

# UAB NURSING

THE UAB SCHOOL OF NURSING

Winter 2008

Reaching Out to the  
*Survivors*



## Board of Visitors, 2008-2009

**Barrett MacKay, Chair**  
**Sue Ellen Lucas, Co-Chair**

- |                         |                                  |
|-------------------------|----------------------------------|
| Jane Arendall           | LaVona Rushton                   |
| Candice W. Bagby        | Kay Scruggs                      |
| Jon J. Blankenship, PhD | Kate Sexton                      |
| Carolyn F. Boone        | Jeanie S. Sherlock               |
| *Lella Bromberg         | Lanette C. Sherrill              |
| Zoë Cassimus            | Wanda Simon                      |
| Joy Deupree             | Catherine Styslinger             |
| Punky Eastwood          | *Jean Tomlinson                  |
| *Karle Falkenburg       | R. Edward Varner, MD             |
| Juanzetta Flowers, DSN  | Celia Wallace                    |
| Arlene Henley           | *Elizabeth Wallace               |
| Everett Holle           | Nancy Worthington                |
| Fay Ireland             |                                  |
| Donna Jernigan          | <b>Emeritus:</b>                 |
| Joie Jones              | Alma McMahan                     |
| *Rose Marie Lee         |                                  |
| Jarman Lowder           | <b>In Remembrance:</b>           |
| Sue Ellen Lucas         | Elwynn Hale, EdD                 |
| Robert E. Luckie III    | Joy P. Harbert                   |
| Anita Smith Lunsford    | Marie Ingalls                    |
| Leah McKinney           | Robert E. Luckie Jr.,<br>Founder |
| Nancy Meisler           |                                  |
| Anne Michaels           | <b>Junior Board of</b>           |
| Paula Midyette          | <b>Visitors Chair:</b>           |
| Pam Miller              | Mary Katherine Cabaniss          |
| Barbara O'Neal          |                                  |
| *Bobbie Parsons         | * Former Chair                   |
| George Perdue Jr.       |                                  |
| Henry B. Ray Jr.        |                                  |
| Donna Reddinger         |                                  |

## UAB Nursing Staff

*Executive Editor*  
 Pam Powell

*Managing Editor*  
 Doug Gillett

*Art Directors*  
 Ron Gamble, Jessica Huffstutler

*Production Manager*  
 Michael Reed Turner

*Writers*  
 Doug Gillett, Anita Smith

*Production Assistants*  
 Jennifer Ghandhi, Jazmund Walker

*Photography*  
 Steve Wood



## FEATURES

Reaching Out to the Survivors .....	2
Battling HIV—As a Team.....	6
<i>The Donna Brown Banton Endowed Professorship: Col. Pat Patrician, PhD, RN</i> .....	8
<i>A One-Man Bridge: Patrick McNees, PhD, FAAN</i> .....	10
The Zambia Connection .....	11
The PhD in Nursing Program .....	12
The Accelerated Master's for Non-Nurses .....	13

## DEPARTMENTS

<b>Student Profile</b>	
<i>Connie White-Williams, MSN, RN, FAAN</i> .....	14
<b>Alumni Profile</b>	
<i>Joanne Disch, PhD, RN, FAAN</i> .....	15
<b>Board of Visitors Profile</b>	
<i>Anita Smith Lunsford</i> .....	16
<b>Board of Visitors Chair Profile</b>	
<i>Barrett Brock MacKay, MSN, RN</i> .....	17

## DEVELOPMENT

<b>Development News</b>	
<i>2008 M*A*S*H Party</i> .....	18
<i>The Martha Tilt Endowed Scholarship</i> .....	20

COVER PHOTO BY STEVE WOOD

*UABSON Associate Dean Karen Meneses, right, is developing a novel intervention for breast-cancer survivors in underserved rural areas—and she's been able to rely on UAB's Comprehensive Cancer Center, headed by Ed Partridge (right), to help make it happen.*

## UAB Nursing Editorial Board

Dean, **Doreen Harper** • Development Director, **Ivy Watson** •  
 Scholarship and Alumni Administrator, **Stephanie Hamberger**

Welcome to the winter 2008 issue of *UAB Nursing*. This issue highlights recent research, education, and service innovations at the UAB School of Nursing. You will read about our school's new research teams led by highly talented and well-known scientists. Dr. Karen Meneses's important study on survivorship among women with breast cancer in rural areas is featured, as is Dr. Linda Moneyham's work on women living with HIV/AIDS in the Deep South. These research initiatives are being conducted in partnerships with two of UAB's university-wide interdisciplinary research centers, the Comprehensive Cancer Center and the Center for AIDS Research. UAB was recently ranked fifth in the nation for its collaborative, interdisciplinary research environment and was also funded for a Clinical Translational Research Award (CTSA). Several nursing faculty are actively involved in the CTSA, and Drs. Meneses and Moneyham are conducting chronic-disease management clinical interventions aimed at informing and improving care for high-risk, vulnerable populations in the South.

SON faculty are engaged in educational innovations aimed at addressing the nursing shortage. Among the latest developments are the redesigned, distance-accessible PhD in Nursing Program; the new Doctor of Nursing Practice degree; the Accelerated Masters Pathway (with a recent designation as a Peace Corps Fellows Program); the newly funded major for psychiatric nurse practitioners; and the predoctoral training program for pediatric nursing faculty.

The PhD in Nursing Program has been highly successful in securing predoctoral fellowships to support full-time students, preparing future nursing faculty for research-intensive universi-

ties. The DNP Program, as a joint program with University of Alabama campuses in Huntsville and Tuscaloosa, offers post-master's students the option to pursue the Doctor of Nursing Practice degree at UAB through a common DNP core curriculum offered on all three campuses. The program builds on UAB's recognized strength in 18 advanced-practice nursing specialties for nurse practitioners, nurse anesthetists, clinical nurse specialists, nurse administrators, and executives. The new accelerated master's degree pathway is offered for students with non-nursing baccalaureate degrees seeking careers in nursing. This accelerated program of study was recently designated by the Peace Corps as one of only two Peace Corps Fellows Programs nationwide, facilitating career transitions for returning Peace Corps volunteers.

Our alumni, faculty, and students are engaged in distinctive clinical affairs and partnerships. Notable among these, Dr. Joanne Disch, MSN 1976 and recipient of the 1994 Distinguished Alumni Award, recently served as board chair of the AARP and is currently director of the Katharine J. Densford International Center for Nursing Leadership at the University of Minnesota. Dr. Lynda Wilson's collaborative work in Zambia educates nurses with knowledge critical to the clinical management of AIDS. Dr. Patricia Patrician, the newly appointed Banton Endowed Professor, is building on established partnerships with UAB Hospital and the VA Medical Center to advance



**Doreen Harper, PhD, RN, FAAN**

nurses' job satisfaction and improve patient outcomes in acute-care work environments.

I hope you will take pride, as I do, in how UAB School of Nursing faculty, students, and alumni are sustaining leadership worldwide to change lives through research, education, and practice.

*My best,*

A handwritten signature in black ink that reads "Doreen C. Harper". The signature is written in a cursive, flowing style.

