Global Sharing: Chapters Reach Across Boundaries

Epsilon Beta, Fitchburg State College, Fitchburg, Massachusetts
NAVIGATE THE NEW WAVE OF NURSING CAREER CHOICES

The Glaxo Wellcome Pathway Evaluation Program Helps Nursing Students Find Their Way

It's easy for nursing students to get lost among the many career options in today's new environment. The Glaxo Wellcome Pathway Evaluation Program for Nursing Professionals gives four-year nursing students a hands-on method for unlocking the future, by facilitating the decision-making process.

Working in cooperation with baccalaureate nursing school faculties, Glaxo-Wellcome provides training for faculty members so they can guide students through career choices that match professional goals with personal strengths and lifestyle preferences. Plus, the program includes all the resources necessary to help nursing students evaluate their many options, including three comprehensive sections:

- Self-assessment exercises
- Workshop focusing on a decision-making process
- Follow-up resources and career counseling

To find out about the program that more and more nursing students and their faculty advisors are turning to, call the Glaxo Wellcome Pathway Evaluation Program for Nursing Professionals toll-free number at 1-800-221-PATH.
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The success and strength of Sigma Theta Tau International is as unique as each one of the 356 organizations. As the foundation structure of the organization, scholars, chapter leaders and members advance the science of nursing to affect the health of people globally. Chapters are the “living” mission, the life-blood of the society, for without them we all so ardently believe it would go unfulfilled. But chapters, step by step, can take the Society’s challenges to the next level, by experience the exhilaration of accomplishment, bount­ful in leadership, service and growth.

Toward these concerns are member involvement and growth, as both essential elements to Sigma Theta Tau International’s viability as an important contributor to nursing’s future in the next century. To ponder these issues of involvement and growth, several “traits” that I have found in the literature strike me and would like to share with you. First, we are not alone—every organization of mem­bers, both in and out of nursing, is struggling to sus­tain membership. There is comfort in this fact. Sec­ond, successful organizations give members what they want and need, achieving this by going where the majority of members work. Em­phasize the importance of each member to the work of the chapter. Plan: Revisit the mission of the society and de­velop a vision statement for the chapter. Create a chapter strategic plan based on service to meet the community’s needs. Identify key areas of improve­ment for the chapter. Find out what will draw many members for chapter activities; find out what will draw many respondents who regularly disseminate and dis­cuss their work and writing that profoundly influenced the health of world citizens is not just good; it is essential.

By Melanie C. Dreher, RN, MSN, CPNP, FAAN, International President

global sharing of knowledge and technology that will enhance the health of world citizens is not just good; it is essential.

Melanie Dreher

EXECUTIVE OFFICER’S MESSAGE

Build the Future in Knowledge and Action

By Nickerson-Dickness, RN, MSN, CNPE, FAAN, Executive Officer

The pragmatic approach in this challenge written by LUIS VALLE, Sigma Theta Tau International’s 1997-1998 president, & RICHARD NA INTERNATIONAL at the April 1997 Issue of the Rotarian, Mr. Gray shared “Ten Steps Toward Growth,” a set of guidelines to help leaders and members build the future. These basic steps are simple, but they should be repeated: research,发动, fake, correct, evaluate, disseminate, acknowledge, and be an example. These steps do not differ from the “Ten Steps Toward Growth.”

GLOBAL SHARING AMONG NURSES

As of this my love affair with Jamaica as a research center, clinic and volunteer has spanned 28 years. It was 1969 when I first set foot in a rural Jamaican village and when I first listened to the local people’s concerns. They said “I don’t like it because we don’t have enough” instead of “I don’t like it instead of “I don’t need it” instead of “I don’t have it.” These experiences enhanced the meaning of global sharing: teach, share, in a rural Jamaican village and when I first listened to the local people’s concerns.

My theme for the year is, at best, a com­mitment to the outstanding faculty in the Advanced Nursing Institute of Jamaica. We have begun to teach and share the experiences that I have from 1969.

It is clear that worldwide health cannot be achieved by a single nation. Indeed, even the health of a single nation cannot be achieved only through the efforts of that nation. Damage to the rain forest in Brazil affects the atmosphere in a way that the whole world is affected. Widespread, in eastern Europe impact countless other countries, a virus originating in Africa has pan­demic repercussions. In the world, whether it is the United States is broadcast throughout the world.

Work: Meet members, discussions, activities. In addition to spending the jobs, do the work, record and evaluate how you did it and put it on. Never be without a role or task in the chapter and recruit another member to help you (an “action for every member” campaign). Make the work fun.

Be Caring: Respond to member comments and needs, seeking these. Initialize regular discussions between members and officers: a mail slot; a suggestion box; lunch and learn. Set up meetings and activities where the majority of members work. Em­phasize the importance of each member to the work of the chapter.

Evaluate: Consider how to improve the chapter. Have changed a vision (poster theme or momento book) which tracks accom­plishments. After every activity, ask if the chapter achieved what it hoped and how it could be improved. Deal with weaknesses and don’t accept exc­uses. Conduct regular chapter self assessments and leadership appraisals.

Disseminate: Make your chapter known in your community. Develop an initiative around an identi­fied need. (Teach: Implement a new member orientation, Motivate: At every turn, talk about the "living" mission, the life-blood of the society. (Be the model, for action do speak louder than words.) Increasing growth and activity in the chapter, work, be caring, evaluate, disseminate, acknowledge and be an example. These steps do not differ from the “Ten Steps Toward Growth.”

Steps Toward Action

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Crimea but on both sides of the Atlantic and, admittedly, detived a great deal of pleasure in doing so. But I never felt proud to be a player in a great multination event that the majority of members work. Em­phasize the importance of each member to the work of the chapter. Plan: Revisit the mission of the society and de­velop a vision statement for the chapter. Create a chapter strategic plan based on service to meet the community’s needs. Identify key areas of improve­ment for the chapter. Find out what will draw many members for chapter activities; find out what will draw many respondents who regularly disseminate and dis­cuss their work and writing that profoundly influenced the health of world citizens is not just good; it is essential.

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Build the Future in Knowledge and Action

By Nancy Dickenson-Hazard, RN, MSN, CPNP, FAAN, Executive Officer

The strength and success of Sigma Theta Tau International (STTI) depends on the leadership of its members. As the founder and first president of Sigma Theta Tau International, in the April 1947 issue of the BULLETIN, Ms. Gray shared "Ten Steps Toward Growth," a set of guidelines to help leaders and members build the future. These basic steps are still simple: plan, search, motivate, work, be caring, evaluate, disseminate, acknowledge and be an example. Translating these steps into practice can take many forms for the chapters of Sigma Theta Tau International. My reflections on some possibilities follow.

Plan: Revision the mission of the society and develop a vision statement for the chapter. Create a chapter strategic plan based on service to meet some community need by setting goals and de- dicate resources for chapter activities; find out what will draw them to the chapter. Set specific goals for chapter growth and involvement and assess the past member growth trends and demographics as well as social, economic or health trends in your community that affect chapter viability. (This would make a great individual or group student research project.) Once established, or if in existence already, revisit the plan annually to make sure you are still on target. And most of all, use the plan and pass it on.

Organize: Set up an operating structure and an- nual or biennial timeline. Recruit organized people with a sense of responsibility to key jobs and offices. Break the tasks down into many small jobs and delegate responsibility. Use many members for many tasks, rather than a few for many. Expand the work force (and reach) of your chapter.

Teach: Implement a new member orientation, chapter officer transition meeting, a chapter open house, a community health fair, a career day, a continuing education and community based service project, etc. Communicate a high value on chapter, resources, leadership opportunity, membership and community involvement.

Evaluate: Constantly look at the progress the chapter has made. Obtain a high value on chapter, resources, leadership opportunity, and community involvement.

Disseminate: Make your chapter well known in your community. Develop an initiative around an identi- fied need and mobilize resources and need each member to work with local media and use your network of friends and colleagues. Assemble a great communicator of the science of nursing.

A c k n o w l e d g e: Take pride in chapter accom- plishments, just do them for posterity. Regularly recognize and commend member effort and work on behalf of the chapter. Thank you can never be said too loud or too often. Applaud publicly, member and chapter achievement, identify and recognize new areas of accomplishment.

Be An Example: Take the first step assume a role in a committee, collaborate with another chapter or organization on a project or activity, or or- ganize an initiative, search the web for ideas, or as some say, "shoot from the hip," for actions do speak louder than words.

The work of the chapters will propel the society into the next millennium, much like they have shaped in past and present. There is every reason to believe that each will build the future in knowl- edge and action.

GLOBAL SHARING OF KNOWLEDGE AND TECHNOLOGY THAT WILL ENHANCE THE HEALTH OF WORLD CITIZENS IS NOT JUST GOOD; IT IS ESSENTIAL.

Melanie C. Dreher, RN, MSN, CPNP, FAAN, International President

In this age of the information superhighway, global sharing of knowledge and technology that will enhance the health of world citizens is not just good; it is essential. Nurses are involved in the health needs of a global society. The advances in technology and medicine have provided new opportunities for nurses to share knowledge with colleagues and patients around the world. Global sharing is not only a knowledge of health and disease, but also a sensitivity to the cultural symbols and values of the patients. Nurses are key to finding ways to meet the needs of the patient in his or her own cultural context.

The notion of nursing as a global entity is not new. Over a century ago, Florence Nightingale left England to nurse in the Crimea. Eventually, nursing was not in the policy arena, but in the conversation and action. Nurses internationally set foot in a rural Jamaican village and when I first entered, I did not even know how to say "welcome" or "goodbye." The work of the chapters will propel the society into the next millennium, much like they have shaped in past and present. There is every reason to believe that each will build the future in knowledge and action.

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MELANIE C. DREHER

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C REATING A MULTITUDE OF OPPORTUNITIES FOR NURSES TO INTERACT

Global Sharing Among Nurses

By Melanie C. Dreher, RN, MSN, CPNP, FAAN, International President

As this year’s theme for the President’s Message, “global sharing of knowledge and technology that will enhance the health of world citizens is not just good; it is essential.”

My longtime love affair with Jamaica as a research site, colleague and clinician will have spanned 28 years. It was 1969 when I first set foot in a rural Jamaican village and when I first learned about the impact of colonialism, nutrition and the impact of cultural symbols and values.

Yes, I’ve learned to do all things Jamaican and, admittedly, derived a great deal of pleasure in doing so. But I never felt so deeply satisfied about my affiliation with Jamaica as I did at the Sigma Theta Tau International Research Congress last June. As I shared the podium with my esteemed Jamaican nurse colleagues, I was proud to be a player in a multinational event that transcended geopolitical boundaries, confirming once again, the commitment of the nursing community to improving the health of the global population.

The transfer of knowledge and technology that will enhance the health of world citizens is not to be underestimated. The transfer of knowledge and technology is accomplished through the sharing of new ideas, experiences, and solutions. The sharing of knowledge and technology that will enhance the health of world citizens is not to be underestimated. The transfer of knowledge and technology is accomplished through the sharing of new ideas, experiences, and solutions.

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Think and Act Both Locally and Globally

By Carol Picard, RN, MS, CS, associate professor, Department of Nursing, Fitchburg State College and Regional Coordinator, and Sharon D'Vito, RN, PhD(c), associate professor, Fitchburg State College, chapter president 1993-95

Fitchburg, Massachusetts—We know that our trips to Russia would give us an opportunity to witness history in the making. Little did we know that the reality would far outstrip our expectations.

As we met with nurses, both in the United States and Russia, we learned about their lives and our mutual hopes and dreams for the future. We felt like family with common bonds—the love of life,-personhood and the nursing profession. Epsilon Beta chapter has been involved with nurses in Russia since 1990, when Dr. Galina Perfiljeva, dean of the school of nursing at the Moscow Medical Academy, visited Fitchburg State College's campus.

The Vision

In 1999, when our Sigma Theta Tau chapter was host for the event at which Galina spoke to faculty and students, we were impressed with this Russian leader's impassioned call for collaboration and partnership. She inspired our members to become involved in a variety of ways with our Russian counterparts.

Before baccalaureate programs were instituted in Russia in 1989, nurses followed a hierarchical medical model and had little autonomy. Galina's description of changes in nursing education in both baccalaureate and graduate programs motivated our chapter members to see what we could do to help further advance nursing half a world away.

Assistance was needed with material resources for the academy, informing nurses of changes in Russia, and maintaining dialogue for future projects. First, we induced Galina into the chapter as a community leader. As the first Russian Sigma Theta Tau member, she was delighted to share news of this organization with her colleagues. In the first year and a half, our members helped by sending textbooks and letters to Russian faculty and students. Then, Dr. Connie Vance, dean of the school of nursing at the College of New Rochelle in New York—a recent visitor to Russia—encouraged our chapter leaders to visit Russia.

Two Epsilon Beta past presidents, Bette Mc sheriff and Carol Picard went to Russia in 1993 during the famous events of October of that year. We were warmly welcomed by Dr. Perfiljeva, her students, and the board of the Moscow City Nurses Association. We had arrived three days after the attempted takeover of the Parliament Building and our hosts had feared that we would not come. In fact, many of our new acquaintances had cared for the wounded during the "troubles."

A highlight of that trip was being interviewed on Radio Moscow. The program was called, "On Nursing" and it was broadcast throughout eastern Russia and the Baltic States. Overall, the trip provided insights for ways we could support our Russian colleagues.

