in one line at one place for bread, in another line in another place for milk, and still another for meat, and so on and so forth. I kept thinking as I stood in those lines, “Americans would never put up with this.” And they will not today. Whether it is a newspaper that only gives them one snippet and forces them to go elsewhere for the rest, or health care that only looks at one part of their body in isolation.

In a female-centric system, is it not likely that will change? First of all, nurses will be the backbone of health care in America, as in fact they have always been. Will there be a problem with that? Oh, yes. I got a taste of that when I did that column about the decision of what was then Columbia Presbyterian Medical Center to give certain of its nurses admitting privileges.

Oh my God the mail! You would have thought they were racing Mazeratis down the corridor of intensive care! The letters poured in, almost all of them from doctors. They said, universally, “nurses are wonderful people.” “Some of my best friends are nurses.” In fact, and here’s a surprise, “my wife is a nurse.” But they continued, “nurses should not be practicing medicine.” Oh, so in fact, they had not been doing just that all along? Some activists actually wrote in to me, fearing, I guess with some right-thinking, that hospitals would use nurses increasingly not because they were better but because they were cheaper, thereby keeping woefully inadequate nursing salaries low. Others were afraid that nurses would be asked to act like doctors.

The fact that it was accepted that this was a bad thing, said a lot about what is wrong in health care. One doctor wrote to me in high dungeon, that nurses were de facto inferior to doctors. As proof, he said, the average clinic nurse practitioner saw 1.7 fewer patients a day than the average clinic doctor.

Do you think he missed the point that the whole column was about the importance of the personal touch?

Some of the letters I got were so condescending that the truth is, we Americans sometime have felt condescending to by health care, just as we have felt condescending to by newspaper people. Many of us have, over the years, felt like second-class citizens being treated by doctors who, as one physician with a sense of humor described to me one day, think of themselves as “M-Dieties.”

Sometimes we have been treated in hospitals in which we felt like no one knew our name without checking our charts. We thirsted for someone, anyone, to see us as more than a chest x-ray, or a pelvic exam, or an eye, an ear, a nose, or a throat. Little by little we began to revolt. Revolt turned into what we have today.

I have been some part of that revolt. I suppose that is one reason why I was anxious to come here today. During my years as a columnist, I have been a constant, happy advocate for nurses. In fact, the nicest character in my novel, One True Thing, is a hospice nurse. I am also in a position to represent some of your patients as well. I happen to be the veteran of two personal medical disasters which have become a focus of patient advocacy and action. The first has become commonplace in America.

Thirty years ago, my mother died of ovarian cancer. She was diagnosed when I was 18 years old. Because health care, particularly preventative health care, was not then a big part of the lives of many women, and because she believed, as many of us do, that Pap Tests are some
magic panacea, she waited when she discerned a swelling in her abdomen and the end of her menstrual period. She had those same symptoms five times before and she knew what they meant...another baby. It was not until she was 4 1/2 months along by her count, that she had the surgery that told us that she was bearing not life, but death.

My mother had the finest medical care money could buy in 1971, but it was not good enough. Much of the chemotherapy then was hit and miss. We never knew whether she would be violently or only slightly sick afterwards. The pain management issue, you can all imagine, was deplorably inadequate. The doctors kept telling us that they did not want her to be dependent on morphine, as though that would make any appreciable difference. Since this was before the blessed days of hospice, I nursed my mother at home for her entire illness. At the end, she wound up dying in a hospital bed which was not what either one of us wanted.

But more important, there was really no attempt to engage with her as a person or with us. The doctors saw themselves as clinicians as if the cancer touched only her body, not her mind, not her husband, not her five children.

One of them told me in the corridor offhandedly one day, that ovarian cancer might be hereditary. Then he walked away.

Sometimes, in the years that followed, I was almost glad that my mother was not around to see it, because those were the years that we discovered that she had taken diethylstilbestrol during her five pregnancies. DES, as many of you know, is a synthetic estrogen that was given to pregnant women between 1946 and 1971, supposedly to prevent miscarriage. Well, learning about DES up close and personal is like knowing about everything that can go wrong with health care. At the same time it was being prescribed for pregnant women, it was already causing cancer in lab rats. Early on, a definitive study showed the greatest of ironies, that it did not even prevent miscarriage at all.

But doctors prescribed it and women took it without question, because that was how things worked in those days. Then, in the early 1970s, doctors discovered the newest thing about DES. They found that it caused an extremely rare form of vaginal cancer in the female offspring of the women who had taken it.

I did not get the cancer, thank god. I spent almost ten years being microscopically examined and exhaustively biopsied and arguing afterwards with the insurance carrier at the New York Times, who said that it was an “elective” procedure! But as I reached my thirties, I was told that if I had made it this far without a problem, there was nothing else to fear.

That, of course, turned out to be wrong. As I have grown older, I have learned that many DES daughters have an increased risk of tubal pregnancy, of miscarriage and of premature delivery. Some have immune system problems that they are convinced is a function of their DES exposure. No one really knows, because of the age of most of us, exactly what the hormonal shifts of menopause will bring to us.

But I learned most of what I know, not from health care professionals, but from other DES daughters all over the country who use the new technology, “on-line chatting,” to come together to exchange information and prognosis, to laugh about the exams and to cry about some of the ones we know who died or seem to be infertile.

Nothing seems more representative to me of health care gone awry than the stories those who had the cancer tell about having complete hysterectomies when they were in their teens or early twenties. Some of them had to have more than hysterectomies, had to have their vaginas removed and reconstructed. One woman in Texas, now dead, wrote an essay in which she said her surgeon told her, when she became hysterical about the prospect of losing her vagina, “I’ve lived fifty years without one and I’m fine.”

Well, the good news is that slowly we have all felt that changing. I felt it changing when an oncology nurse pulled me aside one day to show me a list of counseling options available for my family some years after my mother’s experience. We feel a changing when a midwife sits there and takes 20 minutes discussing what seem like irrational fears about labor and delivery, or when a doctor uses a warming tray for a speculum and explains why a test feels the way it feels. More often than not, for whatever reason, either the impulse for those changes or the actual acting out of those changes, begins with health care workers, and with female health care workers.

In a survey of medical students two years ago, the female students said their highest goal was compassion. The male students said it was competence. Now, I want both. But it has been compassion that has been most glaringly missing from the system in recent years and it seems to be coming back.

We all know in America that we have the most astonishingly competent system of health care in the world. We want it to be as empathetic as it is competent.

In 1893, Lydia Wood Farmer talking about how nursing was becoming an organized, honored profession, wrote “Many young girls are becoming trained nurses whose gentle ministrations in the sick room, skilled touch, patient watchfulness, and unwearied vigils are as great factors in the care of the sick as are the professional physicians.” This is a time when “gentle ministrations” sounds as good as it gets. It was not simply that we needed that competence, that ability to do miracles with a scalpel,
or with films. We all accept that we have that now. But there was a sense that the file was always being treated, the patient ignored.

Whenever I say that to health care professionals, they talk about how the problem is managed care. But the truth is that consumers have felt separated from their health care providers for a long time, long before managed care came on the scene.

I think women have really helped to change this. I thought about it one day last summer when I walked into an operating theater to have some major surgery and said, surprised, “we’re all girls!” It was true! The surgical nurses, the anesthesiologist, the surgeon... all women. I was having that surgery with an epidural... I have control issues. I was having that surgery with an epidural while listening to James Taylor on head phones! Afterwards, one of the surgical nurses told me she thought only a female surgeon would have permitted that. The surgeon said she thought because the anesthesiologists were women, they had not tried to talk me into a general. Who knows if they were all correct? All I know is the patient was happy.

Now, some of my friends still prefer the kind of father figure with white hair and a white coat. My closest friend was outraged at my surgeon’s garb when she came in to see me one day. She turned to me and said, “That woman was wearing Capri pants!”

But as I said, I like a sense of control and that was what I had. That was what those nurses and doctors were willing to give me. But seeing them all standing there gave me a niggling sense of memory during this surgery that I could not quite place. Then I remembered that it, too, was from that trip to Russia.

I had been meeting with a group of women in health care and at one point they had mentioned that two thirds of Soviet physicians were women. Well, I was flummoxed! For the first time, I believed in Communism! Two out of every three doctors were female! Then one of them took me aside to tell me sadly that being a doctor was one of the lowest paid and least regarded professions in the nation. The health care system was so antediluvian and so inept, that petty bureaucrats were more valued than doctors and nurses were in the Soviet Union.

No wonder, I thought sadly, that they let all those women have all those jobs. So I had to answer myself that summer coming out of that operating theater....were the increasing numbers of women in medicine, the increasing role given to nurses in many clinics and hospitals, an inevitable fact, not of a new way of looking at patients, but of the fact that health care was being devalued? That salaries were being driven down? That floor nurses in hospitals were being asked to do the work of three women instead of one? In other words, were we being allowed into “the Club” because the other members no longer wanted to belong?

I think there is certainly some of that. We are in a time of incredible transition in the lives of women in this country. In the last 30 years, we changed the world just enough to make it completely different, but not enough to make it really work.

There is some of that in health care, too. The sense that we are in the midst of a dialectic. Thesis: avuncular male GP who makes house calls and school nurse who takes temperatures and hands out sanitary pads. Antithesis: techno-physician who uses a pad of scripts more than any other piece of equipment including the eyes and the hands, and nurse who’s a whipping person for all the shortcomings of the system while trying to cover a quarter of a post-surgical floor by herself. The synthesis is still in the making, which is actually kind of exciting. Its resolution will determine whether it will be possible to convince young people that nursing is a worthy vocation and medicine is worth the sacrifice even if you do not make half a million dollars a year.

Surveys tell us women are still much more likely to answer “yes” to both. One of our tasks now is to convince our male colleagues as well. But you all know the name of that tune.

Women are generous with their experiences and their emotions in a health care setting and outside of it. I believe that if more female doctors and nurses had been involved in my mother’s care, it would have been easier for her and for me. If women had been the kind of educated consumer fifty years ago that they are today, my mother might never have taken DES.

