We celebrate the 10th anniversary of the Center for Adolescent Nursing at the University of Minnesota with the news of five more years of Center support from the Federal Maternal and Child Health Bureau (MCHB) of the Health Resources and Services Administration, U.S. Department of Health and Human Services. MCHB is charged with promoting and improving the health of our Nation’s mothers and children. With approximately $1 million over the next five years, we will broaden our scope and expand our capacity to reach nursing leaders in the field of adolescent health. Support from MCHB launched the Center for Adolescent Nursing in 1993, and we remain the first and only federally-supported Center for nurses who specialize in adolescent health in the U.S. and throughout the world.

The gap between the health needs of teenagers and the preparedness of nurses to address these needs alerts us to our primary mission: to educate nurses who can be expert clinicians, teachers, researchers, and leaders in settings serving young people. In addition to direct care with adolescents and their families,

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The Center of Adolescent Nursing master’s student, Nyeba Manston-Dunbar, B.S.N., just returned from her leadership practicum experience in Africa, an 18-day health assessment mission inside the West African country of Liberia. Manston-Dunbar was a lead member of a team sent by the American Refugee Committee (ARC) to survey the needs and living conditions in this war-torn region. She interviewed health care workers, representatives from local Liberian nongovernmental organizations (NGOs), people working with youth, and refugees in and around the country’s capital of Monrovia to learn the most critical public health needs following the decade-long war that has devastated the country. The primary focus was on health care and water sanitation. Her team was charged with determining which services are most urgently needed and communicating their assessments to the U.S. Government’s Disaster Response Team.

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ON THE ROAD TO A PUBLIC HEALTH NURSING DEGREE
CENTER STUDENT PERFORMS RAPID HEALTH ASSESSMENT IN LIBERIA

Center for Adolescent Nursing master’s student Nyeba Manston-Dunbar, B.S.N., just returned from her leadership practicum experience in Africa, an 18-day health assessment mission inside the West African country of Liberia. Manston-Dunbar was a lead member of a team sent by the American Refugee Committee (ARC) to survey the needs and living conditions in this war-torn region. She interviewed health care workers, representatives from local Liberian nongovernmental organizations (NGOs), people working with youth, and refugees in and around the country’s capital of Monrovia to learn the most critical public health needs following the decade-long war that has devastated the country. The primary focus was on health care and water sanitation. Her team was charged with determining which services are most urgently needed and communicating their assessments to the U.S. Government’s Disaster Response Team.

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Liberia

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Center for Adolescent Nursing master’s student Nyeba Manston-Dunbar at a refugee camp in Monrovia, Liberia.
GRANT,
...continued from cover page

graduates from our program work in educational settings and create community-based coalitions, lead program planning, implementation, and evaluations, as well as shape policy and advocate for evidence-based practice.

A four-pronged strategy drives our work:
• providing master’s and doctoral education in adolescent health for on-site and distance learners;
• offering intensive continuing education institutes which draw a diverse and global audience;
• collaborating through technical assistance and consultations to youth-serving organizations, as well as state, regional, national and international agencies and institutions; and
• disseminating educational strategies, particularly evidence-based interventions to promote youth health.

EXPANDING OUR FACULTY AND RESEARCH

Over the past decade we have grown from one to six doctorally-prepared faculty in the Center for Adolescent Nursing. Each of us are invested in a host of adolescent-related research projects, nearly all of which are funded by grants from the National Institutes of Health and the Centers for Disease Control and Prevention. With adolescent health colleagues in medicine and public health, we are pursuing a range of research questions from exploring the ways in which teenagers are using alternative and complementary therapies to testing the impact of service learning and peer education on the prevention of teen pregnancy. Our newest faculty member, Martha Kubik, Ph.D., M.S.N., RNC, ANP, has made headlines around the U.S. this summer with her published research on adverse outcomes for middle-school youth when exposed to unhealthy school food environments (see article on page 6).

GRADUATE STUDIES IN ADOLESCENT NURSING

To date, over 30 Minnesota graduates have received their Master of Science (M.S.) in nursing with a focus on adolescent health within the public health nursing arena. Most complete the M.S. in four semesters, including clinical and/or leadership practica in a variety of settings serving adolescents. Our distance education courses make it possible to complete almost all coursework on-line. One-third of our adolescent nursing students select the dual degree option, M.S. and M.P.H., which can open doors to a variety of positions in community and public health settings. A dual degree typically means one additional year of graduate courses.

A Ph.D. in nursing with a focus in adolescent health has been an option supported by our Center beginning five years ago. The doctoral curriculum is designed to advance research, scholarship, and leadership in the field of adolescent health. The Ph.D., including the dissertation, can be completed in a minimum of 3 years of full-time study. Our graduates have typically moved into faculty, research, and leadership roles in academic and public health sectors at state, regional, or national levels.

Made possible by the grant from MCHB, stipend and tuition support aids students in achieving their goals of being masters’ or doctorally prepared.

