

# UAB NURSING

THE UAB SCHOOL OF NURSING

Spring 2007

## Patients First

RAISING THE BAR  
FOR NURSING CARE



E. Eldredge

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## UAB Nursing Editorial Board

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Florence Nightingale, who founded nursing in 1860, was clairvoyant in her ability to develop and translate nursing as an optimistic science that sustains today in professional practice. Nightingale established the components of professional nursing by building on scientific knowledge, evidence-based practice, and leadership for compassionate, competent patient care. Examples of Nightingale's thinking on professional nursing can be found in the 48 original Florence Nightingale letters housed in the Reynolds Historical Collection in the Lister Hill Library at UAB.

Written in the autumn of her life, Nightingale's letters are a testament to her impact on saving lives throughout the world through education, service, and research. This legacy lays a strong foundation for the nurses in the undergraduate and graduate programs at UAB. Florence Nightingale built the vision for nursing's core values and scientific knowledge to embody the best nursing practices for people worldwide at a critical time in history. This issue of *UAB Nursing* provides you with a preview of nursing science at the UAB School of Nursing—science that touches the world.

Newly funded science at the UABSON addresses patient safety by reducing medication error through clinical simulation, caregiving among rural African-American elderly and HIV/AIDS-vulnerable populations, world health initiatives aimed at improving the health of children and their families, and the rich nursing history found in the university's collection of original Nightingale letters. Several visiting scholars have joined us over the past year to assist us in expanding this work. Judith Vessey, Ph.D., CRNP, M.B.A., FAAN, Lelia Holden Carroll Endowed Professor in Nursing at Boston College, has worked with fac-

ulty and students in the Honors Nursing Program to further develop scholarly productivity related to the three missions; Dr. Joyce Gieger, Ph.D., R.N., Lulu Wolff Hassenplug Endowed Chair at the UCLA School of Nursing, assisted us in research about health disparities; and Rita Carty, D.N.Sc., RN, FAAN, professor and dean emeritus at the George Mason University College of Health and Human Services, assisted in the reorganization and redesignation of the World Health Organization (WHO) Collaborating Center.

Over the past year, we have experienced unprecedented growth in undergraduate and graduate enrollment and graduations. We are currently modifying undergraduate and graduate nursing programs to address the critical need for new nurses, clinical leadership, and technological advances in Alabama and beyond. Several indicators are showing positive gains and outcomes. Examples of these include:

- redesignation of the UABSON as a WHO Collaborating Center with a focus on child and family health;
- newly funded research and scholarly projects to improve patient safety, health-care quality, and workforce development;
- a million-dollar strategic investment from the UAB clinical system to develop an accelerated master's program for individuals with non-nursing baccalaureate degrees seeking preparation for professional nursing licensure and practice;
- the National Platinum Award from the Wellness Corporation for America for the Good Health Program, the 15-year partnership with the city of Birmingham to deliver preventive health services to the city's 3,500 municipal employees;



Doreen Harper, Ph.D.

- a #1 ranking in the *Chronicle of Higher Education* for 2003–2005 among nursing schools with doctoral programs for faculty scholarly productivity;
- successful implementation of the Graduate Nurse Residency Program in partnership with UAB Hospital; and
- major building renovations to upgrade learning and research environments, including clinical simulation and electronic learning.

As part of our commitment to expand nursing science to improve the quality of health care, the UABSON will partner with the Southern Nursing Research Society (SNRS) and nursing schools throughout Alabama to host the SNRS 2008 22nd Annual Conference in Birmingham. I invite you to join us for the scientific sessions of this meeting and to visit the UAB School of Nursing. The faculty, students, and I look forward to sharing our science and scholarship and to hosting you in Birmingham in 2008. See you then.



# Patients *First*

RAISING THE BAR FOR NURSING CARE *by Doug Gillett*

ILLUSTRATIONS BY ERNIE ELDRIDGE

**In recent years the role of the nurse has expanded to include tasks and responsibilities more critical than even the early pioneers of nursing might have dreamed. One UABSON researcher may have found yet another way for today's nurses to contribute: by managing and policing the flow of patient information throughout hospitals and other health-care institutions—a role in which they could save as many as 98,000 lives every year.**

In 1999, the nonprofit Institute of Medicine (IOM) issued a report titled “To Err Is Human: Building a Safer Health System.” The report concluded that 98,000 people die each year from medical errors, a number that continues to frustrate health-care workers. In environments where patients are supposed to be getting healthier, medication is sometimes misprescribed, some symptoms are misdiagnosed, other symptoms are overlooked entirely, and patients are lost as a result.

But in the widespread effort already underway to combat these errors and make patients safer, nurses have the potential to be a driving force, says Jacqueline Moss, Ph.D., an associate professor in the School of Nursing. Moss has spent six years researching medical error and patient safety. “There are many different kinds of health-care teams with many different jobs to do, but a common thread running through all of them is nurses,” Moss says. “Nurses should take the lead in getting the right information and making sure it gets to the right people so that patients get the proper treatment and nothing gets missed.”

### THE INFORMATION FLOW: NO MORE PLAYING “TELEPHONE”

Moss came to UAB in 2002 from the University of Maryland, where she had done extensive research on using information to coordinate health-care teams. With mentor Yan Xiao, Ph.D., she analyzed “high-reliability teams,” a term that refers to people who work in environments such as nuclear power plants, air-traffic control centers, and strategic defense bases. “A high-reliability team is a team that cannot make a mistake,” Moss explains, “and that concept was transferred to health-care teams, specifically trauma-resuscitation teams, operating-teams, and so on. You can’t make a mistake when you’re trying to land a

plane, but you also can’t make a mistake when you’re caring for someone, and in this particular case, someone who’s critically ill.”

As reports from the IOM and other sources showed, however, health-care teams were making mistakes—and those mistakes often had to do with information.

“If you dig down a little bit further into the Institute of Medicine report, the top seven most frequent reasons for error were related to access to information,” Moss says. “Either the health-care team was not getting the right information, it wasn’t accessible, or it wasn’t in the right format.”

Working alongside Eta Berner, Ed.D., a professor in the health informatics program at UAB’s School of Health Professions (SHP), Moss received a grant from the National Library of Medicine (NLM) in 2002 to analyze information needs in cardiovascular intensive-care units. Moss drew upon her previous research at Maryland as well as her many

**“Actual communication of information is a large source of error, so if we build systems that automate that communication, we can decrease medical error,”**

**Moss says.**

years of experience as a critical-care nurse to devise an electronic data-collection tool for tablet PCs that would quantify observations of information use and help standardize the way data is collected.

“Verbal communication can be unreliable in a stressful environment,” says Moss, comparing it to a child’s game of “telephone,” where messages pass through multiple people and come out very different from the way they started. To come up with the alternative, Moss and Berner’s research group took great pains to find out what information each person on a health-care team specifically needed so





that designers could build standardized and automated systems for information delivery.

“Actual communication of information is a large source of error, so if we build systems that automate that communication, we can decrease medical error,” Moss says. Her work is already paying dividends in a real-world environment—one very close to home: “The instrument we designed has been modified, and it’s now being used to analyze physicians’ use of information at Children’s Health System,” she says.

### DECISIONS, DECISIONS

With the NLM-funded project a success, Moss expanded her focus to information-analysis and decision-making systems for health-care teams. With Berner once again her co-investigator, Moss embarked on a project called “Clinical Decision Support Simulations for Medication Administration Safety.” It is funded by the U.S. Department of Health and Human Services’ Agency for Healthcare Research and Quality (AHRQ).