We women have come so far. We operate now in a culture that takes for granted the participation of women in virtually every field, at virtually every level, except on the altar of the Roman Catholic Church. We have moved to a point at which, when the Honorable Eleanor Holmes Norton, Congressperson for the District of Columbia was asked why there was not a “Take Our Sons to Work Day,” she replied, “For the same reason there’s no white history month.”

We have won the right to be individuals instead of a great collective of care givers, a monolithic support system for the rest of the world. We have chosen many different ways in which to do that, from columnists, to mother, to physician, to nurse. We have moved to a second stage of the women’s movement because too often the first stage seemed to be an attempt to mimic men’s lives, even though lots of guys did not like their lives all that much. Complete with those little floppy ties with our suits that almost killed it all for me. I mean, [it was] in an attempt to eschew our traditional roles, to go where no women had gone before, to throw out the babies, quite literally, with the bath water. We realize, now that we have come this far, that many
of our old roles were not only satisfying, they were essential.

When we freely choose nurturance, we realize how it soothes our souls. We understand that what we bring to the table may not be only valuable, but in some ways better. We have to create a new paradigm which will enrich the lives of both men and women alike. That new paradigm will be clear in lots and lots of areas, but none more so than in health care. Because just as we have learned that many Americans want not career or family, but both, so they want not only technical medical expertise, but attention, prevention and connection.

Now, is that a lot? Yes. People expect a lot. I know exactly what that is like. I have been cornered at more cocktail parties and made a stand-in for everything that is wrong with the press. Just as I am sure that some of you here today have been the designated representative of managed care or bad hospital attention as though you, all by yourself were every health care professional in the country.

But you see, that is only because people want the human touch. They want the New York Times or Newsweek to be embodied in a person, a person who will see them as a person, too. They want corporations to see them as faces, not merely some number on a balance sheet. They want nurses and doctors to see them as something more than files and films.

I believe that is really the change that people are clamoring for in health care. We are all part of something bigger than journalism or medicine or any other lines of work. We are part of this society that has discovered over the last few decades that it has no human face. It is terrified and repelled by that fact.

You can see it in our architecture. We built public housing 30 or 40 years ago which were huge rabbit warrens that made people feel like rats in a gigantic maze. No wonder those buildings were defaced and abandoned. No wonder new public housing is low rise, intimate, human.

We can see it in other jobs in our society. In lots of American cities, a new strain of law enforcement called community policing has sprung up, founded on the old principle that the cop on the beat should know the people he served. That would be good for him, and good for them.

The great research universities of America, which for many years rested on the laurels of their graduate programs and great minds, started being eschewed by students who believed they lost sight of individual undergraduates and traded big impersonal lecture courses for small seminars. As a result, America’s small liberal arts colleges are doing a booming admissions business. Great universities are paying a lot more attention to undergraduates.

Even the largest news organization has to be somehow user friendly. I sometimes say to young reporters that the demands on journalism are very different now than they were 50 or 60 years ago, when people needed their newspapers to tell them what the President was doing. They had their back fences to chew over their tragedies, their disappointments and their dreams.

I think lots of publications need to be back fences for people, now that so many of our back fences have disappeared. It seems to me that it is no wonder that for the last 20 or 30 years, the two most widely syndicated columnists in America were Abigail Van Buren and Ann Landers. We have no one to tell our troubles to.

When I realized that newspapers were changing in this way, I realized very quickly that I could be part of the solution or I could be left behind. That was no contest. The truth is I benefited from that change. From a change that meant that writing a column always took as its starting and its finishing point, human experience: the small and all important lives of individuals, whether they had AIDS, were homeless, or worked as nurses. That was more time consuming to me than pontificating from the ivory tower of my office. But it was more satisfying for the readers and it was more for me, too.

Because it does all go back to people, newspapers, business, colleges, and medicine everywhere. I remember such an incredible gesture to try to indicate that. My sister-in-law had lung cancer eight years ago. One day when I was with him, my brother held his daughter in front of his wife’s doctor and said, “She’s two years old. Do something.” The doctor told him that was not the way to go about it. The fact is he was probably right. Besides, my brother knew that his wife was going to die. We all did. But I did not think he was really asking for some sort of magic treatment, but for some kind of recognition that he could not even put a name to. I think he was saying, “Just for a moment, don’t look at the slides or the scans. Just for a moment, look at us. We’re hurt. We’re frightened. We are dying and we need more than an MRI or a meal on a tray.”
That is why I felt that I could have something to say to you here today. Not because I am an expert, but because I have been a patient, to make that plea that Bob was trying to make, so that you will all hear it and remember. Because I think it is a plea people in this country are making to news columnists, to businesses, to schools, to government, everywhere, but no more so than to those of you who take care of them when they are hurt, when they are dying. Look at us. Look at us. For years, I was really afraid nobody would. Then I looked around that operating room last summer and everyone was one of us. I felt like I had seen the future and for me, at least, it was female. Despite the problems, the issues, the changes, the crises, I felt better. I guess I really believe that feeling better is really what your business is all about.

Thank you very much.—

YSN Staff Once Again Recognized with Yale’s Elm Ivy Award

Sharon Sanderson, YSN’s Director of Recruitment and Placement was the recipient of a 2003 Seton Elm-Ivy Award.

Sharon has been employed at Yale for over 25 years. She joined YSN in the newly created position of Recruitment and Placement Officer in 1999. A woman of extraordinary compassion and unusual energy, Sharon set out to forge relationships with our neighbors in the community.

At Career High School, she regularly connected college-bound students with YSN faculty and staff who could assist and support students in the development of their applications. She has read, edited, and coordinated college essays for students who are interested in nursing. She assisted in the coordination of an Awards Ceremony for CNA students and presented the Florence Wald Scholarship to a graduating student interested in nursing.

She also established a link between YSN and Sacred Heart School, organizing YSN students to regularly tutor or teach classes on health and science. She oversaw a program of computer equipment donation to Sacred Heart School and raised our awareness of their needs for a number of other resources.

Sharon has also been a driving force in our Martin Luther King, Jr. Day Program. She has coordinated the awards given to community individuals and groups in recognition of health care diversity, peace, tolerance, and inclusion, and has involved the community in this event by including presentations by area school gospel and a cappella choirs. Along with Professor Saras Vedam, Sharon co-chairs the YSN Diversity Action Committee (DAC).

According to Paula Milone-Nuzzo, Associate Dean for Academic Affairs at YSN, “Sharon’s work has been instrumental in helping YSN forge a strong partnership with the City of New Haven. Her dedication and enthusiasm exemplify the spirit of the School and of the Seton Elm-Ivy Award.”

The Award was established in 1979 to recognize Yale University students, faculty, and staff who have demonstrated outstanding effort to grow the partnership between the City of New Haven and Yale University.

Since the Award’s inception, 242 members of the Yale community have been honored.

A COUP FOR YSN!

Thank you to all who voted in the recent election for Alumnae/Fellow to the Yale Corporation Council. It was reported that the race was a close one. Although YSN alumna Angela Barron McBride ’64, did not win, it was still a coup for both Angela and for YSN to be nominated. Thank you again for coming out to vote...and remember, there is always next year!
46th Alumnae/i Weekend 2003

Nursing Strength in an Uncertain World

Balloons and students welcomed alumnae/i returning to YSN to celebrate the 46th Alumnae/i Weekend. The weekend began with a buffet dinner with students in the School's Reference Room on Thursday evening. Following dinner, Dean Catherine L. Gilliss gathered alumnae/i, spouses, friends, and students together for an informal session of reminiscing.

Alumnae/i Association President Carol Ann Wetmore '94 opened the program Friday morning with a welcome and announcements. The theme of this year's Alumnae/i Weekend emphasized the unique strengths of nursing that come to bear in meeting the uncertainties of today's world.

The morning session discussed ways in which YSN has developed public and private partnerships to strengthen the future of nursing both locally and internationally. Associate Dean Margaret Grey '76, moderated a panel of students, faculty, staff, and community representatives.

The afternoon session on YSN and International Health, moderated by Professor Pamela Minarik, Director of YSN's Office of International Affairs, held its audience captive with presentations by Andrew Yim '03, newly appointed Commission for Veterans Affairs for Connecticut Linda Spoonster Schwartz '84, and Instructor Julia Smith.

A poster session was introduced this year and met with great success. Posters were presented by Elaine Gustafson '86, ("School-based Health Centers—Preparing Nurse Practitioners for this Innovative Practice Site"), Elaine Childs Gowell '53, ("Good Grief Rituals—Tool for Healing"), and Margaret Grey '76, Di-

(top) Christopher Connors of the Yale-New Haven Health System describes Connecticut's emergency preparedness program.

(middle) Nancy '53, and George Doolittle.

(bottom) Caroline Gieges '33, presents her Class Report.
ane Berry, Marianne Davidson '90, Elaine Gustafson '86, Pamela Galasso, Lynn Peckham and Gail Melkus ("Preventing Type II Diabetes in High Risk Teens: Results of a Pilot Study").

Friday evening's annual Reunion Banquet at The Quinnipiac Club continues to be the highlight for the weekend's festivities. We were especially delighted to have Caroline Gieges '33 in attendance to read her Class Report!

Following the dinner, the presentation of the 2003 Distinguished Alumna/us Award was presented to Rhoda Shih-Luan Lee Sun '58, for her outstanding contributions to professional nursing education in China.

The closing speaker was Christopher Cannon, Director of Emergency Preparedness for the Yale-New Haven Health System who described the activities underway in Connecticut to prepare for a public emergency and specifically of the role of the health care provider.

(top) Reunion attendees filled the lecture hall to listen to the program presenters.

(middle) Marion Gates, Mary Lempke, Elizabeth "Tinker" Barnette, and Victoria Conn.

(below) The Class of 1953 celebrate their 50th Reunion
Rhoda Shih-Luan Lee Sun

Her professional career epitomizes nursing leadership and embodies the mission of Yale School of Nursing “better health care for all people.” She has devoted herself to the education of nurses and the improvement of health care in the People’s Republic of China, in a career that spans 50 years.

