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ANNE FAHRENBACH ’07

“We recognize unique pieces of ourselves and unique means of expression”—page 22

BC • NURSING

"Excuse me Doctor!" Slide: Anne Fahrenbach ’07
Diversity and Innovation in Leadership

What does it mean to be a nursing leader? This issue of the Nursing VOICE is full of examples that we can follow.

Our cover story about Jennie Chin Hansen ’70 and her work with AARP showcases one nurse’s leadership, and how a nursing perspective can contribute to the betterment of society in a broad, interdisciplinary way.

The news that our own Sr. Callista Roy has been named a Living Legend of the American Academy of Nursing celebrates a career that has been about leading knowledge development within the field of nursing, beginning at a time when many questioned whether nursing had its own knowledge to develop.

The article about the “Art of Nursing” reflects our students’ vision of what nursing is about— the first steps in the development of the individual as leader.

So why do we care about nursing leadership? Perhaps we care because of the challenges of our time. As a profession, we face a potentially catastrophic nursing shortage, and an equally alarming shortage of nurse educators to train new nurses. We face a healthcare system that many believe to be broken and in need of significant reform.

I believe that nurse leaders can and will meet these challenges. We will face the challenge and create a vision of nursing and healthcare that embodies the core set of beliefs that are the essence of nursing.

Many of you know that I will retire at the end of this academic year. Although leaving BC will be sad for me in many ways, I am excited about the possibilities for the school. I am confident that strong candidates will be attracted to assume leadership in this amazing school. Given the excellent faculty and the plans for a new building, the new Dean will be able to lead the school and meet new challenges.

Barbara Hazard, PhD, RN, FAAN
Dean and Professor

Barbara Wolfe Named Director Center for Nursing Research

The Connell School of Nursing is pleased to announce that Barbara Wolfe, PhD, RN, CS, FAAN has been appointed as Director of the Center for Nursing Research. The Center serves as an institutional resource for faculty and students in the Connell School, and is designed to strengthen the research productivity of faculty in the School of Nursing, increase interdisciplinary research and scholarship, and communicate research findings to facilitate research utilization in nursing practice and in educational settings.

Dr. Wolfe’s role is to provide leadership to achieve the goals of the Center and the school, and to oversee general operations of the Center.

Dr. Wolfe is a Professor in the Psychiatric/Mental Health Department, whose extensive research focuses on the psychobiology of eating disorders. In particular, her work focuses on the relationship between neurotransmitter functioning and mood, impulsivity, and eating behavior. One of her current projects explores the regulation of the neurotransmitter serotonin in anorexia nervosa and its relationship to treatment response (Funded by the National Institute of Mental Health). Her research also explores the influence of dieting on neurotransmitter precursor availability and related behaviors.

Dean Barbara Hazard sees Dr. Wolfe’s appointment as a natural fit for the school. “In many ways, Dr. Wolfe has already been leading the charge to improve the level and quality of research output here at the Connell School. She has been active in mentoring junior faculty, and is a role model in terms of her own scholarly output. Now in this official capacity, I believe that Barbara will lead us to the next level in the area of nursing research.”

Dr. Wolfe received her BSN from Syracuse University, her MSN from Yale University, and PhD from Boston College. She is certified as an Advanced Practice Registered Nurse in Psychiatric-Mental Health Nursing. She is an active member of the American Psychiatric Nurses Association, serving as President from 2003-2004. She is also a member of the Eating Disorders Research Society, Sigma Theta Tau International Honor Society of Nursing, and a Fellow in the American Academy of Nursing

Barbara Wolfe

Barbara Hazard, PhD, RN, FAAN
Dean and Professor
The American Academy of Nursing, named St. Callista Roy, Professor and Nurse Theorist at the Connell School, a “Living Legend” at their annual meeting, held November 8 - 10 in Washington, DC.

The “Living Legend” designation is one of the highest honors in the nursing field, recognizing the most accomplished Academy Fellows for their contribution to the field and as role models for all nurses.

The American Academy of Nursing represents distinguished leaders in nursing who have been recognized for their outstanding contributions to the profession and to health care. The Academy was established in 1973 under the aegis of the American Nurses Association.

Rosanna DeMarco was honored for her work by the American Academy of Nursing, the Women of Color AIDS Council, and the Massachusetts Association of Registered Nurses.

The Alumni Awards of Excellence program was established in 1973-74 to broaden the opportunities for alumni recognition. Each year since then, the Boston College community has honored one alumna or alumnus in each of the following disciplines: Arts and Humanities, Commerce, Education, Health, Law, Public Service, Religion and Science.

This September, Connell School graduate Barbara Leadholm MS ’74 began her new role as Commissioner of the Massachusetts Department of Mental Health (DMH). Ms. Leadholm has a broad and thorough understanding of the mental health system and consumers’ diverse needs. Her clinical knowledge and leadership skills will enable DMH to set an ambitious agenda focused on providing quality services; improving access; and empowering consumers and their families.

Leadholm has more than 10 years of experience in behavioral health, including six years at DMH in the 1990s. From 1993-96, she served as Metro South Area Director and was responsible for strategic planning, operations and administration. Ms. Leadholm also served as Assistant Commissioner for Policy and Planning (1990-93).

Most recently, Ms. Leadholm has been a Vice President at Magellan Health Services. During her 10 years with the company, she has worked in public sector business development and overseen operations for a number of large health plans and their contracts for behavioral health services. Ms. Leadholm developed the “care-in” product that integrates health plans and public sector programs to serve people in need.

Kristin Jacques ’07 Receives the Finnegan Award

Boston College has presented the 2007 Rev. Edward H. Finnegan, S.J. Award to Kristen Jacques ’07. Winning the Rev. Edward Finnegan, S.J. Award is the ultimate honor for a Boston College senior, given annually to the senior who exemplifies the University’s motto “Ever to Excel.”

The Finnegan Award is an expression of Boston College’s values and ideals, personalized in the young men and women we send out into the world every year,” says Assistant to the President Rose Mary Donahue. “It is extremely difficult to narrow the field of candidates to four—one representing each undergraduate school—let alone pick one from so many talented, service-minded students. But we believe that the Finnegan Award should be more than a plaque on a wall, or a line on a resume. It’s something to take to heart, and perhaps a source of inspiration for more achievements.”

Kristin left her home in Lewiston, Maine to enter the William F. Connell School of Nursing because she wanted her life’s work to “make a difference” in other people’s lives. That dream will soon become a reality when she starts her new career at Children’s Hospital in Boston, but Kristin has already made a difference here at Boston College.

New Faculty Member

Mary Lou Siefert, DNSC, AOCN Assistant Professor - Adult Health
DNC - Yale University
MSN - Yale University
MBA - Fordham University
BS - Emmanuel College

Dr. Mary Lou Siefert has been an oncology nurse for almost three decades and has held various positions caring for people with cancer and their families. She was most recently involved with opening a new multidisciplinary clinic and providing advanced practice nursing care for survivors of cancer at Yale. Dr. Siefert’s research interests and work have involved studying the short and long term symptom experience of people with cancer, the family’s experiences, and the role(s) that advanced practice nurses can take to address and intervene to mitigate symptoms and to support family members. She has examined concurrent symptoms and functional status in persons receiving chemotherapy treatments, and her latest research has included examining the experience of minority family caregivers of people being treated for cancer.
The six regional winners were nominated by their peers and chosen from 30 finalists in the categories of Advancing and Leading the Profession, Clinical Care, Community Service, Management, Mentoring, and Teaching.

Nursing Spectrum’s Excellence Awards recognize extraordinary contributions nurses make to their patients, each other, and the profession. Nominators submitted information about nurses’ professional roles, their contributions to the nursing profession in general, and specific examples that demonstrate the candidates’ excellence in chosen categories. Finalist nominations were blinded and ranked by regional nursing leaders on the judging panel.

Jones received the Teaching award from Nursing Spectrum. “Teaching is a gift and a luxury,” Jones says. “You have a captive audience to influence and inform. It’s a position of great responsibility. When students become aware of their potential as human beings, they realize they can make a difference and that their dreams and hopes can be realized. That’s where my satisfaction comes in. They walk away feeling empowered with the knowledge and confidence to make a difference.”