The challenge, Moss says, is that the traditional business-oriented types of information systems don’t fit health-care workers’ needs, and neither do the traditional techniques for evaluating them. “Interviews, focus groups, looking at policies and procedures—those all work well



for business because business processes can generally be clearly defined,” she explains. For example, “If you draw money out of an ATM, you can design the machine so that it happens the same way every time; it’s easy to design systems for those processes. The problem with health care is that very little happens the same way every time. Health-care workers perform processes differently based on their expertise, their roles, and the situation—they may be under a lot of stress, or it may be an emergency.

“Also, health-care workers don’t sit at a desk. They work in teams and share information with team members who might be dispersed geographically. You might have a physician on a team who might be in another hospital across town.”

To come up with a better solution, Moss adapted an information system called Vista, which is currently used by the Veterans Affairs Medical Center. Using a Vista component—an inpatient-

information piece called CPRS—she created a simulation system that nurses from UAB Hospital are now testing.

Irina Rymarchuk, a graduate assistant in SHP’s Health Informatics Program, assisted in the design of the system. Rymarchuk had a personal connection to the issue of medical error and patient safety going back 20 years when her brother died in a hospital in the Ukraine, their native country.

“The doctor didn’t even check that he had asthma—he had asthma from six years old, and he was just 26 when he died,” she remembers. “But the doctor didn’t check that he had allergies to penicillin, and he died from an injection of penicillin. So when I started this program, I was thinking it was really interesting that I was dealing with a situation now that we’d had in the past in my family.”

The decision-support system is based around tablet PCs and servers that are connected to a single medical database,

**Health-care workers perform processes differently based on their expertise, their roles, and the situation—they may be under a lot of stress, or it may be an emergency.**

and designing and refining the system is something Moss says she's enjoyed. "It's fun because I get to play with a lot of different toys," she says with a laugh, "but I've also enjoyed this research because I get to be in the clinical area as well as the laboratory."

Rymarchuk adds that she finds it fulfilling to be part of a project that could make a substantial difference in the way nurses do their jobs. "I have done extensive research on nursing decision-support systems, and I found just a few articles that only mentioned a little bit about the things we're trying to accomplish. I would say we're pioneers."

### CHALLENGES AND TRIUMPHS

As UAB Hospital nurses try out the new system on mock patients under the observation of Moss and her team, the researchers will continue to refine the system and modify the data-collection tools. While she says she's enjoyed the process, that doesn't mean it's been easy.

"Another reason why traditional methods don't really work in health care is that it's

difficult for health-care workers to accurately describe exactly what they do," Moss says. "If you're an expert, you don't think about all the steps that go into what you do."

"It's like driving a car—once you become an expert, you can drive a car, talk on a cell phone, and eat a cheeseburger at the same time," she says with a grin. "But if I asked you how you do that, you'd probably leave out many steps because you don't even think about it. . . . Same with how pilots fly a plane: They don't do it 1-2-3 in steps; they see it all at once. We're going to have to take a close look at how novice nurses work compared to how experts work."

Further complicating the issue is the ongoing nursing shortage. "Nurses are being pulled into units they're not familiar with, using medications they may not be familiar with," Moss says. They're also being forced to deal with more information than ever before. "We're collecting so much information that if we don't tailor it to the specific needs of health-care workers, they're just lost in it. If you had

**"We hope that we'll be able to make [nurses's] jobs a little more manageable, and when they can focus less on procedure, they'll be able to focus even more on keeping patients safe."**

to go through all the information to find that one piece that would help you reach a decision, you'd just give up. You'd be there 24 hours a day."

The key to devising this latest decision-support system has been focusing on what Moss says are known as the "Five 'Rights' of Information": the right information at the right time, in the right format and the right amount, to the right person. Through all this, she says, it's been important to understand that those "right" answers will be different for every circumstance, which means coming up with a flexible system each facility can adapt to its own needs.

"The end product of this project will be a simulated information system with decision-support pieces that can be used at other institutions and tools to design systems that are contextually appropriate for them, because every institution is different, and specific systems do not transfer easily between them," Moss says.

But it will also be a huge boon to nurses as they enter an era where their skill sets and responsibilities are expected to grow by the day.

"Nurses don't just have more information to deal with than ever before; they also have more to do," Moss says. "We hope that we'll be able to make their jobs a little more manageable, and when they can focus less on procedure, they'll be able to focus even more on keeping patients safe."





Yvonne Eaves (left)  
and Richard Allman

## Quality Care in the Golden Years

by Anita Smith

*When Yvonne D. Eaves, Ph.D., was interviewing in April 2006 for a UABSON faculty position, she learned something about the UAB environment that pleased her: She discovered that the university places high emphasis on collaboration, interaction, and cooperation among its various schools and centers.*

**“My goal is for more caregivers to be willing to raise their hands and say, ‘Hey, I need some help.’ ”**

Yvonne D. Eaves, Ph.D.

“A strong collaborative academic environment is something that is very important to me,” Eaves says.

Eaves joined the UABSON faculty in August as an assistant professor of nursing in the Department of Family/Child Health and Caregiving. From the time she arrived at UAB, Eaves experienced a spirit of collaboration via her work with UAB’s Center for Aging. The center’s director,

Richard M. Allman, M.D., became the sponsor for Eaves’s research project, which focuses on rural African-American families and caregiving for their older adult relatives. Eaves is conducting this research with funding from a National Institute on Aging career-award grant, which she received when she was a faculty member at the School of Nursing at the University of North Carolina at Chapel Hill.



## A PARTNERSHIP THAT OPENED DOORS

Eaves says her collaboration with Allman has expedited the smooth transition of her research from North Carolina to UAB. “Dr. Allman helped me get connected within UAB, with various faculty members and various centers that relate to my research,” she says. “For example, Dr. Allman told me about the UAB Minority Health and Research Center. Soon I was getting help from that center’s director, Dr. Mona Fouad. At that center I have found common concerns that I address in my own research. These include concerns about the health needs of poor minority family members who suffer from chronic illnesses in rural settings, where they have limited access to the care they need.”

Allman also helped introduce Eaves to the Birmingham area by inviting her to a UAB Center for Aging reception that attracted guests from throughout the community. Also, Allman put Eaves in contact with the Alabama Hospital Association, an organization that has become helpful to her research. “Alabama Hospital Association staff members familiarized me with hospitals in Alabama rural counties,” Eaves says. “This has led to my partnering with a rural Alabama hospital, where I have volunteer staff privileges that help facilitate my research.”

Contributing to the knowledge base of caregivers is one of Eaves’s major missions. She became interested in caregiving while working as a home health-care nurse in her native state of Illinois.

“Most of my home health-care clients were older adults,” she says. “I was teaching families how to perform complicated health-care tasks such as giving insulin, changing dressings, hanging intravenous fluids, and giving intravenous antibiotics. I became aware of how much we expect

many caregiving families to do for their loved ones.”

## HELPING THE HELPERS

Eaves continued to focus on caregiving while working toward her Ph.D. in nursing at the University of Michigan in Ann Arbor. Her doctoral dissertation focused on caregiving for stroke survivors within rural African-American families. She gathered data from North Carolina families while she was teaching at the University of North Carolina. “I wanted to focus on rural African-American families and how they provide care to their older adult relatives, because I felt there had not been much caregiving research related to that group,” she says.

Eaves has a particular interest in what she terms “caregiving transitions.” These are periods in which a family’s circumstances change surrounding a caregiving responsibility—such as when the patient’s condition worsens, or when the caregivers themselves become ill. When these transitions occur, a caregiver often needs to seek help, Eaves explains. This might mean asking another family member to assist or perhaps turning to a hospital or a nursing home for support.

