Reducing Teen Pregnancy:
Adolescent Nursing Faculty Receives $3 Million NIH Research Grant

Why does the teen pregnancy rate in the U.S. remain one of the highest in the industrialized world? A faculty in the Center for Adolescent Nursing has received a $3 million federal grant from the National Institutes of Health to help find the answer.

Associate Professor Renee Sieving, Ph.D., RNC, leading a multi-disciplinary team of other Center and University researchers, is steering 125 Twin City teens—all of whom are attending school and community health clinics—away from risky behaviors that can lead to pregnancy and early drop out. At the end of 18 months in a program called Prime Time, the group will be compared with a similar group of girls who have not participated in Prime Time, but have continued to receive usual health clinic services.

**Model has proven effective**

"Previous research has shown that many factors contribute to teen pregnancy," says Sieving. "They include inadequate education, risky sexual behavior, involvement in violence and not enough contact with adults who can provide resources and positive role models."

The Prime Time intervention addresses all these factors – intensively and over a long enough period of time to have a lasting effect. The project, Prime Time: Health Promotion for Multiple Risk Behaviors, involves girls in 22-week health promotion and youth leadership programs, and then hires them to share health information with others. The girls will also take on community service projects, and meet at least monthly with a case manager, establishing a one-on-one relationship with an adult.

In the process, Sieving says, they will become better connected at school, get help in coping with any violence they are dealing with in their lives, and become educated about risks of sexual behavior. "Our goal is to help participants build the skills, confidence, motivation, opportunities and social support that every teen needs to succeed," she says.

Sieving and her colleagues tested Prime Time strategies in a 1999-2004 pilot study and found the results encouraging. At the end of 12 months participants were reporting fewer sexual partners, and at the end of 18 months they were more consistently using contraception. "We also found that the program itself is highly acceptable to girls from resource-poor urban neighborhoods," Sieving says.

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From the Director

Dear readers:

As you may have noticed, our largest issue ever of Adolescent Health has a new look and much to say.

Three words define what drives our work and ambitions in the School of Nursing at University of Minnesota – engage, explore, excel. These words tell our students and post-doctoral fellows what they can expect when they come to our school and our Center for Adolescent Nursing. It also expresses the driving force behind our research and service.

We hope that our Center’s new look parallels our dynamic mission and ambitious goals expressed in “engage, explore, excel.” Our Center for Adolescent Nursing has thrived for nearly 15 years within the School of Nursing – growing from 1 to 8 Ph.D. and D.N.P. faculty, shepherding a dozen federal research and training grants, graduating over 60 nurses with M.S. and Ph.D. degrees with expertise in adolescent health, going to press with 150+ publications authored by faculty and students, and offering countless services and technical assistance to youth groups, parent organizations, professional societies, and state and federal governments. Our global reach has opened opportunities for students and faculty, both past and future. Perhaps most importantly, we hope to have been part of shaping clinical and public health practice serving young people and their families.

Our new look keeps us in concert with the changing identity of the School of Nursing, yet always waving the maroon and gold of the University of Minnesota. Our Center’s gold reflects our home, and we keep our green, bridging us back to our Center’s history (remember green and purple?). We hope our new look gives you a sense, too, of the connections from our past to our future.

With such an outstanding group of faculty, post-doctoral fellows, and students in our Center, picking and choosing the highlights for this issue presented a challenge. Our stories published in this issue reflect our collective – stories dealing with teen pregnancy, adolescent obesity, and distance learning. And, we follow one graduate’s journey from baccalaureate degree to a Ph.D. Most importantly we share the stories of two colleagues in our Center whose volunteerism after Katrina and the collapse of the 35W bridge over the Mississippi River touched many.

So, immerse yourself in this new issue. See the work of our new editor, Jenna Baumgartner, B.A. whose degree in communications brings new strength to our Center. Let us know if we strike a chord. We would like to hear from you.

Linda H. Bearinger, Ph.D., M.S., RN, FAAN
Professor and Director
Assistant Professor Carolyn Garcia, Ph.D., M.P.H., M.S., RN, has almost as many letters after her name as she does in her name. After receiving a bachelor of science from the University of Minnesota’s School of Nursing in 1994, she went on to get three master’s degrees—one in public health nursing (M.S.), with an emphasis on adolescent health, and one in maternal and child health (M.P.H.), both earned in 1997 and another M.P.H. in environmental and occupational health nursing in 2000. After that, she pursued her Ph.D., which she completed in 2004. A two-year stint as a post-doctoral fellow in the Center for Adolescent Nursing followed the completion of her Ph.D. Along the way, she has taken time out from her studies to help with relief efforts following such disasters as the 1994 tornadoes in Wisconsin, the 1996 hurricane in Puerto Rico, and, and the 9/11 Pentagon attack in 2001. This past August she headed up the Red Cross response when the 35W bridge collapsed over the Mississippi River. Her expertise at this point in her career is considerable. Yet she’s still on campus, now engaging others with her wide array of experience and knowledge as an assistant professor. In a recent interview, she talked about her decision to continue her education.

Why did you choose the University of Minnesota?
I’m from Minnesota, so it was the place I knew I wanted to go when I was in high school. It was accessible and affordable, so my initial decision was driven by logistics. Once I was a grad student, I wanted to be at the U of MN, because it has such a strong program in public health and nursing. The U of MN has a vibrant, well-known presence in adolescent health, both in its research and training programs, and that’s the direction my research took as a masters and doctoral student. It was a natural fit.

I was able to accomplish post-doc publishing and grant-writing goals working with flexible hours that included many weekends and evenings. Of course, having a supportive spouse helped to make this possible.

Did you work or teach while you pursued your post-doctoral studies?
No. My fellowship appointment was full-time, funded by a grant from the CDC [Centers for Disease Control and Prevention]. Because they want you to focus on developing yourself as a researcher during the post-doc, the CDC restricts the amount of time you can be employed outside of the post-doc fellowship. I had taught during some of my other studies, masters’ and Ph.D. programs, so I didn’t need to focus on developing teaching skills as much. I spent most of my energy publishing articles, conducting a secondary data analysis to enhance quantitative analytic skills, and developing, creating, and opening doors for the next steps on my research pathway.

What are your research interests?
I am interested in the health of immigrant Latino youth, and their access to the U.S. health care system interest me greatly. I’m specifically moving in the direction of addressing their coping abilities and promoting mental health. When I was doing interviews for my dissertation, youth spoke often about being depressed and anxious and having suicidal thoughts. I’m building on those findings, responding to community interest in this area, and

With four degrees already, including a Ph.D., what made you decide to pursue post-doctoral studies?
A post-doc is a great opportunity to refine your research skills and focus on publications to prepare for a tenure track faculty position. You get more intensive mentoring, and you develop skills in all those areas needed to be successful in academia.