Deborah Washington, who is also Director of Diversity for Patient Care Services at Massachusetts General Hospital in Boston, received the award for advancing and leading the profession. She noted that “we’re faced with a different patient population, so if we’re going to remain relevant in terms of who we take care of, we need to become culturally competent.”

Hahnemann Hospital provides grant for New BC-Dana-Farber partnership

The Connell School recently established a new partnership with the Dana-Farber Cancer Institute, one of the world’s most preeminent centers for the study and care of cancer patients. Through generous support from Hahnemann Hospital, Boston College will now be able to offer unique and invaluable educational opportunity for students to study at the premier hospital cancer hospital in New England as well as to allow advanced practice nurse (APN) experts in the Pain and Palliative Care program at the Farber to become part-time faculty at Boston College.

The partnership will provide students in the Connell School of Nursing Palliative Care Specialty with the opportunity to fulfill required clinical hours with the Pain & Palliative Care team at Dana-Farber/Brigham & Women’s Cancer Center. The Hahnemann Hospital’s support of the pioneering partnership ensures the exchange of high-level experiences with individual students through precepted practicum time. APNs will also bring their experience to BC, providing broader student impact activities such as lectures and providing assistance with curriculum development. “This type of participation,” comments Patricia Tabloski, Associate Dean of Connell School of Nursing Graduate Programs, “has the potential to impact the entire palliative care nursing field.”

Jean Reidy ’07 receives the Connell Award

Jean Reidy ’07 was presented with the William F. Connell Award at the Connell School’s graduation this past May, in honor of her leadership and contribution to the school, as well as to the broader community. Jean was president of her Connell School class for all four years, spearheading a number of projects while in that role.

This spring, Jean was also the recipient of the Nicholas H. Woods Leadership Award for her contributions to the co-curricular life of the University, her growth in leadership roles, and her creative involvement in campus life. Jean plans to continue her work with underserved populations, and notably has donated the small financial sum associated with the Connell Award to a scholarship fund for a community in El Salvador. She comments, “It is enough money to send 3 children to middle school for a whole year!”

Dukakis believes that for this to occur, we will need a President committed to universal health coverage, and a congress that is prepared to make tough decisions, and noted the importance of the upcoming presidential elections.

On September 10, Michael Dukakis, former Governor of Massachusetts, spoke about Healthcare Reform to kickoff this year’s PhD Colloquia. Each year, PhD students at the Connell School plan these series of interactive scholarly discussions that are open to the academic community.

Dukakis crafted his message based on his current work as a political science faculty member at both Northeastern University and UCLA. He noted that “for this nation to be the only advanced, industrialized nation not to guarantee health coverage to every resident is outrageous. The countries we like to compare ourselves to and compete with do so on average at half the cost per capita as we do, with better health outcomes, as best measured by life expectancy and infant mortality.”

Dukakis believes that for this to occur, we will need a President committed to universal health coverage, and a congress that is prepared to make tough decisions, and noted the importance of the upcoming presidential elections.

Dorothy Jones, RN, EdD, FAAN, Professor of Adult Health at the Connell School, has been selected to receive the Rose and George Doval Education Award from the College of Nursing at New York University (NYU).

This award recognizes a nurse educator who has significantly influenced nursing education by creating innovative and humanistic approaches to teaching, has influenced the present and future practice of nursing through education, is recognized by students and alumni for excellence and compassion as a teacher, and instills in students a passion for the discipline of nursing and a desire to continue learning.
ADELE PIKE CHOSEN AS PRACTICE CHANCE FELLOW

The Practice Change Fellows program has selected Adele Pike, Clinical Assistant Professor of Community Health at the Connell School, to participate in their prestigious program aimed at building leadership capacity among nurses, physicians, and social workers who have operational responsibility for geriatric care. Through participation in this two-year program, Pike will receive $90,000 and the support of local and national Mentors to further develop her leadership skills and to complete a project aimed at implementing a new geriatric service line or aging program.

Following a highly competitive national selection process, Pike was one of ten individuals chosen for the 2007 class, for her project titled “New Trends, New Ideas and Better Practices in Geriatric Home Care,” to be undertaken in affiliation with VNA Boston.

The Practice Change Fellows program is supported by the Atlantic Philanthropies and is under the direction of Eric A. Coleman, MD, from the University of Colorado at Denver and Health Sciences Center, and the co-direction of Nancy Whiteman, PhD, from the National Council on Aging (NCOA). The Practice Change Fellows program intends to create a network of specialists dedicated to influencing health care delivery and improving the health of older adults.

ROSANNA DEMARCO MS ’76 AWARDED RESEARCH FUNDING FROM NORBERT HARDNER FOUNDATION

Dr. Rosanna DeMarco MS ’76, Associate Professor, has received research funding from the Norbert Hardner Foundation to continue her prevention intervention work with women of color living with HIV/AIDS entitled Culturally Relevant Prevention Education For Older HIV Seropositive African American Women: A Peer-Led Approach in Inner City Boston.

This study will build on this partnership to establish an HIV/AIDS prevention program that has been demonstrated by current research to affect greater healthcare adherence, decreased perceived stigma, and increased self-advocacy in intimate relationships. Unlike other studies, however, the project will focus on a culturally relevant education prevention program recognized as critical to HIV positive prevention in African American women.

BOSTON COLLEGE HOSTS COLLABORATIVE NURSING ETHICS CONFERENCE

On March 30, Boston College hosted an ethics conference entitled Professional Responsibility, Interdisciplinary Collaboration and Leadership in Clinical Ethics. The one-day conference was designed to provide health care and allied professionals with the tools to recognize the ethical content of care-giving situations and increase understanding of available strategies and resources to assist both in the decision-making process and the resolution of problems.

The conference was organized by Pamela Grace, PhD, RNCS, ANP (pictured above), Associate Professor of Adult Health at the Connell School. Institutional sponsors and partners included the Connell School of Nursing, The Winston Center for Leadership and Ethics at Boston College’s Carroll School of Management, Brigham and Women’s Hospital, Massachusetts General Hospital, and the Dana Farber Cancer Institute.

SIMULATION LABORATORY MANAGER FEATURED BY JOHNSON & JOHNSON

Having received the Nurse of the Year Award in 1985 from Massachusetts Department of Health and Human Services, Maureen Connolly, RN, APRN, BC is the latest exceptional nurse to be working at Boston College, where her role is Simulation Lab Coordinator. However, Maureen also has a distinction uniquely her own—this March she was selected by the Johnson & Johnson Campaign for Nursing to represent nurse educators in commercial and print media.

“Nursing runs in my family,” explains Maureen in an interview for Johnson & Johnson. “It dates back to my great grandmother who was a midwife in rural Ireland. Nursing was a career possibility for me from a young age.

“First out of school, I worked at Boston Medical Center on the psychiatric floor, medical floor and intensive care units. After my graduate program, I worked as a nurse practitioner and, later, as a school nurse. Two years ago, I went into nursing education and began co-teaching at Boston College Connell School of Nursing. In addition to co-teaching, I’m currently the director of the Simulation Lab. I also work in the telephone triage department of Harvard Vanguard Medical Associates.

“I really encourage anyone interested in nursing to talk with a nurse and find out what their job entails. If possible, visit a setting where nurses practice. If you pursue nursing, you are giving yourself, your family and the rest of your fellow citizens an incredible gift. You will have a rewarding career: financial security, tremendous flexibility and meaningful work.”

Excerpts reprinted with permission from Johnson & Johnson Campaign for Nursing’s Future.

DOCTORAL CANDIDATE LISA DUFFY RECEIVES Prestigious NRSAs GRANT

We are pleased to announce that Lisa Duffy, PhD(c), is the recipient of a Ruth L. Kirschstein National Research Service Award (NRSA) for her project titled “COPE Intervention for Parents of Children with Epilepsy.” NRSA’s are awards given by the National Institute of Nursing Research at the National Institutes of Health to promising doctoral candidates who have the potential to become productive, independent research investigators. Lisa’s project sponsors include Drs. Sandra Mott and Judith Vessey.

BOSTON COLLEGE ANNOUNCES SEARCH FOR CONNELL SCHOOL DEAN

William F. Connell School of Nursing Dean Barbara Hazard will retire at the end of the 2007-08 academic year, announced Provost and Dean of Faculties Cutberto Garza, chair of the search committee to identify her successor.

