Protecting Minnesota communities
MERET trains 10,000 for public health emergencies
Your preparedness check list
Sustainable preparedness

Research
Breaking down barriers to American Indian health
Ethics of clinical research

Creator of public health ‘wheel’ joins SoN to build policy center

New degrees
Doctor of nursing practice
Entry-level master’s

University of Minnesota School of Nursing
Dear reader,

As a member of the non-nursing general public, I claim some insight into how they think. I’ll venture to say that when most folks think about nursing they don’t go much beyond the one-on-one patient care model they know first-hand. This issue of *Minnesota Nursing* focuses on another side of the profession—one literally as broad as the whole world: public health nursing. It’s an area where SoN excels (*U.S. News & World Report* ranks our program 6th in the U.S.). You’ll sense the breadth and depth of our public health explorations as you read stories about health emergency preparedness, sustainable food sources and building new models of public health practice.

We are always pleased to hear that copies of *Minnesota Nursing* reach the general public as well as the health professionals who mostly populate our circulation list. This contributes to even broader awareness of how SoN faculty, students and alums improve health in our communities.

We invite you to use this publication with that mission in mind. Might you share this magazine with that bright niece or nephew who wants to make a difference in the world? Or consider dropping off a copy at a hospital nurses’ station where committed professionals are seeking further education to help them solve intractable clinical problems. Take one with you to your health clinic to leave for the community leaders, local politicians, journalists and opinion-makers who inevitably reach for reading material while they (patiently) wait. Need more copies? Contact us and we’ll be glad to send you what you need!

I think we all believe that the more people understand the perspectives and contributions of our school and of nurses in general, the more effective nursing can be in addressing the health issues of our day.

As the New Year rolls around, we thank you for your readership and participation in the SoN community. Send us your ideas and...alums, this is for you: send us your news! Meanwhile, best wishes to you and your loved ones for healthy, happy holidays.

Mary Pattock, Editor
Dear friends of the School of Nursing,

We invite you to explore this issue of *Minnesota Nursing*, where you will quickly see that fundamental—even monumental—changes are moving the school to its next level of excellence. Faculty, staff, students, alumni and friends are building on last year’s intense focus on mission and systems that prepare the way to further excellence in research, education, and practice. Let me summarize.

The school has reorganized to align with our faculty’s distinctive areas of expertise. All faculty and related staff now associate with one of four newly created co-operative units. They focus on adult and gerontological health; children and family health; integrative, global and public health; and systems, leadership, informatics and policy (see page 7). Not only do the co-ops relate to the school’s areas of distinction—but they also make bold statements about our vision and leadership in addressing transformational change in our health care system. Meanwhile, the centers operate in synergy with the co-ops, fostering research and development related to nursing knowledge and academic innovation.

We’ve made other exciting innovations as well. The last few months also saw the creation of the Office of Nursing Research; it houses outstanding expertise that supports the research mission. The Board of Regents approved two new academic programs: the doctor of nursing practice (DNP) and professional master’s in nursing (MN) degrees (see story on page 2). Both will launch in 2007. Significantly, they reflect several of the school’s commitments:

- to graduates anchored in ensuring state-of-the-science nursing care,
- the needs of our changing health care system,
- appropriately credentialed advanced practice nurses,
- celebration and accommodation of the growing cadre of people with bachelor’s, master’s, and doctoral degrees in other fields who are attracted to the nursing profession,
- workforce needs for Minnesota and the nation, and
- the emerging crisis of a dearth of nursing faculty.

We share, with the Academic Health Center and the University, a commitment to collaboration, the growth of interprofessional education initiatives and the enhancement of our faculty practice. This is a wonderful and productive synchronicity which we celebrate.

In short, it has been a very busy year, filled with internal growth and change, and characterized by the exercise of leadership in addressing our missions. Join me in celebrating a faculty, staff, student body, alumni and friends of the school who reflect the energy of a community on the move—a community committed to Explore...Engage...Excel!

As I enter my second year, I convey to you my deep honor for the opportunity to serve the school as its 10th dean.

Connie Delaney
Professor and Dean
The School of Nursing is offering two new graduate nursing degrees, both geared toward clinical practice: a doctor of nursing practice (DNP) and a master of nursing (MN), a second-degree program. Dean Connie Delaney says the new degrees will help the University propel the practice of nursing to higher levels of excellence.

"Adding these clinical programs will create an important dynamic, bringing together state-of-the-science research, education and practice," said Delaney. "It will enhance our ability to develop clinical leaders and it will contribute to the school’s environment as an exciting place to make discoveries that improve people’s health and well being."

The practice doctorate will complement the research-oriented PhD, preparing nurses for leadership as advanced practice nurses, clinical experts, health care executives, policy experts and informaticians. The new doctoral degree responds to needs, including the need to provide clinical care that is increasingly complex; the need to ensure patient safety, especially in hospitals; the need for health care systems to share patient information efficiently and confidentially; the need to coordinate vast systems of equipment, information and referrals. Employers are interested in nursing’s systems approach, its holistic focus on coordinating patient care, and on bringing those approaches to bear at a high level in order to address complex issues.

Nursing, like virtually all health disciplines, including pharmacy, psychology, physical therapy and dentistry, is finding that higher levels of professional preparation are needed in today’s increasingly complex health care environment, partly because of technology and other scientific innovations and partly because people now live longer and have more complex health problems.

The DNP curriculum will include both Web-based and face-to-face instruction, so it will be accessible to distance learners at the same time it allows students to get together in person at least once a semester.

ENTRY-LEVEL MASTER’S GOOD FOR GRADS, THE PROFESSION AND THE PUBLIC

The new master’s program also responds to changes in health care, especially the nursing shortage, by offering a way for people who already have bachelor’s, master’s or doctoral degrees in other fields...
to enter nursing as a second career. (The MN replaces the School’s post-baccalaureate program, which offered a certificate but not a degree). As the first professional degree, it is an attractive alternative to people with rich and varied education and experience who want to become nurses but do not want to obtain another undergraduate degree. Their knowledge and perspectives will enrich an already holistic profession.

The MN program meets national standards for pre-licensure curriculum for professional nursing, so that graduates will be eligible to take the RN licensing exam. Designed to prepare nursing leaders, the curriculum includes a course on informatics and a capstone clinical project focused on leadership. Intensive and full-time, the program will require 16 months to complete. Graduates will have the foundation necessary to pursue either the DNP or PhD in nursing.

CONSISTENT WITH NATIONAL RECOMMENDATIONS

The approach the University is using to address both the nursing shortage and quality of care issues—that is, increasing the number of graduates of bachelor’s, master’s and doctoral programs as opposed to graduates of two-year associate degree programs—is consistent with recommendations from numerous national health policy groups, including the Pew Health Professions Commission, the American Academy of Nursing and the American Academy of Colleges of Nursing. The Institute of Medicine, in its report, *Health Professions Education: A Bridge to Quality*, recommends that, “All health professionals should be educated to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches, and informatics.”

APPLY NOW ONLINE

The first time it is offered, in January 2007 (spring semester), the DNP will be a “completion” program, enabling students who already hold a master’s degree to quickly earn the DNP. (Applications were due earlier this fall.) Then, starting in the fall of 2008, people with a BSN or higher nursing degree may apply.

The MN program will be offered in the fall of 2007; applications are due December 15, 2006.

More information and application forms are available on the School of Nursing Website, www.nursing.umn.edu.
Professor Linda Bearinger (left) has been named the School’s first Director of PhD and Post-doctoral Studies. Creation of the new position supports the School’s—and the University’s—intensified commitment to becoming one of the world’s premiere research-driven universities. Assistant Professor Linda Lindeke is the new Director of Graduate Studies.

Commencement showcased a new dimension of our school this May: A traditional Native American blanketing ceremony marked the graduation of master’s students Sara Schultz, Sheryl Hill and Winona Begay. They are the first students to graduate under SoN’s Native Nurses Career Opportunity Program (NNCOP).

The ceremony, deeply rooted in Native American life, expresses gratitude and honors significant life achievements. The three graduates each received a Chief Joseph-patterned blanket, symbolizing strength and bravery.

NNCOP is a scholarship program offered by SoN in collaboration with the U.S. Department of Health and Human Services—Indian Health Services. It offers scholarships to American Indian/Alaska Native registered nurses pursuing their master’s of science degree in nursing.

For more information about NNCOP, visit www.nursing.umn.edu/NNCOP.
Students in the undergraduate public health nursing course, Health Care of Populations, received a novel assignment last fall: Use your artistic talents to communicate public health concepts learned in the course.

Assistant Professor Laila Gulzar, PhD, RN, MSN, MPH, and Teaching Specialist Scott Harpin, MS, MPH, APRN-BC, introduced the assignment, “I Am Public Health,” as a way to integrate the liberal arts with nursing. Their goal was to help the future nurses get in touch with their own feelings about human needs, feelings and responses.

The outcome was an amazing demonstration of creative energy: poetry, stories, drawing, sculpture, scrapbooks, a quilt, a cross-stitch figure of a public health nurse, dance, music and even a rap-style musical slide presentation. Many students said the experimental assignment was one of the best of the course.

Grading criteria included evidence of use of in-depth thought processes, analysis and synthesis; a significant portion of the grade was assigned to use of creativity and creative presentation.

“...So as an artist uses clay, or chalk, or paint to make the masterpiece, a nurse uses the living body, the human spirit. When nurses work, our medium is the human life—our masterpiece is improving the health and well being of that human life. Is there any work greater than that? I challenge anyone to convince me otherwise.”

—Excerpt from May 2006 commencement speech, Elizabeth Hutter, BSN ’06

“ART + NURSING = “I Am Public Health”

Informatics debuts as requirement

2006 is the first year informatics will be a curriculum requirement for all School of Nursing students in undergraduate and professional programs. Learn more about informatics at www.nursing.umn.edu/inaugural.
Jenna Baumgartner was hired as principal office and administrative specialist for the Center for Adolescent Nursing. Jenna had previously worked for the Center as a student worker.

Arlene Birnbaum joined the School of Nursing as the Densford Center's administrative coordinator. She previously worked in a variety of staff and line roles at Minnegasco, the Federal Reserve Bank and Second Harvest Heartland. She enjoys writing, gardening and spending time with family and friends. She has a baccalaureate degree from the University of Pennsylvania, and a master's degree from the University of Massachusetts.

Carolyn Garcia, PhD, MPH, RN, assistant professor and Densford Clinical Scholar, joins the faculty in the Integrative, Global and Public Health Cooperative. She recently completed a post-doctoral fellowship in the Center for Adolescent Nursing. Her area of research is the health and well being of immigrant Latino adolescents and their families; she describes her research as community-based, and participatory and ecological—looking at family, culture and existing assets.

Linda Olson Keller, MS, BSN, APRN, came to SoN from the Minnesota Department of Health to fill a new position, senior research scientist in public health nursing policy and partnership. She engaged in a cooperative agreement funded by the Center for Disease Control to organize national priorities for public health nursing.

Catherine L. Morrison is the school’s new director of outreach and public engagement. Most recently, Catherine was corporate relations manager at the Science Museum of Minnesota. She holds a bachelor of arts degree in journalism from Drake University.

