





## A MESSAGE FROM **DEAN ALEXA STUIFBERGEN**



These are exciting and important times for the profession of nursing. An ad hoc committee under the auspices of the National Academies of Sciences, Engineering, and Medicine is extending the vision for nursing into 2030

and charting a path for the nursing profession to create a culture of health, reduce health disparities, and improve the well-being of the U.S. population in the 21st century.

And as you might expect from those who seek to "change the world," UT Austin is well-represented in the effort.

School of Nursing alumna (MSN 1978, PhD 1985) Mary Wakefield is serving as Committee Co-Chair for "The Future of Nursing 2020–2030." Dr. Wakefield is currently a visiting professor at the School of Nursing. Committee member Dr. William Sage is a professor in the UT Austin School of Law and a long-term collaborator of faculty in the School of Nursing. Dr. Karen Johnson, associate professor of nursing and a RWJF Nurse Faculty Scholar (2014–2017), is a research manager for the committee. In addition, Dr. Linda Yoder, professor at the School of Nursing, was one of only five experts to provide testimony to the committee in March. The committee is building on the 2009 "The Future of Nursing: Leading Change, Advancing Health," which set a vision for nursing in 2020. This widely known report provided a blueprint for improving the profession by proposing that nurses practice to the full extent of their education and training, achieve higher levels of education, receive greater opportunities to assume leadership positions, and improve data collection for policymaking and workforce planning.

It's clear that Americans are not as healthy as they could be. And who better than nurses to understand and help alleviate the harmful effects of social and economic determinants of health in our homes, neighborhoods, and communities? Promoting health isn't just providing access to health care; it's understanding the impact of the quality of our schooling, the safety of our workplaces, the cleanliness of our water, food, and air, and the nature of our social interactions and relationships. These are just some of the stubborn issues the committee will address.

The University of Texas at Austin and the School of Nursing are excited to be able to contribute leadership and expertise to the committee and research efforts. We're confident the resulting report will sustain our nation's efforts to improve the health of individuals and communities and support nurse leaders as they influence policy and expand health care access to improve the lives of all Americans.

Aleya K. Stuijbergen

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The University of Texas at Austin School of Nursing

EDUCATION, RESEARCH, SERVICE

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# WHAT STARTS HERE CHANGES THE WORLD: Increasing Global Health Engagement

#### WHAT STARTS HERE CHANGES THE WORLD.

It's a catchy phrase and we use it around here a lot. A lot. But it's also the most concise description of what happens every day, in every classroom, in every college and school at The University of Texas at Austin.

Closer to home, those six words inspire School of Nursing faculty to broaden the educational experiences and global perspectives of their students as they work in clinics and communities in Central Texas and beyond. The phrase also forms the underpinning of the School's global health outreach programs that are truly exciting examples of how we are indeed changing the world for the better.

Whether helping to establish first-time nursing programs in Vietnam, rounding up health care providers and medications for Haitian flood victims, or observing Kenyan nurses as they tackle a rising infant mortality rate, Longhorn Nursing faculty and students are expanding health care access in meaningful and sustainable ways around the globe.



#### **Gaining a Global Perspective** Students learn about health care in Central America

"Engaging Global Health in Costa Rica" is a faculty-led study abroad program that provides an immersion experience for students to explore global health care systems, determinants of health, and socio-cultural issues in Costa Rica.

#### But it is so much more than that.

The course was initiated by School of Nursing professors Alexandra Garcia, PhD, RN, FAAN, and Jane Champion, PhD, DNP, FNP, AH-PMH-CNS, FAANP, FAAN. Since 2016, Ana Todd, PhD, RN, clinical assistant professor, and Nancy Guillet, MD, RN, MSN, clinical instructor, have led the course.

"It's a great program. The students begin to truly understand how important their role is in impacting health beyond the U.S.," Dr. Todd said. "We teach a hybrid class, with one day online, that focuses on public health from a global perspective, but students also visit clinics and hospitals to learn about health care provision, disparities and conditions, and policy from a Latin American point of view. They also take a medical Spanish course."

As they learn about the health status of women and children, the students are

surprised to learn about the disparities that exist globally.

"They visit health care sites that are off the beaten path, such as an overnight visit to an indigenous community, an HIV clinic and a palliative care center for children," Dr. Todd said. "Some of the sites are nonprofits that are taking a different approach to providing health care."

One such agency is Casa Esperanza, a center that welcomes and houses people with HIV/AIDS who had been living on the streets. Most of the patients there have had traumatic life experiences and been chronically homeless.

"The health care providers at Casa Esperanza help patients reimagine a plan for their lives in order to rebuild from the ashes with dignity," Dr. Guillet said. "The students listen to their stories and see how they're learning to recreate a better future for themselves."

The students also follow community health workers from the local public clinics who go into the communities to track cases, provide information, and offer resources to prevent neglected tropical diseases such as zika and dengue fever.

#### For many of the students, it's the first time they have traveled outside of the U.S., and the study abroad program provides an experience that is often life changing.

"Meeting and getting to know my host family was probably the highlight of my experience," Mariana Verissimo, a first semester senior, said. "They truly immersed and educated me in Costa



Students receive a certificate from a Red Crosstrained paramedic after learning first aid skills.

Rican culture. Leaving them at the end of the program was more difficult than I'd imagined because they felt like a second family. They also helped me understand how the health care system in Costa Rica works."

Visits to clinics and hospitals were also informative.

"I was surprised that Costa Rican's had access to free health care, but I could

see some of the downfalls as well, such as longer waiting times for medical attention," Mariana said. "I really enjoyed learning about global health and relating it to what we saw in Costa Rica. This experience taught me about compassion for and awareness of other people's ways of life. I know this experience will not only make me a more patient-centered nurse, but it has made me a better person. The experience has shaped how I view health, sparking my interest in public health and living abroad one day."

In fact, Mariana said the study abroad program was one reason she chose to come to the UT Austin School of Nursing.

"The students learn a lot about health care accessibility," Todd said. "It's not just the education, but the Costa Ricans who make a big impact on them."

"In addition to expanding their nursing education, the students begin to think about how they can change the world," Guillet said. "It's important for them to see where the need is and how they can contribute."



UT Austin School of Nursing students learn about health care in Costa Rica.

### Haiti 💛

#### Life-saving Care Doctoral student helps impoverished residents of Haiti

When UT nursing student April Watkins received a text saying that Léogâne, a particularly remote area in Haiti, had flooded after Hurricane Matthew hit the impoverished island in fall 2016, she sprang into action. Because she had provided health care services in Haiti for a number of years, she knew the people there would have nothing to withstand the aftermath of the category 5 storm: no food, clean water or medications. Without immediate help, they would starve. Somehow she managed to reach a relief agency nearby and lead them long distance to the site.

Such quick action is second nature to the doctoral student. After volunteering to help victims of Hurricane Katrina who had been relocated from New Orleans to Austin in 2005, she decided to leave her marketing job and return to school to become a nurse.

"The next morning, I told my husband I wanted to be a nurse so I could help people," she said. "Fortunately, he agreed and supported my decision."

April enrolled in the UT Austin School of Nursing Alternate-entry Master of Science in Nursing program, which is designed for people holding degrees in disciplines other than nursing and who are interested in pursuing both a registered nurse license and a master's degree.

As she was winding up her final semester, an earthquake struck and devastated Haiti. Hoping to find a way to send supplies, April got in touch with a Haitian school of nursing and asked how she could help. They told her they had a field hospital that needed volunteers.

"Can you come?" they asked.

