Announcing the

Rory Meyers
College of Nursing

COLLEGE RECEIVES HISTORIC GIFT OF $30 MILLION

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GREETINGS FROM DEAN EILEEN SULLIVAN-MARX

NYU

Friends,

What an exciting beginning to this year it has been!

As you are aware, in April NYU accepted a gift of $30 million from NYU Trustee Howard and his wife, Rory Meyers—the largest gift ever to an established school of nursing in the history of nursing education. Three-quarters of the gift—$22.5 million—will be endowed as a fund for scholarships to low-income, first-generation college-goers with strong academic records. The remainder will support our rigorous research and faculty recruitment programs. In recognition of the Meyer’s generosity, the school has since been re-named the NYU Rory Meyers College of Nursing.

Named in honor of Rory—beloved wife, mother, nurse, and dedicated philanthropist—NYU Rory Meyers College of Nursing will train first-generation college students to become leaders in healthcare. As the endowment reaches maturity, each year it will enable at least ten of our traditional undergraduate students to obtain a truly debt-free education—tuition, room, and board included.

There are so many wonderful things to celebrate in this gift. First, what a thrill that our College is now named after a nurse! I am also so pleased that the generous support of our undergraduate scholars will enable them to seek advanced degrees without having to worry about burdensome student loans. In addition, the opportunity for faculty members to pursue research and scholarship in a global world challenged by health disparities, poverty, chronic illness, and the effects of aging, will be invaluable both to the field and society at large. Thank you, Rory and Howard!

In this issue, we are proud to highlight the successes of DNP alumna, Jennifer Kim ’15, whose capstone project reduced hospital readmissions from long-term care; the generosity of alumna Ruth Teitler ’51, who at 98 established a new scholarship for our undergraduate students; and the innovation proposed by faculty members Mary Jo Vetter, Beth Latimer, and Winslow Burleson. We also acknowledge the Center for Drug Abuse and HIV/AIDS Research (CDUHR) for its contributions to ending the HIV and hepatitis-c epidemics among injection drug users as well as celebrate the 20th anniversary of the Hartford Institute for Geriatric Nursing.

As I move about our new building, I am awestruck at the energy and vitality with which people are embracing our new name and with it a renewed sense of purpose. It is thrilling to be a part of NYU Meyers these days. Please join us during this exciting time with your own engagement, curiosity, and spirit as we shine and forge ahead.

Eileen M. Sullivan-Marx, PhD, RN, FAAN
Dean & Erline Perkins McGriff Professor
Entrepreneurship vs. Intrapreneurship: Why nurses must be entrepreneurial and intrapreneurial leaders

HIV and HCV Prevention and Care of People Who Use Drugs

Interprofessionalism: How best to deliver high-quality, effective, patient-centered care

Looking Back: Hartford Institute for Geriatric Nursing celebrates 20 years
Palliative Care Panel Discussion and Reception
Wednesday, June 8, 2016

Leadership Circle Reception
Thursday, June 9, 2016

American Cancer Society’s Making Strides Against Breast Cancer Walk in Central Park
Sunday, October 16, 2016

NYU Alumni Day
Saturday, October 22, 2016

NYU Reception at AAN Conference, Washington, DC
Saturday, October 22, 2016

Winter Valedictory Breakfast at the Metropolitan Pavilion
Tuesday, December 20, 2016
In April, NYU announced a gift of $30 million from Howard and Rose-Marie “Rory” Meyers to the College of Nursing, the largest gift to an established nursing school in history.

Three-quarters of the gift—$22.5 million—will be endowed as a fund for scholarships for low-income, first-generation college attendees with strong academic credentials, with the remainder to be used for academic and faculty support. As the endowment grows, it will enable at least ten traditional undergraduate students to obtain a debt-free education—tuition, room, and board included—without being saddled by student loans or having to miss out on the on-campus college experience, a time for immense personal growth and reflection.

In recognition of the Meyers’ generosity, the school has since been renamed the NYU Rory Meyers College of Nursing in honor of Mrs. Meyers, who is a nurse and was the first in her immediate family to go to college. Mr. Meyers—a 1964 graduate of NYU’s Stern School, an NYU Trustee, and a member of the Stern School’s Board of Overseers—is chairman and CEO of Quexco Inc.

The Meyers’ gift is the largest donation to date for undergraduate scholarship aid to NYU’s Momentum Campaign which aims to raise $1 billion for scholarships. The campaign has now raised more than $565 million. “I am not certain I have ever been involved in a philanthropic gift that is more fitting and, indeed, more loving than this,” said NYU President Andrew Hamilton. “In honoring Rory in this fashion, the Meyers family in a single act strengthens a noble profession; makes a nursing degree affordable to those with great talent and modest means; supports academic excellence at NYU’s nursing college; and, most importantly, honors Rory’s life as a nurse for all time. Thanks to Rory and Howard Meyers’ generosity, generations of new students will join the profession, helping to alleviate not just patients’ suffering, but also the profession’s shortage. NYU is very grateful to the Meyers for their generosity and for their faith in the College of Nursing.”

Eileen Sullivan-Marx, dean of the College of Nursing, echoed Hamilton’s feelings. “This transformational gift is thrilling for our students, alumni, faculty, and the entire newly named Rory Meyers College of Nursing,” she said. “We are immensely grateful for the confidence and support that this scholarship funding will bring to us for students most in need, enabling us to catalyze our efforts to further our research, education, and service to society. I love that Rory Meyers is a nurse and that her family sought to honor her by naming an established leader among schools of nursing.”

“We know what it is like to be the first in your family to go to college,” said Rory and Howard Meyers upon announcing this historic gift. “It’s wonderful, but there can be a lot of challenges, especially financial. We couldn’t be happier that our gift and the creation of the Rory Meyers Nursing Scholarship Fund will fulfill the dreams of many young people who might otherwise not have pursued a nursing degree, and all that goes with it—personal accomplishment, family pride, and most of all, a professional career focused on caring for those in need. The Meyers Family is especially honored that the Nursing College will be named after Rory, who has always taken great pride in her chosen profession, and particularly glad to think of all the students this gift will assist for years and years to come.”
Estelle Osborne
NURSE, ACTIVIST, LEADER

By Jessica Orozco

Each year, the College recognizes an African American nursing alumna or alumnus who has continued Osborne’s legacy by advancing the professional development of their colleagues at a ceremony in his or her name. This year’s honoree and keynote speaker was Nellie Carter Bailey, for her outstanding work with students and her community at SUNY Downstate.

“Nellie Carter Bailey is a true leader—in Estelle Osborne’s mold—and we salute her commitment to promoting excellence and providing outstanding leadership and support to her nursing program, to her profession, and to her community at large,” said Sullivan-Marx.

Since 1981, Bailey has been associate professor and associate dean for undergraduate programs at SUNY Downstate Medical Center College of Nursing. She teaches in the undergraduate program and serves as preceptor for graduate nursing students. Bailey is an American Nurses Credentialing Center certified clinical nurse.

“Estelle Osborne’s fight to eliminate exclusionary practices in nursing occurred during a time when rigid patterns of segregation and discrimination in nursing education and employment for blacks existed across this country,” said Eileen Sullivan-Marx, dean of the College. “Working tirelessly for 43 years, Osborne was steadfast in her efforts to ensure that future black nurses would have the opportunity to gain the experience and education needed to rightfully become the nursing leaders of the future.”


With the event, its 25th annual, was held on February 24. More than 100 guests
attended at the Kimmel Center, and a jazz band from Steinhardt’s music department came to perform.

The Estelle Osborne Legacy Celebration also represented the formal kick-off to an expanded campaign to fundraise for scholarships and a naming opportunity in our new building—all in Osborne’s name. These efforts represent an emergent need in the country—and in nursing specifically—to address issues of diversity in a meaningful way. The College hopes to respond to this need by growing the number of underrepresented minorities in the US nursing workforce who will then give back themselves.

**Should you wish to make a contribution to the Osborne scholarship,** please contact Nadege Roc, associate director for alumni relations and development, at nadege.roc@nyu.edu.
Welcome.

NEW YORK UNIVERSITY RORY MEYERS COLLEGE OF NURSING

is committed to the inclusion and support of individuals and ideas from all who comprise our multicultural community. The College embraces the richness of diversity in its multiple dimensions that exist within and around us, including: race, ethnicity, nationality, class, sex, gender identity/ expression, ability, faith/belief, sexual orientation, and age. It acknowledges that each member of our community brings a unique collection of identities and experiences that contribute to our collective dialogue. We believe in the value of diversity and its many points of view which serve to enhance the quality of the teaching, research, service, and employment experiences at the College.

NYU Meyers strives to acknowledge, value, and celebrate our diversity while putting into action meaningful expressions of inclusion. We take pride in working together to build a diverse, equitable, and civil community where everyone feels safe, healthy, and free to be themselves, especially those from underrepresented backgrounds.

The College is committed to meeting the healthcare demands of an increasingly diverse population with an equally diverse faculty and workforce. We invite your presence and support as we build our valued community.

New President Andrew Hamilton made his first official visit to the College this winter and went on a tour of our Clinical Simulation Center, alongside Simulation Learning Director Kellie Bryant, Dean Eileen Sullivan-Marx, and Senior Associate Dean James Pace. Hamilton has already begun working closely with the College on its major initiatives.

AWARDS AND NOMINATIONS

Associate Professor Victoria Vaughan Dickson was named president-elect of Eastern Nursing Research Society.

Judith E. Haber, the Ursula Springer Leadership Professor in Nursing, was selected as the recipient of the Marie Hippensfleth Lingeman Award for Excellence in Nursing Practice from Sigma Theta Tau International.

Erin Hartnett, program director for Oral Health Nursing Education and Practice, was named an honoree in the 2015 Irish Education 100, a listing of the leading Irish-American figures in education across the US.

Clinical Assistant Professor Linda Herrmann will be inducted as a fellow in the AANP in June.