### **Eaves has several goals related to caregivers:**

☒ She wants her research to shed more light on resources available to caregivers. “I have encountered families who have lived in the same rural towns all their lives with no idea how to identify or access local resources such as social-service agencies or health-care institutions,” she says. As part of her research, Eaves is learning more about these resources.

☒ She hopes that caregivers will be more willing to seek help. “I want caregivers to

become more capable of identifying and responding to caregiving transitions. My goal is for more caregivers to be willing to raise their hands and say, ‘Hey, I need some help,’ and then know how to get that help.”

☒ Eaves wants to encourage families to plan ahead for decisions related to chronic and end-of-life illnesses. This is important, she says, noting that caregiving responsibilities can occur suddenly and sometimes last for years. “If families plan ahead, they can address vital questions such as, ‘How do I make decisions about a nursing home?’ They can ask older adults in their families to voice opinions about their own chronic and end-of-life health care while these older adults still are able to express themselves clearly. By hearing their parents’ feelings firsthand, children of these older adults won’t have to feel guilty years later if they have to implement difficult decisions. They won’t feel they are doing it alone.”

All in all, Eaves says her caregiving research is very much about empowerment. “I hope my research can contribute to some caregivers feeling more empowered by having more information.”

Collaboration with UAB’s Center for Aging, Eaves says, was valuable in “setting the wheels in motion” for her caregiving research after she arrived in Birmingham and Alabama. She anticipates that her collaboration with the center will continue and strengthen over time.

“I have found UAB’s collaborative atmosphere to be very intellectually stimulating,” she says. “Everyone I meet and interact with at UAB is so very genuinely knowledgeable, team-focused, and genuinely supportive as they wish to improve the quality of health care.”



Lynda Harrison (eighth from left) with members of the Marshall County Latino Health Community Partnership

## Caring for the Global Family *by Doug Gillett*

Over the course of its history, the School of Nursing has educated literally thousands of nurses now working across Alabama and throughout the United States to ensure quality patient care. But the school's reach goes well beyond those borders.

For 13 years, the school has been home to a World Health Organization (WHO) Collaborating Center, one of about 40 centers worldwide designed to promote quality nursing care in all parts of the globe. The UABSON's redesignation efforts, conducted every four years, are part of a plan to make the school an even more important player in global health.

"Because the needs of the world change, rather than just designate these centers forever, every four years the WHO looks at our strengths and what we can do to contribute to their broader goals," says Doreen Harper, Ph.D., dean and director of the collaborating center. "It's an opportunity for global networking for our students and faculty, it's an opportunity

to participate in multisite initiatives and projects, and it's an opportunity to really make a contribution to global health through our work in nursing."

"The Pan-American Health Organization [PAHO], the arm of the WHO that covers the Western Hemisphere, is asking the center at UAB to focus on child and family health," says Lynda Harrison, Ph.D., professor and deputy director of the center. "These areas combine the UABSON's faculty expertise and clinical resources with the needs of the PAHO region, and the faculty came up with four specific objectives under that broader category."

### STRENGTHENING EDUCATION, STRENGTHENING CHILDREN

The first goal is to design and implement educational programs to bolster the knowledge base of nurses in specified areas. One component of this goal will involve workshops to help nursing faculty incorporate information about the Integrated Management of Childhood

Illness (IMCI) program into nursing curricula throughout Latin America. The IMCI is an approach to evaluating and treating common causes of childhood morbidity and mortality, and using this approach can make nurses even more effective stewards of children's health.

"The IMCI program teaches nurses to look for these indicators of the main causes of childhood morbidity and mortality at every patient contact so that they don't miss opportunities to provide comprehensive health care," says Harrison. "For example, if a child comes into the clinic with diarrhea, instead of only treating that immediate case of diarrhea, the nurse would also look at the child's growth and development, his weight, his vaccination record—a whole host of things."

The hope is that even if a child sees that nurse only once—a likely situation in low-resource countries where both nurses and transportation are scarce—the nurse will still be able to assess the child's overall status and make appropriate referrals

or treatment recommendations that will promote optimal health and developmental outcomes.

Nursing faculty have many other ideas for offering educational programs for nurses, including using online technology to offer courses from the SON to nurses around the world and partnering with nurses in other countries to develop new programs for nurses, such as programs to prepare advanced-practice nurses in neonatal care or care for patients with HIV/AIDS.

## CREATING THE GLOBAL HEALTH LEADERS OF TOMORROW

The second objective focuses on strengthening leadership in nursing education and practice—a goal the SON is already accomplishing. Last year the school brought 15 nursing faculty from Chile for a one-month leadership development program that combined English education with nursing and public-health seminars and exposure to the American health-care system. “In the future we want to open this program to nurses from around the world,” Harrison says, pointing out that existing partnerships in Zambia, Honduras, Belize, and Guatemala make those countries prime candidates for such an effort.

But the program won’t stop there. “The idea that I’m excited about is [that] we will ask every participant to come with an idea for a project that will address child and family-health needs,” Harrison continues. “We will pair them with mentors here who are interested in collaborating with them on their project ideas, and in that month they will develop proposals for their projects. The idea is that when they go home, within the following year they will implement those projects with ongoing telephone and e-mail communication with their mentors here.

“This is one way that we can have an impact by improving child health. It could be direct intervention, or a research proj-

ect, or it could be an educational project—it depends on the needs of the country.”

## OPENING EYES TO RESEARCH

Building research capacity around the world is the focus of the third WHO goal to expand the idea of “evidence-based practice.” “Even if nurses aren’t doing research, they all need to make sure that their practice is based on the best available research, and to do that they need skills in both finding and critiquing research,” Harrison explains.

To build those skills in nurses from other countries, the SON’s chapter of the Sigma Theta Tau honor society is partnering with chapters in Africa and Brazil to form the Virtual Writing Collaborative. Each member will work with participants in their “virtual” writing groups and with a mentor to come up with a publishable paper after one year. The project will teach participants not only about writing but also about the processes for publishing research.

The school also hopes to expand its collaborative research projects to other countries. One such project already in the works is Harrison’s own “Familias Fuertes” (Strengthening Families) project, a seven-week program to promote better family communication to combat problems such as substance abuse, teen pregnancy, and sexually transmitted diseases. Harrison is already implementing a needs assessment for this program in Latino communities in Albertville, Alabama, and she hopes

to expand the program to Tegucigalpa, Honduras, if the funding can be procured.

## THE DRIVE TO THINK GLOBALLY

The WHO’s fourth and final objective is simply to spur more interest among American students and faculty to contribute to WHO’s global activities. To assist in these efforts, Rita M. Carty, D.N.Sc., dean emeritus and professor at George Mason University and former secretariat of the Global Network for International Nursing and Midwifery, is serving as a visiting professor. The school has plans to designate interested faculty members specifically as WHO center scientists and is also exploring a center advisory board. “Then we can have ongoing strategic planning about what we’re doing,” says Harper. “We’ve offered several seminars and consultations with interested faculty and students just to identify common areas for development.”

Given the critical—and increasingly wide-ranging—roles nurses play worldwide and the increase in global health issues, Harper says it is vital for American nurses to be willing to serve as health-care ambassadors to other countries.