**Doreen C. Harper, PhD, RN, FAAN**  
Dean and Professor



# Reaching Out to the Survivors

by Doug Gillett

**Few words strike as much fear into the hearts of American women as “breast cancer.” The disease killed more than half a million people worldwide in 2005, and surprisingly, women in the United States have the world’s highest incidence rates, with more than 100 incidences per 100,000 people. American women have a 1-in-8 chance of developing invasive breast cancer at some point in their lifetimes, and a 1-in-35 chance of dying from it.**



Fortunately, that rate has been declining over the past few years, and as treatment methods rapidly advance, the death rate has declined even more quickly. However, with those advances comes a new issue: How do we care for the survivors who will still carry the scars of the disease, both physical and mental, for many years to come? How do we make sure they stay not just cancer-free but also healthy in all aspects of their lives?

Karen Meneses, PhD, RN, FAAN, has taken on the challenge of finding answers to those difficult questions. Through her latest National Cancer Institute (NCI)-funded study, Meneses is finding ways to employ nurses as foot soldiers in the effort to keep track of cancer survivors.

Her current focus is on survivors located in underserved rural areas, as they are at the biggest disadvantage in terms of access to follow-up care. Such care is important for survivors who need to head off future health problems before they become serious. As the study has progressed, she has solicited partnerships and built networks that will aid the fight against cancer.

## A CAREER BATTLING CANCER

Few people in America have as much experience with cancer, or have seen the disease from as many angles, as Meneses has. Since earning her bachelor’s degree in nursing from Georgetown University, she has spent 33 years researching cancer and participating in treating patients in

both inpatient and outpatient settings; her doctoral degree from Boston College helped place her on the path she’s following today.

“My doctoral work focused on survivors, and I was interested in their needs after treatment had ended,” she says. “We started to see longer survival times in the late ’70s and early ’80s, and more patients were coming back for follow-ups, so in my research I focused on a series of intermediate to late effects that occurred in survivors.”

Meneses’s current study grew out of an R01-funded project she began in her previous position as a professor and endowed chair of oncology at the University of Central Florida College of Nursing.



**UABSON Associate Dean Karen Meneses (right) with breast-cancer survivors Marlene Knight (left) and Lonnie Humphries. Meneses’s research may help survivors live longer and fuller lives than ever before.**

Conducted entirely in the state of Florida, that first study of face-to-face interventions for cancer survivors held promise, but Meneses says it didn’t include two groups of women “who were essentially unable to participate”—Spanish speakers and women who lived more than 50 miles from the university or a cancer center. So Meneses developed a second study, also R01-funded, that was targeted specifically at women in rural areas.

“What we found in looking at the literature was that, in general, breast-cancer survivors have a gap in care after they finish treatment. They may not always have adequate follow-up, and they may not be able

*It’s fantastic to have such an enormously supportive group of researchers and scientists at UAB targeting rural areas.* – Karen Meneses, PhD, RN, FAAN

to access support services or bring their concerns to their care providers on either a regular or prompt basis,” she explains. “Access becomes a more significant problem for women living in rural areas.”

The grant was awarded while Meneses was still in Florida, and she worked with the Florida Department of Health and the Florida Cancer Data System to help get the study on solid footing. However, once

she came to UAB in the summer of 2007, she began looking into a supplement for women in Alabama.

#### **FILLING A PHYSICAL—AND EMOTIONAL—NEED**

Even before she began the second study, Meneses knew that keeping track of rural cancer survivors would be challenging. Studies funded by the Institute

*continued from page 3*

of Medicine, the Lance Armstrong Foundation, and the Department of Defense all indicated that rural county health departments were, as a general rule, “woefully ill-equipped” to provide services for survivors. In addition, she knew that Internet access in rural areas was still too limited to make a Web-based intervention feasible. In the end, though, the solution was as simple as a 132-year-old invention most Americans now take for granted: the telephone.

“For one thing, we know that about 98 percent of households have telephones. And the data on telephone interventions in patients who have cancer show that it’s a reasonable way to provide intervention. In addition, patients don’t have to travel,” Meneses explains. “It’s accessible, and it’s a relatively low-tech solution for people in rural areas.”

Two main purposes of the telephone interventions are to provide care and manage post-treatment symptoms—needs that can get lost in the shuffle after the patient has made it through the most critical phases of treatment. “We will share with them very concrete info about physical effects of treatment, pain, fatigue, cognitive changes, edema, arm swelling problems, and fear about recurrence—not that we want to scare them, but it’s generally a big concern of people after treatment,” Meneses says.

However, another major goal is to provide the emotional and psychological support that can be scarce for women in isolated rural areas. “Often these patients get little, if any, emotional support in their follow-up,” she says. “We’ll also be talking to them about the issues of healthy living after cancer and moving forward. We’ll help coach them on the kinds of questions they might want to ask care providers, and if they have to travel a long distance

for care, we’ll find out what their specific concerns are.”

The Alabama part of the study is still in its early stages, but Meneses has good reason to expect success. “This involves a 12-month participation for each subject,” she explains, “and we found in our previous study, which ran for six months, that patients really looked forward to these contacts. We essentially had no dropout; there was a 98-percent retention rate. People kind of gasped when they heard that—those are phenomenal results.”

## PARTNERS IN PREVENTION

Still, any such study is easier to undertake—and the results are better—when a researcher has partners available to lend a hand. At UAB, Meneses says other researchers, physicians, and institutions were practically lining up to do just that.

“Kirby Bland, MD, chair of the Department of Surgery, invited me to go to a meeting of UAB’s Breast SPORE [Specialized Program of Research Excellence], where I met a number of breast-cancer advocates, and I’ve been able to maintain contact with them,” she says. “Through them I’ve been able to develop my networking among advocates in the community, including several who are very well-connected with the Susan G. Komen Foundation here in Birmingham.”

Meneses found another important ally in the Comprehensive Cancer Center (CCC) at UAB and its “phenomenally receptive” groups of scientists whose strengths in cancer prevention and control were perfect complements to her work.

“The cancer center, particularly the Cancer Control and Population Science Program, has really made the elimination of cancer-related health disparities one of its major goals over the last 10 years,”

says center director Edward E. Partridge, MD, “and we have focused on our rural populations in the Black Belt of Alabama and the delta of Mississippi, as well as our underserved inner-city populations here in Birmingham. Karen and I actually talked about it a long time before she got here, and I see great potential there—because we have a network of community health advisors throughout this rural area who are beginning to work together with the tools that she’s already developed for telephone support. And that could be combined with in-person support from our advisors.

“Karen and I have had a lot of conversations about what an important role the School of Nursing could play in our health-disparities research, particularly in the cancer area,” Partridge continues. “That really wasn’t fully developed over the last 10 years, even though it’s something that I’ve desperately wanted to do—and I think Karen’s recruitment to the School of Nursing makes that a substantial reality. We will be able to leverage the talents of the School of Nursing, along with the talent in our outreach, cancer control, and population-science community at the cancer center, to design some really innovative hypothesis-driven interventions. Ultimately, that will make a difference in the mortality and morbidity of cancer in the underserved rural populations. I just can’t tell you how excited I am about having her here.”