Christine Kovner, Mathy Mezey Professor of Geriatric Nursing, was named a board member to CGFNS, formerly the Commission on Graduates of Foreign Nursing Schools, for four years.

Rona F. Levin, clinical professor and the director of the Doctor of Nursing Practice Program, was selected as the recipient of the Evidence-Based Practice Award from Sigma Theta Tau International.

Professor Madeline Naegle and Clinical Assistant Professor Donna McCabe have won the Rose and George Doval Award for Excellence in Nursing Education and the inaugural Faculty Excellence in Mentoring Award, respectively.

Professor Madeline Naegle won the Nurses Association of the Counties of Long Island Presidential Citation Award.


**College Gets Top Rankings**

This year, NYU Rory Meyers College of Nursing again appeared on U.S. News & World Report’s annual survey of best schools and graduate programs in the entire country.

**MASTER’S PROGRAM**
- 6TH

**ADULT GERONTOLOGY PROGRAM**
- 2ND

**DNP PROGRAM**
- 8TH

- Clinical Assistant Professor Larry Slater was elected to a four-year term on the Governance Committee of The Honor Society of Nursing, Sigma Theta Tau International (STTI). He also was appointed chair for the 2016-2017 biennium.

- Assistant Professor Allison Squires was elected to National Council of Interpreters in Health Care Board of Directors, a multidisciplinary organization whose mission is to promote and enhance language access in healthcare in the US. Professor Squires is the only nurse serving on the board.

- Assistant Professor Ann-Margret Dunn Navarra was elected member-at-large of Eastern Nursing Research Society.

- Jeremy Rowe, senior research scientist, was given a Fulbright Specialist Award to work in Sarajevo at The National Museum of Bosnia and Herzegovina, Bosnia and Herzegovina. He will

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**FUNDING**

- The Oral Health Nursing Education and Practice (OHNEP) Program received six years of funding for $334,240 from a DentaQuest grant. OHNEP aims to advance a national nursing oral health agenda whereby interprofessional oral health clinical core competencies are a key component of overall healthcare.

- The Nurses Improving Care for Healthsystem Elders (NICHE) Program was awarded a $1.5 million grant from the US Health Resources and Services Administration for her study “A Clinical/Community Partnership to Expand Primary Care of Older Adults.”

- The College was awarded a two-year $200,000 grant from The Fan Fox & Leslie R. Samuels Foundation in support of the Healthy Aging Collaboration, in which students and Visiting Neighbors staff and volunteers will continue to provide home visits and health-promoting assessments to high-risk older adults living in NYU housing and the surrounding community.

- Professor Tara Cortes received a $2.5 million grant from the US Health Resources and Services Administration for her study “A Clinical/Community Partnership to Expand Primary Care of Older Adults.”

- Rubinstein Public Relations made a donation to the College’s geriatric research initiatives under Professor Amy Witkoski Stimpfel and NICHE.

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Kellie Bryant, director of simulation learning, and Larry Slater, clinical assistant professor, appeared on ABC’s The View on September 18, 2015, to talk with the hosts about the nursing profession. They were joined by 52 nurses—mostly from NYU Langone Medical Center—some of whom had come directly to the show after working a 12-hour night shift.
At 40, Jennifer Kim began commuting every few weekends from Nashville, where she worked and lived with her husband and three young children, to NYU, in pursuit of a Doctor of Nursing Practice degree. Her boss at Vanderbilt School of Nursing, where she's an assistant professor, had encouraged her to go back to school. Already a geriatric nurse practitioner for 15 years, Kim chose the NYU Rory Meyers College of Nursing Doctor of Nursing Practice program for its small size—just 19 in her cohort, which was only the program's fourth. In addition, she wanted to learn from the College's gerontological experts, including those from the Hartford Institute for Geriatric Nursing.

“My objective the first semester was to just to stay afloat,” confessed Kim. “I wanted a doctorate and the intellectual stimulation. But I thought I’d get my degree and then just go back to life as I know it.”

That isn’t exactly what happened. On the one hand, the program really helped remind her of how much she loves nursing. And on the other, it helped her to build the skillset she needed to find the confidence to become a leader. Those learned skills enabled her to receive a DNP Distinguished Capstone Project Award and become the 2015 class valedictorian.

In the NYU Doctor of Nursing Practice program, graduate students work on a variety of clinical projects. Kim chose to develop a quality improvement project on reducing heart failure hospital readmission rates in a long-term care facility. She taught certified nursing assistants, whom she considers underutilized partners in the healthcare team, about heart failure. Over time, she examined the facility’s hospital heart failure readmission data to see what kind of influence they’d had.

Not only were there fewer patients being readmitted to the hospital with heart failure, but also the nursing assistants had a statistically higher degree of knowledge of heart failure management strategies.

“It was really effective,” said Kim. “The nursing assistants bring so much to the healthcare team. It was great for the administration to see, and it was fun for me to see as well, the product of all my hard work, and that it created better patient outcomes.”

Kim has gone on to share her research project through presentations at professional conferences and in an article published in this May’s Annals of Long Term Care.

Since returning to Nashville full-time upon graduating, Kim has
been busy, adding two new roles to her teaching and nurse practitioner work. First, she was appointed co-director of the Vanderbilt Center for Gerontological Nursing Excellence. Then in November 2015, she was named for a year’s stint to a National Hartford Center for Gerontological Nursing Excellence Expert Panel that is developing gerontological nurse educator competencies.

Kim also continues her involvement in the kind of quality improvement projects she began at NYU. As part of an interprofessional team, she is designing and presenting a series of web-based trainings for skilled nursing facilities to reduce usage of antipsychotic drugs. This project was funded through a State of Tennessee Q-source grant in partnership with the Vanderbilt Center for Quality Aging.

In addition, as part of a group of nurse researchers, nurse educators, and nurse practitioners, Kim is looking at community-dwelling senior citizens’ perceptions of frailty. The outcome will likely lead to more projects which will focus on community-based interventions and development of resources that would mitigate the risks of sequelae related to frailty.

Looking back at her time at NYU and the wealth of knowledge and experience she gained in her program, Kim particularly appreciated all the contact she had with the Hartford Institute for Geriatric Nursing, which involved her with so many experts at the forefront of geriatric nursing.

She summed up her experience at NYU Meyers by a note she had scribbled from her faculty lectures: “this is for the patients.”

“I’ll never forget that about NYU,” she said. “I felt like the faculty really walked what they talked and it was so refreshing to see as a student.”

The DNP, an alternative to research-focused doctoral degree, prepares scholars for advanced clinical practice in a population focus area. Graduates are prepared to: deliver direct patient care, influence health policy, promote patient safety, resolve healthcare dilemmas, lead interprofessional healthcare teams, and reduce disparities in healthcare. To learn more about our program, visit nursing.nyu.edu/program/dnp.
Ruth Teitler BS ’51 was born in Brooklyn 98 years ago. After her father died in an accident when she was very young, Teitler was raised, alongside her brother, by her mother. They were very poor and life was difficult.

Her interest in nursing—and in caring for the vulnerable—was spurred from her challenging childhood and the trauma she experienced by losing her father.

She attended NYU on a scholarship, took classes in Greenwich Village and at Metropolitan Hospital on Welfare Island, and spent time with friends in Washington Square Park. She finally graduated in 1951 with her BS in nursing from Steinhardt.

Teitler was a highly skilled and dedicated nurse for decades before retiring. She practiced in veterans’ hospitals in the Bronx and in Brooklyn, where she was head nurse. During World War II, Teitler served in the Army at a base in Colorado caring for soldiers who were amputees—a job she cherished.

This past fall, Teitler gifted the College with one million dollars to be used for students who, like herself when she attended NYU, have financial need. She had previously included the College in her will, but decided to donate the money while living to create a legacy around patient care, compassion, and dignity. She also wanted the opportunity to meet the recipients who would benefit from her generosity.

“NYU will last forever, although I won’t,” she said. “I want the students to always have sympathy for their patients and to treat them with care and compassion.” Teitler felt so strongly that nurses should be compassionate that she included compassion as a criterion for awarding scholarship funds.
Meet the Ruth Teitler Scholars.

The Ruth Teitler scholarship, like many of the scholarships I’ve received, has helped to make a little bit go a long way. Since my freshman year at NYU, I’ve had to work numerous jobs, even up to three at once, to make payment deadlines and remain here at NYU. However, with generous donors like Miss Teitler, I have been able to live my last couple of years here with so much less stress and with the ability to focus on my studies and the things I love.

Mariah Rodgers, BS ’16

Because of Miss Teitler’s generosity, I was able to study abroad during my winter semester. During my time abroad I was able to see mental health—a field that I am passionate about—in an entirely new light.

Beyond that, getting to meet Miss Teitler was inspirational to me. She is an amazing woman—a real pioneer. I hope that I can one day give back the way she has and enable future nursing students to get the most out of their time here at NYU. Thanks to Miss Teitler I also did not have to take out any loans this semester, and I was able to pay all of my tuition independent of my parents! She has shown me that hard work eventually does pay off.

Evelyn Cunningham, BS ’16

Through the generosity and spirit of Ruth Teitler, I was able to graduate from a university that has provided so much for me. I am so grateful for Miss Teitler’s support of an exceptional nursing education that has prepared me to lead in the profession. She is an inspiring woman and I hope to replicate her kindness and joy throughout my nursing career.

Griffin Sutherland, BS ’16

Is NYU Rory Meyers College of Nursing already in your will, trust, or other estate plans?
Thank you! Please let us know about your plans because it helps us plan for the future. Call or email Sally Marshall, director of development, at 212-992-7525 or sally.marshall@nyu.edu and she will add your name to the Society of the Torch. The Society of the Torch honors alumni, faculty, and friends of New York University who have recognized the importance of planning their philanthropy by providing for the University and its schools and colleges. Through bequests in wills, trusts, and other arrangements, these donors found a satisfying way to leave a meaningful legacy. We are delighted to recognize the generosity of members of the Society of the Torch. Or, your gift may remain anonymous, if you like.