A native of Beijing in HeBei Province in China, she graduated from Taiwan Normal University in Taipei and traveled to the United States, enrolling at Yale School of Nursing where she earned a Masters in Nursing in 1958. Boston University awarded her a Doctor of Education in 1977. Her teaching experience began as a Clinical Instructor at Greenwich Hospital School of Nursing in Connecticut, later at Mt. Auburn Hospital School of Nursing in Massachusetts and at Boston University School of Nursing.

In 1980, China’s Ministry of Health invited her to conduct a seminar for the Nanjing Military District. She was greeted by a group of 42 nurses, who were training for positions in leadership within hospitals and professional organizations. These students were eager to learn not only about what was happening in the outside world, but to find a new direction for the nursing profession in a rapidly reforming China.

A true pioneer, this alumna recognized the growing need for broad reform in the health care system in China and incorporated into her curriculum the extraordinarily popular “responsibility system,” a system of reform in China which led to increased productivity, improved quality, and greater efficiencies. Her students were inspired and began to adapt both the principle and practice of the “responsibility system” into nursing practice. As a result, they created a basis on which to be recognized and rewarded for their individual efforts, unprecedented in Communist China at that time.

Through her teaching and mentoring, she was able to guide her students to recognize a new theoretical framework for developing modern nursing principles and procedures. Her influence and scholarship was the basis for the establishment of true nursing curricula in a higher education setting, elevating nurses from roles as technicians and maids to that of health care professionals. “Responsibility nursing” set the new standard for nursing practice in China and claimed this alumna as its inspiration.

Today, her legacy lives on in her students who advance nursing practice in China as leaders in hospitals, medical schools, nursing schools, and in provincial and national professional nursing organizations. Her work also continues to fuel the accomplishments of current students and faculty at Yale School of Nursing who partner with colleagues abroad in the development of new scholarship that informs nursing education and practice around the world.

In recognition of her unprecedented contributions to nursing education and scholarship in China, for her leadership in global health care and the pursuit of culturally competent health education, Yale School of Nursing Alumnae/i Association proudly recognizes Rhoda Shih-Luan Lee Sun ’58 with its Distinguished Alumna Award for 2003.

Research Training Grant in Self and Family Management

In March 2003, YSN launched a Pre and Postdoctoral Research Training Program in Self and Family Management. The Training Program is funded by the National Institutes of Health (NIH)/National Institute of Nursing Research (NINR). The program will support scientific training in self and family management of chronic illness by preparing nurses to conduct research in self and family management of cancer, cardiovascular disease, and diabetes. Pre and postdoctoral trainees will be financially supported to work with faculty working in these and related areas from YSN and the larger Yale University community.

Margaret Grey ’76, and Ruth McCorkle will direct the program. The core faculty will include Marge Funk ’84, Catherine Gilliss, Kathy Knaf, Gail Melkus, Lois Sadler ’79, Ann Williams ’81, and Walter Zawalich.
CALL FOR NOMINATIONS

Distinguished Alumna/us Award 2004

NEW DEADLINE: DECEMBER 1, 2003

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. This award will be presented at the Reunion Banquet on June 4, 2004.

Please 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 include: Achievement in 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

Please explain and attach the documentation to this nomination form:

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?

Please send your nominations to:

Lisa M. Hottin
YALE SCHOOL OF NURSING
Alumnae/i Affairs Office
P. O. Box 9740
New Haven, CT 06536-0740

Or email lisa.hottin@yale.edu
YSN Alumnae/i by State *

Note: there are more than 2,900 YSN alumnae/i. These figures represent alumnae/i whose locations are known.

Regional Demographic Breakdown in U.S.

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<tr>
<td>West Coast</td>
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Alumnae/i located in Foreign Countries

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* as of April 2003
A special meeting of the Board of the Alumnae/i Association was convened on April 30 at Rose Alumni House on the Yale campus. Board members were joined by Dean Catherine Gilliss, Associate Deans Margaret Grey '76 and Paula Milone-Nuzzo, staff, and students from the Student Government Organization (SGO). In addition, our hosts from the Association of Yale Alumni (AYA), Executive Director Jeff Brenzel and Director of Education and AYA Services Judy Cole, joined the meeting. The occasion marked the much anticipated presentation of the final report of the Alumnae/i Task Force.

The Task Force was formed in September 2002 and charged with presenting recommendations for strategic functions and related operational approaches to optimize the Association’s role in supporting the mission of YSN. Under consideration was the role of the Alumnae/i Association, representation of alumnae/i on the Board, the structure of the Board and the activities of the Association.

Consistent with the ongoing planning at the University, YSN developed a 10-year long-range planning document entitled, “As YSN Enters the 4th Century.” Goals and objectives were identified and presented to take the School to the next level of excellence as a leader in nursing education, research, and clinical practice.

In order to achieve these goals, every aspect of the School’s programs will be evaluated and reexamined. Additionally, YSN must consider its relationship with its alumnae/i throughout the United States and its impact internationally. Given the Alumnae/i Association’s role in supporting these new directions and the particular emphasis on extending its sight beyond New Haven and the region, it is timely to consider how the Association, acting through its Board, can best serve the School.

In the report entitled, “Recommendations for Consideration to Position the Yale School of Nursing Alumnae/i Association for the Future,” the Task Force examined the demographic profile of the alumnae/i constituency, evaluated the current Board structure, and considered the School’s Long-Range Plan goals. The Task Force presented recommendations to the Board which identified goals and objectives.

At the regular meeting of the Board in May, the Task Force recommendations were unanimously approved. Over the next year, the Board will set out to operationalize these recommendations, through a strategic planning process, which will begin with a Board Retreat scheduled for September 26-27.

The Task Force endorsed the current role of the Alumnae/i Association as stated in the Constitution, “to further and strengthen the interests of Yale School of Nursing, to promote professional standards and educational advancement of nursing, and to promote fellowship among our graduates.” Furthermore, the Task Force emphasized the role of the Association in “relationship building” between alumnae/i, the School, and the greater University.

In summary, the Task Force made the following recommendations:

- Identify alumnae/i for Board service from a broad demographic base who have the ability to offer their service to the Alumnae/i Association and who can make the commitment for at least 2 years.
- Reduce Board meetings to 2-4 times per year and delegate tasks to staff and/or alumnae/i ad hoc committees whose work would continue between meetings.
- Highlight the visibility and importance of the Board’s role in directing all activities of the Alumnae/i Association.
- To facilitate Board participation, it is recommended that the School fund the related travel/hotel costs for Board members to attend meetings.
- Survey the alumnae/i to better understand the needs of the constituency, their resources and their willingness to participate within the Association.
- Programs and activities sponsored by the Alumnae/i Association should directly support the mission of YSN and contribute to relationship-building between alumnae/i, YSN, and the University.
- The Board should work closely with YSN’s Office of Recruitment and Placement to develop a network of alumnae/i willing to assist with recruitment, mentoring, and job placement activities.
- The Board should mentor YSN’s AYA delegates with a goal of cultivating a stronger relationship between nursing and the University, and increasing the expectation of the role of the Delegates.
- The Board should seek to build strong relationships with new alumnae/i by increasing the visibility of the Alumnae/i Association with students.

THANK YOU

Dean Gilliss and the Board of the Alumnae/i Association wish to express their deepest appreciation to members of the Alumnae/i Task Force 2003 for their time, expertise, and their willingness to present recommendations which will assist the Board in charting the Alumnae/i Association’s future course on behalf of our alumnae/i in partnership with the School and with the University.

Alumnae/i Task Force 2003:

Maureen O’Keefe Doran '71, Chairperson
Nina Relin Adams '77
Bonnie Baloga Altieri '82
Angela Barron McBride '64
Margaret Madden Styles '54
Deborah Huntington Ward '77
Carol Ann Wetmore '94

Yale Nurse Fall 2003 25
Yale University School of Nursing Alumnae/i Association

Minutes of the Annual Meeting June 7, 2003

The meeting was called to order at 9:55 a.m. by Carol Ann Wetmore '94, President of the Association. Minutes for the June 8, 2002 meeting, as printed in Yale Nurse, were approved.

Treasurer's report
Final year-end data were unavailable, but will be printed in the September, 2003 issue of Yale Nurse.

Nominating Committee Report
Susan Langermann '99, presented the 2003–2004 Slate of Officers and Directors to the Association membership.

Alumnae/i Fund Report
Nina Adams '77, gave the following Annual Giving report:
1. Nina commented that the turn in the economy has certainly affected annual giving over the past couple years.
2. She emphasized the importance of participation. YSN consistently has the highest level of participation throughout the University. To date, we are at 47% participation with a goal of 50%. The University as a whole, is at 35% participation.
3. YSN has an overall dollar goal of $155,000. We have currently collected $150,000 in annual giving.

Old Business
1. The Launching Your Career Workshop sponsored by YUSNAA, was again well attended by students preparing for graduation. Students enjoyed the workshop and found it helpful to their career planning efforts.
2. Presentation of YSN Pins – YUSNAA once again purchased and presented pins to all graduates at the graduation ceremony. This continues to be appreciated by all new graduates.
3. Carol Ann Wetmore presented the final report of the Alumnae/i Task Force. Much discussion took place. The general consensus was that the new structure and role of the Board of Directors would be a positive change for the Association.

New Business
1. Those in attendance unanimously elected the Slate of Officers and Directors that had been presented earlier in the meeting.

The meeting was adjourned at 10:45 a.m.

Respectfully submitted,
Donna J. Boehm, Secretary

Addendum to the Annual Meeting Minutes:

- Total budget expenditures for 2002/2003 were $178,694. Among its expenses, the Association has been able to support several important activities:
  - Student scholarships in the amount of $97,000.
  - Yale Nurse production costs of $21,000.
  - Purchase of MSN pins awarded to graduating students at $4,802.
- The cost of the annual Alumnae/i Weekend activities was $18,000. Income from registration and fees brought in $5,120.
- The sale of bulldog pins and YSN memorabilia raised approximately $996 for the Association.
- Remaining expenditures included support of the annual Launching Your Career Workshop and graduation activities.
YSN receives Gift for International Community Health Rotations

Through the generosity of Yale College alumnus James Leitner '75, twenty-one GEPN students were able to embark on a 5-week international community health rotation. The gift helped to defray the costs of travel to clinical sites in New Zealand, Mexico, Nicaragua, and Trinidad and Tobago.