“Recently we had a strategic planning retreat for all the nursing faculty to look at our undergraduate program, and President Garrison came to speak,” she recalls. “She said that she had recently been invited to a meeting of U.S. university presidents, and Condoleezza Rice was at this meeting. One of the topics was how important it is for universities to promote opportunities for study abroad. In our war on terrorism, the people-to-people understanding of other cultures is the best prevention, both for other cultures to see U.S. citizens in a different light and for us to see the commonalities that we all share. We need to understand that that we’re a part of this global village, and it’s important that we give students the opportunity to see it.”

**“It’s an opportunity to really make a contribution to global health through our work in nursing.”**

Doreen Harper, Ph.D.



**“Not only do we teach them how to manage the stress in themselves, [but] we also talk about how to deal with anger and stress in other people.”**

Marti Rice, Ph.D.



## Keeping Their Cool in School

*by Terianne Latsis*

**D**on't be surprised if you walk into a Talladega County elementary school and see fourth- and fifth-graders balled up like turtles. It's the "turtle method," a technique of anger management taught to children in the Promoting Anger/Stress Management and Self-Concept (PASS) Program.

Anger is not only on the rise among adults, but it's also increasingly apparent

in younger children, as several recent and shocking incidents of in-school violence have demonstrated. While the ill effects of anger on adults have been well documented—high blood pressure and high levels of cortisol among them—little research has been done on its effects on children.

The UABSON's Marti Rice, Ph.D., and her colleagues are hoping to fill in the gaps with their research on the effects of

an intervention aimed at reducing anger and stress in school-aged children.

## ANGER: A MISUNDERSTOOD EMOTION

“Trait anger” is defined as the anger one carries over time, as opposed to “state anger,” which is a temporary reaction to something in the moment. While the conventional wisdom sometimes suggests that outwardly expressing anger helps quell it, Rice and her colleagues are finding that is not the case. In fact, they have learned that children who employ “anger-out” methods—outward expressions of verbal or physical aggression—have higher levels of trait anger. By far the most effective method of dealing with anger has been the anger reflection/control method in which children are taught various cognitive behavior methods to deflect and deal with their anger.

Now in its fourth year, PASS is an NIH-funded intervention study in which eight selected Talladega County elementary schools are randomly assigned as either experimental or control. Rice says the focus on a rural community is important because not only are rural communities often underrepresented in this kind of research, but they also face unique problems such as access to health care and extracurricular activities that have a direct impact on anger issues. “Rural areas tend not to have as many sports programs, for instance, and even when they do, access to them is not easy,” she says. “Poor nutrition can be a stressor, and that may play a part in some of the overweight that we’re seeing in children. In some of our classrooms, 38 percent of our children are overweight.”

In the experimental schools, three cohorts of children will go through the

program; for each cohort, the program covers 22 months, with 17 months being part of the intervention and the rest being follow-up. All fourth-graders, not just those with anger problems, are enrolled. “It’s not only about trying to teach how to deal with your own anger, but about how to deal with other people’s anger, too,” says Rice. “Not only do we teach them how to manage the stress in themselves, [but] we also talk about how to deal with anger and stress in other people.”

The first phase is an 18-week intervention, which has two components. The first is learning cognitive behavior techniques by meeting once a week in small groups for 45 minutes. An interventionist teaches the children to recognize anger triggers and stress in themselves and others and to use a variety of techniques to diffuse it; they also do role-playing, videotaping, crafts, and group projects. The other component is physical activity that takes the place of regular physical-education class. For 30 minutes each day, the children participate in noncompetitive, moderate- to high-intensity physical activities “so that they are actually active through most of the 30 minutes,” Rice explains. The two components are carefully coordinated.

## WHAT ANGER DOES TO THE BODY

To measure success the team takes a battery of outcome measures, some of which are paper evaluations. But it is in documenting the physiological effects of anger on children that Rice feels the program has made its biggest contribution. At various intervals throughout the program, measurements such as blood pressure and cortisol levels are recorded. The team also tracks absences and viral

illnesses, which are directly related to immune responses.

“In our early research into anger and patterns of anger expression, we found higher blood pressure in children as young as third grade—these patterns start early,” she says. “While it may not necessarily be hypertension as it may be in adults, there are associations with blood pressure, and if you have blood pressure elevation in childhood, it can track into adulthood. So it really is a prevention model, if you will.

“One of the things we’re doing right now is analyzing data,” Rice says. “But our plans—and we have done some preliminary work with this—are to work with teachers as the next step. We would teach the teachers how to implement the program.”

## TEACHERS AND PARENTS: SPREADING THE KNOWLEDGE

Rice and her colleagues have found that teachers also have anger and stress issues and plan to do an intervention program with them. “We hope they will model some of the behavior for the students as well,” she says. A third phase of the program would be to work with parents, helping them learn more effective ways of dealing with anger.

The ultimate goal is to make children aware of different options for dealing with anger—and to give them tools that will serve them well even as they face new challenges in other phases of life. “We want them to learn to put these tools in their repertoire so that they can deal with difficult situations more effectively,” Rice says. Their hearts, and their health, may depend on it.

## MARLENA BARGINERE by Doug Gillett

In seven years, Marlena Barginere has worked as a staff nurse, a travel nurse, a charge nurse, and a nurse manager. She's been an insurance case manager, teaching insurance agents about medical records and the mechanics of bodily injuries, and she's advised attorneys on depositions regarding injuries. She's currently teaching in a licensed practical nursing (LPN) program at Herzing College.

In short, Barginere is a one-woman tour de force of opportunities and possibilities for the modern nurse. And she's now pursuing a Ph.D. at the UAB School of Nursing so that she can share with aspiring nurses the knowledge she's gained through that wide array of experience—and give them the tools to take advantage of those opportunities themselves.

“When I tell people what I've done in

seven years, they're in shock,” she says. “No one thinks about all the opportunities available for nurses.”

Barginere was in her master's program at the SON, studying quality improvement and health outcomes, when she started thinking about pursuing a Ph.D. “Dr. Kathleen Brown was my advisor, and she made a comment that my work screamed to her ‘doctoral,’” she recalls. “I called her a year later, when I was thinking about getting another master's, and she said, ‘No, why are you thinking about a master's? Now you need to be thinking about a doctorate.’ She was very encouraging.”

Along with Beth Stullenbarger, D.S.N., associate dean of graduate studies, Brown pointed Barginere toward a new fellowship for minority students designed to confront the shortage in nursing education. “It is

inspiring, especially since I was one of the first four recipients of the fellowship—it was a very new kind of honor,” Barginere says. “I've just finished my first semester successfully, and hopefully next semester I'll have my first article for publication. It's exciting and rewarding to see your name in a research journal.”

The current target of Barginere's research is medical error, an issue she's been able to observe through working at nine different health-care institutions. “Each institution, whether large or small, has some of the same problems,” she says. “So I started thinking of ways to reduce those problems, and I thought I might want to research that topic.”

“Given the nursing shortage, you need systems that prevent error from occurring or help people recognize errors,” says Barginere, whose program mentor is Jacqueline Moss, Ph.D. “Her funded research in medical error and patient safety is an excellent match for me as I develop my program of research in the doctoral program.”

Barginere plans to study how standardized protocols regarding discharge teaching improve patient outcomes. “When a person enters a hospital and comes in with a certain diagnosis, I think we should establish nursing care up front so that we can go to a more standardized treatment.”

Barginere says she's grateful to the SON for teaching her to look beyond the easy answers when exploring issues related to nursing. “When you decide you want to join a doctoral program, you have to be able to see beyond all the factors at the bedside,” she says. “It's very important that nurse educators emphasize critical thinking to solve problems. I think that's a big part of nursing—having that knowledge base, not being a nurse who's just performing like a robot, but actually understanding what you're doing.”