Did the post-doc allow you the flexibility to balance the demands of school and family responsibilities?
I have two children—and at the time they were three-and-a-half years old and 11-months-old. For me, this post-doc was ideal for this season of my life. It gave me the opportunity to further my research and publishing skills, while being able to do some work at home and to be with my kids.

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looking at how Latino youth perceive mental health and what their needs are in terms of access to education and services. In my first year after the post-doc, along with a colleague in family medicine, I received a University grant for a one-day Latino/a youth conference for the Twin Cities’ community. The participants at the conference reflected the array of community- and university-based colleagues I developed during my pre- and post-doctoral studies.

What kind of research methods are you using?
I’ve been going out into the Latino community, working with other health and social service agencies, sitting down with parents and teenagers, and asking them, “What do you know about mental health?” “What do you want to know?” And “What do you need in terms of services?” This is community-based participatory research, involving those the research is about and meant to benefit. I’ve also just completed a secondary analysis of 2004 Minnesota Student Survey data looking at the influence of family factors on Latino adolescents’ mental health, specifically depression and suicidal ideation. The findings were presented nationally at the 2007 Society for Adolescent Medicine annual meeting, soon to be published in the *Journal of School Health*.

Are you content to be done with school?
When I’m playing with my kids, I think to myself that I should pursue a Ph.D. in child development, but I’ll just have to be content with reading the latest literature. You can stay interested in other fields without pursuing another degree. It is my time to be on the faculty, conducting research, and inspiring the future generation of nurse researchers, educators, and practitioners!

What’s the focus of your time now in your faculty role?
In addition to my research activities, I’m teaching and coordinating the public health nursing courses for undergraduate and post-baccalaureate students. Besides being part of the Center for Adolescent Nursing, I’m also a member of the Center for Child and Family Health Promotion Research.

For more information on Dr. Garcia’s research you can contact her at <garcia@umn.edu>.

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The current project is a more stringent test of the Prime Time intervention than the 1999 study, since it randomly assigns girls to either Prime Time or a comparison group. Random assignment is considered a “gold standard” in intervention research.

Designed for use in clinics
Another goal of Prime Time is to improve the capacity of health clinics to prevent risky behaviors among their teenage patients by promoting healthy youth development. The project represents one of the first times such a youth development model has been adapted and tested for use by health clinics.

“We are excited—we think Prime Time has breakthrough potential,” says Sieving. “Because many adolescent girls at high risk for early pregnancy do go to health clinics, it stands to reason that boosting clinics’ ability to provide help that is proven to be effective could make a profound difference in the nation’s teen pregnancy problem—and in the lives of thousands of young people.”

Prime Time is funded by a five-year grant from the National Institute of Nursing Research, which is part of the National Institutes of Health. Besides Sieving, who is the principal investigator, the multi-disciplinary research team includes School of Nursing professors Linda Bearinger, Ph.D., M.S., FAAN, and Ann Garwick, Ph.D., FAAN; and Medical School Department of Pediatrics Professor Michael Resnick, Ph.D.
Young People Abroad and At Home: Keys to the Future

For the first time in two centuries, children born today in the U.S. may have shorter life expectancies than their parents. Obesity lies at the heart of this sad prediction, yet it is only one of a number of issues that threaten the health of young people at home and abroad.

Abroad
Globally, health professionals working with youth remain alert to common threats. Chronic conditions, substance use, violence, reproductive and mental health concerns top the list — which is why Lancet, a premier medical journal worldwide, decided to focus a series of six articles on young people, titling their lead editorial, “Adolescent health: an opportunity not to be missed.”

Adolescents, a group often overlooked by health providers — too old for pediatrics, too young for adult health — suffer disproportionately, the consequences of inadequate care. Today’s generation of adolescents is the largest in history — worldwide 1.5 billion between the ages of 12 and 24. Yet, health providers describe feeling ill-prepared to address even some of the most common concerns of this growing population. Moreover, health services fall far short of being suited to the needs of this age group.

Responding to an invitation from the editors of Lancet, Drs. Linda Bearinger and Renee Sieving, of the Center for Adolescent Nursing, along with adolescent health experts from four continents, set about creating a series of articles that together would convey the challenges as well as the opportunities not to be missed if we are to assure a healthy future for today’s youth.

In their article published in the March 2007 Lancet issue, Bearinger and Sieving, along with co-authors from the World Health Organization (London, England) and the United Nations Population Fund (Amman, Jordan) detailed the critical issues affecting young people’s sexual and reproductive health.

Urbanization, poverty, and lack of education underlie the vast differences in reproductive health outcomes such as early pregnancy and sexually transmitted infections. Other societal issues contribute significantly to risk — issues such as age discrepancies between male and female partners, gender differences in norms for sexual behavior (expected for males, while negatively sanctioned for females) and early marriage.

Three key strategies, described in the Lancet article, offer a pathway for improving reproductive health outcomes: quality youth-friendly services provided by clinicians trained to work with this population; sex education programs that offer accurate and comprehensive life skills; youth development programs that connect young people with supportive adults and educational and economic opportunities.

At home
As each Lancet article argued, responding quickly and effectively to the health needs of adolescents means preventing problems that, if unresolved, may become lifelong ills. This is why, at home, faculty and researchers in the Center for Adolescent Nursing, continue to design and test ways of preventing problems early on and promoting healthy development throughout adolescence. As described in several articles in this issues of Adolescent Health Sieving and colleagues, with NIH support, currently work with girls in community and school-based clinics to reduce sexual risk and violence involvement while keeping them connected with school. Dr. Martha (Martl) Kubik, assistant professor in the Center, created and tested Team COOL, hoping to encourage teens in alternative learning centers to get active and exercise while eating right as well. Dr. Carolyn Garcia, in her second year on faculty, is working with Latino/a youth in charter schools to develop ways to assess perceptions of mental health, particularly among those who have recently immigrated.
Volunteering in Crisis:
Colleagues Serve in Louisiana and at Home

With two devastating events in the U.S. — Hurricane Katrina and the collapse of the 35W bridge over the Mississippi River, two Center for Adolescent Nursing colleagues quickly moved into lead roles with volunteer agencies.

Public health skills aid Harpin in creating relief clinics in Louisiana

After the disaster of Hurricane Katrina, many people wondered what they could do to help. Scott Harpin, M.S., M.P.H., RN, felt that pull. Harpin, a second-year Ph.D. student and recruiter for the Center for Adolescent Nursing, joined about 60 other University of Minnesota and Mayo Clinic volunteers, who were mobilized to form Minnesota Lifeline, a medical reserve corps in the model designed after 9-11. The Minnesota Lifeline volunteers based their operations in Lafayette, Louisiana.

