“If you are working on something exciting that you really care about, you don’t have to be pushed. The vision pulls you.”

That’s a quote from Steve Jobs, probably one of the brightest and most original innovators this country has produced. And it’s a sentiment The University of Texas at Austin School of Nursing can say “Amen” to wholeheartedly.

The vision that pulls us is to become one of the world’s most innovative learning and research environments and to graduate nurses who will impact the way health care is delivered through direct care, leadership and research. We dedicate ourselves every day to preparing our students to engage individuals and organizations, guide person-centered care initiatives and create needed change. We do all of this by fusing an understanding of science, technology and the human experience to prepare nurses capable of changing the world.

WHY IS THIS IMPORTANT?

If I asked a group of people to list the top three things they value in life, I suspect that good health would be one of them. In fact, many would say that there is nothing more important to them than their health.

If health is that important to the majority of people, then they need to better understand what nurses do. They need to recognize that it is a nurse’s ability to advocate for safety, lead necessary change, assist patients and communities, and coordinate delivery of services that determine health outcomes.

As you know, nurses comprise the largest number of health professionals, with more than three million in the United States alone. That’s more than four times the number of practicing physicians. We estimate that each new nurse we graduate will impact the lives of more than 25,000 persons over a 40-year career. This means that each year our approximately 180 new registered nurses will impact over four million lives during their career.

THAT’S IMPRESSIVE!

The UT Austin School of Nursing is faced with a tremendous task — to prepare students to provide well-informed and compassionate care and to offer educational and research opportunities to develop nurse leaders for the needs of today and the future. It’s a Texas-sized challenge that we eagerly embrace.

I’ll leave you with another quotation from Mr. Jobs: “Those who are crazy enough to think they can change the world usually do.” Sound familiar? But it’s true: What starts here changes the world.

And that’s a vision that will continue to pull us.

Alexa K. Stuifbergen, PhD, RN, FAAN
Dean, The University of Texas at Austin School of Nursing
Laura Lee Blanton Chair in Nursing
James R. Dougherty, Jr., Centennial Professor in Nursing
In this issue

2 Three Researchers See Promising Results

8 Nursing Collaborations Boost Community Health

14 This Year in Photos

16 Donor Spotlight

18 We're Changing the World! Look who joined us

20 Student Updates

23 Around the School

25 Quick Reference
A diagnosis of traumatic brain injury, dementia or HIV is devastating, so it’s vital to search for ways to promote recovery and, in some cases, even roll back the damaging effects of these illnesses. At the UT Austin School of Nursing, nurse scientists have made this challenge the forefront of their research — and are seeing promising results.

**Precision Care in the Treatment of Traumatic Brain Injury:**
**Genetic component has potential to affect recovery**

More than 40 million people show up in emergency rooms and health care clinics in the United States each year with a variety of serious injuries. Of these, approximately 2.5 million are traumatic brain injuries (TBI), according to the Centers for Disease Control and Prevention. Fortunately, the majority of TBI patients survive their injuries, although symptom burden remains high and disabilities may persist for years or decades after initial injury. Unlike the majority of other injuries, brain injuries can potentially affect all aspects of an individual’s life, including cognition, personality, and the ability to return to normal roles.

Now at the UT Austin School of Nursing, research is underway to improve traumatic brain injury treatment and recovery by developing precision care based on an individual’s genetic makeup and circulating levels of proteins found in the blood after TBI.

“For a long time, we didn’t think neurological injuries would have a genetic component that could affect treatment response or the recovery trajectory,” said Nicole Osier, PhD, RN and assistant professor at the School of Nursing. “Using objective genetic and protein markers, I’m attempting to explain differences in symptoms and outcomes and build evidence to support precision care initiatives to inform care and education to TBI patients. The ultimate goal is to improve recovery and reduce long-term disability after brain trauma.”

Precision health care is an exciting emerging field that experts believe will predict with more and more accuracy how well a disorder will react to a treatment so that clinicians can tailor care to the individual characteristics of each patient.

“We need to quit trying to treat brain injury as if it were a single homogenous condition where everyone looks the same,” Osier said. “Genetics are likely a big factor in determining the right care. Identifying biomarkers or gene variants predictive of good or bad recovery can help with TBI prognosis and selection of the correct types and intensities of therapies needed to improve outcomes.

“The sooner we can identify the molecular difference between those TBI patients who tend to do better and those who are at high risk of developing post-traumatic stress disorder and other severe psychological symptoms, the sooner we’ll be able to route them into targeted risk reduction programs or specific treatment for a potentially better outcome.”

In two currently funded studies, Osier examines blood and saliva samples from TBI patients to determine which genetic and protein markers can be used to reliably predict good or bad recovery outcomes. From this knowledge, she believes that health care providers could prioritize the management of care.

“At this time, there are no FDA-approved therapies for TBI. This research could lead to therapies that are the difference between experiencing many years of suffering and pain or returning to pre-injury functioning,” she said. “Better recovery outcomes will also positively affect family members, who generally are responsible for caring for TBI patients.”

Osier is currently ramping up the TBI study, which will include children and build on her past work with adults. The exact brain changes that lead to neurological problems after brain injury are not completely understood, and researchers still have a lot to learn about how brain development may be altered after an injury and how the developing brain recovers from TBI.

“Pediatric TBI is even less studied than adult, even though a lot of children suffer traumatic brain injuries,” she said. “Understanding the pathophysiological mechanisms specific to both children and adults may maximize our ability to treat TBI. In some cases, it could even be the difference between life and death.”
"We need to quit trying to treat brain injury as if it were a single homogenous condition where everyone looks the same."

Nicole Osler, PhD, RN
Sleep May Be Key in Slowing Progression of Alzheimer’s Disease

Could it be that something as simple as sleep can slow or even roll back the effects of cognitive impairment and slow the progression of Alzheimer’s disease? Kathy Richards, PhD, RN, FAAN, and research scientist at UT Austin’s School of Nursing, thinks so. And because of her more than 20 years of experience in translational sleep and aging research, the National Institute on Aging encouraged her to apply for funding to look into the role of sleep in preventing brain damage.

Treatment of obstructive sleep apnea might improve memory and delay cognitive decline in persons with mild cognitive impairment.

Early in her career, Dr. Richards conducted clinical trials involving exercise and social activity to improve sleep in persons with Alzheimer’s disease who lived in nursing homes. Finding it difficult to measure their sleep accurately, she used polysomnography, a sleep test performed in sleep laboratories to study sleep and diagnose a variety of sleep disorders.

“We conducted more than 200 home and nursing home polysomnography studies in people with Alzheimer’s disease,” Richards said. “I was surprised to find that over 60 percent of them had rather severe obstructive sleep apnea and began to wonder if the sleep apnea came before or after the Alzheimer’s disease, and if identifying and treating apnea early in the trajectory of memory loss might help people to retain their memory.”

In 2011, Richards received a $2.3 million grant from the National Institute on Aging to investigate her hypothesis that treatment of obstructive sleep apnea might improve memory and delay cognitive decline in persons with mild cognitive impairment.

After working with the 83 participants enrolled in the Memories 1 study, her team found that consistently using a continuous positive airway pressure (CPAP) machine for sleep apnea provided significant and clinically important cognitive and functional benefits for older adults with mild cognitive impairment and obstructive sleep apnea, a health condition causing sleep disturbance, pauses, or cessation of breathing during sleep, and dangerous drops in oxygen in the blood and brain.

The result was so impressive she broadened the study.