**Marlena Barginere**





Susan Lacey (center) with Children's Health System researchers Nita Morrissette (left) and Angela Lee

## SUSAN LACEY by Doug Gillett

**T**he daughter of a perioperative nurse, Susan Lacey, R.N., Ph.D., has vivid memories of both the triumphs and the frustrations her mother encountered during her career.

“My mother was a director, and I thought she led a very interesting life,” Lacey says. “But when the systems of care were not supported for what my mom was trying to do as a nurse or a manager, then her life, her world, suffered because she was so conscientious and caring and wanted the very best for both her patients and her nurses. The old adage was very true in our home—if momma wasn’t happy, nobody was happy! But it was only because she cared so deeply. I didn’t understand that, but now, as a professional as well as a wife and mother, I am fully aware of what her world must have been like.”

Those memories became a driving force for Lacey, now an assistant professor at the SON. As part of the prestigious Robert Wood Johnson (RWJ) Executive

Nurse Fellowship she achieved last year, she has undertaken an ambitious project to create a “virtual center” for analysis and development of the pediatric nursing workforce. The more nurses, administrators, and policymakers know about the state of the available workforce, she says, the better they’ll be able to allocate resources and refine the structures and processes they encounter in the health-care system—and patient outcomes will improve as a result.

Lacey started out as a communications major at Mississippi State University, but after working in that field for a few years, she picked up a nursing textbook, and “I immediately thought, ‘I should be doing this,’” she remembers. She went to the University of Southern Mississippi for her undergraduate degree in nursing, got her master’s at the University of Texas, and earned a Ph.D. at Kansas State University before coming to UAB.

Lacey chose to focus on pediatric nursing for her latest project because of recent trends heavily favoring geriatric care in terms of funding and resources. “With 76 million baby boomers getting older, they will require tremendous amounts of health-care goods and services,” she says. “To match this need there has been a big push to channel resources into developing geriatric nurse specialists and recruiting nurses to do adult acute and chronic

care, which under the circumstances is an appropriate strategy. But no one’s really spoken up and said, ‘Wait, if everyone’s focusing on one particular subspecialty in the population, there’s great potential to siphon resources from one group of citizens to another.’ I’m trying to bring people together to think about, and plan for, the future of pediatric care as well.”

Very little has been done to collect or analyze data on the pediatric-nursing labor force, Lacey says, and so the effects of the ongoing nursing shortage on pediatrics still aren’t widely understood. “We know in general what our nursing workforce looks like, but there’s no single entity that deals with providing an adequate and competent workforce for pediatrics,” she says. “This project really fills that gap.”

“I want to look at the pediatric nursing workforce in terms of how nurses are utilizing the hospitals; what kinds of care models are used; and outcomes that are linked to the structure and process within the nursing profession, both within a given organization and in pediatric hospitals collectively,” she says. “My hope is that this will translate into some actionable data so that pediatric hospitals can better plan for the future.”

Lacey’s commitment to pediatric nursing extends well beyond her RWJ project—part of her academic appointment includes spending four days a month at Children’s Hospital helping staff members with their research. “There’s nothing more exciting than helping someone who works at the bedside put together a research protocol and then seeing their work materialize,” she says.

“Clinical staff have the best research questions. It is such a thrill to be part of that support for them, and it’s a very exciting career for me. I can’t imagine doing anything else.”



## Surpora Thomas, Cynthia Barginere, and Charlie Dickson *by Anita Smith*

*Three high-achieving registered nurses with strong UABSON ties were recently declared “Legends in White” by the Birmingham Black Nurses Association Inc. The honorees are Surpora Sparks Thomas (B.S.N., 1985), Cynthia C. Barginere, (M.S.N., 1995), and Charlie Jones Dickson (UABSON faculty 1973–2000).*

### **Surpora Sparks Thomas**

When Surpora Thomas began her pediatric nursing career in 1962, she became a staff nurse at Children’s Hospital in Birmingham. Today she’s still at Children’s, now known as Children’s Health System, and she occupies the top nursing post there—senior vice president of nursing and chief nursing executive.

She was a Grady Hospital (Atlanta) diploma nursing graduate before she earned her B.S.N. at the UABSON, and she since has earned a master’s degree in business administration from Samford University.

A wide range of honors has come her way to recognize her achievements. In November 2001, Children’s Health System trustees and executives dedicated the Surpora Thomas Nursing Education and Research Center. In 1987, the Alabama State Nurses Association named her “Most Outstanding Nursing Administrator,” and

she has been inducted into the Alabama Nursing Hall of Fame and the Alabama Healthcare Hall of Fame.

To Surpora Thomas, her career has always been about rendering quality health care to children, whom she regards as “the most precious treasures this country has—those who will determine the future of our country.”

### **Cynthia C. Barginere**

Cynthia Barginere is vice president for patient-care services and chief nursing officer at Baptist Medical Center South in Montgomery. She formerly was associate vice president and chief nursing officer at UAB Hospital—becoming the second African-American chief nursing officer in UAB history. “My father encouraged me to become a nurse, possibly his greatest gift to me,” she says.

Barginere is grateful for the collaborative skills she learned in the UABSON

master’s curriculum—“In my opinion, the most well-rounded program.”

She has received a number of honors and broadening experiences, including being a Robert Wood Johnson Executive Nurse Fellow and a Johnson & Johnson Wharton Fellow.

Barginere speaks of nursing as a profession in which she has witnessed massive change. “Because of recent turmoil in nursing, many nurses have lost some passion they once felt,” she says. She wants to address that issue among the nurses she touches. “I want to help nurses tap into what made them go into nursing, to help more people inside and outside nursing to realize what nurses contribute.”

### **Charlie Jones Dickson**

Charlie Jones Dickson, Ed.D., was honored by the Birmingham Black Nurses Association for achievements that included becoming the first African-American registered nurse to serve as president of the Alabama Board of Nursing.

Through a series of appointments by various Alabama governors, Dickson was a 15-year member of the board, which governs the practice of nursing and nursing-education programs in Alabama. She worked with legislators on reasonable laws for mandatory continuing education for nurses’ license renewal. She was a leader in a successful battle to maintain the Board of Nursing’s autonomy.

Providing quality nursing education has been a way of life for Dickson, a UABSON professor emeritus. In addition to 37 years of teaching at the school, she started the Associate Degree in Nursing Program at Lawson State Community College and has taught nursing students at one of her alma maters, Tuskegee University.

In citing her greatest career satisfaction, Dickson says it has come in teaching nursing students. “Through teaching, you can become a role model.”

## Board of Visitors Profile: Jean Tomlinson *by Anita Smith*

In 1950, Jean Tomlinson felt that she was on top of the world—and with good reason. She was happily married to her college sweetheart, Jack Tomlinson. They had a two-year-old son, Jack Jr., nicknamed Jackie.

“Then one morning I awakened with my left arm paralyzed,” says Mrs. Tomlinson. “I said to my husband, ‘Call the doctor. I have polio.’”

Her self-diagnosis was correct. Tomlinson was admitted to Birmingham’s Jefferson-Hillman Hospital (later renamed University Hospital, then UAB Hospital); the successful polio treatment she received there became one of many factors that made her admire and trust UAB. Now the mother of two, grandmother of five, and great-grandmother of two, Tomlinson says quality UAB health care repeatedly has helped her family.

“In more recent times, when I needed treatment for back problems, I was pleased when my neurosurgeon and good friend, Dr. Griff Harsh, chose to admit me to UAB. Our sons, Jack Jr. and Hilton, were born there. My husband has received wonderful heart care there. I have all my eggs in one basket with UAB.”