Don’t have a will?
You’re not alone! Now is a great time to start planning, and please consider including NYU Meyers in your will. Contact Sally for suggested bequest language and NYU’s tax ID for you to share with your attorney.

S P R I N G 2 0 1 6  1 1
In 2009, NYU Rory Meyers College of Nursing welcomed the Center for Drug Use and HIV Research (CDUHR). Established in 1998, this Center was funded by the National Institute on Drug Abuse (NIDA) and was the first Center to focus on the socio-behavioral study of HIV among people who use drugs. The original six affiliated investigators have grown to more than 75—with 60+ active research projects. Currently, 18 nursing faculty and investigators at the College are affiliated with CDUHR.

Over the course of CDUHR’s lifetime, the HIV epidemic among people who use drugs in the US has undergone major changes. These changes have ramifications for researchers studying the problem and for the clinicians who plan, deliver, and evaluate care. In the mid-1980s, more than half of the people who inject drugs (PWID) in New York City were HIV positive—approximately 100,000. This stands as the largest HIV-PWID epidemic in the world to date. As an outcome of aggressive public health policies and programs including syringe access, substance use treatment, and HIV treatment, and partly due to AIDS-related deaths, HIV prevalence is currently 12% in PWID in New York City. Importantly, HIV is now considered a chronic disease and HIV-positive individuals can reach near-normal lifespans.

Although there have been declines in new HIV infections related to injection drug use, many challenges remain to end the epidemic among people who use drugs. After years of declining rates of injection of heroin, cocaine, and other drugs in the US, the recent epidemic of prescription opioid misuse has resulted in a resurgence in injection drug use in rural, urban, and suburban areas. The amount of opioids prescribed, and unintentional overdose deaths, have quadrupled since 1999, with southern states having the highest rate of opioid prescriptions. In addition, methamphetamines and other psychoactive drugs are associated with sexual HIV transmission in men who have sex with men, and drug use impacts adherence to HIV medications by those already infected. Another challenge to ending the epidemic is that many evidence-based
HIV prevention and treatment interventions are not implemented at public health scale and thus do not reach vulnerable populations. Just as the HIV epidemic and its associated comorbid conditions have changed, the Center has evolved to address new emerging issues. Some examples include: (1) whereas HIV prevention was the focus of research prior to the wide availability of effective anti-retroviral treatment, more recent work includes learning how to enhance engagement in HIV/AIDS treatment; (2) while early work studied the individual risk behaviors of vulnerable populations, the Center has evolved to include social, structural, and other contextual variables that influence risk behavior; and (3) the Center’s mission has expanded to conduct research related to the prevention and treatment of hepatitis C virus infection, which is highly prevalent among PWID. Another expanded initiative of the Center is dissemination of research findings and their implications to policy makers, clinicians and those on the front lines of HIV and hepatitis prevention and care.

Nurses have been active in the care of persons with HIV since the early days of the epidemic. Nurse researchers and nurse clinicians have contributed to the literature and have founded the Association of Nurses in AIDS Care and its journal. The integration of nursing faculty researchers into CDUHR has grown steadily since 2009, and many NYU Meyers faculty and scientists are involved in many important international and domestic research projects. The studies address the challenges noted above, including the study of new drugs of abuse that may be related to HIV/hepatitis risk, and of populations that continue at high risk. Other research is undertaken to enhance implementation and adherence to new interventions for HIV prevention (e.g., pre-exposure prophylaxis) and for those who are HIV-infected.

Nurses are administrators and clinicians in facilities across the country with large HIV/AIDS populations, and have many opportunities to become engaged in research on HIV/hepatitis. Given their central roles in health delivery in the US, nurses can use CDUHR resources at the College and elsewhere regarding current research and evidence in support of interventions to bring us closer to ending these epidemics. The collaboration and integration of research and clinical care can help overcome the challenges of moving toward elimination of HIV and hepatitis among people who use drugs.

How CDUHR is evolving to address new emerging issues:

CDUHR provides a supportive research infrastructure for affiliated investigators at four institutions: NYU, National Development and Research Institutes (NDRI), Mount Sinai Health System, and John Jay College of Criminal Justice.

CDUHR leadership members participate in local, national, and international advisory bodies and serve as national and international resources to the field.

CDUHR investigators have greatly contributed to our knowledge about HIV/HCV among drug users. On an annual basis, they contribute more than 100 articles to the peer-reviewed literature, make more than 70 presentations at professional conferences, and have more than 150 press mentions of their work.

CDUHR investigators, along with the work of other researchers, public health officials, service providers, and advocates, contributed to the impressive reversal of the HIV epidemic among people who use drugs in New York City.

CDUHR products that can be used by nurses include:

Fact Sheets: findings from a recent project. Recent fact sheets have summarized CDUHR projects on the incidence of HCV among HIV-infected men who have sex with men, and the results of an intervention (Heart-to-Heart) that aims to improve HIV treatment outcomes.

Research to Implementation Briefs: policy implications of a body of research on critical topics. These briefs have included applying what we know from HIV research to the HCV epidemic, and reducing the impact of the growing problem of prescription opioid misuse on HCV and HIV transmission.

Website: information on CDUHR investigators, new findings, and newly funded projects.
Lloyd Goldsamt: Vulnerable Youth Populations and Vietnam

By Druanne Dillon

LLOYD GOLDSAMT HAS TRAVELED TO VIETNAM AT LEAST 20 TIMES IN AS MANY YEARS FOR HIS RESEARCH. WHY? BECAUSE VIETNAM HAS PROVEN FERTILE GROUND FOR THE STUDY OF YOUNG MALE SEX WORKERS. “MY VERY NARROW NICHE,” AS GOLDSAMT DESCRIBES HIS CURRENT RESEARCH, FOLLOWING MORE THAN A DECADE OF INCREASING SPECIALIZATION, “IS IN WORKING WITH VULNERABLE YOUTH POPULATIONS AND SEXUAL AND DRUG USE RISKS, IN PARTICULAR AMONG MALE SEX WORKERS IN VIETNAM.”

MANY YEARS AGO, GOLDSAMT STUDIED DRUG USE AMONG MIDDLE AND HIGH SCHOOL STUDENTS, AND DRUG USE AMONG YOUTH, INCLUDING THE HOMELESS AND YOUNG MEN WHO HAD SEX WITH OTHER MEN, ALL IN NEW YORK CITY. BUT THEN HIS ATTENTION TURNED TOWARD THE FAR EAST. IN COLLABORATION WITH AN INVESTIGATOR FROM COLUMBIA UNIVERSITY WHO HAD A GRADUATE STUDENT FROM VIETNAM, GOLDSAMT BEGAN A SERIES OF NIH-FUNDED STUDIES IN VIETNAM, FOCUSING ON YOUNG HEROIN USERS AND YOUNG MALE SEX WORKERS.

Several research projects later, Goldsamt’s current work has brought him and his team to a new level of contact: intervention—and getting young male sex workers engaged in their own healthcare.

Lloyd Goldsamt, with a PhD in clinical psychology, came to NYU Meyers in June 2014 as a senior research scientist in the Center for Drug Use and HIV Research (CDUHR). The Center’s mission is to end the HIV and hepatitis epidemics in drug-using populations and their communities by conducting transdisciplinary research and disseminating its findings to inform programmatic, policy, and grassroots initiatives at the local, state, national, and global levels.

In Goldsamt’s current NIH project, he and his team developed an intervention, based on health promotion and using motivational interviewing, to engage young male sex workers in healthcare. In this study, through venue-based interviews, they recruited young male sex workers, ages 16-29, in Hanoi and Ho Chi Minh City.

Subjects who were selected for interventions went to a local clinic affiliated with the project where they met with a health educator. Together, they spent about an hour reviewing seven different modules, paced and emphasized based on subject interest and need, focused on identifying health information and sources of risk. Then, the subject and health educator came up with a plan to meet any of those challenges the subject was ready to address. A clinical exam followed, with testing and onsite STI treatment. If subjects needed HIV treatment, they were brought to a local clinic, the required protocol in Vietnam. An additional study component delivered a briefer version of the intervention to young men in community settings.

“We’re looking for them to engage in their own healthcare,” explained Goldsamt. “This is a population that is
outside the healthcare system. They’re hugely stigmatized and don’t engage in the system until they’re extremely sick. If you’re a sex worker, you might go to the doctor only when your STIs are so bad that you can’t have sex. The system is not very friendly to young men who have sex with men, young men who are sex workers. These are not populations that are easily welcomed.”

The research team set up a place that’s welcoming to these sex workers, trying to give them skills to access the healthcare system when they need it. “At a minimum we’re getting people engaged, we’re providing information, we’re providing treatment. And we’re working to get them to routinize healthcare for themselves,” said Goldsamt.

The overall goal of this outreach is to involve them in their own healthcare, so if they’re engaging in any kind of HIV-risk behavior, they can get a test every four months and be aware of STI transmission risk. And even if the workers didn’t engage in perfectly safe sex, they’d at least be aware of the risks, monitor themselves for any signs and symptoms, and get treated if necessary.

“Having an STI facilitates the acquisition and transmission of HIV, so if we can intervene early, it can have a potentially enormous public health impact, even if we don’t completely create safer sex—which is, of course, really challenging,” he said.

What are the takeaways from Goldsamt’s NIH healthcare intervention project? Data shows that the intervention has been well-received, and has been effective in engaging people in healthcare and in treating active disease, so it’s reducing risk in this population.

He adds, “NIH research projects, which are focused on answering a particular scientific question, allow us to apply the knowledge gained to other places.” To this end, his team is now conducting a similar project with men who have sex with men in Puerto Rico.