Kari Schuster joined the school’s Office of Student Services in May 2006 as an executive office and administrative specialist.

Gale Shea joined the School of Nursing as the director of student and career advancement services. Gale comes to us from the School of Dentistry; she has been with the University for more than 20 years.

Thomas Smith joined the Office of Student Services as student services assistant in August 2006. He previously worked in the student services area at Hamline University.

Fang Yu, PhD, RN, CRNP, joined the School of Nursing as an assistant professor in the Adult and Gerontological Health Cooperative. Dr. Yu comes to us from Pennsylvania State University, where her research focused on the impact of aerobic exercise in community-dwelling older adults with mild or moderate Alzheimer’s disease.
More powerful than a research lab, livelier than a classroom, able to address health care issues in three different ways…it’s SoN’s new path to innovation!

Starting this fall, SoN is organized to muster the combined forces of research, education and practice/service to focus on four health care themes. “It’s a powerful dynamic,” says Dean Connie Delaney. “Because we are a land grant university, and both a top research and teaching institution, we are poised to approach health issues from all three perspectives. This change will help us further realize the true power of a research-driven school.”

Under the new structure, all faculty participate in one of four cooperatives, each of which is supported by a chair, program associate and program assistant.

**Children and Family Cooperative**
Chair (l): Melissa Avery, PhD, RN, CNM, FACNM
Program associate (r): Deanette Schmidt
Program assistant (c): Coral Sampson

**Adult and Gerontological Cooperative**
Chair (l): Christine Mueller, PhD, RN, BC, CNAA
Program associate (c): JanMarie Lundgren
Program assistant (r): Meg Clemens

**Integrative, Global and Public Health Cooperative**
Chair (c): Linda Halcón, PhD, RN
Program associate (r): Cindy Traxler
Program assistant (l): LaRayne Kuehl

**Systems, Leadership, Informatics and Policy Cooperative**
Chair (c): Kathleen Krichbaum, PhD, RN
Program associate (r): Kitty Cheesebrow
Program assistant (l): Pat Minor
Soon after an apparent chemical explosion last July disrupted the annual Bonanza Days festival in Virginia, Minn., bodies started arriving at Virginia Regional Medical Center. At least 20 people had been injured. Some were having trouble breathing. Others—including a police officer—had open fractures that were bleeding profusely. Three were dead on arrival.

Son teaching specialist Jeanne Pfeiffer was among the first receivers called upon that day to triage at a special decontamination tent set up outside the hospital. Once Pfeiffer had donned protective HAZWOPER (Hazardous Waste Operations and Emergency Response) gear, she and others began sorting and tagging victims, using a color-coding system to assign treatment priorities.

“We had to assess the crowd and make decisions in under 20 seconds,” Pfeiffer says.

Victims with multiple penetrating injuries—like the policeman, who was conscious—got red tags, signaling the need for immediate medical attention; those who appeared well enough to wait got green or yellow tags, and those with no pulse got black tags.
The work was stressful and exhausting, but fortunately, the actual number of casualties at the end of the day was zero. That’s because this particular disaster was only a drill. The “victims” were either mannequins or volunteers—some of them local high school students—who were instructed how to role-play the part of people in pain and “moulaged” (realistically made up) to look as if they were actually injured and bleeding.

Purposes of the drill were to train first receivers how to use personal protective gear and give them practice in triaging and decontaminating victims of a mass casualty. Trainees included anyone expected to play a role in setting up and running a hospital decontamination zone. They ran the gamut from ER nurses and physicians to building engineers and safety and security workers.

“They put us in a scene where we could actually feel what it’s like,” Pfeiffer says. “It’s noisy, you can’t hear, you’re not getting good direction from police and fire, and the personal protective gear is hot.”

A similar mock-disaster drill took place at a Waconia, Minn. workshop, in August. Both were sponsored by the Minnesota Emergency Readiness Education and Training (MERET) program.
MORE THAN 4,000 TRAINED IN YEAR ONE

Last year Assistant Professor Carol O’Boyle, PhD, RN, won a $2.7 million federal grant on behalf of SoN and the School of Public Health to establish MERET, a statewide effort to help communities prepare for public health and bio-terrorism emergencies.

O’Boyle brings a unique scholarly background to the project, which aims to improve the way health-care disciplines and various organizations and jurisdictions work together in health emergencies. A public health nurse, O’Boyle has researched nurses’ response to bioterrorism, international public health and infection control and infection control staffing in U.S. health care facilities.

“We thought we were being wildly optimistic when we set our training goal at 10,000—that’s about 10 percent of the Minnesota health-care workforce,” says O’Boyle. “But we reached more than 4,000 in Year One, and we’re going to hit 8,000 next year.”

Debra Olson, MPH, RN, of the School of Public Health’s Centers for Public Health Education and Outreach, is co-investigator on the MERET grant. She earned her master’s in public health nursing at the U of M and is an adjunct professor at SoN. A particular interest of hers is innovative teaching methods that employ new technologies and involve distance learning—and MERET certainly reflects that expertise.

In addition to the mock disaster drills, training for nurses, physicians, and other health-care professionals has included:

- ninety-minute Emergency Readiness Rounds on current issues and controversies in emergency readiness and response (for example, allocating a limited supply of ventilators and related ethical issues);
- workshops on communicating during a crisis; and
- train-the-trainer workshops on how to design, conduct and evaluate tabletop exercises for public health preparedness.

MERET reaches an even wider audience by providing education on demand, via live and archived Web casts as well as interactive Web-based courses. Online modules, available on the MERET Web site (www.meret.umn.edu) cover topics ranging from multiple drug resistant organisms to the design and maintenance of airborne infection isolation rooms.

“We know from our work educating nurses that as much as people enjoy and appreciate in-person, face-to-face training, family and job obligations and distance keep many people from attending,” O’Boyle says. “That’s why we made sure to include a Web component.”

Also available on the Web site is “The Hospital Community Education Avian Flu Tool Kit,” complete with a PowerPoint presentation, a training script, and posters that MERET developed in partnership with the Minnesota Hospital Association and the Minnesota Department of Health.

ADDRESSING THE FEARS OF HEALTH-CARE WORKERS

Another MERET goal is to address the psychosocial and emotional needs of health-care workers.

“No one else is doing this,” says O’Boyle, who has been examining the concerns of health-care workers for years. In 2003, she and two colleagues from SoN—Assistant Professor Cheryl Robertson, PhD, MPH, RN, and SoN doctoral student Molly Secor-Turner, MS, RN—conducted focus groups with nurses from three metropolitan hospitals designated as public health emergency receiving sites.

Asked to list their top concerns about working during a bioterrorism event, participants said they feared working in unsafe, chaotic environments without a clear chain of command or a guarantee that nurses and their families would be cared for if they got ill as a result of exposure to infected patients. They even said they were afraid that during a crisis they might be assaulted for their personal protective equipment and other scarce resources.

Their main fear is chaos, says O’Boyle. “That’s been the first word out of everyone’s mouth in the focus groups.”

She says having information about the specific fears and concerns of hospital employees is therefore an essential part of any health care readiness plan. Given that the fears and concerns are likely to vary from site to site, she recommends that hospital and clinic administrators survey their employees to be able to target supports and interventions.

Working with a behavioral epidemiologist at CDC, Ronda Sinkowitz-Cochran, O’Boyle is refining the survey instrument she used in 2003. Already, it has been administered via the Web to 200-plus nurses in Minnesota and other states.

### HELP FOR “EVERYDAY” DISASTERS, TOO

To hear participants talk, the training is nothing if not practical: “Man, what a mess. Welcome to reality.” Some who attended the Waseca workshop said that as they tried to deal with “patients” in the midst of the noise and simulated chaos of the triage exercise, their hands were actually shaking. They talked about the importance of communicating cross-discipline: A “line” may mean an IV to a nurse or doctor, but something else to a firefighter and something else again to a police officer. They learned techniques that anticipate the difficulty of performing even routine tasks like counting patients in a disaster area where no one is standing still. Safety, they found out, refers not only to expected problems like contamination, but to situations they’ve never thought about, like dealing with unruly patients reacting out of panic, injury… or even ill intent. They learned rubrics for “what to do when you don’t even know what you’re dealing with.”

But participants find the training particularly useful because it does more than prepare them for the avian flu or terrorist attack that may never come; they say it will help them deal with more common health challenges. Said Margo Bjork, emergency coordinator at Sibley Medical Center in rural Arlington, Minn., “We’re not expecting bio-terrorists in our area, but we do have meth labs, ammonia tanks, tornadoes that could hit a food plant, planes spraying crops…” Molly Delaney, a Fairview nurse from the metro area, said she appreciated the decontamination training because “We have a lot of 21-year-olds doing 21 shots on their birthdays, and we don’t know what else they might have on them.”

### UNIQUE NEEDS OF PREGNANT WOMEN

In Year Two, which officially began in September, MERET will tailor its education programs to the needs of rural, isolated, and medically underserved populations.

Already MERET is collaborating with tribal governments on a seminar for tribal emergency preparedness coordinators. Associate Professor Linda Lindeke, PhD, RN, CNP, who is MERET’s expert on pediatric issues, is leading an intervention project for local schools, including a session for school nurses in March and a series of
Pediatric Preparedness Rounds this fall. Efforts are also underway to address specific needs of immigrant, elderly, disabled, and pediatric patients.

One particularly vulnerable group, O’Boyle discovered, is women who are in late pregnancy, labor, and early post-partum. Their needs and the needs of their infants have been almost completely overlooked in existing readiness plans, she says.

To address such critical questions as where babies should be delivered and by whom if a disaster were to wipe out Minnesota hospitals, O’Boyle has applied for supplemental one-year funding of $400,000.

“We have the support and commitment of the American College of Nurse Midwives and the American College of Obstetricians and Gynecologists, among others,” says O’Boyle, “and people are ready to help us develop modules in English and Spanish.”

LEARNING FROM 9/11 AND KATRINA: EXPAND THE SYSTEM

“A powerful change has occurred in America,” O’Boyle says. “September 11 showed us we were vulnerable to an unconventional attack, and Hurricane Katrina showed us that our system could fail. We were all stunned to see a major American city deteriorate into anarchy.”

In Minnesota, a substantial surge in patients would clearly strain the capacity of the health-care system to provide care, especially in rural and isolated areas. To expand the available workforce, MERET is developing content, materials, and tools health-care workers can use to train lay and professional volunteers to mobilize quickly and assist in the event of a bioterrorism attack or other public health emergency. MERET aims to reach trainers from 75 percent of Minnesota’s counties by the end of Year Three.

O’Boyle hopes to create incentives for agencies to continue taking advantage of MERET’s many training and education opportunities. “There’s always a bit of tension,” she says, “because money used for preparedness is not available for infrastructure, wages and other resources.”

Incentives available this year will include academic credit and CEUs for participation in Emergency Readiness Rounds and other courses. O’Boyle is also working with the Minnesota Department of Health to develop criteria for awarding certificates that would publicly recognize the readiness of health-care facilities whose employees have participated in emergency preparedness training.