When we returned, we recalled the woeful underfunding of health care and nursing education and joined other chapter leaders in soliciting journal subscriptions and textbooks from publishers and others. We again identified Russian community leaders such as Ekaterina Zdanova, the president of the Moscow City Nurses Association for induction into the chapter. Margaret Berry, president, Massachusetts Nursing Association, and chapter member is serving as her mentor in Sigma Theta Tau. She plans to visit Ekaterina this summer.

Because an important issue was to disseminate information about nursing in Russian and the political changes occurring there, looking for opportunities to "get the word out" was a priority. In 1994, Carol and Galina prepared a paper entitled, "Windows of Opportunity: Caring in Changing Political Climates." The paper was presented at the International Association for Human Caring conference in Ottawa, Canada and later published in Power Politics and Public Policy: A Matter of Caring (New York: NLN 1995). Another article entitled, "Nursing Education in Russia: Visions and Realities" was published in Nursing and HealthCare: Perspectives on Community (May 1995). Carol and Galina presented symposia at the 1995 biennial convention in Detroit and at the International Collaboration Conference in Kansas City in 1996. The conference in Detroit also included Dr. Connie Vance, Dr. Rita Cary and Linda Robinson, nurse leaders who are also involved in Russian projects. Research conducted by our own chapter members, Mrs. Andrea Wallen and Barbara Cammuso, on caring practices of Russian nurses has been submitted for publication. They have also co-authored an article entitled "Healthcare in the New Russia: A Western Perspective in Nursing Forum." When funding from Fitchburg State College became available in 1994, the chapter invited Galina back to visit and gave her the first Epsilon Beta award for excellence in chapter leadership. She was kept busy visiting with chapter members, going to other institutions including campuses, and attending brainstorming sessions for maintaining partnerships. Before she left, she had a copy of a letter of agreement from Fitchburg State College's president to jointly work on scholarly projects which she had signed by a Russian counterpart as well. In addition, two Russian scholars on the Fitchburg campus volunteered to help with an English as a second language (ESL) test for Russian nursing students.

In the spring of 1995, the chapter also hosted two Russian nursing students who worked alongside American nurses in medical centers, extended care facilities, and community health. This was made possible in part, by a donation from Beth Israel Hospital, Boston, to assist in funding one of the first Jewish nursing students in the Russian graduate program to come to the United States.

The chapter began a fund raising project in 1995 selling hand-painted Russian pines. Little did we know how successful this venture would be. In two years, enthusiastic chapter members sold more than $45,000 worth of pines—enabling us to purchase a computer, printer, video camera and materials for the Moscow Academy nursing department as well as fund Galina's travel to the biennial convention, and to financially sponsor an exchange program for our Russian counterparts. Mary Majulis, our chapter's "pin lady" is known to nurses and community groups across Massachusetts and beyond—because of our fundraising activities.

A journey and celebration

Because Galina was to graduate the first master's prepared nurses in the history of her country in 1995, our members supported the idea of sponsoring a conference in Russia, with nursing leaders from the United States, Canada and England as featured speakers. Much as if we were repeating the premise of the movie "Field of Dreams," we believed if we planned the conference, "they" would come. Because we didn't have full financial support for such a venture, we invited speakers to "be a part of history" in lieu of an honorarium.

Thirteen members of our chapter and nine additional nurses took part in a two-week tour of the country that included visits to hospitals, clinics, schools of nursing and various cultural events. Two conferences were held—one in St. Petersburg and one in Moscow. The conferences featured the following speakers and topics: Dr. Madeleine Leitinger, Caring: What Matters Most in Human Services Transculturally?; Dr. Simone Rouch, "Ontology of Caring and Its Application to Nursing Education, Practice and Research;" Sharon D'Vito, "Women and Psychological Trauma: A Model of Care;" Barbara Cammuso.
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**Working Together for Change**

**By Galina Perfiljeva, dean, School of Nursing, Moscow Medical Academy, chief Nurse of Russia**

We live in an exciting time in Russia, where nothing today is the same as yesterday, and nothing will be the same tomorrow. It is exciting because it gives hope for a new future, but at the same time it is frightening because there have been many dramatic changes in the Russian federation in the past seven years. Historically, nurses in Russia did not practice autonomously unless they were working in areas where a physician was not available. They merely followed doctors' instructions with few opportunities to make decisions. Nursing was and is, still remains dependent on and subordinate to medicine. Most doctors believe this is right and proper. Nursing staff face enormous difficulties in their professional and personal lives. Nearly 95 percent of the nursing work force is female. The status and income of nursing personnel is extremely low because working conditions are poor and work loads exceedingly demanding. Nurses' wages have hovered just above the poverty line, and most of them hold down two jobs to make ends meet.

However, it is recognized in the country that effectiveness, efficiency and humanity — the cornerstones of high quality — depend to a large extent on the work of nurses. As the national debt rises and economic pressure increases, the impact on health budgets, providing the most efficient and cost-effective care increases. Nurses can potentially save hospitals a great deal of money by working daily with patients in the community to prevent serious illnesses, or prevent people going into the hospital in the first place.

Fortunately, it is now possible to claim that quality of nursing care has been greatly improved through improvements in the quality of nursing education. In very difficult circumstances, progress has been made in nursing education, and a new curricula has been prepared and circulated to many houses in the city. Snipers were on the roofs of many houses in the city. They could see our friends would come. But we did not expect them to wash and reused. Nurses report that the infection rate is 100%. Antibiotics are scarce, used in diluted doses and only given for severe infections. At the time of our visit, a 50mg vial of morphine sulphate had been donated by a physician and divided into 50 doses in order to provide pain relief for more patients. Such shortages are common at other Russian health care centers as well. Some health care innovations are beginning to occur, however. Factory workers near the polyclinic in Vysnov have an insurance plan which will pay for services received at this center. The clinic is easily accessible to the workers and nurses at this center have a high level of experience — providing care we would describe as advanced practice. School nurses affiliated with this clinic help conduct programs to prevent smoking and drug abuse.

One of the final stops on our journey was a visit to one of the first hospices in Russia, the Moscow Charity Society Hospice. This 25-bed facility that was begun in 1994 with donations of 2 million rubles ($1 equals 2,000 rubles) provides care for the terminally ill. Healing interventions included music, art, therapeutic touch, spiritual healing and emotional support. Although physicians have not generally supported the hospice concept, the World Health Organization is helping to educate them about the importance of palliative care.

Another trip to Russia in 1996 was led by chapter member Rachel Difazio and included nurses from around the country giving members from additional chapters an opportunity to experience, first hand, our sister institution.

The Future

Galina and two recent graduates from her program are scheduled to spend a month this summer at Pittsburgh working on the ESL project with Epsilon Beta members and ESC faculty. The chapter will sponsor this event and will assist with travel costs when she will be an invited speaker at the 75th anniversary celebration this fall. Also, the chapter voted to financially support an Epsilon Beta scholar's travel to Russia to work on a project relevant to the needs of Russian nursing. Members continue to publicize what nursing in Russia is like to other nurses and to the public. And recently, Carol was appointed to the editorial board of a Russian nursing journal. She will be selecting and obtaining copyright permission for key articles to be published in that journal. 

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**Russian nurses share their role in the trauma center with Lillian Bannon (center), retired clinical nursing instructor from Pittsburgh and other Sigma Theta Tau nurses.**

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**Epsilon Beta chapter president from left, Bernadette Olson, Sharon D'Vito, Elizabeth Pink, Carol Picard, Barbara Mullaly, Bette McEachin, and founding president, Kay O'Connor.**
Working Together for Change

By Galina Perfiljeva, Dean, School of Nursing, Moscow Medical Academy, chair of Nurses’ Rights in Russia

WE live in an exciting time in Russia, where nothing today is the same as yesterday, and nothing will be the same tomorrow. It is exciting because it gives hope for a new future, but at the same time it is frightening, because there have been so many dramatic changes in the Russian Federation in the past seven years. Historically, nurses in Russia did not practice autonomously unless they were working in areas where a physician was not available. They merely followed doctors’ instructions with few opportunities to make decisions. Nursing was and, indeed, remains dependent on and subordinate to medicine. Most doctors believe this is right and proper. Nursing staff face enormous difficulties in their professional and personal lives. Nearly 95 percent of the working force is female. The status and income of nursing personnel is extremely low. Working conditions are poor and workload exceedingly demanding. Nurses’ wages have hovered just above the poverty line, and most of them hold down two or more jobs to make ends meet.

However, it is recognized in the country that effectiveness, efficiency and humanity—cornerstones of high quality of health care—are dependent on the work of nurses. As the national debt rises and economic pressures on health care budgets, providing the most efficient and cost-effective care to the patients who need it can potentially save hospitals a great deal of money by working daily with patients in the community to prevent serious illnesses, or prevent people going into the hospital in the first place.

Fortunately, the need to improve the quality of nursing care has also been widely recognized in the country. It has been noted that if nurses receive appropriate educational preparation, they can provide a better health care service to maintain the health of individuals, families, and communities as a whole, and could bridge the gap between individuals and medical care. Nursing reform in Russia is based on the strong belief that nursing practice would be improved through improvements in the quality of nursing education.

In very difficult circumstances, progress has been made. Nursing education, and nursing reform in general, have been restructured. A new curriculum has been prepared and new educational and training programs are being developed. Following the recommendations of the first World Health Organization Conference on Nursing, this curriculum is focused not only on hospital nursing, but also on community nursing.

We are very proud of our nurses and students. They apply immediately their new knowledge and skills into practice. They are the change agents in the health care system and, particularly, in their health care settings. The schools they attend, however, lack experience, appropriately trained faculty, and learning materials. Continued progress is needed to provide a chance for advancement. We are grateful for our colleagues from England, from the United States, and other countries who have supported us over the past years. They visited us, lectured at our schools, visited hospitals, and participated in joint research. I am very proud of having such friends as Carol, Connie, Rita, Linda, and many others.

I look with fondness anticipat­ ing a visit from our colleagues a few years ago. They were days of dramatic events in Moscow. Foreigners were disappearing from the city, and we did not expect our friends would come. But these courageous nurses were there, according to us in spite of the dramatic situation in the country. They could see buildings on fire from the windows of our hospital. Snipers were on the roofs of many houses in the city. Yet, these nurses were taking care of the wounded and encouraging our nurses. I was touched by how these nurses could feel the need and were able to come and support and encourage our nurses during such a tense period. As a result, these visiting nurses have become known in both the city and country, and everybody here is proud to have such outstanding nurse leaders in the United States of America.

Despite the tremendous difficulties Russian nurses face today in our country, I am constantly astonished and delighted by the energy and enthusiasm I meet every day. I fully believe that what unites nurses in our country and the United States, indeed across the globe, is stronger than what divides us.
Celebrating Diversity

By Suzanne L. Dibble, RN, DNSc, associate professor, Department of Physiological Nursing, University of California, San Francisco

Imagine a resource that would give you insights about a patient's cultural and health care needs—regardless of that patient's ethnicity. That's the type of book Alpha Eta chapter members envisioned and here's how the idea started. In 1994, our governing board realized that the active membership roster of our chapter did not reflect the cultural diversity of its environment of potential members.

**Focus Group**

We created a committee to explore reasons for this discrepancy and conducted a focus group of nurses recruited from several cultures in the San Francisco bay area. One key issue was identified by focus group participants: Nurses of a particular ethnic background were expected to delay their own work in order to help coworkers interact with other patients of that background. This expectation was not always realistic, appropriate, or acknowledged.

The idea of creating a quick reference for use by nurses who care for patients from many cultural and ethnic backgrounds was facilitated by Dr. Juliane Lipson, one of our members and a recognized expert in multicultural issues. She introduced us to Beyond Boundaries, a source of pertinent information about eight cultures developed by the Cultural Diversity Enhancement Committee at the University of California Medical Center. Most of the authors for Beyond Boundaries became authors for the Alpha Eta project.

We sought information from various sources and solicited book chapters from authors representing 24 different cultures. From this information we created a book called, *Culture & Nursing Care: A Pocket Guide*. This book provides clinicians with a general set of guidelines alerting them to similarities and differences of specific cultural groups. Each chapter outlines issues related to cultural/ethnic identity, communication patterns, activities of daily living, food practices, symptom management, birth rituals, death rituals, family relationships, spiritual/religious orientation, illness beliefs and health practices. At the end of each chapter, pertinent references are included so readers can study the culture more fully. The book contains three appendices: Population tables and distribution maps of the major ethnic groups within the United States; details of spiritual/religious belief; and maps of selected regions of the world. Examples of the kinds of language, health care and cultural questions we tried to address were:

- How do you teach someone who does not speak English to practice self-care?
- How do you teach someone to treat their child's fever or cold when they can't read the labels of over-the-counter medications?
- How do you help someone who doesn't have money to get needed medications?

We learned that management of diabetes, heart disease, hypertension and glaucoma is even more challenging when you must teach through an interpreter. In order to assist Sofia, a 1994 refugee from Russia, her nurse and interpreter eventually created a card with pills taped to it so she would know what to take when.

Speaking of interpreters, we have learned that using a child—and sometimes other family members—to interpret is not a good idea. Using a child for interpretation can be both culturally and ethically inappropriate.

Not all the culturally diverse clientele of Alpha Eta members in the San Francisco bay area are refugees. Many are English-speaking, US citizens—but are also influenced by a cultural heritage that shapes their health care beliefs, needs, experiences and practices. For example, Joseph and his mother Sa Meiliga are American citizens of Samoan heritage who have come to the Valencia Pediatrics Clinic managed by the school of nursing at the University of California.