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Adolescent Nursing

NATIONAL, INTERNATIONAL LECTURER AND CONSULTANT

Dr. Bearinger has lectured nationally and internationally on a wide range of adolescent health topics, particularly resilience among vulnerable teens, youth development in the context of families, schools and community settings, and strategies for longitudinal community-based research. She teaches grantwriting and public speaking, with a focus on the translation of research into policies, priorities, and best practices. Bearinger has received funding from the National Institutes of Health (National Institute of Nursing Research, National Institute of Mental Health, and National Institute of Child Health and Human Development) for longitudinal studies on the prevention of teen pregnancy, STDs and HIV, adolescent substance use, and building youth development programs for urban American Indians.

She consults with a number of state, national, and international agencies. As a resource advisor to the World Health Organization and UNICEF, she has helped in the development of evaluation strategies for youth development initiatives in 16 nations.

THE UP AND COMING LECTURES, BOSTON, MA

The site for Bearinger’s 2004 visiting professorship has been selected by SAM – Boston College’s William F. Connell School of Nursing. They will be partnering with a non-profit human services agency, Action for Boston Community Development, the Boston University School of Public Health, and the Boston Children’s Hospital’s interdisciplinary post-graduate adolescent health program for Bearinger’s consultation. Lecture and seminar topics during the 3-day visit will range from lessons learned about protecting vulnerable youth to building a research program, from grant writing to research dissemination. These Boston lectures, many of which will be open to the public, are scheduled for October 2004. For additional information, please contact Dr. Mary Aruda, (617) 552-8053, mary.aruda@bc.edu.
Internally displaced persons (IDPs), who have not actually crossed an international boundary, face many of the same hardships as refugees, but are not protected under international refugee law since they remain under the control of their own government. An exact estimate of the number of IDPs remains impossible to ascertain. However, with certainty, IDPs outnumber refugees. Since the Cold War, the number and intensity of conflicts has increased worldwide, with most occurring within nations rather than between nations. One-third of the world’s internally displaced population resides in Africa. Sudan, Angola and the Democratic Republic of the Congo account for over 8 million internally displaced persons. Civilians are increasingly the victims in any armed conflict. Children are particularly vulnerable to human rights abuses and can no longer remain innocent bystanders to armed conflicts. They become the subjects of genocide, forced military recruitment, gender-related violence, large-scale torture and exploitation. There is growing evidence from war zones in Rwanda, Bosnia and Sierra Leone that war and forced migrations are linked to the spread of HIV/AIDS.

**Liberia,**

...continued from cover page

“Conditions are worse than you can imagine,” explains Manston-Dunbar, who lived in Liberia until the age of 13.” Many schools and public buildings in Monrovia have turned into makeshift housing for the tens of thousands of displaced people. In the morning, the scene is chaos, as these people begin their daily search for food and work.”

Manston-Dunbar’s assessment will help the American Refugee Committee (ARC), a non-profit humanitarian relief organization that works for the survival, health and well-being of refugees and displaced persons, meeting the needs of victims caught in the crossfire of civil violence and warfare in Liberia. ARC currently works in 12 countries providing multi-sectoral assistance to nearly one million uprooted people annually. Their current base of support comes from an array of sources – individuals, corporations, foundations, and grants from the U.S. government, various foreign governments, and United Nations agencies. ARC programs provide assistance in health care delivery, improved water and sanitation, reconstruction of shelters, environmental rehabilitation, empowerment lending, legal aid, repatriation assistance, and psychosocial services. ARC works to build local self-sufficiency so that community leaders can carry on the work long after peace is restored; program beneficiaries are primarily women and children.

“Liberians are in desperate need of access to clean water, food and non-food items, health care and medications, security and stability,” explains Manston-Dunbar. The assessment team visited more than eight sites currently housing internally displaced people. The majority of the schools, some public buildings and sports arenas are now makeshift housing for tens of thousands of homeless. “In every site,” says Manston-Dunbar, “Liberians’ primary concern is the lack of food. Yes, the World Food Program is conducting distributions, but Liberians reported that they were only receiving corn meal. Sometimes children receive a few high-protein biscuits as a means of supplement. These displaced individuals ran from far away counties such as Lofa and Grand Bassa with only the clothes on their backs. Yet, no oils, coal, pots or pans are provided for cooking the corn meal.” According to the World Health Organization’s (WHO) report in August 2003, 30% of children in Monrovia suffer from acute malnutrition (low weight for height) and 90% suffer from chronic malnutrition (low height for age).

“The displaced persons lack mats and blankets for sleeping, putting them at risk for illness during the current rainy season in Liberia,” says Manston-Dunbar. “The majority of these internally displaced people have to sleep on cold, wet cement floors. There is no running water and, though some NGOs are conducting chlorination programs, most do not have buckets, containers or pots for fetching clean water. As a result, they have to use dirty creeks for... continued on page 5 - Liberia
WHO has registered more than 3,890 cholera cases along with a high incidence of malaria.

“Sexual violence is an especially critical problem in this post-conflict setting,” Manston-Dunbar explains. Her assessment team found that at the refugee camps they visited, more than one in three women displaced in the violence have been victims of rape and other forms of interpersonal violence. “These women remain extremely vulnerable,” says Manston-Dunbar. “Many women must gather firewood in remote settings, making them continually at risk for rape.” She also reports that, “almost all of these women have never had a pelvic exam, treatment, or counseling for the horrors committed against them.” Such findings have prompted ARC to begin plans for clinics to aid victims with needed medical as well as psychological services. ARC has set up similar clinics in the West African country of Guinea, which neighbors Liberia.