How Prepared Are You and Your Hospital?

Use the resources available free on the MERET Web site to prepare yourself and your facility for an emergency: www.nursing.umn.edu; click on MERET.

The site currently offers:

- Schedule for Emergency Readiness Rounds (one will be a Web cast)
- Online course modules
- Recordings of past presentations (available for MP3 download)
- Avian flu toolkit for educating the public

CEUs and certificates are awarded upon completion of all courses.
Create a **STAY** kit, **GO** kit, and **CAR** kit

These steps will guide you through the process of creating your own personalized kits of emergency supplies. By filling out your own daily inventory and selecting items from master lists of supplies, you can create kits that fit your own unique needs.

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<th>STEP</th>
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<tr>
<td>1. Complete the <em>A Day in Your Life</em> inventory</td>
<td>This is a log of your daily activities and the supplies you use when you are doing these activities. This will help you identify what <em>you personally</em> need in order to be prepared in case of emergency. Find it at <a href="http://www.meret.umn.edu">www.meret.umn.edu</a></td>
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<td>2. Complete the <em>Master Supply Checklist</em></td>
<td>This is a master checklist of recommended emergency supplies that you can choose from. Add the supplies you identified on the <em>A Day in Your Life</em> Inventory to this checklist. This checklist will help you identify which supplies you already have and which supplies you need to get. Find it at <a href="http://www.meret.umn.edu">www.meret.umn.edu</a></td>
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<td>3. Assemble your Stay Kit</td>
<td>A <em>Stay Kit</em> is a list of supplies you need for <em>2 weeks at home</em>. Gather the items you indicated on the <em>Master Supply Checklist</em> for your Stay Kit.</td>
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<td>4. Assemble your Go Kit</td>
<td>A <em>Go Kit</em> consists of supplies you need for <em>3 days away from home</em>. These supplies should be packed in a backpack or rigid plastic container, ready to grab at a moment’s notice as you leave your house. Using the <em>Go Kit Master List</em> as a guide and adding items from the <em>Master Supply Checklist</em>, gather the items for your <em>Go Kit</em>.</td>
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<td>5. Assemble your Car Kit</td>
<td>A <em>Car Kit</em> should remain in your vehicle <em>at all times</em> for emergencies on the road. It should be packed in a backpack or rigid plastic container. Using the <em>Car Kit Master List</em> as a guide and adding items from the <em>Master Supply Checklist</em>, gather the items for your <em>Car Kit</em>.</td>
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<td>6. Track your supplies</td>
<td>You should maintain an inventory of what items, and how many of each, are in each kit. You should also develop a plan for rotating supplies in and out so you don’t end up with items in your kits that have outdated expiration dates.</td>
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Nursing and public health emergency preparedness experts assert that, in a large-scale emergency situation, transportation interruptions are a distinct possibility and may result in severe food shortages within a matter of days. I hope that we, as nurses, will challenge ourselves to be actively involved in encouraging and developing sustainable and local food sources to assist communities prepare for emergencies and minimize their adverse effects.

In the past 50 years we, as a populace, have become increasingly removed from our food sources. We can recall, however, the Victory Gardens of World War II, when over twenty million urban and rural Americans responded to the national food shortage by planting small gardens that supplied nearly half of the vegetables produced in the US. There is a grassroots local food movement happening today, but it must rapidly expand in order to serve as the basis for a sustainable emergency food network. Some of the elements of this movement include regional sustainable farming groups, community supported agriculture shares (CSAs), farmers’ markets and metropolitan buying clubs that connect urban/suburban families with individual farmers, and school lunch programs that are returning to home-cooked and locally grown food. In addition to the urgent emergency preparedness issues, there are other reasons that nurses should become educators and advocates for sustainable food sources. Some of these include:

- Minimized exposure to harmful pesticides, herbicides and hormones in food from plants and animals;
- Better nutritional value from organic produce and from animals allowed to feed on their own natural food—grass fed beef, for example;
- Reduced dependence on fossil fuels as a result of eliminating lengthy travel from farm to consumer and reduced need for large-scale agricultural equipment;
- Buffering of our food supply vulnerability due to crop diversity; and
- Increased connectedness in communities and neighborhoods that occurs naturally in the process of procuring locally produced food.

What can nurses do to get involved in this effort? First, find some local/regional food sources for yourself and your family. One excellent guide is “Local Foods: Where to Find It, How to Buy It,” available from the Minnesota Institute for Sustainable Agriculture at the University of Minnesota (www.misa.umn.edu). Then talk to other nurses about how to fit your action ideas into practice in your particular settings.
The first Native American to earn doctoral degrees in both nursing and law, Margaret Moss thinks she now has everything she needs to start breaking down the barriers keeping American Indian elders from seeking and getting proper health care.

Her passion for working with older adults dates back to her first job in a nursing home in Pullman, Wash., where she worked as a nurse’s aide while attending Washington State University and pursuing a BS in biology, the first of her many degrees.

After that experience, Moss became an RN, worked at the VA in Portland, Oreg., and then transferred to the Indian Health Service in Santa Fe, where she noticed a troubling trend. Unlike most older adults, who may not want to go to a nursing home but do if and when they have to, American Indian elders were refusing to seek care. Instead, they would return to the reservation, and eventually die there. “Why won’t they go seek care?” The question nagged at Moss.

As a student in the master’s program at the New Mexico campus of the University of Phoenix, she developed a business plan for an adult day care service for Pueblo elders in the Albuquerque area, but ultimately decided that would only be a Band-Aid for a few tribes.

In order to have national impact, she decided, she would have to get a doctorate. Because there was no doctoral program in nursing in New Mexico, she packed up and moved to Houston, where she enrolled at the University of Texas–Houston, Health Sciences Center. For her dissertation, she wrote an ethnography on aging issues affecting the Zuni, a traditional Pueblo tribe. (The manuscript is in revision for publication at the University of Nebraska).

“What I found was—for this particular tribe, anyway—they needed to do a lot of very traditional things, and if they didn’t do them, they thought it would be taboo,” she says. For example, the Zuni traditionally get up early and go outside to pray, but when the elders tried to do that in nursing homes, they set off alarms. The same thing happened when they tried to burn food before their meals, a ritual for sending prayers to their ancestors with the rising smoke.
Moss saw clearly that the mainstream nursing homes in Albuquerque weren’t set up to accommodate the Zuni people—answering her question from five years earlier about why elders don’t seek care.

How to improve health care for Native American elders is an issue she has continued to study since joining the faculty at the University of Minnesota in 2000.

“Right now there’s a big focus on rebalancing from nursing homes to home- and community-based long-term care,” Moss says. “Consequently, 32 states have moratoriums on adding more nursing home beds, because they’re saying, ‘There are enough existing nursing home beds; let’s put the resources in the community instead.’ The intent is good, because nobody wants to be in a nursing home, but they are effectively taking away opportunities for elders to get care on their own reservations.”

There are roughly 300 reservations and 560 tribes in America, Moss says, but only 12 nursing homes on these reservations. Thus, state laws cut off reservations from ever having nursing homes.

“I had noticed that in nursing school, through all three levels, they talked about barriers to health and access to health care, and the focus was always on geographic barriers, plus psycho-social barriers such as economic status, racism and perceived racism. What I was finding out when I was focusing on aging was that legal blocks were often the basis for the other ones.”

That realization is what led her to enroll in law school at Hamline University in Saint Paul, despite having a full plate at the U of M, plus a husband and four children at home. (In addition to teaching, she and Dr. Sue Henly coordinate the Native Nurse Career Opportunities Program, which provides scholarships to American Indian and Alaska Natives interested in pursuing their master’s degree.) When Moss, an enrolled member of the Three Affiliated Tribes of North Dakota, received her Juris Doctoris degree last spring, her unique qualifications did not go unnoticed. Governor Tim Pawlenty recently appointed her to a three-year term on the Minnesota Board of Aging, and in December, she attended the White House Conference on Aging on behalf of the National Congress of American Indians.

“I think that law and nursing really do go together very well,” she says. “Most faculty have a population they look at, and an area they look at. If you look at American Indians and look at aging, you have a highly regulated population and a highly regulated area of health. That means you really have to understand the law—state, federal, and tribal law, aging policies, Medicare, Medicaid, and so forth—as well as all of the nursing implications.”
JOAN LIASCHENKO

EXPLORING THE ETHICAL TENSION: NURSE OR RESEARCHER?
Although nurses coordinate the majority of clinical trials, there is virtually no research on the ethical concerns they confront on the job, says Joan Liaschenko, RN, PhD, an associate professor in the School of Nursing and, since 2001, a member of the U of M’s Center for Bioethics.

Liaschenko, a nationally recognized expert on nursing ethics, applied for a grant to help fill that void.

The project, “Nurses: Research Integrity in Clinical Trials,” was funded by the U.S. Department of Health and Human Service’s Office of Research Integrity, with support from the National Institute for Neurological Disorders and Stroke and the National Institute of Nursing Research.

Beginning in 2002, Liaschenko and two co-investigators—Dr. Anastasia Fischer from the University of San Diego School of Nursing and Dr. Debra DeBruin, one of Liaschenko’s colleagues at the Center for Bioethics—conducted focus groups to identify specific ethical issues encountered by nurses who conduct clinical trials and find out how they handle them. Participants included 37 nurses, representing a wide range of education and experience in the Midwest and on the West Coast.

Liaschenko notes that most of the research so far has focused on the principal investigator (PI) and the protocol design. “Given that clinical trials are the gold standard for the establishment of clinical knowledge in medicine, and that nurses do the majority of the work that constitutes a clinical trial, we thought it was very important to look at these groups.”

The findings, submitted for publication this fall, indicate that nurses do face ethical challenges and often struggle with how best to resolve them.

“A huge issue is the inherent tension between the person as a patient getting treatment and as a subject in a research study,” Liaschenko says.

“The myth out there is if one gets the protocol design right, and the science is right, somehow this tension takes care of itself. The design of a protocol is not sufficient, though, because there will always be interpretation that’s required. In other words, you may have a protocol that says to draw the patient’s blood, and if the value is x, the patient stays in the study, but if it falls outside a certain parameter, the patient has to come off the study.”

When the results are borderline, nurses find themselves torn between following the established protocol for the clinical trial and providing the best care for the participants. For example, a nurse might sense that a patient is too ill to continue with the research, but drawing the patient’s blood a second time for verification would violate the protocol.

“Nurses are selected for this work because of their expertise and clinical knowledge,” Liaschenko says, “but then they’re supposed to deny their identity as nurses. They’re told, ‘You’re a researcher now,’ but their bottom line is, ‘I’m a patient advocate.’”

Nurses in the focus groups reported that when faced with an ethical dilemma the most significant factor influencing their decision-making was the quality of their relationship with the PI. “If that was good, then most of the problems were worked out,” Liaschenko says, “but it was more difficult to manage the tension and the work if they didn’t have good relationships with the PIs.”

The tension between research and treatment won’t go away—and shouldn’t, she says—but there are ways to reduce it. As surprising to her as the lack of research on ethical issues facing nurses in clinical trials is the lack of concern internal review boards (IRBs) appear to have about who will coordinate various studies and whether or not there will be adequate personnel to handle the work.