## A STRONG FOUNDATION FOR FUTURE SUCCESS

Meneses now says the “open doors” she’s experienced at the CCC and across UAB already have inspired her and Patrick McNeese, PhD, FAAN, her co-principal investigator on the rural-intervention study, to begin brainstorming ideas for

new projects. One promising avenue deals with lymphedema prevention and management; she's also talked about pulling together a collaborative group with the CCC to investigate exercise and nutrition issues.

The overall concept of wellness is an area in which Partridge says he would love to expand the CCC-SON partnership. "I really can't think of a better front-line team for prevention and early detection than nurses," he says. "You don't need physicians in that kind of activity—physicians are important for treating disease along with the nursing team, but nurses have a tremendous potential in wellness, prevention, and early detection. It's mostly about education and screening for disease, and nobody does that better than nurses."

Other possibilities for collaboration include the SON's own David Vance, PhD, whose own research into the spirituality of people with HIV and AIDS (see story on next page) may have applications for cancer survivors; the Center for Aging; and even UAB's Sleep/Wake Disorders Center. "Lots and lots of people are becoming interested in sleep research," Meneses says. "It's not a cancer-specific issue, of course, but sleep problems exist across chronic illnesses of all kinds."

"We haven't made all of these connections yet, but every time we turn around there's another connection that can be made. So for me, it's fantastic to have such an enormously supportive group of researchers and scientists out there," she says. "They're here within the university and within the hospital as well, and I just can't sing the praises of that spirit of collaboration enough. You hear about that at other places, and some of them say the right words, but UAB is where that spirit is really put into practice on a day-to-day basis."



*"We are building & strengthening strategic partnerships with the CCC and other university-wide centers to translate the latest scientific findings to improve care for patients and communities."*

— Dean Doreen Harper, PhD, RN, FAAN

**Ed Partridge, Comprehensive Cancer Center director,  
and UABSON Dean Doreen Harper**



(left-right) David Vance,  
Linda Moneyham, and  
Gwendolyn Childs

## BATTLING HIV— *as a Team*

by Doug Gillett

*The dramatic strides in AIDS research over the last quarter-century have transformed the disease from a death sentence into a chronic condition, but even that achievement opens the door to numerous other questions: How do we care for the survivors? And is there any way to prevent new cases from occurring?*

**S**ON researchers are not only approaching these questions from a host of different angles, but they're also working collaboratively to build on each other's scientific findings and develop unified solutions for people living with HIV. They're also benefiting from a wide array of collaborative research and clinical opportunities across the UAB campus.

### A CRITICAL CONNECTION FOR RURAL WOMEN

Linda Moneyham, DSN, RN, FAAN,

was first funded by the CDC in 1992 to study the challenges of women struggling to live with HIV in rural areas. "What we found was that rural women were really vulnerable," she says. "They felt highly stigmatized and fearful of anybody knowing their diagnosis, because these rural areas are very conservative. We tried to talk with agencies in these areas about what they were doing for women, and they'd say, 'Well, we've tried doing support groups for them, but they always failed—no one ever comes.'"

Five years ago, while a research professor at the University of South Carolina, Moneyham decided to look into a different approach: one-on-one peer counseling in which HIV-positive rural women get support, advice, and real human connections from other women in their same situation. The National Institutes of Health (NIH)-funded study began with 11 sites in the Carolinas, and when Moneyham was recruited to the SON last year as the first Rachel Z. Booth Endowed Chair, she added a twelfth site at UAB's 1917 Clinic.



The clinic is an invaluable resource, Moneyham says, because it draws not only from Birmingham, but also from the entire northern half of the state—including numerous rural communities where women may not have any other access to treatment. While a field worker from Birmingham may have to drive 50 miles to visit a patient in a small rural town, the clinic has helped Moneyham's research team recruit peer counselors who can easily set up face-to-face interviews with patients.

Moneyham's investigators train the counselors in a variety of counseling techniques. "It's all based on different types of social support. One type is emotional support, just having someone who can say, 'Yes, I know what you're going through, I've been through the same thing.' We also give them informational support, in which the peer counselors share how they've dealt with similar problems and direct them toward available resources. A large part of what the peer counselor does is to serve as a role model; we saw that a lot of the women who were really having trouble didn't have what we call a good 'repertoire' of coping skills . . . but what the peer counselors can do, because they've demonstrated that they're good at it, is help them figure out how to deal with their problems directly."

## **SURVIVING IN THE GOLDEN YEARS**

Before antiretroviral therapies were discovered, AIDS patients had limited life expectancy; today, some patients have been living with the disease for 20 years or more. Advances in drug therapy also have decreased HIV-related dementia, says David Vance, PhD, but patients are still vulnerable to cognitive declines relat-

ed to stress and depression. "Our older adults with HIV are actually doing much worse on average than younger adults with HIV and their older, HIV-negative counterparts," he says.

Fortunately, Vance has found an on-campus partner to help find a unique way to combat these declines. Working with professor Karlene Ball, PhD, director of the Edward R. Roybal Center for Translational Research in Aging and Mobility, Vance is using a computer-based cognitive remediation program to stimulate older HIV patients' cognitive skills and help them stay sharp in processing the tasks that make up many parts of their daily lives such as driving.

"The cognitive remediation program is a lot like a video game, so it's fun, and it's been validated already. Through several of the studies in our lab, we know we can increase the speed of processing in older adults," he says. "But this approach has never been tried in the HIV population, which is surprising given that cognitive impairments are well documented in this clinical population. The potential of this approach is that by intervening early, we may head off cognitive impairments in our patients. This will allow them to better age successfully."

## **HEADING OFF AN EPIDEMIC**

Toward the other end of the age spectrum, Gwendolyn Childs, PhD, RN, has applied for an NIH grant to develop an intervention focusing on HIV risk reduction for adolescent African-American girls. She is submitting this study at a critical time, as the CDC reported in 2005 that two-thirds of new HIV diagnoses in women were in the South; in Alabama, the highest rates of STDs were among African-American women aged 20 to 24.

Childs plans to begin with focus groups with girls ages 11-14 to find out what activities might be putting them at risk and what they think might be helpful in reducing that risk. Later investigations may also focus on parental involvement. "My hope is that by the time I finish this project, I'll have some information on what components we need for a program targeting young girls to decrease their risk," she says. "One method would be delaying when they start sexual activity, and if they do initiate sexual activity, we need to promote self-reliance and safer practices."

Sexual activity can't be the only focus of such an intervention, though, Childs points out—the larger focus is on increasing self-confidence and deterring early sexual activity by developing long-term goals. Nurses, she says, are in a unique position to help girls do that.

"As nurses, we're not limited in the same way that teachers might be—we have the health-care background as well as a knowledge of the community factors that play into these girls' decisions. We're not only going to be in schools, we're also going to be out in the community, and that enables us to look at things a little bit differently."

Together, this group of SON researchers are battling HIV through both interventions and preventative measures, and by targeting the country's most vulnerable and high-risk populations; taken as a whole, UAB is poised to make perhaps the biggest impact yet in the fight against a lingering epidemic.