“More importantly,” according to Goldsamt, “if I fast forward from this project, the lesson, which may seem sort of obvious, is that by treating male sex workers respectfully, without stigma, you can engage them in healthier behaviors that have an enormous impact.”

While he does not see application of this lesson as part of the mission of the NIH, he feels that conveying it—through teaching, other work he and his team do, the content of the intervention, the method of delivery, the training of the staff, and what services they provide—is embedded in the research they do.

This particular intervention project is nearing its end. What’s next for Goldsamt on this trajectory? The answer is threefold: “One of the next steps is to see whether the intervention does in fact change things over time. If you follow people for a year, are they more likely to engage in healthcare if they receive the intervention?” His team has proposed a study to test this question in Thailand, which is being reviewed this spring.

Another direction, also to be reviewed this spring, would be to continue his work in Vietnam, but with men who purchase sex.

“The thing about sex workers is that they don’t have control over, or the ability to engage in, safer sex,” explained Goldsamt. “So what if you could get the men who purchase sex and the men who sell sex all to value safer sex? And if you do that intensively in a community, does it change practices for people who were never exposed to the intervention?”

The third direction would be to apply this intervention to additional vulnerable populations, enabling other groups to engage in their own healthcare and to maintain it over time.

And for those wondering how all this relates back to NYU Meyers…

“If you told me 20 years ago that I’d be working as a researcher in a nursing school, I would have said, ‘What?!?’” admits Goldsamt. “But nursing really is the natural place for this type of research in the developing world. You’re not going to work with physicians to implement the type of intervention we’re doing. If you look at the developing world, there’s a natural fit with nursing. So it’s a pretty easy fit and has been a good move on my part.”
Encouraged by mandates of the Patient Protection and Affordable Care Act and the vision of the Institute of Medicine report on the future of nursing, a perfect storm exists for nurses to take the lead as disruptors of the status quo and increase our visibility as innovators in healthcare delivery. As the largest and most trusted professionals working at the forefront of care, we are aware of patient perceptions of what is and what is not working in healthcare systems. Nurses have insight regarding what is necessary to evolve healthcare systems and services to meet the needs of the populations we serve. Now is the time to exert our creative influence in this rapidly changing marketplace.

Well-versed in evidence-based practice and quality improvement methodologies that purposefully encompass patient preferences and informed by clinical experience and expertise, nurses can lead effective change management initiatives that meet the demand for patient-centered, high-quality, safe, accessible, and affordable care.

With a rich tradition of health service innovation since the time of Florence Nightingale, our profession has provided leadership in the continuous redesign of care to meet the needs of society. At this point in history we are called to respond to the imperatives for cost-effectiveness and increased emphasis on health promotion, illness and accident prevention, and self-management of chronic disease. New and enhanced models of interprofessional care are part of the solution to a healthcare system in turmoil. Increasingly, nurses are embracing opportunities to add value to healthcare by acting as entrepreneurs and intrapreneurs. Entrepreneurship embodies values of ownership and leadership for change management to improve performance through invention. Intrapreneurship, defined as the act of behaving as internal entrepreneurs, empowers individuals and teams to drive innovation for change and enterprise from within.

As self-employed business owners, nurse entrepreneurs typically offer a range of services to a variety of consumers including, but not limited to, the provision of direct care, educational, administrative, informatics or consultative services, and research science support. Clinical knowledge and the ability to problem-solve, combined with astute business skills, culminate in the ability to create a multitude of service options for targeted populations. The entrepreneur must have an intimate knowledge of the population segment his or her business serves and be accountable for constant surveillance of business operations to ensure customer satisfaction and profitability. Entrepreneurs understand the broader healthcare market and advance their business models to remain competitive and viable in order to serve their customers long term.

In contrast, nurse intrapreneurs function in an employee role within a health system and are charged with responsibility for orchestrating transformational change of structure, function, and culture of in alignment with parameters that are system driven. Innovation can be targeted internally with the development of new service delivery models or externally by changing the way the health system relates to the community, other providers, and payers. The nurse intrapreneur shares the risks associated with goal achievement with partners across the continuum of care. These nurse leaders are empowered to exert organization-specific,
Leslie eLab

The Mark and Debra Leslie eLab is a 5,900-square-foot facility in the heart of the Washington Square campus where aspiring NYU entrepreneurs from across all our schools and colleges—students, faculty, and researchers—can meet to connect, collaborate, and tap into a vast array of resources to help develop their ideas and inventions into startup companies.

culturally appropriate influence to improve healthcare and financial outcomes of the system.

As nurses we are often most motivated by professional endeavors that focus on initiatives aimed at promoting the health and well-being of humanity. Social entrepreneurs passionately engage in enterprises that address gaps in care that serve vulnerable or disenfranchised populations. Their nursing skills and business acumen are utilized to construct healthcare services with a broader reach and focus on the public good. Integral to the success of these type of entrepreneurial activities is the emphasis on program sustainability, efficiency, and effectiveness.

Nurses functioning in entrepreneurial and intrapreneurial roles share inherent traits and values that position them as ideal leaders. In 2004, the International Council of Nurses defined a set of personal and professional attributes that characterize the nurse entrepreneur-intrapreneur from a global perspective. Typically, nurses attracted to entrepreneurship possess a strong self-image, are self-confident and have a profound need for achievement. They are creative, show initiative, and are comfortable with self-discipline and an approach to work that is independent, organized, proactive, and outcome-oriented. Nurse entrepreneurs and intrapreneurs are visionary, courageous, and reliable while simultaneously displaying a high degree of patience and enthusiasm.

Competencies required for entrepreneurial-intrapreneurial work can be cultivated in academic programs that teach general business principles. The potential for success as an innovative nursing leader is enhanced when knowledge gained in a structured program articulates well with personal attributes and professional skills. The aptitude for excellent communication, negotiation, astute public relations, and financial and productivity management can be enhanced in structured learning environments. Purposeful career planning, and academic and work role progression, as well as seizing opportunities to immerse oneself in entrepreneurial endeavors, can make becoming an innovator a reality.

An emerging theme in entrepreneurial education is the inclusion of non-business fields as a target audience for programs that teach the requisite business skills and facilitate access to potential customers, partners, payers, competitors, and investors. Becoming more aware of the entrepreneur role through relevant education offers the potential to increase awareness of startup businesses as a career choice. Nurses, as healthcare domain experts, have specific knowledge that is an important advantage in emerging business opportunities in the industry. Our profession has a reputation for working well in interprofessional teams and placing the patient at the center of product development.

We are a valuable asset for the future of healthcare.

The honors course, taught by Senior Research Scientist Mattia Gilmartin, seeks to develop participants’ skills to become social entrepreneurs and agents of change. Social entrepreneurs recognize a problem and use entrepreneurial principles to achieve self-sustainability within a particular community. Honors scholars read and discuss the work of authors from nursing, management, and the social sciences to develop a deeper understanding of the underpinning of health inequities in the US. Throughout the semester, students have the opportunity to assess and develop their leadership and change management skills.

During the spring 2016 semester, the honors scholars learned about the Lean Startup method to develop a business model for a nurse-led social venture to address an aspect of social change. The teams worked on nurse-led ventures to address obesity in low-income children and their families, the transition of honorably discharged enlisted veterans to civilian life, and incorporating mental health, stress and coping and career skills for high school students.

THE SPRING 2016 HONORS SCHOLARS ARE:

| Linh Luu-Chan | Jamie Page | Maggie Taylor |
| Evelyn Cunningham | Tina Palmejda | Amy Vidnovic |
| Lauren Hollender | Sara Reed | Emily Yin |
| Alexandra Kreitman | Amanda Shirley |  |
| Molly Quigley | Griffin Sutherland |  |
Interprofessionalism:

HOW BEST TO DELIVER HIGH-QUALITY, EFFECTIVE, PATIENT-CENTERED CARE

By Najvot Kaur, BS ’14, MS ’16

We are at a pivotal point in healthcare. The good news is, with the advances in health research and technology, the US population is living longer. The not-so-good news is, they are living longer, but with multiple often inadequately managed comorbidities. One way we can mitigate this challenge in our healthcare system is to implement a collaborative, team-based approach in both educational preparation and clinical practice so we can improve and optimize patient healthcare outcomes. This is the essence of interprofessional collaboration: a partnership between a team of health professionals and patients using a collaborative and coordinated approach to shared decision-making to optimize physical, mental, and spiritual health.

The Institute of Medicine, the World Health Organization, the Health Resources and Services Administration, the American Association of Colleges of Nursing, and others report supporting evidence that interprofessional education collaboration is an essential component in providing safe, high-quality, and cost-effective health outcomes. One of the ways students wanted to take charge of the opportunity to promote collaboration was by creating the Interprofessional Education Group (IPEG). Originating at the College and spreading across health programs at the university, IPEG is a student-led special interest group with a focus on oral-systemic health.

We need to do better by embracing becoming partners with our patients and colleagues, establishing and maintaining a two-way relationship as opposed to the traditional paternalistic one-sided view. Our mission is to prepare health professionals, including nurses, nurse practitioners, physicians, dentists, dental hygienists, physical therapists, public health experts, social workers, speech-language pathologists, and nutritionists, to work together, learn from each other, and embrace the various perspectives and skills that each profession offers in order to build a safer and more efficient, patient-centered healthcare systems. IPEG aims to transition students, through practice, into becoming competent members of high-performing clinical teams.

IPEG emerged for two reasons. First, we believe there is no hierarchy when delivering high-quality, effective, patient-centered care. That is to say, no single profession can deliver the best care. Instead, a team-based, collaborative approach is needed for optimizing patient care. Our
clinical theme is bringing about awareness and educating our peers about the oral-systemic relationship. We emphasize teamwork, gaining respect for other healthcare professionals by educating one another on the professions’ roles and responsibilities in providing holistic, comprehensive care, as opposed to working in silos.