“Coordinators are never considered when a project goes before an IRB,” Liaschenko says. “They don’t ask about coordinators, yet coordinators do the work, and nurses find that very stressful.”

Liaschenko’s recommendations include raising awareness about the critical role coordinators play in ensuring research integrity. The data from this project will serve as a basis for future research on the adequacy of existing policy and guidance for research involving human participants.

In the meantime, Liaschenko is co-investigator on a grant looking at common practices in gene therapy clinical trials, and is researching end-of-life issues with critical care nurses. She is also teaming up with one of her former students, Mary Regan, a new faculty member at SoN, to study how nurses might drive caesarian sections and related ethical issues.

This year, in addition to ethics classes for master’s and doctoral students, Liaschenko will teach a new course offered by the Center for Bioethics: Social Construction of Health and Illness.
On the table in her office on the sixth floor of Weaver-Densford Hall, Linda Olson Keller, MS, BSN, APRN, BC, keeps a rock with a hole through the middle as a reminder that anything can happen if you work long enough and hard enough. In the few months she’s had to unpack boxes and hang pictures, she’s also surrounded herself with quotes that represent her outlook on life.

“If everything you’re doing is working, you’re not taking enough risks,” says a quote on her bulletin board. “Leap and the net will appear,” says a tile by her desk. The quotes help explain why Olson Keller, Minnesota’s chief public health nurse until February, gave up her title and 20 years of experience at the Minnesota Department of Health to join the School of Nursing as its new Senior Research Scientist in Public Health Nursing Policy and Partnerships.

Ultimately, what drove her decision to switch jobs was the opportunity to serve as director for a project funded by the Centers for Disease Control—“Enhancing the Capacity of Public Health Nursing through Partnerships: ASTDN, CDC and Partners’ Cooperative Agreement.” (ASTDN is the Association for State and Territorial Directors of Nursing.)

Olson Keller had helped write the proposal, and when no one else stepped forward to serve as the project director, she decided perhaps she should do it herself. By bringing the project to the University, where she had been an adjunct professor for many years, she also saw an opportunity to lay the groundwork for a Center of Public Health Nursing.

“The first step is to leap in,” she says. Under Olson Keller’s leadership, the partners in the Cooperative Agreement have begun documenting the impact of the current nursing crisis and developing an evidence-based model of the ideal public health nursing practice in the United States. Other outcomes will include a position paper defining the unique contributions of public health nursing and a recommendation for establishing the necessary ratio of public health nurses to the population in a given community.

“One half of the states currently have a state public health nursing director position,” Olson Keller explains. To demonstrate the difference that nursing leadership at the state level makes on public health nursing practice, Olson Keller has been assessing the current status of leadership in each state and gathering testimonials from state health officials. She has also been collecting stories from public health nurses about how, in their experience, public health nursing contributes to achieving CDC’s goals.

She brought her first batch of stories to show CDC officials in July. In March, she will return to provide another project update.

Recognized nationally as a leader in nursing, Olson Keller is best known as the co-creator, along with Sue Strohschein, of the Public Health Intervention Wheel.
Strohschein is a public health consultant to the Minnesota Department of Health. A model used throughout the United States in training and textbooks, the Wheel defines what nurses do, not by the setting—such as a school, a hospital, or a jail—but by which of 17 interventions they use, ranging from case management to community organizing. Olson Keller’s expertise is in high demand, and she has become a familiar speaker and trainer from Atlanta to Alaska since her Wheel concept was published in 1988.

As anyone who has attended one of her presentations knows, Olson Keller uses stories, videos, pictures, toys, and sometimes even craft projects to demonstrate public health nursing concepts. For example, at a recent training session for a local health department, she set out a variety of art supplies, and then instructed participants to create a picture showing what would happen if they didn’t achieve their goals.

“One public health nurse, who was working on Avian flu, used feathers in her drawing,” Olson Keller says. “Another cut a hole in the paper and showed kids falling through the cracks.” The point, she explains, is to help nurses get better at using words and pictures to tell the public health story, which is critical to building support for improving public health nursing leadership and infrastructure.

Olson Keller became enthralled with using personal narratives—not just data—to influence health-care policy and practice while in the Robert Wood Johnson Foundation Executive Nurse Fellows Program. The catalyst was a presentation she attended, “Storytelling as Best Practice,” by Andy Goodman, an L.A.-based communications consultant.

In fact, it was stories that got Olson Keller interested in nursing in the first place. The oldest of seven children, she grew up on a dairy farm near Kasson, Minn. (about 100 miles southeast of the Twin Cities), where she read about the Frontier Nursing Service and thought that someday she, too, would ride around on horseback caring for the residents of Appalachia.

Although the Frontier Nursing Service was full when she eventually applied, one of her professors at St. Olaf College in Northfield, Minn., helped her find an internship as a public health nurse in Carey County, Miss. “From then on, I knew for sure I’d always be a public health nurse,” she says. “I loved the work, and I loved the people. I still do.”

The mother of two grown sons, Olson Keller lives in Eagan with her husband of 33 years, Dave, and their pet black lab. This fall, she is teaching courses in advanced public health nursing and leadership.

“It’s a tremendous opportunity to be here,” she says. She’s glad she made the leap to the U, and what happens next with the Cooperative Agreement and her goal of establishing a Center for Public Health Nursing will be … another story! Stay tuned!
Linda Bearinger, PhD, RN, FAAN, professor, has been selected to serve on the Institute of Medicine’s Committee on Adolescent Health.

Linda Chlan, PhD, RN, associate professor, was awarded the School of Nursing Mission Advancement Award.

Joanne Disch, PhD, RN, FAAN, was elected Chair of the AARP National Board of Directors. She will serve a two-year term.

Laura Duckett, PhD, MPH, RN, associate professor, received the A. Marilyn Sime Faculty Research Fellowship for 2006–2008.

Mary Findorff, PhD, RN, research associate, received the 2006 Aetna Susan B. Anthony Award for Excellence in Research on Older Women and Public Health from the American Public Health Association.

Melissa Frisvold, MSN, CNM, teaching specialist, received the Excellence in Nursing Education Award from the School of Nursing Alumni Society.

Ann Garwick, PhD, RN, LP, LMFT, FAAN, professor and Center for Child and Family Health Promotion Director, received the St. Olaf College Distinguished Alumni Award. She was also appointed to the Advisory Board of the Controlling Asthma in American Cities Project.

Joe Gaugler, PhD, assistant professor, was awarded the 2006 Mature Media Award for his book, Promoting Family Involvement in Long-Term Care Settings: A Guide to Programs that Work.

Linda Halcón, PhD, RN, associate professor, was awarded the School of Nursing Mission Advancement Award.

Linda Herrick, PhD, director of undergraduate studies in Rochester, received a Midwest Nursing Research Society Service Award for her work on its board of directors.

Madeleine Kerr, PhD, associate professor, received the Honor a Researcher Award from the research section of Midwest Nursing Research Society Public Health/Community Health/Nurse Managed Centers.

Martha Kubik, PhD, MSN, RNC, assistant professor, received a School of Nursing Mission Advancement Award.

Marsha Lewis, PhD, RN, associate professor, received a School of Nursing Missions Advancement Award.

Mary Jo Kreitzer, PhD, RN, FAAN, associate professor, was selected to serve on the editorial board of the American Journal of Nursing.

Margaret P. Moss, DSN, RN, JD, assistant professor, is the first Native American to hold both a doctor of nursing and a Juris Doctoris degree, which she recently earned from Hamline University.

Christine Mueller, PhD, RN, CNA, associate professor, was named the 2006–2007 University of Minnesota Fesler-Lampert Chair in Aging Studies.

Susan O’Connor Von, DNSc, RNC, assistant professor, received the School of Nursing Public Service Award.

Cheryl Robertson, PhD, MPH, RN, assistant professor, was awarded a School of Nursing Mission Advancement Award.

Muriel B. Ryden, PhD, professor emerita, received the Distinguished Alumni Award from the University of Minnesota College of Education.

Renee Sieving, PhD, MSN, RNC, associate professor, was awarded a School of Nursing Mission Advancement Award.

Diane Treat-Jacobson, PhD, RN, assistant professor, was named president of the Society for Vascular Nursing.
Becky Ahlstrom received a Creating Careers in Geriatric Nursing Scholarship Award, funded by EverCare.

Ben O. Akhuetie-Oni received a Creating Careers in Geriatric Nursing Scholarship Award, funded by Park Nicollet Health Services.

Linda Anderson received a Creating Careers in Geriatric Nursing Scholarship Award, funded by the Minneapolis VA Medical Center.

Mary M. Black, MSN, RN, was named a John A. Hartford Foundation Pre-doctoral Scholar for September 2006–August 2008.

Momodou Ceesay received a Creating Careers in Geriatric Nursing Scholarship Award, funded by The John A. Hartford Foundation and Aspen Medical Group.

Terry Ann Clark received the 2006–07 University of Minnesota Graduate School Doctoral Dissertation Fellowship.

Jenna Coleman won second place in the Graduate Poster category at the 2006 Midwest Nursing Research Society conference. She was also selected to present this research at the University of Minnesota Undergraduate Research Symposium.

Megan Danielson received a Creating Careers in Geriatric Nursing Scholarship Award, funded by Park Nicollet Health Services.

Abejide Fawole received a Creating Careers in Geriatric Nursing Scholarship Award, funded by North Clinic-Robbinsdale.

Stacey Hermanson received a Creating Careers in Geriatric Nursing Scholarship Award, funded by The John A. Hartford Foundation and Fairview Partners.

Megan Herzog received a Creating Careers in Geriatric Nursing Scholarship Award, funded by Aspen Medical Group.

Victoria Ivchenko received the Creating Careers in Geriatric Nursing Scholarship Award, funded by The John A. Hartford Foundation and PartneringCare Senior Services.

Jennifer Kish received a Creating Careers in Geriatric Nursing Scholarship Award, funded by The John A. Hartford Foundation and Fairview Geriatric Services.

Kathryn Leggitt won first place in the Graduate Poster category at the 2006 Midwest Nursing Research Society conference.

Sarah Jean Johnson was awarded the Rosina Hanslick Nursing Scholarship.

Christine Larson received a Creating Careers in Geriatric Nursing Scholarship Award, funded by The John A. Hartford Foundation and HealthEast.

Ethel (Tiny) Macheel was appointed to a two-year term on the Minnesota State Advisory Council on Mental Health by Minnesota Governor Tim Pawlenty.

Nora McPherson received a Creating Careers in Geriatric Nursing Scholarship Award, funded by The John A. Hartford Foundation and EverCare.

Karen Monsen, PhD, MS, RN, received the Outstanding Graduate Nursing Student Award from the School of Nursing Alumni Society. Karen also received the Theresa V. James Fellowship in Child and Family Health at the School of Nursing Research Day, April 21. She is pictured below (c) with her mother, Jean Brandt, BSN ’52 (l), and Professor Ann Garwick (r).

