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Yale Nurse

Yale School of Nursing

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"OUR LIFE CYCLE: THE LATER YEARS"

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Pictured at right: Margaret E. Kuhn, Founder and National Covener of the Gray Panthers
From the Dean

Much of this issue is devoted to the upcoming Alumnae/i College which will address the health concerns of the aging. If you will permit me an admittedly loose association, I’d like to pick up on the theme of “coming of age.” By now, you all should have received my letter (mailed by the Alumni Fund Office) which details the many recent accomplishments of the School and its faculty. We have made measurable progress toward our goals of establishing programs of study in home health care and gerontology, planning a doctoral program, and deepening the clinical research enterprise, even as we continue to grapple with the matter of long-term finances and future fiscal stability.

I think the need to attend to the sometimes competing matters of intellectual growth and financial maintenance has matured the School and more firmly established its rightful place in the University. Our progress in the realm of ideas (measured by the enrichment of existing programs, the development of new programs, the increased clinical research activities of the faculty, stronger relationships with YNHH and other clinical agencies, and the many publications and presentations of the faculty and students) continues to define us as a leadership school. Our long-term plans to create a more stable financial base for the School and our short-term budget deficit have promoted a stronger partnership between the School and the University as we both work to provide the resources necessary to sustain the School’s national reputation. When the University values a School’s contribution to the mission of the whole over the short-term real costs to the University, then the School has “come of age.” As always, I am indebted to you all for our continued development!

— Judy Krauss

Do Come!!
Alumnae/i Weekend, June 8-9-10, 1989

Many alums have requested programs focused on issues related to aging. In response, this year’s alumnae/i weekend theme is gerontology. Maggie Kuhn, organizer of the Gray Panthers, will be our keynote speaker. Terry Fulmer Ph.D, RN, who is developing a gerontology nursing track at YSN will serve as moderator of a panel of nationally recognized experts on issues and problems related to aging. Jane Dixon, Ph.D, chair of YSN’s program for Nursing Research, and John Dixon, Ph.D, will lead a workshop on their recent research done on “The Middle Years Study.”

We are gathering a high powered group of speakers! Let’s have our level of participation match their involvement in these issues.

As a preview this Yale Nurse includes a biography of Maggie Kuhn, and an article by Terry Fulmer on gerontological nursing at YSN. We are also most pleased to present Jane and John Dixon’s report of their research study on the middle years, for which YSN alums participated as subjects.

CORRECTION

On the recently mailed Alumnae/i Directory Information Card, it should read:

YSN degree type: BN MN MS MSN

Yes, YSN really did award an MN degree from 1937-1958! Please accept our apologies – we urge you to participate!
Middle Years Study: Report to Alumnae/i

We well know the rule, vehemently advocated by leaders of nursing research, and oft repeated by Jane in her classes in the research methods course - the rule which might be stated: Nursing research is not research on nurses. Nursing research is research about patients and about patient care practices, not about the education of nurses, nor their interests, nor their background, nor their desires. We knew also the origins of the rule - a response to myriads of studies, many from the 1950's and 1960's, on the distinctions in interests and ability patterns of nurses choosing different specialties, etc. For example, how do surgical nurses and psychiatric nurses differ in their favorite recreational choices? How might they differ in their attitudes toward epilepsy or towards science or toward hospital regulation? This was a myriad of studies so dominating that "nursing research" seemed to consist of little else. So the "rule" was a part of a more general effort to change the nature of research in nursing - an effort in which Yale played a major role. (For example, Rhetaugh Dumas, for her YSN Master's thesis, conducted the first clinical nursing experiment.)

Through the efforts of individuals at YSN, as well as other nursing scholars at institutions across the country, a long and, at time, painful shift has been successfully implemented over the past two decades. Clinical research focusing on patients and the care of patients has become norm, and through this research a scientific base for practice is being built.

Knowing all this, why would we choose to conduct our study on Yale School of Nursing alumnae - a group of nurses? And now that we have done it, what can we say about the meaning of the results? Can the results have relevance which goes beyond the particular uniqueness, taken collectively, of the individuals studied?

To the latter question we would answer an emphatic yes, though we wouldn't claim a direct generalizability as might, say, the authors of a Gallop Poll. Rather, the relevance is more along the lines of suggested (not proven) conclusions. These suggestions can, and will, provide hypothesis for future research - some now in the proposal stage.

continued on next page

L-R: John Dixon, Cynthia Perry '90, research assistant, Janet Spinner '88, research assistant, Jane Dixon.
The sampling strategy which we used did, indeed, work exceedingly well. Our study focused on social involvement, fulfillment and health in midlife. In choosing YSN graduates to study, we were aware that we were choosing individuals who, as a group, had a strong orientation and expertise in each of the areas of focus. It is interest in these topics that attract most of us to our association with YSN. Now, as then, we come to YSN to pursue a fulfilling, and socially useful, career in nursing — a career devoted to the promotion and restoration of health of others. We were also aware that the YSN connection and the closeness many alumnae feel to their alma mater would be helpful in stimulating willingness to participate. But we could never have predicted the quantity, or, especially quality, of data actually obtained.

Seven hundred and thirty-two women were sent a letter inviting them to participate in the study. These were women who had graduated from YSN between the years of 1941 and 1965, inclusive. At the time of data collection, they were between the ages of 50 and 70. The letter we sent indicated that the questionnaire was long; it may require 5 hours to complete. Of the 732 people to whom this letter was mailed, 443 agreed to consider participation. These potential participants were sent the lengthy (64 pages) Life Experiences Questionnaire. Three hundred eleven people returned a completed questionnaire, and many of these individuals spent considerably longer than the five hours mentioned in our letter! When we speak about these numbers with research colleagues, they are surprised that so many people could consider doing such a long questionnaire. Had we asked for advice, we would surely have been told by the vast majority of research experts, that hardly anyone would respond.

One journal editor has asked us, “How were respondents persuaded to complete a 64-page questionnaire?” When Janet Spinner, Class of ’88, interviewed a few of those who had returned the questionnaire during the summer of 1987, she asked them why they could agree to involve themselves with such a long questionnaire. One person responded, “I’d do anything for Yale.” For others, it was the questionnaire itself — and the study it represented. The focus on examination of one’s own life, and its motivating factors, piqued the interest of many of those who considered participating.

Beyond issues of quantity of data, its quality is also remarkable. In twenty years of research involvement, Jane had not seen written data provided with such care — especially with those questions requiring an opened response. Our heartfelt thanks are extended to all those who participated; we hope you will be pleased with our efforts to understand your individual and collective meaning, as we struggle to turn the rich data you provided into research results and conclusions. If we ever had any doubts about our choice of sample, they evaporated long ago.

Results

Compiling our study results is an ongoing process. The following summary of some of what has been done to date.

Sample Description

(The following sample description focuses on the 308 individuals who submitted data which was complete enough for use in most analyses.)

Although the age range determining subject eligibility spanned 20 years (50-70), the majority of subjects (71.1%) were in their sixties prior to initiation of data collection. (This was due to larger class sizes in the nineteen forties compared to the nineteen fifties, related in part to the World War II nursing shortage as well as other factors.) Mean age of subjects was 63.2 (sd=4.8) at the time of the study.

The majority of subjects were married to their first (n=196, 63.6%) or subsequent (n=22, 7.1%) spouse. Of those who were unmarried at the time of questionnaire completion, 24 (7.8%) were widowed, 23 (7.4%) were divorced and 36 (11.7%) had never married. Five individuals (1.6%) indicated they were in committed love relationships other than marriage. Two hundred fifty (81.2%) had had children. This was a prolific group. Mean number of children was 3.2 (sd=1.4), with 162 individuals having three or more.