Harpin’s background as a public health nurse paid off. He and others set up impromptu primary care clinics in emergency shelters, administered immunizations to evacuees and other healthcare volunteers, addressed the acute care health needs of patients, and sometimes simply “offered an ear” to those who needed it. As Harpin described, “Very few people on the team had a public health background, let alone public health nursing experience. This was instrumental in my role in helping to build relationships with the local nurses and leaders dealing with crisis.”

Harpin reflected on his experience, describing it as very humbling yet fulfilling. “Everyone we encountered, everyone we worked with, were very grateful that we came down to help. We and the evacuees felt the warmth from people across America who weren’t able to help directly.”

After returning from this volunteer effort, Harpin had poignant stories to tell, and some touching photos and examples to show colleagues and students. The U of MN honored Harpin and other Minnesota Lifeline volunteers for their relief work.

The events during his two weeks in Louisiana so moved Harpin that he went back on his own during the following spring break, working beside newfound friends and colleagues. When reminiscing on his trip he says he is reminded again of the amazing work done by public health nurses on a day-to-day basis. Harpin says, “This has been an experience that has affected me deeply. It has been an incredible honor to serve in this way.”

9/11 disaster relief experiences move Garcia into action with bridge collapse

On August 1st, 2007, disaster struck at home. The 35W bridge over the Mississippi, one of the largest and most traveled bridges in Minnesota, collapsed during rush hour. The last day of our annual Summer Institute in Adolescent Health had ended and participants were making their way home. Reports were scattered; hundreds were presumed injured, many presumed dead, and thousands wondered what had happened. “What could I do?”, many were asking.

Seeing the massive catastrophe for the first time, Carolyn Garcia, Ph.D., M.P.H., RN, assistant professor in the Center for Adolescent Nursing and former graduate of our Center, launched into disaster mode. A 14-year volunteer with the Red Cross Disaster Health Services (DHS), Garcia is well-versed in attending to disasters, having aided others during tornadoes in Wisconsin, hurricanes in Puerto Rico, and the plane crash into the Pentagon on September 11th. Working with burn patients in Washington, DC after 9/11 prepared for the role she was about to assume.

On the evening of the collapse Garcia immediately started contacting other volunteer Red Cross DHS members. The official call for duty came at 5:30 a.m. the following morning. With the planning underway the night before, setting up the Emergency Operations Center on the river banks went smoothly, allowing Garcia and fellow volunteers to attend to the victims, their families, and others devastated by this disaster. “Because of the Red Cross...
infrastructure and training, I knew what to do at the time it was needed and how to do it,” she said. “We didn’t need a couple of days to figure out what we were doing; we were able to engage right away and start getting the job done.”

The job of Garcia and her team was not simple. First responses focused on gathering information as well as attending to victims, offering support and assistance, both physically and mentally. With many injured, unaccounted for, and some already pronounced dead, Red Cross DHS started the difficult task of identifying each person, creating a registry helping families to locate their loved ones, and notifying families of the deceased.

Many at the University dedicated their time and offered their skills in the days after the collapse—nurses as well as nursing students, physicians, and other health professionals. “The number of hours that have been volunteered is phenomenal. These nurses have really been able to capitalize on their connections and resources for the Red Cross; they have been an amazing group of people,” Garcia said.

Although it has been several months since the collapse, Garcia and the Red Cross DHS continue to aid victims and their families. “Though media attention has waned, the victims continue to struggle through the emotional and physical recovery from this disaster,” Garcia said. “Not only the victims who were directly affected, but those who attempted to rescue and were unable to do so, and those who fled in fear because they didn’t know what else to do also are struggling to recover.

“I am grateful I had the chance to offer myself in service when the bridge collapsed,” she said. “I will take this experience with me to the next disaster I serve and feel confident that we will do what needs to be done, offering hope and comforting victims and their families.”

Though honored nationally—with National Disaster Services 2003 Volunteer of the Year award, Garcia takes on her faculty role within the Center for Adolescent Nursing with equal energy and enthusiasm. Both graduate and undergraduate students seek out her expertise in public health nursing. Her research, which crosses several schools within the U of MN’s Academic Health Center, is helping to describe the experiences and perspectives of Latino/a adolescents in staying healthy and seeking health care.

On August 1st, 2007 Minnesotans suffered a great loss. One of the main (transportation) arteries running through Minneapolis, the 35W bridge spanning the Mississippi River, collapsed during the middle of rush hour. Hundreds were feared injured and dead, as the reality set in around the Twin Cities. Aid from seven counties, local hospitals and employees, civilians, and several volunteer agencies like the Red Cross, immediately offered help and support. In the aftermath of this disaster, 13 lives were lost and 100 people were injured. Had it not been for the quick thinking and fast action of all involved, the tragedy could have been worse.

This disastrous accident, along with the catastrophic devastation caused by Hurricane Katrina have demonstrated how nurses and nursing background has prepared and motivated individuals to provide assistance to those in need. Both Garcia and Harpain have attributed their preparedness to respond to events such as these to the skills they learned in nursing.
Weight management, motivational counseling, stress management, and mood and anxiety disorders are just a handful of interests Mary Alm, Ph.D., is pursuing during her post-doctoral fellowship. Alm’s research interests primarily focus on the psychosocial factors relating to preventing and treating adolescents for being overweight or obese. Having clinical experience in providing assessment and therapeutic treatment to children and their families allows Alm to incorporate that experience into her fellowship.

Focusing on physical activity to prevent and/or treat weight-related health conditions in minority and youth populations, Daheia Barr-Anderson, Ph.D., is a welcome addition to the post-doctoral fellows in CAN. Before joining CAN, Barr-Anderson completed a Minority Health Disparities Fellowship in Hyattsville, Maryland at the National Center for Health Statistics where she studied disparities in health outcomes between U.S. and foreign-born Blacks. Barr-Anderson aims toward a faculty position where she can continue her research in addressing health disparities.

As a nutrition fellow, Teri Burgess-Champoux, Ph.D., RD, LD, specializes in the areas of clinical nutrition, nutrition education, and dietetics education and is a site visitor for the Commission on Accreditation of Dietetic Education Programs for the American Dietetic Association. Child and adolescent nutrition, nutritional epidemiology and teen health are just a few research interests Burgess-Champoux is exploring during her post-doctoral position through CAN.

Lynn Choromanski, B.S.N., M.S., RN, a pre-doctoral trainee, focuses her work on health informatics while also incorporating adolescent health as a focal point. Having a master’s degree in nurse midwifery and previously working at Robbinsdale Cooper High School has given Choromanski dynamic perspectives of development from childhood through adolescence.

Gretchen Cutler, M.P.H., is no stranger to the University of Minnesota. She received a B.A. in biology and child psychology, an M.P.H. in epidemiology, and is currently pursuing a Ph.D. in epidemiology, all at the University of Minnesota. As a pre-doctoral trainee on the CDC Adolescent Health Protection Research Training Program grant, Cutler’s interest revolve around dietary intake and the role it plays in the development of obesity in adolescents. Her interests also lead her toward assessing the associations between dietary intake and cancer outcomes, and how obesity early in life may impact cancer development later in life.