Connell R. Thach was named the 2006 Katharine J. Densford Undergraduate Scholar. She is pictured below (l) with Diana J. Mason, PhD, RN, FAAN, editor-in-chief of American Journal of Nursing (c) and Professor Joanne Disch (r).

Ed Newton received a Creating Careers in Geriatric Nursing Scholarship Award, funded by the Minneapolis VA Medical Center.

Elizabeth Pui was awarded the Barbara Volk Tebbitt Undergraduate Nursing Leadership Award.

Linda Ramsey received a Creating Careers in Geriatric Nursing Scholarship Award, funded by Partnering Care for Senior Services.

Chad Sharkey received a Creating Careers in Geriatric Nursing Scholarship Award, funded by the Minneapolis VA Medical Center.

Kristine Talley, BSN, RN, was awarded the Shelly Joseph-Kordell Scholarship from the University of Minnesota Center on Aging.

Susan Taylor won third place in the Undergraduate Poster category at the 2006 Midwest Nursing Research Society Conference. She also received the Outstanding Undergraduate Nursing Student Award from the School of Nursing Alumni Society at the annual alumni celebration and reunion in April.
FACULTY AND GRADUATE STUDENT GRANT AWARDS

JANUARY–JULY 2006 (GRANT PERIOD START DATES)

FACULTY:

Avery, Melissa
Development of an Exercise Intervention for American Indian Women with Gestational Diabetes: A Community-Based Approach
American Council of Nurse-Midwives Foundation

Bliss, Donna
Use of ARD Anperineal Dressing for Fecal Incontinence
Birchwood Laboratories Inc.

Chlan, Linda
Patient-Controlled Sedation Feasibility Study
University of Minnesota Academic Health Center

Chlan, Linda
Pilot Testing of a Research Protocol with Mechanically Ventilated Patients
University of Minnesota Young Investigator Award—Craig Weinert

Chlan, Linda
Reducing Sedative Exposure in Ventilated ICU Patients
National Institutes of Health/National Institute of Nursing Research
4/1/2006–1/31/2010

Disch, Joanne
Improving Patient Safety Through Physician/Nurse Partnerships
American Organization of Nurse Executives Institute for Patient Care Research & Education

Disch, Joanne
Improving Patient Safety Through Effective Nurse-Physician Partnerships
Sigma Theta Tau International, Zeta Chapter

Fulkerson, Jayne
Validation of a Self-Administered Tool to Assess the Types of Foods Served at Family Meals for the Prevention of Childhood Obesity
University of Minnesota Graduate School

Fulkerson, Jayne
Healthy Home Offerings via the Mealtime Environment (HOME)
National Institutes of Health/National Institute of Diabetes and Digestive and Kidney Diseases

Garcia, Carolyn
An Instrument to Measure Latino Mental Health Knowledge
Sigma Theta Tau International, Zeta Chapter
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<tr>
<th><strong>García, Carolyn</strong></th>
<th>Understanding Culturally-Based Perceptions of Mental Health Among Mexican-Origin Immigrant Latino Adolescents and Parents: A Pilot Study</th>
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<th><strong>Gaugler, Joseph</strong></th>
<th>The Cancer Caregiving Career: Pilot Study</th>
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<td>University of Minnesota Cancer Center</td>
<td>3/1/2006–8/31/2006</td>
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<th><strong>Halcón, Linda</strong></th>
<th>Recruitment Strategy for Testing Tea Tree Oil Treatment of Bacterial Infections</th>
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<td>University of Minnesota School of Nursing/Center for Health Trajectory Research</td>
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<th><strong>Kubik, Martha</strong></th>
<th>Team COOL Pilot Study</th>
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<th><strong>Lindquist, Ruth</strong></th>
<th>Acupuncture for Prevention and Treatment of Atrial Fibrillation in CABG Surgery Patients</th>
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<td>University of Minnesota School of Nursing/Center for Health Trajectory Research</td>
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<th><strong>Olson Keller, Linda</strong></th>
<th>Enhancing the Capacity of Public Health Nursing Through Partnerships</th>
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<td>Association of State and Territorial Directors of Nursing</td>
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<th><strong>Robertson, Cheryl</strong></th>
<th>Modeling Psychological Functioning in Refugees</th>
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<th><strong>Sieving, Renee</strong></th>
<th>Prime Time: Health Promotion for Multiple Risk Behaviors</th>
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<th><strong>Westra, Bonnie</strong></th>
<th>Using Electronic Health Record Data to Predict Medical Emergencies for Homecare Patients</th>
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**GRADUATE STUDENT:**

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<th><strong>Black, Mary</strong></th>
<th>Predoctoral Scholarship Award</th>
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The Minnesota Center for Health Trajectory Research, newly established with a $1.5 million grant from the National Institute of Nursing Research, is developing and testing innovative interventions that will help individuals and families create optimal pathways to health. Center researchers are exploring the interrelationships among the many biological, behavioral, psychosocial and environmental factors responsible for health or illness and how to manage them over time.
The Center provides funding to faculty to conduct one-year pilot studies.

**2005–2006:**

- Test a strategy for recruitment of persons with early-stage dementia and their family caregivers to participate in a study of the kinds of issues and decisions involved in early-stage dementia. Results of this study were presented at the Sigma Theta Tau International Congress in Montreal, Canada, in July 2006 and will be presented at the annual meeting of the Gerontological Society of America in Dallas, Tex., in November 2006 (Dr. Marsha Lewis).

- Develop and administer a statewide survey to determine the knowledge, beliefs and attitudes of Minnesota school nurses as well as their current roles and responsibilities in delivering school-based intervention that target the prevention and treatment of excess weight and obesity of students at both the individual and population level. Results of this study will be presented at the annual meeting of the American Public Health Association in Boston, Massachusetts in November 2006 (Dr. Martha Kubik).

- Implement and evaluate a Mindfulness-Based Stress Reduction protocol as a psychosocial intervention for women with a diagnosis of early-stage breast cancer and their partners (Dr. Gretchen Zunkel).

**NEW PROJECTS ARE UNDERWAY TO:**

- Gather preliminary information about the complementary use of acupuncture as an innovative strategy for preventing or effectively treating atrial fibrillation associated with coronary artery bypass graft surgery (Dr. Ruth Lindquist).

- Determine the feasibility of recruiting subjects for a future intervention to test the effectiveness of a complementary therapy, tea tree oil, on wound healing (Dr. Linda Halcón).

- Analyze a model of psychological functioning in the trauma experiences of refugees (Dr. Cheryl Robertson).
NEW CENTER FACULTY

The Center welcomes several new faculty members. Fang Yu, PhD, RN, CRNP, joins us from Pennsylvania State University where she is a John A. Hartford Foundation Postdoctoral Scholar. Her research is on the impact of aerobic exercise on executive functioning in community-dwelling older adults with mild or moderate Alzheimer’s disease. Joseph Gaugler, PhD, (human development and family studies from Pennsylvania State University with postdoctoral studies in aging from the University of Minnesota) joined the SoN faculty in 2005. Previously at the University of Kentucky School of Medicine, he is the principal investigator of two National Institute of Aging R01 grants studying interventions for caregivers who are caring for family members with Alzheimer’s disease. He is also the principal investigator of a project on the cancer caregiver career funded by the University’s Cancer Center. Karin Shurrer-Erikson, MS, CNP, is a teaching specialist in the gerontological nurse practitioner program. She joins us from University of Minnesota Physicians, where she has a joint appointment. She is part of an inter-professional teaching team at the Walker Methodist Health Center, through which all of our GNP students rotate.

CGN TAKING THE LEAD IN ESTABLISHING THE MINNESOTA GERIATRIC NURSING EDUCATION CONSORTIUM

The Center, under the leadership of Christine Mueller, PhD, RN, BC, CNA, new chair of the Adult and Gerontological Health Cooperative, is establishing a consortium of nursing educators around Minnesota to: 1) strengthen gerontological nursing in all Minnesota nursing curricula, 2) share ideas and resources for teaching gerontological nursing, 3) partner for funding opportunities, 4) promote faculty development, and 5) develop partnerships with other organization providing services to older adults in order to promote gerontological nursing as a career focus for nursing students. Thirty-one gerontological nurse educators have already joined the consortium.

New Practice Initiatives

Minnesota Continence Associates has expanded services to include consultation to Twin Cities nursing homes and has partnered with the Payne-Phalen Living at Home/Block Nurse Program to establish multicultural senior wellness services in Saint Paul.

For more information about MCA visit: www.nursing.umn.edu/ContinenceClinic.
2006 CGN Preceptor Award

The Center recognized Lynn Convery, MS, GNP, at the School’s Annual Research Day in April 2006, with the first CGN Outstanding Preceptor Award. Convery, who works for Health Partners’ PartneringCare Senior Services, has served a clinical preceptor and guest lecturer for GNP and GCNS courses since 2001.

**DOCTORAL STUDENT RESEARCH**

Mary Black, RN, MSN, BS, was awarded a 2006–2008 John A. Hartford Foundation Predoctoral Scholarship Award (Sponsor: Margaret Moss, MS, RN, DNS, JD) for her dissertation research on *Depressive Symptoms Among Native American Caregivers of Individuals with Alzheimer’s or Other Dementias*. A member of the Three Affiliated Tribes (Mandan, Hidatsa, and Arikara) of Fort Berthold, North Dakota, Black is participating in the NIH-funded “Bridges to the Doctorate” Program and serves as community program associate for the Native Nurse Career Opportunity Program in the School of Nursing. She is also a 2005–2010 fellow in the American Nurses Association’s, Substance Abuse and Mental Health Services Administration (SAMHSA) Minority Fellowship Program. Kristine Talley was awarded a one-year National Service Research Award Predoctoral Fellowship (Sponsor: Jean Wyman, PhD, RN, FAAN) from the National Institute of Nursing Research for her dissertation research on *Fear of Falling and Disability Trajectories in Older Women*. She also received the 2006 Shelly Joseph-Kordell Scholarship from the University Center on Aging for 2006–2007. Laura Kirk completed her second year of her John A. Hartford Foundation Predoctoral Scholarship Award. Corjena Cheung (PhD, ’05) received the Outstanding Dissertation Award for her study on the *Use of Complementary and Alternative Therapies in Community-Dwelling Older Adults* from the Health-Seeking Behavior Section at the 2006 Midwest Nursing Research Society Meeting. She now serves as Assistant Professor in the College of St. Catherine Department of Nursing.

**GERONTOLOGICAL NURSE PRACTITIONER/GERONTOLOGICAL CLINICAL NURSE SPECIALIST SCHOLARSHIPS**

Through a three-year competitive renewal grant from The John A. Hartford Foundation under the *Creating Careers in Geriatric Advanced Practice Nursing* program and matching funds from Fairview Partners, HealthPartners PartneringCare for Senior Services, HealthEast and Evercare, the School funded four clinical scholars during 2005–2006: Stacy Hermanson, Victoria Ivchenko, Christine Larson, Nora McPherson. In addition, North Clinical-Robbinsdale, Evercare, Park Nicollet Health Services and the Minneapolis VA Medical Center provided partial support for Abejide Fawole, Becky Ahlstrom, Ben Akhuetie-Oni and Chad Sharkey.