Over the last six months, rebel fighting in Liberia has reached tragic proportions. Very few have escaped the nightmare. “There is still fear, insecurity, and instability in the minds of Liberians because of the persistent pockets of fighting throughout the country,” says Manston-Dunbar. “I left Liberia on September 8, 2003 and on the 9th, there was report of heavy fighting in Kakata. This adds to the humanitarian crisis because, during one of the UN meetings in Liberia that I attended, there was a report of over 80,000 Liberians walking from Buchanan and surrounding areas towards Monrovia. These camps are already over-crowded. The Samuel K. Doe sports arena houses over 60,000 of the displaced; Fendell campus houses 12,000; G.W. Gibson high school holds over 5,399 of the displaced; Paynesville town hall has 5,000+: the Masonic temple has over 11,500 ... and the numbers go on.”

“Being a Liberian myself, it was horrifying to observe the struggle for survival that my brothers and sisters are facing,” concludes Manston-Dunbar. “I hope our assessments will be useful in defining effective ways of truly assisting Liberians in this desperate situation.”

Minnesota is home to one of the largest Liberian populations in the United States. Nyeba Manston-Dunbar, a Liberian-American, came to the United States in 1992 and moved to Minnesota in 2000. She works as a nurse in Minneapolis and will complete her master’s degree in public health nursing with an adolescent health focus in May 2004.

For more information on ARC programs, contact Martha Naegeli at 612-607-6481 or Therese Gales at 612-607-6494, or visit ARC’s website at www.archq.org.
Welcome Marti Kubik, Ph.D., M.S.N., R.N., ANP

Center’s Newest Faculty Member Brings Nutrition and Physical Education Expertise

The Center for Adolescent Nursing delights in welcoming Dr. Marti Kubik to our Center’s core faculty. Kubik completed her graduate education in nursing in 1982 at the University of Pennsylvania (U Penn) in the primary care/adult nurse practitioner program. She has over 20 years experience working as a nurse practitioner in primary care, providing direct patient services to both adult and adolescent populations in community-based settings. She has mentored and precepted advanced practice nursing students at the U Penn and the UMN Schools of Nursing and served as coordinator of UMN’s family nurse practitioner master’s program for two years. In 2002, Kubik received her Ph.D. in behavioral epidemiology from the UMN School of Public Health.

Dr. Kubik’s research interest is in adolescent health behaviors, specifically primary prevention research in school and community settings with a focus on nutrition and physical activity. Excited by her recent publications reporters from both print and electronic media from across the U.S. interviewed Kubik to learn more about her findings regarding today’s school food environment and its association with teen diet practices. Her research was disseminated in newspapers across the U.S. including the Boston Globe and the Washington Post. Perhaps the most far reaching was the interview with Kubik heard on National Public Radio’s "All Things Considered."

Currently Kubik is a co-investigator on an NIH-funded multi-center group randomized trial that targets physical activity in middle school aged girls. She is also principal investigator on a new study examining the physical activity practices of lower income female youth attending a community-based reproductive health clinic.

The Center is pleased to have a talented intervention researcher with many years of clinical practice with adolescents. Her work with school and community-based intervention programs targeting adolescent nutrition and physical activity make her well versed in developing and implementing intervention strategies that engage school and community members in changing students’ behavior.

We asked Kubik a few informal questions:

What do you like most about your work?
"I enjoy the multiple components of my work, which includes teaching, clinical work and research. Teaching students and watching them grow is wonderful, especially when you see them make the connection between what they're learning in the classroom and how these principles can be applied to improve health in the communities or hospitals where they work."

What do you like most about working with adolescents?
"Teens are facing challenging developmental changes in a challenging time. I've worked with adolescents my whole career. They are honest. Their ideas are awesome and they really do have a lot to say when it comes to their health. It's very rewarding to be a recipient of all that energy. Seeing them in clinic gives me steady feedback about where I want to go with my research and teaching in adolescent health."

What is your teaching philosophy?
"I have a great respect for students — every student brings a wealth of prior experience and their personal perspectives to any issue. One of the challenges of teaching is incorporating these many perspectives into the learning process. As a teacher I see my role as facilitating the movement of knowledge from books to practice. I believe the best way to do this is to provide students with applied learning experiences."

Dr. Kubik’s understanding about the social environment of schools and how aspects of that environment influence adolescents is reflected in her writing, her teaching, and her practice. Kubik’s expertise enriches our Center in multiple ways.

Select Publications:

The Center of Adolescent Nursing also welcomes Scott Harpin to our faculty. In January 2004, Harpin joined the University of Minnesota’s Center for Adolescent Nursing and the School of Nursing’s public health nursing faculty as a Teaching Specialist. He coordinates outreach activities and program planning with Center for Adolescent Nursing students and guides undergraduate public health students in their clinical practicum experiences.