### THE DONNA BROWN BANTON ENDOWED PROFESSORSHIP:

## *Col. Pat Patrician, PhD, RN*

*by Doug Gillett*

**T**he minute she earned her bachelor's degree in nursing in 1982, Pat Patrician, PhD, RN, started looking for a challenge. "I just wanted to do something a little bit different from staying in the same location and the same hospital for 20 years," she says. "So a friend and I started looking at the military . . . and the Army stuck out as being the oldest branch of the service that had a nurse corps. The Army Nurse Corps, as

the largest branch of military nursing, has provided critical leadership for nursing in this nation and throughout the world."

Her decision to join the Army set the tone for the rest of Patrician's career—not only because she would spend the next 26 years in the Army Nurse Corps, progressing to the rank of colonel, but also because she's spent her entire career taking on major challenges at every opportunity. She now brings the expertise and experi-

ence gained from those challenges to the School of Nursing, where this past summer she became the first faculty member to receive the Donna Brown Banton Endowed Professorship.

### GOING AFTER THE TOUGH ASSIGNMENTS

Patrician demonstrated early on that she wasn't afraid to take on the Nurse Corps's most demanding responsibilities. When she got her first assignment to Fort Lee, Virginia, in 1982, she requested and received an assignment to the intensive-care unit, a rare destination for brand-new nursing graduates. After a year and a half, she opted for an even tougher mission: the Army's six-month critical-care course, followed by a stint as a staff nurse in the medical ICU at Brooke Army Medical Center in San Antonio, Texas, where some of the Army's most critically ill patients are treated.

In just two years at Brooke, Patrician had an extraordinary array of experiences—she did a rotation in the Army Burn Center; she witnessed major advances in ventilator techniques; she even got to treat some of the Army's first AIDS patients. She completed a master's degree in critical-care nursing at the University of Texas Health Sciences Center in San Antonio in 1988 and was assigned to be a nurse manager at Fort Campbell, Kentucky.

Despite the fact that she didn't get her wish to be assigned to Operation Desert Storm, Patrician describes her time at Fort Campbell as "a very rewarding experience. I was a captain at the time, and it was great being the leader of a team and being able to influence the practice of nursing in my own little part of the world. It was also great to be able to provide my staff with cutting-edge continuing education—building a cohesive team was a high priority for me."

Patrician's "official" teaching career began at her next assignment, Fort Gordon in Augusta, Georgia, where Eisenhower Army Medical Center was redesigning an open-heart surgical program that previously had been under the purview of a contract physicians' group. After teaching in the Army's licensed practical nurse (LPN) program for a year and a half, Patrician was selected to be the medical center's new cardiothoracic nurse specialist, and she used her expertise to develop an 80-hour professional-development program for open-heart surgical nursing. "When you work that closely with the patients, family, and staff nurses," she says, "you have a substantial impact on patient-care outcomes."

## BETTER CAREERS FOR NURSES, BETTER LIVES FOR PATIENTS

Her interest in patient outcomes was piqued, so Patrician decided it was time to take the next step, and she began her PhD studies at the University of Pennsylvania. There, she had the opportunity to work with renowned nursing researcher Linda Aiken, PhD, RN, FRCN, FAAN, in the Center for Outcomes and Policy Research.

"When I learned about the work Linda Aiken was doing, I became very interested in training with her, and my dissertation was inspired by some of the data that she had collected," Patrician says. "She was

looking at the differences in work environments in magnet hospitals, and she also was looking at the AIDS epidemic and how it had created specialty units in some hospitals. Specialty environments gave nursing a kind of expertise that they 'owned' and enhanced the work environment for nurses.

"Part of my dissertation dealt with the daily data she had collected at the shift level," Patrician says. "I asked nurses how satisfied they were with their workload on their shifts." After analyzing more than 12,000 shifts, Patrician found that "in places with negative practice environments, workload really did affect how nurses felt at the end of the day. But in environments that were more positive—the more professional practice environments for nursing—periods of excessive workload didn't seem to matter so much in terms of their satisfaction. The tenor of the practice environment really does make a difference in how nurses feel about, and execute, their jobs."

Patrician got an opportunity to put her discoveries into practice first at Walter Reed Army Medical Center in Washington, D.C., where she worked while pursuing her PhD, then back in San Antonio, where she worked in the Department of Nursing Science and headed most of the educational programs for the Army Nurse Corps.

## BUILDING THE NURSES—AND THE HOSPITALS—OF THE FUTURE

It was a desire to restart her research career, though, that brought Patrician to UAB earlier this year. "What I envisioned doing and what Dean Harper had in mind for me were so congruent that it was almost unbelievable," she says. "I wanted a place where the majority of my time could be committed to research into the nursing practice environment, and the endowed professorship affords me that time."

Patrician is finishing up the data analysis and dissemination on some of her military research projects in areas such as medication errors and structuring nurses' workdays to cut down on fatigue and improve patient outcomes. But she's also expanding her previous work on nursing practice environments to include examinations of nurses' interactions with—and their very roles in—the health-care team.

"There's more and more information coming out about work environments in terms of what we need to do in our hospitals to encourage autonomy—to empower nurses to seek out and do for their patients what they know is right," she says. "It's important to have very well-educated staff nurses and an environment where people can learn and try new things, and they have to be able to work in partnership with physicians. Partnerships with physicians contribute to good patient outcomes.

"The faculty here at UAB have been very welcoming, and I'm so thrilled to be here that sometimes I have to pinch myself," Patrician says. "Once I talked to Dr. Harper and realized how much we were on the same page, I stopped looking for any other positions. This just feels right."



## *A One-Man Bridge:* Patrick McNees

by Doug Gillett

It's a good thing that UAB's schools of Nursing and Health Professions are right next door to each other—otherwise Patrick McNees, PhD, FAAN, would be spending a lot of time running back and forth between buildings.

“When I got here, my title was Director of Research, Innovation, and Technology, and it was a new position, split 50-50 between the School of Nursing and the School of Health Professions,” he says. “As of February 1, 2008, I became the Associate Dean for Research in the School of Health Professions, but I still have a secondary appointment as a professor in the SON.”

Between McNees and his counterpart at the School of Nursing, Karen Meneses, PhD, RN, FAAN, the two schools are positioned better than ever before to formalize and expand their collaborative efforts. SON and SHP are natural partners in terms of both their research efforts

and their clinical focus, McNees says, and a close relationship between the two has the potential to make patient care dramatically more comprehensive and effective.

“I recently had a meeting with an organization outside of UAB that's thinking about putting significant funds into expanding its research agenda,” he says. “At UAB we would bring together nursing, physical therapy, occupational therapy, nutrition sciences, health-outcomes researchers, health services administration, and even engineering into a multidisciplinary team that would address the agenda this particular organization has defined. This interdisciplinary approach could change the entire way we view rehabilitation science worldwide.

“These are the kinds of opportunities that really excite me personally—I love to see people with different views at the same table, chewing on problems and opportunities from different angles. Together, we

can do things we can't even think of doing alone.”

SHP's position, McNees says, is strengthened immensely by partnering with a nursing school that has been proactive in finding expanded roles for nurses in health care and training them to fill those needs. “Nurses are always at the pivotal points of improvement in health care,” he says. “The one group that is always there when it comes to the delivery of any kind of care is nurses. That's why, in my opinion, fundamental changes in health care are always going to occur with nurses being at the table and, in many cases, taking the lead.”