Hartford Foundation scholarships and matching funds from Fairview Geriatric Services, HealthEast and Aspen Medical Group for 2006–2007 have been awarded to Stacey Hermanson, Jennifer Kish, Christine Larson and Momodou Ceesay. Additional funding from Evercare, HealthPartners Partnering Care for Senior Services, Park Nicollet Health Services and Fairview Geriatric Services will support partial scholarships for GNP students Becky Ahlstrom, Linda Ramsey, Megan Danielson and Megan Herzog. The VA Medical Center has provided traineeship stipends to GNP students Linda Anderson and Ed Newton.
Densford Center promotes intercultural leadership

One of the five strategic goals of the Densford Center is to advance international and intercultural nursing leadership. Within that context is an objective to enhance health leaders’ competency and confidence in promoting cultural awareness and sensitivity. Minnesota and its health care systems are becoming more culturally diverse, and yet managers and employees are ill-equipped to adequately handle the challenges that accompany these changes.

Three years ago the Densford Center designed an original nursing leadership curriculum on developing cultural competencies in the health environment. Known as “Better for Everyone,” this three-day workshop offered insights and strategies to nursing leaders for re-creating and sustaining their own environments as sensitive to the needs and perspective of individuals from multiple cultures.

This May, students of Public Health’s Summer Institute had a sampling of that same fare. Health professionals taught by Joanne Disch, Director of the Densford Center, had a chance to hear how training translated into practice, and how the mid-managers from the original training were making a difference.

The week-long mini-course included discussion and cases on:
- How culture affects health care behavior,
- Population changes in Minnesota in the last decade,
- Traits of culturally competent health care providers,
- A model for enhancing cultural awareness,
- Designing plans relevant to their own situations.

As class participants reviewed the impact of the course, they began to identify a number of changes they could make in their own organizations. Some were simple like creating a physical environment that is welcoming to people of various faith and cultural traditions; others were more complex, such as hosting a workshop for colleagues on how to verbally convey a welcoming attitude. All felt that it opened their eyes to thinking differently about culture and diversity—and how important it is that each of us accepts responsibility for making our health care environments “better for everyone.”
Cultural diversity moves forward as a central theme of the 2007 Summit of Sages to be held October 14–16, 2007. Planning is well underway at the Densford Center, led by a dedicated steering committee. The Summit will explore social justice as core to nursing and will be honored by the remarkable Dr. Maya Angelou as the featured speaker. Dr. Angelou is one of the great voices of contemporary literature and a Renaissance woman—poet, historian, civil rights leader, producer—with the unique ability to shatter the barriers of race and class. More information about Summit of Sages will be available soon on the Densford Center Web site.
CENTER FOR CHILD AND FAMILY HEALTH PROMOTION RESEARCH

CENTER DIRECTOR:
Ann Garwick, PhD, RN

MISSION:
To improve the health of infants, children, adolescents, parents and families in the context of their communities. In response to the national priority to decrease health disparities, the Center focuses its work on enhancing the health of underserved groups in urban and rural areas. Center members develop and disseminate evidence-based interventions and best practices in primary and secondary prevention.

FOR MORE INFORMATION:
Ann Garwick, Professor and Director
Phone: 612-624-1141
E-mail: CCFHPR@umn.edu
www.nursing.umn.edu/CCFHPR

Three doctoral student members received awards: Karen Monson, TerryAnn Clark and Diana Neal.

See page 23 for more information.
PREVENTION AND HEALTH PROMOTION RESEARCH

Newly funded research projects by Center investigators address critical public health issues, such as obesity prevention, gestational diabetes, and reducing risky behaviors among adolescents. Center investigators work collaboratively to develop and disseminate evidence-based interventions and best practices in primary and secondary prevention.

- Renee Sieving is the principal investigator (PI) of Prime Time: Health Promotion for Multiple Risk Behaviors, an R01 funded by NIH/NINR. Other Center investigators on this grant include Linda Bearinger and Ann Garwick. The overall goal of this five-year study is to design, implement and evaluate a multi-component intervention among adolescent girls at high risk for early pregnancy that reduces multiple precursors of teen pregnancy, including sexual risk taking, violence involvement and school disconnection.

- Jayne Fulkerson is the PI of Healthy Home Offerings via the Mealtime Environment (HOME), an R21 funded by NIH/NINR. Other Center members on this grant include Marti Kubik and Ann Garwick. This project directly involves parents and school-aged children in a community-based health promotion intervention that encourages regular and nutritionally sound meals in which family members eat together.

- Marti Kubik is PI of A Clinic-based Intervention Targeting Primary & Secondary Prevention of Childhood Obesity, funded by Allina Hospitals & Clinics. The project will develop, implement and evaluate obesity prevention intervention in a primary care clinic setting, looking at 5- to 10-year old children and their parents.

- Carolyn Garcia is the PI of Understanding Culturally-based Perceptions of Mental Health among Mexican-origin Immigrant Latino Adolescents and Their Parents: A Pilot Study funded by Sigma Theta Tau International. The purpose of this qualitative inquiry is to ascertain the perceptions of Latino adolescents and parents regarding mental health, mental health problems including depression and suicidal ideation, recognized barriers or facilitators to accessing mental health services, and cultural views of mental health with the long-term goal of designing a culturally relevant intervention.

- Melissa Avery is the PI of the Development of an Exercise Intervention for American Indian Women with Gestational Diabetes: A Community-based Approach, funded by the American College of Nurse-Midwives (ACNM) Foundation. Dr. Avery is partnering with urban and reservation-based community partners and women who have experienced GDM to develop a culturally appropriate exercise intervention for Ojibwe women with gestational diabetes mellitus.

CENTER MEMBERS ARE WORKING TO IDENTIFY AND DISSEMINATE BEST PRACTICES.

Linda Olson Keller is Director of the Enhancing the Capacity of Public Health Nursing Through Partnerships project. The goals are to assure effective public health nursing leadership at the state level, describe the contributions of public health nursing to improving population health, assure a competent public health nursing workforce, and identify the evidence that supports public health nursing practice. Partners include the Association for State and Territorial Directors of Nursing (ASTDN), the Centers for Disease Control and Prevention (CDC), the Association of State and Territorial Health Officers (ASTHO), the National Association of County and City Health Officials (NACCHO), and the Association of Community Health Nursing Educators (ACHNE).
2006 Public Service Award

Dr. Susan O’Conner-Von was honored by the School of Nursing with the school’s 2006 Public Service Award. Dr. O’Conner-Von’s research in the area of pain management for children exemplifies her dedication to the well being of others. Additionally, Susan and her dog Libby are members of the Golden Valley Humane Society’s Animal Ambassador program, visiting hospice patients, spending quality one-on-one time with individuals facing the end of life. Dr. O’Conner-Von’s generosity, compassion and leadership are deservedly recognized with this award.

This past January, Dr. Linda Lindeke traveled to Central Asia with a team of School of Nursing faculty led by Dr. Sandra Edwardson (former dean of the School of Nursing), as part of a project funded by American International Health Alliance, a branch of USAID, to consult with educators, students and governmental officials in Kyrgyzstan. Later last spring, Dr. Lindeke and five faculty members met with over 100 representatives of the five “stan” republics (Turkmenistan, Kazakhstan, Kyrgyzstan, Uzbekistan and Tajikistan) to advise participants on a wide array of issues including program development, public health, prevention, continuing education and public policy.
Dr. Wendy Looman’s account of her experiences aiding Hurricane Katrina evacuees, “A Developmental Approach to Understanding Drawings and Narratives From Children Displaced by Hurricane Katrina,” was published in the May–June 2006 volume of the Journal of Pediatric Health Care. Dr. Looman’s work explicates using art to help children externalize complex feelings as an assessment tool in the primary care setting.

R21 grant

Doctoral student Casey Hooke was awarded an R21 grant by the National Institution of Nursing Research to develop a “Symptom Clusters Intervention Program for Children with Cancer.” She also received a research grant from Pine Tree Apple Tennis Classic Foundation to support her work on “Fatigue, Physical Performance, and Carnitine Plasma Levels in Children with Cancer.” The University of Minnesota School of Nursing honored Casey’s research in pediatric cancer with the White Family Oncology Fellowship.

Master’s student Jocelyn Berbee (2007) was selected to work as an intern this past summer with the University of Wisconsin’s Pediatric Pulmonary Center traineeship funded by the Maternal and Child Health Bureau. Jocelyn not only gained in-depth clinical skills in pulmonology, but also strengthened her skills in leadership, advocacy, legislation, cultural competency and interdisciplinary teamwork.

The Center has added a new DVD on hearing loss to our continuing education series on caring for children with chronic conditions. For ordering information, please visit our Web site at www.nursing.umn.edu/cshcn.
Continued Investment in Healthy Youth

Whether it be teaching, research, service or practice, one priority links all the work of the Center for Adolescent Nursing—promoting the health of young people. The launching of a large new NIH funded intervention research grant, the offering of our 13th annual Adolescent Health Summer Institute, or the daily work of faculty and staff in the communities and constituents we serve—all speak to our investment in moving policy, practice and priorities in line with what we know works best in helping young people reach their full capacity.

LAUNCH OF NIH RESEARCH IN TEEN CLINICS

A $3.0 million research award from the National Institutes of Health, specifically the National Institute of Nursing Research, to one of our Center’s senior faculty, Associate Professor Renee Sieving, PhD, RNC, will move us forward in testing a set of health promotion strategies in teen clinic settings with young people ages 13–17. The goal? Reducing violence and the risks of early pregnancy and STDs. This five-year research grant (R01), the largest research grant ever awarded to the University of Minnesota’s School of Nursing, will launch an intervention, aptly named Prime Time because it targets those at a vulnerable point in development, also has the goal of improving school connectedness and academic success—two elements of teens’ lives pivotal to moving them along healthy paths through adolescence.

This new study led by Dr. Sieving with colleagues, Linda Bearinger, PhD, FAAN, Sandra Pettingell, PhD, Carol Skay, PhD (Center for Adolescent Nursing), Ann Garwick, (also of the School of Nursing) and Michael Resnick, PhD (Medical School) uses strategies core to healthy youth development—involving young people in service learning activities, teaching teens to be peer educators, and providing one-on-one case management that assures academic support, and the long-term presence of positive adult role models. Along with building motivation and healthy lifestyle skills, the interventions encourage connections to healthy, positive resources within young people’s communities, schools and families, connections that are essential to establishing and promoting healthy development. Prime Time’s long-term goal? Achieving the five Cs of youth development: Competencies and skills, Confidence in self, positive Connections with peers, friends, mentors and adults, Contribution (giving back) to peers, school and community, and Character through caring in services to others.
ENGAGING TEENS IN OUR TEACHING

Picture all the ways young people can be engaged as active partners and contributors in building health communities. Over 60 participants of our 2006 annual Adolescent Health Summer Institute envisioned the possibilities over three days in early August. With continued leadership of the Center for Adolescent Nursing, multiple co-sponsorships—University’s Healthy Youth Development-Prevention Research Center and Konopka Institute, the Minnesota Department of Education’s Coordinated School Health, and the non-profit Minnesota Organization on Adolescent Pregnancy, Prevention, and Parenting, meant great success in walking our talk about engaging youth. Ask any participant from any year of our Institute and they will tell you about our table teachers, specialists in adolescent health committed to leading, teaching, and facilitating the participants at their table throughout the entire Institute. However, this year two teachers paired at each table: one “senior adult table teacher” and one “young adult table teacher”. We selected this year’s eleven young adult table teachers for their excellence in prior roles as adolescent actors serving as simulated patients teaching clinicians in our graduate programs, as peer educators in high schools and colleges, and as leaders cross-cutting sports, theater and governance in their respective schools.

