

BIOGRAPHICAL SKETCH

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NAME: Becker, Heather A.

POSITION TITLE: Research Scientist

eRA COMMONS USER NAME (credential, e.g., agency login): hbecker

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
Goucher College, Baltimore, MD.	B.A.	1971	Psychology
The University of Texas, Austin, Texas	M.Ed.	1975	Educational Psychology
The University of Texas, Austin, Texas	Ph.D.	1981	Educational Psychology

A. Personal Statement

I have been the PI or Co-I with other nurse researchers on 10 NIH-funded studies, including the R21 that supported an exploratory pilot directly related to the proposed study. Two of my previous 8 health promotion intervention studies have focused on cancer survivors. In addition, my work as the evaluator for the Texas Comprehensive Cancer Control Program, chair of the Texas Nurse Oncology Education Program, and member of the Texas Cancer Alliance of Texas and the Livestrong Cancer Institute's Patient Support Working Group has informed my understanding of cancer survivorship challenges and afforded many contacts in the cancer community. I have extensive experience with the evaluation of intervention fidelity, measurement design, data analysis, interpretation of results, and report writing.

B. Positions and Honors**Positions and Employment**

1985-present Research Scientist, Measurement and Program Evaluator on various federal, state, and local grants and contracts, School of Nursing, The University of Texas at Austin
2001-2012 Evaluator, Texas Comprehensive Cancer Control Program

Other Experience and Professional Memberships

1985-present American Evaluation Association, Chairperson, Health Evaluation Topical Interest Group (1986-1988), Program Chair, Health Evaluation Topical Interest Group (2002)
1990-2012 Chairperson, Evaluation Committee, Texas Nurse Oncology Education Program
1995-2003 Appointed to DHHS Panel for the Review of HHS Evaluations
2010-present Member, Health Services Users Group, Department of State Health Services
2010-present Member, American Public Health Association
2012- present Member, Cancer Alliance of Texas
2017- present Member, Austin Cancer Support Coalition

Honors

1974-present Member, Phi Kappa Phi, Education Honor Society

2004 Outstanding Investigator Award, Center for Health Promotion Research in Underserved Populations

C. Contribution to Science

In 1988, I and my colleagues conducted one of the first studies of health promotion among people with chronic and disabling conditions, a group that Gerben DeJong has described as having a “thinner margin of health”. Over the subsequent 25 years, I have been the investigator or co-investigator on multiple interdisciplinary studies of health promotion for people with disabilities and chronic health conditions. We have found that people with disabilities want to live healthy lives, but are often challenged to tailor standard health promotion messages to their specific conditions. Representative publications include:

Stuifbergen, A.K., Blozis, S., Becker, H., Harrison, T., & Kullberg, V. (2016). Selected health behaviors moderate the progression of functional limitations in persons with multiple sclerosis: Eleven years of annual follow-up, *Disability and Health Journal*, 9, 472-478.

Becker, H.A. & Stuifbergen, A.K. (2004). What makes it so hard? Barriers to health promotion experienced by people with multiple sclerosis and polio, *Family and Community Health*, 27, 75-85.

Becker, H., Stuifbergen, A., & Tinkle, M. (1997). Reproductive health care experiences of women with physical disabilities: a qualitative study, *Archives of Physical Medicine and Rehabilitation*, 78(12 Suppl 5), 526-533.

Becker, H., Stuifbergen, A. K., Ingalsbe, K., & Sands, D. (1989). Health promoting attitudes and behaviors among persons with disabilities. *International Journal of Rehabilitation Research*, 12, (3), 235-250.

Although we recognize the importance of health promotion for all Americans, our understanding of how to promote the health of those from historically underserved populations has often been lacking. Grounded in self-efficacy theory, our research has demonstrated that people with a variety of disabling conditions are able to improve their health promoting behaviors, particularly in the area of exercise, and these changes may be associated with a decrease in self-reported functional impairment and improved quality of life. Representative publications include:

Becker, H., Stuifbergen, A., Schnyer, R., Morrison, J., & Henneghan, A. (2016). Integrating acupuncture within a wellness intervention for women with multiple sclerosis: A Feasibility Study, *Journal of Holistic Nursing*, 35, 86-96.

Stuifbergen, A., Becker, H., Perez, F., Morrison, J., Kullberg, V., & Todd, A. (2012). A randomized controlled trial of a cognitive rehabilitation intervention for persons with multiple sclerosis, *Clinical Rehabilitation*, 26, 882-893.

Stuifbergen AK, Blozis SA, Becker H, Phillips L, Timmerman G, Kullberg V, Taxis C, & Morrison J, (2010). A randomized controlled trial of a wellness intervention for women with fibromyalgia. *Clinical Rehabilitation*, 24 (4), 305-18.