#### On May 22, 2010, one day after graduating from nursing school with a masters degree, April flew to Haiti for a 10-day relief trip.

"My team and I managed to get to a field hospital in Léogâne, the epicenter of the earthquake," April said. "About 30,000 people had died in the town of 100,000. Unfortunately, due to a lack of equipment and infrastructure, many of the bodies remained in the rubble."

While there, the team lodged at a training facility where a 40-bed field hospital is located that is capable of functioning with the help of American



April Watson and Amy Cline, RN, BSN, administer IV fluids and check blood pressure at a mobile clinic near Leogane, Haiti.

medical volunteers. April worked in the emergency room and clinic and provided emergency care.

"I was able to use my diagnosis and management skills along with my medical surgical nursing skills to treat a variety of acute injuries as well as chronic obstructive pulmonary disease, asthma, heart failure, and other chronic illnesses," she said. "The people were living in tents. There wasn't much there — no electricity,



Watson Drouillard, medical interpreter, and April Watson.

no running water, no real roads. It sounds desperate, and it was, but everyone seemed happy and very appreciative of our efforts."

At the end of the 10 days, she knew she would return. And she has, all but one year since. During the rest of the year she raises funds for medical supplies and medications and to pay local interpreters, physicians and dentists. In addition, she and the other volunteers raise their own travel funds.

These days the team sets up mobile clinics in the countryside to treat people without the resources to travel to Léogâne. There they might see as many as 750 to a thousand people a week. Even in the best of times, day-to-day conditions in Haiti can present challenges. On a recent visit, they identified a malnourished young woman who presented with typhoid and other health issues.

"We knew she had to get to the hospital, so we flagged down a man on a motorbike and strapped her on behind him. We paid for the travel, the hospital, the care providers, and the medication and treatment. It came to \$15," April said. "We saved her life."



Alexandra Garcia (fourth from left), UT Austin International Office representative Laurie Young (fourth from right) and Davika Reid (third from right), and other international visitors tour the hospital in Eldoret, Kenya.



**Transitioning Safely from Hospital to Home** Research focuses on improving neonatal mortality rate.



Davika Reid with children at the Kenyan hospital.

When a mother delivers a baby, it's often one of the most joyous times she is likely to experience. But it's also the most vulnerable time for a child's survival, according to UNICEF. During the neonatal period — the first 28 days of life — children face the highest risk of dying at an average global rate of 18 deaths per 1,000 live births in 2017.

#### Globally, 2.5 million children died in the first month of life in 2017 alone, or approximately 7,000 neonatal deaths every day, most of which occurred in the first week, with about 1 million dying on the first day and close to 1 million dying within the next six days.

Davika Reid, MSN, RN, Robert Wood Johnson Foundation Future of Nursing Scholar and a neonatal intensive care unit nurse for more than 15 years, is on a quest to improve neonatal health. Knowing that much of the problem occurs after the transition from hospital to home, she enrolled in the UT Austin School of Nursing's doctoral program to gain the knowledge and tools to research this critical period in a newborn's life. In December 2018, she completed her second visit to a hospital in Eldoret, Kenya, an area where an alarming number of newborns die in the community setting after being released from hospital.

Davika traveled to Kenya with School of Nursing faculty Alex Garcia and Julie Zuñiga and members of the Department of Population Health at UT Austin Dell Medical School to visit with staff at the Academic Model Providing Access to Health (AMPATH) and Moi University.

UT Austin recently became the 12th member of the consortium of North American universities to partner with Moi University and the Kenyan Ministry of Health.

"Most of the research focuses on hospital interventions even though half of newborn deaths occur in the community



Alexandra Garcia (third from right) and Davika Reid (fourth from left) meeting with nursing faculty and the dean of the Moi University School of Nursing,

setting," Davika said. "I am looking at the recommendations for newborn care that the nurses give the new mothers before they leave for home. For some infants, the information provided was sufficient, but babies go through a lot of transitions, and these transitions can take longer in some infants. In some cases, it could be several days before they show signs of distress."

In childbirth, she explained, the mother is considered the patient and the focus is on her. Although the nurses she met with are taught to perform an assessment of newborns, owing to the overcrowded conditions at the Kenyan hospital, there isn't always enough time to do a full assessment that could identify something that might put the child at risk.

"The nurses there have been very outspoken about the crowded conditions. At the time I visited, there were three nurses to 50 patients. There wasn't a private room where the nurses could speak to the mothers," she said.

"Some patients had to share beds, and some of the new mothers chose to leave the hospital after only six hours instead of the recommended 24 hours because of the overcrowding." Davika recently completed her doctoral dissertation "Nurse-Midwife-Provided Postnatal Newborn Care Recommendations in Eldoret, Kenya:



Moi University School of Nursing,

A Focused Ethnography" in which she examined what affects how nurses make recommendations, how they communicate with the mothers and what they advise. She believes this information could help improve nursing care and education.

"We know nurses provide the bulk of care in many nations and that many times they may be the only health care provider patients interact with," she said. "Because nurses form such a critical link in addressing newborn health, they stand to make the most impact. Many of the things they can do or provide are simple, and not complex, expensive or high-tech."

One change she believes would improve children's health would be to bring clinical nurses and community nurses together to discuss any barriers to health care the families face.

"As nurses, we should be aware of their living situation, what they're going back to, and we should be willing to collaborate in the community setting," Davika said.

"Clinical nurses need to have a greater awareness of public health and the impact it makes on people. Nurses have a lot to contribute to this conversation. This is something I learned from the Kenyan nurses who invest a lot of time in the community setting."

She hopes her research will help improve not only neonatal mortality rates but also be an encouragement to the nurses in Eldoret. She would like to see opportunities for nurse-led research improve and create leadership opportunities so that the nurses are received as professionals in the community.

Davika will continue her research in Kenya with a postdoctoral fellowship provided by the Robert Wood Johnson Foundation and the UT Austin School of Nursing. Eventually she hopes to take part in intersite collaborations to gauge the success of efforts to improve infant health.

"Our goal as nurses is first and foremost to prevent people from going to hospital, but if they do, we do our best to provide the care they need," she said. "We should also enrich our patients and help them return home to live their lives in such a way that they don't need to come back."

#### Sweden

#### **"A Loop of Reflection"** Visiting scholar incorporates self-reflection into nursing education

Changing the world and improving global health doesn't always require traveling abroad. Sometimes experts in the nursing field abroad come to us to share cultural and professional perspectives that foster mutual understanding. That's what Maria Ekelin, assistant professor and program director at the midwifery program at Lund University in Lund, Sweden, has done. She is teaching at UT Austin this fall semester.

Dr. Ekelin, who has extensive clinical experience as a nurse-midwife in labor and delivery, is particularly interested in quality enhancement and different forms of assessment. Her research also focuses on pedagogics with the midwifery program, particularly as it reflects on learning and professional development. Another common theme in her research is the focus on parental participation.

"The Swedish midwife works independently in a broad field of activity and a high competence, and I have participated in the work with newly updated Swedish Description Competence for Midwives," she said. "At UT Austin, I am sharing my experiences and expertise, especially concerning working with student development and their reflections during clinical placement and the use of case methodology to integrate theory and practice."

Important to Dr. Ekelin's midwifery research are the students' reflections and feedback on their experiential learning opportunities.

"I strive to connect clinic and theory by introducing a reflection model into teaching," she said. "The students write daily reflections of the situations they have experienced and receive feedback on that. But the feedback is not for assessment, rather it is to support the students and allow them a means to follow their own actions and responses and determine what they might do differently if that situation happens again. I call it a 'loop of reflection' between students and their supervisors and instructors."