Most common lifespan work patterns of study subjects were as follows: returned to outside employment after break of 10 or more years for child rearing (n=94, 30.5%) full-time outside employment throughout adulthood (n=72, 23.4%), homemaker with extensive community/volunteer involvement (n=63, 20.5%) and significant outside employment with periods of one to five years out for child rearing (n=36, 11.6%). At the time of completing the questionnaire, 110 (35.7%) had retired and 98 (31.8%) were still working as much as ever. The remainder indicated that the question was not applicable to their situation (n=72, 23.4%) or that they had begun reducing their work involvement (n=24, 7.8%).

Substantial health data were also obtained. About one fifth of the sample noted experiencing cardiovascular disease (n=65) or cancer (n=61). Asthma was noted by 24 individuals, and arthritis by 91. Psychiatric conditions, usually in its milder form (e.g., anxiety, depression) were noted by 75 individuals. One hundred and thirteen noted having fractured one or more bones during their lifetime. Additionally, 76 had experienced loss of pregnancy prior to fetal viability, and 111 had experienced obstetrical emergencies including such conditions as post partum hemorrhage, ectopic pregnancy, preterm labor and eclampsia. Eighty-one individuals had undergone surgical removal of the uterus.

Thirty-six individuals were currently 20% or more above their ideal weight for height or had noted having been seriously obese during a previous decade.
Career-Life Balance Inventory: Composite

Substantive exploration of data has been proceeding simultaneously along several lines, but one set of questions central to our efforts is the Career-Life Balance Inventory (CLBI). Created for this study, the Career-Life Balance Inventory (CLBI) surveys the variety of possible tensions a professional woman might encounter in trying to coordinate a career with other interpersonal commitments. It consists of 42 items to which the respondent is asked to indicate the extent that a problem has been felt. These items are in the categories of general tensions, scholarship, competence, leadership, finances, esthetics, marriage, children, home, and community. A five-point Likert-type scale was used. Three sample items from the instrument follow:

- I have sometimes regretted that I did not give more time and energy to the development of my career.
- The difficulties in being accepted as a highly educated professional woman sometimes made it necessary for me to leave a place of employment and look for a position in which I could be better adapted.
- At times my work has detracted from my relationship with my husband.

In our earliest explorations, the CLBI was used as a composite, with average response to all items completed (minimum of 20 items) taken as the general indication of the extent to which a person experienced tension fitting a career together with other aspects of her life. We were encouraged by the finding that Chronbach's alpha (internal consistency) was .90, indicating a high degree of consistency between items.

This composite score was found to relate to midlife health in two important ways. First, this related to illness ratings (based on reports of major illnesses, by decade) for the fourth and fifth decades of life. Though the relationship was relatively small (r=.18), it was statistically significant and accounted for 3% of variance between individuals in illness rating. Secondly, this instrument related significantly to some menopausal symptom clusters occurring after age 40. This latter finding was the work of Janet Spinner, '88, in her Master's Thesis, and she (or her thesis) could be contacted directly for more information on this point.

Although findings on the relationship of Career Life Balance Inventory and health problems is in line with much of what has come to be known about the role of stress in illness, we had good basis to explore the issue further. The relationship was statistically significant, but weak. This, too, is consistent with the findings of others.

If the issue of stress is to have much relevance to clinical practice, it is important to know more precisely under what conditions stress does contribute to illness. Otherwise, consultation about stress is likely to be quite misleading on many occasions. Clearly, much of what people find satisfying about their lives are also their major sources of stress (e.g., career pursuit, relationships with others, raising children). We wondered if the key issue might be, not stress itself, but rather the implications of the stressful experience for an individual's sense of integrity. Our questionnaire had included this question:

*In the past few pages, you have been answering questions about the things you value, your personality characteristics, and your thinking style. This has given you an opportunity to achieve an overview of your personal characteristics. As you review these characteristics, you should be able to get a sense of the extent to which your life style since completing your degree has allowed you to live in satisfactory congruence with your personal characteristics. To what extent has your employment, your family life, your friendships and your organization/memberships allowed you to be yourself? Please circle one of the following: complete total congruence; nearly total congruence, more congruence than not; important areas of incongruence; extensive areas of incongruence; complete, total incongruence.*

We called this variable "integrity." Although responses tended to cluster toward the positive pole of this continuum, there was sufficient variation to permit a casual analysis. We found that this variable, itself, had a more powerful relationship with midlife illness (r=.41), than did CLBI score. Further, its inclusion in a path analysis model, caused the direct path between CLBI stress and illness to all but vanish. The implication from this finding is that illness does not result from stress unless the stress undermines the sense of integrity — the sense that one is living life the way one is meant to. Thus we conclude:

"Specifically, it does not seem reasonable to expect that a stressful experience will automatically be threatening to a person's health just because it is stressful. A great many of the finer things in life require people to withstand stress as a part of their realization. Very often the outcome of such experience is not illness, especially if the consequences of the effort are as desired. However, some stressful experience does lead to sickness. It is important to be able to specify when this is likely to be the case. The integrity-disintegrity dimension appears to provide a partial answer to this question. When a stressful experience is encountered in the process of successfully moving toward a goal an individual feels is right for himself or herself, it is likely to be healthfully tolerated. When such experience leads away from integrity, the equivalent stress is
likely to be unhealthful.”
(Dixon, Dixon, & Spinner, 1989, pps. 8-9)

This line of analysis (based on data of the 91 individuals who participated during our first year of data collection) has been recently published in detail in Advances in Nursing Science, 11(2), 1-11.

Career-Life Balance: Factors

Exploration of the Career-Life Balance Inventory was extended via a factor analysis, through which the items were divided into three meaningful scales. The first could be called Career Sacrifices. This was the expression that the person on occasion needed to limit her career involvements because of her commitment to other people. The item most strongly loaded on this scale is as follows:

24. On occasion I have had to sacrifice my own career effectiveness because of the demands of my husband’s career.

The second scale could be called Interpersonal Sacrifices. This was the expression that career involvements sometimes led to difficulties in personal relationships with other people. The item most strongly loaded on this scale is as follows:

32. My children sometimes felt that they had to compete with my profession for attention.

The third scale could be called On-The-Job Frustrations. These items had to do with frustrations over not having one’s level of education and professionalism recognized and appreciated. The item most strongly loaded on this scale was:

12. The extent of my professional education in nursing sometimes made it difficult to find an appropriate place to fit into health care institutions so that I could fully use my knowledge.

Alpha coefficients for all scales were in the mid to high eighties, indicating substantial consistency of items within each factor, despite the reduced number of items. Scores on these factors were then related to specific major diseases – specifically, heart disease and cancer. In a discriminating analysis, two of these scales appeared to play an important role in distinguishing those women experiencing serious cardiovascular disease, after we had controlled both for age and for occupational status. Career Sacrifices was the best discriminator; Interpersonal Sacrifices also showed appreciable statistical effect. In contrast, the third CLBI factor, On-The-Job Frustrations, was not important in distinguishing the groups.