Another way we walked our talk of youth engagement? Day Three of the Institute cooked, not because of the summer heat but because of the energy that Sarah Schulman and Tim Davies, two 21-year-olds from Youth Infusion (Austin, Texas) brought to the Institute, leading us through their newly created table game that challenged everyone with moving youth engagement one, two, or several notches up the ladder within youth-serving organizations. Though we can’t remember which table won first prize, we all won in learning authentic and optimal ways of engaging young people.

MORE LEARNERS, NEW FACULTY

As of Fall 2006 the Center for Adolescent Nursing, with resources from the Maternal and Child Health Bureau (HRSA, DHHS) and the Centers for Disease Control and Prevention, supports 22 master’s and doctoral students, and post-doctoral fellows focused on continuing their education in adolescent health. They come from disciplines of nursing, medicine, nutrition and psychology. However, this large number of students and fellows requires new faculty who can mentor these learners. Two new faculty with expertise in adolescent health in the School of Nursing have joined us. Dr. Carolyn Garcia’s work takes her into Latino(a) communities, schools and clinics, seeking to understand the perceptions of recently immigrated youth toward their health and their access to health care. Her doctorate in nursing equipped her with qualitative skills for tapping into this newer area of research. Dr. Jayne Fulkerson, with her doctorate in family social science and coming by way of work in the School of Public Health, considers the protective role of family in supporting the health of children and youth. Working often in collaboration with Dr. Martha Kubik who joined the Center faculty several years ago, Dr. Fulkerson pays particular attention in her research to the importance of family meals in promoting the health of young people.
Helen Marie (Korpi) Lloyd, BSN '30, celebrated her 100th birthday this year! Born on May 2nd in Eveleth, MN, Helen worked as a nurse from the time she graduated until she retired in the early 1970s, including more than 30 years as a public health nurse in Family Nursing Service for the City of Saint Paul. Congratulations, Helen!

Dr. Muriel B. Ryden, BSN '53, Faculty Emerita, and a 1982 PhD graduate from the College of Education was one of 100 graduates of the College of Education chosen to receive a Distinguished Alumni Award at the College’s 100th Anniversary celebration on May 6. She was honored for developing and implementing a model for integrating ethics education in undergraduate nursing curricula and for her research on care of individuals and families affected by Alzheimer’s disease.

Patricia Tomlinson, BSN '57, and former faculty member, was recently awarded an honorary doctorate in health sciences from the Faculty of Medicine, Tampere University, Finland. The award was presented for her “productive association with the Finnish scientific community and her achievements in the field of family systems nursing research...” Tomlinson is also a Senior Fulbright Specialist for international consulting.

Marie Manthey, BSN '62, MNA '64, recently spoke about primary nursing, a model she developed, to more than 1,000 nurses and other health care leaders in Bozen, Italy and Regensburg, Germany. The opportunities were provided by nursing thought leaders in those communities. Marie is pictured here (back row, middle) with nurse leaders in Bozen, Italy. She also delivered SoN’s 2006 Andrea Printy Memorial Lecture this fall.

Eileen Weber, BSN '92, earned her Juris Doctor and became an attorney in 2004. She is running for a seat in the Minnesota House of Representatives.

Peter Mitchell, BSN ’96, MSN ’99, was elected to the American Nurses Association Congress on Nursing Practice and Economics, 2006–2010. He is a clinical instructor for nurse practitioner students at the Minneapolis Veterans Affairs Medical Center.

Congratulations to doctoral student Kristine Talley, BSN ’99, MSN ’05, who was awarded the Shelly Joseph-Kordell Scholarship. This award is given to graduate students who have a commitment to improve the lives of older people. Tally is pursuing both a master’s degree in the geriatric nurse practitioner program and a PhD in nursing with minors in geriatrics and public policy.

Recent PhD grad Margo Halm, PhD ’05, MS, RN, CNS, of United Hospital in Saint Paul, was credited in the February 8–21, 2006 issue of the Women’s Press with having the idea to begin a heart center there. The Women’s Heart Disease Prevention Center opened in 1999. Other women’s heart centers created by Mercy and Abbott Hospitals have been modeled after it.

Ali Ruegg, BSN ’06, is working at the Abbott Northwestern Hospital in its Birth Center with postpartum mothers.
KNOLLMUELLER RECEIVES TOP U ALUM AWARD
Ruth Nelson Knollmueller, BSN ’59, received the 2006 University of Minnesota Outstanding Achievement Award, the highest non-degree award the University confers upon a distinguished alumni. The award recognizes graduates or former students of the University who have attained unusual distinction in their chosen fields or professions, or in public service, and who have demonstrated outstanding achievement and leadership on a community, state, national or international level.

Knollmueller’s distinguished career has focused on a commitment to quality community health services. In her work as a public health nurse, educator, administrator and author, she has been an influential leader who has had a profound impact on nursing practice and public health nursing.

Family and friends celebrated Knollmueller’s achievements at the Eastcliff May Gathering where Knollmueller was presented with her award by U of M Regent Dallas Bohnsack.

DISTINGUISHED ALUMNI RECEIVE NEW AWARD
The Nursing Alumni Society honored the first recipients of its Distinguished Alumni Humanitarian Award at the 2006 Annual Alumni Spring Celebration and Reunion in April. The award recognizes School of Nursing graduates for their exceptional humanitarian service in a healthcare environment. The 2006 recipients were Sarah Gutknecht, BSN ’94, MSN ’99 and Janis Ollwerther, BSN ’98. Former faculty member Carol Pederson, MSN ’78, was a posthumous recipient of the award.

NURSING ALUMNI SOCIETY WRAP UP YEAR WITH TOP UNIVERSITY AWARD
Celebration and adulation topped off a busy and fruitful year for the Nursing Alumni Society when it was named the Outstanding Alumni Society of the Year for 2005–2006 by the University of Minnesota Alumni Association (UMAA). Determining factors in the Nursing Alumni Society’s selection were the “depth and breadth of the programs taken on this past year such as their work to involve alumni, volunteers, and students by revitalizing the spring celebration, launching ‘Put Your Best Foot Forward Day,’ and revamping the mentoring and awards program all in one year.” Members were presented with the award at the Volunteer Awards Ceremony on September 15 at Coffman Memorial Union.

Congratulations to nursing alumni volunteers who made this success possible with their great ideas, follow-through and enthusiasm! If you would like to volunteer with this active and thriving Alumni Society, check out the various opportunities at www.nursing.umn.edu/AlumniSociety/VolunteerForm.

Join the Nursing Alumni Society and enjoy the benefits of being an Alumni Association member. Go to www.alumni.umn.edu/society-nursing

UPCOMING EVENTS:

SCHOOL OF NURSING BENEFIT JEWELRY SALE
December 7, 2006
This all-day sale raises funds for nursing programs and scholarships. Your donations of collectible, costume or vintage jewelry make this sale possible. Contact Laurel Mallon at 612-624-2490 for information.

ANNUAL ALUMNI SPRING CELEBRATION AND REUNION
Saturday, April 21
9 a.m. – noon
McNamara Alumni Center Great Hall
Join friends and colleagues for this yearly event that brings all nursing alumni back to campus to celebrate, connect with nursing classmates and learn of the latest and greatest School of Nursing happenings. Reunion class years of 1947, 1957, 1962 and 1982 will be specially recognized.

COMING IN 2009:
THE SCHOOL OF NURSING CENTENNIAL CELEBRATION!
Alumni will be invited to come back to campus for special programs and events taking place throughout the year in 2009. Watch for more information as the centennial approaches.

AWARDS

PHOTO: ERIC SWANSON
PHOTO: ANEISHA TUCKER

1 Ruth Knollmueller, wearing Outstanding Achievement Award medallion, with Regent Bohnsack and Dean Delaney
2–4 First to receive SoN’s new Humanitarian Award: 2) Janis Ollwerther, 3) Sara Gutknecht (l) pictured with faculty member Janice Post-White, and 4) family of the late Carol Pederson, who received Carol’s posthumous award, with teaching specialist Karin Alaniz (l)
5 SoN received U’s top alumni association award. Celebrating (l–r) were Clint Schroeder, Carol Kelsey, Gayle Hallin, Cathy Konat, Karin Alaniz, Laurel Mallon, Carolyn Schroeder

PHOTO: ANEISHA TUCKER

AWARDS
Guiding healing, and promoting health, nurses are America’s most trusted professionals. Since its founding in 1958, the School of Nursing Foundation remains committed to supporting nursing research, education and service for the ultimate benefit of patient care.

We had the pleasure of welcoming the School’s tenth dean, Connie Delaney, in August 2005. The 14th Andrea Printy Memorial Lecture, held at the McNamara Alumni Center in November, served as Dean Delaney’s visionary Inaugural Address.

During the year, the Nursing Foundation hosted 10 alumni and donor events, plus May Gatherings in San Diego, Washington, DC; Milwaukee, Sun City West, Scottsdale, Duluth, Rochester, Minn., and the Twin Cities. Featuring faculty research and advancements in nursing education, these events gave alumni across the country an opportunity to gather with classmates and meet with Dean Delaney. As we look ahead to the School’s centennial in 2009, we invite your participation in upcoming regional events leading to our landmark year.

In 2006, the Nursing Foundation received $764,500 in gifts and pledges from 1,573 donors. Special grants were awarded to support Nursing Research Day, student scholarships and Pediatric Pain Research. In conjunction with Nursing Research Day, the Nursing Foundation hosted the first Community Breakfast for corporate donors, health systems and community partners. A musical benefit at the Summit Avenue home of Kay Savik and Joe Tashjian raised funds to support the School’s Laboratory for Computational Nursing Science.

Supporting nursing students and faculty is an important funding priority. When Ruth Nelson Knollmueller, a national leader in public health nursing, received the Outstanding Achievement Award, members of her Class of 1959 stepped forward with tribute gifts honoring Knollmueller’s achievements and supporting the Delphie Fredlund Fellowship in Public Health Nursing. Professor Roxanne Struthers’ untimely passing into the Spirit World was commemorated by the creation of the Roxanne Struthers Fellowship, dedicated to continuing her work with students and the American Indian Community. Two Jewelry Scholarships for undergraduate and graduate nursing students were awarded with proceeds from the Nursing Foundation’s annual Jewelry Sale.