McNees has a long track record of not only facilitating collaborative research, but also participating in it himself. Before coming to UAB, he was the CEO and chief scientist at Applied Health Science, where his advances in electronic care-management and data-collection tools earned numerous copyrights and patents; he is currently the principal co-investigator on Meneses's R01-funded study into rural breast-cancer survivorship (see cover story). And his horizons are already extending beyond the nursing/health professions complex on University Boulevard.

“We've begun discussions with Tom Jackson, who's my counterpart at the School of Engineering, about how to engage new engineering faculty with our faculty in collaborative research projects. So I haven't abandoned nursing at all—I still believe that health care and the systems of health-care delivery will ultimately be influenced by nurses and other health professionals, and I believe those changes are going to have to be led by teams. I think UAB is uniquely positioned to break out of the pack in a number of different ways.”



Patrick McNees



**F**ive years ago, the United States made its biggest commitment ever to combating AIDS in Africa when George W. Bush signed the \$15-billion President's Emergency Plan for AIDS Relief (PEPFAR). The missing link, however, was health-care workers in Africa who could actually use PEPFAR's resources to distribute antiretroviral drugs to an increasingly desperate population; particularly in Africa's rural areas, there just aren't enough doctors.

The School of Nursing and its partners at the Center for Infectious Disease Research in Zambia (CIDRZ) believe they have found a way to bridge that gap: nurses. SON faculty are working with Zambia's General Nursing Council, the Zambia Union of Nursing Organizations, the nation's Ministry of Health, other partners in the country, and the Sparkman Center for Global Health at UAB to develop educational programs to quickly train nurses with the knowledge and skills required to treat HIV and AIDS.

"The need is to prepare more staff

to deliver care and deliver the drugs," says Lynda Wilson, PhD, RN, FAAN, deputy director of UAB's World Health Organization Collaborating Center on International Nursing. "And we can prepare nurses to assume some of the responsibility to initiate the treatment that, traditionally, has only been done by doctors."

Their task is daunting: Wilson estimates that of Zambia's 11.5 million people, a million and a half are living with HIV—one of the highest infection rates on the continent—but less than 5 percent of those people actually have access to the antiretroviral therapies they need. It's no coincidence that mean life expectancy, which was more than 50 years before the HIV epidemic began, has plummeted to just 38.5 years. CIDRZ has been one of the key PEPFAR partners in Zambia in the expansion of access to HIV care and medications, but further expansion will be limited by shortages of certified health-care workers. With nurses and midwives making up three quarters of the health-

care workforce, Wilson says "the logical conclusion is that we're going to have to target nurses to help provide this care."

They do, however, have some resources on their side. The International Training and Education Center on HIV (ITECH), Wilson says, has developed a successful training program for nurses in Ethiopia, and while that program isn't distance-based, the SON's faculty bring a wealth of distance-learning expertise to the table.

"We know that Internet availability is limited in Zambia, and even when it's available, the bandwidth is not great, so it takes a long time to download documents," Wilson says. "So we're going to have to be creative in developing this program. We'll probably put most of the materials on a CD so that nurses won't need the Internet, but we will supplement that with the Internet and periodic discussion boards."

Wilson cautions that these are only "preliminary ideas" that still require further development, but the topics for the distance-based certificate program were approved in June by key Zambian stakeholders, including representatives from the General Nursing Council, the University of Zambia, and the Ministry of Health. SON faculty will work with the project coordinators and other team members in Zambia to convert the program to a distance-based program after it is offered initially as a face-to-face program in early 2009.

"We're in the early stages," she says, "but I'm very excited, because I think that if we can design a good program, evaluate it carefully, and get it to work, it will be usable in many other settings. And it'll allow us to avoid the cost of bringing nurses to a central location and taking them away from their clinical work sites for extended periods."

# The PhD in Nursing Program *by Doug Gillett*



**Beth Stullenbarger**

**America needs qualified nurses now more than ever, but the need is just as critical for faculty to teach those nurses and make the research discoveries that will guide nursing practice for years to come. The School of Nursing's PhD program has made changes since 2006 that will produce those leaders.**

“Our country is facing a critical shortage of nursing faculty, and as a doctoral-degree-granting school, we feel a great responsibility to prepare future faculty, both in our state and across our nation,” says Beth Stullenbarger, DSN, RN, professor and

associate dean for academic affairs. “As part of our revised PhD curriculum, we plan to offer a course in leadership for PhD graduates, as well as a course in faculty role development. As we recruit younger nurses into our PhD program, we want to prepare them to be both researchers and educators of future nurses.”

The SON is striving to increase access to the PhD program through a growing slate of distance-accessible formats that blend online opportunities with on-campus work, as well as through innovative new pathways that dramatically shorten the amount of time students have to spend in the “pipeline” before achieving their doctoral degrees.

“One of the things we’re doing now is recruiting talented undergraduate students who’ll be able to go directly from the baccalaureate degree in nursing to the PhD in nursing,” Stullenbarger says, “and we hope that they will be able to go from the BSN to the PhD in four to five years. We’re also in the process of developing a pathway that will allow people with non-nursing degrees to earn master’s degrees in nursing within seven semesters. And then the same people could be directly recruitable to our PhD program. We’re trying multiple pathways to address the nursing faculty shortage.”

Offering new pathways to doctoral degrees will not only address the shortage but also allow PhDs to have a greater impact on the nursing field, she says. “In the past, we’ve encouraged baccalaureate graduates to practice for five to 10 years, get their master’s degrees, go out and practice for another few years, and then

join the doctoral program. So by the time they joined the doctoral program they were 45 years of age, and by the time they graduated they were 50 or 51—which reduces the effective years someone can have as a faculty member. We’re recruiting students who are interested in continuing directly from the baccalaureate program, so that they will graduate from the doctoral program in their 20s as opposed to their 50s.”

In addition, the hiring of a host of new faculty members is opening up new opportunities for students. “A key element for students coming into the program is that their research interests align with those of our current faculty members,” says Erica Pryor, PhD, RN, coordinator of the doctoral program. “It is important for a student to have a match with a faculty member, because an important part of doctoral education is the development of a relationship with a faculty mentor to develop a compatible program of research.”

Pryor, who has a student working with her in the research area of disaster preparedness, says these partnerships pay dividends for both the student and the professor. “If you talk with faculty who work with doctoral students,” she says, “typically they’ll tell you that this is one of the more rewarding aspects of being in academia—the mentoring relationship that develops between the faculty member and the student as a result of complementary research interests is a vital component of research-intensive doctoral programs.”

# THE ACCELERATED MASTER'S FOR NON-NURSES

by Doug Gillett

**It's never too late to become a nurse. Some UABSON students knew when they were very young that they wanted to be nurses, but others felt the call later in life—and many of them are giving up lucrative careers to heed that call.**

For the latter group, the school now offers an accelerated curriculum that will allow students with bachelor's degrees in fields other than nursing to earn master's degrees in nursing in just two years—even if their undergraduate degrees are in fields totally unrelated to health care. “The educated nurse is your best bet,” says Dean Doreen Harper, PhD, RN, FAAN, “and these people are hungry for careers in professional nursing. That's why we can accelerate the content for them and distill it down to something they can move through quickly—because they come to us with a base of critical thinking and other skills.”