Taken as a whole, the major implication is that development of serious heart disease is related to the sense that elements of one’s interpersonal world and elements of one’s career world have clashed. These individuals, though by and large successful in their careers, sometimes express a sense of having made career sacrifices to support their interpersonal commitments. Tension between one’s career world and one’s personal world seem to play an important role in development of cardiovascular disease, whether the sacrifices which are seen to be necessitated are on the career side of things or the interpersonal side of things. No matter what direction one goes in making choices, the interpersonal feelings still matter, and can hurt, perhaps even undermine one’s health. We are wondering now if these findings obtained with this sample of female YSN graduates reflect a gender distinction. Would a comparable sample of men experience these tensions in the same way, or would On-The-Job Frustrations emerge as a key stress variable? (We expect to explore such gender differences in our next study, now under development.)

It has been interesting to note that in addition to discriminating those who have cardiovascular disease, the CLBI also appears to discriminate those who have developed cancer – but in the opposite direction. In other words, whereas those subjects who have experienced more serious CLBI problems, those who have developed cancer report less serious CLBI problems, such that there are statistically significant differences between each of the groups. In post hoc analysis, 78% of the cardiovascular group and 60% of the cancer group was correctly classified. This suggests that the CLBI may be useful in developing a unified model for understanding psychological risk factors for cardiovascular disease and cancer. If verified, this could provide the basis for a major advance as the current literature on these disease tends to follow quite separate paths, with almost no attention at all to possible communalities.

Lifespan Health: Measurement

Yet another thrust of our current analysis has been examination of our measure of lifespan health. Individuals were asked to record the three most significant illnesses of each period of their life. In its final form, life periods were defined by decades of life: ages 0-10; 11-20; 21-30; 31-40; 41-50; 51-60; 61-70. Then this information was rated on four dimensions (duration, discomfort, interference, threat to life). And this dimension scores were averaged. Possible ratings ranged from 10 (indicating high impact of illness). Average by decades are as follows:

<table>
<thead>
<tr>
<th>Decade</th>
<th>(0-10)</th>
<th>(11-20)</th>
<th>(21-30)</th>
<th>(31-40)</th>
<th>(41-50)</th>
<th>(51-60)</th>
<th>(61-70)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average Rating</td>
<td>23.8</td>
<td>19.2</td>
<td>21.5</td>
<td>22.5</td>
<td>24.0</td>
<td>25.9</td>
<td>26.9</td>
</tr>
</tbody>
</table>

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Gerontological Nursing at YSN

While specialized content related to aging and gerontological nursing has always been present in the YSN curriculum, 1988-1989 has been a year of study and expansion related to this special area.

"The demographic imperative is upon us and the challenge for the profession of nursing is exciting" says Terry Fulmer, PhD, RN, C, a new faculty member at YSN. Terry came to Yale from Boston where she was an Associate Professor of Nursing at Boston College and the Associate Director for the Harvard Geriatric Education Center. She was also a consultant in Geriatric Nursing at Boston's Beth Israel Hospital.

At the turn of the century, only 4 percent of the population was over sixty-five years of age and the average life expectancy for men was 47 years of age. Today, fully 11 percent of the population is over 65 and in the year 2040, that percent will increase to 21.6 percent. Certainly ours will be an aged nation and the impact on health care delivery will be profound.

The fastest growing segment of the aged population is that group of individuals over 85 years of age, sometimes referred to as the "old-old". These elders are usually the frailest elderly. By 2050 almost one in four older persons will be 85 years of age and older (5% of the total population). "This group will pose the greatest challenge to nursing" says Fulmer. "They are often victims of chronic diseases and demand the largest number of services for care, including the hospital, home care, and nursing home care.

The average age of today's nursing home resident is 83 and over 40% of all hospital beds in this country are occupied by individuals over 65 years of age. Today, nearly one in three elderly people live alone with poverty rates nearly five times higher than for elderly couples. Maintaining health and functional ability is a major concern for all elders.

YSN has always shown an intense commitment to the care of elderly persons, regardless of set-

continued on next page
Monteen Lucas, PhD, RN also new to the YSN faculty this year, comes to the School from the Houston Baptist University of Texas with a special interest in the psychiatric-mental health issues of the elderly.

YSN research efforts relative to aging incorporate a variety of thrusts, including a focus on diseases of aging as well as on quality of life issues and normal developmental processes which occur in the later years. For example, work by Phyllis Pallett, RN, PhD, Assistant Professor of Community Health Nursing, examines the stresses experienced by the caregiving spouse of the person with Alzheimer's disease. Terry Fulmer's research on instrumentation in elder abuse assessment has led to a reliable and valid screening protocol.

An investigation by Jane Dixon, PhD, and John Dixon, PhD, of the Program in Nursing Research at YSN, centers on issues of health psychology as these are experienced by individuals between the ages of 50 and 70. (This study is described elsewhere in this issue.)

Life history and lifespan health data provided by individuals of this age group may be invaluable in illuminating such concepts as social involvement and self-fulfillment and their relationships to health across the life course. Although much research on older adults is focused on illness or the problems of aging, the strengths which may come with advancing years and the unique perspectives engendered are equally important topics for investigation, holding promise of rich clinical implications.

This year, the YSN Annual Alumnae/i College scheduled from June 8-10 will have as its theme, "Aging: A Changing Frontier" and features such prominent speakers as Maggie Kuhn of the Gray Panthers. "YSN is committed to being at the cutting edge of clinical care, research and education which will benefit the elderly" says Dean Krauss. "I believe this field offers added opportunity for a blending of practice and research as well as for tangible interdisciplinary collaboration. I'm excited by the level of activity on all fronts!"

DISTRIBUTION OF INFORMAL CAREGIVERS BY RELATIONSHIP TO ELDERLY CARE RECIPIENT: 1982

- WIVES — 23%
- DAUGHTERS-29%
- OTHER MALES-7%
- OTHER FEMALES-20%
- SONS-8%
- HUSBANDS-13%

Margaret E. Kuhn
Keynote Speaker, Alumnae/i Weekend

Since her 65th birthday in 1970, Maggie Kuhn has almost single-handedly created, nurtured, and built a national organization with international impact — the Gray Panthers. The Gray Panther organization embodies her unique philosophy of old and young working together, linking the historical perspective of the old with the energy and new ideas of the young, to eradicate “ageism,” and bring about peace and social justice. Through Gray Panthers Maggie Kuhn has established a valuable and highly visible image of aging. She has become an internationally known figure, offering positive models to the world for what is possible in old age.

Aside from her intense involvement with Gray Panthers, Maggie is involved in a number of other leadership roles. She serves on the Boards of many organizations, including the National Senior Citizens Law Center in Washington, D.C.; the National Advisory Board on Health Policy; the Delta Society; the National Shared Housing Resource Center; the National Committee for Responsive Philanthropy; and the United Seniors Consumer Cooperative.

Maggie worked with Ralph Nader’s Retired Professional Action Group before that group joined the Gray Panthers in 1973. She was one of the organizers of the Action Alliance of Senior Citizens of Greater Philadelphia. She served on President Carter’s Commission on Mental Health 1978-1980.

Maggie Kuhn is a prolific author. She is a former editor of Social Progress, now the Journal of Church and Society, and has written many magazine articles and program materials. Her books — You Can’t Be Human Alone, Let’s Get Out There and Do Something About Injustice, and Maggie Kuhn on Aging — are well received and have been frequently reprinted. She was the subject of two documentary films, one as a panel member in Aging in America, and the other as herself in Maggie Kuhn: Wrinkled Radical. She is currently working on her memoirs and a book on intergenerational issues, to be published by Random House/Ballantine Books in 1988.