Becker. H., Stuifbergen, A.K., & Dormire, S.L. (2009). The effects of hormone therapy decision support for women with mobility impairments, *Health Care for Women International*, 30(9), 845-854.

As the number of cancer survivors continues to grow, we are coming to understand the long-term effects of cancer diagnosis and treatment on their quality of life. As the evaluator for the Texas Comprehensive Cancer Control Program, Chair of the Texas Nurse Oncology Education Program, and a member of the Cancer Alliance of Texas, I became aware of the challenges many cancer survivors face as they attempt to maximize their health following active treatment. Recently, I began to study how to help cancer survivors who are experiencing cognitive limitations in areas such as memory, attention, or executive function. Key publications include:

Becker, H., Henneghan, S., Volker, D.L., & Mikan, S. (2017). A preliminary test of a cognitive behavioral intervention for breast cancer survivors, *Oncology Nursing Forum*, 44(2), 255-264.

Becker, H., Henneghan, A., & Mikan, S. (2015). "When do I get my brain back?": Breast cancer survivors' experiences of cognitive problems, *Clinical Journal of Oncology Nursing* 19(2), 180-184.

Becker, H., Braudway, W., Maughan, J., Warfield, A., & Wood, M. (2015). Development of a cancer resource center in a rural Texas border community. *Journal of Oncology Navigation and Survivorship*, 6(1), 14-19 .

McDougall, G., Becker, H. Acee T.W, Vaughan P.W, & Delville C.L. (2011). Symptom management of affective and cognitive disturbance with a group of cancer survivors. *Archives of Psychiatric Nursing*, 25(1), 24-35.

Many cancer survivors have co-morbid conditions that complicate their diagnosis, treatment, and long-term outcomes. I have integrated my understanding of health promotion for people with other disabling conditions into my work on health promotion and quality of life for a underserved group of cancer survivors – those who experienced a pre-existing disabling condition prior to their cancer diagnosis. Key publications include:

Becker, H., Mackert, M., & Kang, S.J. (2013). Using an e-health intervention to promote the health of cancer survivors with pre-existing disabling condition, *Computers, Informatics, Nursing*, 31(3), 107-114. PMC3605272.

Volker, D., Becker, H., & Kang, S.J. (2013) A Double Whammy: Health Promotion Among Cancer Survivors with Pre-Existing Functional Limitation, *Oncology Nursing Forum*, 40, 71-76. PMID: PMC3531904.

Becker, H., Kang, S.J., & Stuijbergen, A. (2012). Predictors of Quality of Life for Long-Term Cancer Survivors with Pre-Existing Disabling Conditions, *Oncology Nursing Forum*, 39(2), 175. NIHMS440094.

Becker, H., Rechis, R., Kang, S.J., & Brown, A. (2011). The Post-Treatment Experience of Cancer Survivors with Pre-Existing Cardiopulmonary Disease. *Supportive Care In Cancer*, 19(9), 1351-1356.

During the 30 years that I have worked in program evaluation, I have come to appreciate the key role that evaluation can play in helping to elucidate what works and what doesn't in health care interventions. Integral to this process is developing measuring methods that are sensitive to the targeted outcomes. I have explored multiple strategies for determining that our interventions are implemented as intended and that our measures are sensitive to meaningful changes. Representative publications include:

Becker, H., Stuijbergen, A.K., Henneghan, A., Morrison, J., Seo, E.J., and Zhang, W. An initial investigation of the reliability and validity of the Compensatory Cognitive Strategies Scale, *Neuropsychological Rehabilitation*, published on-line May 2017.

Morrison, J.D., Becker, H., Stuijbergen, A.K. (2017). Evaluation of intervention fidelity in a multisite clinical trial in persons with multiple sclerosis, *Journal of Neuroscience Nursing*, 49, 344-348.

Becker, H., Stuijbergen, A.K., Taxis, C., Beal, C.C., & Pierini, D.M. (2009). The use of Goal Attainment Scaling to facilitate and assess individualized change in a wellness intervention for women with fibromyalgia syndrome. *Journal of Holistic Nursing*, 27(4), 232-240.

Becker, H., McDougall, G.J., Douglas, N., & Arheart, K. (2008). Comparing the efficiency of eight-session versus four-session memory intervention for older adults, *Archives of Psychiatric Nursing*. 22, 87-94

[A list of publications is available at: http://www.ncbi.nlm.nih.gov/sites/myncbi/1j1qm-rk8aqAk/bibliography/43350319/public/?sort=date&direction=ascending](http://www.ncbi.nlm.nih.gov/sites/myncbi/1j1qm-rk8aqAk/bibliography/43350319/public/?sort=date&direction=ascending)