The US Surgeon General wrote in his 2000 report, “The mouth is a mirror for the body.” This statement aligns with IPEG’s mission and accurately reflects the evidence regarding the connection of one’s oral health to his or her systemic health and vice-versa. The report also called for all providers to participate in oral healthcare—a sentiment that was echoed by the Institute of Medicine in 2011 and supported by the Health Resources and Services Administration in 2014. IPEG affirms this view through participation in interprofessional education, networking events, research, and community outreach.

Our signature event is the IPEG Grand Rounds Experience, an opportunity for all health profession students to collaborate and to learn with and from each other. This event is held twice a semester with an average of 60 students and faculty attending across the University. Participants are divided into teams—five other IPE students and one faculty member—who actively work together on an unfolding case study. These case studies include patients with diabetes, cardiovascular disease, mental health issues such as depression and substance abuse, and other co-morbidities, which are all relevant to each profession. Members of each profession have the opportunity to educate their peers on how their unique expertise can contribute to improving overall healthcare for the case study patient.

In addition, dental and dental hygiene students teach their IPE colleagues about conducting a basic oral health exam, including how to brush and floss your teeth, how to recognize signs of decay and oral cancer, how to implement oral risk prevention strategies, and when to refer. Other healthcare students also demonstrate their specific physical exam skills pertinent to the case study. Then students close gaps in communication by verbalizing their findings from their respective disciplines to their colleagues by using the TeamSTEPPS SBAR technique. IPEG has also hosted an interprofessional panel discussion with nursing Professor Susan Apold. The purpose of this event was to start an interprofessional discussion and gain perspectives showing the ultimate power of a collective voice and how that would speak volumes across disciplines and to our constituents. At this event, we used the American College of Physicians’ white paper pertaining to gun safety as a vehicle for discussion. The first step in advancing health policy advocacy is to empower our interprofessional colleagues to work together to discuss issues relevant to all our patients and their communities. Students, faculty, and leaders from many healthcare disciplines showed their support. Our VIP guest of honor was Dr. Steven Weinberger, CEO of the American College of Physicians.

IPEG students serve as catalysts for tomorrow’s healthcare. By incorporating student-led initiatives and better educating our peers, we can make a difference, not just in patients’ and their families’ lives, but in each others’ lives. Research shows how interprofessional collaboration, when valued, improves coordination, communication, and ultimately, the quality and safety of patient care. IPEG can make an important contribution to advancing the future of healthcare.

“I joined IPEG because I recognize that the most effective and cooperative way to fill the gaps in my own medical knowledge is to partner with other professionals and cooperate with them to provide the best care for my patients.”

Jonathan Steinberg
School of Medicine ’18

“We are the future of healthcare and we need to have good working relationships with one another in order to provide the best care to those in the community. IPEG serves as a way to begin these good relationships early so that as we move on, we give our best to those we serve.”

Leora Giacca
Rory Meyers College of Nursing ’17

“I want to see a person more holistically and I think this view comes from understanding how other professionals treat this same patient.”

Katie Baron
College of Dentistry ’17
Hartford Institute for Geriatric Nursing
CELEBRATES 20 YEARS

The Hartford Institute for Geriatric Nursing (HIGN) at the NYU Rory Meyers College of Nursing is celebrating its 20th year anniversary! Founded in 1996, the Institute has become the world-wide resource for evidence-based geriatric knowledge and tools. Terry Fulmer and Mathy Mezey became the Institute’s first co-directors and in 1997 a National Board of Advisors was formed with Claire Fagin as chair.

During its first decade the Institute was prolific in the development of resources and tools that have continued to impact the geriatric field today, including the *Try This* series, the first edition of *Geriatric Nursing Protocols for Best Practice*, recommendations for long term care staffing through *Minimum Nurse Staffing Standards for Nursing Facilities* published in *The Gerontologist*, *Best Nursing Practices for Older Adults Curriculum Guide for Baccalaureate Education and Staff Development*. HIGN partnered with the American Association of Colleges of Nursing to create the BSN Geriatric Competencies and the Advanced Practice Nursing Competencies and to create the upper-level baccalaureate geriatric course content which became known as the Geriatric Nursing Education Curriculum.

In 1998, the Institute launched its first week-long session of the Summer Scholars Institute. This initiative was designed to assist junior- and mid-level researchers develop their beginning concepts and problems into a proposal with potential for funding. This program has continued every year and has impacted more than 200 nurse researchers.

In 1999, the Nurses Improving Care of Healthsystem Elders (NICHE) began under the Hartford Institute leadership. In 2006 Atlantic Philanthropies provided HIGN with a planning grant to expand NICHE, and in 2007 the funder granted a five-year grant to expand NICHE into a sustainable program. Today NICHE has more than 600 designated hospitals and hosts annual conferences for more than 1,000 nurses and other professionals to disseminate the latest evidence-based practice and models for quality care.
Atlantic Philanthropies also funded HIGN in 2007 with a grant to enhance the ability of nurses in specialty practices to provide age-sensitive care. Working with 16 nurse specialty organizations, HIGN helped develop resources which were appropriate for each unique specialty. HIGN also founded the Coalition of Geriatric Nursing Organizations (CGNO) in 2001. Its purpose was to impact policy in long-term care by bringing together eight organizations representing 20,000 nurses to develop positions and influence legislators and policy makers.

In 2010 Tara Cortes was appointed executive director of the Institute. With the passage of the Affordable Care Act and the reality that we had entered an age where 10,000 people per day were turning 65, HIGN began to align its work with new national priorities. With a focus on the Triple Aim—improved patient experience and outcomes, improved population health, and cost-effective care—HIGN began to expand its work into the community to build an age-sensitive workforce in primary care, home care, and organizations serving the community. Launching the Primary Care of Older Adults (PCOA) program through the support of a HRSA grant in 2012, HIGN was able to educate more than 1,500 professionals across the country on age-appropriate care for older adults in primary care.

In 2015 HIGN was awarded a Geriatric Workforce Enhancement Program grant which enables the development of the Community-Clinical PCOA program. This initiative is being implemented in the Bronx, a community which ranks lowest in health in New York State. Working with Montefiore Health System’s primary care and home care, along with R.A.I.N., a large community-based organization serving seniors, this initiative is providing education on caring for older adults to hundreds of interprofessional personnel at both organizations. More than 1,000 home health aides and caretakers will be educated on caring for people with dementia in the home to reduce caregiver burden.

Other HRSA support from two grants awarded in 2013 enabled HIGN to promote interprofessional practice in the community and in home care. With one of these grants, a post-master’s certificate program in the interprofessional care of frail older adults in the community and long-term care was developed. From this initiative, an e-Book, Interprofessional Education and Practice (IPEP), is being published. The other 2013 HRSA grant furthers the initial John A. Hartford Foundation work on interprofessional practice in the Geriatric Interdisciplinary Team Training (GITT) program by developing GITT 2.0, which is an online toolkit and support service that guides educational and clinical partners in a program to embed interprofessional practice for older adults through quality initiatives anywhere in the healthcare continuum.

A grant from the Independence Blue Cross Foundation and another from the Hugoton Foundation have enabled the Institute to move into the mobile device space with two apps: ConsultGeri: Dementia and ConsultGeri-on-the-Go, which provide several algorithms to assist in bedside decision-making around issues common to the care of older adults. Other foundation grants from New York Community Trust, the Fan Fox and Leslie R. Samuels Foundation, and the Commonwealth Fund have helped HIGN to embed NICHE across the New York City Health + Hospitals system, develop education and processes for transitional care, and initiate the Nurses Improving the Care of Older Adults in Primary Care program.

In January 2016, The National Hartford Center for Gerontological Nursing Excellence (NHCGNE) joined the Hartford Institute to continue to build the geriatric workforce in both educational and practice settings. In addition, in March 2016, through the combined support of grant funding, private donations, and earned revenue, HIGN redesigned and launched its two websites [HIGN.org](http://HIGN.org) and [ConsultGeri.org](http://ConsultGeri.org). With nearly 75,000 visits per month from around the world, it can be said that the Hartford Institute for Geriatric Nursing after 20 years continues to be a leader in the geriatric field with a laser focus on its mission to ensure older people achieve optimal health and quality of life.
While many don’t consider nursing a STEM field, Winslow Burleson, associate professor at the College, is working to change all that. The first engineer hired by the College, Burleson brings with him a compelling array of research, collaborations, and grants—plus NYU-X, a futuristic research, fabrication, and virtual reality lab—all working to make STEM-Nursing a reality. Since September 2014, Burleson and his team have been creating connections to education, technology—particularly computer science and engineering—and design, to work in areas of health, simulation, and innovation.

With an extensive background in educational technology and human-computer interaction, and advanced degrees from MIT and Stanford, even before he came to the College Burleson had collaborations with NYU Tandon School of Engineering, Steinhardt, and the Courant Institute. Burleson now holds appointments in engineering, education, and the College of Global Public Health and is leveraging his collaborations to create the kind of transdisciplinary innovation that would allow nursing to have more capacity in terms of the future of education, of innovation, of informatics, and design.

“When I got here, I noticed the College was celebrating Vicky Albit for her innovation in creating a DIY bubble CPAP device made from available supplies in Rwanda,” he said. “I came to the College to collaborate with colleagues and contribute to creating an environment that not only celebrates individuals, but that fosters the next generation of nurse innovators, ubiquitously—where we train all the graduates with the innovative capacity to help them reach their full potentials throughout their careers.”

The research grants Burleson and his team are working on have, at their core, the goal of increasing the capacity...
of individuals to enhance learning and doing, through innovative human-centered technology.

What else does Burleson have going on?

“We put together a course called STEM-Nursing Innovation, which will be taught in the 2016-2017 academic year,” he said. “It’s a program that extends what we’ve been talking about—one that integrates research, education, and transdisciplinarity with innovation and impact. It will explore how we get individuals and teams to understand the processes of creating these projects, evaluating them, and transforming them into deployable experiences.”