Four percent of the royalties go to Alpha Eta and so far we have sold approximately 5,000 books. But more than the money, this project has itself had an effect on our chapter. Alpha Eta's executive board for 1997-1998 has members with a variety of heritages (Norwegian, German, Chotchaw, African, Japanese, Hawaiian, Danish, Polish, Czech, Italian). We are heterosexual and homosexual. We are Catholic, Jewish, Baptist, Seventh Day Adventist, Methodist and agnostic.

We represent clinical nursing, research and teaching. But as a group, we are all nurses who care and treat our patients to celebrate our diversities as well as our similarities. It takes some knowledge, some curiosity—and most of all it takes respect.

**REFERENCES**

G U I D E T O C U LT U R E & N U R S I N G C A R E: A Pocket Guide

This book offers practicing nurses a snapshot of human diversity. It is not a cookbook but is set of general guidelines to alert nurses to the similarities as well as differences between and within the groups. We urge readers to use this book as a starting point for individualizing their nursing care. Each chapter outlines issues related to health and illness, symptom expression, care, among other topics. The groups were selected for inclusion based on our areas of expertise with the cultural/ethnic groups.

- Brazilians
- Camerounians
- Central Americans
- Chinese Americans
- Confederate
- Colombian
- Cuban Americans
- Filipinos
- Gypsies
- Haitians
- Hindus
- Indians
- Japanese Americans
- Koreans
- Mexican Americans
- Puerto Ricans
- Russians
- Samoans
- South Asians
- Vietnamese
- West Indians

The authors of specific chapters were selected on the basis of their expertise with the cultural or regional group. This expertise may have been based on their personal cultural heritage or their area of research specialization.
GLOBAL SHARING THROUGH QUICK REFERENCE GUIDE
Celebrating Diversity

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Spreading Comfort Around the World

By Katharine Kolcaba, RN, C. PhD, assistant professor, University of Akron, and May Wykle, RN, PhD, assistant dean of community affairs, Frances Payne Bolton School of Nursing, Case Western Reserve University

Cleveland, Ohio—Building a body of knowledge about patient comfort has been similar to constructing the Rock and Roll Hall of Fame in Cleveland. Both began with diverse ideas about a perceived need. Both captured the imagination of many. Both required the application of distinctive perspectives, backgrounds and intellects for the structure to come into being. Little by little, ideas became plans and plans gradually turned to form. Then, a unifying theme brought together separate layers of knowledge and observations as arches. In M. Pei’s pyramid so perfectly captured the energy and meaning of Rock ‘n Roll.

Perspectives on Comfort

Nursing researchers—primarily, Dr. Katharine Kolcaba and Janice Morse—have been at work for several years building knowledge about comfort. These two researchers approached the issues surrounding their subject from different perspectives and were then joined by others such as Hamilton, Pedersen, Cameron, and Arruda. Their tasks were to define and describe the phenomena of patient comfort, to understand factors that contributed to comfort, and to discover ways to measure the relative effectiveness of these factors. Foci stemming from the diverse perspectives of the researchers were (a) the outcome of comfort, and (b) the process of comforting.

In order to determine if comfort could be increased after interventions were implemented, Kolcaba developed a way to define and statistically measure patients’ comfort (1992). It was deemed important to pursue this line of research because if comfort could be numerically assessed before and after an intervention was implemented, statistical evidence could show if the intervention was successful. Kolcaba constructed a model of the content of comfort which reflects physical, psychospiritual, social and environmental elements. The examination of transcendence was made an important part of the procedure because situations occur in which patients can’t be free from physical or mental pain. In these cases, they need help to rise above their discomfort. As with the hall of fame project, a unifying theme was important for bringing research together. This was accomplished in 1994 by Kolcaba and was called a Theory of Holistic Comfort for Nursing. She stated that certain interventions could be designed to meet the comfort needs of the whole person. This theory was used by Kolcaba in 1995 to describe relationships between her technical work about patient outcomes and the descriptive work of Morse about comforting actions. Only if the comforting actions, or interventions, resulted in increased comfort, could they be considered successful. Kolcaba’s comfort theory requires that nurses continually reassess the effectiveness of the interventions—modifying them as necessary until enhanced comfort is achieved. Morse’s work supports and expands upon these portions of Kolcaba’s comfort theory.

Statistical Tests of the Comfort Theory

Two studies generated by Kolcaba’s comfort theory have been completed. The first tested the effects of guided imagery for women with early breast cancer receiving radiation therapy. Guided imagery tapes contained messages that personalized the radiation equipment as “a powerful friend,” radiation as “healing rays” and experiences with therapy and therapists as positive and health-providing. The second study tested a similar intervention, cognitive strategies, for adults with a stroke. Morse tested a similar intervention, cognitive strategies, for adults with schizophrenia. In both studies, positive images and suggestions were targeted to specific comfort needs. Customized scripts were developed with a relaxing musical background and given to each person in the treatment group along with a tape player. Participants listened to these tapes every day at their convenience and answered the comfort questionnaire three times during the 10-week study period. In both studies, an equal number of participants did not receive tapes (control groups) but answered the same questionnaires all three times. At the end of the study, the people in the control groups also were given tape players and other audiotapes designed for wellness. In the urinary incontinence study, comfort was measured at the fourth time three weeks after the control group received their tapes. Differences in comfort increased over time among people who received the intervention compared to those who did not. In this study, the control group also experienced enhanced comfort after listening to the audiotape. (Results from both studies are currently being prepared for presentation and publication.)

Significance of These Studies for Building Knowledge

These two studies mark the first time that comfort was used as an outcome in a nursing experiment. As nurses have had to rely solely on individual patients to indicate whether their comfort was increased after a nursing intervention. Now we know change toward increased comfort over time is measurable. Findings in both the breast cancer and urinary incontinence studies are that the relationship between effective nursing interventions and enhanced comfort could be demonstrated through the use of an empirical questionnaire and statistical analyses. Other empirical studies are now using Kolcaba’s Theory and General Comfort Questionnaire adapted for specific research problems. Nursing studies which measure differences in comfort include slow-stroke massage in hospice patients, postsurgical care, positioning and feeding frail elders, postcardiac catheterization, and therapeutic touch. Comfort is also being measured with clients subsequent to a holistic health program and with burn patients receiving music therapy during dressing changes. Dr. Kolcaba’s research, and ways to adapt it, have been shared with nurses in Thailand, Chile, Bolivia, Japan, and Romania.

Why Comfort?

Why is comfort an important concept for nursing research and why is it gaining increased attention? Perhaps, in the midst of hospital “downsizing,” nurses sense an urgent need to provide some benefit to patients that distinguishes our profession. Perhaps, we need to be re-identified with the mission of being providers of comfort. We have long recognized that comfortable patients heal faster, cope better, become rehabilitated more thoroughly or die more peacefully than do the uncomfortable. Kolcaba’s Comfort Theory proposes that relationships between comfort and patient progress continue to be tested. Patient comfort is the essence of nursing and contributes to patients’ quality of life.

Building Knowledge Together

Because comfort is so complex, many building blocks are yet to be discovered and placed within the structure of nursing knowledge. To add details to this structure will take the interest, skills, and cooperation of many. To date, Kolcaba has received numerous inquiries from nurses around the world for information about her comfort theory, instruments, questionnaire, and care plans. A web site has been created to facilitate exchange of observations and ideas. She welcomes all to visit the web site at http://www.uakron.edu/nursing/faculty/kolcaba/comfort.htm and participate in this exciting project.  

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In both studies, positive images and suggestions were targeted to specific comfort needs. Customized scripts were audiotaped with a relaxing musical background and given to each person in the treatment group along with a tape player. Participants listened to their tapes every day at their convenience and answered the comfort questionnaire three times during the 10-week study period. In both studies, an equal number of participants did not receive tapes (control groups) but answered the same questionnaires all three times. At the end of the study, the people in the control groups also were given tape players and other audiotapes designed for wellness.

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**From Wealth of Oil to Wealth of Health Care**

_By Wendy Winslow, RN, MSN, director of nursing, Al Ain Medical District and Al Ain Hospital, United Arab Emirates_

The United Arab Emirates (UAE) is strategically located on the southeastern coast of the Arabian Peninsula guarding the Strait of Hormuz and sitting atop a wealth of oil. Oil was first exported in 1962 and since then the country has experienced rapid social and economic development. Under the wise leadership of the president, His Highness Sheikh Zayed bin Sultan Al Nahyan, what was once a harsh desert has become a wealthy country with sophisticated urban centers and a population of 2.4 million.

Visitors to this country of deeply religious Muslims are fascinated by the contrasts—date palms, colorful gardens and intensely irrigated farmland border the oil sands and the desert wilderness. Sophisticated shopping malls and world class hotels are alongside traditional open air livestock markets and ancient forts. Camels wander alongside superhighways. Men armed with mobile phones head into the desert in luxurious four wheel drive vehicles to practice the ancient art of falconry.

In contrast to the western world where contraction and retrenching is taking place in health care, health care in the UAE is undergoing rapid growth. Until the 1960s, there were just two small hospitals and a scattering of lay midwives and traditional herbalist healers. In 1997, there is an impressive infrastructure of public and private hospitals, widely distributed primary health care clinics, school health and preventive medicine programs as well as medical and nursing schools.

**Ministry of Health**

Officials in the Ministry of Health understand the strategic and vital role nurses have in enhancing the health status of the country’s population. Three approaches to the development of nursing in the 1990s in the UAE are as follows:

- In 1991, the ministry established a Federal Department of Nursing and appointed an Emirati nurse as director. Patima Al Rifai (STTI) has an MSN from an American University. Under Patima’s capable and visionary leadership, a philosophy and framework to guide the development of nursing is rapidly evolving. She has recruited internationally for nurses to head the sections for Training and Education, Regulation and Registration, and Nursing Practice and Recruitment. With minimal staffing, creative management and use of local talent, the department has taken great strides forward.

- To enhance and extend the work of the department of nursing, a plan to recruit a ‘special grade’ of nurses was implemented in 1994. By paying competitive salaries, the Ministry of Health has been able to attract a cadre of nursing experts from abroad. Gradually, nurses from Europe, North America, Australia, New Zealand—and more recently, South Africa—have accepted leadership positions in administration, education and clinical practice. Some leave quickly—perhaps unable to adapt to living and working in a rapidly developing country. Many do adapt and recognize the great potential of working with both multinational colleagues and clients. The nurses who stay are talented, dedicated, challenging and unfailingly kind.

- Federal Director of Nursing, Fatima Al Rifai (black jacket) and HE Assistant Undersecretary of Health, AMD Salem Al Darmaki (gold robe), present nursing honors during International Nurses Day (IND) and provided a series of follow up workshops. Dr. Van Der Merwe returned again in 1997 for a month as a consultant to provide management education. Her visit provided the opportunity to discuss developing a chapter of Sigma Theta Tau International in post apartheid South Africa and in the UAE. Similarly, Dr. Cheryl Alexander, a consultant to Sigma Theta Tau International in post apartheid South Africa addressed the nurse managers and other nurses.

Collaboration in health care research

Nursing networks within the UAE are also active. The 60 directors of nursing meet semiannually. In addition to the formal agenda, they share ideas about how to improve local standards of nursing and enhance patient care and they leave the meetings with reassurance that each faces similar challenges and hurdles. Collaboration in health care research is in its infancy in the UAE, but opportunities abound.

Two nurses, a Canadian and a Zimbabwean, are working with an historian, the first Emirati to study the health needs of women. An American and a Lebanese have studied client satisfaction in the community. Living and nursing in another country with a different culture, religion and language challenge even the most stout hearted, but it can provide a dimension to nursing practice not otherwise possible. In turn, the international community of nurses provides the UAE with diversity and richness to enhance its health care future. The same characteristics that established trusting relationships and build a base of respect and support within each organization.
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• To provide additional education and consultation, the Ministry of Health hosts foreign experts from various health disciplines to share their knowledge. Nurses in the UAE have used their international networks to identify nursing scholars who can contribute to the development of the profession. Often these scholars are Sigma Theta Tau members. Carolyn Bier (St. Al) and Anita Van Der Merwe from South Africa addressed the plenary session of the UAE's 1996 International Nurses Day (IND) and provided a series of follow up workshops. Dr. Van Der Merwe returned again in 1997 for a month as a World Health Organization (WHO) consultant to provide management education. Her visit provided the opportunity to discuss developing a chapter of Sigma Theta Tau International in post apartheid South Africa and in the UAE. Similarly, Dr. Cheryl Alexander (STTU) from the United States and Nubah Dumit from Lebanon helped nurses celebrate IND 1997.

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Eskilstuna, Sweden—A unique collaboration influenced by Sigma Theta Tau International is underway in Sweden and the United States. Capital University School of Nursing (CUSON) in Columbus, Ohio and the Department of Caring Sciences, University of Malmödale, Eskilstuna/Vasteras in Sweden are the participants.

When nursing education in Sweden began to take place in academic institutions in 1982, demands for international views and contacts for faculty and students grew tremendously. In 1994, introductory contacts were made be a group of Swedish teachers to CUSON in Columbus, Ohio. Discussions included the role that the society could have in building an exchange program for student and faculty that included collaborative research projects and mutual support so the aca­
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ulty were inducted as members of CUSON’s Sigma Theta Tau International, will be a guest professor in Sweden. During her stay, she will teach nursing theory on the baccalaureate level and co-teach a nursing ethnography course on a graduate level with a Swedish professor, Dr. Birgit Negress, from Stockholm.