“At the end of the Memories 1 study, we saw from the cognitive testing that those who used CPAP were often better,” Richards said. “We began to think that it’s possible that something as easy as taking care of your sleep health may slow progression of dementia and improve memory.”

In Memories 2, which was funded by the National Institute on Aging for $9.7 million, Richards and her research colleagues at the University of Pennsylvania will recruit 450 individuals between the ages of 55 and 75 with mild cognitive impairment from Austin, Philadelphia, Charlottesville, Virginia; and St. Louis, Missouri. Collaborating universities are St. Louis University and the University of Virginia.

Mild cognitive impairment is a transitional stage between normal memory and Alzheimer’s disease. Richards estimates that about three-quarters of the participants in this new study will have obstructive sleep apnea and one-quarter will not.

Those with sleep apnea will receive CPAP to treat the apnea and a series of motivating phone calls from project staff to encourage them to successfully use their CPAP device. The control group without
sleep apnea will receive motivating phone calls on health topics. Everyone in the study will undergo memory testing, a brain MRI and an amyloid PET scan to establish a baseline. They will repeat the memory testing and brain MRI after one year.

“Although we want patients to use CPAP all night, every night, at least four hours is needed for a therapeutic response. Scientists and clinicians commonly define CPAP adherence as at least four hours of use each night,” Richards said. “The main goal of the study is to determine if CPAP adherence will delay or perhaps even reverse progression toward Alzheimer’s disease.”

In addition to multiple-principal investigators Dr. Nalaka Gooneratne and Dr. David Wolk at the University of Pennsylvania, Richards recruited Dr. Patricia Carter at the UT Austin School of Nursing and Dr. Nick Bryan at Dell Medical School as co-investigators in the trial.

Richards is also co-principal investigator of a $3.9 million, five-year award from the National Institute on Aging designed to improve treatment of nighttime agitation in persons with Alzheimer’s disease.

“The precision medicine method we are using in that study tailors treatment to the specific sleep disorder restless legs syndrome that causes discomfort and an inability to sit or lie still in the evening and night,” Richards said. “We hypothesize that restless legs syndrome may be a cause for nighttime agitation and sleep disturbance in people with Alzheimer’s.”
The good news is that people living with human immunodeficiency virus (HIV) and who are in routine care are living longer and healthier lives. The bad news is that because the virus puts them at risk for other diseases, such as heart disease and type 2 diabetes, this improvement may not be the end of the story. Even worse news, many people living with HIV (PLWH) are often unaware of this increased risk and go untreated.

Part of the problem is that some HIV medications make it harder for the body to use insulin, which can result in type 2 diabetes. Age, lack of exercise and family background and history also raise the risk of developing diabetes.

Julie Zuniga, PhD, RN, and assistant professor at the School of Nursing, hopes to pinpoint the causes behind a progression to diabetes and improve health outcomes for this population. Her research focuses on self-management of stigmatized illnesses in conjunction with co-morbid conditions, with a focus on HIV and diabetes.

“One positive outcome would be to better detect who is ‘at risk’ and then target early interventional strategies along with identification of new diagnostic criteria.”

“Creating Phenotype of Biomarkers May Help Identify Individuals at Risk of Developing Diabetes”

“One positive outcome would be to better detect who is ‘at risk’ and then target early interventional strategies along with identification of new diagnostic criteria,” Zuniga said. “If they get tested and connected to regular care — at least two to four times a year — and keep taking their medication to suppress HIV, it’s possible they can be healthier longer. That’s our goal.”

Individuals who develop an additional co-morbidity, however, will have difficulty maintaining that goal.

Since it is not well understood, Zuniga is currently exploring the underlying biological mechanisms for the increased risk of diabetes among PLWH and believes that an investigation of specific biomarkers could help define the pathogenesis of type 2 diabetes and yield positive outcomes.

“One positive outcome would be to better detect who is ‘at risk’ and then target early interventional strategies along with identification of new diagnostic criteria,” Zuniga said. “Eventually we want to use this information to create an intervention...
for self-management, which is important because wait times for PLWH to get care are much greater than for the average population.

“Self-management encompasses everything. Not just taking medications, but getting to doctor appointments, making decisions about prescriptions, problem-solving and symptom management,” she said.

It is estimated that approximately 10 to 15 percent of people living with HIV have a dual diagnosis of diabetes. The two conditions have a body shape associated with them, Zuniga explained, and changes in truncal adiposity, or obesity that affects or is located in the trunk of the body as opposed to the extremities, are symptoms of HIV infection and are also associated with abnormal glucose metabolism and mortality in PLWH.

“We hope to create a phenotype of biomarkers and body composition or a list of characteristics of people with both conditions,” she said. “As we look at phenotypes of HIV and observe chronic inflammation, we might be able to determine who is at risk of developing diabetes. One theory is that PLWH have thicker blood, which we can determine because their blood clots easier. Their blood cells are stickier, which causes inflammation, which leads to the development of a variety of chronic diseases.”

In her study “Coagulation activation may be the earliest pathway altered in individuals comorbid with HIV and type 2 diabetes,” blood was drawn via venipuncture for assessment of the participants’ blood sugar levels and biomarkers associated with inflammation, vascular function and coagulation activation.

“One thing we found was that there were differences between PLWH and PLWH with type 2 diabetes in indicators of coagulation activation. We believe this is the first time that biomarkers of vascular function and coagulation activation have been assessed in this co-morbid population,” Zuniga said. “This suggests that pathways involving coagulation may be the first ones altered in the transition to the co-morbid state, which could potentially lead to a change in treatment protocols and a reliable identifier for symptoms that are hard to identify and treat.”

Zuniga believes that in many ways HIV is an outcome of health disparities. People living with HIV often struggle with housing and food insecurity, intimate partner violence, and drug and alcohol abuse. Until these disparities are addressed, HIV will remain a serious problem in many communities.

In the final analysis, the research could forge a path to improve not only the life span of this population but also their quality of life.

“The two things that diabetes and HIV take away from patients is many foods they once enjoyed and intimate relationships,” Dr. Zuniga said. “People living with HIV may get to where they can manage their HIV well, but once they have to address this new condition, they really feel robbed of some of life’s simple pleasures. Plus they don’t have the skills to manage the new condition. I hope our study results provide a tangible way back not only to a longer life, but a healthier and more enjoyable one.”

Julie Zuniga and colleagues Chelsi West Ohueri and Dong Eun Jang.
In east Austin live a largely unknown refugee population who fled their native Burma (also referred to as Myanmar) several years ago, forced to leave because of persecution by the ruling parties in their homeland. They are Matu, a tribe of the ethnic Chin group, and were accepted into the United States after genocidal attacks by the Burmese military junta. Approximately 50,000 members of the Chin group now live in the U.S., and 35 to 50 Matu families have found refuge in Austin.

Settling together near Parker Lane United Methodist Church, the group caught the attention of Pastor Sharon Stewart, who welcomed them into her congregation. Working with their English-speaking community pastor Mam Tee, she quickly saw a need to help them gain access to health care.

Cue the UT Austin School of Nursing’s public health instructors who were looking for a clinical site for the second semester seniors enrolled in their courses. Serendipitously, one of those, Karen Johnson, PhD, RN and associate professor at the school, is also a member of the Parker Lane UMC. Johnson also teaches the theory portion of the public health nursing course and was eager to ensure that the students had adequate opportunities to complete the practicum section of the course.