Even in the early Jefferson-Hillman days, the hospital’s progressiveness was evident, says Tomlinson: “They had this great new butterfly-shaped pool where they gave therapy for my arm.” She feels lucky as a polio patient who made a complete recovery, returning to playing golf and tennis.

### ALWAYS A VOLUNTEER

While still hospitalized for polio treatment at Jefferson-Hillman, Mrs. Tomlinson

recovered to the point where she wanted to “help out.” She volunteered to answer the nurses’ station telephone, and the nurses accepted her offer. “I think I did fine answering that phone,” says Tomlinson with a laugh. “However, times have changed. Can you imagine a hospital patient today getting permission to answer a nurses’ station telephone? I don’t think so.”

Tomlinson has logged numerous volunteer hours. She was longtime chairman of Mountain Brook’s Park and Recreation Board, a leader in founding Mountain Brook’s Community School, and a member of the Birmingham Volunteer Bureau; she also volunteers at her church, St. Mary’s-on-the-Highlands Episcopal. At the University of Alabama, where she graduated in 1948, she’s membership chair of the Arts and Sciences Leadership Board. She’s also co-chairing the effort to raise funds for an endowed chair at UAB honoring Griffith R. “Griff” Harsh III, M.D., a former director of the Division of Neurosurgery in UAB’s School of Medicine.

In 1992, Mrs. Tomlinson became a founding member of the Board of Visitors (BOV) for the UABSON. She became the board’s second chair, continues as an active member, and co-chaired the BOV’s 2006 fundraiser. She and husband Jack made possible the Jean Riley Tomlinson Endowed Nursing Scholarship, which provides support to deserving nursing students.

“UAB’s nursing school is tops,” says Tomlinson. “I admired the school’s dean, Rachel Booth, who founded the Board of Visitors. After Dr. Booth retired, I’m glad UAB recruited a highly qualified successor, Dr. Doreen Harper.”



Jean Tomlinson

Tomlinson’s volunteerism role model was her mother, the late Ada Riley of Pensacola, Florida (where Jean was born and raised). Among Riley’s many volunteer roles was chairing the Red Cross’s Gulf Coast Canteen Corps during World War II. “If mother over-volunteered herself, she volunteered my sister and me to fill in,” Tomlinson says.

### A SPECIAL GIFT FROM HER MOTHER

Ada Riley’s habit of thinking of others aided her daughter’s battle against polio.

“Mother had a neighbor who was an insurance agent. He said, ‘Ada, I’ve taken out a polio insurance policy on my daughter. Why don’t you do that for your two daughters and their families?’” Tomlinson recalls.

“Mother bought the policy, which took effect one month later. Two days after it became effective, I was diagnosed with polio. That policy covered my polio hospitalization and therapy, everything!”



# Florence Nightingale:

## Letters from a Trailblazer

by Anita Smith



*Florence Nightingale, the founder of modern nursing, left countless gifts to the world of nursing, and some of those treasures ended up in UAB's possession—a unique collection of letters written by the nursing pioneer.*

*The Nightingale letters are among items housed at UAB's Reynolds Historical Library. UAB has 50 authentic Nightingale items—48 letters and a newspaper clipping and photograph from her era. Most of the letters were handwritten by Nightingale; several others were dictated and signed by her.*

*The UAB School of Nursing is committed to preserving the letters and bringing them to the attention of the public, says UABSON Dean Doreen C. Harper, Ph.D. "When I came to UAB's School of Nursing in late 2005 and learned that the Reynolds Historical Library had these Nightingale letters, I couldn't believe it!" she says. "I was absolutely astonished! We are so fortunate to have these letters here."*

### A RARE GLIMPSE INTO THE PAST

The letters were written by Nightingale at various times between 1853 and 1893, when she was between the ages of 33 and 73. (She died at age 90.) Dean Harper recently visited the Florence Nightingale Museum in London and spoke with a curator there; she learned that UAB's Nightingale collection spans periods from which there is little information about Nightingale, making the letters even more significant.

The topics covered in the letters range from military and civilian hospitals to sanitary affairs in India and contributions to various charities (including those that benefited widows and orphans of the Franco-

Prussian War). Nightingale wrote some of the letters to women involved in charitable endeavors; however, she wrote the majority of them to a physician, J. Gillham Hewlett, M.D., who was a health officer and later a sanitary commissioner in India. Without ever visiting India, Nightingale consulted extensively with Hewlett by mail, giving him what apparently was highly valued advice about improving sanitary conditions in India. These letters reflect Nightingale's knowledge not only of nursing but also of public health.

In one 1867 letter to Hewlett, Nightingale writes of outdated approaches to public health: "The system of disposing of house sewage, which you mentioned, is

essentially the same as has been tried for 30 years at an enormous cost in Paris & which the Emperor is now putting an end to by having Paris drained."

Nightingale befriended Hewlett over decades of writing to him and seeing him face-to-face occasionally when he visited London; in a letter believed to be written in 1885 (when she was 65), Nightingale told Hewlett she thought he was working too hard and that he looked tired. She gave this advice: "I don't at all approve of your not taking care of yourself. As an old Nurse, I think you ought never to get wet, never to hurry yourself, certainly not to talk more than you can help on subjects which are agitating."

## THE PATH TO BIRMINGHAM

The letters were purchased in 1951 from a New York bookstore by Lawrence Reynolds, M.D., a native Alabamian who became an internationally known roentgenologist (radiologist). Reynolds developed a deep interest in health-related memorabilia, and his donations of that memorabilia formed the basis of UAB's Reynolds Historical Library. He donated most of the Nightingale letters in 1958, the same year he donated considerable other items to the medical school based at what is now UAB; additional Nightingale letters were donated by the Reynolds family following his death in 1961.

"The beauty of all this is that these Nightingale letters have been treasured and saved through preservation at the Reynolds Historical Library," says Harper. "To have these treasures here and not to be displaying them, not to be sharing them, not to be disseminating the letters' content to people of Alabama and all across the world would really be a missed opportunity," she says.

## A COMMUNITY RISES TO THE CHALLENGE

Harper says it is fitting that the School of Nursing be involved in showcasing letters written by the legendary nurse who's known as the field's founder. "Through the initiatives we are launching, I want every nurse and every other person who comes into the School of Nursing to see displays related to these Nightingale letters. At the same time, the actual original letters will continue to be safeguarded at Reynolds Historical Library," she says.

Expressing gratitude for the SON's interest is Michael A. Flannery, administrator of the UAB historical collections unit that includes the Reynolds Historical

Library. "Any time you have primary resource material of a person as prominent and important in the history of health care as Florence Nightingale, you have something unique to be treasured," says Flannery. "We are excited about working with the School of Nursing in regard to these letters."

Flannery says work has begun on digitizing the letters, the first part of the three-part program. "We began scanning our Nightingale letters collection in the fall of 2006," says Flannery, noting the scanning will proceed at a measured pace to ensure quality control.

Groundwork has been laid to identify individuals, organizations, and corporations to support this project with advice and/or funds. The goal is to find supporters interested in health and historical preservation who can help with the project to restore and showcase these letters to many "communities" around the globe. One whose advice was sought early on was Cameron Vowell, Ph.D., a longtime Birmingham-area community leader who is a board member of The Community Foundation of Greater Birmingham. Another who has been consulted is Arlene Henley, trustee of the John and Delia Robert Charitable Trust, who committed some seed money from the trust for this project.