Garza commented, “Barbara Hazard’s effectiveness and that of the Connell School faculty and students have enabled much as evidenced by the school’s reputation and national standing. The School’s impressive profile and trajectory set a high bar for our collective task in finding a worthy successor.”

The Dean reports to the Provost and will be responsible for undergraduate and graduate education; faculty hiring, mentoring and promotion; fostering an increase in externally-funded research; contributing to excellence in teaching; nurturing a collegial academic community; and continuing and enhancing the Connell School’s stature as a vital component of Boston College and as a world-class school of nursing.

The search committee includes Connell School and Boston College faculty, administrators, students, and alumni. The Provost has also retained an executive search firm, Spencer Stuart, to assist in this national search. Further information about the search can be obtained by contacting the search firm at bcnursing@spencerstuart.com.
Three years of outcome data. Women's Health Care, 6(9), 25-33.


ANN WOLBERT BURGESS


ROSAIANA DEMARCO


MARY E. DUFFY


JANE FLANAGAN


HOLLY FONENTO


KATHERINE GREGORY


ALYSSA HARRIS


JOELLEN W. HAWKINS


SUSAN KELLY-WEEDER

MARGARET LACETTI


ELLEN K. MAHONEY

ANNE E. NORRIS


JOYCE PULCINI


SR. CALLISTA ROY


JUDITH SHINDUL-ROTHSCHILD

MARY LOU SIEFERT


COLLEEN SIMONELLI

PATRICIA A. TABLOSKI

JUDITH A. VESSEY


DANNY G. WILLIS


BARBARA E. WOLFE


Recently, it’s hard to pick up a newspaper that doesn’t mention the aging of the baby boomer generation. As boomers begin to retire, many pressing social questions have arisen: Will the social security system survive the huge influx of beneficiaries? How will massive retirements impact the workforce? And, closer to home for nurses and other healthcare professionals: how will the aging population burden a healthcare system that is already characterized by staffing shortages and economic challenges?

Among the policy makers working to answer these questions is Jennie Chin Hansen ’70, who will become President of AARP in 2008. AARP has 39 million members and is one of the largest and most influential voices that represent the interests of older Americans. Hansen’s history of policy and advocacy for older Americans made her an obvious choice to lead AARP.

After graduating from the Boston College School of Nursing in 1970, Hansen pursued a community health career path. She explains, “It was just my propensity to think about how to have an impact on larger groups. I found that there was more ability to affect change by thinking more broadly about populations rather than about techniques and specific research methodologies. Affecting change ultimately happens at the population level.”

Hansen brought this appreciation for older people with her when she

Hansen began her career as a public health nurse in Idaho. “In community health, one cares for the whole age continuum. So when I was a public health nurse in the ‘boonies,’ I was intrigued with older people and their fierce independence. These people had no resources, were so isolated in rural communities, but had an absolute tenacity and dignity to make it on their own. They would appreciate my coming by, but, heck, they would’ve done fine without me. My interest was piqued in the appreciation of older people who really wanted to maintain their abilities and their dignity to live as strongly and as independently as possible.”

Hansen brought this appreciation for older people with her when she
accepted a position as a research-
er for On Lok, a then-small non-
profit organization providing com-

munity-based health services in San
Francisco. Hansen stayed at On
Lok for nearly 35 years, eventu-
ally serving as Executive Director of
the organization, building it into a
robust family of organizations, and
developing it’s program into the
prototype for PACE (Program of
All-Inclusive Care for the Elderly),
now a Medicare/Medicaid
program available to all 50
states.

“In developing On Lok, you
could say we identified
the core ingredients, and
maybe the sauce has a
slight variation, a regional
variation. We identified
the ways that existing services
didn’t come together really
well and the way things
were paid for didn’t come
together well when you
were actually the person
trying to navigate through
this. What we did was take
the same ingredients but re-
formulated so that it really
worked for the local com-

munity. The ingredients
were still the same—flour
sugar and eggs—but we recombin-
ed them in a way that made sense and
yet cost no more or actually cost less.

[Our approach] actually produced a
quality of service that people were
happier with.”

I think the visible racial component
is one that’s rather right out there
with [On Lok], so people say ‘Oh
my goodness this is a wonderful little
Asian program.’ But the reality is
that it was [originally devel-
oped in] a part of San Francisco
called North Beach which was
comprised at that time of Italian
immigrants, Phillipino immi-
grants and Chinese immigrants.
So we actually had three initial
immigrant populations. Their
commonality was that English
was not their first language and
they each had their own cultural
family dynamics that came with
populations and be able to fac-
tor all these variables and create
something that had the universal,
flour and eggs to it and it was just
then baked a little differently but
with core points of accountability
all throughout.

“When we became a national pro-
gram, it was these core principles
of accountability and these struc-
tures that were universal; it played out a little
differently in El Paso, Texas which was a lot of
Hispanic-Americans to Milwaukee, Wisconsin
that had kind of classic Midwest population to
Portland, Oregon to the Bronx. Those core ingre-
dients were found to be universal needs by people
regardless of their ethnic-
ity. We tapped into the
fact that when people get
to this stage in their life
they still want to be their
form of normal, a part
of their community, and
still do as much as they
can possibly to do. They
want to be able to be part
of the fiber of their local
neighborhood.

We facilitated those principles in
the form of the PACE program and
provided the technical pieces that
made it possible. That to me was the
beauty of having a community pro-
gram become the national [model]
rather than having the policy wonks
design something and say ‘make this
work at the local level.’

Although she initially stepped into
the policy world accidentally, her
experience reveals a depth of experi-
ence in that world. Hansen’s resume
reads like a “who’s who” of health care
policy makers. She’s a Commissioner
of the Medicare Payment Advisory
Committee (MedPAC), board mem-
ber of the National Academy of
Social Insurance, and the Robert
Wood Johnson Executive Nurse
Fellows Program. She also serves on
boards of the Effective Healthcare
Stakeholders Group of the Agency
for Healthcare Research and Quality
(AHRQ), Lumetra (California’s
Quality Improvement Organization) and
the California Regional
Health Information Organization
(CalHRIO). She is also past presi-
dent of the American Society on Aging.

Hansen first became involved with
AARP as a member of the board
directors of the AARP Foundation,
AARP’s charitable organization dedi-
cated to enhancing the quality of life
for all as we age. She was invited to
serve in this role by Dr. John Feather,
who had served with Hansen on the
board of the American Society on Aging.

“One of the things he was
trying to do was diversify the board
in terms of thinking” Hansen explains.
Today, as she prepares to lead the organization, Hansen’s understanding of how AARP organizes its policy work is a bit more nuanced. “There is a whole policy institute within AARP, there are also advocacy staff, but then what people probably do not know is that we have a cadre of 25 volunteer policy people who divide up into health and long term care, into consumer issues and into economic issues. This group of people are often former heads of Medicaid in their states and... really know about these domains extremely well; they volunteer their time to help look at the policy issues that we have. [AARP policy work] also generates from the staff.”

As a board member, one of Hansen’s roles is to synthesize all of the information coming in, understand its relationship to the mission of AARP, and set a direction for the organization. She notes, “The board of directors is the final arbiter on the policy positions.” Right now seems to be an ideal moment for Hansen to take a visible leadership role with AARP, as their current policy positions seem to match her own approach to policy work.

“One of the things I love and so honor about the opportunity to be a part of the AARP right now is that the organization’s positions are really practical and tie back to being a nurse; lets get something done that is right at all levels for the individual to society, and so being in this position is a phenomenal privilege and responsibility. How do we help a society more positively on issues that have huge conundrum considerations to them? It’s kind of awesome.”

Hansen believes that asking key questions as a society is a first step to change. She emphasizes that “we need to have a real public discourse on this, as well as to reflect on our country vis-à-vis other developed countries. Why is it that we spend nearly double of our country’s GDP on healthcare and yet seemingly get very modest returns compared to how other countries spend their resources? Using benchmarks of empiricism—death rates, birth rates, and chronic disease management, things [here] are certainly no better. We need to ask the critical questions that a society should face. What choices do we make with our resources, given the principles of our democracy and market economy? How do we think about caring for our society now and in the future?”