Among the many awards given to Maggie are the Humanist of the Year by the American Humanist Association; the National Freedom Award of Roosevelt University in Chicago; the National Award of the American Speech and Hearing Society; the Unitarian Women’s Annual Award for Ministries to Women; the 1977 Annual Peace-Seeker Award of the United Presbyterian Peace Fellowship; the Gimbel Award in May, 1982; the Presidential Citation of the American Public Health Association in November, 1982; as well as the keys to many American cities.

Along with other national leaders, Maggie was selected to visit the People’s Republic of China in October, 1976. In 1978, she was chosen by the U.S.-China People’s Friendship Association to serve as tour leader. She was warmly and enthusiastically received by the British in 1985 where she addressed the Society of British Gerontologists, the radical pensioners in...
Manchester and London, and the Women's Committee of the Greater London Council. In July of 1986 she was a member of the Philadelphia delegation to the Soviet Union, sponsored by the Philadelphia/Leningrad Sister Cities Project.

Maggie Kuhn's educational background includes a Bachelor of Arts from Flora Stone Mather College of Case Western Reserve University in Cleveland, where she was invited to give the Alumni Address in her 50th Class Reunion in 1976. In November, 1981 she received the Distinguished Alumni Award.

Maggie Kuhn has done graduate work in social work at Temple University, sociology and ethics at the University of Southern California, the University of Hawaii, San Francisco Theological Seminary, and LaSalle College in Philadelphia. In May, 1978 she was awarded honorary doctorates by Swarthmore College in Swarthmore, Pa., and Moravian College in Bethlehem, Pa.; in 1979 from Antioch College in Philadelphia, Pa.; in 1980 from Simmons College in Boston, Mass.; and Albright College in Reading, Pa.; in 1981 from Marycyst College in Danvers, Iowa, and State University of New York in Fredonia; in 1983 from Grinnell College in Grinnell, Iowa. She was appointed Distinguished Senior Scholar to work in the Aging Health Policy Center during 1983 at the University of California, San Francisco. In 1985, she received honorary doctorates from Antioch College of Philadelphia (for the second time), New Hampshire College, and Cedar Crest College of Allentown, Pa. Beaver College of Glenclide, Pa. honored her in 1986 with an honorary doctorate, and Russell Sage College of Troy, N.Y. and the University of Pennsylvania in 1987.

Maggie Kuhn began her career working for the YWCA in Cleveland, Philadelphia, also serving on the YWCA National Staff in New York. In 1946 she worked for the General Alliance of Unitarian Women in Boston. She worked for many years for social justice and peace as Associate Secretary in the United Presbyterian Office of Church and Society, and later as Program Coordinator in the Division of Church and Race. After forty-three years spent working for social change, she experienced mandatory retirement in May, 1970.

With five of her retired colleagues, in 1970, Maggie joined hands with younger people to develop an intergenerational movement working for peace and human liberation and the elimination of discrimination on the basis of age. Since then the movement has grown to international prominence. Maggie has been the most important catalyst for starting local networks of Gray Panthers across the country. In addition to more than a hundred local networks, an effective national organization has been launched to provide a broad focus for local activities and to monitor and guide national policy making.

Maggie Kuhn has high national and international visibility. She is often quoted in books, magazines, and newspapers. She appears with regularity on national television, and meets frequently with national legislators, leaders of consumer groups, and even with Presidents. In March, 1982, she was a delegate observer at the United Nations Forum on Aging in Vienna, Austria. In June, 1983 she led a Gray Panther delegation to the World Assembly for Peace and Life, Against Nuclear War, in Prague, Czechoslovakia.

The contributions of Maggie Kuhn speak for themselves. It is important to note that in addition to her more concrete activities, Maggie is a loving, caring human being. Those who have had the privilege to see her or talk with her are unanimous in declaring that she has a special charisma, an ability to be critical of injustice while remaining ever supportive of people. For her unique combination of humanitarianism, social criticism and leadership, the 1978 World Almanac named her one of the “twenty-five” most influential women in America. The Ladies Home Journal named Maggie one of America’s 100 most important women in its October 1983 issue.

Middle Years Study
(continued from page 6)

It can be seen that after the first two decades, ratings tend to increase with age, indicating increasing impact of disease. The second decade, encompassing the teenage years is least marked by illness impact. Ratings for the first decade, however, reveal high disease impact — not exceeded until the fifth decade of life. Specific dimension ratings tend to follow a parallel pattern with small variation.

Respondents have experienced an average of 3.9 hospitalizations in their lifetimes; mean number of days hospitalized was 31.3. Significant correlations between these two sets of figures, as well as other findings, tend to support the validity of this approach to measuring lifetime health. Using this tool, five general patterns of lifetime health have been tentatively identified.

We feel that an individual’s health is an integral, dynamic aspect of the ebb and flow of life, and that lifespan measurement approaches are needed for its understanding. We expect to ready this instrument for further testing by other research groups in the coming months.

Clearly, there is much left to do in coming to a full understanding of the data of the Middle Years Study. This summary presents only a few highlights — designed to provide examples of where we are now, where we are going, and the excitement we feel. To all the alumnae involved in this study — Thank You Very Much. We hope you will find our efforts to be worthy of the considerable efforts of your own Life Experience Questionnaire.

Footnote
This research is supported by Behavioral and Social Research Program, National Institute of Aging, Department of Health and Human Services, (R01 AG06150).
Around the School

Long Term Employees Honored

The School of Nursing held a special staff luncheon on November 1st at which long-term Yale employees were honored. In her remarks, Dean Judy Krauss noted that it's the loyal staff who provide continuity and an atmosphere of caring and belonging which is so important in this workplace. She expressed appreciation and thanks to all the staff, with special recognition to:

Heide Miller, Library Services Assistant (20 years)
Barbara Reif, Registrar (15 years)
Ellen Bedard, Senior Administrative Secretary (10 years)
Sarah Connolly, Audiovisual Assistant (10 years)
Donna Epps, Senior Administrative Secretary (10 years)

In her new position, Ann will oversee the administrative and budgetary concerns of several Yale Departments, one of which is YSN!

Appointment Announced

Ann Ameling '67 YSN, Associate Professor in Psych-Mental Health Program has been appointed Associate Provost of Yale University. Ann is also Master of Saybrook College and will continue that post while serving in the Provost’s Office. Ann is a member of the tenured faculty at YSN and will continue a limited role in the Psych. Program during her tenure as Associate Provost.

In announcing the appointment, Provost Frank M. Turner said: “Ann Ameling will bring to her assignment a dedication and sensitivity to the needs of students and faculty, as well as a commitment to the academic mission of this University. Her many years of experience at Yale, both as teacher and administrator, will be of tremendous value. I am delighted that she has accepted this important post.”

Sybil Palmer Bellos Lecture

The Annual Sybil Palmer Bellos Lecture sponsored by the Yale School of Nursing is to be held on Thursday, April 6, 1989 at 4:00 p.m. in Harkness Auditorium at Yale Medical School, 333 Cedar Street, New Haven. The guest lecturer is Kathleen Dracup, DnSc, RN, Associate Professor at the School of Nursing at UCLA. The title of her presentation is: “Managing Families of the Critically Ill: A Context for Nurse-Physician Collaboration.” The Wisser Tea (reception and cocktail party) will follow in Harkness Lounge.

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To order, write Mary Colwell
Make check out to YUSNAA
Margaret Compton, M.S., graduate of Syracuse University, is lecturer in Med-Surg Program, and also a research nurse at the Yale Medical School. Before coming to YSN she held appointments at Southern Connecticut and Quinquepic College and has practiced on the neurosurgery and general surgical units at Hospital of St. Raphael. Peggy has recently had two articles accepted for publication: “Drug Abuse: A Self Care Deficit” in The Journal of Psychosocial Nursing, and “A Rogerian View of Drug Abuse: Implications for Nursing” in Nursing Science Quarterly.