In addition, Burleson and his NYU-X lab are bringing together diverse experts to build—borrowing a term from Star Trek—a “Holodeck.”

He elaborated, saying, “We’re creating the intersection of virtual reality and physical space to allow for seamless collaboration among individuals and teams, either co-located or distributed. This creates a place where these different projects that make up a focused core can come together. That is really what we see in the NYU-X lab, a place to bring together diverse expertise and catalyze transformative innovation across health, technology, and education.”

What drew this engineer to nursing? Burleson credited the very nature of the field which allows—and relies on—direct contact with humans, patients and families, engaged in everyday life. In nursing, this occurs naturally; most other disciplines are a little more removed.

“We actually get to go out into people’s homes, into their communities, interact with their families, and have much more direct engagement in very life-critical cases or experiences that have the potential to have a huge impact on their lives; it is a real privilege,” Burleson said.

**NIH DRESS PROJECT**

The Development of a Responsive Emotive System Sensing System (DRESS) is a “smart dresser” for in-home use by people with moderate memory loss. This device—literally a set of dresser drawers with electronic sensors and other modifications—provides audio and visual feedback and prompting to a person attempting to dress him or herself, enabling someone with moderate memory loss to dress while giving respite to caregivers from this often frustrating, time-consuming, and repetitive daily activity.

The DRESS system uniquely combines interactive context-aware and skeletal movement sensing, affective sensing, and fabric pattern recognition components to guide, assess, and personally tailor responses to individual users as they attempt to dress themselves, Burleson explained.

“We didn’t know as much about dressing when we started the project as we do now,” Burleson said, explaining the value of collaborations in this study. “We know much, much more through the expertise of nurse-gerontologists, occupational therapists, speech pathologists—these diverse expert individuals and the broader expertise of communities of caregivers.”

Working across these disciplines and applying what Burleson and his team call the “Wicked Challenge Approach” can advance increasingly robust solutions aimed at iteratively resolving the challenges at hand.

**NSF AFFECTIVE LEARNING COMPANION PROJECT**

This grant is a project on affective learning companions, which support student learning—in this case, learning STEM principles—using a virtual character that can sense and respond to affect. So if, through attempting to learn something in science, technology, engineering, or math, learners hit a frustration point where normally they would quit, the program systematically pulls from a “tool kit” of steps, ideas, or devices to help them understand some key point, solve a problem, and most importantly, stay engaged in the project. This can not only help nursing students increase their comfort level with and knowledge of STEM building blocks, it’s also useful for nurses who work with a challenged patient population.

“For example,” Burleson explained, “many times people get frustrated with the medications or health regimes that they’re suggested to follow. Affective learning companions can provide a variety of ways to help motivate individuals to comply with their programs, to promote their own health and well-being, to enhance their ability to lead the kinds of lives they would like to have.”

**NSF CREATIVITY IN STEM IDEATION PROJECT**

This study looks at dyadic chat in a STEM context—two individuals, chatting through a text interface about a STEM challenge with which they’re presented—in the pursuit of evidence of creativity in their conversation.

“We give these dyads a challenging problem and they text chat for ten minutes on diverse ways to solve it,” Burleson explained. “Using natural language processing—that’s a term used for machine assessment of language—we’re trying to see if we can detect evidence of creativity in these conversations. If we can understand how to detect creativity, then we have the potential to facilitate creativity.”

Understanding creativity is of interest to the National Science Foundation, which funded the program, as it has the potential to enhance STEM learners’ capacity to be creative. In this context, Burleson and his researchers are looking at the personal level of creativity.

“This work is informed by Teresa Amabile’s creativity research at the Harvard Business School,” Burleson said. “She has shown that if it is possible to influence everyday personal creativity in both educational contexts and professional technology research endeavors. In the context of nursing and my role here, we’re interested in looking at how individuals in teams can be more innovative, creating the kind of lab environment and transdisciplinary collaborations in which creativity and innovation are both essential ingredients and impactful outcomes.”
NYU Meyers students have rich academic and social experiences—collaborating with the UN, learning about patients’ cultural sensitivities, and honing their clinical skills, to name a few. Here is a collection of highlights from this year.

NYU Nursing Entrepreneurship Organization
Students, faculty, and administrators attended the kick-off of the newly formed club advised by Debra Drillings.

Clinical: Maternity Unit
In the maternity unit, students prepare for a C-section.

Clinical: On-Campus
Anjuli Dhillon, Katie Rittweger, Gabriella Garcia, Joanna Maciag, Bailey Daum, Kristen Hu, Margaret Johnson, Nina Thornton, Ilyse Acosta, and Meredith King after their first on-campus clinical in Fall 2015.

Simulation: Maimonides Hospital
Sarah Pines and Rachel Izzo, December ’15 graduates, attend orientation in a simulation at Maimonides Hospital.

UN Global Initiatives Program
Students and faculty discussed global issues to eradicate extreme poverty and hunger, improve health services, save the environment, prevent deadly diseases, and expand educational opportunities.
Students on second sequence psychiatric clinical at Bellevue Hospital pose for a quick photo on their break.

Our students presented at Good Health Day 2015 in New York City.

Essential hospital personnel never get snow days—even during the worst of storms! Here’s Helen Seunghyun Yoo on her way to work.

Congratulations to the Class of 2020—selected from a record-breaking applicant pool of more than 63,000 students, the largest private university applicant pool in America! This year, NYU welcomed the largest African-American, Latino, and international communities in its history, from more than 120 countries around the world.

Our College’s students come from all around the country and globe—to obtain a world-class education and gain clinical experience in the heart of New York City. Future nurse leaders and current undergraduates Mildres Aguirre, Rachel Brunelle, Jen Chong, Gillian Earl, Rachel Robins, Connor Ruppert, and Faizah Yeasmin, seen here, welcome you on your admission and look forward to meeting you in the fall!

At NYU Meyers, we can’t wait to meet all the future nurses in the Class of 2020, who were admitted among an exceptionally qualified group of applicants. Whether you have already achieved greatness or are on the verge of it, we saw something special in all of you and know you will make us proud when you arrive and every day thereafter.

American Cancer Society Event
PhD student Catherine Finlayson received a generous scholarship for her research on ovarian cancer.
The College formed a team to run a 5K this semester. Here are a few of the runners: Elvist Lleku, Katherine Leung, Lucia Bevia, and Oscar Magalong.

Clinical: NYU Hospital for Joint Disease
Teamwork makes the dream work! Hanah Geller, Shaunte Williams, Anghela Calvo, Melissa Dweck, Helena So, and Chloe Grabb attend clinical at NYU Hospital for Joint Disease.

Class of 2016
Class of 2016’s Gabriela Zarifa, Jennifer Freire, Corinne Hibbard, Katherine Cardell, Roseanne Hernandez, Elizabeth Klein, and Joann Jugarap bond during clinicals.

Finals Week
Corinne Hibbard and Anna Edelman ’16 power through finals week in the winter.

Asian Pacific Islander Nursing Student Organization
Students learn and share about Korean culture and identity.

Clinical: Bellevue Hospital
Students leaving clinical at Bellevue Hospital pose for a photo in front of the lobby’s Christmas tree.
Global Initiatives

APPOUNTS NEW DIRECTOR

In February 2016 Ann Bartley Williams joined the administrative staff at NYU Meyers, where she is leading Global Initiatives with a focus on integrating global activities with research and education.

For more than three decades, Williams worked as a nurse practitioner caring for persons with HIV/AIDS in the US. and abroad. She was the Helen Porter Jayne and Martha Prosser Jayne Professor of Nursing at Yale School of Nursing and Professor of Medicine in Internal Medicine at Yale School of Medicine from 1982–2010. In addition, from 1991 to 2010, she led the Connecticut AIDS Education and Training Center.

In 2010 Williams moved to the University of California Los Angeles where she was Professor and Associate Dean for Research. She retired from UCLA in October 2015 and resides now in New York City. She has been closely affiliated with Yale China Association for two decades and continues on their Board of Trustees and as Secretary of the Board.

Williams designed and conducted some of the earliest studies of AIDS among drug users, developing and testing interventions to decrease HIV transmission, improve gynecologic care of women living with HIV, and increase patient adherence to antiretroviral medication. Her home nursing intervention was recognized by the Centers for Disease Control as one of only eight evidence-based best practice interventions and has been adapted for use in China. Throughout the past 15 years, much of her work has been conducted in China and Vietnam.

In July 2013, she was inducted into the International Nurse Researchers Hall of Fame.

In addition to her clinical and scholarly work, Williams has demonstrated a commitment to the education and mentorship of the next generation of nurse leaders. While at Yale School of Nursing, she supervised more than 100 master’s and doctoral theses. Her former students and mentees currently occupy leadership positions in nursing practice, policy, and academia around the world. The HIV/AIDS Nursing and Symptom Management text Williams co-edited received the Nurse Practitioner Best Books of 1998 award and served as a template for nursing texts in Poland, China, and Vietnam. The training program addressing safe use of medical sharps developed for Chinese nurses under Williams’ direction in 1997 provided the impetus for revision of policies in that country on a national level and continues to be delivered under the auspices of the National Nursing Center of China.

Global Initiatives at the College is hiring teaching faculty in Rwanda. If you’re interested in working with us globally, please send an introductory email to nursing.global@nyu.edu.
WHY NYU
Dispatches from Future Nurses

Jessica Arzola
BS ’16

WHEN MY FATHER suddenly became ill, my immigrant, Spanish-speaking family experienced fear, worry, and confusion about his hospitalization. We were completely vulnerable to the culture of biomedicine. It was then that I finally understood the meaning of trust, as that was what I felt towards the nurses who cared for him. The nurses were our educators, our healers, and our advocates, all at my father’s bedside. Since the young age of 14 I attempted to mirror the nurses while caring for my dad at home. And though my attempts were minimal in nature, the healing process was one that intrigued me, and thus, leading me to pursue a career in nursing.