“This is to me the exciting component of mobilizing regular people. I think [we] need a new movement in our society. Its not about the politics and not only about ideologies, but whether people are going to have decent ability to live and thrive and have some of the common themes—a core of hopefulness and a future of security—and whether its for our future grand-children or for ourselves. We have to take the issues and have ‘kitchen table discussions.’ It has to be at that level because at this point the ideologues are at each other’s throats. I think its been proven stuff just doesn’t happen with ease, just because of all the huge vested interests of all different kinds. So at some point we need to ask, ‘What’s the people’s interest?’

“We have to be intelligently informed and have the capacity to discuss this, whether we have an 8th grade education or whether we have a doctorate. There are some common themes that bind us in terms of what a decent life for our population is and our hopes for our future. I think right now it needs to be a populist understanding and a movement that calls for some ways to address the hard questions that all of us—we whether its hard questions individually, but really when you add all these hard questions together it is a collective societal set of hard questions. We have to make sure people understand there are decisions to be made that involve some hard looking at things that we often times have taken for granted.”

“First is knowing that it is elected officials who get to make decisions about the issues of healthcare and economic security. I think part of it is focusing on and shining the light on how best to address the hard questions. I think it needs to be a populist understanding and a movement that calls for some ways to address the hard questions that all of us—we whether its hard questions individually, but really when you add all these hard questions together it is a collective societal set of hard questions. We have to make sure people understand there are decisions to be made that involve some hard looking at things that we often times have taken for granted.”

UNDERGRADUATE COMMUNITY HEALTH COURSE EMPHASIZES COALITION BUILDING

When Assistant Professor Jennifer Allen arrived at Boston College last year, she already knew what kind of an impact she wanted to have on her community health students. “My goal was for the students to see first hand what can be accomplished on a community-level when committed individuals and organizations are brought together to form community coalitions. There are many challenges to this work: identifying a shared agenda, finding time to meet, differing work and communication styles between individuals/organizations, and identifying and procuring adequate financial resources to conduct the work. However, I firmly believe that to create lasting and widespread change, working in partnership with community coalitions is essential.”

Allen found the opportunity to create this learning environment in collaboration with the Voice of the Gospel Tabernacle Church in Mattapan, a section of Boston that is home to a large Haitian population.

“The pastor of the Voice of the Gospel had contacted BC looking to work with nursing students. Over the course of the fall semester (2006), I met with him, attended church services to get a sense of the congregation, and we talked about how to create a good learning experience for students, while meeting an unmet community need.”

“During the spring semester, the students provided free health screenings (blood pressure and blood sugar) at the church on Thursday mornings. In addition, we conducted some educational events on Sundays. For example, students organized a nutrition workshop on a Sunday afternoon called Nouvo Gou (New Taste).”

The students work culminated in an end-of-semester health fair at the church, which attracted over 200 community members. The May 5th event was scheduled to begin at 10:00 am, but by 9:00 there was already a line of people waiting to get in; clearly, this project was meeting a real community need. Students had spent much of the semester preparing for this day.

Allen notes, “As we were planning for the health fair, the students and I divided the task into themes. For instance, the students, who were working on diabetes, collected brochures in English and Haitian Creole, provided blood sugar screenings at the health fair, and prepared informative posters on nutritional facts that every diabetic person should know. Other themes were on health insurance, nutrition, blood pressure, mammograms, and other health topics. Over the semester, the students contacted different community leaders and organizations, such as the Cambridge Health Alliance and Boston Public Health Commission, to gain support and participation from these organizations.”

All of this preparation paid off. In all, 30 women got mammograms; 20 men got prostate screening; 50 got eye/ear exams; countless others had blood pressure checks, blood sugar tested and BMI assessed. Members of the community received information on oral health, health insurance, and various other community resources that can motivate them to live a healthier life.

Allen isn’t content to stop there. “Most importantly, we are continuing to work with the community coalition that organized this event. We plan to conduct another community-wide health event or campaign this year. Our hope is that this coalition will be the ‘legacy’ of the project.”
on the fact that these are the people in our democracy elected to steward our well-being. With elections coming up, we need to underscore this with each of the candidates. [Political candidates are] having to talk about it regardless, but the ability to really commit to it publicly, in terms of what they say they’re going to do, and then staying accountable for the decisions they end up making. Just even shining a light on it is a very important thing. You can’t just keep putting it off to other people.”

According to Hansen, even these basic steps might be challenging initially. “I think it’s going to be messy for a while. I think there are some things that are going to be about the art of doing and the art of compromise just so that we keep moving on it because what we have now clearly doesn’t work. I think that’s something that AARP has the ability to do and we’re just speaking about the efficiencies of the system let alone changing the system.

“There are a huge amount of efficiencies shown over and over again that can be achieved by existing systems. Why not call for accountability? Why does a care provider or a hospital benefit from the fact that a mistake was made on a patient? When the patient goes back to the hospital, Medicare and the insurance companies just pay for it. There is something very flawed about that kind of thinking that there’s no consequence for not doing what should’ve been done correctly in the first place. Why don’t people wash their hands when they know that’s a main way of infection passing in hospitals? Why are medications not looked at as a system when some places have figured it out; the VA hospital system has a 99% rate of accuracy where on the other hand most hospitals have a 1 in 5 chance of medication errors. We know this data—it’s, kind of, staring at the states saying, ‘Do something!’

“Why not call for accountability? There is something very flawed about that kind of thinking that there’s no consequence for not doing what should’ve been done correctly in the first place. We know this data—it’s, kind of, staring at the states saying, ‘Do something!’”

Hansen believes that these problems can be solved with smart solutions, not necessarily expensive solutions, a belief that she traces back to her time at Boston College. “I remember taking a nutrition class in the school of nursing. [For one exercise] all of my classmates and I were divided into three groups and we were given budgets to prepare a nutritious meal—to go shopping and cook this—but we had three different types of budgets. Some of the lucky folks got a high-end budget, some of us got a somewhat moderate budget and some of us got a very small amount of money. Our charge was to meet the Required Daily Allowances, and we all met the test and did it well. Needless to say, the common denominator was having a balanced nutritious diet for a day. It was possible to do it on the low-end budget and still achieve the principles. We have to be appreciative of the fact that sometimes we’re going to be on that low-end side and that to achieve the results, you just have to do it differently than if you had all the money to spend for a high-end meal.”

“I think we have a moral obligation to do well by the opportunities that have been given to us and to always realize that our ability to do what we do is in the context of a larger society. And I just never forget that. I am probably always a cup half full type person and I just feel blessed as well as awed by the fact that I have these opportunities. And having these opportunities and venues, I need to use it for the good of society. It’s really important to me.”
By the time students find themselves in Professional Nursing II they are seniors at the end of their studies here at BC. Through multiple theoretical and practical experiences, students have each had plenty of time to think about their personal beliefs, their thoughts, and their values within nursing. Now, with their attention increasingly leaning toward graduation as well as their own potential clinical careers, is the time for them to articulate their personal nursing philosophy.

Facilitating this process is Assistant Professor Angela Amar. Since arriving at the Connell School in the fall of 2006, Amar has encouraged students to consider not simply the invaluable skills of accurate patient evaluation or the stylistic formality of science writing; Amar has also sought to focus students on their role as individuals in addition to the role, and image, of nursing as a whole. To this end, Amar has striven to infuse the Professional Nursing II curriculum with thought-provoking exercises and projects—a strategy she had employed when teaching professional development nursing classes at Georgetown.

“We talk about nursing as an art and a science, but so much of their work is straightforward, scientific writing,” considers Amar. “I wanted them to get this core idea—to see how they think about various values and practice and change.” So, in an effort to address nursing as art, Amar devised a reflective exercise encouraging alternative means of expression: students would create a literal piece of art representing their own philosophy of nursing. Amar then assigned it to the class of 95 seniors, emphasizing that they could do anything—whatever they wanted to do. “There really were no limits. And the creative part was supposed to give us the gist of the values and beliefs that were in their nursing philosophy.”