Maria Ekelin

In the beginning, she explained, the students often reflect on their own actions, but eventually they move on to reflecting on the professional issues and situations.

"This way, they go from the details to a more holistic perspective."

In the classroom Dr. Ekelin is careful to update her lectures with the latest health care evidence so that students will always be given the latest information. She plans to contribute this along with an international viewpoint to nursing education as she co-teaches the course Nursing Care of Childbearing Families with the School of Nursing's Dr. Chris Abbyad.

"It's very important to use evidencebased practice so that students not only know what to do, but why they do it," Dr. Ekelin said. "I am truly grateful that UT Austin is providing me this opportunity to teach and observe. I am learning a lot at this excellent university."

Dr. Ekelin's visit to the U.S. is supported by the Swedish Foundation for

International Cooperation in Research and Higher Education (STINT), who selected UT Austin to serve as the host institution for their Teaching Sabbatical Program for the fall 2019 semester.

Lund University has been a center of culture and learning since its founding in 1666 and is ranked among the world's top 100 universities. The university prides itself on fostering collaborative, interdisciplinary opportunities to create new solutions that improve people's lives around the world.

"We are honored to have Dr. Ekelin with us this semester and are already learning so much from her about ways to improve women's health and nursing education," Alexa Stuifbergen, dean of the UT Austin School of Nursing, said. "It's another example of how we support collaborative efforts to advance nursing practice and research around the world and encourage our faculty, students, and international partners to become exceptional citizens in a global society."



#### **Faith in a Seed** Engendering sustainable nursing programs

Though I do not believe that a plant will spring up where no seed has been, I have great faith in a seed. Convince me that you have a seed there, and I am prepared to expect wonders.

Like Henry David Thoreau, Jane Champion, PhD, DNP, FNP, AH-PMH-CNS, FAANP, FAAN and professor, is seeing countless wonders spring up from her many years of working alongside colleagues in several nations around the world, planting seeds for nursing programs she's convinced will improve the health and quality of life for generations to come.

She recently returned from three weeks in Vietnam, where she has been working for 10 years with Friendship Bridges, a nonprofit agency assisting administrators and faculty at the University of Medicine and Pharmacy in Ho Chi Minh City, to develop a master's program in nursing. It is that nation's first-ever advanced degree nursing program.



Dr. Champion with Vietnamese masters nursing student thesis advisee.

The goal of Friendship Bridges is to provide ancillary support and build infrastructure for advanced nursing programs that will address the health care needs of Vietnam and eventually become self-sustaining. The program is already making a significant impact on improving nursing education and health care outcomes in Vietnam.

"Just as in the United States, community health and health promotion is critical



Ho Chi Minh University of Medicine and Pharmacy, School of Nursing, Masters of Science Nursing Students with Dr. Champion and Vietnamese Faculty Members.

and very much needed in Vietnam," she said. "This nursing program is making a huge contribution in terms of disease prevention, especially in rural areas where many individuals don't have the resources to access health care.

"I have learned so much about their health challenges. I've watched them deal with tropical diseases and particularly tetanus. It's so different from the U.S.," she said. "I have a real appreciation for how the Vietnamese nurses handle their limited resources. They are fabulous, and the students are amazing."

The graduate nursing curriculum created for the program will be a model for graduate nursing education for Vietnam, and Dr. Champion expects it will soon be self-sustaining.

"They're almost ready to be on their own," she said. "In fact, we're currently developing a doctoral program. It's very exciting."

New beginnings are anything but new to Dr. Champion. In 1999, she began working with colleagues from Mexico, Spain, Columbia and the U.S. to help the Universidad Autonoma de Nuevo Leon in Monterrey, Mexico, develop that country's first-ever doctoral program. She frequently returns there or hosts faculty and students from the university in Texas in order to continue the teaching and mentoring.

Recognizing the need for graduate

students to have immersion experience, Dr. Champion and School of Nursing faculty Dr. Chris Divin and two of their doctor of nursing practice students, Laura Guerrero and Maria Saldiva, initiated an independent study for graduate students. This effort is assisted by Dr. Carlos Faerron Guzman with the InterAmerican Center for Global Health (CISG), an organization that prepares leaders to develop ethical, sustainable, and just solutions to global and local health challenges. CISG provides a platform for universities, students, researchers, and global health practitioners to collaborate with local organizations and communities in Costa Rica.

"We designed that program to serve as a template that can be used for international work," Dr. Champion said. "Last summer the first group of UT Austin graduate nursing students traveled to Costa Rica, where they 'learned through doing' as they went into communities to work collaboratively toward ethical and sustainable health solutions."

In 2017 and 2018, she accompanied undergraduate nursing students to Sydney, Australia, to attend Semester Plus Global Health at the University of Sydney. This unique program gives students the opportunity to explore culture, health care systems, and global health concepts. They were able to learn about the Australian health care system in relation to other systems and health indicators of other countries during an intensive three-week nursing course taught by Dr. Champion.

Afterwards, the students took a full semester of classes at the University of Sydney, which is well known for its exceptional faculty and research facilities. Students also took part in the online seminar Applied Cultural Analysis designed to develop crucial skills for the global marketplace, including enhancing their ability to live and study in a cross-cultural environment.

In the end, Dr. Champion admits that her international work has taught her as much as she's taught others.

"Going to another country and teaching, you learn a great deal of humility and gain a great appreciation for the way other cultures address their health care needs," she said. "I tell colleagues, don't be afraid to travel to other countries. Seize the opportunity!"

In other words, go plant a seed.

# Maternal Health and the Continuum of Childbearing. The fourth trimester

"Life is always a rich and steady time when you are waiting for something to happen or to hatch." —E.B. White, *Charlotte's Web* 

Today, experts in maternal health might add "and when you're monitoring the fourth trimester."

Although the addition lacks the charm of Mr. White's thoughts about impending motherhood, the concept of an extended postpartum period as intrinsic to childbearing is gaining more currency in health care literature.

Traditionally, postpartum care has ended at about six weeks or 42 days after birth when new mothers are last seen by their obstetrician. However, a study published in 2017 found that one-third of maternal deaths occur between seven days and one year postpartum.

In a recent editorial addressing this gap of care for new mothers, Nancy K. Lowe, editor of the Journal of Obstetric, Gynecologic, & Neonatal Nursing, wrote, "We now more fully recognize the importance of and unique experiences in the postpartum period for women as they recover from childbirth, negotiate the changes in their bodies, and transition to motherhood. A fourth trimester is consistent with the idea that childbearing is a continuum of at least a year in length that encompasses a full reproductive cycle."

The "fourth trimester" is a useful metaphor brought to light as a result of the growing concern over rising maternal mortality rates in the United States, according to Lorraine Walker, RN, EdD, MPH, FAAN and professor at the UT Austin School of Nursing.

"The term has reawakened awareness of the health and psychosocial transition women undergo in the three months after giving birth, which is good," she said. "Nevertheless, despite recognition of its importance, there are good reasons to consider extending care even further, through the first postpartum year."

The question then becomes: How to promote the health of women during a life

phase that is actually a very challenging one. Part of the problem, Dr. Walker maintains, is that the cultural ethos for women in the U.S. of always putting family first can work to their detriment.

"I call it the 'squashed doughnut' phenomenon," she said. "When one of the doughnuts in a box gets mashed, who is more likely to eat it? Dad? The children? No! Mom!"