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What we know today is that major health issues are common to many of our nations: an increased number of elderly people, chronic illnesses and lifestyle problems such as drug use, poor nutrition and lack of exercise. At the same time, our economic situation forces communities to close down hospitals and find other ways of supporting people with their illnesses. Nurses have to be taught to be flexible and to work in different settings outside hospitals in addition to cooperation with our colleagues.

We are moving into the future and the society’s ideology about nursing and caring helps us develop excellence in nursing practice, education and research among ourselves, our students and practicing nurses.

Education for Today... and the Future

By Lena Stangvik-Urban, RN, BSN, MS, PhD, Director of Education, College of Nursing, Ohio State University and member of Sigma Theta Tau International, will be a guest professor in Sweden. During her stay, she will teach nursing theory on the baccalaureate level and co-teach a nursing ethnography course on a graduate level with a Swedish professor, Dr. Birgit Negress, from Stockholm.

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Dr. Heber’s work on “ethic dance and self” theory has produced an innovative approach to qualitative research and has contributed to the sharing of knowledge...

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Eskilstuna, Sweden—A unique collaboration influenced by Sigma Theta Tau International is underway in Sweden and the United States. Capital University School of Nursing (CUSON) in Columbus, Ohio and the Department of Caring Sciences, University of Malardalen, Eskilstuna/Vasteras in Sweden are the participants.

When nursing education in Sweden began to take place in academic institutions in 1982, demands for international views and contacts for faculty and students grew tremendously. In 1994, introductory contacts were made by a group of Swedish teachers to CUSON in Columbus, Ohio. Discussions included the role that the society could have in building an exchange program for student and faculty that included collaborative research projects and mutual support so the academic quality of both programs would be improved.

During the spring of 1995, four Swedish faculty were invited as members of CUSON’s Sigma Theta Tau International, will be a guest professor in Sweden. During her stay, she will teach nursing theory on the baccalaureate level and co-teach a nursing ethnography course on a graduate level with a Swedish professor, Dr. Birgit Negussie, from Stockholm.

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early stage of moving into baccalaureate, masters, and doctorate programs—both faculty and students need much support. Nursing professors in the United States have been developing their discipline of nursing and theories in nursing longer than we have and we can see that the debate that was going on during the 70s is what we are in the middle of now. The U.S. professors have helped us recognize different levels of theory and content and helped us understand changes in the discipline over the past 30 years. We can now make these experiences our own—related to our system and our regulations.

Our Swedish faculty, in turn, support American educators who want to learn more about teaching strategies that put responsibility for learning on students—yet do so in a humanistic way. Seeing how students respond and learn and are able to discuss helps to motivate changes in ways of teaching. Student-centered teaching strategies also help students and nurses use theory to be clear about what nursing is.

During the spring of 1997, Dr. Karen Martens, a professor at CUSON and member of Sigma Theta Tau International, will be a guest professor in Sweden. During her stay, she will teach nursing theory on the baccalaureate level and co-teach a nursing ethnography course on a graduate level with a Swedish professor, Dr. Birgit Negussie, from Stockholm.

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Our contact with faculty at CUSON and the knowledge that we share the society’s ideology about nursing and caring helps us develop excellence in nursing practice, education and research among ourselves, our students and practicing nurses.

What we know today is that major health issues are common to many of our nations: an increased number of elderly people, chronic illnesses and lifestyle problems such as drug use, poor nutrition and lack of exercise. At the same time, our economic situation forces communities to close down hospitals and find other ways of supporting people with their illnesses. Nurses have to be taught to be flexible and to work in different settings outside hospitals in addition to motivating themselves about new clinical knowledge.

The work we’ve done together so far has helped us to better understand our similarities and differences. By learning more about each other, we get a bigger view that helps us look at our own nursing and educational systems with fresh insights and without the prejudice about other cultures and their systems that is often experienced.

We will continue working to develop a local chapter of Sigma Theta Tau International with support from CUSON friends such as Dean Doris Edwards (Dean, CUSON), and Ing-Marie Backman (IVV).
Creating Culturally Competent Professionals

By Mary Lou Bond, RN, PhD, and Mary Elaine Jones, RN, PhD, are both professors and co-directors, Center for Hispanic/Latin American Studies, University of Texas at Arlington School of Nursing (UTANS).

The emphasis of the center are communication across cultural boundaries, development of a culturally competent workforce, and study of issues related to Hispanic health. We are responding to the challenges of meeting the growing and unprecedented need to provide culturally sensitive and competent health care to increasing numbers of Hispanics in our communities. For the past six years, undergraduate and graduate students have participated in an intense, short-term, cultural immersion experience in Mexico as part of a summer nursing elective. More recently, registered nurses, respiratory, speech and occupational therapy have participated in similar language and culture studies through the center's Travel, Study, Learn Program, a continuing education offering. These educational experiences, undertaken with the support of many nursing students, and nurses of increasing numbers of asking the opportunity to reflect on their own values and culture. Arrangements for a first initiative, the Nurse-Exchange Program (NEP) began when we were provided the opportunity to meet with a group of nurses, primarily from North Carolina and Georgia (US), but some from other parts of the country, to share experiences, to learn from each other, and to understand the perspectives of their counterparts. The comments of these and others reflect many of the same themes: Consistently, participants have commented that the experience helped them to understand stereotypes about Mexico—"to "not judge a book by its cover," to "be more sensitive to cultural differences," to "learn more about my own values" and to understand that cultural learning is a life-long process. We are currently completing a study focusing on this aspect of learning associated with short-term cultural immersion. The study, conducted at the Center for Bilingual Multicultural Studies in Austin, the Study, Learn Program also shared insights. Responses from participants in the nursing elective and the Travel Study, Learn Program suggest that the lessons learned have a profound effect upon their world view. Responses have been shared via diaries, comments at the end of the experience, and comments one-year after the experience. Dr. Andrea B. Smith, assistant professor at UTASN, past president of Delta Theta chapter, and a recent participant in the travel, study, learn program said, "A critical insight for me occurred when I was in Mexico and the potential for global sharing became a reality. We made plans for the future which centered on the following initiatives: (a) Collaborative Research Projects (b) Curriculum Development (c) Video Conferencing (d) Students and Staff Exchanges.

In May 1996, we visited Georgia with our Dean, Professor Boytmon Stephen. Professor Pamela Levi and her colleagues had organized a full program for our two-week stay, including visits to North Georgia Colleges and Armstrong State. We delivered a paper at the Sigma Theta Tau International conference at Georgia College and State University. The paper was about a study we had conducted in the UK focusing on the use of humor as a coping strategy in nursing and midwifery. This study utilized a qualitative and quantitative research design. The study was conducted at Northumbria University. The students have spent time in clinical practice, attended lectures with their colleagues and experienced life in England. Advantages of Global Sharing far outweigh the disadvantages. Much hard work has taken place between Northumbria and Georgia, but the success is self-evident. Our aim is to share and learn from each other. Sigma Theta Tau International has provided us opportunities to continue to develop our experiences through conferences and publications. We want to expand our links and develop an international network between the USA and UK, with the objective of developing the nursing and midwifery professions internationally. Dr. Les says, "We believe our students obtain an intensive clinical experience in a culture very different from their own. Even though we share a language and a heritage with Great Britain, students find that values, and decision-making differ.

We do not send students to England as part of an elective, but rather as part of their senior practicum. Therefore they have the advantage of working not being limited to a short period of time on their program. At the same time, they achieve a first-hand, in-depth experience with a variety of health care providers in a setting unlike any they have experienced at home. We believe the greatest benefit, however, is the sharing of stereotypes of health care and cultural differences in countries other than their own. The difference in the students as they return is remarkable, and their ability to think "out-of-the-box" is greatly enhanced."

Reflections
2nd Quarter 1997


N ewcastle, England—In 1996, the University of Northumbria invited a group of academics from Georgia to visit Newcastle. Out of 55 who accepted the invitations were a small group of health professionals whom we were eager to meet. friendships blossomed during the visit and the potential for global sharing became a reality. We made plans for the future which centered on the following initiatives: (a) Collaborative Research Projects (b) Curriculum Development (c) Video Conferencing (d) Students and Staff Exchanges.

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Reflections
2nd Quarter 1997

North Georgia College and State University, University of Northumbria at Newcastle, David O'Brien, RN, FNS, ONC, CNA, RN, Head of Student Support, APP Nursing Faculty of Health Social Work and Education, University of Northumbria at Newcastle, Pamela C. Levi, RN, EDD, Dean, School of Health Sciences, Georgia College, international board member.
Creating Culturally Competent Professionals

By Mary Lou Bond, RN, PhD, and Mary Elaine Jones, RN, PhD, are both professors and co-directors, Center for Hispanic/Latin American Studies, University of Texas at Arlington School of Nursing.

Arlington, Texas—Wouldn’t you like to spend a couple of weeks or so with a family in another country to more thoroughly understand the language and customs of that culture? Helping others become immersed in the culture of Mexico was one idea we tried to make real. Mary Jones and Eila Barrios from IMSS-Mexico, Hilda Barrios from IMSS-Mexico, and Joan Moreno (Center for Bilingual Multicultural Studies, Cuernavaca). 

NPEP was implemented in July 1997 with three visits from Cuernavaca to Arlington: Eila Barrios and Hilda Barrios from IMSS and Joan Sullivan de Moreno from the Center for Bilingual Multicultural Studies. During the two-week visit, the Mexican nurses studied the structure of Parkland’s system of care, observed patient care settings and shared information about Mexican culture and health practices. A highlight of the visit was an all-day conference at Parkland that addressed the needs of Hispanic patients. The content included an overview of Mexican culture and language, recent trends in health care delivery, and the structure of Hispanic culture.

The comments of these nurses and others reflect many of the same concerns. Consistently, participants have commented that the experience helped them to develop a greater understanding of the cultural and language differences between the two countries. The nurses were able to appreciate the similarities and differences between the two cultures and to understand that cultural learning is a life-long process. We are currently completing a study that will assess the validity of these findings. The study, funded by Delta Theta Chapter of Sigma Theta Tau International and McDonald’s of Mexico.

Reflections 18 2nd Quarter 1997

EURO-AMERICAN PARTNERSHIP

Encouraging “Out of the Box” Thinking

By Maria Davison, RN, PhD, CONA, RM, FRN, Head of School and Division; Midwifery and Neonatal Care, Faculty of Health Social Work and Education, University of Northumbria at Newcastle.

David O’Brien, RN, BSc, BSN, RM, Head of School of Midwifery, Midwifery Division, Midwifery and Neonatal Care, Faculty of Health Social Work and Education, University of Northumbria at Newcastle, and Pamela C. Levi, RN, EdD, Dean, School of Health Sciences, Georgia College and State University, international board member.

Newcastle, England—In 1996, the University of Northumbria invited a group of academics from Georgia to visit Newcastle. Out of 35 who accepted the invitation, there were two small groups of health professionals. One group met to share their experiences during the visit and the potential for global sharing became a reality. We made plans for the future which centered on the following initiatives: (a) Collaborative Research Projects (b) Curriculum Development (c) Video Conferencing (d) Student and Staff Exchanges.

In May 1996, we visited Georgia with our Dean, Professor Brian M. Simpson. Professor Pamela Levi and her colleagues organized a full program for our two-week stay, including visits to North Georgia College and Armstrong State. We delivered a paper at the Sigma Theta Tau International conference at Georgia College and State University. The paper was about a study we had conducted in the U.K. focusing on the use of humor as a coping strategy in nursing and midwifery. This study utilized Critical Incident Technique which is a teaching strategy developed at Northumbria University. This conference and Sigma Theta Tau International provided a forum to begin our joint scholarly activity. Academic staff in Georgia were eager to replicate our study, and we were thrilled and honored on that day to be inducted into the society.

During our stay, we visited hospitals in Georgia and discussed contemporary care issues with clinicians. The structure of pre-registration education for nurses and midwives is different in the two countries but at an operational level we share many similar issues e.g., students clinical experiences, curricula content and issues of contemporary health care practices. Video conferencing is one project we were eager to move forward. Many students and staff travel cannot, but would benefit, from being involved in such projects. We have initiated a first-hand, in-depth experience of a variety of healthcare providers in a setting unlike any they have experienced at home.

We believe the greatest benefit, however, is the sharing of stereotypes of health care and our role in the culture of people from other countries. This is an important step in moving forward. Many students and staff are eager to move forward. Many students and staff travel cannot, but would benefit, from being involved in such projects. We have initiated a first-hand, in-depth experience of a variety of healthcare providers in a setting unlike any they have experienced at home.

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Collaborations, Chains and Circles

By Paula Horberg, RN, PhD, associate dean of nursing and director, Aga Khan University School of Nursing

Karachi, Pakistan—This year we celebrate Pakistan’s Golden Jubilee—for independence attained 50 years ago. So when Professor Afif Molok visited Aga Khan University (AKUSON) during the nine years I have been here, AKUSON, which opened in 1980, was the first established unit of the first privately chartered university in Pakistan. Admitted to the first class were 50 diploma students—including 15 military cadets. The first director, Mrs. Winifred Hartig, was an experienced World Health Organization (WHO) nurse from Canada who established a tradition of collaboration between private and public schools of nursing in Pakistan. Professor Susan E. French from the School of Nursing, McMaster University, Canada presented an overview of the longstanding collaboration between our two universities. The outcome of that study led to a one-year planning grant from the Aga Khan Foundation, Canada, and CIDA to refine plans for a collaboration that has gone full circle. Our school is involved in two major collaborative activities beyond the purely academic. The first is funded by the Canadian International Development Agency and entitled, Development of Women Health Professionals (DWHP): Nurses and Lady Health Visitors. Funding is $16.5 million (Canadian). At McMaster University my counterpart is Dr. Andrea Baumann, Associate Dean of Health Sciences (Nursing). AKUSON and McMaster University, are partners in managing this five-year program and assisting the government of Pakistan to strengthen its nursing systems.