Amar concedes that the students probably had some initial doubts about the project because it was so different from what they are used to doing—there was no patient attached, there were no references. “But I think it’s important in terms of their own development that they think about all aspects of nursing,” Amar explains. “Even Florence Nightengale referred to nursing as an art, and we should devote time to the art part. I don’t think she literally meant drawing a picture; but in our communication with patients we’re not just coming from a science place, we’re coming from a people place and a holistic place. We also recognize unique pieces of ourselves and unique means of expression.”

After my exposure in different clinical rotations and summer externships, I have found my passion to be pediatric oncology. In deciding how to best articulate my personal philosophy, I chose to create a collage in the shape of a baby to symbolize my enthusiasm for pediatrics, which has been pivotal in shaping my values and beliefs about my nursing practice.

I believe play to be a value in my nursing practice. Because children learn through playing, it is essential for hospitalized children to continue to have the opportunity to play. Nurses need to be creative to incorporate play into their care. I included “creative,” “fun and games,” “laugh,” and “play” to symbolize this. I also included a picture of a dog, which many children’s hospitals use as “pet therapy” to improve a child’s stay at the hospital. Childhood is a time for growing and learning about one’s environment, so it is crucial for pediatric nurses to involve play in their care.

Kathryn Barwikowski ’07 (left)
She was right. Weeks later, students tooted their pieces of artistic expression to class. One by one they pulled the pieces out of bags and from between the books that had kept them protected and flat, setting them in clusters on the table at the front of the class. Beside the various groupings of artwork rose a stack of papers, each articulating the students’ individual beliefs and values of their role in the nursing profession as expressed in their artwork. The works were so diverse, so unique, that Amar was “amazed to walk in and find the table covered in them all.”

“As you can tell,” she says, later surveying and leafing through the projects, “some people really put some time and effort into thinking about the concepts they were going to use. And they enjoyed having a different kind of thing to do, having a different approach and being able to show a different side of themselves.” Amar motions to a number that she had set aside on a chair. “And you can also see the strong social justice piece, the Ignatian way of thinking—the idea that you’re supposed to go out into the world and come back and reflect on what it means. You go back changed. And once you have this knowledge, you have the responsibility to act and do something.”

While admittedly striking, these art projects were only intended to be companion pieces, complementary to papers describing one’s nursing philosophy. These papers explain how each creative expression evidences a student’s beliefs and values about nursing and the nursing profession. Some excerpts, as rich and colorful as the surrounding projects, follow:

“I attribute my success to this—I never gave or took any excuse”—Florence Nightingale: This quote stresses the important values of accountability and advocacy, which are both essential for nurses. A nurse who does not take responsibility for a mistake or who does not advocate for a patient when someone else is not looking into the patient’s best interest is also a detriment to the medical profession.

KRYSTIAN JACQUES ’07

If one was to attempt to capture the essence of nursing in a painting, it would have to be done as an Impressionist style because the open composition relates to the constantly reconfiguring role that nurses play. Nurses worked to accommodate patient needs, situations, and locations therefore having lines that limit the composition of the painting would directly oppose the flexibility of the nursing role. After the style and subject of my painting were chosen, I decided to use this particular flower—a recreation of Georgia O’Keefe’s Cula Lily—to symbolize the relationship between nurses, the patient and family, and the interdisciplinary team. Nurses play a very special role in their intimacy, capacity, and privileged position in relation to patients; they function as mediators, buffers, translators, facilitators, and culturally understanding individuals.

JENNIFER BEAUDRY ’07

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Where the world of science and the world of mysticism intertwine, I believe, is where the world of nursing exists. Out of black and white comes gray, and out of fact and faith comes nursing. This harmony is yours to tend to, and the efficacy of your care will resemble the balance. A nurse must be able to see all things objectively, to assess a situation without emotion. At the other end of the spectrum, a nurse must be willing to take on a patient’s suffering, must have the capacity to feel every emotion, and fight for them when they are too weak to fight for themselves. In preparation for care, a nurse must develop her armor, like a second-skin. The human condition is far too heart-breaking to witness without protection.

It is amazing and rather disheartening how quickly we forget ourselves, and see the patients as bodies rather than people with their own stories and lives. It is the nurse’s role to hear the patient’s story, to offer our support even if just by listening and not rushing out the door. I do not know exactly what it is about my manner that gives off the impression that I will listen, but I am often rewarded with patients unloading everything onto me because I’ll actually stay and hear what they have to say. They must see that I am genuinely interested, and have often had patients apologize for telling me things they intended to tell no one. But it is crucial that we not lose perspective that even the strongest human being is forced into a stage of utter vulnerability when unclothed, unhealthy, and alone. It is our responsibility, our duty, to place ourselves in their shoes and treat them the same way we would want to be treated as patients. And we will be patients some day, there is no doubt, but hopefully we learn our responsibilities before that day comes, instead of looking back on a career with regret.

The balance signifies the challenge that nursing practice must face each and every day to weigh and equalize the humanistic traditional nursing values with the profession’s highly technological, highly specialized delivery system. However, nursing must also maintain equilibrium by incorporating each person’s individualized emotional and physical needs in its practice.

The collage of pictures is purposefully intertwined—the disabled, the homeless, the incarcerated, the children, and the elderly must all be cared for to maintain nursing’s intrinsic value of social justice and altruism. All are represented in the color spectrum within the collage as well as the watercolors surrounding the circular border of the poster. The poster’s overall shape signifies the treatment of people as a whole across a global healthcare continuum, with no break in its path.
Have you ever sensed a gap in your care for the critically ill or dying patient? Has your experience as a nurse led you to question, “What more could I have done?” Have you contemplated, “Is this all I have to offer this family?” Have you ever felt like the focus of your patient’s quality of life has been lost or overlooked?

During the last 11 years of my career as a pediatric bone marrow transplant, pediatric intensive care and neonatal intensive care nurse, I have struggled with some of these questions. At times, even thinking about them has led me to question, “What more could I have done?” Have you ever sensed a gap in your care for the critically ill or dying patient? Has your experience as a nurse led you to question, “What more could I have done?” Have you contemplated, “Is this all I have to offer this family?” Have you ever felt like the focus of your patient’s quality of life has been lost or overlooked?

Yet, this questioning and sense of inquiry has led me to my graduate student profile at Boston College is a comprehensive and unique specialty program in an effective and tangible manner. I believe the new palliative care program at Boston College is a comprehensive and unique specialty program that grounds his work. “Ultimately the major concern of any project for me is: what are the communications goals and who is the audience? Often there are multiple goals and multiple audiences, but either way, my goal is essentially the same—I try to engage technology in a way that complements teaching and communications. But I also try to be subtle. Technology doesn’t replace teaching or any other interpersonal interaction; it enhances it.”

Filling the Gap

Chad Minnich

profile

Transforming Communications

BY JOSHUA J. JENSEN

In the “old days” of nursing education, innovation in the classroom and in presenting research often meant finding the best available multimedia tools to convey your message. Faculty would work with the Connell School’s media specialist to identify the best slides, videos and even rudimentary computer programs into their courses. The media specialist would assist them in using cutting-edge tools such as filmstrip projectors and audio taped recordings.

Minnich has employed his skills on a diverse set of faculty projects, impacting the quality of classroom instruction, assisting faculty in using multimedia tools as part of their research design, designing posters and presentations that allow faculty to more effectively present their research, and even collaborating with faculty in producing educational interventions.

To bolster his already considerable abilities, Minnich is currently working toward a PhD in curriculum and instruction at Boston College’s Lynch School of Education. He explains, “It doesn’t matter whether I’m working to enhance teaching or whether I’m engaging people for a specific research-related purpose. I think the main reason I’m invested in the PhD is because I love the development of learning tools as much as I love engaging learning in the classroom. Ultimately, for me, the PhD is a means of continuing to contribute to effective and compelling instructional communications—which is really the key to any successful interaction.”

A selection of Chad’s work may be found in our endnote—page 45
Some 300 guests attended a March 24 cocktail reception marking the 60th anniversary of the William F. Connell School of Nursing. Connell School alumnae/i, current and retired faculty and staff, and Connell School partners from clinical and community settings convened in Corcoran Commons to peruse multimedia exhibits that highlighted the school’s past, present and future.