“When I approached Pastor Sharon about having our public health students meet with the Matu families, she immediately saw the value of such a project and agreed,” Johnson said. “She expressed her concern about a gap in the community’s knowledge base regarding their health issues, which is ultimately what we are trying to address through these teachings.”

Beginning the third week of the spring 2018 semester, Jamie Rock, MSN, RN and assistant instructor, took five of her students to the church and met with several Matu women while their pre-school-aged children played around them. The students

“A refugee population receives warm welcome and access to health care

School of Nursing students held a flu shot clinic for Matu refugees.

“Coming together is a beginning; keeping together is progress; working together is success.”

When he said this, Industrialist Henry Ford might have been describing the mission of faculty and students at the UT Austin School of Nursing who have launched and maintained a variety of beneficial and successful community projects and outreaches over the decades.

Whether providing a pop-up health care clinic for refugees in a local church, collaborating on a healthy lifestyle change program, or planning a new wellness center in a historically underserved area, faculty and students are expanding care to a growing number of Central Texas residents.

The following stories illustrate the need in the community and the resourcefulness of students and faculty as they make a difference.
had already learned that most, if not all, of the women had experienced a miscarriage since arriving in the U.S., and some had more than one.

Through panel interviews translated by Community Pastor Mam Tee, the students learned what concerned the women the most, such as child development, safety issues, and colds and flu, and used this information to develop content for a weekly clinic.

“They don’t have the means to get to a local clinic or the language to explain what they needed if they did manage to get there,” said Helena Hwang, one of the students. “Without the interpreter, it would have been impossible to communicate. Despite the language barrier, I was very surprised at how much they trusted us and how open and receptive they were.”

As they covered the common cold, allergies, pregnancy and menstrual cycles, the students were able to build a rapport with the refugee women. It was soon clear, however, that Pastor Mam Tee didn’t have the needed health care language, so Pastor Sharon applied for and received a grant to pay for a female translator.

This year’s flu season was a busy one. Through the new translator, the women heard about the importance of getting a flu shot and how it is administered. Only 10 women attended that particular session, but 35 men, women, and children showed up the next week to get immunized, all but four from the Matu community. For a majority of those, this was their first time to receive the flu vaccine.

“The most surprising aspect of working with these women was how receptive and excited they were to learn public health information from us,” said Isobel David, another student. “I was nervous the first time because I didn’t think they would want to sit through a lecture on health information, but every single one of them sat through it diligently taking notes!”

“The community overwhelmingly stated through the interpreter during a recent clinic session that we have succeeded in meeting their need by providing health care information in a safe and familiar surrounding where they felt comfortable asking questions,” said Rock, who is also a doctoral student at the School of Nursing.

Kristy Le, another student, is from an immigrant family and, after hearing about the Matu’s experiences, came to better understand the experiences her family probably went through.

“I understood what it must have been like to arrive in a foreign country without being able to communicate, let alone having any knowledge of how to navigate the health care system,” she said. “The fear associated with these barriers deepens my appreciation, respect and empathy for refugees.”

Other students agreed. “I can’t begin to imagine the hardships they have to go through in their everyday lives. But they still manage to be cheerful, courteous and thankful for even the smallest things,” Belinda Soto said.

“The students have run with this project,” Rock said. “In addition to the flu clinic, they covered general health, women’s health, and child development topics to a rapt audience. They have been so passionate about it and have put so much time, energy and resources into this community.”

And to think, it all stemmed from a conversation at a local church, the members of which take seriously the charge: “For I was hungry, and you gave me something to eat; I was thirsty, and you gave me something to drink; I was a stranger, and you invited me in.”

“Parker Lane UMC is fostering and building relationships with local residents and attempting to address needs as they arise within the community,” Pastor Sharon said. “The nursing students have been wonderful in responding to questions and providing practical and skillful presentations relative to women’s and children’s health needs. The patience and genuine caring shown by the students eases fears and builds trust among the participants and affords learning and benefits for all involved.”

Which is good news, because, according to the public health students and faculty, they plan to go back.
The ad Jessie Wilborn saw at church sounded like something that might finally help her get her diabetes, high cholesterol and high blood pressure under control.

“The program seemed simple enough, and I could see it offered a lot of support,” Jessie, a 70-year-old African American from Austin, said about A Better Me, a program designed to help participants set fitness goals and achieve a healthier lifestyle.

In addition to diabetes, high cholesterol and high blood pressure, Jessie suffered from acid reflux. She was ready to make a change and joined the program in December 2016. After more than a year, she is thrilled with her results.

“I’ve cut all my medications by half and I’m sleeping better,” she said. “And only once in a blue moon do I have reflux.”

Chronic diseases and conditions such as heart disease, stroke, cancer, type 2 diabetes, obesity, and arthritis are among the most common, costly, and preventable of all health problems facing the nation today. These disabling conditions have profound and pervasive effects on the lives of millions of individuals. Seven out of 10 deaths each year result from chronic disease and almost one out of two adults has at least one chronic illness. In the United States, chronic conditions and the health risk behaviors that cause them account for most health care costs.

A recent study in the Journal of Clinical Hypertension described how African-American, Asian, American Indian and Pacific Islander individuals have an increased risk for hypertension compared with those who are white or Hispanic, regardless of weight, socio-economic status or education level. This holds true for residents of Travis County.

But the news isn’t all bad. Change can be made; disease can be managed as Jessie discovered. Through a collaboration between the Alliance for African American Health in Central Texas (AAAHCT) and the UT Austin School of Nursing, many African-American individuals are finding they are able to make healthier lifestyle choices.

The partnership began when AAAHCT Executive Director Marva Overton participated in a community-based participatory research class taught by Dr. Miyong Kim and Dr. Melissa Smith at the School of Nursing in spring 2015. The class brought together leaders of community organizations and graduate students to learn and practice how to design, implement, evaluate and disseminate community-based research through a true collaborative methodology.

As a result, Dr. Kim and her team in the School of Nursing’s Center for Transdisciplinary Collaborative Research in Self-Management Science (TCRSS) and AAAHCT collaborated on a City of Austin grant to bring attention to a pressing health care crisis that contributes to excessive premature deaths and reduced quality of life for African Americans in Travis County and to develop community-driven solutions.

The collaboration resulted in a grant, with a five-year extension option, of approximately $112,000 annually. It was one of several first-ever health equity grants issued by the City of Austin to fund efforts that address health disparities in local underserved populations.

Using a health coach model, A Better Me enrolls participants who then identify specific health goals they want to achieve and provides individualized and group peer coaching, along with community resources to assist them. Members of the School of Nursing and AAAHCT meet on a regular basis to review and refine the program.
design, implementation and evaluation. School of Nursing staff and students provide additional training for coaches in motivational interviewing and health behavior change strategies and take quarterly biometric measurements of participants’ height, weight, blood pressure and blood sugar to evaluate the effectiveness of the program.

Jessie and her coach Johnie Richardson started off meeting once a month, but Johnie invited her to get in touch by email or phone whenever she had a question or needed some encouragement.

“We talked on the phone weekly, and I really appreciated her support,” Jessie said. “She provided resources and helped me get started on an exercise program. It used to be that when I felt stressed, I would eat. But now I go to the rec center and walk for 20 minutes instead.”

Jessie also enjoyed the many and varied presentations during the monthly group meetings, such as a healthy eating session led by Joan Roberts-Scott, a former Weight Watchers instructor. She stressed the importance of recognizing triggers that can cause some people to overeat, reading food labels, and understanding portion sizes. She also facilitated an interactive session during which participants broke into groups and developed meal plans. Another popular presentation was a healthy cooking demonstration by Erin Rivers, a local caterer who shared her challenges and success with weight loss and making healthy food choices.