The second activity is international in scope and could result in the university having a program in East Africa. The background is that in 1992, I chaired a feasibility study concerning establishment of an educational program for nurses in East Africa. The outcome of that study led to a one-year planning grant from the Aga Khan Foundation, Canada, and CIDA to refine plans for a proposed Institute of Advanced Nursing Studies (IANS) for East Africa. I chaired an international steering committee that included Dr. Alan Myles from the Royal College of Nursing Institute, United Kingdom; Ms. Joette Clark, from the Frances Payne Bolton School of Nursing, Case Western Reserve University, USA; Mrs. Sarah Kibuka from Uganda; Mrs. Pauline Mella from Tanzania; Mrs. J.M. Murithi and Mrs. Joyce Musindu from Kenya; and Mrs. Talaa Said from Zanzibar. Most have their master’s degrees from North America. Among other distinguished nurses to visit AKU over the years have been Virginia Henderson in the early 1980s; Lucie Young Kelly in the early 1990s, Nazema Al-Gaafar and Beverly Henry in 1997. We have had external evaluators from Bahrain, the Philippines, Canada, and the United Arab Emirates. Each visitor and each collaboration helps us to better define our vision of nursing.

Two of my most rewarding personal collaborations have been with the associate director of AKUSON, Ms. Yasmin Amarsi, a doctoral candidate at McMaster University and with Mrs. Fritz Alam Tadj, vice president of the Pakistani Nurses’ Council. Yasmin was my student and will soon succeed me as director of AKUSON—truly a collaboration that has gone full circle.

Collaborations, chains and circles go together in my mind. Each collaboration serves as a link in a chain which eventually circles around to encompass all who contributed to its making. In international nursing development work, it is the collaborations and partnerships that are developed which are most instrumental—and rewarding. To “get the job done” and leaving behind something sustainable.

AKUSON Graduates at AU Convocation Ceremony

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The Sights...the Sounds...the Smells...

Despite living in conditions we would find intolerable, the people live happy lives filled with joy.

All senses were bombarded for a group of 16 University of Alberta baccalaureate nursing students who travelled thousands of miles from the comfort of their homes in suburban Edmonton, Alberta last spring to a base camp in Comitancillo, Guatemala. The purpose of their journey was to complete a six-week minor nursing practice.

During the six weeks, the group journeyed across dirt roads to set up health clinics in isolated rural villages and squatter settlements in Guatemala City. The students were among the most common health problems they encountered in the women and children who attended the clinics. Mayan men were noticeably absent at most of the clinics, and indeed most households were headed by women. With limited supplies and the assistance of three-way interpreters, the nursing students provided care and health education in such topics as nutrition, hygiene, and wound care to as many as 150 people during a three and one-half hour clinic. For many who came to the clinics, it was the first health care they had ever received - one has to experience this first-hand.

The experience and facilitates access to the people in need of health care. The actual practice in Guatemala is the culmination of many months of preparation by the students. Fundraising, soliciting for medical supplies and pharmaceutical items, preparing and submitting proposals for grants, learning basic Spanish, and completing seminars dealing with the most common health problems they would be likely to encounter are among the many pre-trip activities.

In Guatemala, the students learn many things about themselves - their inner strength and fortitude and about the challenges of living in an underprivileged country. "The first impression or impact upon them is one of seeing a wasteland of misery and poverty in comparison to their home environment and country," continued Neander. "But slowly they develop the ability to recognize people have their own mechanisms for survival and issues with respect to health and illness."

One of the students, Barb Bailey, discovered this first-hand. "Despite living in conditions we would find intolerable, the people live happy lives filled with joy," said Bailey. "They have an incredibly generous nature - no matter how little they had, they were always willing to share." Bailey came away from the experience with a renewed appreciation for what she has and for the opportunities that have been available to her and a realization that with limited resources and some basic knowledge, one has the capacity to control one's own health care - lessons that she believes will be transferable to her own nursing practice in the future.

Although six weeks passes quickly, and only a small proportion of the individuals requiring health care can be seen, the students believe that the health care and education they have provided will continue to make a difference in the lives of the individuals and families they have touched long after their return to Canada.
PARTNERSHIPS

Global Nursing Collaborations

By Marjorie A. White, RN, PhD, FAAN, professor and director, Center for Nursing Research, and a distinguished lecturer for Sigma Theta Tau

Buffalo, New York—Cross-cultural and cross-national collaboration with nursing colleagues is an exciting and challenging way to contribute to a future world civilization of healthy people. Nurses who have participated in health care in other countries or cultures know that nursing issues and problems have strong similarities. Clients, individuals, families and communities throughout the world can benefit from diverse nursing perspectives.

At the State University of New York at Buffalo (UB), faculty from Gamma Kappa chapter are participating in research, education, and practice with Sigma Theta Tau International members around the globe. We are also helping collaborators from other countries to become members of our chapter. A chapter member can become a sponsor for an applicant who applies as a community leader. Sigma Theta Tau International has designed a flexible induction process for nurses from other countries that might occur by telephone with the officers of the chapter or by innovative procedures designed by local chapters.

The Nordic Countries

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The current Icelandic project with Assistant Professor Sandra Tweed, RN, PhD, focuses on research on family dynamics and child abuse/ neglect in Reykjavik, Iceland. This new focus originated because of findings in the family dynamics and infant temperament studies. While the rate of child abuse/neglect is not as high as in the United States, it is a rapidly growing problem confronting nurses in the Nordic countries.

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Margaret Tomsaardittir (left), instructs graduate students in health assessment at the University of Iceland.

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As a 1995-1996 Fulbright Scholar, I began the current family dynamics and child abuse/neglect project in Finland with co-investigators M lill Wu, PhD, associate professor and Janice Grankowski, RN, MS, doctoral student and with collaborators from the University of Tampere including Marita Paunonen, RN, PhD, professor and head, Department of Nursing Science; Patri Anted-Kurki, RN, PhD, associate professor, and Esp Nordland, RN, MS, doctoral student.

We have collaborated on several publications in each country of the project. For example, Margaret E. Wilson, RN, PhD, assistant professor, University of Nebraska, Touli Hakulinen, RN, MS, doctoral student at the University of Tampere, and I have written a chapter for Family nursing—Theory, research, practice and education, edited by Dr. Paunonen, and Karoli Velshelen—Julkunen, PhD, CM, University of Kuopio, Finland (In press). Nurses in the Nordic countries have welcomed ideas for practice, research and education as ways to advance nursing in their countries. The strong emphasis on caring factors in nursing that I have observed there, is one that we in the United States can adopt in further developing nursing research and practice here.

Margaret Tomsaardittir (left), instructs pregnant women on caring factors in nursing that I have observed there.

Asia

In addition, I am collaborating with Yoshiko Sekito, RN, EdD, professor, Junrei College of Nursing, Keio University, Tokyo—who is also a 1996-1997 visiting scholar at UB—to study family dynamics of Japanese families in New York State and Pennsylvania. In a further link with Asia, Mary Ann Jezewski, RN, PhD, associate professor at UB and KapChul Cho, RN, PhD, a 1997 visiting scholar at UB and associate professor, Red Cross Junior College of Nursing, Seoul, Korea are collaborating to synthesize the nursing and health science literature on advocacy. Then they plan to use the synthesis with Dr. Cho's model of advocacy in nursing developed in Korea and Dr. Jezewski's culture brokering model developed in the United States to create a model of advocacy for cross-cultural application. The goal is to provide nurses in both countries with a more systematic understanding of advocacy and a transcultural tool with which to practice advocacy.

Jamaica

In Jamaica, Syringa Marshall Barnett, RN, MS, director, Department of Advanced Nursing Education, University of the West Indies and clinical professor at UB has developed a contemporary nursing education curriculum at the University of the West Indies. In 1996, Eris Persson, RN, MS, clinical instructor at UB worked with Ms. Barnett to develop a more comprehensive community-based mental health system in Jamaica. Together, they introduced advanced biopsychosocial content in the psychiatric nurse practitioner program.

UNICEF, RN, PhD, clinical assistant professor at UB is chair of the Health Committee of Western New York-Jamaica Partners of the Americas and has helped to develop a program for the underserved neighborhoods of urban Buffalo similar to a program existing in Jamaica. Unemployed women in the targeted community are provided skills and employment opportunities as health care aides. The aides provide care in homes, schools, and other community-based health organizations and they link the underserved to health care delivery systems by focusing on disease prevention, health promotion, and healthy environment issues. Thus, ideas developed in Jamaica have contributed to addressing health care needs in western New York.

These global Sigma Theta Tau International efforts often take a long time to develop, but rewards are far-reaching. Opportunities abound to advance nursing practice, help governments take notice of scholarly nursing efforts, and help set national policies.

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Global Nursing Collaborations

By Marjorie A. White, RN, PhD, FAAN, professor and director, Center for Nursing Research, and a distinguished lecturer for Sigma Theta Tau

Buffalo, New York—Cross-cultural and cross-national collaboration with nursing colleagues is an exciting and challenging way to contribute to a future world civilization of healthy people. Nurses who have participated in health care in other countries or cultures know that nursing issues and problems have strong similarities. Clients, individuals, families and communities throughout the world can benefit from diverse nursing perspectives.

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Nurses in the Nordic countries now have a family assessment tool translated into each language for use in their practice. In addition, many students from other countries have benefited from the research. For example, students from Portugal, Spain, Italy, Germany and Britain attended a graduate course on family theory and research I taught at the University of Tampere, Finland during 1993, 1995 and 1997.

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Left to right: Hugiðjón Asgeirsdóttir, RN, and Marjorie A. White at Community Health Center in Iceland—a data collection site.

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ENCOURAGING SOLUTIONS

Media Research Project to Identify Challenges for Nursing

In an effort to improve understanding of nursing's portrayal in the media, Sigma Theta Tau International and the University of Rochester School of Nursing are collaborating on a research initiative designed to shed light on what has been a public relations dilemma for the nursing profession.

The Woodhull Media Relations Project is funded, in part, by a grant from Sigma Theta Tau International honorary member Louise Worner, chairman and chief executive officer of HCR in Rochester. Named for the late Nancy Woodhull, a founding editor of Rochester, the research model, the study will be incorporated into the nursing curriculum as an elective course at the University of Rochester School of Nursing this fall.

The Woodhull model has been utilized successfully in the past with studies on how both religion and women are portrayed in the media. The application of this model to nursing is significant in the current health care climate as nurses traverse traditional boundaries while assuming diverse and evolving leadership roles.

The study seeks to analyze the representation of nursing science in the media. While coverage of health care issues abound within both the print and electronic media due to common public interest, the component of nursing science and the nursing perspective is noticeably absent.

With consultation being provided by nationally-known media consultant Junior Bridge, a cross section of U.S. newspapers and health-related publications will be studied over a one-month period. Study teams, comprised of a mix of both bachelor's and master's students, will read and record all mentions of nursing as well as stories that address nursing during the study period.

Content and context will be recorded on tally sheets. Each team will report their findings at a fall seminar seminar and the data will be analyzed. Drafts of the report, which include key findings and recommendations, will be shared and debated in the seminar with the goal of reaching consensus.

Final recommendations will then be prepared for presentation to national and local media. Recognizing that the nursing profession can improve its articulation of how the science of nursing impacts health care, nursing leaders will be able to use the study's findings to build partnerships and facilitate discussions with national and local media agencies on how to better utilize nurses in their health care coverage.

Sigma Theta Tau International will take the lead by initiating a forum for this discussion at its 55th biennial convention in December 1997. A panel of national media representatives will be brought together to address the findings and recommendations, and to offer solutions on how nursing can better position itself as a critical resource for those who cover health care issues.

Further, special sessions on media training and material development will be offered to assist in study replication at the local level, and in establishing and maintaining effective media relations.

Proactively meeting the needs of its members and their profession, Sigma Theta Tau International views this research study as a ground breaking step in helping shape the image of nursing among the public it serves.

MEDIA RESOURCE TOOL

Nursing Experts Sought for Media Directory

Sigma Theta Tau International is developing a directory of nurse experts who would be willing to serve as media spokespersons for issues relating to their area of specialization. This resource directory will be widely disseminated to the news media.

If you would be interested in being listed in this directory, please send your name, title, specialty, day and evening phone numbers, fax number, mailing addresses, along with brief description of your primary area of expertise. The address is Sigma Theta Tau International, attention Paul T. Brandis, 501 West North Street, Indianapolis, Indiana, 46202.

You may also fax to 317-634-1829 or e-mail to publicists@sigttau.org.

This directory will be an important tool in providing nursing science information to credentialed media representatives around the globe.

At a homeless shelter in Buffalo, New York, Dr. Juanita Hunter, a clinical associate professor at State University of New York, provides care to vulnerable patients.

Distinguished Lecturer Program Celebrates 10-Year Anniversary

By Judy Beal, RN, DNS, and Carolyn Yucha, RN, PhD, co-chairs, Distinguished Lecturer Program

In 1987, International President Angela Barron McBride instituted the Distinguished Lecturer Program to further the society's mission of promoting leadership and scholarship. The focus of the program has been both to provide chapters with programming resources, as well as showcase excellence in the field. Over the past decade, the number of Distinguished Lecturers has grown to 118. This biannual Distinguished Lecturers are available to speak at chapter events on a variety of topics, including the history and future of nursing, models and frameworks, health policy, leadership and professional development, selected human health/illness conditions, and clinical scholarship and practice.