“We are extremely grateful for all the support our friends and alumnae/i have given us and are happy to take the opportunity of our 60th anniversary to thank them, to reflect on our past, present our current efforts, and envision the future of this wonderful school of nursing,” said Connell School Dean Barbara Hazard.

Among the exhibits were a screening of “Women’s Voices, Women’s Lives,” a film created by CSON faculty and staff about African-American women living with HIV, and a photographic presentation from the participants in Connell School’s Global Health Initiative’s recent service learning trip to Nicaragua. Nursing students also demonstrated MicroSim, a learning tool that simulates an emergency room setting.

The Connell School was the first full-time undergraduate program at Boston College to accept women and its nursing doctoral program was the first to be offered at a Jesuit university.

In recent years, the Connell School has added significantly to its academic offerings, including the Master’s Entry Program for non-nurse college graduates, the Nurse Anesthesia Program, and the Palliative Care Specialty. “Our faculty members are continually re-evaluating and re-designing curricula to meet current demands,” said Hazard, who adds that, despite the Connell School’s growth and changes, “our goal remains to prepare our students to excel in service to others.”

Reprinted with permission from the Boston College Chronicle (March 29, 2007).
1950s

Elizabeth (Dwyer) Vickers ’53 received her BA and MA in history studies from the University of West Florida where she wrote her thesis on Elisabeth Crowell.

Elaine (Noiseux) Galeone ’58 married a fellow BC alum and together they started a photography business and professional lab. Together, they have five children and eleven grandchildren and live in Timonium, MD.

Marie (Lunney) Zielinski ’59 is happily retired and has been traveling extensively, visiting China, Egypt, England, Ireland, France, Germany, Poland, Austria, Czechoslovakia, Hungary, Netherlands, Belgium, Denmark, Russia, Sweden, Finland, Estonia, France and will leave for Spain, Italy, Greece and Turkey this fall. She has five grandchildren; the youngest, Adam, was born last June.

1960s

Leona (Rousseau) Dolloff ’60 is a retired nurse educator and gerontological nurse practitioner. She married Peter Dolloff in 1956 and is the mother of five, grandmother of eleven and great-grandmother of one. Leona is a quilter, YMCA member, avid reader, political activist and traveler.

Ruth (Wright) Kee ’60 is now retired and spending time with her husband Bob in Pennsylvania and Massachusetts. They have four grandchildren.

Ruth Calaveccio ’61 now works in California with elders, mostly refugees from Ukraine. She and her husband Michael enjoy breeding and showing dogs around the country.

Jane Murphy Cunniffe ’61 is now retired after 43 years of nursing. Jane’s nursing career included teaching at Boston City School of Nursing and in Virginia where she worked mostly in Critical Care with emphasis on coronary care and open heart surgery. Jane’s life is very active despite having had both of her knees replaced. She has two children and one grandchild.

Kate Liva Bott ’62 is semi-retired and lives in the Northern Neck of Virginia on the Chesapeake Bay. She continues to work with the University of Maryland Medical Center by telecommuting. Kate’s daughter Julia (A&S ’02) works at the Gardner Elementary School in Allston, MA, and is pursuing a degree in educational administration.

Margaret Shandor Miles ’62 officially retired in 2004 from her position as Professor at the University of North Carolina at Chapel Hill. She continues to work part-time on research grants, directing the Center for Innovations in Health Disparities Research, and mentoring new faculty and students in research. In 2006, she was awarded the Society of Pediatric Nurses First Lifetime Achievement Leadership Award, thereafter to be given as the Margaret Shandor Miles Leadership Award.

Brenda H. Sullivan-Miller ’62 retired in February 2006 and presently does some home care and pet sitting in the large senior community where she resides. Her eldest daughter, Kathleen is the proud mom of 30-month-old Sophia. Being a grandmother is the thrill of Brenda’s life and she is blessed to have her second daughter, Kerry, living nearby. Brenda enjoyed gathering with her classmates at the 45th reunion, as many of them have remained close. She has remained a serious Doug Flutie groupie since the 1980s and is also an avid BC football and basketball fan.

Kathleen (Williams) Robbins ’63 was remarried in 2003 to Kenneth Robbins and now lives in beautiful southwest New Hampshire. Kathleen retired in August, after 25 years at the Spaulding Rehabilitation Hospital. She is looking forward to traveling, hiking,puttering around the house and hopes to find some volunteer work in retirement. She has two daughters and a wonderful granddaughter who was adopted from China as a baby.

Ann M. Carty Thrailkill ’64 is currently Lead Women Veterans Program Manager at Palo Alto VA and for the VISN (Fresno, Reno, Northern California, Honolulu, San Francisco’s VA). Ann is also the coordinator for the Women’s Health Center and an Associate clinical faculty with Stanford and the Margaret Shandor Miles Leadership Award.
Ada Amaro ‘65.

Peggy (Bowes) Best ‘67

Margaret and John spend most of their time on Fripp Island, SC.

Margaret (Keeffe) Baker ‘66

grandmother of two.

Caroline is the mother of five, disabled in the everyday lives.

Catherine E. Graziano MS ‘65 worked as a nursing educator at Salve Regina University in Newport, RI. She was a Rhode Island state senator for ten years, and is now working with elderly programs to assist seniors and the disabled in the everyday lives. Catherine is the mother of five, grandmother of six and great-grandmother of two.

Margaret (Keeffe) Baker ‘66

lives in Annapolis, Maryland. She and her husband of 28 years, Andrew, have two children.

Rose Cain ‘77

lives in New Bern, NC with her husband Bruce and their three children.

Bonnie (Orlick) Showstack ‘76

lives in Easton, MA with husband Bruce and their three children.

She lives in Needham, MA with three children and three grandchildren. She now lives in Cohasset, MA.

Maureen practices at Boston Medical Center in Pediatric Emergency. She is involved in statewide teaching of emergency nurses and recently returned from teaching emergency nurses in Bermuda. Her son, Michael, is a fourth year medical student and her daughter, Kathleen, is a third year nursing student.

Joan (Melanson) Lewis ‘74 reports that her daughter Christine received her second Master’s degree in industrial psychology, and son Mark was married this summer and teaches on Long Island with his wife. Joan’s daughter Theresa—godchild of Patricia (Webber) Sheridan ‘74 has just finished her Girl Scout Gold Award.

Deborah (DiScion) Ryan ‘76 earned her PhD from Emory this past August. She is now in her 45th year on the faculty at the Nell Hodgson Woodruff School of Nursing at Emory University. Deborah is the mother of two boys.

Bonnie (Orlick) Showstack ‘76 is currently an Occupational Health Nurse at Haemonetics Corporation in Braintree, MA. She lives in Easton, MA with husband Bruce and their three children.

Peggy (Bowes) Best ‘67 has a psychotherapy practice in Herndon, Virginia. Peggy lives in Reston with her husband.

Anne (Grier) Valenzano MS ‘67 would like to say hello to her classmates, Gertrude Redmond ‘65 MS ‘67 and Edith Cacciatore MS ‘67 and congratulate them on the 40th anniversary of finishing their Master’s program.

Carol Joyce ‘69 is practicing psychotherapy including dream work and Jungian-based approach. Her avocation and burgemeister career is in the music and arts. Her latest venture is in playwriting with Gretchen Cryer. She often utilizes the nursing stories and concepts she has encountered that she thinks are good teaching tools in her performances. Her husband has recently retired so a new phase of their lives has begun.

Cathy Callahan Brennan ‘72 lives in Wethersfield, Connecticut and is doing foot care for senior citizens. Her oldest child is a freshman in college and her younger child is a junior in high school.

Janet Cameron-Barry ‘72 lives in Wethersfield, Connecticut and is doing foot care for senior citizens. Her oldest child is a freshman in college and her younger child is a junior in high school.

Jean (Davidson) Skoblar ‘69 completed her MSN and Pediatric Nurse Practitioner training in 1997. She is the mother of four and has enjoyed volunteering at an orphanage for HIV positive children in Nairobi, Kenya.

Jan O’Connell ‘72 received her MBA from Boston University and now lives in Ann Arbor, Michigan.