Currently under the direction of Sylvia Britt, DSN, RN, the first year of the program's curriculum is structured to prepare qualified students to be registered nurses. Students are then eligible to apply to sit for the RN-NCLEX exam, and once they pass that test they will practice in graduate residencies while completing the requirements for their master's degrees.

“Normally, it would take two years just to get a bachelor's degree,” Harper explains. “In the two-year accelerated master's program, the first year is focused on preparation for an RN license, with the second year focused on completion of a graduate-nurse residency and the requirements for the master's degree. And if you want to move on to advanced practice, you'll be able to move into an advanced-practice role or a PhD role—it just depends on what pathway you select at the graduate level.”

The program recently received big boosts

in the form of grants from both the Hill Crest Foundation and the Robert Wood Johnson Foundation, but Harper notes that UAB Health System has been a vital partner from the very beginning—not only did they donate \$1 million to help get the program up and running, but they've also offered a wide array of residency opportunities for these students. “This provides a potential pool of nurses who can work as RNs in the hospital while they continue their graduate work—much like we do with graduate medical education in terms of residencies—and also a pool of people who choose UAB as the place where they want to learn. They're looking at the next stage of their career development, and they have potential to stay in Birmingham and serve this area's health-care needs.

“Even when students go on to grad school, they often stay close to where they want to live and where they want to settle,” Harper says. “That's the kind of student we're recruiting here, because we really do want to see students live and work in Alabama and serve the needs of the state.”

The first class of accelerated master's students began in May, but even before the official start date, UABSON representatives were going to colleges and career fairs and compil-

ing lists of people interested in enrolling. “In some ways the nursing shortage has helped educate the public about the value of this profession,” Harper says. “And people are looking through a different lens in terms of careers and opportunities.”

That's evidenced by the diverse group of people who have expressed interest in the new curriculum. “Some are Peace Corps volunteers, and some are out doing social work; I've even talked to engineers in this program who have had enough health-care experiences to know that they really want to work with people,” Harper says. “So they're choosing to do this based on previous careers and life experiences, making nursing a very rich and rewarding choice. This will become a very attractive program as the need for nurses increases over the next three decades.”



**Assistant professor Sylvia Britt, second from right, heads a program that will put new nurses through the academic “pipeline” more quickly than ever before.**

## CONNIE WHITE-WILLIAMS, MSN, RN, FAAN *by Anita Smith*

*Connie White-Williams has enjoyed 22 years working as a transplant coordinator in one of the nation's most successful cardiac transplant programs—right here at UAB. Whenever she reflects on getting that job, she notes how a chance meeting can change one's life.*

In 1986, she was moving from her home state of Pennsylvania to Birmingham and was interviewing for a staff-nurse position in the cardiovascular-surgery intensive-care unit at what is now UAB Hospital. During an interview with the head nurse, a UAB nursing supervisor joined the conversation and learned of White-Williams's background in organ transplantation. The supervisor said, "Connie, you could be UAB's next cardiac transplant coordinator!"

White-Williams does indeed have impressive experience taking care of organ-transplant recipients. At

Presbyterian University Hospital—now University of Pittsburgh Medical Center (UPMC) Presbyterian—she was a hospital staff nurse caring for patients of famed organ transplantation pioneer Dr. Thomas Starzl, who performed the world's first successful liver transplant.

Early on in her work at UAB, White-Williams was the only nurse coordinator on a three-person team that has since grown to 20 surgeons, cardiologists, and nurses. She also has seen the number of UAB heart-transplant recipients grow from around 100 to almost 800 patients.

White-Williams has received a number of awards for her work, including the prestigious Excellence in Clinical Practice Award from the American Heart Association in 2002. She was one of very few nurses to become a Fellow in the elite American Academy of Nursing without being doctorally prepared.

Yet she says her biggest reward is her interaction with transplant patients. She has helped manage care for some heart-transplant patients from the time they were transplanted and, in some cases, even before. She's the first health-care professional many heart-transplant patients call when they have

questions about medications, are in need of tests, or simply don't feel well.

"Recently one of our patients told me, 'You have such a calming voice. That means so much to me right now,'" White-Williams recalls. "It was rewarding just to hear that!"

As part of her current PhD studies, White-Williams is conducting research on the impact of social support after heart transplantation—how social support affects quality of life and survival.

Slated to complete her studies this spring, White-Williams says she wants to be equipped to conduct more research. Many transplantation issues, she says, have application to other cardiovascular conditions. She also notes that UAB has very strong cardiovascular programs—including heart and lung transplantation, pulmonary hypertension, and congestive heart failure. "Ultimately I would like to help build the nursing-research enterprise within UAB's cardiovascular field."

In the meantime, White-Williams is grateful to her husband Craig, their 16-year-old son, Travis, and 13-year-old daughter, Kelsie, for supporting her in her roles of wife/mother, transplant coordinator, and PhD student. It was a link between her personal and professional lives that brought her to Birmingham and UAB. "I moved to Birmingham because I had met Craig, who was working here for U.S. Steel at the time."

White-Williams says it was another of those "chance meetings" that set the stage for her to meet Craig and ultimately to move to Birmingham. "I'm from Pennsylvania, and Craig is also," she explains. "So wouldn't you think it likely we would have met in our home state of Pennsylvania? Not so—we met thousands of miles from Pennsylvania, while we both were vacationing on a cruise ship in the eastern Caribbean. It was just another of those wonderful chance meetings."



Connie White-Williams





# Joanne Disch, PhD, RN, FAAN

by Doug Gillett

**D**uring a nursing career spanning more than 30 years, Joanne Disch, PhD, RN, FAAN, has held numerous positions in clinical and academic nursing, but she has always maintained a strong commitment to professional organizations—including serving as a member of the board of the American Academy of Nursing and as a committee chair with the American Nurses Association. Her most recent board position, however, might be her most high-profile yet—chair of the board of AARP, formerly the American Association of Retired Persons, one of the largest and most influential interest groups in the country.

Disch, who is the director of the Katharine J. Densford International Center for Nursing Leadership at the University of Minnesota, earned her master's degree in cardiovascular nursing from the UAB School of Nursing in 1976 and is the 1994 recipient of the SON's Distinguished Alumni Award. She joined AARP's board of directors six years ago and in 2006 ascended to the position of board chair, where her two-year term ended this past May. She says casual observers might be surprised to find out just how vital her nursing background was to her chair duties.

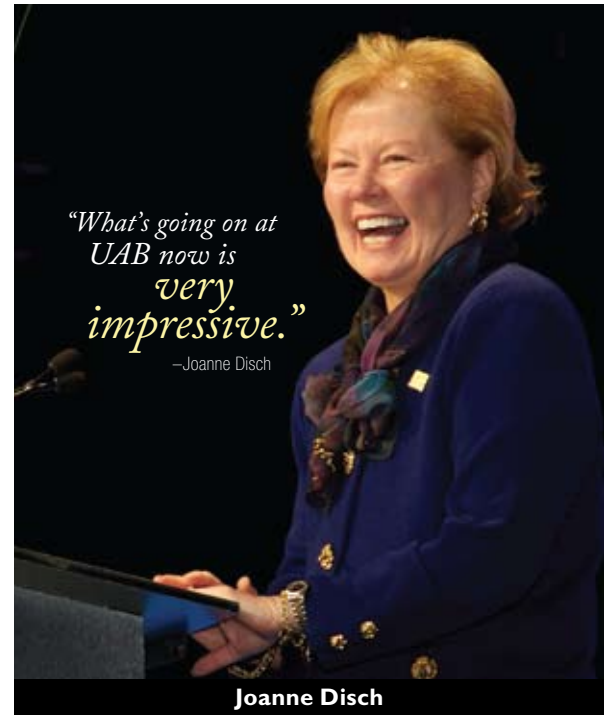
"Nurses are very skilled at quickly assessing situations on a short time frame, coming up with possible solutions, getting along with a wide variety of people, and seeing what's going to work for the average person," she explains. "Some of my colleagues were senior VPs, very prominent people, but I think nurses can help shape policy so that the average person

understands it and supports it."