Mr. Leitner's involvement with the University has supported a range of opportunities for students to broaden their global perspectives including the Auerbach Grayson-Leitner Internships and the Georg Walter Leitner Program in International Political Economy. He is committed to strengthening Yale's international programs and initiatives. As part of this commitment, Mr. Leitner has agreed to again provide funding for the Nursing School's summer 2004 international health rotations. It is his hope that others in the School community will join him in this effort.

The students periodically emailed us during their rotations and their comments express the unique educational and clinical experiences they encountered:

Clinical for me has been in a maternity care center that serves women from inside and around Esteli. I've shadowed nurses, doctors, and spent time talking with patients. I'm now at a rural clinic with low volume, but lots of time to talk with the community nurse about common health and social-economic issues in her community."

Laura Sundstrom '05
from Nicaragua

My first week, we met a wonderful community of women who farm for their livelihood when we went out to give vaccinations. We were able to return and spend some time really talking with them and learned a lot about the issues in Mexico as it applies directly to them. There are certainly some positives as well as negative aspects in the system. They do a great job with preventative health, out of necessity for the lack of access to care I think. In my clinic this week, the doctor has a map with each home in his community marked with a colored pin indicating if a member of the household is malnourished, pregnant, diabetic, due for vaccinations, etc...I thought it was really impressive and it seems he doesn't miss anyone as a result. He has also been great about having us examine patients, interview, diagnose, even write the medical note in the chart.

Kelly Carroll '05
from Mexico

I am grateful for the experiences I have had thus far, and they have been varied indeed. I spent the whole of last week working with district nurses in rural and urban settings. I learned much and would have to agree that home visits are the way to go. This past week I have spent time in the respiratory diabetes, and wound care clinics. All have yielded interesting lessons...I am hoping to have a run or two with the community pediatric nurses as well...

Sally Thompson '05
from New Zealand

The Centro del Salud has been happy to have the YSN students. The relaxed tempo permits more teaching and patient interaction which has certainly benefited the students. They have been excited about working in the pre-natal, adolescent and medicine clinics, as well as the rural clinics...Students have been giving presentations on clinical questions at post-conference. So far, we have covered Dengue fever, malaria, trachoma 13, cesarean procedures, vaginal infections, and TB. We have also visited the hospital, and have plans to visit the institute of natural remedies and medicine next week.

Bethany Golden, MSN '03, preceptor with the Nicaragua rotation

Amelng Retirement Celebration

Saturday, June 7, marked the celebrations honoring Ann Tomaino Ameling '67, at her retirement after 36 years at Yale.

Best wishes, Ann!

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Exercising Your Will Power...

A YSN education is enduring.

Thanks to the ongoing generosity of alumnae/i and friends, the tradition of excellence that marked your years at Yale is alive and well on today’s campus. You can help safeguard this tradition for tomorrow’s students by creating a scholarship, endowed chair, or special use fund in your will or trust. Such bequests have a powerful impact on the generations of students to come.

To learn more about establishing a lasting legacy at Yale School of Nursing, call the YSN Development Office today.

Lisa M. Hottin
Director of Development & Alumnae/i Affairs
Yale School of Nursing
100 Church Street South
P.O. Box 9740
New Haven, CT 06536-0740
Tel: 203-785-7920 Fax: 203-785-3554
lisa.hottin@yale.edu
*Giving Back*

Dear Friends and Colleagues,

A new academic year marks many beginnings...a new class begins their academic journey to becoming Yale Nurses, the graduates of 2003 are now alumnae/i beginning their careers and a new Alumnae/i Fund year begins with new goals and new opportunities.

Before we set new goals for 2003/2004, it is important to know where we are. Last year’s Alumnae/i Fund reached a new high of $158,669 in gifts. This is the largest amount the School has ever raised! Last year we were able to provide scholarship support to 96 students through the YSN Alumnae/i Fund.

To each of the 1,360 alumnae/i who contributed to that total, I thank you. We can all be very pleased and very proud. We continue to lead the University Graduate and Professional Schools in participation! 1,360 donors represents a very impressive 50% of our alumnae/i.

However, the other 50% of our fellow alumnae/i did not participate in last year’s success. In setting new goals for 2003/2004, it is our challenge to involve both new and lapsed donors to our Alumnae/i Fund and to increase, even further, the participation.

If you gave last year, I ask that you renew your giving this year. If you did not give last year, I ask that you consider a gift to YSN. Every contribution, whatever the amount, is important and helps YSN to increase its scholarship support for students and other activities.

I look forward to reporting to you about our progress later in the year.

Best wishes,

Nina Relin Adams ’77
Chairperson
YSN Alumnae/i Fund

P.S. You can make a gift now to YSN by calling toll-free 1-800-395-7646 or on the web at www.yale.edu/give.

*What Is Your Legacy?*

Does your financial picture include a gift to YSN? If so, you can begin to create a secure income stream and tax advantages that benefit you and your family.

The opportunities for charitable gifts are many and varied. There are numerous options for making outright gifts, deferred gifts and bequests that can brighten your financial future. Current and deferred gifts to YSN can be made using a variety of assets such as:

- Cash
- Appreciated securities
- Closely held stock
- Real estate
- Limited partnership interests
- Retirement plans and life insurance policies
- Bequests
- Personal property

For more information to learn how a planned gift is beneficial to you—and to YSN—contact Lisa Hottin, Director of Development & Alumnae/i Affairs, YSN, 203-785-7920 or lisa.hottin@yale.edu.
YSN Medal Recognizes Alumna's Contributions at Yale University School of Nursing

Retiring YSN Professor Ann Ameling '67, was awarded with the Yale School of Nursing Medal in June. The Medal is given to a YSN alumnae/i or friend in recognition of outstanding service to the School and to the greater Yale University community. Ann is the fourth recipient of this prestigious award. Previous recipients include Saundra Bialos '71, Maureen O'Keefe Doran '71, and Donna Kaye Diers '64.

The text of the citation, which follows, describes Ann’s work on both “sides” of the campus, resulting in a closer partnership between Yale School of Nursing and the University.

Ann Ameling entered the Yale School of Nursing in 1965, from Smith College via Columbia University’s accelerated program in nursing. She joined the faculty immediately upon graduation. She chose to study and advocate for the chronically mentally ill, then as now an underserved underserved population. She soon joined the planning initiative for what has become the GEPN program for non-nurse college graduates. Because she was one herself, she brought to the planning a refined sense for what these students could bring to the discipline and what the profession could bring to them. She served as the first Chair of the Program, a tenure that carried the School through state and national and federal approvals, and over uncounted occasions to interpret the program to others.

Ann’s appreciation for the wealth of University life (and her amusement at its excesses) drew her as one of the first YSN faculty to become an active Fellow of one of Yale’s undergraduate colleges. She served as Acting Master of Berkeley College, and then as Master of Saybrook, increasingly developing a reputation for wise counsel and steady management. She was called to serve as Associate Provost, with a portfolio as varied as the Classics Department and Judaic Studies, Forestry, Music, Divinity, Nursing and Management, the art gallery and policy for retirement. She was sought for studies of teaching in the residential colleges, athletics and the Teachers’ Institute.

She returned to YSN with a newly found commitment to healing and to the integration of spirituality and health, forging new relationships with the Divinity School in course work, research and activities on campus. Through her work, Ann has strengthened the relationship between the Nursing School and the University in a productive and effective partnership. It is with great pride and distinction, on this, the Seventh Day of June, Two Thousand and Three, Yale School of Nursing bestows upon Ann Ameling its highest award, the Yale School of Nursing Medal, and welcomes her to membership in Yale School of Nursing’s Hall of Fame.

Let's Hear from You!

Yale Nurse, YSN’s alumnae/i publication, seeks articles by and about our alumnae/i. Have you recently worked abroad? Have you presented a paper at a professional meeting? Have you precepted YSN students? How have you contributed to the betterment of your community, your profession, the health of your patients? What interesting research have you conducted? Have you recently married? Moved? Had children? We want to hear from you.

I have recently taken over the helm of editing Yale Nurse and would welcome your comments and suggestions. You can email me at lisa.hottin@yale.edu or send your news and letters to my postal address at: YSN, ATT: Yale Nurse, 100 Church Street South, P.O. Box 9740, New Haven, CT 06536-0740.
Yale World Fellows Program taps YSN Doctoral Student

Allison Squires '06, has been chosen as a 2003 Associate Yale World Fellow in Yale University's World Fellows Program.

The Yale World Fellows Program is designed to bring together leaders with a broad range of cultural and professional experience. In addition to expanding the personal and professional horizons of the Fellows, the World Fellows Program seeks to provide a vantage point on the world for the entire Yale and New Haven community. During 15 weeks of intensive study between September and December, the World Fellows and Associate World Fellows participate in a seminar on global issues taught by some of Yale's most distinguished faculty. They are also free to take any course offered in the university or to arrange independent study projects with individual members of the Yale faculty. World Fellows also have intimate access to prominent Yale alumni and other American leaders.

According to Kel Ginsberg, Associate Director of the Yale World Fellows Program, "Allison brings to the program a particularly impressive range of knowledge and skills. Her ability to analyze world issues on a variety of levels will be extremely beneficial to the other World Fellows and we are privileged to have her participate in the Program."

"This is a great opportunity for Allison to interact with distinguished leaders from Yale University and from around the world. It is also an important opportunity for the Yale School of Nursing to contribute to a University-wide discourse on the most pressing issues in the world today," said Dean Gilliss.