Dee Coover, MSN, Case Western Reserve and MPH from UCLA, is part-time lecturer in Med-Surg Program. She is in doctoral program at U-Conn. Formerly she held appointments at Scared Heart University in Fairfield, CT and with the Trumbull (CT) VNA.

Angela Cimbak, MSN, Catholic Univ. was part-time lecturer in Med-Surg Program in Fall of 1988. She was formerly instructor in nursing at Univ. of Penn.

JoAnne Davis, MSN, CNM, from St. Louis University, is Program Instructor in Midwifery Program. She came to YSN from Dept. of Consultation and Nursing Research at Univ. of Cincinnati Hospital.


Donna Diers, ’64, YSN, was Visiting Professor at the School of Nursing, Michigan State Univ. in Sept. teaching a research class for Clare Collins ’75; also formal presentations to the faculty and to the Sigma Theta Tau Chapter there.

James Fain, Ph.D., RN, Assistant Professor in Research and Chair of the Three-Year Program has been appointed Editor-in-Chief of The Diabetes Educator, which is the official journal of the American Association of Diabetes Educators and is designed to serve as a reference for the science and art of diabetes management, patient education, professional education and education program management. Jim is also the Acting Chair of the Med-Surg Program for 1988-1989 at YSN.

Carolyn Federici, MSN from Univ. of Penn. is a new Program Instructor in Community Health Nursing at YSN and FNP in Primary Care Center at YNHH.

Doris Foell, ’88, YSN, is on Med-Surg Faculty and Cardiothoracic Clinical Nurse Specialist at YNHH.

Susan Furey, MSN and MSW from Univ. of Virginia, was lecturer in Psych-Mental Health Program 1st semester. She was also Clinical Nurse Specialist in Outpatient Division at CMHC.

Pamela Hinthorn, RN, Ph.D., Associate Professor in Community Health Nursing Program and the nurse who set up the Clinic for the Homeless in Stamford (see Yale Nurse, May 1988) received “Community Leader of the Year” recognition and “Community Service Award” from grateful citizens of Stamford. Pam continues to devote energies and thought to this program, writing grants for funding in order to continue the work of this clinic for the homeless, and publicizing it whenever possible. An article “Hitting Bottom: Life on Stamford’s Streets” was published in the Stamford Advocate, August 19, 1988. She addressed the Fourth Annual Convention and Primary Care Conference, the Coalition of Nurse Practitioners in Albany in September with a talk: “Evaluating a Program of Primary Health Care to the Homeless,” and was the keynote speaker at the annual dinner of District #3, Connecticut Nurses Association in October when she spoke on “Health Care for the Homeless.”

Wendy Holmes, MS from Boston University, is new Lecturer in the Med-Surg Program. She was formerly Clinical Nurse Specialist at Brigham and Women’s Hospital in Boston.

Linda Lewadowski, MS, Ph.D. candidate at U. Mass. and former YSN faculty member, is a lecturer in Pediatric program.

Jeanne LaVasseur, MSN from Pace University, came from faculty of U. Conn. to be Program Instructor in Community Health Program and FNP in Primary Care Center, YNHH.

Sandra McClowery, MS from Northern Illinois Univ. and PH.D. from Univ. of Calif., San Francisco is full time in Research Program teaching Computer Analysis of Data.

Shirlee Neil, MS from Pace University and MA in Slavic Languages and Literature from NYU is part-time lecturer in Community Health Program.

She and her husband had a son last July, 1988!

Dianne Reynolds, MSN, CNM from Univ. California San Francisco/San Diego, is Program Instructor in Maternal Newborn/Nurse Midwifery program. She came to YSN from San Diego where she was clinical faculty and CNM in the Comprehensive Perinatal Program at the University of California.

Maria Schymura, M.Phil. from Georg-August-Universitaet and Ph.D. from yale is part time lecturer in Community Health Program and Associate Research Scientist, at EPH.

Jane Tuttle, MS, Assistant Professor in Community Health Nursing is part-time doctoral student at U. Conn in Family Studies. She has published an article "Adolescent Pregnancy, Factoring In the Father" in September-October issue of the Journal of Pediatric Health Care.

Ann Williams, YSN '81, Assistant Professor in Community Health Nursing and FNP, will be a 1989-1991 Robert Wood Johnson Clinical Nurse Scholar at the University of California, San Francisco to continue her work with AIDS.


If there can be a single starting point for which to begin thinking about AIDS and health care workers, the issue of HIV testing may well be it. This and other topics were addressed at a recent conference, "Hospitals, Health Care Professionals and AIDS," sponsored by the American Society of Law and Medicine and the American Foundation for AIDS Research. Speakers included physicians, lawyers and ethicists currently working as AIDS caregivers, policy-makers and researchers. Keynoter was the Surgeon General C. Everett Koop. Among the attendees were YSN students Margy Hutchinson '90 and Ann Kurth '90, both from the Maternal-Newborn Midwifery Program at YSN.

The discussion of HIV testing centered around the historical, legal and ethical context of patient and health provider rights and duties. Current data indicate that only 16 of the seven million health care workers have acquired HIV through occupational exposure, which translates into a less than 0.09% risk of seroconversion following needlestick exposure to HIV positive blood. Several of the conference speakers pointed to this evidence of real but low risk of exposure in support of the argument against mandatory testing of hospital patients.

How would knowledge of a patient's HIV status alter how we provide care? Because of limitations in testing technology, would mandatory testing lead to a false sense of security that paradoxically places providers at increased risk for acquiring HIV and other infectious diseases? And, importantly, does the public health benefit of mandatory testing outweigh its social and economic costs? Until there is a national AIDS policy that adequately resolves these concerns through measures such as anti-discrimination legislation, answers must continue to be formulated at a local level via hospital, state and professional organization guidelines.

We must ask ourselves what role nursing plays in this process. It was interesting and revealing that although the majority of occupational exposure to HIV involves staff nurses, discussion at the conference centered around physicians, particularly surgeons, concerns. The sole nursing representative among the speakers articulated that nursing has yet to take the initiative in the AIDS policy debate. She also referred to a 1987 study which found that only 5% of accredited nursing schools had policy guidelines for HIV-positive students, and that fewer than 1 in 4 schools had formally addressed the issue of the clinical work of students with HIV-positive patients.

An overwhelming sentiment of the conference was that none of the health professions has formulated an adequate ethical response to AIDS. The nursing mandate is clear: to keep ourselves informed about this disease and to bring our considerable clinical experience to the AIDS policy debate.

IN MEMORIAM

Dorothy Ohline Keller '33 died 1988
Elizabeth Sweet Beckett '39 died 1989
Anne Tilghman Boyce '44 died 1988
Germaine Roshon Seltzer '47W died 1988
I'm a speed-reader! (Definition: one who skips over anything that doesn't really "grab" her in the first ten words.) So I must confess to great ignorance when I was asked to be one of the Nursing School's three representatives to the AYA Assembly. In the past I'd given very little thought (and even less time) to articles in THE YALE NURSE about the Association of Yale Alumni – but I agreed to learn. I'm glad I did. I'm challenged by the prospect of playing a role in this alumnae/i-university group for the next three years. (Read on, please, for you too, may sometime have this excuse to return to New Haven a couple of times a year and do a bit of PR for the Nursing School among the alumni of other graduate schools and the University-at-large.)