Daniel Pesut, RN, PhD, CS, FAAN, associate professor, University of South Carolina, says the Distinguished Lecturer Program is an effective vehicle to disseminate the extraordinary resources of Sigma Theta Tau International. His five presentations on "Future-Think," and "Creative Thinking" have been characterized as thought-provoking and timely.

Juanita Kirkland Hunter, RN, DAB, FAAN, a clinical associate professor at State University of New York at Buffalo, is noted for her research and clinical programs for the homeless. Dr. Hunter devotes one of her lectures to discussions of nursing care for the homeless. She also presents cost analysis and evaluation of health care services to vulnerable populations.

Joellen Hawkins, RN, PhD, FAAN, professor at Boston College School of Nursing, focuses on the society's 75 years of promoting leadership and scholarship. Dr. Hawkins notes that the program "folds the international organization to smaller, more isolated chapters, and to members and their families." She particularly likes informal networking with members in different regions.

International nursing scholarship is the focus of several Distinguished Lecturers' presentations. Carol Picard, RN, MS, CS, associate professor of nursing at Fitchburg State College in Massachusetts, highlights international nursing scholarship in her presentation, "Nursing in the New Russia."

Joanne Olson, RN, PhD, associate professor, Faculty of Nursing at the University of Alberta, Canada, and Sigma Theta Tau International di-rector, showcases the Sigma Theta Tau International expansion beyond U.S. borders, and traces the development of the international movement within the society.

For a copy of the complete Distinguished Lecturer Directory (cost: $8) that lists names, contact information and topics, please call international headquarters: (317) 634-8171, or call: 1-888-634-7575 toll-free in the U.S., or write: Research and Education Services, Sigma Theta Tau International, 550 W. North St., Indianapolis, IN 46202.
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ARISTA II: Actions Planned

LEADERSHIP INSTITUTE ADVISORY COMMITTEE TO PRESENT STRATEGIC PLAN

By Fay L. Bowser, RN, DNSc, FAAN, chair, ARISTA II: International Leadership Advisory Committee; past president, Sigma Theta Tau International

A group of selected health care providers, hospital administrators, insurance providers, policy makers, and educators from the U.S. and Canada examined the preferred future for the Leadership Institute. At the April 2006 summit, ARISTA II: A report of activities and recommendations was published in full 1996 and the Leadership Institute Advisory Committee subsequently met to develop a strategic plan for how these recommendations would be implemented. The recommendations were presented and supported by the Sigma Theta Tau International board of directors. The strategies for action are divided on the mission of the organization, "chartered in 1996 at State University of New York and the health care systems with it, opportunities for media train ing, and diverse membership involvement. We have attempted to illustrate the founding through documents dressed in period costumes, working as the anniversary theater. Through their portal of the founders, the history that surrounded the founding will be re-enacted. A Festschrift has been written about Virginia Henderson, this format is relatively new to nursing. Florence Nightingale died only twelve years before the 1922 Foundation celebration of Sigma Theta Tau International, continuing to embrace, and share with newer members this rich heritage. It is our hope that this event—Honoring past and present leadership—will inspire and motivate everyone for years to come. Florence Nightingale died only twelve years before the 1922 Foundation celebration of Sigma Theta Tau International, continuing to embrace, and share with newer members this rich heritage. It is our hope that this event—Honoring past and present leadership—will inspire and motivate everyone for years to come.

By Linda Fitzgerald, 1919-97 chair, 75th Anniversary Committee, and Juliana Sebastian, International vice president, 1993-96 chair, 75th Anniversary Committee

O n behalf of the 75th Anniversary Committee and the international board of directors, we are delighted to invite you to Sigma Theta Tau International's 75th Anniversary celebrations at the 56th biennial convention at the Indiana Convention Center, Dec. 2-6, 1997 in Indianapolis. Planning officially began for this historic event in 1995. When Dr. Beth Vaughan-Wood, international president, appointed a 75th Anniversary Committee to recommend strategies to commemorate this event. We spent our early meetings envisioning the purpose and goals of this special moment in Sigma Theta Tau's history. We wanted to pay tribute to early leaders whose vision, Sigma Theta Tau International, continues to embrace, and share with newer members this rich heritage. It is our hope that this event—Honoring past and present leadership—will inspire and motivate everyone for years to come. Florence Nightingale died only twelve years before the 1922 Foundation celebration of Sigma Theta Tau International, continuing to embrace, and share with newer members this rich heritage. It is our hope that this event—Honoring past and present leadership—will inspire and motivate everyone for years to come.
ARISTA II Actions Planned

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A group of selected health care providers, hospital administrators, insurance providers, policy makers, and educators from the U.S. and Canada examined the preferred future for nurses. This examination was conducted at the April 1996 summit, ARISTA II. A report of activities and recommendations was published in fall 1996 and the Leadership Institute Advisory Committee subsequently met to develop a strategic plan for how these recommendations would be implemented.

New Yorkers Gain CEUs With ARISTA

Syracuse, New York—When Sigma Theta Tau International hosted its ARISTA II conference in 1996, Daniel Pesut, RN, PhD, CS, FAAN, created a storyboard to guide go with a video on the subject. “It was whole, colorful, and specific. It had people concentrating on the mission of the organization,” said Omicron Alpha President Dr. Maggie Arends of Syracuse University. Omicron Alpha chartered in 1966 at State University of New York, Health Science Center at Syracuse, created the materials to plan the nursing leadership path.

According to Dr. Arends, changes in health care in the Syracuse community have resulted from the managed care movement. As a result, the group of professionals in the area realized the need to plan their nursing leadership paths. Nursing leaders in the area collaborated on the project, which was funded through an ARISTA II grant.

New Yorkers Gain CEUs With ARISTA

By Dr. Robin Bartelt, RN, PhD, MSN, professor and assistant professor, University of North Carolina, Greensboro School of Nursing, Sigma Theta Tau Leadership Institute

FURTHER PROFESSIONAL CAREERS

New Yorkers Gain CEUs With ARISTA


The Celebrations Begin

By Linda Fitzgerald, 1999-2000 chair, 75th Anniversary Committee, and Julann Sebastian, International vice president, 75th Anniversary Committee

Collaborations and Partnerships

Under the category of partnerships, the committee considers it important to develop a collaborative paper describing the preferred role of nursing for the future. Audiences for this collaborative paper would include multiple disciplines and health care policy and decision makers. To accomplish this, the recommendation to Sigma Theta Tau International is to convene a meeting of major nursing organizations to discuss the preferred role of nursing, with a position paper as the outcome. A task force of the Leadership Institute Advisory Committee will be appointed to pursue this as well as identify leaders in policy making positions to partner with as the preferred role is realized.

Communication

Communicating the art and science of nursing to diverse publics is essential component of nursing leadership. Multiple activities were formulated by the committee for the dissemination of knowledge and information generated by the activities of the institute. These include partnerships with existing dissemination venues in other organizations, institutions, and agencies; development of media resource information; execution of the Woodhall Melba Relations Project; opportunities for media training; and recognition of nurses who effectively communicate the science of nursing through various vehicles.

As the needs of populations continually change and the health care systems with it, opportunities for nurses abound. Constantly examining and defining the preferred role of nurses will maintain the leadership position of the profession. Sigma Theta Tau International is prepared to address these and other issues through the activities of the Leadership Institute.

Leahman Institute Advisory Committee

Fay L. Bower, RN, DNSc, FAAN, chair

Nancy Goon
Carolyn K. Davis, PhD
St. Rosemary Dooley, RN, BS, PhD, FAAN
Melanie G. Dreher, RN, PhD, FAAN
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FURTHER PROFESSIONAL CAREERS

New Yorkers Gain CEUs With ARISTA

by Linda Fitzgerald, 1999-2000 chair, 75th Anniversary Committee, and Julann Sebastian, International vice president, 75th Anniversary Committee

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Under the category of partnerships, the committee considers it important to develop a collaborative paper describing the preferred role of nursing for the future. Audiences for this collaborative paper would include multiple disciplines and health care policy and decision makers. To accomplish this, the recommendation to Sigma Theta Tau International is to convene a meeting of major nursing organizations to discuss the preferred role of nursing, with a position paper as the outcome. A task force of the Leadership Institute Advisory Committee will be appointed to pursue this as well as identify leaders in policy making positions to partner with as the preferred role is realized.

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Influx of New Virginia Henderson Fellows

Suzanne Congdon LeRoy, RNC, MSN, WHNP, of Bloomingtion, MN, is Sigma Theta Tau International’s historic 75th Virginia Henderson Fellow. Suzanne commented, “I am deeply honored to be a Virginia Henderson Fellow. I truly feel it is a privilege to become a part of the collective good works of so many before me. As a collective, the enduring humanitarian ethic that is indispensable to the profession, the general public, and the health concerns of society are the ultimate beneficiaries of the Virginia Henderson Legacy Program.”

Twenty additional members have acquired the mantle of “Virginia Henderson Fellow,” with the current number totalling 78. Distinguished new Fellows are: Ruth A. Anderson, RN, PhD, CNAA; Tracy M. Ballard, RNC, MSN, CRNP; Franklin V. Carver, RN, MSN, CNAA; Jo Ann Cassirza, RN, MSN; Kathy S. Emmert, RN, MSN, FNP; LaVerne Gallman, RN, MSN; Paul Judith Gull Gelter, RN, PhD, MSN; V. Ruth Gray, RN, EdD, MSF; Dawn Kozlowski, RN, MA, CNS; Suzanne Congdon LeRoy, RNC, MSN, WHNP; Russell C. McGuire, RN, MSN, Kathryn Mershon, RN, MSN, CNAA; Karen H. Morin, RN, PhD; Karen A. Neatherlin, RN, PhD, CNOR; Elaine F. Nicholas, RN, EdD; Ellen L. Palmer, RN, PhD; Carolyn E. Rammel, RN, PhD, CNOR; Betty Thomas, RN, MSN, CNAA; Theresa M. Vallia, RN, EdD; and, Robert Wilkinson, RN, MSN, MBA, CRNP.

More than one-half of the 78 Fellows have enrolled under the Virginia Henderson Legacy Program, which is patterned after life insurance and is extraordinarily cost-effective. Recognition is based upon the future value of the gift as it accumulates interest over time. For example, a 30-year old member invests only $800 per year for five years—a total of $4,000—and is named a Virginia Henderson Fellow. Members 60 years of age and older contribute only $1050 over five years to become fellows.

Members may also become Virginia Henderson Fellows through bequests in wills, life insurance, and other planned giving vehicles. High tea, hosted by Dr. Billye Brown, planned giving chair, are being held in Dallas and Houston, TX, and Palm Springs, CA, in September to explain the Legacy program. Those interested in attending or securing information are invited to contact Marilyn Enik, Development Department Coordinator, at 888/634-7575.

Virginia Henderson Fellows will be honored at the convention Tribute Luncheon on December 5, the 75th Anniversary Campaign celebration on December 5, and the black-tie (optional) Heritage Society dinner on December 6. Elegant Virginia Henderson Fellow pins will be presented to the Fellows at the luncheon.

Participating in a May luncheon in Indianapolis were (l-r) Billye Brown, Joyce Sylva Krothe, Joannita Ladig, Mary Fisher, and Phyllis Neogarsh Stern.

Endowment Goal Surpassed for Virginia Henderson Clinical Research Award

The endowment goal for the Virginia Henderson Clinical Research award has been surpassed. More than $51,000 has been received to permanently endow the prestigious grant. The first research award, in the amount of $5,000, will be presented at the upcoming biennial convention. We thank Virginia’s friends and colleagues for embracing the special campaign honoring this beloved nursing legend.

Theta-At-Large Celebrates by Contributing $7,000

The seventh Sigma Theta Tau chapter to be formed, Theta-At-Large, comprised of Boston University, Curry College Division of Nursing Studies, and Simmons College Department of Nursing and Graduate Program in Primary Health Care, is contributing $7,000 to commemorate the 75th anniversary and its historic and prominent position in the evolution of the society. “We are delighted to give $7,000 in honor of our status as Sigma Theta Tau’s seventh chapter,” affirms Patrice Nicholas, chapter president. "We are invest­ing in the future of Sigma Theta Tau Interna­tional and the future of Theta chapter.”

Chapters and regions demonstrating exce­ptional commitment to the 75th Anniversary Campaign will be recognized at the biennial con­vention. Awards will be presented to chapters with the highest percentage of members contributing, highest average member gift, and largest chapter gift. The regions with the most Virginia Henderson Fellows, highest average chapter gift, and high­est percentage of members contributing will also be honored.

The goal is 100 percent chapter participation, at the level best suiting each chapter’s circumstances.
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In 1997, 78 members, 6 chapters, foundations, corporations, nursing groups and other friends of nursing are helping to conclude the historic campaign. The society deeply appreciates recent generous gifts and pledges from the Gold coolant Foundation, Inc., Indiana Energy Foundation, Farm Bureau Insurance, and Hall, Render, Killian, Health & Lyman, all headquartered in Indianapolis.

Approximately $6.5 million has been secured in the 75th Anniversary Campaign, according to Campaign Chairs Rosemary Berkel Crip, Dr. Leighton Clapp, and Dr. Glenn Irwin. Members, chapters, foundations, corporations, nursing groups and other friends of nursing are helping to conclude the historic campaign.