Harpin’s interest in advocating for underserved youth populations is evident in testimonials to policy makers in Minnesota. On March 3, 2004, Harpin was asked to testify to Minnesota’s Health and Human Services Policy Committee in support of the Minnesota Minor Consent Law, in place since 1971. These statutes allow youth to consent to certain healthcare services without parental consent and maintain their right to provider-patient confidentiality. Harpin explains, “I’m speaking from the viewpoint of someone who has worked with homeless and precariously-housed teens for five years. These kids are living in homeless shelters or have been placed in foster care, and often can’t get parental consent for medical services, usually because of child protection reasons.” (Harpin’s testimony available on-line at http://www.house.leg.state.mn.us/htv/archivesHTV.asp. Select the “Health and Human Services Policy” link, look for the “HF352” bill.)

Harpin completed his undergraduate degree in 1998 at Edgewood College in Madison, Wisconsin. After brief work in acute care in Minneapolis, he began work at St. Joseph’s Home for Children, a community non-profit that provides services for youth in out-of-home placement. This setting laid the groundwork for his graduate education in child and adolescent health and provided an ideal setting to practice while completing his coursework. In addition to his new roles with the UMN School of Nursing, Harpin continues part-time at St. Joseph’s Home, a division of Catholic Charities Minneapolis-St. Paul.

Harpin completed his MS coursework in adolescent health nursing at University of Minnesota’s Center for Adolescent Nursing and MPH in maternal-child health at the University of Minnesota’s School of Public Health in May 2003. His master’s research included a look at risk and protective factors in the lives of youth in out-of-home placement. He capped his graduate education with a one-year fellowship in the MCHB-funded Division of Pediatrics and Adolescent Health’s Leadership Education in Adolescent Health program.
With the 2001 school year beginning, CAN graduate Peggy Nerdahl, M.S., PNP launched her new position as Health Services Coordinator for the Columbia Heights School District. Managing the health needs of over 3,000 students in six schools—three elementary, one middle, one high school, and one private school, each with its own health aide—is exactly the position Nerdahl wanted after completing her CAN master’s program. After 28 years in nursing, she is delighted to be a district health coordinator in the community where she has lived for the last 11 years. Her multi-faceted position offers variety each day—direct care for students and families, teaching in classrooms, advocacy and policy-making at the state legislature and school boards, systems analysis and development, and fundraising with stakeholders.

As District Health Services Coordinator, Nerdahl now has an opportunity to foster positive connections between students, their teachers and schools. In addition to preventing health risk behaviors, these connections are critical to prevent school failure. She has also helped launch a peer mediation program that assists teens in managing anger and conflicts. In Fall 2003, she reinstated “Dads Make a Difference,” a pregnancy prevention program that utilizes students to teach their peers. In her view, peer education can be a very effective approach to health education, especially with sensitive topics such as family dynamics and the consequences of early pregnancy. According to Nerdahl, “students really enjoy the material when their peers are teaching the topics. Some peer educators choose the teaching profession as a result of their Dads’ Make a Difference involvement.”

Challenges

Some of the challenges Nerdahl faces on the job mirror challenges facing teens across the U.S. She comments, “Sixteen years ago, cases of Type II diabetes in kids were virtually unheard of; today we have five kids in our district with this problem.”

The root of the problem is one of the nation’s most pressing health issues—obesity. “Adding to this problem,” says Nerdahl, “schools across the nation are facing budget cuts and are considering discontinuing physical education programs.” But physical activity at school is one of the key weapons in the fight against obesity. Moreover, physical activity helps young pubescent girls store lifetime supplies of calcium in their bones during their years of rapid growth. “Discontinuing or making physical education an elective would save schools money,” she notes, “but negatively affects the health of our students.” This year the Columbia Heights School District has decided to continue requiring physical education for its 7th and 8th graders. Nerdahl is gearing up to help advocate for continuation of physical education as a routine part of students’ school day.

Team Work

It’s no surprise that mental health issues are in the forefront for Nerdahl, as they are today for all who work with young people. “We are seeing difficult cases of mental illness disorders, amongst both students and their parents—everything from Munchausen syndrome to school phobia, anxiety, depression and chronic headaches secondary to stress. Parents, students, teachers, health care providers, counselors and school nurses must work together to help students with acute and chronic mental health problems continue to be successful in school.”

The availability of new technology in the form of automated external defibrillators (AEDs) has stimulated team work involving some non-traditional partners from the Columbia Heights community. Nerdahl worked with the school district and fire department in a fundraising effort to obtain AEDs and train school representatives in using this technology. All public schools in Columbia Heights and all fire department rigs are now equipped with AEDs. Next year over 400 individuals including all of Columbia Heights’ 10th graders, will be trained in CPR and the use of AEDs. With this new technology, Columbia Heights has taken another step in becoming a “Heart-Safe Community.”

Future Goals

Nerdahl was inspired to become a nurse at Minnesota’s LeSueur High School by a school nurse who talked with her about the profession and started a “future nurses’ club.” She would like to do the same for students in her district. “With the current nursing shortage, this is a profession that virtually guarantees work,” says Nerdahl. “Nursing is a challenging and rewarding profession. I would like to collaborate with schools of nursing to encourage students to consider the option of a nursing career.”