Naomi Duke, M.D., M.P.H., is currently a post-doctoral fellow also supported by CDC training grant. She completed specialty medical training in adolescent health through Leadership, Education in Adolescent Health (LEAH) fellowship. Before attending the University of Minnesota, she studied at Harvard Medical School, receiving her M.D., and did her internship and residency at the University of Michigan. Duke is pursuing her research interests on adolescent health policy development, community partnership and advocacy, and social capital in healthy youth development.

Marathons, triathlons, high school sports, Division I and III college events, and national competitions are just a few places you might have found Nicholas Edwards, M.D., this past summer. Edwards started his academic studies at the University of Wisconsin, Madison, obtaining a B.S. in molecular biology. Hurdling forward, he then attained his MD followed by a residency in pediatrics. Some topics of Edwards’
research include investigating COPD mortality in Wisconsin women, influenza vaccination in children, and MRSA infections in college athletes. Edwards is a post-doctoral fellow on the CDC Adolescent Health Protection Research Training grant and will complete an M.P.H. in the year ahead.

Health education and health promotion among children and adolescents has long been an interest for Claudia Fox, M.D. Fox is participating in her first year as a post-doctoral fellow in CAN. Completing her M.D. at the University of Minnesota, she followed with a rotation in pediatric residency. In addition to a strong focus in health education and health promotion, Fox is increasingly interested in understanding how fitness and nutrition are related to adolescents’ mental health status.

Scott Harpin, M.S., M.P.H., APRN-BC, is a second-year student in the doctoral program in the School of Nursing. A dual degree graduate ('93, M.S./M.P.H) of CAN, he has spent the past three years teaching public health nursing to undergraduates as a faculty member in the UMN School of Nursing. His research interests include healthcare access for out-of-home youth, social capital in teenagers, and public health policy.

Adolescents and physical activity are two things that capture the interest of Aanna Johnannes, B.A. is pursuing an M.S. degree in adolescent nursing while working with Dr. Marti Kubik on the TEAM COOL project. A plan to write her Master's project with a focus on physical activity promotion among adolescents attending alternative high schools makes her efforts on the TEAM COOL project even more rewarding and resourceful. She is supported by the Leadership Education in Nursing grant from the Maternal and Child Health Bureau (MCHB)(HRSA, DHHS).

DenYelle Baete Kenyon, Ph.D., comes to the CAN for a post-doctoral fellowship in adolescent health from Arizona State University where she received her masters and doctorate in Family Studies and Human Development. Kenyon has focused her research on topics such as post-divorce parent-adolescent relationships and after-school activities. During her fellowship, Kenyon plans to extend her research on adolescent health and development by studying transitions after high school.

Coming from our satellite school in Rochester, Minnesota, Elizabeth Lando, B.S.N., pre-doctoral trainee, has been working with Dr. Marti Kubik on her pilot study called Team COOL. This study focuses on adolescents, who are in alternative learning centers, and their eating habits. Ms. Lando is in her first year as a pre-doctoral trainee supported by the CDC Adolescent Health Protection Research Training grant.

Ramona Robinson-O'Brien, Ph.D., RD, focusing on nutrition, joins CAN as a post-doctoral fellow supported by our CDC-funded Adolescent Health Protection Research Training grant. Robinson-O'Brien is energized by her interests in identifying innovative and effective obesity prevention programs involving youth and their families.

A previous masters student in CAN, Sarah Stoddard, M.S., RN, CNP, has completed her second year of the Ph.D. program in nursing. Her background includes working as a public health nurse with pregnant and parenting adolescents and as a pediatric nurse practitioner in school-based and community-based clinics. Prior to beginning the Ph.D. program, Stoddard served as the Minnesota State Adolescent Health Coordinator at the Minnesota Department of Health. Stoddard's research interest focuses on examining trajectories of risk and protective factors in high-risk youth, particularly considering the role of hope in promoting resilience.

Working as a nurse at St. Joseph’s Home for Children, Kelly Stursa, B.S., RN, has seen her share of the problems and health concerns common among teenagers. Witnessing these issues first hand has given Stursa the drive to go back and enroll in the adolescent nursing M.S. program in CAN. Stursa hopes her studies will help to energize and encourage advocating pro-actively for changes in policies that would improve health in this population. Stursa is supported by the nursing MCHB grant (HRSA, DHHS).

Steph Walters, M.D., often questioned the "big picture" in regard to the lack of youth patient advocacy during her medical residency. However, obtaining her post-doctoral fellowship through the Center for Adolescent Nursing allows Walters to examine the "big picture" while providing her with the right combination of medicine, research, and leadership training. Walters graduated from Grinnell College and Minnesota’s Medical School. Funds from the CDC Adolescent Health Protection Research Training grant has made Walters post-doctoral program a reality.
Teens and Obesity: Kubik’s Research, Hot Topic in the News

When Martha (Mart) Kubik worked as an adult nurse practitioner, hypertension, diabetes, and heart disease were all too common among the middle-aged adults. “They were frustrated and overwhelmed with having to change lifestyle habits in the midst of being told they had a chronic disease that could possibly shorten their life,” says Kubik, Ph.D., an assistant professor at the University of Minnesota’s School of Nursing and Center for Adolescent Nursing.

After years of repeating the same message to her adult patients, Kubik was frustrated too. Recognizing that lifestyle behaviors such as eating and exercise practices are developed during childhood, Kubik gradually shifted her sole focus to young people, in the hope that promoting healthy lifestyle choices among children and adolescents would improve children’s health as well as reduce the incidence and prevalence of chronic illness among adults.

With the national obesity epidemic constantly in the media and weighing heavily on the minds of Americans, Kubik’s research, using community-based interventions, has drawn widespread attention. When her findings from a study showing the impact of school food practices on students’ average body mass index (BMI) were reported in the Archives of Pediatrics and Adolescent Medicine, more than 200 electronic and print news media organizations picked up the story—including the National Public Radio, The Washington Post, CBS News, and even Web India.

Using data collected as part of the TEENS (Teens Eating for Energy and Nutrition at School) study, funded by the NIH (Dr. Leslie Lytle, U of MN School of Public Health, Principal Investigator), Kubik evaluated associations between the BMIs (a measure of height and weight) of over 3,000 middle-school students and the number of food practices allowed at their schools. Specifically, she and colleagues were looking at whether students were allowed to eat and drink in the classroom and hallways, whether food was used in classroom or schoolwide fund-raising efforts, and whether teachers used food or food coupons in the classroom as rewards and incentives.