When considering my undergraduate options, I wanted to seek an environment that would both challenge and support me, and essentially mold me into the best nurse I can be. I chose NYU because I wanted to meet patients, classmates, and faculty members from all around the world. I wanted to learn about complex disease processes while still learning about social inequalities. As a nurse in training, it was important for me to not limit my care to a treatment plan, but rather to address the question: What do you go home to?

If there is anything I am most proud of, it’s the fact that my education has not been confined to that of a classroom. I have had the opportunity to lead college application workshops in various boroughs in order to increase the number of students from marginalized communities on college campuses, to be invited to patients’ homes with open arms as part of my community home visits, to interact with locals while studying abroad in Florence, Italy, and to lead my own service trip to Atlanta, Georgia to visit and deliver services to individuals burdened by chronic disease. Because of patients I have interacted with, the challenging discussions I have taken part in, and all my experiences around the world, I have become familiar with a variety of cultures, customs, and individualized needs. I am a student, an aspiring nurse, but above all, a patient advocate—regardless of who the patient is and where they call home. I still recall the day I left my hometown four years ago, with nothing but a suitcase and a family heirloom for good luck. After commencement, I can personally attest to the validity of the unique characteristics that make up NYU. Because of my training here, I am graduating with a changed mind, a warm heart, and a desire to do good, to heal, and most importantly, to lead.

I want to lead teams, provide equitable care, serve my community in Los Angeles, and most importantly, receive my nursing pin from the first person I gave care to—my father.
Tyree Mobley  
BS ‘16

**WHILE IN HIGH SCHOOL,** I often pictured myself launching a career in healthcare, but I never imagined entering a predominately female profession. After months of researching different career choices, I knew nursing was for me. It was almost instinctual. Becoming a nurse would challenge me, require me to think critically, and most importantly, reward me personally.

As a nurse, you’re a leader in patient care and your actions can truly make the difference between life and death for your patient. Nurses are on the front line and that’s exactly where I wanted to be. As a kid, helping others was gratifying, but as a young man, having the ability to impact and change someone’s life positively on a daily basis is what pulled me into nursing.

I’ve always had my sights on attending NYU. My mom has worked at NYU for 18 years at our very own Student Health Center. I’ve been affiliated with the University since I was a boy and I honestly never pictured myself attending any other school.

When I was ready to apply to college, NYU Meyers was my top choice. I knew this was a school of prestige and innovation and offered a rigorous academic program. One of the things I loved about NYU Meyers was its focus on academics as well as its clinical rotations. I was extremely excited to know that the College spent just as much time on fostering academic progression as they did on developing nursing skills. I knew I would be well-prepared for nursing after attending.

The College was the right choice for me—because of the connections I would be able to make and the opportunities I would be presented with just by being here. The nursing BS program would prepare me for the NCLEX exam, prepare me to be a graduate nurse, and expose me to some of the best hospitals in New York City where I could connect and network.

Although while in high school I spent quite some time researching careers, the decision wasn’t too difficult. Nursing instantly stood out to me far more than any other career, and it was one that I felt would satisfy both my wants and needs. Attending NYU was always a goal of mine. Soon enough I will realize that goal.

Laraine Chiu  
BS ‘11, MS ‘16

**IN THE SUMMER OF 2015,** I was invited to attend the Millennium Campus Network Conference at the UN on behalf of NYU, which gathered 500 student leaders from more than 50 countries, to launch global campaigns to support new sustainable development goals on climate change.

Because of my attendance, in collaboration with the student senators’ council, the College’s student government and student interest groups, as well as University-wide student organizations, we have since sought to engage, challenge, and empower all students to join a global campaign. The charter of this campaign is to eradicate extreme poverty and hunger, improve health services, save our environment, prevent deadly diseases, and expand educational opportunities in our nation and around the world.

In an effort to spread awareness about the resources and opportunities available to students to achieve those goals, this year we hosted the first Global Initiatives Program at NYU in the Global Center on campus to welcome guests from the UN. We discussed with them current initiatives being implemented on campus towards the goals presented at the UN conference I attended.

As an open campus in the heart of New York City and a leading university throughout the world, NYU fosters a dynamic learning environment for student innovators and entrepreneurs seeking interprofessional development. Only at NYU is this type of entrepreneurial experience possible and I’ve been fortunate to take part in it through my work on the Global Initiatives Program.

I was first welcomed as a freshman in the fall of 2007 by Dean Knowles at orientation. I have hardly left since and will be graduating with my master’s degree in May, after working as an RN for several years. I now can say, as a nurse leader, that I am on the frontlines of global health and global education, and that my professional success was born out of my time at NYU.
In the eight months since I’ve become the president of our Alumni Association, I’ve thoroughly enjoyed meeting and interacting with so many of our students, faculty, and fellow alumni.

In that time period, there have been some significant changes within the University—most notably the appointment of NYU’s 16th president, Andrew Hamilton. He stepped into his role as president on January 1, 2016 and comes to NYU from Oxford University where he was vice chancellor for six-and-a-half years. Prior to that he was provost at Yale.

President Hamilton is already making some major changes. One of the first issues he has chosen to address is affordability for students, a major challenge at NYU and at most universities across the country. He has proposed the following changes for the 2016-17 academic year:

• For most of its undergraduate programs, NYU will reduce its planned increase in tuition and fees to 2.9% from a typical range of 3.5–3.9% annually.

• NYU will freeze housing and meal plan costs on the New York campuses at the current year’s rates.

• NYU will freeze the University registration and services fee.

• NYU will convert an additional 600–700 student rooms to lower-cost housing, increasing the pool of lower-cost housing by almost 50%.

The combined result of these actions will result in the smallest increase in cost-of-attendance (2%) in more than 20 years for most of NYU’s undergraduate programs. President Hamilton is also committed to addressing and improving diversity on NYU campuses. We say “kudos” to Andy Hamilton for making this issue a priority!

The NYU Rory Meyers College of Nursing Alumni Association has been hard at work developing programs to benefit our alumni, students and faculty. We’re working on a series of panel discussions called “The Road Less Traveled: Nontraditional Nursing Journeys,” which focuses on the many non-traditional professional avenues and career paths that nurses can choose to follow. The inaugural panel discussion, which was held on March 8, focused on alternative nursing careers. The panelists were Elizabeth A. M. Barrett, PhD ’83, RN, FAAN; Rebecca Zack Callahan, BS ’06, MSN, WHNP-BC; Barbara Cohen, PhD, JD, RN; and Susan R. Silverman, MSN, MBA, all of whom use their nursing education and background to practice in non-traditional ways. The program was a tremendous success with about 60 attendees. We plan to hold two of these events each year in the fall and spring.

With graduation right around the corner, we look forward to welcoming another group of new alumni into the fold of the Alumni Association. On behalf of the Alumni Association, we extend hearty congratulations to all of our new grads.

So many of you do such wonderful, interesting things, and we would love to hear about them, so don’t forget to send us your news. We also need your feedback and participation so that our Nursing Alumni Association can continue to be a vibrant and dynamic organization dedicated to the needs of our alumni.

If your contact information has changed, please remember to go to nyu.nursing.edu to update us so that we can continue to communicate with you.

Thinking ahead, please mark your calendars for Saturday, October 22, 2016—the next NYU Alumni Day. I wish you a wonderful spring and summer and please stay connected,

Penny Manegan Klatell
PhD ’75, MA ’71
Alumni Association President
The College wants to keep in touch with its former students! Please be sure your current email address is on file by emailing Brad Temple at brad.temple@nyu.edu.

1982

Mary Ann T. Donohue-Ryan
BS ’82 has been named chief nursing officer of Englewood Hospital and Medical Center. She is a former president of the New Jersey State Nurses Association.

1984

Harriet Feldman
PhD ’84, dean of Pace University School of Nursing, was recognized for excellent service at AACN’s spring meeting.

1987

Joyce P. Griffin-Sobel
PhD ’87, RN, CNE, ANEF, FAAN, who has more than 25 years of experience in academic nursing, has been named dean of the College of Nursing at Washington State University, effective May 2016.

1992

Jo Anne Bennett
MA ’78, PhD ’92 deployed with CDC Ebola Response Team to Guinea for four months last spring and summer along with three colleagues from New York City Department of Health & Mental Hygiene, where she is a senior research scientist. Bennett worked with Guinea Ministry of Health, WHO, professional associations, and survivor networks on strategic planning and policy implementation related to triage, infection control, community outreach, and organizational development. She was a member of the first Rapid Response Team for case investigation of hospitalized patients.

2006

Amy Berman BS ’06 received the Grantmakers in Health 2016 Terrance Keenan Leadership Award in Health Philanthropy.

2007

Hongsoo Kim
PhD ’06, ADCRT ’07 is on leave from Seoul National University Graduate School of Public Health after receiving the Fulbright Mid-career Research Award.

2009

William Rosa
BS ’09 is spending this 2016-2017 year living and working in Rwanda as Visiting Faculty in the School of Nursing & Midwifery, University of Rwanda and ICU Clinical Educator, Rwanda Military Hospital. He currently writes a weekly newspaper column in Kigali for The New Times: Rwanda’s Leading Daily on integrative approaches to health and wellbeing. He has recently published peer-reviewed articles in journals such as LGBT Health and Nursing Science Quarterly, and currently has publications scheduled for American Nurse Today, Advances in Nursing Science, Journal of Holistic Nursing, and the International Journal for Human Caring. His book, Nurses as Leaders: Evolutionary Visions of Leadership will be released by Springer publishing in June 2017.

2010

Samantha Amendola
RN, BSN, CMSRN 10 started her career as a clinical nurse on a medical/surgical unit at Saint Francis Hospital in Roslyn, NY. She was recently promoted to Assistant Nurse Manager within St. Francis Hospital on another medical/surgical Telemetry unit.