She explains that the wellbeing of mothers and infants is influenced by mothers' behavioral and psychosocial health (B&PH), yet these key areas are often neglected during health care visits within the time constraints of primary and



obstetric care. These visits tend to focus on residual health concerns after pregnancy, family planning, and breastfeeding support. This is even more true for new mothers when their B&PH is challenged in multiple domains, or what Walker calls "suddenly finding themselves in no woman's land."

Bringing an infant home creates new family demands during the first year. Babies are constantly changing and developing, and these changes call for new reactions and adaptations. While a mother is going through these rapid changes, she may neglect or ignore completely her own needs, such as diet, exercise and signs of depression.

Dr. Walker underscores that such needs are also key areas of modifiable predictors

of chronic disease: excessive alcohol use, smoking, poor diet and lack of physical activity, to which she adds a fifth one for new mothers: poor body image.

"After pregnancy, women often don't feel positive about their bodies, which can lead to depression. But it's unlikely they will recognize the level of depression they have and seek help for it," she said.

To address these gaps, Dr. Walker and colleagues at the School of Nursing have developed a toolkit for B&PH of postpartum women that can be used in health care clinics and other settings. The toolkit consists of a screening questionnaire and asks women to rank themselves in six domains: diet, physical activity, smoking, alcohol use, body image and depressive symptoms. For example, items in the dietary domain cover the frequency of positive and negative habits such as snacking on junk foods and eating a nutritious breakfast. Areas covered on the body image domain include positive and negative feelings about body areas, such as waist, hips, weight, and muscle tone.

After filling out the questionnaire, participants begin to see a pattern and are prompted to identify their top ranked values and areas they think they can address to make a positive change.

"This is the sort of contextual knowledge that most care providers might not have access to," Dr. Walker explained. "Not every woman will need this level of care, but for those who do the toolkit may show them how to begin to improve their health."

The next steps will also focus on how useful, usable and effective the toolkit is. She and her team plan to eventually provide the toolkit digitally on smart phones or tablets.

"Postpartum care is paramount," Dr. Walker said. "We believe the toolkit is a promising strategy to increase preventive care at the important life transition of motherhood, which affects women not only after a first birth but with each child added to the family. Ultimately, we want to help women focus on themselves for a change."

# Genomics and **Maternal** and Infant Health

hat if it were possible to use microbes to treat infections, outsmarting antibiotic resistance, or even to prevent disease

before it starts? Sound too much like science fiction?

Michelle Wright, PhD, RN and assistant professor, doesn't think so.

In her lab, she is currently working to identify and modify microbes that grow in and on the human body and turn genetic activity on or off, often causing disease. She is particularly focused on improving women's vaginal health and reducing pre-term births using a more targeted approach to better understand mechanisms of disease.

In the past, researchers had to isolate bacteria, or microbes, from an infected person, grow it in the lab and study it directly to determine whether or not the bacteria was responsible for making the person sick. But the microbes Dr. Wright studies today aren't grown in a dish.

"I'm looking at microbes obtained from human samples that might be involved in complex chronic diseases, such as diabetes, or pre-term births; we just don't have a good understanding of how these microbes contribute to disease or if they show up after people already have the disease," she said.

Her focus is the result of an earlier

interest in DNA methylation, a process by which units of organic compounds attach to a DNA molecule and thereby cause a change in that molecule's activity.

"Methylation changes how genes are turned on or off as they respond to stimulus, causing certain segments to be read differently, and can initiate processes that can lead to disease," she explained. "It can change the expression, what your DNA is programmed to create, without changing the DNA sequence."

Dr. Wright is particularly interested in group B streptococcus (GBS) and its effect on pre-term births and maternal health. Explaining that GBS is present in 10 to 30 percent of women often without doing any harm, once it shows up in the vagina of pregnant women, it can invade the amniotic cavity and infect an infant's bloodstream during pregnancy or after delivery. GBS is the leading cause of infectious infant mortality despite antibiotic treatment of mothers during labor.

When GBS is detected at the time of birth, the mother is given intravenous antibiotics to kill the bacteria and reduce the chance the baby will be infected. Pregnant women are usually tested for GBS via a recto-vaginal swab between the 35th and 37th week, but miscarriages and still births can happen prior to this stage. Dr. Wright believes earlier testing and treatment could lead to improved outcomes for both the mother and child.

Informing her research is the challenge of microbial resistance to antibiotics. The health care community is increasingly worried about the rapid development and spread of "superbugs," or bacteria that do not respond to antibiotics. Partly due to natural processes and partly because of the overuse or misuse of antibiotics, many dangerous bacterial strains have become even more threatening by developing resistance to antibiotics.

"Many health care providers and clinics around the world don't have the ability to quickly and accurately diagnose infectious disease so they throw a broad-spectrum antibiotic at it. We're now seeing a lot of resistance to those once powerful drugs," she said. "If we can modify the microbes that grow in and on us, we may be able to develop alternative approaches that will 'knock out' pathogens. One day we may be able to grow beneficial microbes that are stronger than the invaders or use what bacteria use to keep bad bacteria at bay and shift individuals into a 'healthy' state where they don't need antibiotics."

Dr. Wright's Group B Streptococcus project is supported by a Career Development K01 award from the National Institutes of Health, National Institute of Nursing Research.

# UT Austin Mourns Dean Emerita Dolores Sands

Dolores Sands, a long-time leader in nursing science and education and former dean of the UT Austin School of Nursing, passed away in October 2018 at the home of her son Arthur T. Sands, MD, PhD, in The Woodlands, Texas.

"My mother was an intensely empathetic person," Arthur recently said. "When you talked to her about a problem, she did not simply listen to you; a part of her seemed to become you and walk in your shoes. This allowed her to truly understand the situation, the people involved, and to recommend a solution."

Dean Sands was born in Detroit, Michigan, and became dedicated to education at a young age. She received both a Bachelor of Science in Nursing and Master of Science in Nursing from Wayne State University in Detroit and a doctorate from Arizona State University.

She and her husband, Art, raised three children. The family moved to Arizona, where Dolores began her career in nursing research as a professor at Arizona State University. There she served as director of the Graduate Program in Nursing Administration, acting dean, assistant dean for research and resources, and assistant dean for the baccalaureate program.

She was recruited to UT Austin to lead nursing research, where she conducted major research initiatives funded by the National Institutes of Health and was honored with numerous awards recognizing her significant contributions to advancing nursing education and practice. From 1984 to 1989 Dean Sands served as professor and director of the Center for Health Care Research and Evaluation, which later became the Cain Center for Nursing Research in recognition of a \$5 million gift for nursing research from Mary and Gordon Cain. In 1989 she was named dean of the School of Nursing. During her 20 years as dean, she garnered over \$16 million in permanent



endowments for the school, including the Cain endowment that also endowed a \$1 million Chair in her name.

Over the years she oversaw the education and training of thousands of nurses and contributed to the knowledge of many thousands more through her prolific research publication legacy. She was named a fellow of the American Academy of Nursing. Upon her retirement in 2009 she was named dean emeritus in honor of her distinguished career.

"The impact of Dean Sand's leader-

ship is immeasurable and ranges from her efforts to build the research productivity of the school, strengthening the PhD program and leading the implementation of our first nurse practitioner programs," said Alexa Stuifbergen, dean of the UT Austin School of Nursing.

Dean Sands was preceded in death by her husband and is survived by daughters Linda Hannen (Mark), Carol Wilson (Mike), son Arthur (Beth) and nine grandchildren.