What did they learn that caught the attention of the press? The study found that students’ average BMI increased for every additional food practice a school allowed. Most commonly, food was used as rewards or incentives in the classroom, followed by using food in classroom fundraising. On average, schools permitted three of the seven food practices assessed in the study.

Kubik also used data from the TEENS study to look at the association between the availability of certain food venues at school and student eating habits. Among other things, this study found that students in schools with with an à la carte line option had higher saturated fat intakes and consumed fewer fruits and vegetables, on average, than students at schools without the à la carte option, regardless of the students purchasing a la carte items. “Young people are influenced by what their peers eat, even if they aren’t purchasing a la carte themselves,” explains Kubik.

With more than 70 percent of teachers using candy as rewards and incentives, and with 56 percent of schools using candy in their fund-raising efforts, the issue of food at school clearly extends well beyond the cafeteria. Vending machines and school stores also tend to make junk food and high-calorie sweetened beverages readily available.

“School nutrition policies restricting or limiting the availability of low nutrient, high calorie food and beverages in school settings are urgently needed,” Kubik argues. “Unfortunately, few schools currently have such policies, and enforcement of policies is often a problem.”

“Schools are important environments for young people,” Kubik says, “and their role in promoting and supporting youth in developing healthy lifestyle habits is critical. School staff, parents, students and researchers have an opportunity to work together to create a healthy school food environment, on in which healthy foods are easily available and healthy food choice by students becomes the norm.”

To read more about the TEENS study, see the article “Schoolwide Food Practices Are Associated With Body Mass Index in Middle School Students,” which Kubik co-authored with Drs. Leslie Lytle and Mary Story, both of whom work in the U of MN’s School of Public Health, Division of Epidemiology. The article was published in the December 2005 edition of the Archives of Pediatrics and Adolescent Medicine. An abstract can be downloaded at www.archpediatrics.com.
Center Administration and Communications Team

Mike Edie, Associate Administrator for the Center for Adolescent Nursing, has been with the Center since 2005. Edie is no stranger to the University of Minnesota though; he has worked in the School of Nursing, the College of Agricultural, Food and Environmental Sciences, and the University’s Admissions Office. Edie has also worked with adults and children, who suffer from traumatic brain and spinal injuries, in a therapeutic program using horses. He has vast knowledge of several different computer programs and is an accomplished musician.

Bringing a wealth of knowledge, being able to do just about anything, willing to help out at anytime, and having a wonderful and fun attitude, Edie is a welcomed addition to the Center for Adolescent Nursing, managing all financial aspects for our 23 current students and fellows.

Jenna Baumgartner, B.A., Communications and Events Coordinator for the Center for Adolescent Nursing, started with the Center five years ago as a student worker. Beginning her freshman year, she continued on throughout her undergraduate college career with the Center. After graduation, Baumgartner was appointed to a full-time position in January 2007, responsible for all communications and events planning for the Center.

Baumgartner uses her communications degree, earned from the University of Minnesota, in the new position. She writes for and edits our Adolescent Health newsletter, works with website design, layout and content, and plans and implements our conferences and institutes. This past year she took the lead on program development for a one-day Latino/a youth summit followed by our 2007 Four-day Summer Institute in Adolescent Health. Baumgartner also provides editorial assistance for manuscripts and grant proposals.
Recognition

Kudos

Professor Linda H. Bearinger, Ph.D., M.S., RN, FAAN, selected to serve on the National Academies', Institute of Medicine’s Committee on Adolescent Health Care Services and Models of Care for Treatment, Prevention, and Healthy Development. Dr. Bearinger participated in five, two-day meetings, in Washington, D.C., California, and Massachusetts drafting a chapter on interdisciplinary training and education with Center faculty, Dr. Carolyn Garcia, for the Committee’s final report.

Congratulations to Ph.D. candidates Molly Secor-Turner, M.S., and Lisa Martin-Crawford, M.S., for successfully completing their Ph.D. preliminary orals. Now their focus is on writing dissertations with topics on social messages around sexuality for African-American girls, and urban American Indian youth living with type 2 diabetes, respectively.


Kudos to Dr. Carolyn Garcia, Ph.D., M.P.H., M.S., RN, Assistant Professor and Densford Clinical Scholar, on receiving the 2006 Sigma Theta Tau International/MNRS grant for her project, “Development of an instrument to measure Latino mental health knowledge using community-based participatory action research.” She also received a Center for Urban and Regional Affairs (CURA) grant, allowing her to assess the affordability, access and levels of health care, and examine the differences in perceived health insurance affordability among insured and uninsured populations.

Nicole Larson, Ph.D., M.P.H., RD, received a student research award from the Society for Nutrition Education for an abstract titled: “Longitudinal predictors of fruit and vegetable intake during the transition to young adulthood.”

Congratulations to graduate student Molly Secor-Turner, M.S., RN, who received a Ruth L. Kirschstein National Research Service Award Individual Fellowship (NRSA F31) from NINR to conduct her dissertation, “Social messages and teen sexual health: Voices of urban African American youth.” She will be in North Minneapolis interviewing young African-American women about their experiences with social messages during their adolescence. Renee Sieving, Ph.D., CAN faculty is Secor-Turner’s lead sponsor.

Lynn Choromanski, M.S., RN, was selected to present her research at the Midwest Nursing Research Society Conference in March 2008.

Congratulations to Terryann Clark, Ph.D., M.P.H., on successfully defending her Ph.D. orals. Dr. Clark’s dissertation was titled: “Factors associated with reduced depression and suicide risk among Māori youth in New Zealand.” A prestigious award from the University of Minnesota’s Graduate School helped Dr. Clark complete her dissertation.
Beyond objective and balanced: Writing constructive manuscript reviews.
Linda H. Bearinger

Global perspectives on the sexual and reproductive health of adolescents: Patterns, prevention, and potential.
Linda H. Bearinger, Renee E. Sieving, Jane Ferguson, Vinit Sharma
Worldwide, societal shifts and behavioural patterns exacerbated by unique developmental vulnerabilities create a confluence of factors that place today's adolescents at heightened risks for poor health outcomes. Country-level data show that continued investment in effective prevention and treatment strategies is essential to protect adolescents' sexual and reproductive health. Whereas strategies must be tailored to the developmental needs of this age group and their social contexts, effective approaches are multifaceted. All adolescents need access to quality youth-friendly services provided by clinicians trained to work with this population. Sex education programmes should offer accurate, comprehensive information while building skills for negotiating sexual behaviours. Girls and boys also need equal access to youth development programmes that connect them with supportive adults and with educational and economic opportunities. Although progress has been made since the 1994 International Conference on Population and Development, adolescents continue to be disproportionately burdened by threats to their sexual and reproductive health. *Lancet*, 2007; 369(9568): 1220-1231.