YSN Alumna Appointed First Nurse to Head CT Veterans Affairs

The nomination by Connecticut Governor John Rowland of Linda Spoonster Schwartz '84, as the next Commissioner of the Connecticut Department of Veterans' Affairs was approved by the State Assembly in May 2003. Dr. Schwartz is the first woman (and the first nurse) in Connecticut's 139 years of service to veterans to be appointed to direct this program. She is also only the second woman in U.S. history to direct a state Department of Veterans Affairs.

She has served as Trustee of the Connecticut Department of Veterans Affairs since 1989. She was a member of the VA Advisory Committee on Re-adjustment of Combat Veterans (1990-1997), Chair of the VA Women Veterans Advisory Committee (1997-2000), and Advisory Committee on Care of Seriously Mentally Ill Veterans (1994-2003). She was New England Regional Director and member of the Board of Directors of Vietnam Veterans of America from 1989-1995. She was one of the founders and served as the President of the Vietnam Vet-
erans Assistance Fund (1990-1996), a charitable organization certified by the Combined Federal Campaign, which focuses on the needs of the nations 9.2 million Vietnam Era Veterans. From 1992-1999 she served in a volunteer capacity, as the Co-Director of Project Partnership, a program in which, VVAF acquired and developed four homes for homeless and disabled veterans in conjunction with the West Haven VA Medical Center.

In 1987, she was honored as one of the "Outstanding Women in Connecticut" for her work on behalf of women veterans. In 1992, she was the first woman to receive the National Commendation Medal for "Justice, Integrity and Meaningful Achievement" from Vietnam Veterans of America. She was also the first woman veteran to earn the prestigious, State of Connecticut Veterans Commendation Medal (1995).

Governor Rowland had this to say about Linda:

Dr. Schwartz brings a new perspective to the Department of Veterans' Affairs. She understands healthcare issues as someone who has practiced nursing in the military and the private sector. She knows and understands how we can better coordinate services for veterans using both state and federal resources. I am delighted that someone with such dedication and experience is joining the strong team already in place in our veteran's department.

Yale Nurse Fall 2003 31
# Yale School of Nursing Calendar of Events

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YSN's Diversity Committee Mobilizes Yale

An event of great significance took place at YSN in June. The YSN Diversity Action Committee (DAC) brought together key representatives from numerous diversity organizations throughout Yale University to begin a university-wide study of diversity issues on campus. Representing YSN were Saraswathi Vedam '85, Sharon Sanderson, Kris Fennie, Karel Koenig, Pamela Minarik, Maria Mauldon '87, Ilya Sverdlav, Teresa De Cicco, and Suzanne Gioronda '04. They were joined by these colleagues:

- Rosalinda Garcia, Associate Dean, Yale College/Director, Latino & Native American Cultural Centers
- Valerie Hayes, Special Assistant to the Provost/Director, Office of Equal Opportunity Programs
- Anna Ravirez, Associate Dean of Admissions, Yale Divinity School
- Forrester (Woody) Lee, Associate Professor of Internal Medicine/Assistant Dean of Multicultural Affairs, Yale School of Medicine
- Melinda Pettigrew, Associate Professor of Epidemiology and Public Health
- Victoria Nolan, Deputy Dean, Yale School of Drama/Managing Director, Yale Repertory Theater
- Ellen Kelly Ginsberg, Associate Director, World Fellows Program

YSN's Diversity Action Committee is co-chaired by Saras Vedam and Sharon Sanderson, YSN's Director of Recruitment and Placement. DAC was established in 2001 to support and advise the Dean on pertinent issues related to diversity at YSN. Since its inception, YSN has played a major role in identifying and helping to close health disparities. The School's DAC embodies this legacy.

Special Collection Advisory Group

YSN houses a unique collection of monographs, manuscripts, letters, photographs, memorabilia, and artifacts of the history of the Yale School of Nursing. Recognizing the need to preserve and make available the collection to scholars and the public, the YSN Special Collection Advisory Group was formed in April 2003 to plan for the future of the YSN Special Collection. The group has identified the following goals:

- Gain physical control of the collection, protecting it from theft and environmental damage, and preserving it for the future. Determine the level of access to the collection.
- Secure funding for preservation and cataloging of the collection.
- Inventory the current collection for its holdings. In addition, survey what collections have been transferred to other Yale Library or archival units.
- Develop a mission statement for the special collection.
- Define a collection policy, clearly stating what type of material to be acquired and maintained.
- Develop a plan to establish and maintain intellectual access to the collection.

For more information about the Special Collections Advisory Group photos, contact Lisa Hottin at (203) 785-7920 or lisa.hottin@yale.edu.
Linda Schwartz '84, was interviewed for a San Francisco Chronicle article titled, “Seeing Red Over Agent Orange,” by David Perlman. The article was featured in the April 21 issue. To read the article, go to http://www.sfgate.com/cgi-bin/article.cgi?file=/chronicle/archive/2003/04/21/MN307402.DTL.

Larry Scahill '89, was featured in the April 25 issue of Yale Bulletin & Calendar. The article titled, “Research shows antipsychotic drug risperidone may reduce severity of Tourette’s symptoms,” describes Dr. Scahill’s ground-breaking work with risperidone. The study by Yale researchers suggests that the atypical antipsychotic drug risperidone reduces tic symptoms in children and adults with Tourette syndrome (TS). Larry Scahill is the lead author on a paper entitled, “A Placebo-Controlled Trial of Risperidone in Tourette Syndrome,” (with J.F. Leckman, R.T. Schultz, L. Katsoyvich, and B.S. Peterson) that was featured in the April issue of Neurology Magazine. The paper evaluates the efficacy and safety of risperidone in children and adults with Tourette syndrome.

The New Haven Register reported on the work of YSN’s Faculty Practice in Derby, CT in the April 27 article entitled, “Midwives a Growing Trend Among Natural Childbirth Advocates.”

Diane Viens is featured in the April 2003 issue of Nurse Practitioner World News, the official publication of the American College of Nurse Practitioners. The article is titled, “NONPF Addresses Forces of Change in Nurse Practitioner Education.” Pat Jackson Allen is also featured as part of the article. There is also an interview with Diane (pp. 3, 6).

YSN’s Yale Nursing Matters has been chosen to receive the 2003 Mercury Award for Best Magazine from the Public Relations Society of America (PRSA), Connecticut Valley Chapter. This coveted award is given for excellence and innovation in mass communication, marketing, and public relations to private, non-profit, education, and media organizations in Southern New England.

An editorial by Margaret Grey '76 and Lisa Faith Stern '05, titled, “Scarier Than SARS,” appeared in the May 26 issue of the Hartford Courant. Lisa and Dr. Grey discuss how public awareness, activism and research dollars are directed at potential threats like SARS, while other health dangers are underestimated, underfunded, and poorly understood.

The recently released 10th Anniversary issue of Minority Nursing Magazine features an article about the Yale-Howard Partnership Center on Health Disparities. The article is entitled, “The Power of Partnerships,” and features Deans Catherine Gilliss and Dorothy Powell, as well as YSN’s Nicole Laing '04, Sabrina Singleton '04, and Gail Melkus (pp. 2, 54-56).

An article by Therese W. Harrison '02, Elaine Gustafson '86, and Jane K. Dixon entitled, “Radiologic Emergency: Protecting Schoolchildren and the Public,” was featured in the May issue of American Journal of Nursing (AJN, May 2003, pp. 41-49). The article discusses the need to promote community preparedness in the event of a radiologic emergency during school hours, and how school nurses, advanced practice nurses in school-based health centers, and other health care professionals in the community would be at the forefront of the response to such a disaster.


Lois S. Sadler '79, Martha K. Swartz and Patricia Ryan-Krause '81

“Firearm safety devices,” pp. 157-158

Mikki Meadows-Oliver '98

“Employment characteristics of recent PNP graduates,” pp. 133-139

Patricia Ludder Jackson, Christine Kennedy and Rob Slaughter “Diagnosis and management of pelvic inflammatory disease in adolescents,” pp. 145-147

Mona A. H. Eissa and Polly F. Cromwell '87

“Whiplash injury secondary to a motor vehicle accident,” p. 148

Elizabeth Perrone '02

An article entitled, “Communication & Collaboration: A 21st Century Health Care Imperative,” by Professor Pamela Minarik appears in the inaugural issue of the Journal of International Association for Health Communication Sciences (vol.1 2003, pp. 39-48). The article is based on Professor Minarik’s presentation during the First Annual International Association of Health-Communication Sciences Convention that was held at Aomori University of Health and
Welfare, Aomori, Japan in 2001. From May 2001 to August 2002, Pamela lived in Japan where she was a professor at Aomori University of Health and Welfare. She now holds a part-time appointment at that institution. While in Japan, Pamela was also a professor at Tokyo Women’s Medical University. She consulted and supervised advanced practice psychiatric nurses in Tokyo under the auspices of the Japanese Nursing Association.

Gail D’Eramo Melkus received the 2003 Virginia A. Henderson Award from the Connecticut Nurses Association. She is featured on the front page of the June issue of Connecticut Nursing News. The article provides a nice overview of Gail’s many outstanding accomplishments in nursing research, education and practice.

The same issue of Connecticut Nursing News also featured an article authored by YSN’s Shannon Sanford ’03 regarding policy on the treatment of acute and chronic pain.

Mary Ellen Rousseau is quoted in a July 9 Chicago Tribune article titled, “Hot Flash: Midwives can help with menopause.” Yale School of Nursing is also mentioned.


An article by Professor Gail D’Eramo Melkus, Kimberly Kehoe ’01, and Kelley Newlin ’01, titled, “Culture: Within the Context of Care: An Integrative Review, is featured in Ethnicity & Disease, Summer 2003.

American Academy of Nursing Fellows Gail D’Eramo Melkus, Larry Scahill ’89 and Sandra Talley are featured in the current issue of Advance for Nursing Magazine (Regional News section, pp. 7-8). This issue also features doctoral student Janet Parkosewich ’85, who received the Nursing Leadership Award for Nursing Research from Yale-New Haven Hospital. Other Leadership Award recipients included Gina D’Agostino, Joyce Potter, and Robin Zingales-Browne ’96 (p.9). Also featured in this issue was Dawn Onofrio, Career High School graduate and the 2003 recipient of the YSN Mountainales Scholarship.