Comments on Master’s Level Preparation

Nerdahl’s master’s degree in nursing gave her the background to influence the health of individual students, the student population, teachers, administrators, parents and the community of Columbia Heights. “The Center for Adolescent Nursing curriculum on program evaluation, management of resources,
Continued from page 8

Nerdahl

...effected change within organizations, advocacy, grant writing and research has been a great help to me in my work."

When Nerdahl advocates for young people, she does so with a wealth of knowledge and understanding of the needs of school-age youth and their families. A particularly invaluable experience during her CAN studies was an internship with MOAPP (Minnesota Organization on Adolescent Pregnancy Prevention and Parenting) where she had an opportunity to assist in the passage of state legislation to appropriate grant funds to support teen parents in schools. With her assistance, her school district applied for and was awarded one of these Minnesota state grants, subsequently renewed for two additional years.

Skills she needs to add to her repertoire? Nerdahl says she wishes she had more background in personnel supervision and financial management. Responding to an evaluation from graduates like Peggy Nerdahl, the Center has added Health Care Financial Management to its required courses in the master’s curriculum.

Prior to completing her master’s in adolescent nursing, Nerdahl worked at the University of Minnesota Hospital for over a decade as a children’s rehabilitation nurse, station instructor, and obstetrics nurse. Experiences in these positions moved Nerdahl to pursue the Pediatric Nurse Practitioner certification she received in 1987. With PNP skills she served for eight years as a school nurse, conducting vision, hearing, and developmental screenings for preschoolers, obtaining funding for remodeling classroom space into a day care center, coordinating the start-up of a teen parent day care center in an inner city high school, teaching teen parenting skills to teen mothers and fathers, providing primary care in a school-based clinic and working with transition programs for special education students entering adulthood.

Before taking her current position, Nerdahl provided leadership in developing case management services for young women at high risk of early pregnancy who participated in an intervention study sponsored by the University of Minnesota’s National Teen Pregnancy Prevention Research Center (PRC). Given nearly two decades of work on behalf of pregnant and parenting teens, Nerdahl wanted to focus on the prevention of early pregnancy. She designed and oversaw implementation of the one-on-one case management component of an intervention designed to reduce sexual risk behaviors and promote healthy youth development. With an eye toward evaluation, she also collaborated in a qualitative study exploring barriers and supports to teens in using contraception and making healthy decisions regarding sexual behavior. An article describing these evaluation findings will appear in 2004 in the Journal of Pediatric Nursing.

WELCOME NEW CAN MASTERS AND DOCTORAL STUDENTS

Terryann Clark, M.P.H., RNCPN comes to us from Auckland, New Zealand where she worked part-time as a researcher for the University of Auckland. She was involved with a team of researchers in New Zealand’s first national survey of youth health and well-being (www.youth2000.ac.nz). Terryann also worked as an Adolescent Nurse Specialist for The Centre for Youth Health, Counties Manukau District Health Board, where she was involved in youth health nursing, youth health leadership and teaching. Terryann is Maori (the indigenous peoples of New Zealand) and has a real passion for indigenous youth health issues. She looks forward to meeting like-minded youth health nurses and learning from world-experts in adolescent health at the University of Minnesota.

Rebekah Forrest, B.A.N., RN graduated from St. Olaf College with a major in nursing and women’s studies. She has worked primarily in hospital settings and is currently employed at Children’s Hospital in Minneapolis. In addition to her course work in adolescent health/public health nursing, Rebekah is completing the Family Nurse Practitioner Program, and hopes to combine the skills and perspectives of public health nursing with clinical practice as a nurse practitioner. Her research interests include examining the life contexts of pregnant and parenting teens.

Luz Huntington-Moskos, B.S.N., CPN, RN earned a degree in nursing from the University of Maryland, Baltimore in 1998 and received Certified Pediatric Nurse credentialing in 2001. Her interest in adolescents first developed as a high school science teacher in the Peace Corps (Malawi ’94-’96). After completing her B.S.N., she began her nursing career on the Adolescent Medical/Surgical Unit at the Johns Hopkins Children’s Center. Luz is pursuing her graduate degree in public health nursing with a focus on adolescents and is currently working for Kosair Children’s Hospital in Louisville, KY. Of Latino decent, with a background in international work and 3 years of experience providing nursing care to members of the Navajo Nation, Luz has strong commitment to minority health issues. Her research interests include concepts of healthy relationships and healthy intimacy as adolescents transition into adulthood.

Windy Solsvig, B.S.N., RN is currently pursuing her graduate degree in public health nursing with a focus on adolescents. After receiving her B.S.N. from the University of Minnesota in 2001, she practiced on a hematology/oncology unit at Mayo Clinic in Rochester, MN. Following this experience, she fulfilled a personal dream of participating in a volunteer program abroad, which led her to San Jose, Costa Rica. The Costa Rica experience, focused on public health and maternal-child health care, led her to her current position as a staff nurse at the United Hospital Birth Center and motivated her to pursue a passion for public health through graduate study.
Adolescent health promotion has a history of over three decades of extensive research and programming in the United States. Yet, in many nations it is a relatively new area of study. The Republic of Georgia is currently starting to explore the field of adolescent health and beginning to develop national recommendations for adolescent health promotion programming. The Republic of Georgia, once part of the former Soviet Union, gained its independence in 1991. Georgians are proud of their hard won independence but with it came certain challenges, foremost amongst those was the loss of a the state run health care system they knew under the Soviets and the need to rebuild their health infrastructure. Civil war, following the Soviet withdrawal, increased the country’s economic hardships and delayed the development of a supportive government. With the country in an economic downturn and the loss of state supported health care, doctors needed to collect fees from their patients and even those who may have once been able to pay for health care are now unable to afford these services.