Adolescent utilization of complementary therapies.
Carie Braun, Linda H. Bearinger, Linda Halcon
PURPOSE: Interest in alternative/complementary therapies (A/CTs) is on the rise, yet little is known about adolescents' use of A/CTs. The study purpose was to examine A/CT utilization patterns among a clinic-based sample of adolescents. METHODS: A cross-sectional survey of 401 adolescents, aged 12-18 years, was conducted in one Midwest urban adolescent ambulatory clinic in 2002. RESULTS: Overall, 68.1% of the adolescents reported using one or more A/CT; most commonly, herbal medicines (27.2%), massage therapy (26.7%), and megavitamins (21.7%). Use by friends and family was the primary influence for adolescent A/CT use; lack of familiarity was the greatest reason for nonuse (53.9%). Alleviation of physical pain (66.3%) was the most common desired health outcome. Few adolescents (13.8%) disclosed A/CT use to their health care providers. Insurance coverage was provided for 10.2% of the therapies and out-of-pocket costs averaged 67 dollars/month. Age, race/ethnicity, having a health condition, taking medications, health responsibility, and work status were associated with overall A/CT use in bivariate analyses. Of these, only associations between A/CT use and race/ethnicity and health responsibility remained statistically significant after adjusting for the other variables. CONCLUSIONS: Use of A/CTs was common among these adolescents, yet very few disclosed their use to health care providers. Providers must ask about A/CT use to gain a more complete understanding of health practices among adolescents in clinical settings. Future research is needed to better understand representative patterns of A/CT use. *Journal of Adolescent Health*, 2005; 37(1): 76-84.

Parents’ communication with adolescents about sexual behavior: A missed opportunity for prevention?
Marla E. Eisenberg, Renee E. Sieving, Linda H. Bearinger, Carolyne Swain, Michael D. Resnick
Parents may wait to talk to their teens about sexuality until they believe their child is in a romantic relationship. To examine this, telephone surveys were conducted with 1069 parents of adolescents. Measures assessed parents’ perceptions of teens’ romantic involvement and parent-child communication about several sexuality topics. Multivariable regression models determined the odds of talking about each topic among parents who reported their teen had been in a romantic relationship compared to those who did not. Most parents reported talking at least a moderate amount about some sex-related topic. Parents who believed their teen had been romantically involved were more likely to have discussed most of the topics examined here (ORs = 1.64-2.56). For some topics, associations were more pronounced among parents of younger teens. Findings suggest that parents may miss important opportunities to influence behavior, and should initiate conversations about sexuality before they believe their child to be romantically involved. *Journal of Youth and Adolescence*, 2006; 35(6), 893-902.

Perceptions of health among Latino adolescents from Mexico.
Carolyn M. Garcia, Laura J. Duckett, Elizabeth M. Saewyc, Linda H. Bearinger
Perceptions of mental health among recently immigrated Mexican adolescents.
Carolyn M. Garcia, Elizabeth M. Saewyc
Rates of anxiety, depression, and suicidal ideation are high among Latino adolescents in the U.S., many of whom are immigrants. Immigration during adolescence creates risk factors for mental health problems. The purpose of this study was to explore the health-related perceptions of Mexican-origin immigrant adolescents to inform the design of culturally and developmentally appropriate mental health services. This focused ethnography was guided by Bronfenbrenner’s ecological framework and symbolic interactionism. Fourteen adolescents were recruited from two non-health-based community settings. Data from one-to-one semi-structured interviews and a visual narrative project were coded and analyzed inductively. Three thematic patterns were identified: “mentally healthy,” “mentally unhealthy,” and “health promotion.” Increased awareness of cultural influences and immigration on Latino adolescents’ mental health is needed. Mental health nurses are in a unique position to educate and to influence accessibility of services.


Influencing healthy food choices in school and home environments: Results from the TEENS study.
Leslie Lytle, Martha Y. Kubik, Cheryl Perry, Mary Story, Amanda Birnbaum, David Murray
Background: The purpose of this research is to examine the effects of an intervention designed to increase the availability of fruits, vegetables and lower fat foods in homes and schools. This research is part of the TEENS study, a school-based intervention study. Methods: Sixteen schools in Minnesota were recruited to be in the study, and approximately 3600 middle school students in the eight intervention schools were exposed to a multi-component intervention. The TEENS intervention included classroom-based curricula, family newsletters, and changes in the school food environment including increasing more healthful options on a la carte and on the school lunch line. In addition to student-level outcomes, changes in availability of fruits, vegetables, and lower fat snacks in home and school environments were evaluated. The TEENS intervention was conducted from 1997 to 2000. Results: Parents of students in intervention schools reported making healthier choices when grocery shopping as compared to parents of students in control schools (P = 0.01). No intervention effects were evident from a home food inventory. Compared to control schools, intervention schools offered (P = 0.04) and sold (P = 0.07) a higher proportion of healthier foods on a la carte, but no effects were seen for fruit and vegetables sales as part of the regular meal pattern lunch. Conclusion: Our results show mixed results for positively influencing adolescents’ school and home environments.


Noise and hearing protection: Latino construction workers experiences.
Cheryl Robertson, Madeleine J. Kerr, Carolyn M. Garcia, Eve Halterman
This study explored Latino construction workers’ experiences with occupational noise and hearing protection to provide qualitative data to be used in designing an intervention to prevent noise-induced hearing loss. An ecological framework provided the theoretical foundation for this study. Fifteen Latino construction workers participated in one of four focus groups exploring perceptions of exposure to noise on the job and barriers to and supports for wearing hearing protection. Support for an ecological framework was apparent in the environmental and personal factors revealed in the data: how it feels, personal responsibility, they make us wear it, we don’t care about ears, it won’t happen to me, being Latino, keeping our jobs, hearing protection is uncomfortable, and we can handle it. Researchers are applying results of this study in the development of a hearing conservation intervention for Latino construction workers to be evaluated in a randomized, controlled trial.


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Somali and Oromo refugee women: Trauma and associated factors.
Cheryl Robertson, Linda L. Halcon, Kay Savik, David Johnson, Marline Springer, James Butcher, Joseph Westermeyer, James Jaranson
Aim: This paper reports a study identifying the demographic characteristics, self-reported trauma and torture prevalence, and association of trauma experience and health and social problems among Somali and Oromo women refugees. Background: Nearly all refugees have experienced losses, and many have suffered multiple traumatic experiences, including torture. Their vulnerability to isolation is exacerbated by poverty, grief, and lack of education, literacy, and skills in the language of the receiving country. Method: Using data from a cross-sectional population-based survey, conducted from July 1999 to September 2001, with 1134 Somali and Oromo refugees living in the United States of America, a sub-
sample of female participants with clearly identified parenting status (n = 458) were analysed. Measures included demographics, history of trauma and torture, scales for physical, psychological, and social problems, and a post-traumatic stress symptom checklist. Findings: Results indicated high overall trauma and torture exposure, and associated physical, social and psychological problems. Women with large families reported statistically significantly higher counts of reported trauma (mean 30, P < 0.001) and torture (mean 3, P < 0.001), and more associated problems (P < 0.001) than the other two groups. Women who reported higher levels of trauma and torture were also older (P < 0.001), had more family responsibilities, had less formal education (P < 0.001) and were less likely to speak English (P < 0.001). Conclusion: These findings suggest a need for nurses, and especially public health nurses who work with refugee and immigrant populations in the community, to develop a more comprehensive understanding of the range of refugee women’s experiences and the continuum of needs post-migration, particularly among older women with large family responsibilities. Nurses, with their holistic framework, are ideally suited to partner with refugee women to expand their health agenda beyond the biomedical model to promote healing and reconnection with families and communities.