And lest we forget...

An interview with YSN’s Ivy Alexander appeared in Fitness Magazine, a national publication whose content includes features on fitness, health, and nutrition. The article, entitled, “Crucial Questions to Ask Your Mom: Her questions could predict your chances of diabetes, depression, infertility and more,” by Nina Martin, was published in the February ‘03 issue.

An article by Saraswathi Vedam ’85 entitled, “Home Birth versus Hospital Birth: Questioning the Quality of the Evidence on Safety,” appeared in the March 2003 issue of Birth Journal. Saras’ article was written in response to an American College of Obstetricians and Gynecologists press release titled, “Home Births Double Risk of Newborn Death” (July 31, 2002). The press release was based on a controversial home versus hospital birth study by Jenny W.Y. Fang, MD, MPH and colleagues that suggested the risk of death to newborns delivered at home was nearly twice that of newborns delivered in hospitals.

In recent years, the graduating class has presented a recognition award to a YSN staff member who has played an important role during their time at YSN. This year, on behalf of the Class of 2003, the YSN Student Government Organization presented the 2003 Staff Award to Keith Wilkinson, a member of YSN’s Information Technology Team.

Staff Award Recognizes Keith Wilkinson

Visiting Scholar from Sweden Visits

Carina Furaker, Ph.D., Assistant Professor of Health Care Pedagogics at the Goteborg University, in Goteborg, Sweden spoke to the YSN community in May. Dr. Furaker discussed the Swedish health care system, including welfare reform, nursing education, the nursing shortage, and the impact of changing demographics on health care in Sweden. The presentation was sponsored by the YSN Office of International Affairs.
Patricia Jackson Allen

On April 1, Patricia Jackson Allen, MS, RN, PNP, FAAN, joined our faculty as a Lecturer working with the pediatric specialty.

We only needed to wait until Saturday, April 5 for her to “bring home the gold” for YSN at the National Organization of Nurse Practitioner Faculties Meeting when she was awarded the 2003 Outstanding Nurse Practitioner Educator Award. The award recognizes demonstrated contribution to the advancement of nurse practitioner education in innovative curriculum development; outstanding teaching ability; development of creative teaching strategies; faculty practice models; and educational policy development.

Pat is, in every way, an outstanding nurse practitioner and educator.

Katherine R. Jones

Katherine R. Jones, RN, PhD, FAAN, has joined the YSN faculty as a tenured professor. Dr. Jones’ area of expertise is in health services research. She comes to us from the University of Colorado Health Sciences Center in Denver. Prior to that she was on the faculty of the University of Michigan School of Nursing.

Dr. Jones earned her BSN and MS at the University of Michigan, and earned a PhD in Administration and Policy Analysis at the Graduate School of Education at Stanford University.

Faculty Notes

Terri P. Clark ’79, received the 2003 Excellence in Teaching Award from the American College of Nurse-Midwives (ACNM) Foundation in May. To honor the individuals who teach, mentor, and act as role models to students, the ACNM Foundation recognizes one teacher from each ACNM preaccredited/accredited program each year. Award recipients are selected by students in their program for demonstrating excellence in one or more of the following: academic education, clinical education, research and/or clinical preceptor/mentor. This year’s award recipients were announced at the 48th ACNM Annual Meeting and Exhibits in Palm Desert, CA.

Gail D’Eramo Melkus, Lawrence Scanhill ’89 and Sandra Talley have been elected for Fellowship in the American Academy of Nursing. The induction of new Fellows will take place at the Academy’s Annual Meeting and Conference at The La Costa Resort & Spa in San Diego, CA on November 15, 2003.

Linda Spoonster Schwartz ’84, has been chosen to receive the Connecticut Secretary of the State’s 2003 Public Service Award. This Award recognizes the accomplishments of individuals who are currently serving on state boards and commissions in the State of Connecticut and play a vital role in improving the lives of people in our state. Linda is being recognized for her service on the Department of Veterans’ Affairs Board of Trustees, where she has served since 1989. She has also been named Connecticut’s Commissioner of Veteran’s Affairs (see separate article in this issue).
Elaine Gustafson '86 was invited to speak to the Illinois Coalition for School-based Health Centers at the Illinois School Health Centers State-wide Conference held in Bloomington, IL, in April. Elaine spoke on, "Childhood Obesity Epidemic: Implications for schools and school-based health centers." She is in her 13th year of clinical practice at the Fair Haven Community Health Center where she is the primary care provider for a large panel of inner city children and adolescents. She also works part-time at the Fair Haven Middle School-based Health Center, a satellite of the Fair Haven Community Health Center.

YSN was well represented at the 63rd Annual Scientific Sessions of the American Diabetes Association which took place on June 13-17 in New Orleans. YSN faculty and staff presented a total of ten abstracts and posters. There were five from Margaret Grey's '76 research group, including an oral presentation by postdoctoral fellow, Robin Whittemore, three from Walter and Kathy Zawalich, and three from Deborah Chyun '82 and Gail Melkus' group. A delegation of 14 faculty and staff from YSN attended the conference.

Kathy Knafl, received an NIH/NINR R01 grant entitled, "Assessing Family Management of Childhood Chronic Illness." The 3-year grant will develop and evaluate an instrument to measure general family processes and functioning of family life in the context of childhood chronic illness. This work represents a progression of Dr. Knafl's work from description to the development of a measure to assess family management style. Co-investigators on the grant are Margaret Grey '76 and Jane Dixon. George Knafl will be involved in the analyses. Data will be collected from three sites: Yale, University of Pennsylvania, and the University of Illinois at Chicago.

Lecturer Mikki Meadows '98 was elected President of the Connecticut Chapter of NAPNAP, 2003-2004. NAPNAP is a professional organization that advocates for children (infants through young adults) and provides leadership for pediatric nurse practitioners who deliver primary health care in a variety of settings.

Mary Ellen Rousseau has been elected to Fellowship in the American College of Nurse-Midwives (FACNM). New Fellows were inducted during the General Sessions of the 2003 ACNM Annual Meeting in Palm Desert, CA in June. Mary Ellen is an Associate Professor at YSN and a certified nurse-midwife at the Women's Center of Yale-New Haven Hospital. She continues to provide care to women at the Women's Midlife Clinic which serves inner city and uninsured women in the community.

The Zawalich Lab, consisting of Kathleen Zawalich, Greg Tesz, and Walter Zawalich, was awarded a grant from the National Institutes of Health. The proposed studies explore how the over or under expression of key proteins in the islets of Langhans regulate insulin secretion. It is anticipated that these studies will facilitate the design of surrogate B-cells for genetic engineering studies to replace those lost in Type 1 diabetes and establish how these proteins contribute to the changes that occur in Type 2 diabetes.

Carolyn Auerhahn was selected to be a presenter at the 18th Annual National Conference of the American Academy of Nurse Practitioners. Her presentation, entitled, "Case Management in Alzheimer’s Disease: Recognition of Risk Factors and Screening Tools," was part of the continuing education symposium entitled, "Optimizing Care for Patients with Alzheimer’s Disease: Emerging Treatment Strategies." The symposium took place on June 29, in Anaheim, CA.

Martha Swartz was recently elected Secretary of the National Association of Pediatric Nurse Practitioners (NAPNAP), and also elected to the Board of the Friends of Yale-New Haven Children’s Hospital. She recently received funding from YSN Intramural Grants Program and also from the NAPNAP Foundation for the support of her research study, "The Relationship Between Family Functioning and Health Related Quality of Life in School Age Children with Asthma." She presented at the Annual Nursing Conference on Pediatric Primary Care sponsored by NAPNAP in Orlando, FL in April.

The title of her presentation was, "Predictors of Health Related Quality of Life in Children With Asthma: A Meta-Analysis."

Diane Vien's was elected to Fellowship in the American Academy of Nurse Practitioners (FAANP). The Fellowship recognizes nurse practitioner leaders who have made outstanding contributions to health care through clinical practice, research, education and/or policy.

Ivy Alexander's study, "Menopause Symptoms and Management Strategies Identified by Black Women" (I.M. Alexander, M.E. Rousseau, K. White, S. Motter, C. McKie, P. Clarke) was accepted by the North American Menopause Society (NAMS) for a poster presentation that will take place during the NAMS 14th Annual Meeting on September 17-20 in Miami Beach, FL. Dr. Alexander’s study describes the menopause symptoms urban black women experience and perceive as distressing and identifies management strategies used for these symptoms. The study is funded by NIH/NINR as a pilot study in the Yale-Howard Partnership Center on Reducing Health Disparities.

Angela Crowley is a Senior Consultant for Health Child Care Connecticut and recently served as host with YSN to representatives of key health care and child care agencies and organizations in Connecticut. They met together with their federal partners to map out a future work plan for child
Faculty Notes

health and development programs in the state. Healthy Child Care Connecticut, a project of the US DHHS Maternal and Child Health Bureau which began in 1996, will be merging with Connecticut's Infant and Toddler Child Care Quality Initiative under Zero to Three and Connecticut's Early Childhood Comprehensive Systems Project to strengthen statewide systems that promote healthy development and school readiness.

Sandra Talley has been elected to the position of President-Elect in the 2003 election for the Board of Directors of the American Psychiatric Nurses Association (APNA). Dr. Talley will be inducted during APNA's Annual Meeting in Atlanta, Georgia on October 5-8, 2003.

American Psychosocial Oncology Society (APOS) Board Members, Ruth McCorkle, RN, PhD and Jimmie Holland, MD recently traveled to Miami, Florida to provide training to oncology nurses, psychologists and psychiatrists on the use of the Distress Thermometer to promote a deserving psychosocial referral program, the Individual Cancer Assistance Network (ICAN), now operating in southern and central Florida. On July 23, Drs. McCorkle and Holland visited the Sylvester Comprehensive Cancer Center at the University of Miami and gave a lunchtime lecture on how to effectively integrate the Distress Thermometer into a psychosocial program to identify patients and family members who are experiencing a level of distress above what is normal after a cancer diagnosis. With this identification, patients and family members may be referred to ICAN to receive a referral for psychosocial services. That same evening, the presentation was given during a special dinner-time meeting of the South Florida Chapter of the Oncology Nursing Society. A similar program is currently being planned for locations in Tampa and Orlando this Fall, and four informative webcasts will be available in September.