As Georgians began to rebuild their health and economic infrastructures, Georgia’s National Center for Disease Control called on the local and international medical community to assist with process. One result was an international health project supported by the American International Health Alliance, a partnership between the University of Minnesota School of Nursing, School of Public Health, and the Health Promotion Team of the National Center for Disease Control in Tbilisi. The Georgian Health Promotion Team consists of 5 physicians working to promote health across the nation. The team decided to focus on interventions with its adolescent population, beginning a national adolescent health project in Georgia. Because this adolescent health promotion intervention is the first of its kind in Georgia, the team is breaking new ground; they are aided by Drs. Carol O’Boyle and Cheryl Robertson, two public health nursing faculty in the School of Nursing with extensive international health experience. Dr. Robertson invited Center for Adolescent Nursing masters student, Kimerbly Nuxoll, to assist in planning and implementing this adolescent intervention in the Republic of Georgia. The Health Promotion team already had plans to survey adolescents in local area schools; Kim arrived in Phase II, to put that plan into action.

Nuxoll came prepared with current approaches to adolescent behavior and knowledge on crafting adolescent surveys and analyzing results. To bolster adolescents against the risks they faced day to day in the Republic of Georgia, the team knew they needed to disseminate current information. In their experience, this translated to the dissemination of printed matter. Kim asked the team to consider new methods embodied in the youth development approach. For instance, the average learner remembers half of what they read but over ninety percent of what they do, Kim asked the committee to consider gathering teens in groups, using youth development approaches, such as role-playing, to get their message across. She explained, “Interactive activities encourage students to explore individual, family and community values — and practice healthy decision-making. Students practice with role-playing, small group discussions, demonstrations, writing/poetry activities, poster projects, and exploration of values. The effectiveness this kind of intervention comes in the form changes in knowledge and attitudes, rather than immediate behavior changes. This is a youth development approach; it recognizes that behavior changes are a desirable but a longer-term goal and adolescent knowledge, attitude and decision-making skills are the first step towards behavior change.” When the message includes decisions on avoiding exposure to deadly epidemics on the rise in Georgia, such as AIDS (up 250% from 1995 to 1997), such an approach could save young lives.

According to consultant and advisor Dr. Robertson, “Kim was spectacular, she literally became a one woman seminar on all the latest approaches to youth development and she earned the admiration of five highly respected Georgian medical doctors, whose approach she transformed in a very short period of time.” When asked where her expertise comes from, Kim credits her University of Minnesota public health and adolescent nursing courses. “Two years of course work in adolescence, statistics, assessment, and public health nursing provided the expertise I needed to assist this project.”
Kim describes assisting the team in conducting and interpreting surveys, “We recommended strategies for encouraging healthier behavior in teens based on the survey results, we brainstormed with the team for details on implementing the strategies in the school environment and suggested evaluation methods and changes in future surveys.” The Georgia Health Promotion Team began by creating a survey to assess their country’s adolescents, using the Minnesota Student Survey as a model. Kim recounted her experience working with the surveying process: “While in Georgia, I joined the team as they administered the survey in a local Tbilisi high school to a group of 100 teens. This was their first use of the survey and it was the first time these students have been asked such questions. The students were excited to answer the questions and they had a lot questions for the surveyors. Many students asked when the team would come back to give them more information. Dr. Robertson and I spent the next morning tallying surveys, I wanted to get at least some percentages the team could use as soon as possible. Preliminary results identified risk behaviors amongst Georgian youth that, like US youth, included sexual activity, drug, alcohol and tobacco use, poor diet, and limited physical activity. We were able to use these preliminary results to start creating an intervention plan.”

The outcome of the University of Minnesota’s work in Tbilisi, Georgia was a six-month work plan for a pilot intervention in three Georgian high schools. The intervention included a three-day workshop for three selected teachers and one school nurse from each school. Then a 16-week intervention took place in each school, followed by an evaluation in May of 2003.

Kim graduated from the Center for Adolescent Nursing’s masters program in May 2003. The five physicians on the Georgian Health Promotion Team, with support from the School of Nursing’s public health nursing program and the American International Health Alliance, attended the Center for Adolescent Nursing’s 2003 Adolescent Health Institute on Youth Development. Drs. O’Boyle and Robertson continue to be involved in this program as the Health Promotion Team implements the intervention and makes plans for further programming for adolescents in Georgia. ■
Awards and Honors

Linda H. Bearinger received the 2004 Adele Hofmann Visiting Professor in Adolescent Medicine and Health Award from the Society for Adolescent Medicine.