The UT Austin School of Nursing will host a memorial lecture in honor of Dean Emerita Sands on Monday, Oct. 14. Bernadette Melnyk, dean of The Ohio State College of Nursing, will speak. Please visit the events page on the UT Austin School of Nursing's website for more details.

# **Preparing Tomorrow's Nurses** to Make a Greater Impact Locally, Regionally, Globally

Every year the Gallup poll ranks the most honest and ethical professions, and every year nurses top the list (the latest poll makes it 17 years in a row). But that's not all that sets the profession apart: Nurses are by necessity some of the most creative, quick-thinking people in the workforce. Whether it's determining the best way to move a patient or streamlining work processes so that more time can be spent with patients, nurses are constantly analyzing and problem solving. They are the brains behind many of the most ingenious developments in health care and technology, from designing scrubs to creating apps.

Clearly nursing has expanded beyond the clinic and the bedside to the halls of innovation and entrepreneurship. Nurses are well placed to generate new knowledge to help solve many of today's pressing health care challenges because of their versatility, critical thinking skills, and knowledge of data and fast-flowing information.

One such nurse entrepreneur is Ken Dion, PhD, RN, MBA, a UT Austin School of Nursing alumnus. Ken wasn't even in elementary school when he began his career in health care. As a five-year-old, he often accompanied his mother, who was a nurse and administrator of a senior living center, to her workplace and helped transport patient records in his wagon.

He worked as a fireman, paramedic and a medical assistant in a hospital emergency department before heading to a nursing program at the University of Central Florida in Orlando. Eventually he obtained dual Master of Science in Nursing and MBA degrees at UT Austin, one of the few universities in the nation offering the dual degree program at that time. He also earned a doctoral degree from UT Austin School of Nursing.



Ken Dion, PhD, RN, MBA

Taking entrepreneurial courses at the business school and health care courses at the school of nursing at the same time helped him to see where the gaps in the marketplace were.

"A lot of the big challenges in the U.S. health care system are around flawed processes. And who better to straighten those out than nurses? We are close to both patients and the processes."

Ken is excited about the potential for nurse innovators and entrepreneurs to thrive in today's health care climate. "Nurses have a bird's-eye view and at the same time they get down to eye level to look at a situation both laterally and vertically," he said. "This is why it's crucial for nurses to have a more prominent place at the table when discussing policy and process changes. We recognize opportunities for innovation and have the leadership and skills to develop them.

Which is what he did in 1999 when he founded Decision Critical, Inc., a cloudbased information systems management company dedicated to meeting the education, compliance and competency development needs of health care organizations. During his tenure with the company, he was awarded a patent for the Critical Portfolio<sup>™</sup>, an ePortfolio application. This first-of-its-kind application allowed nurses to upload a repository of their professional development artifacts to create a 360-degree view of themselves as a competent professional and not just someone compliant with completing required continuing education.

He was awarded a patent for Critical Staffer<sup>™</sup>, a reverse staffing system, and implemented the first high-availability electronic medical record in the health care industry. He has earned patents for technologies developed to enhance health care business objectives and processes and founded TurnPath, LLC, a health care technology innovation incubator.

More recently, Ken joined the Johns Hopkins University School of Nursing as assistant dean for Business Innovation and Strategic Relationships where he works with nurse scholars to develop innovative ideas, infusing entrepreneurship into the curriculum, and acting as a liaison between the JHU School of Nursing and other schools and outside organizations.

"I read recently that forty percent of the jobs that will exist in 2050 haven't even been thought of yet. Through innovation, nurses can make a direct impact on a single person's life or a huge impact on an entire population," he said. "Nurses can and should think about how they can translate their nursing skills into solutions that can be implemented locally, regionally, globally."

# **"They Genuinely Want You to Succeed!"** Undergraduate looks forward to health care career, thanks to full scholarship

Moms know best, and Emily Slaughter's mom is no exception.

The summer following Emily's freshman year in high school, her mom announced, "You have to get out of the house. You have to work or volunteer — something!"

Fortunately, Emily had a friend whose mother worked at Harris Methodist Hospital in Fort Worth, Texas, who let her know about available volunteer positions.

"I mainly ran errands that first summer," Emily said. "But right from the start I thought, 'This is really cool!'"

She went back the next summer and was on rotation in the emergency department and neonatal and cardiac intensive care units. The dye was cast.

That year I got to shadow patient care techs, head nurses and charge nurses, I realized that this is the kind of work I wanted to do.

When the time came, she successfully applied to UT Austin and was urged by her high school guidance counselor to apply for a Forty Acres Scholarship. Despite a "nerve-wracking" interview, Emily received the Jeanne L. and Michael Klein Forty Acres Scholarship, a full, merit-based scholarship.



#### Emily Slaughter

The Forty Acres Scholars Program is administered by the Texas Exes alumni organization and inspires and nurtures students and helps them develop their talents to benefit society. Scholars receive a rich college experience that provides academic, leadership and cultural opportunities with a cohort of fellow students. Funding provides tuition, a living stipend, a book stipend, and enrichment activities, including a community component and global and professional experiences.

"Beyond the benefits of an academic scholarship, I was drawn to the Forty Acres Scholar Program because of the genuine community it fosters among students and alumni, as well as the opportunities it provides for enriched learning and discovery," Emily said.

During her freshman year, Emily took nursing courses in addition to courses required for all undergraduate majors. She particularly enjoyed global health with Professor Lorraine Walker and a nutrition course.

After she receives her Bachelor of Science in Nursing degree in 2022, Emily thinks she may want to work on an advanced degree and become a nurse practitioner. In the meantime, she is looking forward to opportunities to study abroad made possible by the program's generous enrichment stipend supporting personal and professional development outside the classroom.

Asked what she would say to high school students interested in applying for a 40 Acres scholarship, she replied, "Do it! Just apply, because you never know."

And what about applying to the UT Austin School of Nursing?

"It's the most interesting nursing school in Texas. The amount of resources is amazing, and the faculty care about their students. They genuinely want you to succeed!"

















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We did it again!

This year, the UT Austin School of Nursing once again hosted career fairs, white coat ceremonies, lectureships, Welcome Back to School events, Forty Hours for the 40 Acres fundraising — and even squeezed in our annual graduation convocation. Lots of smiles and hard work, but always worth it.

# The Role of the Clinical Nurse Specialist in Today's Health Care System

When Christina Schulte worked as a neuroscience researcher she could often go eight hours a day without speaking to another person, which was one reason she decided bench science wasn't for her and decided to explore a career in nursing. Today, she is completing a Master of Science in Nursing degree with an Adult-Gerontology Clinical Nurse Specialist (AG CNS) concentration at the UT Austin School of Nursing.

"In nursing, I found there are so many different directions you can go," she said. "In particular, clinical nurse specialists have a variety of areas they can work in, such as improving health care processes that in turn improve patient care and save hospitals money, or they can focus on chronic illnesses, such as cardiopulmonary, which is what I'm pursuing."

As important and versatile as it is, the role of the CNS hasn't always been well understood, even by hospital and clinic administrators.

"It's a complex and varied role that can be hard to define," said Gayle Timmerman, PhD, RN, CNS, FNAP, FAAN and associate dean for Academic Affairs, "but that's what makes it wonderful and challenging and rich. The advanced practice nursing role of the CNS requires two scopes of practice nursing and medicine. Our CNS program educates students to work both directly with patients with complex problems and also with other nurses to improve nursing practice such as reducing infection rates on the unit.