These initiatives will link with existing projects related to the Nightingale letters, including a writing project by SON faculty member Pamela Fordham, D.S.N., and retired associate dean for graduate studies Jean Kelley, Ed.D., with assistance from retired faculty member Juanzetta Flowers, D.S.N.

"We have an obligation to showcase these letters," Harper says, "and to help people understand the importance of

Florence Nightingale as having created the foundation and groundwork for the core values that we still use today in the nursing profession."

Anyone wishing to share advice, contribute funds, or make inquiries about the Nightingale letters should contact Ann Robinson, UABSON director of development, at (205) 975-2443.



### UABSON Dean Doreen Harper's vision for showcasing the Florence Nightingale letters includes:

- working with the Reynolds Historical Library to make images and transcriptions of the letters available worldwide on the Web;
- creating exhibits about the letters at UAB's School of Nursing Building and the Reynolds Historical Library; and
- launching a Nightingale Visiting Scholar program to bring to the UABSON additional expertise on Nightingale and to spur scholarly study, discussion, and dissemination of the letters' content.



Members of the School of Nursing's Board of Visitors

## The UABSON Scholarship Reception by Norma Butterworth-McKittrick

**D**ean Doreen C. Harper, Ph.D., warmly welcomed students and supporters to the UAB School of Nursing (SON) Scholarship Reception on October 1. Scholarship donors and recipients filled the SON's auditorium for the special event, which recognized the 72 students who received SON scholarships and the 44 students who received Lettie Pate Whitehead Foundation scholarships. (Please see "2006-2007 Scholarship Awards" on page 20.)

Bettina H. Riley, who received the Florence A. Hixson Endowed Nursing Scholarship, spoke at the reception on behalf of the SON graduate scholars. "We thank all of the donors and their families who are responsible for these magnificent scholarship funds, which help ease the

heavy financial burden of our education," she said. "Your investment will help us realize our dreams and educate more nurses in the future. What a wonderful legacy for those whose names these scholarships honor!"

"My award in particular memorializes one of UAB's finest educators and the SON's first dean, Dr. Florence A. Hixson," Riley continued. "When I first entered these halls, the portraits of Dr. Hixson, as well as other nurse educators, inspired and empowered me. Dr. Hixson established the school's baccalaureate and graduate programs, and her vision and influence continue to be felt and attested to by everyone here today."

Riley explained that when she was growing up, she wanted to be a doctor, but

before she finished college, her life took a different direction. She married her childhood sweetheart, and together they built a successful business in art and antiques. Sadly, her husband developed liver disease, which precipitated a drastic change in their lifestyle. They sold their business, and she became his caregiver.

"I knew I would have to support us," she recalled, "and my husband's medical team at The Kirklin Clinic inspired me to think about what I could do to help other people." The nurses' professionalism and camaraderie, as well as the current shortage of nurses, led her to decide to pursue a career in nursing. "I believe I received a calling to become a nurse," she said, "and my belief that I can and will make a difference in this profession is strong and





**Top left: Dean Doreen Harper (second from right) with students; Bottom left: Mildred Hamner (left) and Anne Foote; Right: Jarman (left) and Tom Lowder (right) with recipients of the Jarman F. Lowder Endowed Nursing Scholarship**

## A FRIEND TO NURSING: JOHN T. KING

During an eventful career in law and politics that spanned more than half a century, John Thomas King played a major role in making UAB and the School of Nursing the institutions they are today. As an Alabama state senator from 1971 to 1975, King sponsored major legislation that laid out capital funds for UAB, named the University's Spain Tower, and allocated funds for UAB nursing scholarships.

King's support for the School of Nursing was particularly critical in 1971, when the state legislature had to convene a special session to resolve issues related to funding for medical and related education. Funds for medical-facilities expansion were a major part of the legislation passed during that session, and Senator King ensured that nursing scholarships were included. The allocations for those scholarships were considered important enough that they are still bound by the state code.

John T. King passed away in Birmingham on January 24 at the age of 83. The School of Nursing wishes to recognize him for his loyal support of the school and UAB at an important time in their history.

vibrant." She also believes that given the recent increase in salaries, she will always be able to earn a living as a nursing professional.

Riley applied for and was accepted into the SON's B.S.N.-to-Ph.D. program. "My husband was so proud of me," she noted, adding that he believed she could do anything and cheered her on until his death in October 2003. "I completed my B.S.N. with honors in August 2005, and I had all of five days between receiving my undergraduate degree and starting my doctoral program."

Riley is currently completing her second year of the Ph.D. track, and she plans to teach nursing as well as conduct much-needed research in the family focal area. "I love research," she explained, "and I am

excited about being able to teach other nurses about the importance and techniques of doing research."

In addition to going to school full-time, Riley works full-time to gain experience as well as earn money. "Debt is a big concern, and paying off educational expenses is scary," she said, noting that earning a doctoral degree includes what she calls "hidden costs"—buying "tons" of paper and toner cartridges for reports and dissertations, making multiple copies of reports and professional papers, and replacing computer components and printers as they wear out from heavy use. "I am so grateful for receiving a scholarship," she said. "It really helps."

*Dean Doreen C. Harper, Ph.D.; scholarship and alumni relations administrator Andy Wallace; and the School of Nursing express their deepest gratitude to everyone who has contributed to the following scholarships to support the education of future nurses.*

## 2006-2007 SCHOLARSHIP AWARDS

Alma B. McMahon Endowed Nursing Scholarship  
**Victoria Lane Park**

Barbara and Emmet O'Neal Endowed Nursing Scholarship  
**Katherine E. Atkinson**

Benjamin and Roberta Russell Endowed Nursing Scholarship  
**Yolanda S. Harris**  
**Carrie Ann Long**  
**Ursala Shawon Wilson**

Board of Visitors Endowed Nursing Scholarships  
**Olaf Detlef Bothe**  
**Kristen Marie Chappell**  
**Shannon P. Watson**

Brock Family Endowed Nursing Scholarship  
**Analyn Augusta Kracke**

Carolyn Farrior Boone Endowed Nursing Scholarship  
**Tracy L. Bischoff**  
**Clare A. Callaway**

Dr. Charles E. Flowers Jr. Endowed Nursing Scholarship  
**Lacey Palmer Conaway**

Comer Foundation Nursing Scholarships  
**Nancy C. Clark**  
**Mariann Geronimo**  
**Meleah Beth Ray**  
**Santrice M. Raybon**

Dorothy G. Sterne Endowed Nursing Scholarship  
**Jimmy Lawrence Hall III**

Eileen Marie Mahan Endowed Nursing Scholarship  
**Carol S. Henry**

Elizabeth Jane Harper Endowed Nursing Scholarship  
**Jonathan D. Williams**

Dr. Elwynn "Chick" Hale Endowed Nursing Scholarship  
**Courtney Harris Sharma**

Ethel M. and Jesse D. Smith Endowed Nursing Scholarship  
**Amy Francis Little**

Fay Belt Ireland Endowed Nursing Scholarship  
**Katherine Charlene Wagner**

Florence A. Hixson Endowed Nursing Scholarship  
**Bettina H. Riley**

Francis S. Falkenburg Endowed Nursing Scholarship  
**Jessica Robin Feehan**

Gladys Farmer Colvin Endowed Nursing Scholarship  
**Carrie Ann Long**  
**Connie White Williams**  
**Laura Williams**

Governors George and Lurleen Wallace Memorial Scholarship  
**Kyra Maria Powell**  
**Lisa Ainsworth Sokoll**