Thanks to the generosity of our donors, eight new scholarships and fellowships were endowed and qualified for matching funds through the University’s Twenty-first Century Graduate Fellowship Program and the President’s Scholarship Match:

- I Want to Be a Nurse Scholarship
- Lucille Casas Paradela International Fellowship
- Connie White Delaney Fellowship in Nursing Innovation
- Wladimir and Paulina Zenkovich Nursing Fellowship
- Nursing Research Fellowship
- Tanya V. Ash Memorial Scholarship
- Mary Hensler Spurzem Scholarship II
- Cynthia Kelley O’Neill and Louise Muller Fellowship in Psychiatric Mental Health

The third annual Scholarship and Fellowship Reception, hosted by the Nursing Foundation, was held at Coffman Memorial Union in October 2005 to recognize student recipients and scholarship donors.

We are grateful for the many people who helped make 2006 a success. From the students and alumni who give us reason to be proud of the nursing profession, to Dean Delaney and our dedicated faculty and community partners, to our past chair Arnie Bigbee and the Nursing Foundation Board of Trustees, to the generous donors who continue to step forward with encouragement and strong support—thank you all.

Your trust and spirited giving are indeed appreciated.

Christine Seitz, MSN ’86, MBA ’92, Chair
Laurel Mallon, President
Claire Nelson, CNM, and Nancy Schamber, CNM, have retired after 25 years as Co-directors of the Hennepin County Medical Center’s Nurse-Midwife Service. In honor of their dedication to providing outstanding nurse-midwifery care, friends and colleagues are creating the Claire Nelson and Nancy Schamber Student Nurse-Midwife Fellowship at the University of Minnesota. This fellowship will provide financial support to nurse-midwife students at the School of Nursing, ensuring the continuation of Claire’s and Nancy’s legacy well into the future.

In 1971, the first nurse-midwife service in Minnesota was established at Hennepin County Medical Center (then Hennepin County General Hospital). Women wanted a homelike setting where they could labor, give birth and room-in with their babies. The Nurse-Midwife Unit gave them that choice. Beginning in the late 1970s, women moved into Minnesota from around the world, bringing with them their own traditions and beliefs surrounding pregnancy and childbirth. Their HCMC nurse-midwives helped them give birth in a new country in an atmosphere of acceptance, respect and safety. Laboring in water has been an option for HCMC nurse-midwife patients since 1975. In 1997, under Nancy’s and Claire’s leadership, the opportunity to give birth in water also became available.

As a natural outgrowth of these practices, the HCMC Nurse-Midwife Service has grown. During Claire’s and Nancy’s 25 years as co-directors, more than 17,000 babies have been delivered by midwives at the service. In the month of July 2006, a record 84 babies were delivered into the hands of HCMC nurse-midwives.

Claire and Nancy have been committed to sharing their skill, knowledge and belief in birth as a normal, healthy process. This has shaped the training of many University of Minnesota student nurse-midwives, medical students and residents.

When it raises at least $25,000, the Claire Nelson and Nancy Schamber Student Nurse-Midwife Fellowship can be permanently endowed. Once this goal is achieved, the University of Minnesota will match the fellowship’s annual distributions to double the impact of every gift. Please consider participating in the establishment of this new fellowship.

Your tax-deductible gift, made payable to the University of Minnesota Foundation, may be sent to:

Laurel Mallon  
U of MN School of Nursing  
5-138 Weaver-Densford Hall  
308 Harvard Street SE  
Minneapolis, MN 55455

Your gift will be acknowledged for tax purposes and the honorees will be notified of your thoughtful support. For questions or additional information, please contact Laurel Mallon at 612-624-2490 or mallo001@umn.edu.

Thank you.
Lifetime Donors
TO THE SCHOOL OF NURSING

The School of Nursing Foundation gratefully acknowledges our Presidents Club members for providing major support to advance the School of Nursing’s research, service and education programs. Donors qualifying for recognition through the fiscal year ending June 30, 2006:

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Giving levels of $1 million and above.
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**KEY:** * Deceased + In Memoriam

Wherever your nursing degree takes you, you will be amazed at the power to do good it puts in your hands.
Claire Nelson, BSN, CNM ’75

You have entered an extremely rewarding profession and are privileged to witness the most intimate patient and family experiences—congratulations!
Mark Kirschbaum, PhD ’94

Never forget the idealism and energy that brought you to this special day. Use your talents well!
Lisa Sieling, BSN ’80
DEAR WILLIAM R. AND BARBARA A. PEARCE FAMILY,

I am honored that you have chosen to continue supporting me in my nursing studies through the William R. and Barbara A. Pearce Family Scholarship. Your kindness and generosity mean so much to me. I am deeply touched that donors like you would choose to make such an important investment in the lives of students like me.

Your support this past year has truly been a blessing to me. Your gift has enabled me to pursue my studies with greater passion and determination, lessening the financial burden and allowing me to devote my efforts fully to my education. Thank you for helping make my first year of nursing school a successful one. ...and I am looking forward to an equally successful second year, full of new and exciting experiences, especially as I enter my Medical-Surgical clinical. I know it will be intense, but I am excited and eager to discover what lies ahead. I look forward to seeing you again and thanking you in person at the Scholarship and Award Reception.

Sincerely,
Mary Chan
BSN Class of 2009
William R. and Barbara Pearce Family Scholarship Recipient
Dear School of Nursing Foundation:

I feel especially honored to have received this award in memoriam of Katharine Densford Dreves, who is such a renowned name both here at “home” at the University of Minnesota, and also in the international realm of nursing. Densford’s legacy as a leader stands out in the history of nursing, but it is her sense of justice, activism, and vision that personally touch and inspire me in my nursing career.

This scholarship will help me finish the Post-Baccalaureate Certificate Program this December. After graduation, I hope to spend a month volunteering as an RN at a maternity clinic in Guatemala before returning to Minneapolis to work for University of Minnesota Medical Center.

Many thanks to you and to the School of Nursing Foundation. This scholarship truly means a lot to me.

Sincerely,
Mandy Huber
Post-baccalaureate Class of 2006
Katharine Densford Dreves Scholarship Recipient

Our class just celebrated 50 years. I wonder what nursing will be like when you reach that point? With your help, it will remain a vital and rewarding profession!

Peggy McLellan, BSN '55

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46 Minnesota Nursing
With your nursing studies you have acquired an education that you will use for the rest of your life—“once a nurse, always a nurse,” and be proud of it!

Aune Trygg, BSN ’47

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Anonymous (7)

Best wishes—be involved and caring. Let your voice be heard to improve nursing care.
Patsy Klose, BSN ’89

Every gift is important to us. If we have inadvertently omitted your name or misrepresented your contributions, please be sure to let us know. Contact Laurel Mallon at 612-624-2490 or mallo001@umn.edu for more information.
Generations of Gophers

Raised in sunny California by his U of M-graduate parents, Jim Langland became a huge Gopher fan without ever having experienced a Minnesota winter. Once he did, as a student on the Twin Cities campus, he questioned staying. But sitting next to an attractive co-ed in biology class changed his mind.

“I told him he hadn’t done anything fun to enjoy winter,” recalls the woman, whose name was Penny Sugden (but is now Penny Langland). She introduced her eventual husband to cross-country skiing and winter camping.

Both Penny, BS ’74, MD ’80, and Jim, BS ’74, who now practice medicine in Thief River Falls, were brought up by parents who valued education and the U. Jim is a third-generation graduate; Penny and four siblings all graduated from the University.

Recently, the Langlands’ son Michael became the family’s 14th U of M graduate. “We feel blessed to have had parents who passed on their strong educational values,” say the Langlands, who set up two scholarships in honor of both sets of parents. “We wanted to celebrate our deep connections to the U.”

Jim’s mother, Cecilia Biernat Langland, graduated from the School of Nursing in 1947 and received a certificate in public health nursing. In tribute to Cecilia and her dedication to nursing, a portion of the Harold W. and Cecilia B. Langland Scholarship will support nursing students who are new to the University of Minnesota. The Langlands hope this scholarship will encourage students to pursue careers in nursing and/or public health nursing.

MAKE A TAX-SAVVY GIFT

An often overlooked but terrific, simple, and tax-savvy giving opportunity is to make a testamentary charitable gift from your IRA or other retirement plan assets: 401(k), 401(a), 403(b), or 457 retirement plan accounts. You can benefit the School of Nursing by designating the University of Minnesota Foundation as a beneficiary of all or a portion of your assets held in these accounts. All you need to do is fill out a beneficiary designation form, available from your plan administrator. Then let us know your intent so we can direct your gift to a particular program, scholarship or area of interest within the School of Nursing. Here is the information you may need for the form:

University of Minnesota Foundation to benefit the School of Nursing
200 Oak Street S.E., Suite 500
Minneapolis, Minnesota 55455-2010
Tax ID#: 41-6042488

Using retirement assets to make charitable gifts at death may allow your family to avoid paying high-rate income tax on account distributions after you are gone. Consider a gift to the School of Nursing from your retirement assets and help transform lives for generations to come by contacting Laurel Mallon at 612-624-2490 or by e-mail at mallo001@umn.edu.
1 **Research Day**: Keynoter Elizabeth Clipp, Associate Dean of Research Affairs, Duke University Medical Center, highlighted the school’s newest center with her talk on health trajectory research. She posed with Associate Professor Martha Kubik (r), who chaired Research Day.

2 **Research Day**: Health executives learned about opportunities to partner with SoN on research of immediate benefit to the community. Associate Professor Renée Sieving spoke about her $3 million NIH-funded project to prevent teen pregnancy by promoting healthy youth development.


4 **Health Informatics Conference**: Dean Connie Delaney (c) posed with colleagues (l–r) Ginger Malone, Chief Nursing Officer, Children’s Hospitals and Clinics of Minnesota; Mary Ann Stumpf, Vice President, Strategic Innovation, Blue Cross and Blue Shield of Minnesota; Delaney; Don Detmer, President and CEO, American Medical Informatics Association; Barbara Daniels, Chief Medical Officer, University of Minnesota Physicians; Charlotte Weaver, Vice President and Chief Nurse Officer, Cerner Corporation.

5 **Grand Rounds**: Densford Scholars (l–r) Connie Thatch and Kendra Hanson were honored.

6 **Grand Rounds**: Diana Mason, editor-in-chief of the *American Journal of Nursing*, spoke on evidence-based practice. Pictured (l–r): Associate Professor Joan Liaschenko; Michael Petty and Mary Fran Tracy, both nurse specialists at University of Minnesota Medical Center; Fairview; Mason.

7 **Florence Schorske Wald Lecture** in Palliative and Hospice Care: Barbara J. Daly, associate professor at Case Western Reserve and Director of the Clinical Ethics Program at University Hospitals of Cleveland, spoke on ethical quandaries in end-of-life research.

8 **International collaboration**: Dean Connie Delaney hosted Jintana Yunibhand (l), President of the Nurses Association of Thailand, and Yupin Aungsuroch (r), Dean of the Faculty of Nursing, Chulalongkorn University, Thailand.
CALENDAR

2006
November 6  Nursing Grand Rounds: Dean Connie Delaney
December 7  Benefit Jewelry Sale

2007
February 19  Nursing Grand Rounds: Dr. Martha Kubik
April 20  Nursing Research Day
April 21  Alumni Spring Celebration
May 8  Nursing Grand Rounds
October 14–16  Summit of Sages

2009  Centennial