Another change Jessie learned to make was how she bought groceries. “You should see my pantry now! It’s stocked completely differently,” Jessie said. “I eat healthy foods and have learned better coping strategies.”

But it’s not all about food. Other instructors get participants up on their feet for line dancing and zumba, a popular dance workout.

“Group support, increased accountability and resources help participants to reach their identified goals,” Overton said. “The success of A Better Me is measured not only by behavioral and biometric outcomes, but also by the ability to remove the barriers that keep people from getting and staying well.”

Researchers and employees at the Center for TCRSS are excited about the program’s success and have come alongside other community organizations to help them experience similar results.

“Our goal is to create a model national center that will develop, test and disseminate these kind of innovative self-management solutions to improve the health outcomes of people with chronic conditions,” said Dr. Kim, professor at the School of Nursing and director of the center. “Today more than ever, there is an urgent need for the integration of nursing science with other relevant disciplines in the development of self-management science. Such trans-disciplinary collaborative research will not only yield cutting-edge science, it will closely fit the actual clinical environment of health care.”

It wasn’t always easy, but taking charge and making changes worked for Jessie, and she’s convinced it will work for others.

“I would encourage anyone concerned about their health to get involved in this kind of program and make healthier lifestyle choices,” Jessie said. “But don’t expect to change overnight! It takes time, commitment and support — but it’s worth it.”

Participant Jessie Wilborn (left) successfully completed the program.
For several years, the United States has seen a growing shortage in the availability of primary care providers, especially in predominantly low-income, minority neighborhoods, or what have become known as “health care deserts.” Recent research on these communities published in the Health Behavior News Service found that primary care physicians are especially hard to find in predominantly Black and low-income Hispanic metropolitan neighborhoods.

One such neighborhood exists on the outskirts of Austin in Southeast Travis County, where in addition to a dearth of primary care, there are no grocery stores, pharmacies or adequate public transportation system.

Now, the UT Austin School of Nursing and Travis County Fire and Rescue are collaborating on a novel model to provide health care to these residents. Planning is underway for a new Del Valle Health and Wellness Center that will focus on solving the complex medical needs of this underserved population. The new center will be located adjacent to the Travis County Fire Rescue (TCFR) and Emergency Services District 11 and will provide a variety of affordable health care services to residents of Southeast Travis County and the contiguous counties (Bastrop, Caldwell, and Hays), areas that have historically lacked access to health care.

“For years, this part of Travis County has been considered a health care desert,” said Stephanie Morgan, director of practice innovation and clinical professor at the School of Nursing. “Currently, the proposed clinic will allow our crews to connect people with the appropriate level of care as opposed to the emergency room, which has been the default primary care provider.”
access to primary care is available on a very limited basis, and access to labs, pharmacies, and diagnostic x-rays — all of which are necessary for managing chronic conditions — is nonexistent.

The project will address the complex and varied needs faced by the community. Feedback has been gathered through a series of informational meetings at which residents were able to voice their needs and express what they hope the wellness center can provide.

The new proposed center will serve as a medical home for patients and offer pediatric, women’s health, acute and chronic disease management services as well as perform annual exams and physicals. Dental and behavioral health services and a pharmacy will also be included.

When not fighting fires, the local fire department spends most of its time responding to medical emergencies.

“This is an opportunity to change the lives of a very vulnerable population with significant health needs,” said Ken Bailey, Fire Chief of Travis County Fire Rescue. “The proposed clinic will allow our crews to connect people with the appropriate level of care as opposed to the emergency room, which has been the default primary care provider.”

The School of Nursing is no stranger to serving residents in this part of the county. For more than 20 years, the School has provided health care to low-income residents at the nurse-managed Children’s Wellness Clinic on the grounds of the Del Valle High School.

“Unfortunately, the Children’s Wellness Clinic can only treat patients up to the age of 21,” said Alexa Stuifbergen, dean of the School of Nursing. “This proposed center allows us to create a family practice for individuals who have counted on us to care for their children since 1995. You can imagine how difficult it is when sick parents and grandparents come to our clinic with sick children, but we’re limited on what we can do for the adults. Now we will be able to offer a medical home for the entire family.”

“The wellness center will be staffed by nurse practitioners and registered nurses who will work closely with a variety of community organizations to improve the overall health of the area. The plan for this new collaboration is to bring Central Texas health care partners and funding agencies together in order to do the greatest good for residents.

“We and our partners want to address the many social determinants of health, which include housing, schools, workplaces, neighborhoods, and communities,” Morgan said. “We know that taking care of yourself by eating well and staying active, not smoking, getting the recommended immunizations, screening tests, and seeing a health care provider when sick, all influence health outcomes. For some, this is easier to do than for others. So, we’re asking ourselves: ‘How do we collectively address transportation, housing, education as well as health?’ There are a lot of other groups providing some of these services. Our hope is that a new wellness center will bring all of this information together to share with our patients and the community.”

One reason this new service will be called a wellness center rather than a clinic is because it will provide so much more than most health care clinics offer.

“What we envision is much more comprehensive than the typical clinical services,” Morgan said. “We and our partners intend to address the vital needs of residents and transform this health care desert into a healthy community.”
Another year, another whirl of activity.

This year, we celebrated graduations, reaped the benefit of a successful “40 Hours for the Forty Acres” fundraising event, played with pets in the courtyard, indulged our sweet tooth in a back-to-school cookies and coffee event and celebrated major renovations of the first floor classrooms. It was a wonderful year. Now we’re focused on the future and many more meaningful and enjoyable activities to come.
Luci Baines Johnson — A Lifetime of Support for the Nursing Profession

You may know her as the second daughter of former President Lyndon Baines Johnson and First Lady, Lady Bird Johnson, but Luci Baines Johnson is a force of nature in her own right. And her belief in nursing, and connection to the University of Texas at Austin School of Nursing in particular, is long-standing and constant.

“I’ve known Luci for a very long time,” said Billary Brown, the first dean of the School of Nursing. “She first served as chairperson of the UT System School of Nursing’s Advisory Council. Later, after it became the UT Austin School of Nursing, she again served as a council member. She was always available. A more articulate, gracious and generous person would be hard to find.”

“Luci’s support shows her commitment to advancing nursing science and her understanding of the importance of excellence in education,” said Alexa Stuifbergen, current dean of the School. “Over the years she established a professorship, a fellowship, the Margaretta Turpin scholarship honoring her husband’s mother and last year provided the lead gift for the Billye Brown professorship that will support senior faculty recruitment and retention.”

Why nursing? Largely, because she famously once wanted to become a nurse and in 1964 enrolled in the school of nursing at Georgetown University in Washington, D.C. After two semesters, she and her boyfriend became engaged, which created a dilemma for Luci. In the sixties, Georgetown, like many colleges and universities, did not allow students to stay in school if they married. Faced with the choice to stay in college or to get married, she chose the latter.

But Luci never got nursing out of her system. “I never lost my love of nursing, and nursing never left me,” she said. “I come from a purpose-driven family in which volunteering and public service weren’t optional. Nursing was a fit for me because of that and because I loved science and am naturally a nurturing person. I’m also a ‘fixer,’ a person who wants to resolve difficulties. Nurses are nurturing and all about optimizing a state of health and diminishing a state of suffering.”