James Coleman Lee Sr. Endowed Nursing Scholarship  
**Christine Margaret Lobo**

Jarman F. Lowder Endowed Nursing Scholarship  
**Kaylie B. Dewitt**  
**Melinda K. Ford**  
**Stacey M. Parker**  
**Heather M. Simechak**  
**Adam R. Waters**

Jean Riley Tomlinson Endowed Nursing Scholarship  
**Miracle J. Reese**

Jernigan Endowed Nursing Scholarship  
**Margot Elizabeth Andison**  
**Amanda Megan Ramsey**

Jo Ann Barnett Endowed Nursing Scholarship  
**Yolanda S. Harris**

John and Delia Robert Endowed Nursing Scholarship  
**Kathryn Wolff Brand**

John Wilson Rodgers Endowed Nursing Scholarship  
**Erin D. Durham**

Lois Drolet Luckie Endowed Nursing Scholarship  
**Johanna Crowe Baker**

Luckie Family Endowed Nursing Scholarship  
**Elizabeth Haley Vance**

Mable E. Lamb Endowed Nursing Scholarship  
**Carrie Ann Long**

Margaret Parks Kendrick Endowed Nursing Scholarship  
**Larry A. Gwin**

Marie Carter Bonner Memorial Nursing Scholarship  
**Meghan E. Dailey**

Marie L. O'Koren Alumni Association Endowed  
Nursing Scholarship  
**Lisa Findley**

**Candace Robinson**  
**Chrystal Sullivan**  
**Shannon P. Watson**  
**Jonathan D. Williams**

Marie S. Ingalls Endowed Nursing Scholarship  
**Delphine Marion Powell**

Mary Josephine Harwell Endowed Nursing Scholarship  
**Angela Denise Kendrick**  
**Thomas Jonathan Windsor**

Nancy Eastman Harp Endowed Oncology Nursing Scholarship  
**Julia Marie Adams**

Peggy Spain McDonald Endowed Nursing Scholarship  
**Shelbie Renee Gerken**

Reese Phifer Jr. Endowed Nursing Scholarship  
**Sarah Faith Torsch**

School of Nursing Dean's Merit Endowed Nursing Scholarship  
**Pan Cao**

School of Nursing Dean's Scholarship  
**Katherine Atkinson**  
**Kimberly Gonstad**  
**Amanda Ramse**  
**Heather Sobko**  
**Haley Woodard**

School of Nursing Faculty/Staff Endowed Nursing Scholarship  
**Corie Elizabeth Clark**

Terri J. Broach Endowed Nursing Scholarship  
**Ashley Nicole Miller**

Thelma Walker Mitchell Endowed Nursing Scholarship  
**Ida Denise Hudson**  
**Heather Nicole McClendon**

Thor-Louck Endowed Nursing Scholarship  
**Carmen Sungelo Swindle**

William Groce Campbell Endowed Nursing Scholarship  
**Stephanie Brooke Baker**  
**Nisa N. Drennen**  
**Laura Brock Williams**  
**Katie Beth Wilson**

Lettie Pate Whitehead Foundation Scholarships

**Allison Beck**  
**Allison Blizzard**  
**Kathlyn Brashier**  
**Allison Brown**  
**Miaka Carroll**  
**Rebecca Cruitt**  
**Jessica Glover**  
**Kristen Gober**  
**Sakina Hanson**  
**Monjal Hill**  
**Leia Hunt**  
**Virginia Jacobs**  
**Stephanie Jarrett**  
**Feleshia Judkins**  
**Hope Kachelman**  
**Melissa Liga**  
**Sarah Likis**  
**Gina Lusco**  
**Victoria Mathis**  
**Christy Morton**  
**Elizabeth North**  
**Carrie O'Donnell**

**Sabrina Oliver**  
**Kandy Pardon**  
**Keyenno Patrick**  
**Esther Patterson**  
**Treva Pickrell**  
**Heather Poore**  
**Kassie Price**  
**Hannah Reid**  
**Kristen Rosser**  
**Sondra Ryel**  
**Jennifer Salvago**  
**Alicia Sands**  
**Myra Smith**  
**Sally Smith**  
**Tiffany Thomas**  
**Andrea Trautwein**  
**Leah Trimble**  
**ChicaRee Tyus**  
**Yanshuang Wang**  
**Rebbie Warren**  
**Kristy Williams**  
**Joan Wilson**

# Robert Luckie Jr.:

TRIBUTE TO A FAITHFUL UABSON ALLY *by Anita Smith*



**“I’ve just always believed in that old adage that ‘It’s more blessed to give than to receive.’”** Robert Luckie Jr.

**O**n a sunny day in March 2001, I was interviewing advertising leader and philanthropist Robert “Bob” Luckie Jr. As we sat in the living room of his Mountain Brook home, I asked, “Bob, why is it so important to you to donate money to worthy causes?”

Bob answered simply, “I’ve just always believed in that old adage that ‘It’s more blessed to give than to receive.’” He began talking about the good performed by recipients of his philanthropy, and he spoke of individuals who inspired him to give. One cause he mentioned was UAB’s School of Nursing.

He said the importance of great nursing care was brought home to him and his family when his wife, Lois, was battling breast cancer. With obvious pain in his voice, Bob recalled the day Lois told him she had found a small suspicious lump in her breast, how he urged her to have it

examined, and how the mass proved to be breast cancer. He recalled her difficult surgery and her surviving five years before the disease claimed her life. He explained how one nurse at UAB Hospital, Holli Kemper, symbolized the nursing compassion shown to Lois. He said he and his family decided to fund a nursing scholarship at the UAB School of Nursing in memory of Lois and in honor of Holli, a graduate of the UABSON.

With his eyes glistening, Bob recalled Lois—his wife of many years, the mother of their beloved two daughters and two sons. “Lois was a hell of a gal!” he said. He described her as slender, blonde, pretty, a woman with lots of friends, a source of great support for his career. He said many wives would not have stood behind a husband who did what he did—give up a steady job with health insurance and other benefits at *The Birmingham News* to establish his own advertising business.

When Bob took that leap in the late 1940s, he used a \$25 war-surplus typewriter and shared a second-floor office with another entrepreneur just above a downtown Birmingham steakhouse. On hot days, with no air conditioning, Bob pounded out ad copy next to an open office window that let in foul-smelling odors—some from the steakhouse, others from air pollution.

Lois Luckie stood behind her husband in what proved to be a great move. By 1953, Bob was establishing a more for-

malized ad agency—the foundation for what today is Luckie & Company, numbering among the South’s oldest, most successful advertising/public-relations agencies. That company remains under Luckie management, led by Bob and Lois’s two sons.

In 1987, as Bob looked for a way to support nursing and honor Lois’s memory, he found himself impressed with the track record and exceptional quality of the UAB School of Nursing. After endowing one nursing scholarship at the school, the Luckie family endowed a second. In addition, Bob made contributions to the school’s special projects. In 1991-1992, Bob joined with Dean Rachel Booth, Ph.D., to establish a Board of Visitors to raise funds and create community awareness for the school. After Booth retired, Bob continued to move the school forward by working with her successor, Dean Doreen Harper, Ph.D.

A deep bond formed between Bob Luckie and the School of Nursing. When he died on February 28, Dean Harper and Elizabeth Wallace, chair of the Board of Visitors, released a statement that said of Bob, “He gave generously to us all as a friend and a leader. He listened to us and gave us his ever-so-wise advice. He helped us navigate difficult dilemmas with his gentle nature. His legacy will continue in his family, his friends, and all who knew him. We will miss our friend greatly.”





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