"In the organizational sphere, a CNS is often in the role of initiating practice change and innovation at the system level, which can have a huge ripple effect of improving quality of care. CNSs have competencies that span from direct patient care to organizational change. That's a valuable knowledge base," she added.

As advanced practice nurses (APNs),



Angela Clark, Heather Cuevas, Gayle Timmerman and Sharon Horner

clinical nurse specialists provide diagnosis, treatment and ongoing management of patients. In some states, including Texas, CNSs have prescriptive authority. The UT Austin program includes clinical experiences in health promotion and the management of acute and chronic illness with a focus on theory and evidence-based practice. Most CNS graduates are employed as advanced practice CNSs in a variety of specialty practices, such as endocrinology, gerontology, neurology and cardiology.

"The UT Austin program began in 1996 and has educated hundreds of students who have gone on to work in a variety of environments," said Angela Clark, PhD, APRN, ACNS-BC, FAAN, FAHA, FCNS and associate professor emerita. "We have one of the largest programs in the country and have always been a little ahead of national trends. For instance, we had already incorporated gerontology into our curriculum and clinical CNS courses before national organizations, who regulate and certify APRNs, called for it to be added as a requirement for all CNS and NP programs that prepare adult APRNs. Thus, the adult-gerontology CNS came into being."

In addition to establishing a successful CNS program, the UT Austin faculty has contributed to the leadership of the National Association for Clinical Nurse Specialists (NACNS), the national organization for the CNS role.

"Two of us, Dr. Sharon Horner and I, have served as president. Dr. Timmerman has served on the Board of Directors, and Dr. Glenda Joiner-Rogers and Dr. Carol Delville served as program chairs for the national conference in 2018," Dr. Clark said. "Leadership at the national board level includes major health policy development, requiring negotiation with leaders in other organizations on a variety of issues that affect APNs and the CNS role."

This year, the NACNS began honoring members as Fellows of the organization,



Students Glenn Croft, Christine Schulte, Adam Francis-Verbeelen and Greg Greenberg at NACNS Conference

based on leadership with national impact and significant contributions as a CNS to health care and nursing practice. Faculty member Dr. Heather Cuevas and Dr. Clark were among 38 people selected for the inaugural cohort. Dr. Cuevas is also a clinician at the UT Austin School of Nursing's Family Wellness Clinic working with individuals with diabetes following years of work as a CNS at Texas Diabetes and Endocrinology.

Student Glenn Croft, Gregory Greenberg and Christine Schulte also attended this year's national NACNS conference to present an hour-long clinical management lecture on "Guidelines for Treatment of Hypertension: 2018 Update with a Focus on Salt Sensitivity."

"I loved seeing how well our AG CNS students presented and how well they

knew the research," Dr. Cuevas said. "The audience was very engaged and impressed by the information."

School of Nursing faculty have also played a major part in the Texas Clinical Nurse Specialist Association, with both Dr. Clark and Dr. Horner serving as president, and Dr. Cuevas as president-elect.

"What I think is particularly valuable is the leadership the School of Nursing has delivered to the nation by developing such a successful program," Dean Stuifbergen said. "Our students graduate with knowledge of adult health illness conditions and how best to provide the care these individuals need in order to enjoy a better quality of life."

"Being a CNS lets you be the expert," Dr. Cuevas said. "It's a role that allows you to do just about anything."

# In Memory of President Bill Powers



William C. Powers Jr., UT Austin's 28th president, passed away in Austin in March 2019 from complications from a fall and oculopharyngeal muscular dystrophy, a rare adult-onset muscle disorder. He was an esteemed teacher, nationally recognized legal scholar and

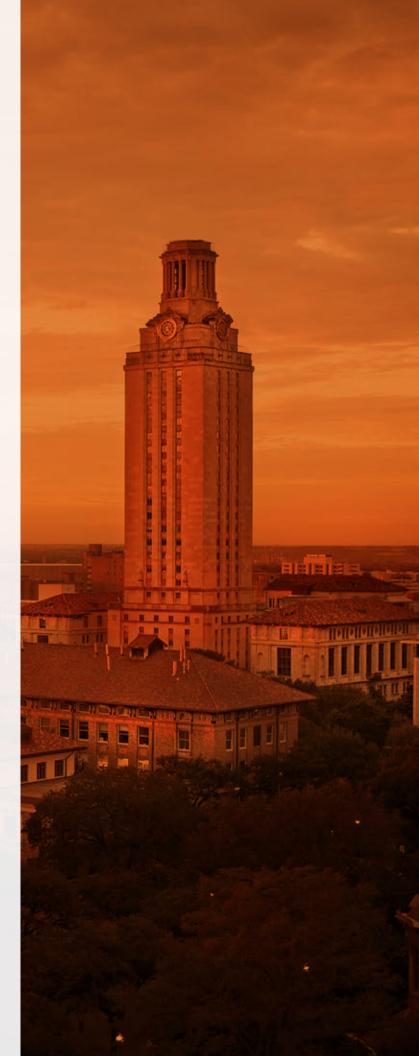
staunch believer in the value of the public research university.

Powers was the second-longest-serving president in UT's history, serving from 2006 to 2015. He was also a member of the School of Law faculty for more than 40 years, including six as dean. As president, he oversaw the establishment of two of UT's 18 colleges and schools and the successful completion of a \$3 billion capital campaign, the largest ever undertaken at a public university in Texas.

He earned a bachelor's degree in chemistry from the University of California, Berkeley, then served for three years in the U.S. Navy. He graduated magna cum laude from Harvard University Law School, where he edited the *Law Review* and clerked for a federal Ninth Circuit appeals court judge before taking his first teaching job at the University of Washington.

As president, Powers transformed the undergraduate curriculum by establishing the School of Undergraduate Studies and introducing signature courses as a requirement for undergraduates. He was instrumental in creating Dell Medical School, the first new medical school at a tier one public university in decades. In 2011, Powers set an ambitious goal to increase UT's four-year graduation rate from about 50 percent to nearly 70 percent (as of last year, it had risen to 69.8 percent).

As a defender of the research university ecosystem, Powers drew broad support from faculty members and was widely popular with students and alumni as he faced critics seeking to redefine UT's fundamental mission of providing a first-class education to Texas students and engaging in world-changing research. During that time, the Association of American Universities, which represents the nation's premier research institutions, named Powers as its chairman.



# Nurse Practitioner Students Meet the Tech World



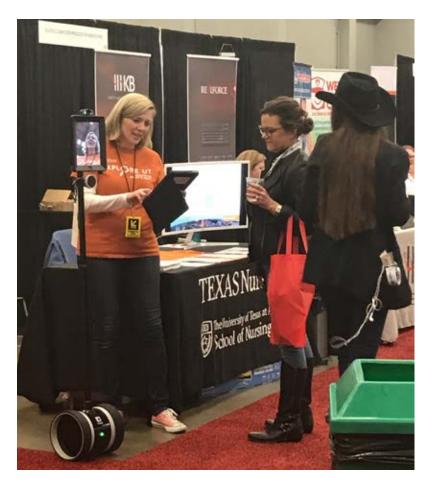
ach year the SXSW Music Conference provides a stage where the global music industry can strut its stuff alongside film and technology professionals and make

personal and work-related connections as well as discover the next generation of talent. This year was no exception as Marvin, the School of Nursing's telehealth robot, wheeled onto the scene, wowing visitors of the MedTech and Health Expo interactive section.

Donna Rolin, PhD, APRN, PMHCNS-BC, PMHNP-BC, clinical associate professor, and Tatyana Gustafson, CNS, PMHNP, clinical instructor, accompanied nine of their psychiatric mental health nurse practitioner program students and one doctoral student to the conference to set up a booth displaying research posters, mental health information, UT Austin School of Nursing program information — and Marvin.