*Journal of Advanced Nursing, 2007; 56(6), 577-587.*

A national needs assessment of nurses providing health care to adolescents.
Elizabeth M. Saewyc, Linda H. Bearinger, Gail McMahon, Theora Evans.

Nurses, as the largest group of health providers in the United States, and by virtue of their scope of practice, are in an important position to promote the health of adolescents. A national survey of nurse members of the American Public Health Association, the National Association of Pediatric Nurse Associates and Practitioners, and the National Association of School Nurses was conducted in 1997 (n = 520) and was compared with findings from a parallel survey conducted in 1985 that assessed perceived competence in addressing common adolescent health issues, relevance of those issues to nurses’ practice, and leadership skills. Findings provided a hopeful yet cautious picture of nurses’ competencies. Strong increases in the proportion of nurses who felt equipped to address common health problems of youth suggest improved adolescent health education among nurses. Yet, at least 25% of nurses indicated a low level of knowledge in half of the adolescent health areas, and, like 1985’s nurses, most nurses in 1997 did not feel competent to address the needs of gay, lesbian, and bisexual youth. Several priority areas in Healthy People 2010 were considered by 25% or more of the nurses to be irrelevant to their practice, including smoking cessation, suicide, violence, and pregnancy. The task remains to assure that all nurses who work with adolescents are equipped to respond to their diverse and unique health needs.

*Journal of Professional Nursing, 2006; 22(5), 304-313.*

Hazards of stigma: The sexual and physical abuse of gay, lesbian, and bisexual adolescents in the United States and Canada.
Elizabeth M. Saewyc, Carol Skay, Sandra L. Pettingell, Elizabeth Reis, Linda H. Bearinger, Michael D. Resnick, Aileen Murphy, Combs Leigh.

Some studies suggest lesbian, gay, and bisexual (LGB) teens are at higher risk than peers for violence at home, in school, and in the community. That can bring them into the child welfare system or services for runaway and homeless teens. This study compared self-reported experiences of sexual and physical abuse based on sexual orientation and gender in seven population-based surveys of youth. The authors used c2 and age-adjusted odds of abuse to compare bisexual to heterosexual, mostly heterosexual, and gay and lesbian students. They also provide case studies to illustrate the experiences of such youth.


Adolescent dual method use: Relevant attitudes, normative beliefs and self-efficacy.
Renee E. Sieving, Linda H. Bearinger, Michael D. Resnick, Sandra Pettingell, Carol Skay.

Purpose: To encourage dual contraceptive method use—protection from both STD and pregnancy—health behavior change efforts must target powerful risk and protective factors that are amenable to change. This study examines longitudinal relationships between adolescents’ contraceptive-related cognitions and dual method use. Methods: Data are from 1123 sexually active 7–11th-grade participants in the National Longitudinal Study of Adolescent Health, Waves 1 and 2 (W1, W2). A series of nested path models examined relationships between participants’ contraceptive use level at most recent intercourse (zero, one, two methods) and contraceptive-related cognitions. Parallel analyses were completed with four grade/gender groups. Results: Dual method use at most recent intercourse ranged from 14.3% to 25.0%. Path models suggested that contraceptive use levels and contraceptive-related cognitions were moderately stable over time. Cross-sectionally, contraceptive use level was associated with parent approval of birth control (older youth, younger girls), birth control attitudes (older youth, younger boys), perceived pregnancy consequences...
Friends’ influence on adolescents’ first sexual intercourse.
Renee E. Sieving, Marla E. Eisenberg, Sandra Pettingell, Carol Skay

CONTEXT: Social-psychological theories of health behaviors suggest that adolescents’ sexual behaviors are influenced by the sexual attitudes and behaviors of their friends. METHODS: Data on 2,436 participants in the National Longitudinal Study of Adolescent Health (Add Health) who were sexually inexperienced at Wave 1 (1994-1995) were analyzed to examine whether friend-related variables predicted initiation of vaginal intercourse by Wave 2 (1996). Analyses also asked whether predictive relationships varied by level of involvement with friends. Odds ratios were generated by logistic regression analysis. RESULTS: In the 9-18 months between Waves 1 and 2, 18% of participants initiated intercourse. In analyses controlling for gender, family structure and romantic relationships, the higher the proportion of a youth’s friends who were sexually experienced, the greater the odds of sexual debt (odds ratio, 1.01); the odds were also elevated among youth who believed that they would gain their friends’ respect by having sex (1.2). Relationships between friend variables and sexual initiation did not vary by level of involvement with friends. CONCLUSIONS: to maximize the likelihood of success, programs focused on delaying teenage sexual intercourse should address norms for sexual behavior among adolescents’ close friends as well as the perceptions, skills and behaviors of individual youth. Perspectives on Sexual and Reproductive Health, 2006; 38(1), 13-19.
The University of Minnesota, School of Nursing is on the cutting edge of advancing professional nursing education. By continuing to offer the Ph.D. degree program and beginning the D.N.P. (Doctor of Nursing Practice) degree program starting in Fall 2009, the Center for Adolescent Nursing will be the first, if not the only, program to offer a research doctorate in adolescent nursing, along with paving the way for the future of advanced practice clinical degrees in adolescent health.

Coursework prepares advanced practice clinicians for roles such as leading adolescent health positions in management, education, clinical practice, policy development, research, and advocacy. Under the umbrella of the public health nursing D.N.P., adolescent nursing D.N.P. students share the same comprehensive curricula as public health nursing leaders. Each individual student will tailor their D.N.P. program to fit interests and professional needs upon entry into the program.

Our Ph.D. program continues to emphasize the unique needs of adolescent development in an ecological context, preparing doctoral students for both quantitative and qualitative research futures. Further, the doctoral nursing student is able to share knowledge with post-doctoral fellows from across disciplines—nursing, nutrition, medicine, and psychology—evidence of our true multidisciplinary perspective.