It appears to me that the AYA Assembly is potentially a vital forum for the exchange of information between the University and its alumni. (Isn't it ridiculous to what lengths one goes to avoid the use of gender-specific words? Never before in my life have I written about myself as an "alum"; I shouldn't wish to be confused with a stytic or astringent! Hereafter I may alternate the "i" and "ae" to avoid that possibility.) And by the way, if you noticed "potentially" above, you'll see the reason for it shortly.

The AYA was formed to provide a forum for the expression of diverse viewpoints and concerns of University officials and of those of us who have moved on after our years at Yale. Since the organization is still a teen-ager, having had its first Assembly in 1972, I'm not sure it has yet reached its zenith – nor does it make such a claim. But I am impressed with efforts of University officials, including President Benno Schmidt, to listen to the alumni and to share Yale's problems, failures, and successes with representatives of the Graduate Schools and the Yale Clubs around the country. The large number of people (over 350) and the complexity of problems in and out of the University, however, make this sharing a difficult task in meetings that can take place only semi-annually.

Assembly XXXIII began Thursday morning, October 13, with registration and an "Economic Development Tour of New Haven." I was stunned by the magnitude of the changes in the city. I was delighted with the University's role in the city's growth and development.

Following lunch, a general orientation session reviewed the basic mission of AYA and provided opportunity for questions and (for me) to find out just how much that speed-reader problem has worked against me!

Each of the semi-annual Assemblies has a theme. The October '88 one – my first – addressed YALE'S SOURCES AND RESOURCES. Money was the topic; and yes, money is a big issue with Yale, as with colleges and universities everywhere today. "Yale's Budget Process" was the topic of a presentation by a panel composed of a delightful and witty University librarian, the Director of Financial Affairs for the Medical School, and the Director of Auxiliary services at Yale.

At the end of the first day, participants could choose among several Information Sessions. (I found the subjects intriguing enough that I even decided to forego my daily nap.) It was difficult to decide between "The Impact of the Law on Yale" and "The Effect of Changing Legislation on Financial Aid," but I selected the former topic and was rewarded by a stimulating hour that yielded a host of (costly) facts about the increase in legal problems the University encounters in practically everything it does. Suits from both within and outside the University community, the watchful and ever-present eye of government, and local regulations (to cite only a few issues) have made it necessary for the University to maintain an in-house legal office with full-time lawyers and ancillary personnel.

"Yale's Capital Plan" was the topic of a general session on Friday. I was greatly impressed with the forward thinking of the planners at this session, just as I was at a session later in the day on the "University's Investment Management and Spending Policies." Both sessions confirmed the rightness of an earlier personal decision to "invest" as I am able in the future of Yale and its School of Nursing.

In addition to the topics I've reported on, there were Information Sessions on clubs, scholarships, career services, athletics, etc. And there was fun, too, including good dinners in the University Commons. Meeting and talking with women and men from other Schools and from the Clubs provided an opportunity to learn about some of the concerns that will be addressed at future Assemblies. Finally, there was the Yale-Columbia Football game on Saturday – but who wants to hear about THAT! (There'll be no football in April, I'm fairly sure.)
MESSAGES AND MEMORABILIA from 2 members of the class of 1928 received by Mary Jane Kennedy for Alumnae/i Weekend 1988.

Dear Mary Jane,

How sweet of you to write me of the upcoming anniversary of my graduation from YSN!

There seems to be but three of us altogether, last leaves upon the 1928 tree; Alice Howard, Helen Kyle and me. Some of the very fondest remembrances of my life are of my YSN days, with their elixir of memories. We early "Yalies" had one hallowed opportunity which you later ones missed — knowing Miss Annie Goodrich as our dean. How we all cherish the memory of those "Class Dinners with the Dean" at her home, and our prim "bread and butter calls" afterwards! Furthermore, at that time, Miss Elizabeth Bixler, your later Dean, was "Bixie" to us.

And as for news of myself: my life has been not too exciting but very fulfilling since that graduation day so long ago. I did school nursing for the next four years in Wheeling, WV and Phoenix, AZ. In Phoenix, I met and married my present husband, and have spent many of the years since rearing my family — I have two married daughters and four grandchildren.

However, since marriage, I have kept in many ways close to the nursing profession, wanting always to bring honor to my school and profession. I did some medical/social work among the Yaqui Indians in Arizona, and later in Albuquerque, New Mexico, served twelve years in the office of the State Board of Nursing, where I was present at the birthing of the School of Nursing in the University of New Mexico.

Right now I am living a very quiet life with my husband in our own home here in Albuquerque. Strength and endurance at eighty-eight years are not as they were at twenty-eight in New Haven. My husband becomes ninety years old next Sunday, and I eighty-nine in October of this year. But, praise the Lord, we are neither one yet in a rocking chair nor in a nursing home.

I still, as I have for years, pursue my hobby of writing verse. I do not call it poetry because I have too much respect for Shelley, Keats, Byron, et al. I have had but very little good enough for publication. However, the enclosed selection was published in Sunset Magazine, a national literary magazine, some years ago.

Sincerely,
Milfred Downey Robinson '28

Sonnet on Seeking

If I could catch one perfect, fluttering thing
Within my net of words, or if fate chose
My brain to yield from out the hidden spring
Of consciousness the watering for one rose
Of finished loveliness; or if I've won
From out that soil one perfect gem of thought,
And see its colors flashing in the sun,
And feel sweet ecstasy in what I've wrought;
Still may I have no peace until I find
That finite hearts are much too faint and small,
And much narrow is the finite mind
To catch and hold eternity in thrall,
That beauty follows after, is not caught;
The whole pursued me while the part I sought.

— Milfred D. Robinson

May 1988

Dear Mary Jane,

It was indeed a pleasure to receive your letter of April 2nd, congratulating us members of the YSN Class of 1928, on the eve of the 60th Anniversary of our graduation. Thank you so much for writing to us. It was great to hear from you.

Yes, I for one do have some wonderful memories of our days at Yale. There was no place like it, especially dear Nathan Smith Hall that meant so much to us, plus the class rooms and the various departments of the hospital including dear Dean Goodrich's office where we could go almost any time, if only for a friendly chat or a little advice.

My nursing career was quite varied. It included some years in Public Health work, and teaching in schools of nursing in the field of Obstetrics and Gynecology; Sociology and Social Problems, etc.

The best move in all my experiences was that of entering the Army Nurse Corps at Fort Dix, NJ during World War II. After seven months at Fort Dix, I was sent on overseas duty as Principal Chief Nurse with the 121st Station Hospital Unit in England, where we remained for two years.

I am enclosing a copy of the letter I wrote home to my family in November 1943, which tells its own story . . .

Very Sincerely, an old Yale "grad,"
Alice G. Howard '28

* * * * *

"A year ago today I joined the Army. Now you know what date it is, so I'm not going to date my letter — for various reasons.

I am at the Red Cross Club in London, and am having a most interesting time. I only wish I could tell you every detail that concerns my mission just now. This Club is only my lodging and eating place, but it is not my place of business.

continue on next page
Yesterday I received orders for temporary duty somewhere, so came into London this morning with a Captain who is on detached service with us. We had no idea where these orders would take us, nor for how long our duties would last, or what they were to be. "This is the Army, Mr. Jones," so we came without questioning.

Our group of nurses at the Red Cross on special orders were told to meet at a certain place at 10 a.m. So we hiked ourselves over to this very special meeting. We were admitted to a very official building, saluted by sentries, and given directions to pass through to a regular sanctum sanctorum. Gee! But I got a thrill when it all came over me that I was one of an official party to meet in that room. Only fifteen members of the Army Nurse Corps were there, besides various other people representing the Armed Forces overseas.