The robot was operated remotely by the students who had it rove around the room, greeting festival participants wearing a sign that read "Ask me about psychiatric nursing."

"Marvin was a big draw," Dr. Rolin said. "People were so curious about the technology and how we use it





Students show Marvin off at SXSW.

to treat patients in mental health. We were able to explain how he works in our simulation lab, preparing students to provide care for people in rural areas who otherwise wouldn't be able to access essential treatment."

Conference attendance at the 2018 interactive, film, music and convergence sessions was 75,098. Dr. Rolin and Gustafson are already planning to take another group of students to next year's conference.

"A huge number of people came through and interacted with us enthusiastically," Dr. Rolin said. "We definitely would like to return to SXSW and think it would be a great idea to incorporate more simulation lab faculty and students next time."

# HAPPY ANNIVERSARY!

Two Centers of Excellence celebrate milestones

t the UT Austin School of Nursing, we enjoy a good celebration, and this year we have good reason to celebrate.

It's the 20th anniversary of the St. David's Foundation Center for Health Promotion and Disease Prevention Research in Underserved Populations (CHPR) and the 5th anniversary of the Center for Transdisciplinary Collaborative Research in Self-Management Science (TCRSS).



CHPR directors 1999 to 2019, Sharon Horner, Lorraine Walker, Dean Alexa Stuifbergen and Sharon Brown.

CHPR was one of 10 core centers funded by the National Institutes of Health/National Institute of Nursing Research from 1999 to 2011 with two consecutive P30 Centers of Excellence grant awards. Thanks to the hard work of Dr. Sharon Brown, director of the center for the first two years, followed by Dr. Alexa Stuifbergen for the last eight years of federal funding, and assisted by Dr. Lynn Rew and Dr. Lorraine Walker, the Center made strides in improving the health of underserved people through the development and facilitation of effective interdisciplinary research in health promotion and disease prevention intervention methodology.

As the NIH funding period drew to a close, Dr. Stuifbergen, now dean of the School of Nursing, reached out to St. David's Foundation, a local organization that invests in efforts to solve the most pressing health challenges across Central Texas to discuss financial support. In August 2011, the Foundation made a \$3 million gift to the School of Nursing to create a permanent endowment to support CHPR as an epicenter of health disparity research in the community. In recognition of the gift, the Center was renamed the St. David's Foundation Center for Health Promotion and Disease Prevention Research in Underserved Populations. In addition to funding research and interventions, St. David's CHPR hosts events on topics addressing underserved populations and health promotion.

To date, the Center has sponsored 100 colloquia and 17 annual conferences. In addition, the Center has supported 74 interdisciplinary research teams and 166 summer research institute trainees.



Students present research posters at St. David's CHPR Conference

"These events and research opportunities enrich the available learning experiences for students and faculty who are involved in related research," said Sharon Horner, PhD, RN, professor and current director of the center. "The research teams have used their pilot studies to date to obtain \$15.3 million in subsequent federal funding to expand the work to improve the health of Texans."

After Dr. Stuifbergen was appointed dean, Dr. Lorraine Walker served as director of the Center from 2011 to 2015, followed by Dr. Horner.

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Ithough the Center for TCRSS may be a toddler compared to St. David's CHPR, over the course of its five years of operation it has launched several successful projects and partnerships, and nurtured young scholars by providing them with pilot funding and enhancing their research portfolios. The Center was established through an NIH P30 grant in 2014 to develop, test and disseminate innovative self-management solutions to improve the health outcomes of people with chronic conditions.

Miyong Kim, PhD, RN, FAAN, and director of the Center, recently reflected on the progress made and the challenges ahead for faculty, students and community members.

"We have developed many successful collaborations on campus and in the community that have changed



The Center for TCRSS sponsors workshops that teach grant writing and foster collaboration.

the face of the School of Nursing," she said. "We now have a vibrant core of junior faculty who are building research careers and working on very successful groundbreaking projects. We have also fostered substantial community networking that has led to multiple community-partnered grants aiming to reduce health disparities and enhance health equity."

The Center has received grants from the Michael & Susan Dell Foundation and the City of Austin. The former

helped establish a Community Health Workers (CHW) Education Institute designed to prepare lay health workers to focus on improving health and wellness and aims to connect them to paid positions in various community health systems. The Texas Health and Human Services Commission has been a partner of the CHW project and has provided access to its statewide registry of these lay workers.

The City of Austin grant was the result of a collaboration between community partners Mama Sana/Vibrant Woman and the Alliance for African American Health in Central Texas to design projects to address health care inequities. The two six-year health equity grants totaling more than \$3 million were the first ever awarded by the city.

Recently the Center received a three-year, \$536,000 grant from Austin Public Health (APH) to work with local churches to develop AMEN — African American Church-Based Mental Health and Wellness, a program that is reducing stigma and improving access to effective treatment through conversations about



Miyong Kim, director of the Center for TCRSS

mental health. APH also awarded a one-year \$175,000 contract to support the Center's work with CHWs. The Center also supports events at the School

of Nursing and hosts the annual LaVerne Gallman Distinguished Lectureship in Nursing, grant-writing workshops, lunch and learn sessions on global health research, and co-sponsors the annual St. David's CHPR annual conferences.

"There is a large underserved population in Central Texas who are dealing with a variety of barriers to a healthy lifestyle," Dr. Kim said. "It's a really complex problem, and just one discipline is not going to be able to manage it. Someone needed to build a bridge between researchers, outside agencies, government entities and the community. The Center for TCRSS has done that and created a formal space for researchers of different disciplines to explore treatments tailored to the needs of underserved communities that address the external factors influencing health."



#### Lynn Rew

### 2019 Sigma Theta Tau International Nurse Researcher Hall of Fame welcomes Lynn Rew

Lynn Rew, EdD, RN, AHN-BC, FAAN, and professor at the UT Austin School of Nursing, was one of 23 nurse researchers inducted into the 2019 Sigma Theta Tau International Nurse Researcher Hall of Fame. This award is the culmination of decades of work addressing the health of adolescents and her contributions to developing and mentoring students and new researchers.

Dr. Rew is the fifth UT Austin School of Nursing faculty member to receive this honor.

The presentation took place during the organization's 30th International Nursing Research Congress in Calgary, Alberta, Canada.

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. The honorees' research projects will be shared through STTI's Virginia Henderson Global Nursing e-Repository, enabling nurses everywhere to benefit from their findings and insights.

### Better Than Perfect Nurse practitioner students receive 100 percent pass rate — again!

Question: How do you improve on perfection? Answer: By being perfect every time.

Since its inception, students of the psychiatric-mental health nurse practitioner (PMHNP) program at UT Austin School of Nursing have received a 100 percent pass rate on the American Nurses Credentialing Center board certification exams, the only board-certified exam in the nation. This means that all 111 students who graduated between 2011 and 2019 passed the rigorous exam on the first try.

"This stellar result speaks not only to the quality of our PMHNP program, but also the quality of our students," Donna Rolin, PhD, APRN, PMHCNS-BC, PMHNP-BC and clinical associate professor, said. "Because we have such high-quality applicants, we get to be very selective. That every student passes their first attempt every year shows a great deal of competence." compared to the national pass rate, which is 88.5 percent. In 2018, 2,451 students took the exam across the nation with 2,170 passing. During the more than 200-question exam, students are tested on their knowledge of health policy, identification of symptoms, diagnosis, identification of developmental stages and psychopharmacology.