2014

Kathleen Broglio
DNP ’14 has taken a nurse practitioner position in the palliative care department at Dartmouth Hitchcock Medical Center.

Kelly Scott
MS ’14 was named employee of the month at Robert Wood Johnson University Hospital in Somerset, NJ. Her compassionate approach with patients and staff has garnered her respect and admiration from the team and administration there.

CONTINUED ON PAGE 36
A The dedicated space in the Nursing Welcome Center that will carry Diane McGivern’s name, photo and plaque.

B Donors, family, friends, alumni, faculty, and students celebrate the dedication with a champagne reception.

C Anna Punzalan Smyth, MS ’12, chats with current student Michael Emery at an inaugural reception for the MS in Informatics program.

D Nadia Sultana, nursing informatics program director, and Dean Sullivan-Marx take group photo with students and alumni.

E Left to right: Alicia Volk, Gail Melkus, associate dean for research; and Dean Sullivan-Marx

F Board of Advisors member Rachel Eakley, MA ’12 GSAS, BS ’14, current MS student, chats with development team.

G Laurie Jeffers was one of many new faculty members recognized at the Board of Advisors Holiday Dinner.
Q&A following Mary Giuffra’s presentation at the Distinguished Alumni Lecture

NYU Meyers Alumni Association 2015 Rising Star Award recipient H. Kathy Lee, BS ’10, shows off her new prize.

2015 Distinguished Alumni Award recipient Mary Giuffra, MA ’68, PhD ’73, with Dean Sullivan-Marx

Dean Sullivan-Marx introduces a faculty panel discussion on palliative care featuring Dorothy Wholihan and Ab Brody, BA ’02 CAS

Left to right, back row: Penny Klatell, MA ’71, PhD ’75, NYU Meyers Alumni Board President; Michael Polan, BS ’16; Dean Sullivan-Marx; Maria Vezina, MA ’77; Sally Marshall, Director of Development. Left to right, front row: Mary Giuffra, MA ’68, PhD ’73, 2015 Distinguished Alumni Award recipient and her husband Robert Giuffra, Sr.; Deb Chyun, executive associate dean
Rona Levin, PhD ‘81, center, director of the DNP program, celebrates with faculty and alumni on December 8.

Future graduates, family, and friends watch the valedictory address.

A newly minted alumnus joins the ranks and receives his nursing pin at the annual Valedictory Breakfast.

Alumni Board President Penny Klatell, MA ‘71, PhD ‘75, addresses the graduating students and soon-to-be members of the Alumni Association.
Bridget McCurtis, assistant vice provost for diversity initiatives, speaks at the 25th Annual Estelle Osborne Legacy Celebration.

2016 Estelle Osborne honoree Nellie Carter Bailey, MA ‘80, stands with Dean Sullivan-Marx and former Estelle Osborne Recognition Award recipients, left to right: Blanche Jordan, BS ‘45; Jamesetta Halley-Boyce, MA ‘73; and Gloria Essoka, PhD ‘82.

Students from all programs deliver speeches at the awards reception.

Professor Madeline Naegle accepts the Rose and George Dowal Award for Excellence in Nursing.

Current students excited about the opportunity to celebrate with their community!
CONTINUED FROM PAGE 31

2015

Regina Alexander  BS ’15
graduated and is now a nurse on the cardiothoracic surgery unit at NYU Langone Medical Center. In 2015 she received the Future Nurse Leader Award from the American Nurses Association-NY and an NYU President’s Service Award.

Eileen Healy  PMCNI ’15
co-authored a chapter in the Essentials of Nursing Information with colleagues from Saint Louis University, where she also teaches in the DNP program online.

ALUMNI

1979

Judith Baigis,  BS ’68, MA ’70, PhD ’79, RN, FAAN, professor emerita of nursing at Georgetown University School of Nursing & Health Studies, passed away on Saturday, January 2, after a courageous battle with pancreatic cancer. She was 74. She joined Georgetown’s faculty in 1992 and served as interim dean of the then-School of Nursing from 1998-1999. Baigis retired from the Georgetown nursing faculty in 2011, but remained very active.

Additionally, Baigis served on several university bodies, such as the University Committee on Rank and Tenure, the Main Campus Executive Faculty, and the Faculty Senate. She also acted as a research participant advocate for the Georgetown-Howard Universities Center for Clinical and Translational Science (GHUCCCTS). During her career, Baigis, who was a public health nurse, led several grant projects funded by prestigious organizations including the National Institutes of Health, the Robert Wood Johnson Foundation, and the Helene Fuld Health Trust. She served as principal investigator on two federal R01 grants focused on HIV/AIDS. Baigis published scholarship in her field, was active in professional circles, and taught courses in health policy, public health, nursing research, and nursing care of vulnerable populations. She was a fellow of the American Academy of Nursing and a member of the American Public Health Association. For her long-term contributions, Baigis was recognized with the Outstanding Service Award at Georgetown University Medical Center’s Convocation Ceremony in 2011.

Following her retirement, Baigis and her husband traveled to Uganda as part of Academics Without Borders Canada. Baigis was very proud of the work she did with Aga Khan University, which allowed her to collaborate with faculty colleagues on lesson planning and pedagogical strategies, as well as preparing scholarship for publication. Baigis’ family has requested that contributions be made to the American Cancer Society Hope Lodge Jerome L. Greene Family Center.

1980

Maureen DeMaio  Esteves, PhD ’80, associate dean at Rutgers School of Nursing, passed away on January 16th after a heroic struggle with illness. Maureen is the daughter of Dr. Dorothy DeMaio, also an NYU alumna and dean and professor emerita at Rutgers School of Nursing.

Esteves joined Rutgers in September 1980 as a member of the nursing faculty at the then-Rutgers College of Nursing. Esteves held several key posts including director of the undergraduate program, assistant dean for undergraduate education, and associate dean for undergraduate education. At the time of her passing, she was leading the nursing school’s initiatives commemorating Rutgers’ 250th anniversary.

In lieu of flowers, the family requests that memorial donations be made to:

Dr. Maureen DeMaio Esteves Generic Baccalaureate Memorial Scholarship Fund Accounting Department Rutgers University Foundation 120 Albany Street Plaza, Suite 101 New Brunswick, NJ 08901

2016

Florence E. Leighton  BSN, RN-BC, PsychNP ’16 presented on PTSD research at NYU Medical Academy of Medicine in November 2015. Her work emerged from a secondary prevention project she completed for her Foundations in Psychiatric Advanced Practice Nursing course.
Sarah B. Pasternack

Sarah B. Pasternack, MA ’73

For 26 years, Sarah Pasternack held various nursing management and patient safety leadership roles at Boston Children’s Hospital. She graduated from NYU with a master’s in Parent-Child Nursing with a minor in teaching nursing in higher education. Sarah was an assistant professor at Boston University School of Nursing for several years and also a clinical assistant professor at Simmons College in Boston, MA. Over her 45-year career, she held positions as staff nurse, staff development educator, and clinical nurse specialist. Pasternack is author of a number of journal articles and nursing textbook chapters and an editor of a pediatric nursing textbook.

Although she is now retired, Pasternack’s passion for the nursing profession continues. She has served as president of The Nursing Archives Associates, History of Nursing Archives, Howard Gotlieb Archival Research Center, Boston University, since 1999. She is enthusiastic about the History of Nursing Archives’ current international initiative to digitize Florence Nightingale’s letters and make them available to all on the web.

A member of Sigma Theta Tau International, Pasternack currently serves as the Archivist for Theta-at-Large Chapter (Boston University—Curry College—Simmons College). Pasternack was honored by ANA of Massachusetts in 2014 with the Living Legend Award.

Sarah B. Pasternack

“I received a wonderful graduate nursing education at NYU. My bachelor’s degree was not from an accredited program, so when I first inquired about a graduate nursing program I was concerned that I might not be accepted. I made an evening appointment in 1969 with the late Professor Joan Hoexter to discuss my possibilities before applying. My previous collegiate program was rather impersonal, so I was not prepared for the highly personal attention I received at this initial appointment with Dr. Hoexter. Not only did she encourage me to apply, she explained the process of completing the necessary prerequisite courses prior to beginning graduate study and answered all of my questions. She gave me her patient attention as if she had nothing else more important to do that evening. That first impression of the Division of Nursing Education—as it was called back then—was so positive that I instantly felt drawn to study at NYU.

I began taking some of the pre-requisite courses just around the time Dr. Martha Rogers was preparing to publish An Introduction to the Theoretical Basis of Nursing and had the advantage of being exposed to Dr. Rogers’ thinking early in my academic program. In fact, mimeographed copies of her chapters were distributed in some of my courses. Although her concepts were very different from my previous education, I was intrigued about them in the context of nursing practice.

The nursing education I received at NYU prepared me well for positions in collegiate nursing education and for several years of leadership positions in the clinical setting. I had the good fortune to have had faculty such as Martha Rogers, Erline McGriff Joan Hoexter and Mary Giuffra during my course of studies. These nursing leaders had such a wealth of knowledge, which they generously shared, and they inspired me to reach for high achievement.

I was often cognizant that I was drawing on my NYU nursing education as I approached both the challenges and opportunities with which I was presented over the course of my professional career. My NYU education has taken me far in my profession and in professional organization leadership.

The need for well-educated and expert nurses is expected to increase sharply over the coming decades. I give because I believe NYU Meyers provides the very finest nursing education at all levels and I want to help provide scholarships and support for the College to enable qualified students obtain an outstanding nursing education.”
Rory Meyers College of Nursing would like to say “thank you” to the members of the Leadership and Dean’s Circles, who generously support the College in its commitment to excellence in nursing research, education, and practice with annual gifts of $1,000 or more. These gifts provide financial assistance for students, enable the College to recruit distinguished faculty, and allow us to develop innovative solutions to emerging needs in healthcare.

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