Student News

YSN doctoral student Marice Bakitas '06, has been selected as the recipient of the Certified Hospice & Palliative Nurse of the Year Award. Marie received the award in April at the national Joint Clinical Conference of the Hospice and Palliative Nurses Association and the American Academy of Hospice and Palliative Medicine in Denver. The Award is given out annually and recognizes the work of end-of-life nurses across the country.

Marie is a palliative nurse practitioner in the pain and medicine consult service of the Department of Anesthesiology at the Dartmouth-Hitchcock Medical Center (DHMC). She was a coordinator and team leader of Project ENABLE (Educate, Nurture, Advise Before Life Ends), a Robert Wood Johnson Foundation funded grant at the Norris Cotton Cancer Center, DHMC. The project promoted excellence in end-of-life care by developing a partnership between a community hospice organization and a comprehensive cancer center. The success of this demonstration project led to the development of a regional palliative care consultation service.

YSN doctoral student, Esther Seibold '05, has been awarded a graduate teaching fellowship in the Peabody Museum Program in Biodiversity and Human Health. The Peabody Fellows program is a science literacy initiative for New Haven elementary and middle school teachers, students, and their families. It aims to educate and excite them to experience the diversity of the natural world with a positive attitude towards scientific inquiry, and to promote the incorporation of science and scientific inquiry methods in the classroom. With major funding from the Howard Hughes Medical Institute (HHMI) and a Science Education Partnership Award from the National Institutes of Health (NIH), the Peabody Fellows program works closely with selected teachers to develop science curriculum units aligned with state and national science standards. The program teaches children new ways to view their environment, strengthens their observational and investigative skills, and instills a respect for biodiversity. It provides teachers with access to the educational resources of the Museum to enhance the learning experience in their classrooms.

Esther is in the third year of doctoral study at YSN. Her area of research is the relationship between school health services and public school systems. She has been a pediatric nurse for 17 years, and licensed as a PNP for over 13 years. As a Graduate Fellow, Esther will provide technical assistance and disciplinary expertise for teacher-designed science curricula and serve as a role model for future science professionals.

YSN doctoral student Allison Squires '07 has been chosen as a 2003 Associate Yale World Fellow in Yale University's World Fellows Program. (see article in this issue)
YSN Participates at International Festival of Arts and Ideas

Linda Pellico '89, led a team of YSN volunteers who once again had a tent at New Haven's Annual International Festival of Arts and Ideas. For the entire weekend, YSN students educated the public on the wonders of the human body.

According to Linda, "Our students could be found blowing up pig lungs, teaching the basics of x-ray interpretation, solving the human skeleton puzzle, and putting organs where they belonged. These are just a sampling of all the activities that went on in the YSN tent. The activities were so popular this year that YSN volunteers had 4 tables going at once and had to move the arts and craft projects to the grass."

Linda was joined by faculty member Sarabeth Gottlieb '78. The YSN students listed below contributed to making this program such a terrific success:

Mary La Plante '05
Rhonda Heschel '05
Trisha Arbaugh '05
Terry Deshefy-Longhi
Brooke Jacobsen
Lisa Cederblom '05
Kelley Robinson '05
Bernadette Mahoney '05
Misae Ueha '05
Bernadette Thomas '05
Carrie Miller '05
Heather Gainer '05
Daniele Avila '05
Claudia Laverde '05
Devi O'Neil '05

Congratulations to YSN's new Student Government Organization (SGO) Officers and Committee members. Frank Grosso, Assistant Dean for Student Affairs, serves as Advisor to the SGO.

SGO BOARD MEMBERS 2003/2004

Elizabeth Matthews, Co-Chair
Danielle Olivier, Co-Chair
Karen Sheffield, Treasurer
Kelley Hamill, Secretary
Dana Volstorff, Secretary
Alison Hawkins
Sylvia Lempit
Suzanne Moser
Kate Nero
Michelle Brei
Lisa Ross
Susie MacDonald
Laurie Strotman

COMMITTEES

Student & Alumni Affairs
Susie MacDonald, Chair
Danielle Olivier
Elizabeth Matthews
Suzanne Moser
Sylvia Lempit

Family Issues
Sylvia Lempit
Elizabeth Matthews
Karen Sheffield

Orientation & Social Events
Kelley Hamill, Chair-Social
Elizabeth Matthews, Chair-Orientation
Susie MacDonald
Dana Volstorff
Alison Hawkins
Michelle Brei
Kate Nero

Diversity
Lisa Ross, Chair
Alison Hawkins
Danielle Olivier
Suzanne Moser

Community Service
Kate Nero, Chair
Suzanne Moser
Michelle Brei
Laurie Strotman

Budget and Fundraising
Karen Sheffield, Chair
Lisa Ross
Alison Hawkins
A Closer Look at the Incoming Class

Applications to YSN broke a record this year for our incoming class. We received 364 applications for the class entering in September, a 29% increase from last year. Of those applications, 77 were accepted into the GEPN program and 15 RN's were enrolled in the 2-year specialty track. The breakdown of enrollment in the specialty tracks are as follow:

- Adult Advanced Practice Nursing: 15
- Adult, Family, Gerontological, and Women's Health Primary Care: 26
- Nurse Midwifery: 20
- Pediatric Nurse Practitioner: 15
- Psychiatric Mental Health: 16

Our total enrollment for 2003/2004 stands at 286.

YSN continues to be among the most competitive graduate programs in nursing, earning a 10 ranking this year from U.S. News and World Report. This year's incoming class represents 20 states and 6 foreign countries.

Our Doctor of Nursing Science program continues to grow. September welcomes 8 new doctoral candidates for a total enrollment of 29 in the program.

Demographically speaking, 63% of the incoming class are from the Northeast. The next largest contingent of students, 9%, hail from California schools. Feeder schools include UPenn, Smith College, University of California at Davis, at San Diego, and at Santa Cruz, University of Chicago, Johns Hopkins University, Duke, Columbia, Pace, Vassar, Brown, and Yale.

Increasing diversity within our student population continues to be a goal. Of the 92 in the incoming class, 16% represent minority groups. Additionally, men represent 8% of the incoming class.

Cowperthwait '03 Receives Marmor Foundation Award

Meridith Cowperthwait '03, was the recipient of The Leonard Marmor Surgical Arthritis Foundation Achievement Award for 2003.

The $1,000 award is given to a graduating nursing student with a minimum GPA of 3.5 who is an outstanding student demonstrating leadership capacity and a desire to contribute to the nursing profession. Meridith is the fifth recipient of The Leonard Marmor Surgical Arthritis Foundation Award. Previous recipients of the Award are as follows:

- 2002: Kristine McDonough '03
- 2001: Michelle Wansky '01
- 2000: Amy Alderson '00
- 1999: Stephanie Schilling '00

Meridith Cowperthwait '03, received the Leonard Marmor Surgical Arthritis Foundation Award from Assistant Dean for Student Affairs Frank Grosso.
Eileen Glone ’71, tells us: “I am now employed as the Executive Officer of a new Center for Health Care Workforce in Iowa. The mission of our Center is to assess the status of the health care workforce, address barriers to recruitment and retention, support strategies that address shortages and assures a viable health care workforce in Iowa. Information about our activities to date are available on our Web site (sited below).”
http://www.idph.state.ia.us/ch/healthcare_access_content/rhpc/shortage.htm.

Poolsook Sriyaporn ’73, writes, “I am retired now. Not very rich. I live in a small yard with mango trees which give fruit all year round. I welcome all alumni and faculty to come and visit Thailand and stay in my house.” Poolsook can be reached by email at raps@manidor.ac.th, by phone at (66) 02-589-2773, 02-954-6827 or by mail at 7/2 Soí chinakot 2/36, Ngarm-wong wan Rd., Lak-si District, Bangkok 10210, Thailand.

Virginia Capasso ’80, was awarded one of the first Yvonne Post-Doctoral Nursing Fellowships by the Massachusetts General Hospital, Boston, MA. The fellowship supported her time to prepare a proposal to test several methods to measure volume of skin wounds. She also co-authored with Barbara Munro, RN, PhD, FAAN, Dean and Professor, Carroll School of Nursing, Boston College, a paper entitled, “The Cost and Efficacy of Wound Treatments,” which was published in AORN Journal, May, 2003. Virginia was also on the cover of the July 14 Nursing Spectrum and was featured in the article “Is There a Doctorate in the House?”

Karen Poushter ’85, thanks us for the video link to the Anna Quindlen Bellos Lecture found on YSN. She had been unable to attend the talk, which was on April 30, and was delighted to be able to see it on the web link.

Kathryn Barrett ’86, writes: “I graduated from the Community Health Clinical Specialist Program in 1986. My husband and I recently celebrated our 19th wedding anniversary and we are back in Seattle, Washington (after 10 years in the other Washington!) Anna, now 28, remained on the East Coast, but Libby, 12, keeps me hopping! Imagine my surprise when I learned that the mother of one of Libby’s best friends graduated from YSN in 1983! (Donna Haggerty-Robbins) It’s a small world!”

Last year, after providing care for my mother-in-law in Montana, I decided to return to the work force and I established a new elder care management practice known as Aging Matters LLC. It has been incredibly well received in the Seattle aging and health care communities and I am hopeful that it might one day be used as a clinical site for students of nursing. The work is challenging and satisfying and it’s been a long-awaited return to my first love in nursing, geriatrics. In addition, I continue with my volunteer work as caring clown, “Miss Mazie,” in local skilled nursing facilities and adult day health programs.

Greetings to my classmates of 1986. I would love to hear from you!” Her address is: Aging Matters LLC, 4603 NE University Village, No. 255, Seattle, WA 98105.