Davida F. Kruger ‘76 is employed at Henry Ford Health System in Detroit, Michigan as a Nurse Practitioner in the Division of Endocrinology, Diabetes and Bone Disease. Her role includes both clinical practice and clinical research. Davida is also an editor in chief of the American Diabetes Association’s journal, Diabetes Spectrum.

She lives in Bermuda. Her son, Michael, is a fourth year medical student and her daughter, Kathleen, is a third year nursing student.

Deborah (DiScion) Ryan ‘76 was recently appointed Dean of Advance for Nurses

Journal. Deborah is the mother of two boys.

She is now the president of the Society of Pediatric Nurses, an Associate Professor at the Connell School and chair of the Maternal Child Health Department.

Davida is also editor in chief of the American Diabetes Association’s journal, Diabetes Spectrum.

She has made spiritual visits to people in need and has enjoyed volunteering at an orphanage for HIV positive children in Nairobi, Kenya.

Her oldest child is a freshman in college and her younger child is a junior in high school.

Jan O’Connell ‘72 received her MBA from Boston University and now lives in Ann Arbor, Michigan.

Davida F. Kruger ’76 recently joined her own business serving the needs of seniors and their families in the Washington, D.C. metro area who are facing the challenges of downsizing and relocating from their long-term homes to an assisted living facility.

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Executive for the VA New York Harbor Health Care System.

Diane Erlandson ’73 MS ’78 received her masters of Public Health from Harvard University, was a fellow at the National Institute of Nursing Research, and completed her doctoral studies ABD at Harvard University. Diane is married with three children and three grandchildren. She now lives in Cohasset, MA.

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alumnae/i VOICE

Stony Brook University Hospital in New York.

Karen (Murphy) Noga MS ‘77 is working in Maternal Child Health/Pediatrics and her daughter, Lindsay, recently started at BC as a freshman.

Elaine (Deleso) Stephens ‘77 has been elected Chairman of the Board of Directors of the National Association for Home Care and Hospice. She and her husband, Christian, have four sons.

Anne F. Bourque ‘78 is now the Clinical Director of Hematology and Bone Marrow Transplant at City of Hope National Medical Center in California. Her two children, Elizabeth and Greg, are 25 and 20, respectively.

Kathleen Mitchell ‘78 went on to Tufts/New England Medical Center in Boston and graduated with a CRNA in 1984. She lived in Boston and worked for Anesthesia Associates of Massachusetts for 20 years. Kathleen now lives and works in Aspen, Colorado as a full time CRNA at a rural hospital.

Catherine (Brefach) Newman ‘78 was presented with the William E. Boye, Jr. Humanitarian Award on May 3, 2007. The award recipient, as well as her community

Martha Jones ‘79 has worked in Home Health as a director of an agency as well as starting her own business for the recruitment of nursing administrators, doctors and pharmacists. She resides with her partner of 20 years in Phoenix, AZ.

Robin Griffee ‘80 is in her nineteenth year as a pediatric oncology nurse at the Jimmy Fund Clinic. She lives in Norwood, MA with her son, Quinn, whom she adopted from Guatemala.

Colleen Brennan-Martinez ‘81 works as a Nurse Practitioner in Interventional Cardiology at the Cardiovacular Center at the University of Michigan Health System. Colleen’s daughter is now in college.

Parise (LeBorouf) Dubay ‘81 is currently a school nurse at the schools her three children attend in Fort Kent, Maine. Parise is a cancer survivor of six years.

Dee Graceffa MS ‘81 is sad to report that her son, Justin was recently seriously injured. She asks her fellow alums for their thoughts and prayers for her son and family.

Dina (Levy) Rosenthal ‘81 recently received her Masters from the University of Maryland in Leadership and Education. She is the department head of the Coronary Care Unit and hopes to be able to give back and join many of her colleagues as faculty. She is married with two boys, one of whom attends Boston College. Her other son is a senior in high school. They reside in Rockville, Maryland.

Mary Ellen Bowers ‘82 is living in Fort Kent, Maine. Parise is a cancer survivor of six years.

Parise (LeBorouf) Dubay ‘81 is currently a school nurse at the schools her three children attend in Fort Kent, Maine. Parise is a cancer survivor of six years.

Dina (Levy) Rosenthal ‘81 recently received her Masters from the University of Maryland in Leadership and Education. She is the department head of the Coronary Care Unit and hopes to be able to give back and join many of her colleagues as faculty. She is married with two boys, one of whom attends Boston College. Her other son is a senior in high school. They reside in Rockville, Maryland.

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Dee Graceffa MS ‘81 is sad to report that her son, Justin was recently seriously injured. She asks her fellow alums for their thoughts and prayers for her son and family.

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Ellen M. (Shea) Byrd ’83 has worked for the last 20 years in neonatal intensive care. She is currently enrolled in Indiana Wesleyan’s Master’s program with a concentration in nursing education. Living in Marshfield, Ellen is the wife of Doug and mother of three.

Cheryl Homer ’83 recently received her MS in Nursing Administration and Leadership from Walden University. She is living in Ocala, Florida where her last full time position was Nurse Manager for the CVICU and the CVU at Munroe Regional Medical Center. She has also been employed as a part time instructor at Central Florida Community College.

Mary (Haraz) Willis MS ’83 taught at the University of Portland until 1999 and is now a full time mother.

Cheryl (Dishnet) Bardetti ’84 currently works as the Quality and Safety Project Manager at Caritas Christi Health Care in Portland until 1995 and is now a full time mother.

Patricia Flanagan MS ’84 is a nurse practitioner and avid asthma educator. Patricia is the Chief Technical Officer at Eye Seven Inc. in Arlington, MA, for 22 years. They have two children: Kelly Elizabeth, a senior at Concord Academy, and Colleen Patricia, a sophomore at Philips Academy.

Janet (Foley) Miller ’84 relocated to South Florida in 1991 and has made that area home with husband, Ed and triplet boys, Brian, Devin and Jack. The boys are now ten years old. Janet is currently the Area Vice President for South Florida Genentech Health Services. She just celebrated her 24th anniversary with Genentech and is very proud of her organization’s mission, vision and values toward clinical care and position patients outcomes in the home health setting.

Gloria Antall MS ’87 is an Assistant Professor at the Frances Payne Bolton School of Nursing at Case Western Reserve University in Cleveland, Ohio. Gloria and husband Robert relocation to South Florida in 1991 and has been a certified nurse midwife for the past ten years in a private practice in southeastern Massachusetts. She is also the single mom of three children.

Jacqueline (Clark) Keith ’85 is a certified informatics nurse and has been practicing in this role now for 16 years. She lives in Exeter, New Hampshire with her husband and 11-year-old daughter. Jacqueline recently presented “Using Technology to Expedite Screening and Intervention for Domestic Abuse and Neglect” at the University of Maryland SON’s Summer Institute of Nursing Informatics in Baltimore, Maryland.

Joy A. Laramie ’87 currently works as a nurse practitioner in Hospice/Palliative Care and Geriatrics at the Veterans’ Affairs Medical Center in Washington, D.C. She is the author of Primary Care of the Older Adult, and is an Assistant Clinical Professor in the Health Care Sciences at George Washington University and Adjunct Clinical Professor at George Mason University.

Julianne Evangelista ’87 MS ’90 is a PNP in the cardiovascular program at Children’s Hospital, Boston. She is also the President of the Northeast Pediatric Cardiology Nurses Association (NPCNA). In March, Julianne published “Assessment of Pediatric Heart Sounds” in the American Journal for Nurse Practitioners and was a contributor to NAPNAP’s Core Curriculum Book for Pediatric Nurse Practitioners in Primary Care for the Cardiovascular System.

Patricia A. Kuster ’87 is a pediatric nurse practitioner and received her PhD in nursing from UCLA in 2002. She is married with two young children and has several recent publications.

Julianne Evangelista ’87 MS ’90 is a PNPI in the cardiovascular program at Children’s Hospital, Boston. She is also the President of the Northeast Pediatric Cardiology Nurses Association (NPCNA). In March, Julianne published “Assessment of Pediatric Heart Sounds” in the American Journal for Nurse Practitioners and was a contributor to NAPNAP’s Core Curriculum Book for Pediatric Nurse Practitioners in Primary Care for the Cardiovascular System.