A Major of the U.S. Army presided and gave us directions regarding the coming event of the afternoon — what we were to wear as an official dress uniform, how we were to act ("Just be natural," he said!), what time we would leave a certain place, and just how we were to go, and the exact directions we would take when we arrived at our destination.

Then a British Officer got up and talked to us for a few minutes, giving us a little inside picture of the coming situation by giving us a little resume of certain British customs. At 2:50 p.m. we all met again at the certain place, and were assigned to cars that were parked in great style outside. So with men of high rank including generals, colonels, majors, etc. we rode with a military escort to BUCKINGHAM PALACE!! All traffic was halted, and British and American Military Police were stationed at frequent intervals along the way.

Really, I have never had such a thrill in my life. The Military Police looked wonderful in their full dress uniforms, and saluting each car as it went by, otherwise standing at attention. Along the Mall we rode with people eyeing us from all sides, into the open square in front of the Palace, and then through the Gates to an inner court.

A footman in a long red swallow-tail coat, white trousers and high silk hat with a funny sort of pinwheel decoration on the left side of the crown, helped us out, and escorted us into the main hallway of the Palace where another impressively dressed man met us, and who had opened the huge doors.

We were then directed to the right, and up eight white marble steps covered with red plush carpet, into a huge library, in the center of which was a very handsome pool table. This room had been turned into a cloak room for the ladies, with beautifully appointed dressing table at the rear. On the dressing table were luscious bottles of perfume and smelling salts, a brush and comb, and a tray with odds and ends like a beautiful pin cushion containing all sorts and sizes of pins, and a small tray of hairpins. I took a few hair pins for souvenirs.

After depositing our wraps, we came out to the main hall, down those eight steps, up another set of marble steps, and around to a big reception room. And what a room! In it were huge oil paintings of Queen Victoria's Jubilee at St. Paul's Cathedral, and at Westminster Abbey, also a picture of the Royal Family in 1897.

We stood around and talked for awhile, then went through (when directed) to another room where there was a huge and beautiful fireplace with a lovely coal fire burning. Then through a third room where there was a real homey atmosphere, for the smell of a wood fire permeated the place. And from that room into another where stood the Royal Family in a receiving line which was very short.

A tall fine looking man took each card as we filed along, and called out the name — "First Lieutenant Alice G. Howard" and just then I was standing in front of the King. Oh my! Can I possible describe to you how I felt?!!!

We shook hands with each one. First King George, then Queen Elizabeth; then dear little Princess Elizabeth and Princess Margaret Rose, and said "How do you do" to each one as we had been instructed. From there we filed along to the right and out into the main reception hall again. We had been told that the Royal Family were particularly interested in seeing the nurses, and we would have the opportunity to talk to all four personally.

After all the guests had gone through the receiving line, the Family came out to the reception room. I had a personal conversation with each one.

Miss Zwisler and I stayed together. We talked with Queen Elizabeth first. She asked where we were from in the States. Miss Zwisler told her that most of the nurses there at the Tea were from the New England States. The Queen's face brightened up and she said, "Oh, isn't that lovely. And do you like it over here?" I told her I loved it and that I was so glad to be here. She said, "And do you find it rather lonely?" I said, "I thought it must be. She then said, "I am so glad, for we want you to like it and be happy here."

When I talked with the King, he asked me where I was stationed, how many patients we had in our hospital and whether we had more "flu" cases than accident cases just now.

The little princesses were beautiful and so sweet to us. We talked a little with them but they seemed rather shy, particularly the little one.

The King was in his Naval Uniform, the Queen in a beautiful mauve crepe dress with white fur bordered panels that hung down the back, being gracefully draped over the shoulders (the panels were not white but were bordered with white fur). The Princesses wore powder blue crepe dresses with little accordion pleated skirts. We fell in love with all four members. They are so sweet and simple in their manner.
The tables were spread with delicious things. The china was white bordered in gold with the Royal Crest, and the silver was the King pattern that we have at home. There were delicious dainty sandwiches, beautifully arranged on plates with little white flags in the center stating what kind they were.

Also we had scones, cakes, and a choice of tea, coffee, or orange juice. Of course, there were cocktails for those who wanted them.

Among the guests were Lady Astor, Mrs. W. Churchill, and others whom I dare not name. But some were three star Generals, also two star and one star Generals.

The whole affair was so simple and informal and they made us all feel very much at ease.

At a signal that it was time to go, the orchestra played “God Save the King” and we all stood at attention. My! but it was impressive. The Royal Family just seemed to fade into the background.

Well, it was a perfectly grand occasion, the thrill of a lifetime, and so unexpected! It was kept very secret beforehand, but we were told we could write home about it. Forgive me for having it so long and drawn out, but I wanted you to enjoy every bit of it with me.”

* * * *

Betsy Greig ’79 FNP and faculty member in Community Health 1979-1987, left for Thailand in August ’88 to spend one year as Education Coordinator for the American Refugee Committee. She is responsible for programs for medics, nurses and health educators who work in border camps over the Cambodian line. Here is her Christmas letter:

11 December 1988

Merry Christmas from the tropics! It is the middle of the dry season here with cool breezes, dusty days, bed quilt nights, and increased military activity up and down the border.

Yesterday was the 40th anniversary of the Universal Declaration of Human Rights. Most of us working at Site 2 with Khmer “displaced persons” spent the preceding week discussing the meaning of human rights and why the Khmer don’t have any, and what we all might do to change that. Of the 30 basic human rights in the declaration, the Khmer have only two: the right to basic education and the right to practice the religion of their choice. I’m not even sure that Khmer living at Site 8, a Khmer Rouge camp, have those two. What they don’t have is access to any system of justice, freedom of movement, freedom from torture, citizenship, the right to own property, freedom of expression, or freedom from slavery or at least coercion. It is hard to remain optimistic and hopeful in the face of this reality, yet I know that the only way I can be of service is to somehow move beyond the emotional impact of all this and hold to a consecration of realizing our shared humanity and wholeness. Those of us who do have freedom of movement in and out of the camp realize that we bring energy and hope via a tenuous lifeline. There are many challenges for me here: to understand a very different conception and perception of the world, to work on many levels of simplicity and complexity at one time, to remain openhearted in the presence of my own fear and anger at the power and manipulation of the military and political forces around me, to learn to give openly and generously.

Thailand has its own contradictions and paradoxes as a moderately developed Third World country. Life in Aranyaprathet is not so different from life in a town of the same size in the U.S., but the small villages are certainly different in material terms. I had naively thought the environment would be pristine and unspoiled, but the level of awareness for protecting the Earth and her beauty and resources is pretty low. At the end of November there were severe floods in the southern part of the country complicated by massive mudslides from legal and illegal logging, wiping out several villages and killing more than 400 people. Now there is much discussion in

continued on next page
the papers about reforestation projects and the need to honor the land and the people who live on it.

This is called the Land of Smiles and with good reason. I have never been in such a friendly place. It is easy to travel alone with only a basic vocabulary of Thai because people always smile and extend a helping hand. In October I took a holiday to the River Kwai and decided to risk cultural disapproval by going out for a late afternoon run on a road through a couple of villages. And it turned out to be one of the most enjoyable parts of my trip – people smiled and laughed and many offered me rides on motorbikes and bicycles, some ran a few paces with me, and we generally supplied each other with a great deal of entertainment. I ended up at the famous Bridge over the River just in time to watch an intense yet gentle sunset painted with the best pink, purple, gold, and orange sunset colors. Such a gift!