Elizabeth (Graves) Griffin ’89, emails: “Living in Salem, Oregon for the past 7 years. Have two children: Gillian, 4 ½ years and Robby, 2 years. Recently adopted a 1-year-old golden retriever named Max. For the past 3 years have been working at a child abuse assessment center part-time. Husband, Warren, is a pediatrician in a group practice. Would love to hear from classmates and YSN grads.” Email address is gillimom@att.net

Catherine Ford ’90, and Paula Milone-Nuzzo each received the Nightingale Award for Excellence in Nursing, which is sponsored by the VNA of South Central Connecticut.

Gallaudet Howard ’94, recently wrote to us...“I read the recent issue of Yale Nursing Matters with great interest, since I have always had a love of working overseas, and I was happy to find your email address included in the magazine. I have two ideas, still in the germinative phase, which I would like to run by you.

The first is this: my husband (who is an internist) and I are currently spending up to three weeks a year in Mali, working with a nurse there who has set up a series of clinics in otherwise completely unserved rural areas. He does immunizations and well-child care, trains health workers and tries to build and staff better clinics. We are currently attempting to raise funds and scrounge equipment for this hardworking man, whose name is Indie lou Dougnon, and are wondering if you have any ideas about YSN students who’d like to get involved in this kind of work, or any places I could publish an article about Indie lou?

The second idea has to do with India. I worked as a nursing tutor for a year at Kurji Holy Family Hospital in Bihar, India, and had an amazing experience. The nursing school there is always desperate for tutors (volunteers who receive room and board) and especially midwives. I was wondering if any graduating students might be interested in this kind of volunteer work? Or, again, if you have thoughts on places I might write about Kurji and its needs?

I realize this is a lot all at once, but I am excited to see that YSN is getting so internationally involved,
and I did want to raise these opportunities for current and former students. Gallaudet welcomes your your comments. You can email her at gallaudethoward@aol.com

Susan Michaels-Strasser ’95, writes: “I am a graduate of YSN (MSN/MPH) and was able to complete a Yale Down’s Fellowship in Zimbabwe where I worked as a nurse prior to my time in New Haven. After leaving Yale I worked in South Africa for 4 years. While there I ran a bachelor’s program at Technikon Natal (now called the Durban Institute of Technology) followed by work for a S. African NGO-Health Systems Trust. Although I now reside in Northern California, I return about 3 times a year to South Africa where I continue my field work for a PhD with the University of Cape Town.

My PhD addresses the issue of training of primary health care (PHC) nurses which in South Africa is analogous to the nurse practitioner role in the US. I have written a PHC short course which is being implemented and evaluated at the Tintswalo training center as well as 3 other health districts in South Africa. Tintswalo is a rural site, attached to the University of Witswatersrand and has been leading the training of PHC nurses in S. Africa over the past 2 decades.”

Robin Zingales-Browne ’96, was awarded Yale-New Haven Hospital’s 2003 Nursing Leadership in Clinical Practice Award. Robin was presented the award on Thursday, May 8, at the Nurse Week 2003: Striving for Excellence Award ceremony at YNHH. For the past 6 years Robin has worked in the Women’s Center at YNHH where she has a dual role, providing care for midlife women and managing several grants that ensure care to underserved midlife women without insurance to get gynecologic care and screening.

Patrick Cunningham ’96, was featured in a front page article in the April 27 edition of the New Haven Register entitled, “State Budget Cuts Seen Endangering Homebound Patient Welfare.” A column by Patrick entitled, “Home Care Nurse Cuts Hit Mentally Ill,” appeared in the May 21 issue of the New Haven Register. Patrick lives in Branford, CT and is a mental health home care nurse practitioner.

Anne Langston ’97, emails: “It seems that ages have passed since my last-minute plea for letters of reference, but at last the process set in motion at that time has concluded. I have been accepted as a scholar in the MacArthur Interdisciplinary Program on Global Change, Sustainability and Justice through the Humphrey Institute of Public Policy. In addition to being a great honor, the program includes full tuition and a sizeable stipend. I will be starting the program in September, shortly before I am due to have a baby. Thank you all for your support in the past and wish me luck in the future. I’m going to need it! With warm wishes, Anne.”

Carolyn Dryland ’99, writes: “Since moving out west 2 years ago, I’ve restricted my professional work. I help out the local university with pre-season athletic physicals. [I miss working but have been consumed with raising our children and building our new home.] Personally, I’m making an addition to my ANP Training. I’m pursuing a PNP certificate through George Washington University. I will be precepted by an OB, a professional homebirth midwife, an FNP, and MDs. I’m so excited to begin this chapter next fall. I’m especially excited to pursue a distance learning program that allows my education to be influenced by community beliefs.

Emily A. Haozous ‘03, received an ONS Foundation Congress Scholarship to attend the Oncology Nursing Society (ONS) Annual Congress which was held in Denver, CO, May 1-4. ONS Foundation Congress Scholarships are designed to reward professional staff nurses who have creatively responded to extraordinary challenges in practice and are applied toward expenses for travel and registration for the ONS Annual Congress. This award was made possible through support from Sanofi-Synthelabo, Inc. Emily received a BA in music from the University of California. She is an active member of ONS and the National Alaska Native American Indian Nursing Association.

Sam Levy ’03, was accepted into the Presidential Management Intern (PMI) Program that attracts top master’s and doctoral-level students to the Federal Service. The PMI Program will offer Sam a unique experience to apply his knowledge to domestic and international issues in health administration and policy, and to interact with scholars and administrators at all levels of the Federal government. Students accepted into this highly competitive two-year program have demonstrated exceptional academic achievement, a strong capacity for leadership, potential for future professional growth, and a commitment to a career in the analysis and management of public policies and programs. Many Federal agencies have made the PMI Program a cornerstone of their succession and workforce planning, and many program graduates are now high ranking Federal officials and managers who affect the lives of communities throughout the United States.”
Psychiatric nurse and educator, Victoria Sellens Conn, died of breast cancer August 12, 2003 at Keystone Hospice in Wyndmoor, PA. Mrs. Conn, born in Great Bend, Kan., and raised in Beverly Hills, California, graduated from Beverly Hills High School in 1942. She earned her bachelor’s degree in modern languages from Stanford University in 1945 and a master’s degree in medical sociology from Yale University School of Nursing in 1948. Mrs. Conn was a research nurse at Yale in the then-new field of lobotomy research from 1948–1950.

In the late 1950s, she was science editor of the Modern Medicine magazine in Minneapolis. She was an associate professor of nursing research at West Virginia University School of Nursing in Morgantown from 1960 to 1968.

Mrs. Conn worked as science writer for several years at the Westinghouse Behavioral Safety Center in Columbia, Md., beginning in 1968. In the 1980s she was a psychiatric research nurse in Atlanta.

As an educator, Mrs. Conn worked with families of research subjects at the University of Pennsylvania department of psychiatry and at Norristown State Hospital in the 1990’s.

In 1994, Mrs. Conn received the highest honor from the American Psychiatric Nurses Association the Psychiatric Nurse of the Year Award. She was named Outstanding Alumnus by Yale’s School of Nursing in 1998.

Doris Bloch’s personal and professional life was one of perseverance and dedication to the highest standards. She was a native of Berlin who escaped Nazi persecution by hiding in the Netherlands with the aid of families in the Dutch countryside. Her story is recorded in the US Holocaust Memorial Museum. She immigrated to the US immediately after finishing high school, to enroll in Mount Holyoke College, speaking not a word of English. She lists her citizenship on her application to YSN as “stateless,” and records the death of both her parents in concentration camps.

She was an outstanding student at YSN, noted particularly for her organization and her “tenacity of purpose.” Her interest in her patients was “sincere and discerning.” She was advised by her faculty to learn to relax a little.

She clearly did not take that advice as she went on to a masters and doctoral degree in public health, and then a distinguished career of public health service in Tanzania, Kenya, the Philippines and other places. She wrote wonderful, evocative letters to YSN about her adventures, including witnessing the birth of Tanzania as a country.

She returned to the US in 1971 to join the Division of Nursing of the Bureau of Health Manpower Education where she was specifically charged with consulting to nursing education programs as they began to develop nurse practitioner curricula. I suspect Doris was recruited to the Division by the late Margaret Adorne, later the fifth Dean of YSN.

It was when Doris was with the Division of Nursing that I came to know her and to depend on her sound wisdom and counsel, as we began to build controversial NP programs. Always professional, she guided us and many others to compete for the federal funds that got our programs off the ground and sustained them for many years. Her public health background had taught her the soundness of primary care practice and community service, which informed our work here. When the National Center for Nursing Research was being formed, Doris was recruited as a special assistant to the acting director and then the first director, Ada Sue Hinshaw (YSN ’63). She was a skilled politician, in the very best sense of that word.

Doris retired from the federal system in 1994 and began a small company, Window on Nursing, with a friend, the nurse-poet Veneta Masson. They produced printed products, especially note cards, celebrating the art of nursing. In this guise, Doris often attended YSN reunions and other professional meetings, where she never lost touch with the people or the issues.

Next year, 2004, would have been her 50th anniversary at YSN.

After a lovely evening with friends, seeing the movie, Traveling Birds for the second time, she fell while getting some ice cream, and broke her hip. She survived the hip surgery but her heart, taxed by a life of service, could not sustain her. She died in Washington, DC, August 10.

Donna Kaye Diers ’64

Antoinette H. Daniels ’30 died February 25, 2003

Elizabeth M. Robb ’37 died May 5, 2003

Eleanor Ward Bogle ’39 died March 17, 2003

Marjorie H. Buttolph ’41 died February 8, 2003

Victoria Sellens Conn ’48 died August 3, 2003

Adelaide (Heidi) B. Corson ’48 died May 10, 2003

Eunice S. Asleson ’50 died October 16, 2002

Ethel M. Barach ’52 died April 18, 2003

Doris Bloch ’54 died August 10, 2003

Helen S. Miller ’57 died May 12, 2003

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