Linda H. Bearinger was consultant to a joint WHO, UNICEF, UNFPA initiative on the "Development and Participation Rights of Adolescent Girls" in 16 countries, most recently in Moscow, Russia.

Linda Halcón and Cheryl Robertson were awarded an R15 research grant by the National Institute of Health’s (NIH) National Institute of Nursing Research (NINR) for their proposal on “Innovative Stress Intervention in Refugees.”

Marti Kubik received a Grant-in-Aid by the University of Minnesota Graduate School in 2004 for study entitled, “Physical Activity in Low-income Female Youth Attending a Community-based Health Clinic.”

Elizabeth Saewyc was awarded an R01 research grant from the National Institute of Health’s (NIH) National Institute of Drug Abuse (NIDA) for her research on "Enacted Stigma, Gender, and Risk Behaviors of School Youth." This is multi-national study of stigma in school and links to substance abuse & HIV risk behaviors among indigenous, Asian, and Euro-heritage stigmatized teens on youth health surveys in US, Canada, and New Zealand.

Publications


**Presentations**

**Linda Bearinger** presented "Ample Opportunities, Worthy Investments: Youth Development at Home and Abroad" at the Ripley Memorial Foundation Annual Meeting held January 2004, in Minneapolis, MN.

**Linda Bearinger** and Majorie Tharpe presented "Getting the Word Out: Working Effectively with the Media" at the annual meeting of the Society for Adolescent Medicine held March 2004, in St. Louis, MO.

**Rebbekah Forrest** and **Elizabeth Saewyc** presented “Sexual minority teen parents: Demographics of an unexpected population,” at the annual meeting of the Society of Adolescent Medicine, held March 2004, in St. Louis, MO.

Heidi Gallart and **Elizabeth Saewyc** presented “Sexual orientation and contraceptive behaviors among Minnesota Adolescents,” at the annual meeting of the Society for Adolescent Medicine held March 2004, in St. Louis, MO.


**Linda Halcón,** Chlan L, Kreitzer MJ, Leonard BJ presented “Student and faculty beliefs/attitudes about complementary therapies: Implications for nursing education,” at the Midwest Nursing Research Society annual meeting and conference on April 7, 2003, in Grand Rapids, MI.

**Linda Halcón** and O’Boyle C presented “Complementary and alternative therapies: Competencies in public health nursing practices,” at the American Public Health Association annual conference, on November 18, 2003, held in San Francisco, CA.

**Elizabeth Saewyc** presented:


At the annual meeting of the Society for Adolescent Medicine, held March 2004, in St. Louis, MO:

“Hazards of stigma: The sexual and physical abuse of gay, lesbian, and bisexual adolescents in the U.S. and Canada;”

“Teen pregnancy among sexual minority youth in population-based surveys of the 1990s: Countertrends in a population at risk;”

“Suicide ideation and attempts in North American school-based surveys: Are bisexual youth at increasing risk?”

**Renee Sieving** presented:


“Brief Office Interventions: What’s a Provider To Do?” at intensive training workshops for the Preventive Care for Adolescents program, 2003.
Grant,  
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Reaching Health Professionals in Practice

Odds are that you know about our continuing education offerings. At least we hope we are reaching you with news of these institutes.

For the 8th year the Center is teaching its 4-day Summer Institute Cultivating Capacity: Linking Youth Development, Health, and Learning (August 2-5, 2004). This institute exposes learners to the practical applications of key conceptual models in adolescent health. Our Adolescent Actors Teachers Project, involving young people ages 16-21 acting as clinic patients, has been a highlight of our annual institute. Guest faculty have headlined our institute offerings – Karen Pittman, Doug Kirby, Loretta Jemmot – to name a few. Enrollment tops out at 60 participants each year.

Together with our MCHB colleagues from the Center for Children with Special Health Care Needs, also in the UMN School of Nursing, we offer a second annual institute – Resource Development through Grantwriting. Because the Centers can provide a wealth of faculty expertise in grantwriting, the teacher-student ratio is 1:6, with each faculty working with a small group of participants throughout the 2-day institute. Participants learn how to more effectively seek funding resources, as well as design and write successful grants.

Tapping into the Center’s Expertise and Resources

We anticipate that many of our state, national, and international colleagues will continue to call upon our adolescent nursing faculty for consultation and guidance in developing educational programs, designing youth services, and advocating for policies and practices that are responsive to the needs of young people. Involvement of our faculty spans the globe from U.S. Federal agencies to the World Health Organization.

The Adolescent Nursing Newsletter, designed, drafted, and delivered three times each year to over 1000+ subscribers, highlights some of the work and successes of our students, our graduates, and our faculty. Ten years of issues and still not enough pages to tell our friends and colleagues about our Center.

Please join with us, through consultations and collaborations, in our graduate programs and institutes, on our website http://www.nursing.umn.edu/CANL/index.html and through our newsletter. We want to continue to be a hub for nurses and other health professionals who are energized by the young people with whom they work.