The School of Nursing program is mostly face-to-face classroom instruction with some online courses.

"The classroom portion is a highly valuable part of the program and important to psychiatric nursing," Dr. Rolin said. "In addition, our faculty are constantly updating the curriculum to ensure that everything is current science and pharmacology."

"These pass rates are exciting and tell us a lot about the high-level of our curriculum and faculty," Alexa Stuifbergen, dean of the School of Nursing, said. "We couldn't be more proud of them and these students."



# Around the School

### Faculty



Rick Brown, PhD, was elected to Fellowship in the Society of Behavioral Medicine (SBM) in recognition of his long record of research and service to improve health.



Angie P. Clark, PhD, APRN, ACNS-BC, FAAN, FAHA, FCNS and associate professor emerita; and Heather Cuevas, PhD, RN, ACNS-

BC, FCNS and assistant professor, were among the first class of fellows inducted into the Clinical Nurse Specialist Institute Fellowship.



Nicole Osier, PhD, BSN, BS, RN, assistant professor, was recognized as an Apple® Teacher.

Carol Delville, PhD,





RN, ACNS-BC, clinical assistant professor in nursing, and Glenda Joiner-Rogers, PhD, RN, ACNS-BC, clinical assistant professor in nursing, were recognized as Distinguished Educators in Gerontological Nursing by the National Hartford Center for Gerontological Nursing Excellence.

**Professor Emerita Helen Erickson, PhD, RN, AHN-BC, FAAN,** was named the 2018 Distinguished Alumni Award winner at the University of Michigan School of Nursing.







Mary Wakefield, PhD (1985), RN, MSN (1978) FAAN, Visiting Professor, Distinguished Fellow, Joseph H. Blades Centennial Memorial

Karen Johnson, PhD,

**RN.** associate professor:

and Julie Zuñiga, PhD,

**RN**, assistant professor,

will be inducted into the

American Academy

of Nursing.

2019 class of fellows of the

Professorship in Nursing, was named a Living Legend of the American Academy of Nursing.

**Dr. Wakefield** is also serving as committee co-chair of "The Future of Nursing 2020– 2030," an ad hoc committee under the auspices of the National Academies of Sciences, Engineering, and Medicine to extend the vision for the nursing profession into 2030. **Dr. Karen Johnson,** associate professor of nursing and a RWJF Nurse Faculty Scholar (2014–2017), is a research manager for the committee.



Hsiu-Hung Wang, PhD (1998), RN, FAAN, received the Sigma Theta Tau International Honor Society of Nursing's Founders Award– Mary Tolle Wright Award for

Excellence in Leadership for her extraordinary contributions to nursing.



Cara Young, PhD, RN, FNP-C, assistant professor, was inducted into the Fellows of the American Association of Nurse Practitioners (FAANP).

### Alumni

Professor **Terry Badger, PhD (1986), RN, PMHCNS-BC, FAAN,** was appointed to the Eleanor Bauwens Endowed Chair of Nursing at the University of Arizona College of Nursing in recognition of her accomplishments as a nationally recognized nurse-scientist and leader in graduate education.

**Laura Cervantes,** MSN Family Nurse Practitioner (2018), was selected as the winner of the 2019 Excellence in Writing Award by the Association of Women's Health, Obstetric and Neonatal Health.

Annette B. Wysocki, PhD (1986), RN, FAAN, has been named Dean of the Stony Brook University School of Nursing.

### **Promotions**



**Alexandra García, PhD, RN, FAAN** Professor



Kavita Radhakrishnan, PhD, MSEE, RN Associate Professor

### Retirements



Sherry Hendrickson, PhD, CNS-BC Clinical Associate Professor



**Bobbie Sterling, PhD, RN** Clinical Assistant

Professor



NURSING UTEXAS EDU 23

# Students return to enjoy renovated spaces

### The Walker Terrace, student lounges and LEAP center open after a summer of renovations

Summers are supposed to be slow but somehow UT Austin School of Nursing didn't get the memo.

No sooner had we said "goodbye" to our graduates in May, then we were saying "hello" to construction crews who managed to renovate 12 thousand square feet of our building before classes began August 28.

It may not be the newest building on campus but it's solid, and we're making the most of it by enhancing amenities and making them more conducive to learning. Our students now have a large lounge on the fifth floor; the Learning Enhancement and Academic Progress Center has new, more spacious accommodations; and the refurbished, shaded terrace on the west side of the building is welcoming and connecting students and faculty in a comfortable and casual setting.



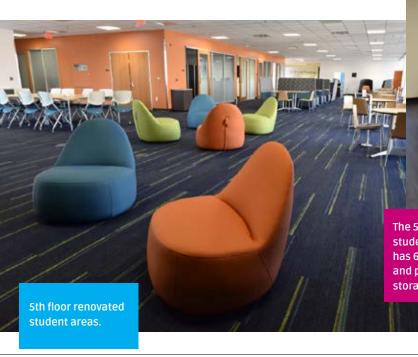


Walker Terrace.



Donor Mary Walker and Dean Stuifbergen.

OPENING GRAND OF

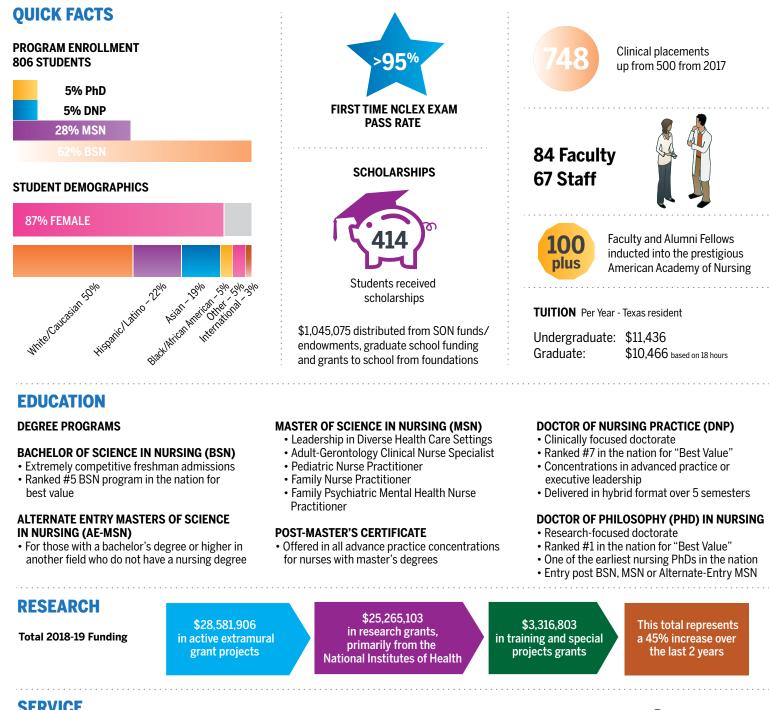


The 5th floor student kitchen has 6 microwaves and plenty of storage.

> Renovated 3rd floor testing area with new computers.

### THE UNIVERSITY OF TEXAS AT AUSTIN SCHOOL OF NURSING AT A GLANCE 2018-19

Year after year nurses are recognized by the public as the most trusted profession. 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.



### SERVICE



#### TWO NURSE-MANAGED CLINICS

Operated independently by the School of Nursing

Family Wellness Clinic – Austin Children's Wellness Clinic – Del Valle

Approximately 5,000 visits per year 100 students placed – pre-nursing to graduate





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