Each academic program draws from interdisciplinary courses taught by faculty from the Schools of Nursing, Medicine, and Public Health. We collaborate with practicum settings such as community-based teen clinics, county and state public health departments, and state and regional advocacy agencies. Students and post-doctoral fellows may work on ongoing local, national, and international research projects. Students can also earn a master’s in public health (M.P.H.) or certification as a nurse practitioner concurrently during our program.

For more information, contact the Center for Adolescent Nursing at 612-624-3938 or e-mail us at adolnurs@umn.edu. Through grants from the Maternal and Child Health Bureau (HRSA, DHHS), and the Centers for Disease Control and Prevention (CDC), stipend, tuition and travel support are available for select graduate students and post-doctoral fellows.
Faculty, Graduate and Student Awards and Honors

A graduate from the Center for Adolescent Nursing, Luz Huntington-Moskos, M.S., RN, received funding ($50,000 for each of three years) for the Early Risers Skills grant she co-wrote. The grant supports the work of a new task force in Perry County, Indiana that targets issues related to juvenile delinquency in Tell City, Cannelton, and other towns in this rural area.

With NIH R21 funding for “Team COOL (Controlling Overweight and Obesity for Life) Pilot Study”, Assistant Professor, Marti Kubik, Ph.D., M.S.N., RNC, ANP, is developing and testing an innovative school-based intervention to prevent further weight gain and/or promote weight loss among adolescents attending alternative high schools.

Current Ph.D. student, Lisa Martin-Crawford, M.S., RN, obtained a two-year Association of Schools of Public Health Minority Fellowship through the Centers for Disease Control and Prevention that provides her with tuition and full-stipend support as she completes her Ph.D. She also received a scholarship for her research on diabetes prevention with American Indian youth through the National Coalition of Ethnic Minority Nursing Association.

Marti Kubik, Ph.D., M.S.N., RNC, ANP, was featured in the Los Angeles Times, Orlando Sentinel, Minneapolis Star Tribune, St. Paul Pioneer Press, and on WCCO, KARE 11, KMSP-TV, and KNX for her work studying relationships between school food policies and student body-mass index. These and other news stories appeared after her work was published in the Archives of Pediatrics and Adolescent Medicine.

Scott Harpin, M.S., M.P.H., RN, was featured on the front page of the Red Wing Republican Eagle newspaper in a story focusing on the work of the School of Nursing public health nursing students with the Goodhue County public health agency.

The School of Nursing presented Mike Edie, CAN Administrator, with an award commending exemplary service in the School. The Center faculty, students, and fellows are the beneficiaries of his continuous good work!

For her work with Latino/a youth, University of Minnesota presented Carolyn Garcia, Ph.D., M.P.H., M.S., RN, with a 2007 President’s Multicultural Faculty Award. Her project “Using Health Realization with Latino Adolescents: Piloting the ‘No Te Quebrases El Coco’” program, addresses healthy coping and self-care behaviors, including healthy responses to stress.

Receiving funding from the University President’s Initiative on Children, Youth, and Families, Carolyn Garcia, Ph.D., M.P.H., M.S., RN, conducted a one-day institute focusing on developing grant proposals collaboratively with health, social, and educational agencies, addressing health disparities in experienced by Latino youth.

Awards and Honors

Center Activities
Learning from Afar:
On-line Courses Draw Students throughout the U.S.

Ironically, some of the students who live the farthest from the University of Minnesota now have the shortest commute. That’s because more students than ever are taking advantage of online learning opportunities and traveling to class through cyberspace. For these so-called distance learners, getting to the campus is as easy as getting to their home computer.

Backed by the University of Minnesota’s outstanding technical resources, the School of Nursing is a leader in providing a range of online courses for students pursuing graduate education. For example, students in the master’s program can choose from online nursing courses in nurse-midwifery, nursing and healthcare systems administration, and public health nursing. Those studying to become a psychiatric-mental health clinical nurse specialist or a women’s health care nurse practitioner can also find the courses they need online.

A grant helps make online education possible. The Health Resources and Services Administration, Division of Nursing, provided funding to the School of Nursing through the Technology Enhanced Learning in Graduate Nursing (TELIGN) program. An important goal of the TELIGN grant is to increase the number of ethnically, culturally and geographically diverse nursing leaders in Minnesota, Wisconsin, Iowa, and North and South Dakota.

Students who live outside the five-state area are also tapping into online learning opportunities in record numbers. Luz Huntington-Moskos, who lives in rural Indiana, recently completed a M.S. in public health nursing/adolescent nursing at the U of MN from 800 miles away.

She first heard about the distance learning opportunities at the University of MN when she was working with the Navajo Nation in northern Arizona. “I taught high school in the Peace Corps in southeast Africa from 1994 to 1996, and I knew I loved that age group,” says Huntington-Moskos. “Adolescent nursing seemed to cover all the concerns you have at that age, like discussing the risk of violence, mental health issues, sexuality. Adolescents make a lot of life-affecting decisions. Sometimes they’re well supported to make them and sometimes not.”

She applied to the program while she was still in Arizona, but before she even got her acceptance letter, she moved to Cannelton, Indiana, her husband’s hometown. With a new job and a two-year-old daughter, she liked the flexibility of the self-paced program. “You can pick the classes whenever you feel you have the time,” she says. “It allowed me to kick start my new job, watch my daughter, and do my school work when I was able.”

To build a sense of community among the distance learners and faculty, each course included at least two on-campus seminars per semester. Huntington-Moskos flew in for these sessions, while most of her classmates drove down from places like Duluth and Bemidji.

Typically, the face-to-face sessions would include a review of the syllabus, a thorough explanation of group work, and some kind of icebreaker.

“It gave us a chance to put a name to a face,” says Huntington-Moskos, who made some good friends during the two and a half years she spent working on her degree. “I bonded with people, even though I was only in Minneapolis six times a year,” she says. “I did feel like I had a cohort. I definitely felt like I had a group of people with whom I was studying.”

Because she is living in such a small, rural town, opportunities to work at a nonprofit or major university are nonexistent, she says, this mean she has to be creative about finding work for herself.

“The degree has given me the tools to do that,” she described. “The courses that focused on community building, advocacy, and grant-writing are well-suited for community development and community-building here.”

In addition to her third year of teaching in the BSN program at Indiana University Southeast, she focuses her research on adolescent and community health, more specifically Latina youth and rural youth development. Her involvement in community interfaces with her work. She serves on the board of a county program that works to prevent juvenile delinquency as well as the board for 4-H extension education. She is also involved with a youth advocacy group called Youth First, for which she is facilitating a course that stresses love and limits for families of 10- to 14-year-olds.

Her long-range goals include, possibly, opening a youth center or becoming an adjunct faculty professor. Unfortunately, the nearest major university is in Indianapolis, a little over an hour away. “I’d have to do some commuting,” she says, “but it’s crossed my mind. Now... maybe if they have online learning, I could be an on-line teacher?”

Luz Huntington-Moskos, M.S., RN, CNP
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