Undergraduate Scholars

Tiffany Cobb

Tiffany Cobb, an undergraduate student worker here at the Center for Adolescent Nursing for three years, often completed work assignments faster than we could provide them. She graduated from the University of Minnesota in May, 2003 with a B.A. and a minor in public health. In applying for her position with us, Tiffany expressed her desire to, “one day, become a nurse.” Following graduation, Tiffany went on to work as a Health Unit Coordinator and as a licensed Personal Care Assistant in the Cardiovascular Intensive Care Unit at St. Lukes Medical Center in Milwaukee, Wisconsin where she was born and raised.

We are happy to report that, in September 2003, Tiffany began her studies to obtain a Bachelors of Science in Nursing at Milwaukee, Wisconsin’s Cardinal Stritch University. She reports that with her classes from University of Minnesota, she is only 30 credits away from her degree and that special dream to become an RN! We wish Tiffany the very best in the pursuit of her nursing degree and as she finishes her first clinical experience this Spring.

Jenna Baumgartner

Jenna Baumgartner has distinguished herself as an undergraduate student worker here at the Center for Adolescent Nursing. Jenna hails from Cold Spring, Minnesota, attended Rocori High School, and enjoys softball and horseback riding. She is currently a sophomore here at the University of Minnesota and studying mass communications with an eye towards a future position in corporate public relations. Jenna joined us in September, 2002 and we have been privileged to have her diligent assistance in our office since then. Particularly notable is Ms. Baumgartner’s enthusiasm for doing the job right and her commitment to the completion of projects. Our office has come to rely on Jenna’s organized, detail oriented approaches to new tasks and a “can-do” attitude that gets the work done. We agree that Jenna will one day make a great public relations director for one very lucky company; during her studies, we enjoy her bright, energetic presence in our office and look forward to having her continued support in the coming years.
**CAN STUDENT CONGRATULATIONS!**

**Carie Braun, Ph.D., RN** (right) completed her doctoral degree in September 2002 with advisors Linda H. Bearinger, Ph.D., RN, FAAN (left) and Linda Halcón, Ph.D. M.P.H., RN. Dr. Braun has the distinguished honor of being the first Center for Adolescent Nursing doctoral graduate, however, four additional Center for Adolescent doctoral students are working hard to catch up with Carie.

Doctoral student **Carolyn Garcia** received an HRSA/MCHB New Investigator Research Dissertation Grant to support of her doctoral dissertation, “Immigrant Latino/a adolescent health and access to care, a focused ethnography.” Carolyn, nominated by the Minneapolis Area Chapter of the American Red Cross, was also voted the 2003 Women's Expo Volunteer of the Year. The award recognizes her volunteer work for that and other organizations, including her church, over many years.

Master's student **L. Leanne Magee** received the 2004 H. Judd International Graduate and Professional in support of her participation in the Minnesota Studies in International Development Project in Kenya, Africa.

Doctoral student **Lisa Martin-Crawford** received the Dora Stohl Fellowship in Nursing Leadership for 2004 to support her work on methods of researching health and wellness for Native Americans. Her primary interest is on the cause and prevention of Type II Diabetes in Ojibway adolescents.

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**DON'T MISS THIS YEAR'S YOUTH DEVELOPMENT SUMMER INSTITUTE!**

This Institute emphasizes effective strategies in cultivating youths’ capacities to become competent, confident, and caring adults. You’ll receive credible and incredible resources for promoting health and healthy youth development in rural, urban and suburban communities. Learn from University of Minnesota adolescent health faculty together with 18 - classroom teachers, community health nurses, health educators, clergy, governance and youth workers-whose ideas and experiences will help you to nurture and grow places and spaces for healthy youth development. (CEU Credits Available)

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**Center for Adolescent Nursing**
School of Nursing
University of Minnesota

**National Teen Pregnancy Prevention Research Center**
Division of General Pediatrics and Adolescent Health Medical School, University of Minnesota

**August 2-5, 2004**
Minneapolis/St. Paul, Minnesota

**Cultivating Capacity:**
Linking Youth Development, Health, and Learning
Do you enjoy working with adolescents? If so, consider a Master’s of Science (M.S.) or Doctorate (Ph.D.) with a major in nursing at the University of Minnesota, where you can focus your graduate work in adolescent health. Within the public health nursing area of study, coursework prepares nurses for lead adolescent health positions in management, education, clinical practice, policy development, research, and advocacy.

Students take interdisciplinary courses taught by faculty from the Schools of Nursing, Medicine and Public Health. Our faculty have expertise in both qualitative and quantitative research. We collaborate with practicum settings such as community-based teen clinics, county and state public health departments, and state and regional advocacy agencies. Both masters and doctoral students can work on ongoing local, national, and international research projects.

Completion of the master’s coursework in public health nursing with a focus on adolescent health can be accomplished in 16 months of full-time study. Doctoral study, including dissertation, takes an average of 4 years to complete. Students can, concurrently with our program, also earn a Master’s in Public Health (M.P.H.) or certification as a nurse practitioner.

For more information, contact Scott Harpin at the Center for Adolescent Nursing (612) 626-0606 or e-mail us at adolnurs@umn.edu. Through a grant from the Maternal and Child Health Bureau (HRSA, DHHS), tuition support is available for select graduate students.