Over the course of Disch's board tenure, AARP was involved in two of the most contentious public-policy debates in decades—first the controversial Medicare Prescription Drug, Improvement, and Modernization Act of 2003, and later the privatization of Social Security, which AARP opposed in 2005. More recently, AARP has been working with both the current president and the 2008 candidates on the hot-button issue of health-care reform. "We've done major pushing to get support for some of the things they're trying to do in California in terms of trying to pick up people who are uninsured," she says.

Despite the general perception of AARP as being only for seniors, Disch says the organization is increasingly focusing on issues affecting people under 50—particularly younger Americans who find themselves in the role of primary caregiver for their elderly parents, as well as the millions of children whose guardians are their grandparents. "Around four million grandparents are the sole providers for their grandkids, so the rights of grandparents are obviously a real concern for us," she says.

In each of those instances, the ability to view the issue through the "nursing lens" has broadened her knowledge and her leadership skills, Disch says. "Nursing is like running small businesses all over the place," she explains. "While the core is still taking care of the patients and their families, that's expressed in so many different ways, and even those of us who are no longer taking care of patients are using those skills. That skill set—being able to see the



big picture—can be used anywhere."

Disch, who went on to earn her PhD from the University of Michigan, credits her SON professors, particularly Marguerite Kinney, DNSc, for being "wonderful mentors" who gave her the resources to succeed much later on in life. However, she remembers her fellow students—one of whom was current UAB President Carol Z. Garrison—as being a special group, too.

Disch says she sees that same "collegial spirit" at the SON when she looks at the school today. "When I get the alumni magazine and see what's going on at UAB, I can tell that the students are being taught to see things through that 'nursing lens' and that they're learning how to skillfully apply that to other situations," she says. "What's going on at UAB now is very impressive."

## Anita Smith Lunsford by Doug Gillett

*If Anita Smith is fascinated with history, it may be because she's had a knack for being in the right places at the right times to watch it happen. While an intern at The Atlanta Journal, she helped cover Alabama Gov. George Wallace's infamous stand in the schoolhouse door; when she joined the staff of The Birmingham News, she returned to a city beset by race riots and KKK rallies.*

Smith has also had a front-row seat to much of the history of the School of Nursing, which, while not as turbulent as the other history going on around her, was still quite eventful. When she was just an undergraduate student at the University of Alabama, Smith met the SON's first dean, Florence Hixson, through roommates who were nursing students; at *The Birmingham News*, she was first placed in the role of the newspaper's medical writer and then its medical editor, and she witnessed the school's move from Tuscaloosa to Birmingham, as well as the tenure of its second dean, Marie O'Koren. Since then, she has developed close personal relationships with each of the school's deans, so when she calls the SON uniquely blessed in terms of leadership, she knows whereof she speaks.

"The deans have known where they were going," Smith says, "and they have known how to create a balance between preserving that which is quality that has come before and accepting what must be changed in order to meet today's needs. The definition of a nurse has changed, and the deans haven't just responded to those changes, they have actually been leaders for decades in telling the nation how to prepare for those changes. They're constantly looking ahead to what society's needs are going to be.

"And it's not just the deans. All four of them have pointed that out to me: Whenever I've said good things about the deans, they've replied, 'Hey, wait a minute—it's the entire faculty.' But they recruited those faculty and very carefully selected them; the deans have been picky at times when they didn't necessarily have that luxury."

One of the founding members of the Board of Visitors in 1992, Smith describes each dean as having a unique personality and impact on the school. Hixson, she says, was a portrait of quiet resilience, a demure woman who nevertheless had an "iron will" that helped her stand her ground in defense of nursing. O'Koren, on the other hand, was a "risk-taker" and a "nursing entrepreneur" who greatly expanded the school's scope in the 1970s up to her retirement in 1987. Rachel Booth, who served for 18 years, helped raise the school's profile internationally and make it a champion for nurses in developing countries. And today, Doreen Harper is adding even greater strength and depth to the school's reputation as a research powerhouse, bringing in nationally renowned faculty and broadening the collaborative ties that have characterized UAB. "At a time in America when we are saying, 'We must join hands and pool our knowledge, and we can do wonderful things in wonderful ways,' she is putting



Anita Smith Lunsford

the School of Nursing at the forefront of those efforts," Smith says.

Of course, Smith, who published what was then the 50-year history of the nursing school in 2000, hasn't viewed the school merely as an objective outside observer; she became intimately connected with the SON and, indeed, nursing as a whole over the last 15 years of the life of her husband, Jim Lunsford, who passed away this past February at the age of 76.

"The terrible news is that he's gone," she says, "but the wonderful news was that he had 15 and a half years of incredible 'bonus life' because he was the recipient of a heart transplant at UAB. Many of the people who helped Jim have such a high-quality life during those 15 and a half years were nurses, and some of them had degrees from the UAB School of Nursing. So I saw every day what a wonderful product this school has created."

## Spreading the SON Message: Barrett Brock MacKay *by Doug Gillett*

*Barrett Brock MacKay had been out of the School of Nursing for 22 years and retired from the nursing profession for about 12 when, in 2001, she found herself at one of the annual M\*A\*S\*H (Make Another Scholarship Happen) events hosted by the Board of Visitors to benefit the School of Nursing. Her devotion to nursing, and to the SON, was rekindled.*

“They honored Bob Luckie Jr. at that event,” she remembers. “That’s when I first heard the story about the nurse who inspired him to endow a scholarship because she had touched him and his wife so deeply during his wife’s illness. That was the spark that started the Board of Visitors, of course, and it made me realize how closely nursing is tied to the community—one nurse touched a family and a community leader, and look what happened as a result.”

Not long afterward, MacKay eagerly accepted an invitation to join the Board of Visitors herself. And the following year, the Harry B. and Jane H. Brock Foundation—started by her parents—endowed the Brock Family Endowed Nursing Scholarship.

“They were an easy sell,” she says with a smile. “It’s a fantastic cause, and I think any family might want to consider supporting the School of Nursing with an endowment. Consider the position that Bob Luckie was in—everyone’s going to be in that situation sometime in their lives, when they have a spouse or other loved one in need of nursing care.”

MacKay says her biggest contribution to the SON at the moment is serving on the Board of Visitors (BOV), where she served as co-chair before moving to chair on October 8. The role of board members as “ambassadors” to the community is a vital one, she says, because they help educate the community about the need to support the SON and its students in producing qualified, caring nursing professionals.