Luci is concerned about the looming health care crisis in the United States and the Baby Boomer population ages. “We’re living longer, but is longer going to be better? Are we going to be able to take care of this huge population? We’re facing people with catastrophic illnesses with catastrophic costs. How do we promote and promote long a state of wellness, because wellness is cheaper! Not only in dollars and cents but also in terms of human suffering,” she said. “Nurses have been in the wellness business since nurses have been. Fortunately, they’re no longer a voice in the wilderness, calling for a focus on the promotion of health. Now the health care community, policymakers and others are beginning to listen and come together to reason together and form a team approach that promotes a state of wellness.”

Asked about her friendship with Dean Emerita Brown, she said, “Dean Brown has impressed with her servant leadership style. I decided to serve on the advisory council because it’s an area where I had some knowledge and a whole lot of desire to learn more and to serve — to make a difference. I like to think I made a difference to the School of Nursing and I know that the school has made a difference to me.”

She counts nurses as some of her best friends, with whom she shares the same values, goals, attitudes and expectations. “We have a bond, a sense of community. That’s really all that most of us want out of life. My hope is that the School of Nursing alumni will find, as I have found, that a connection with the School is a continual source of personal and professional enrichment,” she said. “I am eternally grateful for what nursing has given me and believe all alumni can be, too. They should be proud of their achievements and that they make a difference every day.”

Luci is now married to British banker Ian Turpin, with whom she founded the LBJ Family Wealth Advisors. She is a trustee emerita of Boston University, a lifetime member of Seton Fund and SAFE, an organization offering support for individuals and families affected by domestic violence and assault. She is also an honorary member of Sigma Theta Tau, the international honor society for nursing, and served on the National League of Nursing Accreditation Board, the first non-nurse to do so.

Oh, and she did finally get a university degree: a bachelor’s in communication from St. Edward’s University in Austin. Recently, she was back on the Georgetown University campus to deliver the commencement address for the School of Nursing and Health Studies. During the service and more than half a century after dropping out of college, Luci was awarded an honorary doctorate in nursing.

“It meant the world to me. I must have looked like a child on Christmas morning because that’s the way I felt. It was a thrilling experience.”

And it means the world to the UT Austin School of Nursing to be able to call Luci Baines Johnson a true friend and generous supporter.
Turtles, Philanthropy, and Nursing:
The Walker Family Legacy

You may have noticed the pair of 600-pound bronze turtles basking in the sun in the School of Nursing courtyard. They’re hard to miss! But they are a solid reminder of the generosity of one family, who recognized years ago that with great wealth comes a great opportunity to provide financial support to students in need — student nurses in particular.

Earl and Myrtle Walker founded Carr Lane Manufacturing in 1952 in a simple wooden garage next to their house in Kirkwood, Missouri. The company specializes in making the parts that are then used to make tools. The idea that became the basis for the company came to Earl while he was working as a foreman in the tooling division at McDonnell Douglas Aircraft Company (then Curtis-Wright Aircraft), where he saw an ever-increasing need for standardized parts.

After observing how expensive and inefficient it was to make only one or two parts at a time, he and a few other employees began to manufacture greater quantities by night while working their day job. Earl’s wife, Myrtle, who had aspired to become an artist, drew by hand all of the products published in the company’s original catalog. It was also Myrtle who initiated a policy of filling up to 95 percent of all orders received by 3 p.m. on the same day. The policy is still in effect today.

In time, the Walkers bought out their partners and moved to larger facilities to supply larger manufacturers such as Boeing and Ford Motor Company. Carr Lane Manufacturing was off and running. So novel and creative were his ideas on standardizing tool making that it’s been said that Earl basically created the industry.

As their company grew, the couple began generously donating to their former high school, the Girl Scouts, the Walker Scottish Rite Clinic, the Myrtle E. and Earl E. Walker College of Health Professions at Maryville University, and Washington University in St. Louis, to name only a few recipients.

In the early days of the UT Austin School of Nursing, Dean Emerita Billye Brown invited Earl to serve on the School’s Advisory Council.

“I was very honored to be friends with Earl and Myrtle Walker. I was delighted when Earl agreed to serve as chairman of the council,” Dean Brown said. “The couple made some of the earliest and most generous contributions to the School, and their scholarship fund has been tremendously beneficial to hundreds of our students.”

One of the reasons for their generosity to students is because of Myrtle. Although she had received a scholarship to study art, she couldn’t afford the $468 room and board and was unable to get her degree. As she often said, “No one should be barred from college because they don’t have the money.”

Earl Walker died in 2011 and Myrtle Walker in 2016, but the couple’s generosity lives on through their eldest child Mary Walker, who was one of the first two students to receive a doctoral degree from the University of Texas System School of Nursing, which eventually became the UT Austin School of Nursing. She endowed scholarships to support students in honor of faculty and colleagues at the School of Nursing and provided funds for renovations and improvements to the Nursing building. The terrace on the west side of the building is being renovated using a portion of the $3 million given to the School by Mary. Another portion will fund the Myrtle E. and Earl E. Walker Foyer, a project that will soon get underway.

And those charming turtles? Since arriving several months ago, Myrtle’s Turtles have become a favorite of students studying or eating lunch in the courtyard. Created by Myrtle as public art, they serve not only as a visual delight, but also a place for lounging, chatting and taking selfies. They have now migrated to their permanent home on the Walker Terrace.

And as turtles number 49 and 50, they’re the last of the breed. Their 48 siblings were installed earlier at various parks and public spaces, mainly in the St. Louis area, but these two seem pleased to have landed at UT Austin. Clearly, they understand they’re among people who are changing the world. Just like Myrtle and Earl so many years ago.
We’re Changing the World!
Look who joined us
Mary Wakefield, PhD, RN, FAAN and former acting deputy secretary for the U.S. Department of Health and Human Services, was a welcome addition to the faculty of the UT Austin School of Nursing and LBJ School of Public Affairs this past year.

As visiting professor and distinguished fellow of the Joseph H. Blades Centennial Memorial Professorship in Nursing and dean’s distinguished fellow at the LBJ School of Public Affairs, she presented a four-part seminar series “Health Care Policy: Lessons Learned from the Beltway.” The seminars explored the nexus of health-related research and public policy, highlighting her expertise in health care policy that has been honed over many years in public and private institutions of higher education, the political arena, and governmental agencies.

Wakefield received both her master’s and doctoral degrees from UT Austin’s School of Nursing and was named the Graduate School’s Outstanding Graduate Alumnus for 2013. She is a fellow in the American Academy of Nursing and was elected to the National Academy of Medicine, one of the highest honors in medicine and health.

“Dr. Wakefield has used her UT Austin education to serve the public and probe for solutions to the pressing dilemma of providing more affordable and accessible health care,” Alexa Stuifbergen, dean of the UT Austin School of Nursing, said. “With her expertise ranging from rural to global health, her seminars have helped prepare students to be leaders and change agents in analyzing and informing state and national health policies.”

Students in the doctor of nursing practice (DNP) Health Policy class got a chance to visit with Dr. Wakefield when she dropped in on a session. She described how access, affordability and quality of health care for patients seen by health care clinicians is heavily influenced by policy actions that hail from outside the health care sector.

“Improving the health of individuals and health care requires nurses to lean into and lead change in both health policy and health care,” Wakefield said. “Our conversation in class considered the ability of public policy decisions to fortify the nation’s capacity to respond to health care and public health challenges, and, conversely, to erode consumer protections and public health. Given their education and expertise, the ideas and research generated by this cohort of DNP students should help directly inform health policies at local, state and national levels that benefit the patients for whom they care. In doing so they will impact not only health care delivered today but going forward.”