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75th Anniversary Campaign: Only $1 Million More to Go!

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A CALL TO SERVE

Nurses of all Nations Needed for Committees

By Eleanor J. Sullivan, RN, PhD, FAAN, president elect, Sigma Theta Tau International: professor, University of Kansas School of Nursing

Dr. Sullivan, second from left, actively seeks input and member involvement at the local, regional, and international levels.

I ndianapolis, Indiana—to the necessity of nursing knowledge increases throughout the world, and more is expected and desired from our profession, it is becoming critical that Sigma Theta Tau respond to these new demands. Our organization is uniquely qualified to meet these expectations because our members are a driving force behind raising standards of nursing care and supporting scientific-based care throughout the world. The society’s strong international committees, with talented leaders, have helped disseminate the knowledge needed to improve care. It is crucial that this momentum continues.

As I assume the presidency of Sigma Theta Tau International for the 1997-99 biennium, I invite you to join me by lending your much needed expertise to the society through international and regional committees. Members of all nations and cultural backgrounds, at all educational levels and from all practice settings are needed to keep advancing the state of the science through the world. At a time when advanced technologies have built an increasingly connected world, worldwide participation is now possible. It is my commitment to have multiculturally involved in all our endeavors. Please accept this opportunity.

For your convenience, a complete list of opportunities follows. We encourage you to photocopy and complete this page. Attach a one-page biographical summary (no curriculum vitaes, please) indicating the area of expertise that qualify you to serve in the desired capacity. Please indicate your interest by checking the appropriate opportunity and return the form below by fax: 317-654-8188, or mail: Sigma Theta Tau International, 550 West North Street, Indianapolis, Indiana 46202, USA (attention Sandy Abe). For information, please call 317-654-8171, or call toll-free: 1-888-654-7755 in the USA.

REGIONAL COMMITTEE MEMBER OPPORTUNITIES:

- Awards: Coordinates the processing/issuing of regional awards; serves as a resource for chapter awards development.
- Electronic Communications: Encourages/facilitates the establishment of electronic communications within and among chapters; serves as an informatics resource.
- Newsletter Communications: Serves as editor of Committee newsletter, the regional newsletter, and as a resource for chapter newsletter development.
- Mentoring: Initiates/facilitates chapter mentor relationships within the region; serves as a resource to chapters developing mentoring programs.

Nurses gathered at the world’s largest shopping mall in Canada to provide blood pressure checks.

By Dianne Godkin, RN, MN, Public Relations Officer, Faculty of Nursing, University of Alberta; Sigma Theta Tau International Leadership Edumit to International Research Committee

Nursing Research Expands Public Information Web

E dmonton, Canada—When your chapter funds a nursing research project, what happens to the findings? Do you share the results with members of your chapter, colleagues at your affiliated university or college, nurses in your community, the public?

The most popular methods for disseminating nursing research are to present papers at conferences and submit manuscripts to peer-reviewed journals. In these ways, nurse researchers inform colleagues about findings in their content area. However, there are incentives to this approach.

By targeting only colleagues in similar content areas, you are likely to miss interested patients, clinical nurses, health professionals in other fields, funding agencies, philanthropists, and the general public are missed. Informing multiple audiences about your nursing research can yield many and varied benefits.

The opportunity to promote nursing’s positive, scientific image is yours to develop. The general public is often unaware that nurses conduct their own research, or that they develop new nursing knowledge that may be relevant to them or someone they know.

In Canada, a changing health care system along with decreasing student enrollment and diminished government funding has heightened nurses’ outreach and communication activities. Several universities have established “Visiting Committee Programs” whereby a group of community leaders are invited to spend the day with a specific nursing faculty and participate in health care activities and discussions. The main objectives are to share information, establish personal contact and exchange ideas with community leaders. At the University of Alberta in 1995, individuals attended from the media, business, arts and special interest groups.

As a result of this endeavor one television station featured stories about two faculty members’ research. In addition, one visitor established a scholarship to support a student interested in neonatal nursing research. “We had no idea nursing was doing this kind of work,” wrote a visitor on an evaluation form. This is a common and expected evaluation.

The following year, the Faculty of Nursing began an innovative, colorful initiative once a month on Saturdays at the world’s largest shopping mall, West Edmonton Mall. Students and faculty staff a booth, provide blood pressure checks and opportunities for discussions with shoppers. Promotional materials about faculty research are provided. In the first 8 months, approximately 400 consumers spoke with nurses. They lived both near and far—from Thailand, Australia and Europe.

Via the Faculty of Nursing’s home page on the World Wide Web, virtual conferences are taking place with people around the world who wish to discuss nursing research. One of the University of Alberta’s earliest successes with knowledge dissemination has been with the Sigma chapter’s cosponsorship of the Margaret Scott Wright Research Day, an annual event that draws approximately 500 nurses and nursing students from the community. This event, with international recognition, speakers, showcases research posters, oral presentations, and published abstracts.

Traditional print resources continue to have the greatest effect for communicating with the public, whether publishing in lay journals and newspapers, or appearing on television and radio. Resources to help you increase your media coverage are listed below.

To increase the effectiveness of nursing research and research-based practice, individual Sigma Theta Tau chapters throughout the world might emulate the unique, venturesome art of a spider. Each species spins distinctive webs, supported by strong threads radiating in a multitude of directions from the center.

Nurses of all nations and cultural backgrounds who are striving to improve the health care of communities are challenged to share their knowledge that may be relevant to them or some­one else. What happens to the findings? Do you share the results with members of your chapter, colleagues at your affiliated university or college, nurses in your community, the public?

For help planning research dissemination and public relations strategies, consider the following reference list:

Gordon, Sigma Theta Tau, Sigma Theta Tau International.
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INTERNATIONAL VOLUNTARY OPPORTUNITIES:

- Bylaws Committee: Reviews chapter bylaws for compliance; identifies chapter and society bylaws changes.
- Development Committee: Seeks sources of funding and establishes a means of fund raising to achieve the society's goals.
- Eligibility Committee: Investigates questions relating to the eligibility of members and petitioning honor societies.
- Finance Committee: Recommends the annual and biannual budgets; reviews and recommends the society's financial policy, guidelines and fee structure changes.
- Heritage Committee: Recommends policies related to archival maintenance and utilization of the society's archives.
- Library Committee: Oversees the Sigma Theta Tau International Library services and resources.
- Program Planning Committee: Plans and oversees educational programs for the biennial convention and other scholarly programs of the society.
- Public Relations Committee: Oversees the integration of internal and external communication; advises on the awards selection and presentation process and the society's displays.
- Sub-Committees: Awards Sub-Committee; Exhibit Sub-Committee; Communication "How-To's" Sub-Committee; Protocol Sub-Committee
- Publications Committee: Oversees the society's scholarly publications.
- Editorial Reviewers for Abstracts and Grant Proposals: Assists in review and selection of abstracts and grant proposals.
- Bylaws Committee Arrangements Committee (San Diego, California - November 6-10, 1999) Assists with convention planning and onsite activities.
- Consideration for 1999 Balfour

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Nurses of all nations and cultural backgrounds who are striding to improve the health care of their communities have built an increasingly connected world. Scientific values are finding themselves now at the hub of change. On behalf of the International Research Committee, I invite the chapters of Sigma Theta Tau to engage in information sharing.

For help planning research dissemination and public relations strategies, the following reference list:

WELCOME TO THE HOME OF THE ‘97 BIENNIAL CONVENTION:
Indianapolis - Heart of Brightness

INTERNATIONAL CENTER FOR NURSING SCHOLARSHIP

International Center for Nursing Scholarship

Indianapolis Zoo

Indianapolis Zoo is a premier zoo in the heart of downtown Indianapolis. It features over 2,000 animals, including more than 200 species of reptiles, birds, and mammals. The zoo also includes an aquarium, a children's zoo, and a zoo train. Admission is $20 for adults, $15 for seniors, and $10 for children.

Eiteljorg Museum of American Indians and Western Art

The Eiteljorg Museum is one of the top attractions in Indianapolis. It houses one of the largest collections of American Indian and Western art, including paintings, sculptures, and artifacts. The museum also features exhibits on the history of the American West and the lives of Native Americans.

Circle Centre Mall

The Circle Centre Mall is a popular shopping destination in Indianapolis. It features over 150 stores, including Macy's, Nordstrom, and Saks Fifth Avenue. The mall is also home to a variety of restaurants and entertainment options.

Christmas Tree Lights, Horse-Drawn Carriages

The Indianapolis Symphony Orchestra

The Indianapolis Symphony Orchestra is one of the top orchestras in the United States. It performs at the Hilbert Circle Theatre, located in the heart of downtown Indianapolis. The orchestra performs a wide variety of classical music, including symphonies, chamber music, and contemporary works.

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For more information, please visit our website at indymuseum.com.
Welcome to the Home of the '97 Biennial Convention:
Indianapolis - Heart of Brightness

International Center for Nursing Scholarship
550 West North Street
The home of Sigma Theta Tau International's headquarters, give tribute to international nursing, including the campus of Indiana University-Purdue University of Indianapolis. Dedicated by pillars of knowledge that frame glass portals, the Center stands as a monument to nursing in its best. During the 55th Biennial Convention, special tours will be held Tuesday and Wednesday, Dec. 2-3, from 6:30 p.m. to 8:30 p.m. The center provides an opportunity for tours of the center with tours of the center being held each hour. We invite you to visit the center for more information. Call 1-800-634-7575 toll free in the U.S. or 317-634-8177.

Madame Walker Urban Life Center
1600 North Meridian Street
People of all nations enjoy touring this historic center of African American culture and art. It is located directly across the street from Sigma Theta Tau International. The restored theater and area is historically known for its jazz artists, and it continues this tradition, featuring concerts year round. For tours of the center call the African American female reflective, cosmetic tycoon Madame CJ Walker in the last century. Call (317) 250-2901.

Indianapolis Zoological Society
1200 W. Washington Street
An environmentally kind, natural habitat makes this one of the nation's most spectacular zoos for scientists and animal lovers dedicated to preservation. Just west of the Eiteljorg Museum and a two-minute drive from the convention center, the zoo operates across 64 acres. It is open all year and features the popular dolphin show that begins daily at 2:15 p.m. Admission Adults, $8; Children 2-12, $5.50. Seniors, $6.50. Call: (317) 630-2001. Hours: Weekdays 9 a.m. - 5 p.m., Weekends 9 a.m. - 6 p.m.

Eiteljorg Museum of American Indians and Western Art
430 W. Washington Street
The Eiteljorg Museum maintains one of the finest national collections of Native American and Western art, touching sublime and earthy wonders through its paintings, artifacts and bronze. Within three blocks of the convention center and three blocks from Sigma Theta Tau International headquarters, the Eiteljorg is recognized by its Southwestern adobe architecture and outdoor leaping deer bronze. Collections include works of Georgia O'Keeffe, Frederic Remington, Charles Russell and members of the original Taos art colony of New Mexico. Exhibits, films, and the museum store are open daily. Admission: Adults $5; Seniors $4; Children ages 5-17 and full-time students: $2; Toddlers admitted free. Daily public tours are at 2 p.m. Call: (317) 630-0802.

Circle Centre Mall
49 West Maryland Street
49 West Maryland Street
Whether searching for gourmet chocolates, or trendy designer fashions, Circle Centre Mall graciously wraps its square glass structure around downtown Indianapolis. Holiday lights are easy to find with glass-enclosed walkways that take you from hotel to elegant department stores like Nordstrom's and Patina, and 100 specialty shops. Enjoy nightclubs, live dining, może, a food court, cafes and $1 parking. It is also connected by skywalks to the Indiana Convention Center and downtown hotels. Circle Centre Mall information: (317) 640-8800. For more listings at United Artists Entertainment Complex on the Circle Centre Mall's South Roof, call 237-6496.

The Indianapolis Symphony Orchestra
45 Monument Circle
The Indianapolis Symphony Orchestra, with 87 musicians under the direction of Raymond Leppard, performs in concert each week at Hilbert Circle Theatre, in the heart of downtown across from Soldiers' and Sailors' monument. Concerts are conducted weekly. For current programs call (317) 639-4390.

Christmas Tree Lights, Horse-Drawn Carriages
The colorful tree of lights on Monument Circle forms what has become known as the world's largest Christmas tree. A brilliant cascade of lights on Soldiers' and Sailors' Monument in the heart of downtown on Monument Circle decorates Indianapolis from late November to the New Year. A stroll along the circular brick avenue is one of the loveliest rituals to take to celebrate the season. Offer, enjoy riding a horse and carriage with friends from 7 p.m. to midnight. Carriage services are provided on Washington Street at Meridian, or at the Hyatt Regency at South Capitol. The Soldiers' and Sailors' Monument, created in 1902, of Mina Vernon feature stones historical and mythological sculptures in tribute to fallen soldiers. To reserve carriages, call 30 days in advance during this popular season. Blue Ribbon Carriages (317) 651-4619, Colwell Carriages (317) 657-2004, Yellow Rose Carriages (317) 654-1900.

The Children's Museum
300 North Meridian Street
This is the largest children's museum in the world, and it also has the nation's first Children's Museum, free-of-charge, may be reserved for a two-minute tide. It is open all year and features historical and mythological sculptures in tribute to fallen soldiers. To reserve carriages, call 30 days in advance during this popular season. Blue Ribbon Carriages (317) 651-4619, Colwell Carriages (317) 657-2004, Yellow Rose Carriages (317) 654-1900.