In recognition of Human Rights day, we got to stay in Site 2 last night until 7.30 p.m.; usually the camp closes at 5. In fact, this is the first time in its existence that the camp has ever been open to volag personnel so late. There was a candle lighting ceremony at the end of many events planned for the day – it was “complicated” by a persistent wind that kept snuffing out our little lights. But people would continue to search out someone whose candle was still burning to renew their own flame and pass it on. Perhaps it was the most apt metaphor after all. And once the official events were over and we headed back to our cars, we all got to briefly experience what it’s like to be in a “city” of 170,000 people at night when there is no electricity. It’s not exactly like camping out.

So this New Year may we all have the love and the courage to keep our own light burning and rekindle it in others where it may have blown out.

Peace be with you!
Betsy

Martha Metzal Mohler ’54 received her Master, Health Services Administration degree from George Washington University in the field of Public Policy.

Flora Vigliotti Lavery ’64 was honored by the Connecticut Nurses’ Association at the Awards Banquet during the Annual Convention in October. She was awarded the Agnes Ohlson Award for outstanding contributions to nursing through Political Action. Her involvement has been vital in both her home town and statewide issues dealing especially with needs of the elderly population.

Anita Ward Finkelman ’71 has established a Consultative Service in the Washington, D.C. area – working with Staff Development, Quality Assurance, Writing/Health Care Issues and Leadership and Management issues.

Carol Hutton ’74 was in England during the Fall semester working on a research project funded to set up a demonstration medical ward in a Health Authority. She says “this has provided interesting insight into the British health care delivery system.” Carol reports she will probably miss reunion in June.

Judy Alheim Beal ’75 participated in the Sigma Theta Tau, Region 5 Assembly in Lowell, MA in March ’89. She was a member of a panel: “Sustaining a Career/Juggling Roles” which was moderated by Angie McBride ’64; Jim Fain, YSN faculty member and Ruth Knollmueller former YSN faculty were also panelists. Judy is Adjunct Associate Professor of Nursing Research at Simmons College, Boston, and is the co-founder and owner of The Nurse Network, Inc., and co-editor of Nursing Scan in Research – Application for Clinical Practice.

Vicki Wirth ’76 and family moved to Glens Falls, NY in the Fall and is, so far, enjoying being at home full time!

Michal Hellenbrand ’78 received New Jersey’s top nursing honor from the State Nurses Association for her “outstanding contribution to nursing in a psychiatric setting.” She is now Associate Administrator of Fair Oaks Hospital in Maplewood, NJ, where she was Director of Nursing from 1980 to 1986.

Nancy Wineman ’77 received her Ph.D. from University of Rochester in 1987 and is now Assistant Professor at Frances Payne Bolton School of Nursing, Case Western Reserve in Cleveland.

Nancy Kraus ’78, and Fred had a 2nd son in October. They’re now living in Pelham, N.Y.

Terri Clark ’79 and David Coller ’83 had a son born in October. Their daughter is now 3+ years old.

Jim Sullivan ’79 is in his first year of a 3 year residency program in Physical Medicine and Rehabilitation at the University of Medicine and Dentistry of New Jersey in Newark – “learning a lot and enjoying it tremendously.”

Debra Harrison ’79 is now Debra Nichols! She plans on coming to the class reunion in June.

Elizabeth D’Amour ’80 and her husband had a son in January ’89. He is joined at home by 2 sisters and a brother.

Jake Weinstein ’80 has left his nursing job and started a new Recycling Business in New Haven.

Jane Fall ’81 co-authored an article “Bioethical Decision Making for the Health Professional” which was published in a new journal Nursing Connections 1 (1), Spring 1988.

Sheila Norton ’81 is an Instructor in the Women’s Health Specialty at the MGH Institute of Health Professions Graduate Program in Nursing in Boston.
Jacqueline Jordan '82 has been named head nurse of the Neuro Intensive Care Unit at Bridgeport Hospital.

Marcy Caplin '82 and Dorothy Sexton prepared an article "The Stresses Experienced by Spouses of Patients Hospitalized in a Coronary Care Unit with Myocardial Infarction" which was published in Focus on Critical Care in November 1988.

Jessica Shank '82 was married to Andrew Coviello in December. She is program director of the Takeheart Cardiac Rehabilitation Program at St. Raphael's and is a courtesy faculty member at YSN.

Veronica Kane '83 was married in June to Stephen Nemmers, Lt. Col in USAF and clinical psychologist. Ronnie's current duties in the Air Force (Bellevue, NE) include outpatient peds. and the Strategic Air Command expert on evaluation of Child Sexual Abuse.

Cory Handy Gonsalves '83 is a PNP at Hartford Hospital in outpatient area, is learning Spanish (!) and has a YSN student working with her once a week.

Regina McNamara '83, Vice President of Nursing at Bristol Hospital, and two colleagues have developed a innovative program at their hospital, aimed at acquiring and maintaining a skilled professional staff of caring nurses.

Theresa Apriceno Tesoro '84 was one of the three co-investigators awarded $10,000 by the Univ. of Penn School of Nursing's Clinical Collaboration Program. Terri and her colleagues are studying models of nurse/physician collaboration to establish the best model for delivery of primary care to adolescent mothers and their infants.

Debbie Garfield Kim '84 and a colleague are analyzing data collected last summer on trauma admissions at the Cleveland Metropolitan Hospital in order to prepare for the needed services this next year. She is also on the Clinical faculty on the Critical Care Division in Med-Surg Nursing at Frances Payne Bolton School of Nursing.

Chris Shaw O'Dell '84 is now working at the FDR VA Hospital in Montrose, NY as a nursing instructor. She hopes to attend 5th reunion in June!

Laura Grass '84 is now Laura Farris – living in Los Osos, California.

Gayle Gravlin '84 is the Clinical Manager, Nursing Operations in the Psychiatric Nursing Division at Mount Sinai Medical Center in New York. Gayle is looking forward to returning to Alumni/i Weekend in June!

Anne Teitelman '85 had a baby in May '88. She presented a paper on "Maternal Work Activity: Preterm and Low Birth Weight Deliveries" at the American Public Health Association Annual Meeting in Boston in November.

Linda Lonski '85 is now the Business Manager for Oncology Services with Caremark Homecare, Inc. in Illinois.

Beth Sipple '85, Head Nurse of the Inpatient Yale Psychiatric Children's unit at YNHH, was a panelist following a lecture on "Temperament in Clinical Treatment presented at the Yale Med. School.

Margaret Haggerty '85, is Coordinator of Pulmonary Rehabilitation at Norwalk Hospital. She will accompany persons with Lung disease on two Spring cruises – one to Mexico and another to Bermuda. Margie is one of the pioneers in this area; this is the third year the cruises have been offered.

Nancy Lim '85 was married last summer; she's an FNP in a private non-profit clinic serving the working poor with general medical, obstetric and dental services.

Sheila Gillespie '85 presented a paper at the APHA Meeting in Boston in November. Sheila is still working at the Infectious Diseases Center in Atlanta.

Rhea Sanford '86 conducted a problem-solving session "Standards and Quality Assurance: Development and Implementation Strategies" at a staff development conference sponsored by Resource Applications (The C.V. Mosby Co.) in Orlando, FL in February 1989. Rhea chairs the Standards Project Team at U. Conn Medical Center where she is a clinical nurse specialist in surgical nursing.

The person pictured below needs to be identified.

Can you help us?