She also discussed the expanding opportunities and increasing expectations for future nurse clinicians to influence the forces outside of health care that impact the health of people who receive their care.

“That much of the work these students ultimately do will occur within health care systems, some of their important contributions also will be made through influencing and informing public policies that impact the health of individuals and communities,” Wakefield said. “As nurses, we discussed some strategies they can use to meaningfully contribute to policy-driven changes in health care that will have a substantive impact on peoples’ health.”

In 2009, President Barack Obama appointed Wakefield to head the Health Resources and Services Administration, a division of the U.S. Department of Health and Human Services with over 80 federal health programs, including providing funding for primary health care to 24 million people living in rural and urban communities, many of whom would otherwise be without access to basic health services. She was the first nurse to lead that division.

In 2015, she was appointed acting deputy secretary for Health and Human Services. Recently she was awarded the Health Care Leader award by the American Academy of Nursing based on her extraordinary contributions to improving health care for individuals, populations and the nation.

In addition to her roles at UT Austin, Wakefield was named a visiting distinguished professor in the Practice of Health Care at Georgetown University School of Nursing & Health Studies in Washington, D.C.
Robert Wood Johnson Foundation Scholars

The Robert Wood Johnson Foundation Future of Nursing Scholars program was created to increase the number of nurses holding PhDs by providing financial support, mentoring and leadership development to nurses who commit to earn their doctoral degree in three years. The UT Austin School of Nursing is one of only 31 schools of nursing selected this year to receive this grant.

Ashwini Hoskote, MPH, RN
2018 RWJF Scholar

Ashwini Hoskote received a Master in Public Health in Global Health in 2002 from Emory University, where she focused on reducing infant and childhood mortality in developing countries. As part of her thesis, she gained valuable hands-on experience monitoring and evaluating two pilot projects in rural Cambodia and Ghana. She then earned her Bachelor of Science in Nursing at Oregon Health and Sciences University in 2007.

Ashwini became a pediatric nurse in a primary health care clinic in Portland, Oregon. She took on leadership roles at the clinic and was able to have a positive impact on the quality of the workplace environment and patient care through new technologies and access to community resources.

She is passionate about child and adolescent health care and believes that research and collaboration are key in creating new policies that benefit communities everywhere, whether domestic or international, and plans to continue to work in the area of child health advocacy in her doctoral research.

Ashwini is a member of Sigma Theta Tau International, the American Nurses Association and the Texas Nurses Association. She served as a board member of ASHA International, a mental health awareness nonprofit in Portland. She enjoys traveling and outdoor activities with her husband and three children.

Catherine Fournier MPH, RN-BC
2018 RWJF Scholar

Katy Fournier received her Bachelor of Science in Nursing from Valparaiso University in Valparaiso, Indiana. She also holds a Bachelor of Science from Miami University with minors in nutrition and medical sociology and a Master of Public Health from Indiana University.

Katy spent the first 13 years of her nursing career in the practice of perinatal nursing in both clinic and hospital settings. For the past five years she has been in telephone triage, most recently in a quality improvement role. She is board certified in ambulatory care nursing.

She plans to focus her doctoral study and research on telehealth nursing practice and health informatics. Throughout her career Katy has served as a preceptor and nurse educator and looks forward to expanding that role in an academic setting.

Katy is a member of the Association of Women’s Health, Obstetric, and Neonatal Nurses, the American Academy of Ambulatory Care Nursing, the American Nursing Informatics Association, and Sigma Theta Tau International.

She lives in Austin with her husband and three children.
Jonas Nurse Scholar Program Scholarship

The Jonas Nurse Leader Scholars Award was made possible by a grant from the Jonas Center for Nursing and Veterans Healthcare, a scholarship program dedicated to building the effectiveness of America’s professional nurses and generous matching funds by School of Nursing donors. Scholars receive two years of support, attend a leadership development conference, complete a web-based leadership development component and work with a designated faculty mentor.

Maegan Mackenzie, BSN, RN

Maegan MacKenzie is a PhD student at the UT Austin School of Nursing. She earned her bachelor’s degree in nursing from Texas Woman’s University in 1998 and her master’s degree in Adult Health Nursing with Role Specialty in Teaching from UT Austin in 2017. Twenty years of clinical nursing experience and impactful teaching experiences inspired her to pursue a PhD in nursing. Maegen’s scholarship and dissertation topic explores the role of sleep in the progression of mild cognitive impairment. Her dissertation research examines personal, environmental, and social contributors to continuous positive airway pressure adherence in individuals presenting with comorbid mild cognitive impairment and obstructive sleep apnea. Professional memberships include Sigma Theta Tau, Sleep Research Society and the Gerontological Society of America. In her free time Maegen enjoys knitting and local adventures with her four teenage boys, husband and menagerie of pets.

In 2015, the UT Austin School of Nursing selected Pamela Recto and Whitney Thurman to be our first RWJF Future of Nursing Scholars. Below, they describe the impact the program made on their careers.

Whitney Thurman and Pamela Recto

I was truly honored to have been chosen for the RWJF Future of Nursing Scholar program. I strongly believe the program helped me establish foundational skills as a nurse scientist and leader. Mentorship was a critical piece for my success in completing the program. My dissertation chair, Dr. Jane Dimmitt Champion, and my committee members were committed to helping me navigate through the program right from the start. Their insight and guidance helped establish my program of research during my doctoral studies. My goal is to engage in multi- and interdisciplinary research, bringing together community agencies, health care providers and researchers with the purpose of addressing health disparities. One day I hope to obtain a tenure track faculty position at a tier one, research-oriented university. I accepted a two-year postdoctoral fellowship in San Antonio at the Center for Research to Advance Community Health, which is affiliated with UT Health San Antonio. I will be studying the impact of depression and anxiety on diurnal cortisol levels among opioid-using mothers and investigating moderating risk factors.

—Pamela Recto, PhD (2018), RN

Whitney Thurman and Pamela Recto

Completing my PhD at the UT Austin School of Nursing as an RWJF Future of Nursing Scholar was the honor of a lifetime. Working with and learning from this esteemed faculty has provided me a strong foundation on which to build my own program of research dedicated to improving health equity in the United States. Working with my dissertation chair and mentor, Dr. Tracie Harrison, I used a social justice framework for my dissertation research in order to investigate health disparities experienced by people with disabilities. I am looking forward to the next step on my academic journey, which is a postdoctoral fellowship at the UT Austin College of Pharmacy. This fellowship promises to be an excellent complement to the training received at the School of Nursing and a wonderful opportunity to learn from and contribute to an interdisciplinary research group investigating health disparities among vulnerable populations. I am grateful to both the School of Nursing and the RWJF for the opportunities over the past three years, and I am excited to see what the future holds.

—Whitney Thurman, PhD (2018), RN
It’s said that if you want something done, ask a busy person to do it. And if there is one thing senior Kelsey Mumford is, it’s busy. Very.

In spring 2017, she attended the American Association of Colleges of Nursing Student Policy Summit in Washington, D.C., a three-day conference designed to immerse student nurses in didactic program sessions focused on the federal policy process and nursing’s role in professional advocacy.

In spring 2018 she received a full student scholarship for the Nurse in Washington Internship (NIWI), which is a Nursing Organizations Alliance annual education offering that provides nurses an opportunity to learn advocacy strategies to further professional nursing and health care concerns through the legislative and regulatory processes. She received the program’s only full student scholarship.