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Jacqueline Leonard MS ’85 is a Child-Adolescent Psychiatric Clinical Nurse Specialist and is an assistant professor of nursing at Franciscan University of Steubenville, Ohio.

Cari (Grubich) Tatian ’89 has been working as an oncology RN in outpatient setting for 13 years. Two years ago, she started her own business with Arbonne International, a health and wellness company. Cari has three incredible children: John, 11, Claudia, 9, and Grace, 6. She and her family have lived in Natick for 14 years where she enjoys working from her home, caring for her children and being healthy.

Elizabeth G. Damato PhD ’88 is currently Assistant Professor of Nursing at Case Western Reserve University where she has received grants for research on sleep patterns among mothers and children. Elizabeth was named a Woman of Excellence for Research & Scholarship by Case Western Reserve University Research ShowCASE.

Julie (Jackson) McDonald ’88 received her masters in nursing from SUNY Stonybrook and has been a certified nurse midwife in the home health setting. She has been married to Kevin since she graduated from BC. She and husband, Michael, have two children, Matthew and Samantha.

Gina Anker ’92 MS ’97 is a lecturer and clinical instructor in the Department of Adult and Child Nursing at UMass/Dartmouth. She recently published her first book entitled Clinical Decision Making: Case Studies in Medical-Surgical Nursing. A second book with additional case studies will be published later this year.

Kristina Ann (Lane) Gartner ’92 is working as an RN in the ICU/CVICU at Lahey Clinical Medical Center and founded Legal Nurse Boston, a legal nurse consulting firm. She and her husband Dieter are proud parents of 11-year-old Anasophia, 3-year-old Ethan and 4-month-old Roman Luca.

Pasqualeen (Suplet) Kessinger ’92 has been working at Boston Children’s Hospital Center—currently in the ICU—since she graduated from BC. She and husband, Peter, have two sons: Matthew and Samantha.

Deborah J. MacDonald MD ’92 received her PhD from UCLA School of Nursing in 2006 and since 1997, she has been a cancer

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...and Women's. She just had a nurse in the PACU at Brigham and has 2 boys: Ben, two years and 5-year-old son.

Fran (Higgins) McAuley '94 works part time as a nurse anesthetist at Children's Hospital of Pittsburgh. She lives in Duxbury, Massachusetts.

Lee (Shirland) MMS '95 is now living in Northboro, Massachusetts and working for VNA Care Network home care. She is married with two children.

Charlotte (Altmeier) Nicholson '94 is working at the Georgetown University Hospital Transplant Institute as a Living Donor Transplant Coordinator/ Hepatology nurse. Charlotte is married with two daughters.

Annie (Walsh) Watts '94 is a nurse in the PACU at Brigham and Women's. She just had her fourth baby in 3 years and is married living in Duxbury, Massachusetts.

Melissa (Johnson) Comeau '96 is married to Perry Comeau and has three children: Alexis, 8, Perry, 6, and Chase, 4. They live in Harvard, MA and she works per diem at Cape Cod Hospital.

Melissa (McNamara) Mullen '96 is working part-time at MGH as an ER nurse. She resides in Newton with her husband, Dr. John Mullen, and their two children.

Helen (Heffern) Coupas '97 has been working in cardiology at the Hospital of the University of Pennsylvania in Philadelphia since 1999. She has been married for seven years to Kevin and they have a three-year-old daughter, Elena.

Jodi (Bartlett) Elder '97 is now working at Children’s Hospital Boston as the Heart Transplant Nurse Coordinator. She and her husband live in Brookline, Massachusetts.

Maura (Forbes) Hughey '97 is married and lives in Newbury, Massachusetts.

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Maura (Forbes) Hughey '97 is married and lives in Newbury, Massachusetts.
Caitlin (Fenney) Stover ’98 recently accepted an adjunct position in Community Health Nursing at Worcester State College for the fall semester and at Boston College for the spring semester.

Elizabeth Whitaker ’98 lives in Kansas City and works as a Nurse Practitioner with a Gynecologic Oncology group. She has been an NP for three years after receiving her masters in nursing from the University of Colorado.

2000’s

Alexis (Baine) Bābī ’00 graduated from the University of Illinois at Chicago in 2006 with a MSN. She married in October of 2006 and now works as a Pediatric Nurse Practitioner at Children’s Memorial Hospital in Chicago in the Stem Cell Transplant department.

Kathleen M. Kearney ’00 graduated from Suffolk Law, earned her MSN from Emory University and passed the CPNP exam. Currently, she is an attorney at the Turley Law Firm in Dallas, Texas. Earlier this year, Kathleen authored an article published in the Journal of Nursing Law.

Christine (Holborow) Lauria MS ’00 is now a Geriatric Nurse Practitioner for MGH. She lives with her family in Millis, MA.

Lauren (Forbes) Timmons ’02 is now working at Mass General Hospital and was married two years ago to a fellow Boston College graduate.

Maria DiCenso ’03 just graduated from Northeastern University’s Pediatric Nurse Practitioner program in May 2007 and just started working at Children’s Hospital in Boston as an NP in the Plastic Surgery department. She was married at BC on October 7 to fellow Eagle Jeff Ambrose.

Britt (Frisk) Pades ’03 recently left her position as a Neonatal NP in New York City to pursue a PhD in Nursing at the University of North Carolina at Chapel Hill. She is currently a first year Pre-Doctoral Fellow looking to study feeding and growth in infants with complex congenital heart disease. Britt lives in North Carolina where she enjoys beautiful weather, Southern hospitality and ACC football.

Jessica Capone ’04 moved to West Hartford, Connecticut. Since graduation from the Master’s Entry program in 2004, Jessica has had two children and moved three times. Her daughter, Mason, will be three years old in December and her son, Jules, will be one year old in October. She is currently a full-time mother, which she enjoys very much. She hopes to transition back into a part time nursing role over the next year.

Emily (Karwacki) Sheff MS ’04 graduated in 2007 with her MSN from the University of Pennsylvania’s Acute/Chronic Pediatric Nurse Practitioner Program.

Shaama was married in May to Shady M. Chahoud and they are renovating an 1820s farmhouse.

Nancy Crouse CERT ’05 will be joining the Connell School faculty in January 2008 as a part time Clinical Instructor for the Community Health Nursing course taught by Adele Pike. She is also employed by the Visiting Nurse Association of Boston as their Psychiatric Nurse Consultant and works for the Community Health Rehabilitation Support Programs for the Chronically Mentally Ill.

Megan Mattern ’06 and her fiancé Tim Hughes ’06 each work as nurses at Mass General Hospital.

Amy M. O’Meara MS ’06 has been working as a clinician at Planned Parenthood in Hazleton, Pennsylvania since May 2007. Her daughter, Madeleine, was born on July 18, 2006. Amy has agreed to with (former BC faculty) Holly Harner to precept a student from Thomas Jefferson University in the spring of 2008.
Musings on the Aging Population

Aging, is a process that occurs over time—it is initiated at birth and extends across human existence and beyond. • Aging gives life new meaning and opens up possibility • Aging offers each person the potential for self recognition, maturation, growth and depth • All humans engage in aging—it is what we have in common • The relationships and connections we make as we journey our life path, unfold and embrace us as we—without this connection, aging can be a challenging and lonely experience. • Waiting to “grow old” delays engagement in an inevitable experience and may potentiate needless fear and anxiety • Being an active partner in aging can make the process more familiar and help balance losses with gains • Awareness of our own mortality can help us to value each day and celebrate accomplishments • With aging comes the potential for increased wisdom to share and mentor others • Respecting the human rights and dignity of others is inherent in promoting our own humanness • Nurses recognize the person as a holistic being and work in partnership to accompany individuals and groups as they journey through health, illness and death • Nurses are hope for the challenged, the despairing and compromised ... their presence offers the support needed for others to move forward, make changes, and transform their lives • Nursing cares for the elderly, exquisitely • Aging is a gift—it should be recognized early and participated in, actively • Aging informs our present, acknowledges our past and transforms our future • Supporting each other throughout the aging process is a conscious experience, with mutual benefit, enriching us as each day of our lives.

Dorothy Jones, EdD, RNC, ANP, FAAN, is a Professor of Adult Health.
Ellen Mahoney, DNSc, RNC, is an Associate Professor of Adult Health.