The Children's Museum
2000 N. Meridian Street
Explore the world's most famous auto racing track, displays of winning cars, brilliant engine design and legends behind the fastest cars. Call (317) 464-6475.

Indianapolis Motor Speedway Hall of Fame Museum
4970 W. 16th Street
Explore the world's most famous auto racing track, displays of winning cars, brilliant engine design and legends behind the fastest cars. Call (317) 464-6475.

For information on exhibits, sponsorships & advertising, contact Kathy Bennison 1-888-634-7575 U.S. toll free or via e-mail: bennison@3rd-sum.kapnrtl.edu

As of 5/97

"Early Bird Exhibitors"

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American Nurses Association
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Bothwell Regional Medical Center
Boston College of Nursing
Brigham Young University College of Nursing
Capital University School of Nursing
CINAHL Information Systems
Clairinsi Health (Methodist, IU, Riley)
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University of Cincinnati College of Nursing and Health
University of Connecticut School of Nursing
Univ. of Florida College of Nursing & Alpha Theta Chapter
University of Kansas
University of Maryland School of Nursing
University of Michigan School of Nursing
University of Minnesota Medical Center
The University of Texas at Arlington School of Nursing
University of Idaho College of Nursing
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University of Michigan School of Nursing
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The University of Texas at Arlington School of Nursing
University of Idaho College of Nursing
Wayne State University College of Nursing

For information on exhibits, sponsorships & advertising, contact Kathy Bennison: 1-888-634-7575 U.S. toll free or via e-mail: bennison@3rd-sum.kapnrtl.edu
AUSTRALIA
Carol Anne McVeigh, RGN, ANMC (U of Western Sydney Macarthur), postgraduate studies coordinator for Nursing at the University of Western Sydney, was awarded a $45,000 postgraduate scholarship from Australia. She recently became the first midwife to receive a PhD from within the University of Wollongong's Division of Nursing.

CANADA
Jane Drummond, RN, PhD, Sigma (U of Alberta), associate professor at the University of Alberta Faculty of Nursing, was awarded $100,000 from the university's Learning Enhancement Envelope to develop "A Virtual Learning System for Development of Family-Centered Practice."

Madeleine Ruth Elliott, RN, PhD, Sigma (U of Alberta) and Alpha Eta (U of California), professor at the University of Alberta Faculty of Nursing, was awarded a $100,000 grant from the Alberta Heritage Foundation for Medical Research. Her project, funded by the Research Innovation Fund, for a project entitled "Innate Psychosocial Risk and Their Caregivers: A Comparison of Two Community-Based Early Intervention Strategies: (0-5 years)."

NORWAY
Kin Nicolaysen Holbek, RN, BSN, Delta Omicron (Purdue University), director and senior counselor of admissions at Ayder College with 65,000 students in Kristiansand, is involved in furthering the American Association of Colleges of Nursing's international network, connecting on European and Eastern European nations. She was part of the University of Purdue's Visiting Scholar Spring 1996 Program.

SOUTH AFRICA
Marie Poggensepp, RN, PhD, Mu Sigma (Oral Roberts University) is editor of Health SA Gesondheid (Health SA). She is a member of the University of Stellenbosch's Faculty of Health Sciences and a member of South Africa's Interim Nursing Council.

SOUTH KOREA
Teo Shin Hong, RN, MS, EdD, Lambda-Alpha-at-Large (Seoul National University), dean of Seoul National University of College of Nursing, has been awarded the University of Minnesota's Outstanding Alumnus Award.

UNITED STATES OF AMERICA
California
Jeanette Bondoff, RN, MSN, Gamma Lambda-Upsilon-at-Large (U of California), administrative director of surgical services at Scripps Mercy Hospital and at Scripps Green, La Jolla, California, has been installed president of the Association of Operating Room Nurses, Inc.

Colorado
Linda U. Krebs, RN, PhD, AOCN, Omega-Kappa-at-Large (U of Colorado), nursing oncology program director at the University of Colorado Health Science Center, Denver, has been elected president-elect of the Oncology Nursing Society Board of Directors to serve from 1997-98.

Hawaii
Duane D. Walker, RN, MS, DNP, Gamma Pi-at-Large (U of Hawaii), vice president of patient Services and Chief Nursing Officer at The Queen's Medical Center in Honolulu, is the first person from Hawaii to receive the American Organization of Nurse Executives' Nurse Executive Leadership Award.

Indiana
Jane Backer, RN, DNS, Alpha (Indiana University-Purdue University Indianapolis), has been promoted to associate professor with tenure at the Indiana University School of Nursing. Sandra Burgeurger, RN, PhD, Alpha Lambda (U of Illinois), assistant professor at Indiana University-Purdue University Indianapolis, has been promoted to associate professor with tenure at the Indiana University School of Nursing.

Maryland
Patricia A. Abbott, RN, MS, MSc, P (U of Maryland), project manager at the Geriatric Research Education Clinical Center at the Baltimore Veterans Affairs Medical Center, has been appointed consultant in Clinical Research Education and Health Policy and Informatics.

Missouri
Eileen Porter, RN, PhD, Alpha Iota (U of Missouri-Columbia), has been awarded $580,000 by the National Institute of Nursing Research for a five-year study on the experience of older widows.

New Hampshire
Nancy Denners, RN, MSN, Epsilon Tau (Saint Anselm College), professor for New Hampshire Community Technical College, received an international award sponsored by the St. Albans Development Company for the state of Vermont, which recognizes occupational achievement in program development. She is also a mission board member of the volunteer humanitarian health care outreach program by Safari Club International.

New York
Diana J. Mannon, RN, PhD, Epsilon (New York University), producer and moderator of "Healthlines," a weekly series on health, health care, and health policy on WBAI Pacifica Radio in New York City, has received the 1997 Achievement Award of Excellence in Nursing from the National Association of Community Health Centers for her program on the pros and cons of proposals to lengthen the hospitalization stays.

Pennsylvania
Susan Albrecht, RN, PhD, Eta (U of Pittsburgh), associate professor at the University of Pittsburgh School of Nursing, has received a $1.2 million grant from the National Institute of Nursing Research to study interventions that may be implemented by nurses in schools or clinics.

Ohio
Gene Anderson, RN, PhD, Alpha Mu (Case Western Reserve University), associate professor at Case Western Reserve University, has received $1.1 million from the National Institute of Nursing Research to study healthy premature infants and their mothers at University Hospitals of Cleveland.

Tennessee
Colleen Conway-Welch, RN, PhD, Iota (Vanderbilt University), dean at Vanderbilt University School of Nursing, has been elected to the Equinox Health Group board of directors, which operates acute-care hospitals and health care systems nationwide.

Texas
Janet Backer, RN, MS, Mu Sigma (St. Louis Children's Hospital), has been named dean of the University of Missouri-St. Louis School of Nursing.

Virginia
Malcolm B. Harkins, RN, BSN, Lambda Mu Iota (U of Tennessee), was a member of Religious of Mercy, St. Louis Regional Community and became Sister Mary Elizabeth of Southern Mississippi, died Dec. 15, 1996.

Washington
Mona Sheldon, RN, PhD, Eta (University of Washington), professor at the University of Washington School of Nursing's associate dean for research.

IN MEMORIAM
Families have notified Sigma Theta Tau of the loss of these nursing educators:

Margaret Woods Allen, Alpha Iota, U of Missouri-Columbia, associate professor at the University of Missouri-Columbia, died Dec. 15, 1996.

Nelson Donelly, RN, PhD, Mu Sigma (University of South Dakota), associate professor at the University of South Dakota College of Nursing, died March 15, 1997. She was a member of the first female member of a religious order to be named administrator of a nursing school at a rate supported institution of higher learning. She was the founding dean of the University of South Dakota School of Nursing, which was the first baccalaureate nursing program in nursing in 1956, which became the second baccalaureate program in the state. She retired from her position in 1981, remaining as a member of the faculty of the university. She was named in her honor. She was a member of the American Academy of Nursing, one of 26 nurses chosen in 1973. She was president of the Missouri Nurses Board of Examination and Registration from 1975-75 and president of the Missouri Nurses Association from 1964-67. Memorial plans may be made to either the Missouri Nurses Foundation, P.O. Box 100, St. Joseph, MO 64502-0100, or to the Dr. James H. Popper Nursing Scholarship Fund, Magee College, Magee, MO 65265-0002, or to Sigma Theta Tau International, 12600 North Lindbergh Blvd., Saint Louis, MO 63123-6699.


Jesse Marie Pepper, RN, Alpha Lambda (U of Pittsburgh), died March 19, 1995. She was a professor and chairman of the Department of Nursing at the University of Minnesota, as well as a member of the American Academy of Nursing, one of 26 nurses chosen in 1973. She was president of the Missouri Nurses Association from 1975-75 and president of the Missouri Nurses Association from 1964-67. Memorial plans may be made to either the Missouri Nurses Foundation, P.O. Box 100, St. Joseph, MO 64502-0100, or to the Dr. James H. Popper Nursing Scholarship Fund, Magee College, Magee, MO 65265-0002, or to Sigma Theta Tau International, 12600 North Lindbergh Blvd., Saint Louis, MO 63123-6699.

Mary Opal Wolaniak, BSN, University of Arkansas, and Delta Omicron, University of Texas, died May 24, 1997. She was the recipient of the Edith Moore Copeland Memorial Award, awarded in 1987. She was most known for her research, and writing on early detection of breast cancer, which has stimulated awareness by health care providers both nationally and internationally. She contributed as a post-graduate nursing colleague at the Force Village in San Antonio, Texas, until her death. Her family has requested memorial contributions be directed to Friends Home, Air Force Village II, San Antonio, Texas, USA.

low fat cookbook for Your Life II, Keepsake Cookbooks Fundaco Printers, Savannah, Tenn.

Carrie Leung, BSN, PhD, Epsilon Sigma (East Tennessee State University), president and owner of Graceful Position Systems, has been appointed to Poeoung Worth Chairman of Excellence at the University of Memphis School of Nursing in Memphis.

Nancy Woods, RN, PhD, Pi-at-Large (U of Washington), assistant professor at Pacific Lutheran University in Tacoma, has been awarded the University of Washington School of Nursing Excellence Award for "his inspirational and artful teaching of nursing science."

Carrie Leung, BSN, PhD, Epsilon Sigma (East Tennessee State University), president and owner of Graceful Position Systems, has been appointed to Poeoung Worth Chairman of Excellence at the University of Memphis School of Nursing in Memphis.

low fat cookbook for Your Life II, Keepsake Cookbooks Fundaco Printers, Savannah, Tenn.
The text contains information about various award recipients and their achievements. It includes names, affiliations, and roles of these recipients. The text is divided into sections such as outcomes and South Korea, family-centered care in the Eastern European nations, the Family-Centered Program of Wollongong's Division of Nursing, and contributions of nursing scholars. The text also mentions recipients of scholarships from the University of Akron, the University of Missouri, and the University of Pittsburgh. There are references to the University of Nebraska and the University of South Carolina, among others. The text concludes with a list of the American Nurses Association's Board of Directors for 1997-1998.
CHAPTER

TEN YEARS

Theta Beta (1986)-University of Mississippi School of Nursing
Theta Gamma (1986)-Brar Cliff
Theta Theta (1986)-Capital University
Theta Xi (1986)-University of Central Florida School of Nursing
Theta Zeta (1986)-Bloomsburg University
Theta Delta (1986)-Auburn University School of Nursing

IOTA

Gamma Alpha (1976)-Loma Linda University
Gamma Beta (1976)-Howard University
Gamma Zeta (1976)-University of North Carolina at Greensboro

25 YEARS

Zeta (1934)-University of Minnesota
Alpha Lambda (1966)-University of Chicago
Alpha Nu (1966)-Villanova University
Alpha Omicron (1966)-Saint Xavier University
Alpha Sigma (1966)-Seattle University
Alpha Kappa-At-Large (1966)-University of Colorado Health Sciences Center

Beta Zeta (1972)-University of Massachusetts, Amherst
Beta Chi (1976)-Northwestern State University Division of Nursing

66 YEARS

Alpha (1922)-Indiana University
Eta (1946)-University of Pittsburgh
Zeta (1986)-Oakland University
Alpha Sigma (1966)-Saint Xavier University
Alpha Nu (1966)-Villanova University
Alpha Lambda (1966)-University of Chicago
Alpha Kappa-At-Large (1966)-University of Colorado Health Sciences Center

50 YEARS

75 YEARS

Alpha (1922)-Indiana University
Eta (1946)-University of Pittsburgh
Zeta (1986)-Oakland University
Alpha Sigma (1966)-Saint Xavier University
Alpha Nu (1966)-Villanova University
Alpha Lambda (1966)-University of Chicago
Alpha Kappa-At-Large (1966)-University of Colorado Health Sciences Center

20 YEARS

Beta Alpha (1976)-Northern State University Department of Nursing
Beta Phi (1976)-Pennsylvania State University School of Nursing
Beta Gamma (1976)-Howard University
Beta Zeta (1972)-University of Massachusetts, Amherst
Beta Chi (1976)-Northwestern State University Division of Nursing

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Theme: "Nursing Research for A Changing World"

Deadline:
Abstract Submission: September 15, 1997 (postmarked*)

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To receive a copy of the submission guidelines contact Sandy Redderjohn at sandyr@nithl-sun.iupui.edu or fax: 317-634-6186

European Abstract Submission Guidelines:
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Head, Department of Nursing Science
University of Utrecht
Congress Office
P.O. Box 80125
3508 TC Utrecht
The Netherlands
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