NIWI participants learn from health policy experts and government officials, network with nurses from many geographical locations and disciplines, and visit members of Congress. Kelsey was able to meet with the legislative staff of Roger Williams, U.S. Representative for Texas’s 25th congressional district, to discuss issues such as the Title VIII Nursing Workforce Reauthorization Act and an opioid crisis response bill. The former supports the recruitment, education, and retention of nurses and nursing students. The latter would provide advanced practice registered nurses with greater ability to prescribe naloxone and other opioid addiction treatments to patients.

Recently Kelsey was elected to serve on the National Student Nurses’ Association’s (NSNA) Board of Directors, which is made up of nine nursing students who are elected at the organization’s annual convention. During the convention, she and fellow UT Austin student Elena Cole witnessed the passage of their resolution “In support of coordinated health policy advocacy opportunities for nursing students.”

In summer 2018, Kelsey traveled back to the Washington, D.C. area to participate in the Amgen Scholars Program at the National Institutes of Health. This annual public health research program is supported by the Amgen Foundation and provides selected undergraduates an opportunity to engage in hands-on research experiences at some of the world’s premier educational institutions. According to recent participant data, almost 1,000 students applied this year, but only 20 were accepted. Kelsey worked at the National Institute of Mental Health’s Laboratory of Brain and Cognition, Section on Neurocircuitry, on an experiment that may potentially serve as an unbiased screening tool for children with Autism Spectrum Disorder.

Back home, Kelsey launched the Health Advocacy Student Coalition (HASC), an idea that grew out of her receiving the Student Grassroots Ambassador Prize at the 2017 Nursing Student Policy Summit. “The Health Advocacy Student Coalition provides a way for health-related organizations to come together and have a bigger impact on health policy because they’re all discussing it from their own points of view,” she said.

The coalition partners with 25 health-related UT Austin student organizations that send representatives to the monthly meetings where they discuss legislation and plan advocacy events. Members of the research team within the coalition present bills to club representatives who then vote on whether or not to adopt the legislation as part of HASC’s agenda for the year. Once a piece of legislation is adopted, HASC provides opportunities to attend local demonstrations, take part in call-ins or advocate at the Texas Capitol.

“Legislation topics include health disparities and reproductive and global health. The bills we worked on were relevant to students,” said Kelsey. “We wanted to give students a way to get involved whether the bills passed or not.”

As a Forty Acres Scholar, Kelsey received a full, merit-based scholarship administered by the Texas Exes alumni organization. She will graduate with a Bachelor of Science in Nursing in spring 2019. Ultimately, she would like a career in health policy and credits UT Austin with encouraging her to get involved in this arena.

“Learning these skills as an undergraduate has helped me overcome any intimidation I might feel when discussing important topics with state and federal officials,” Kelsey said. “The School of Nursing has been so supportive and given me a great foundation.”
Faculty

**Patricia Carter, PhD, RN, CNS**, and associate professor, received the 2018 Janis Carelock Award for Excellence in Teaching from the UT Austin School of Nursing’s Sigma Theta Tau chapter and was named one of the top 10 faculty at UT Austin by the Texas Exes Alumni Association. She was also recognized in the spring 2018 issue of *Texas Nursing* magazine published by the Texas Nurses Association.

**Jane Dimmitt Champion, PhD, DNP, FNP, AH-PMH-CNS, FAAN, FAANP**, and professor at the UT Austin School of Nursing, was one of 20 nurse researchers from Australia, Canada, Hong Kong, Singapore, Taiwan, the United Kingdom, and the United States inducted into the Sigma Theta Tau International Nurse Researcher Hall of Fame during the organization’s 29th International Nursing Research Congress in Melbourne, Australia. Created in 2010, the Hall of Fame recognizes nurse researchers who have achieved significant, sustained recognition and whose research has improved the profession and the people it serves. Champion is an internationally renowned researcher and scholar in the area of health promotion and risk reduction of urban and rural ethnic minority women and adolescents.

**Leigh Goldstein, PhD, RN**, and assistant professor of clinical nursing, was the winner at the 2018 Recognizing Nurses event sponsored by the Austin American Statesman and the Texas Nurses Association District 5. This annual campaign celebrates outstanding nurses in the metro Austin area for their dedication, compassion and care. The finalists were chosen by a non-partisan panel of judges from more than 400 nominations submitted by colleagues, patients, family and friends across the area. All nominees, finalists, and the winner, Dr. Goldstein, were honored at a gala in Austin.

**Nicole Osier, PhD, RN**, and assistant professor at the School of Nursing, was one of 30 nursing faculty from across the nation selected to participate in the inaugural AACN-Apple Digital Innovation Bootcamp: From Content to Action, held in Austin, Texas. The AACC launched the initiative to provide opportunities for nursing faculty to leverage the latest technology to enhance learning in the classroom, laboratory and clinical settings. In addition, she received an “Exemplary Green Labs” certification from My Green Lab, a California non-profit that recognizes research that reflects the highest standards of social and environmental responsibility. Osier also received the 2018 Outstanding Young Alumni Award from the University of Pittsburgh.

**Linda Yoder, PhD, MBA, RN, AOCN, FAAN**, and Col. U.S. Army (Ret.), received the Phyllis J. Verhoniick Research Award for outstanding podium presentation during the recent TriService Nursing Research Program dissemination course.

**Cara Young, PhD, RN, FNP-C**, and assistant professor, received the Rising Star Faculty Award from the National Organization of Nurse Practitioner Faculties, an organization devoted to promoting high quality nurse practitioner education at the national and international levels.

**Students**

**Ya-Ching Huang, MSN, RN**, and School of Nursing doctoral student, won first place for her poster “Access to Diabetes Care for Patients at a FQHC System in Central Texas” in the Public Health Nursing section student poster competition at the American Public Health Association annual conference. Ya-Ching also received the Frances Fowler Wallace Memorial Award for Mental Health Dissertation Research, which is given annually by the Hogg Foundation.

**Kimberly Lewis**, a student in the AE-PhD program, presented a poster at the Sigma Theta Tau 29th International Nursing Research Congress in Melbourne, Australia. She also received the Edith Anderson Leadership Education Grant from the Sigma Foundation.

**Pamela Recto**, a Robert Wood Johnson Foundation Future of Nursing Scholar, received a Frances Fowler Wallace Memorial Award for Mental Health Dissertation Research. Pamela’s research proposal is titled “Mental Health Literacy of Mexican-American Adolescents: Examining their Knowledge and Attitudes about Perinatal Depression.”

**Carolyn Phillips, MSN, RN**, and a Robert Wood Johnson Scholar, received a $30,000 doctoral scholarship from the American Cancer Society. She was also selected to participate in the National Academy of Medicine’s *Expressions of Clinician Well-Being* nationwide art project. Her story and song “Song for My Soul,” co-written with Kristin Davidson, was featured in the group’s pop-up gallery in Washington, D.C. Carolyn also received the Nurse of the Year Award from the Central Texas Oncology Nursing Society.
Alumni

Terry A. Badger, PhD (1986), RN, PMHCNS-BC, FAAN, received a $2.5 million grant from the National Cancer Institute to help improve symptoms for cancer survivors after their treatment. Dr. Badger is a professor at the University of Arizona College of Nursing.

Kenneth Dion, PhD (2011), RN, MSN (1995), MBA, has joined the Johns Hopkins School of Nursing as assistant dean for Business Development and Strategic Relationships.