“Board of Visitors members raise money for scholarships and certain SON programs,” she explains. “We are also aware of other pressing needs such as funds to endow faculty positions. You cannot educate quality students unless you have quality faculty, and being as close to the school as I am, I’ve seen the importance of endowed chairs and professorships.”

MacKay also has served on the scholar-



**Barrett Brock MacKay**

ship selection committee, the group that decides which incoming students will receive the more than 40 scholarships awarded by the SON each year. This might be the most challenging of all roles filled by BOV members, she says, since nearly all of the applicants are incredibly talented and motivated—“They’re all deserving,

they really are, and I wish we could give scholarships to every one of them,” she says. Amidst the challenge of deciding how to distribute scholarships, MacKay says she has enjoyed getting an early glimpse of future SON alumni—graduates who, she says, will represent the school well.

“Almost all of them are going into nursing for the right reasons—they want to make a difference, and they want to care for people; they want the personal contact, that close relationship with a patient. I see that in almost all the applicants, and that’s comforting, because a nurse needs those qualities and desires. They also have to write essays as part of their applications, and they are truly inspirational—I enjoy just learning about the applicants and hearing their stories.”

In preparing for her term as board chair, MacKay has looked forward to continuing to expand the board’s presence in the community and generate charitable-giving interest to support the SON.

“We always need more,” she says. “The Board of Visitors has made significant progress in the community, and to be honest I think that’s the most important thing they can do—draw attention to the school, and then hopefully funds for the school will increase and accumulate over the years. If you have a community that values the school and that values nursing, that’s a good community to be a part of.”

# M\*A\*S\*H *Make Another Scholarship Happen*



**Guests enjoy dinner at the HealthSouth hangar at Birmingham International Airport**

The roar of nearby airplanes, “parachuted cargo” balloon centerpieces, and guests dressed in army gear and hospital scrubs added to the authenticity of this year’s flight-themed M\*A\*S\*H (Make Another Scholarship Happen) event. Patrons of the annual fund-raiser, hosted by the Board of Visitors of the School of Nursing, gathered at the HealthSouth Corporate Hangar at Birmingham International Airport on April 25, 2008 to recognize and raise awareness for the school.

This year’s event honored UAB critical-care transport nurses and celebrated the 25th anniversary of the UAB Critical Care Transport Team, which takes seriously ill patients in emergencies to hospitals across the country. In addition to the main focus of raising money for scholarships, the 2008 event also honored military health-care personnel.



**Frank Falkenburg, Janet Hill, and Caroline Ireland (front)**



**Jarman and Tom Lowder**



**Margaret and Bradford Kidd**



**Al and Nancy Worthington**



**Richard and Marsha Duell and Jim and Bobbie Parsons**



**Rachel Z. Booth, Anita Smith Lunsford, Pam Fordham, and Juanzetta Flowers**



**Nancy Meisler, Dean Doreen Harper, Candi Bagby, Charlotte Powell, and India Askew**



**Taren Drennen, Sue Ellen (incoming Board of Visitors co-chair) and Mike Lucas, and Jay Drennen**



**Mary Elizabeth Waitzman, Everett Holle, and Jim Waitzman**



**Hall and Lucy Thompson and Craig and Griff Harsh**



**(standing) Rose Marie Lee and Jean Tomlinson; (seated) Joan Edmonds, Ed Hanz, and Gin Yates**



**George and Elizabeth Wallace (outgoing Board of Visitors chair) and Fay and Bill Ireland**



**Harry Brock, Rick and Barrett MacKay (incoming Board of Visitors chair), and Jane Brock**



**Dean Doreen Harper and Bobby and Jill Luckie**



**Lella and Frank Bromberg and Jimmy and Ann Patton**



## *A Lifetime of Passion and Dedication*

### **Martha Tilt's Legacy Honored by Children**

*M* nursing was a calling to the late Martha Tilt. Her needs, wants, and priorities were selfless, simple, and always focused on her children, friends, and love of nursing. To honor their mother's life and dedication to her calling, her sons LeRoy W. Tilt III; Kenneth M. Tilt, PhD; and Douglas C. Tilt, MD (a physician at UAB), have established an endowed scholarship in the UAB School of Nursing.

"We wanted to make a meaningful tribute to Mom's life," Doug says. "We felt that if we could create something that she would have done had she had the resources, we would be doing the right thing. We knew the right opportunity when we saw it."

In her early years, Mrs. Tilt trained nurses. "Her students still tell us how wonderful she was as a teacher," Ken says. "She loved young people and was a mentor to many new nurses. We often heard them refer to her as 'Mama Tilt.'"

Mrs. Tilt, who served as a nurse in Shelby, North Carolina, for about 45 years, had a vision of what she considered the most

important aspect of nursing—compassionate patient-centered care. She would have wanted the scholarship selection committee to not only recognize scholarship and need, but also to reward a student's desire and passion to offer comfort and professional care to the patients and their families.

"Recognition of Martha Tilt through this scholarship sustains her legacy and her commitment to nursing, supporting students in their pursuit of a career in this field," says Doreen Harper, PhD, RN, FAAN, dean of the School of Nursing.

"Mom could not have imagined that she could have ever been able to provide financial support for aspiring nursing students on her salary," LeRoy says. "Her name on the scholarship is the perfect tribute to a very special lady. We want each scholarship recipient to know that the financial aid comes from the spirit of the nurse we knew as Mom and that it is supported by people who deeply appreciate the nursing profession and nurses like Martha Tilt."



## **A gift that lasts beyond a lifetime...**

Planning for the future is your gift to your family and to the UAB School of Nursing. Just as time spent with grandchildren is a joy for you and for them, supporting the UAB School of Nursing brings satisfaction now and ensures future support for nursing education, research, and patient care. Made through your will, retirement fund designation or trust, your estate gift will demonstrate your commitment to UAB's School of Nursing—during your lifetime...and beyond.

For more bequest information, please contact  
Elaine Eberhart, Director of Planned Giving,  
AB 1270, 1530 3rd Ave. S, Birmingham, AL 35294-0112  
(205) 934-0759 / eberhart@uab.edu.

For information about the School of Nursing, please contact  
Ivy Watson, Development Director  
School of Nursing, NB 219B, 1701 University Boulevard, Birmingham, AL 35294-1210  
(205) 996-7453 / iwatson@uab.edu.

*Always consult your tax or legal advisor when considering a planned gift.*



*T*he School of Nursing is scheduled for an accreditation review by the Commission on Collegiate Nursing Education (CCNE) in September 2009. The Commission provides the opportunity for program constituents such as alumni to submit comments concerning the school's qualifications for accreditation. Written comments must be received by CCNE no later than August 28, 2009. Only signed comments will be accepted by CCNE. Comments may be mailed to:

*Commission on Collegiate Nursing Education  
One Dupont Circle NW, Suite 530  
Washington, DC 20036-1120*

UAB SCHOOL OF NURSING  
NB 204B • 1701 University Blvd.  
1530 3RD AVE S  
BIRMINGHAM AL 35294-1210

NON-PROFIT ORG.  
U.S. POSTAGE  
**PAID**  
PERMIT NO. 1256  
BIRMINGHAM, AL