Megan Lippe, PhD (2016), MSN (2011), RN, BSN (2009), was a co-recipient of the 2018 Dorothy Otto Research Award Nursing Education Research Grant from the National League for Nursing. She is an assistant professor and simulation specialist at the Capstone College of Nursing at the University of Alabama in Tuscaloosa.

Janiece Walker Taylor, PhD (2014), RN, MSN (2009), received the Robert Wood Johnson Foundation’s Harold Amos Medical Faculty Development award for her project “Communication Behaviors and Development of Pain and Depressive Symptoms Intervention Among Older African-American Women.” Taylor was also named a Scholar of the Building Interdisciplinary Research Careers in Women’s Health (BIRCWH), a mentored career development program that connects junior faculty to senior faculty with shared research interest in women’s health and sex-differences research. She is an assistant professor at the Johns Hopkins School of Nursing in Baltimore, Maryland.

Yvonne VanDyke, MSN (1990), RN, Robert Wood Johnson Executive Nurse Fellow, retired as senior vice president for Nursing and chief nursing officer from Ascension Texas June 2018. Throughout her Seton career, she worked to improve the care of patients through the professional development of nurses and a focus on interprofessional collaboration.

Hsiu-Hung Wang, RN, PhD (1998), FAAN, was named president of the Taiwan Nurses Association. Her term will run from 2018 to 2020. Wang is currently vice president and professor at the Kaohsiung Medical University in Taiwan.

Promotions

Karen Johnson, PhD, RN, FSAHM, Associate Professor

Donna Rolin, PhD, APRN, PMHCNS-BC, PMHNP-BC, Clinical Associate Professor

Bo Xie, PhD, Professor

Linda Yoder, PhD, MBA, RN, AOCN, FAAN, Professor

In Memoriam

Former faculty member Rebecca Sutter passed away July 4, 2018. Rebecca joined the School of Nursing faculty in 1989 and was a valued contributor to the School and a role model of professional nursing to all her students, who respected her greatly. She co-authored several publications addressing spiritual care of patients.

Col. Grace A. Willard, USAF (Ret.), PhD (1990), MSN, RN, died on May 8, 2018. Dr. Willard honorably served her country for 30 years as a flight nurse during Vietnam and chief nurse of the 32nd Aeromedical Evacuation Squadron in the Office of the Surgeon General. She retired from the air force in 1999 and was interred at Fort Sam Houston National Cemetery.

UT Austin School of Nursing Receives Professional Nursing Education Award

The University of Texas at Austin has received the 2018 American Association of Colleges of Nursing (AACN) Innovations in Professional Nursing Education Award in recognition of the work that has been accomplished in interprofessional education (IPE). This prestigious award recognizes the outstanding work of AACN member schools to re-envision traditional models for nursing education and lead programmatic change, in this case in the area of interprofessional education.

In 2013, the U.S. Health Resources and Services Administration Advanced Nursing Education Program awarded a $1 million three-year grant to Gayle Timmerman, PhD, RN, CNS, at the School of Nursing to integrate IPE experiences with medicine, pharmacy and social work into the curriculum with the aim to provide comprehensive, evidence-based care of persons with multiple chronic conditions in underserved populations.

Today, faculty leaders Gayle Timmerman; Barbara Jones, PhD, MSW; John Luk, MD; and Veronica Young, PharmD, MPH, design and teach Foundations of Interprofessional Collaborative Practice (FICP), for which the AACN award was given. FICP contributes to the transformation and improvement of health care education by preparing students to effectively lead and contribute to team-based care and engage in hands on activities and simulations designed to provide students with opportunities to develop interprofessional education collaborative competencies.

The AACN, which has a membership of more than 800 baccalaureate and graduate schools of nursing, will host an award ceremony in October during the Academic Nursing Leadership Conference. This award reflects UT Austin’s alignment with the AACN’s mission and vision of transforming health care and improving health.
Year after year nurses are recognized by the public as the most trusted profession. Nurses provide essential and critical care across settings ranging from home to clinic to hospitals. Research consistently documents that better educated nurses lead to better health outcomes for patients.

Regardless of the setting, **it is nurses** who assume primary responsibility for delivering safe evidenced-based care, reporting and responding to patient changes, and making the critical timely decisions that are needed to support patients and their families. Nurses are essential in developing higher-functioning and more patient-centered health systems that can meet the increasing demand for health services from a growing and aging population.

With the support of generous donors, the University of Texas at Austin School of Nursing educates and prepares a new generation of exceptional, skilled and compassionate nurses to provide leadership in patient care, innovation and academia. These nurses fuse their understanding of science, technology and the human experience as they advance the profession of nursing and improve patient outcomes.

**NURSES DEGREE PROGRAMS**

- **Bachelor of Science in Nursing (BSN)**
  - Extremely competitive freshman admissions
  - First-time pass rate on NCLEX exam consistently > 94%

**Alternate Entry Masters of Science in Nursing (AE-MSN)**

- For those with a bachelor’s degree or higher in another field who do not have a nursing degree

**Master of Science in Nursing (MSN)**

- 5 Master’s Concentrations:
  - Leadership in Diverse Health Care Settings
  - Adult-Gerontology Clinical Nurse Specialist
  - Pediatric Nurse Practitioner
  - Family Nurse Practitioner
  - Family Psychiatric Mental Health Nurse Practitioner

**Post-Master’s Certificate**

- Offered in all advance practice concentrations for nurses with master’s degrees

**Doctor of Nursing Practice (DNP)**

- Clinically focused doctorate
- Ranked #7 in the nation for “Best Value”
- Concentrations in advanced practice or executive leadership
- Delivered in hybrid format over 5 semesters

**Doctor of Philosophy (PhD) in Nursing**

- Research-focused doctorate
- Ranked #1 in the nation for “Best Value”
- One of the earliest nursing PhDs in the nation
- Entry post BSN, MSN or Alternate-Entry MSN

**Quick Facts**

**Program Enrollment**: 806 Students

- 29% MSN
- 64% BSN
- 4% PhD
- 4% DNP

**First Time NCLEX Exam Pass Rate**: 94%

**Tuition**

- Undergraduate: $10,992
- Graduate: $10,058

**Scholarships**

- $999,307 distributed from SON funds/endowments, graduate school funding and grants to school from foundations

**Students**

- 500 Clinical placements
- 88% Female

**Race/Ethnicity**

- White/Caucasian 50%
- Hispanic/Latino 20%
- Asian 16%
- Black/African American 5%
- Other 5%
- International 3%

**Research**

**Total Current Funding**

- $20,694,440 in active extramural grant projects
- $18,897,371 in research grants, primarily from the National Institutes of Health
- $1,797,069 in training and special projects grants

This total represents a 48.6% increase over the last two years

**Service**

- 2 Nurse-managed clinics operated independently by the School of Nursing
- Family Wellness Clinic
  - Children’s Wellness Clinic – Del Valle
  - Approximately 5,000 visits per year
  - 100 students placed – pre-nursing to graduate
- **84 Faculty**
- **67 Staff**

**Quick Reference 2017-18**

- 84 Faculty
- 67 Staff
INVEST IN TEXAS NURSING.
INVEST IN YOUR FUTURE.

By creating a charitable gift annuity to benefit The University of Texas at Austin School of Nursing, you can make a gift now and count on income for the rest of your life.

Learn more at utexas.planmygift.org
or give us a call at 512-471-2628