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# FROM THE DEAN WHERE WE LIVE, LEARN, INNOVATE, AND DREAM



East Baltimore is a main character in the Johns Hopkins School of Nursing’s story because it’s where we began and will always remain. The founding documents in 1873 signaled a powerful commitment to the health of the people in our neighborhood. And since then, our school has trained top-notch nurses and expanded human knowledge to provide care in the hospital and throughout the community to improve health where people live their lives every day.

It’s why in this issue of *Johns Hopkins Nursing*, we reintroduce *We Are All East Baltimore*, an ongoing collection of impactful stories of our students, faculty, staff, and alumni, with beautiful photos taken throughout our part of the city. This series will continue to illustrate the diversity of our school and how nursing should reflect the people of Baltimore, and the backgrounds, experiences, and cultures of all communities we serve.

Even in our newest ventures, including a space nursing curriculum, we know commitment to community will be front and center, because no matter where in the universe our populations exist, our priorities will remain the same—to use nursing leadership for the health and good of all people.

Nursing is indeed changing the world, and now is our moment. With feet on the ground or on the moon, and with a fifth consecutive No. 1 ranking by *U.S. News & World Report* under our belt, we learn the importance of advocating for people, understanding the goals of a society, and how technology and innovation, with a person-centered approach, can broaden our reach and strengthen our impact.

As you read this issue, I hope you sense just how strong our community commitment is, and that all of us play a part. We are leaders, we are Hopkins Nurses, and We Are All East Baltimore.

**Sarah Szanton**  
PhD, RN, FAAN  
Dean, Johns Hopkins School of Nursing  
Patricia M. Davidson Professor for Health Equity & Social Justice



# 18 Warm, Fuzzy Memories of Ecuador

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*Fifth year at No. 1; White Coat Ceremony; Excellence in Teaching Awards; We Are All East Baltimore; and more.*

Photographer Daniel Martinez, new to East Baltimore and JHSON, captures both the grit and the beauty of our neighborhood (Page 16).

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NEWS FROM AROUND THE SCHOOL



# No. 1 Master's and DNP for 2023

For the fifth consecutive year, the Johns Hopkins School of Nursing (JHSON) is the No. 1 accredited master's nursing program in the country, according to *U.S. News & World Report 2023* rankings. The school's Doctor of Nursing Practice (DNP) also ranked No. 1, moving up one spot.

"This is an extraordinary accomplishment," says JHSON Dean Sarah L. Szanton, PhD, RN, FAAN. "Not only do these rankings speak to our unyielding commitment to inclusive excellence, but also our leadership in both education and the evolving landscape of health."

In specialty areas, the school ranked:

**No. 1 in Nurse Practitioner: Adult Gerontology Primary Care—DNP**

**No. 1 in Nurse Practitioner: Adult Gerontology Acute Care—DNP (tied)**

**No. 2 in Nurse Practitioner: Pediatric Primary Care—DNP (tied)**

**No. 3 in Leadership—DNP**

**No. 3 in Nurse Practitioner: Family—DNP**

**No. 4 in Nurse Practitioner: Pediatric Acute Care—DNP**

The mission of JHSON is to improve the health of individuals and diverse communities locally and globally through leadership and excellence in nursing education, research, practice, and service. The school offers an all-graduate

curriculum that emphasizes leadership across all levels and unparalleled opportunities to further nursing's role in innovation, policy, advocacy, entrepreneurship, community and global health, business, administration, and more. JHSON has earned distinctions as a HEED Award recipient for commitment to diversity for four consecutive years and a Best School for Men in Nursing for three.

JHSON continues to make significant investments in digital and immersive learning opportunities for students, including virtual reality simulations, online classes, and the creation of the Center for Immersive Learning and Digital Innovation. The school also launched a Psychiatric Mental Health Nurse Practitioner track in the DNP program set to begin in fall 2022.

The *U.S. News & World Report* rankings are determined by weighing factors including peer review, acceptance rate, student and faculty ratio, faculty practice, and research funding, among others.

As for its global standing, JHSON is currently ranked No. 3 by *QS World University*.

"Every person at the School of Nursing is important to fulfilling our mission," says Szanton. "It's because of our outstanding staff, faculty, students, alumni, supporters, and friends that we received top ratings across the board in peer assessment, student success, faculty practice, research, and more." ■

**High fives all around:** Students and staff celebrate a fifth consecutive year atop the *U.S. News & World Report* rankings. Watch as Dean Sarah Szanton gets into the act at [MAGAZINE.NURSING.JHU.EDU/HIGH5](https://magazine.nursing.jhu.edu/high5).



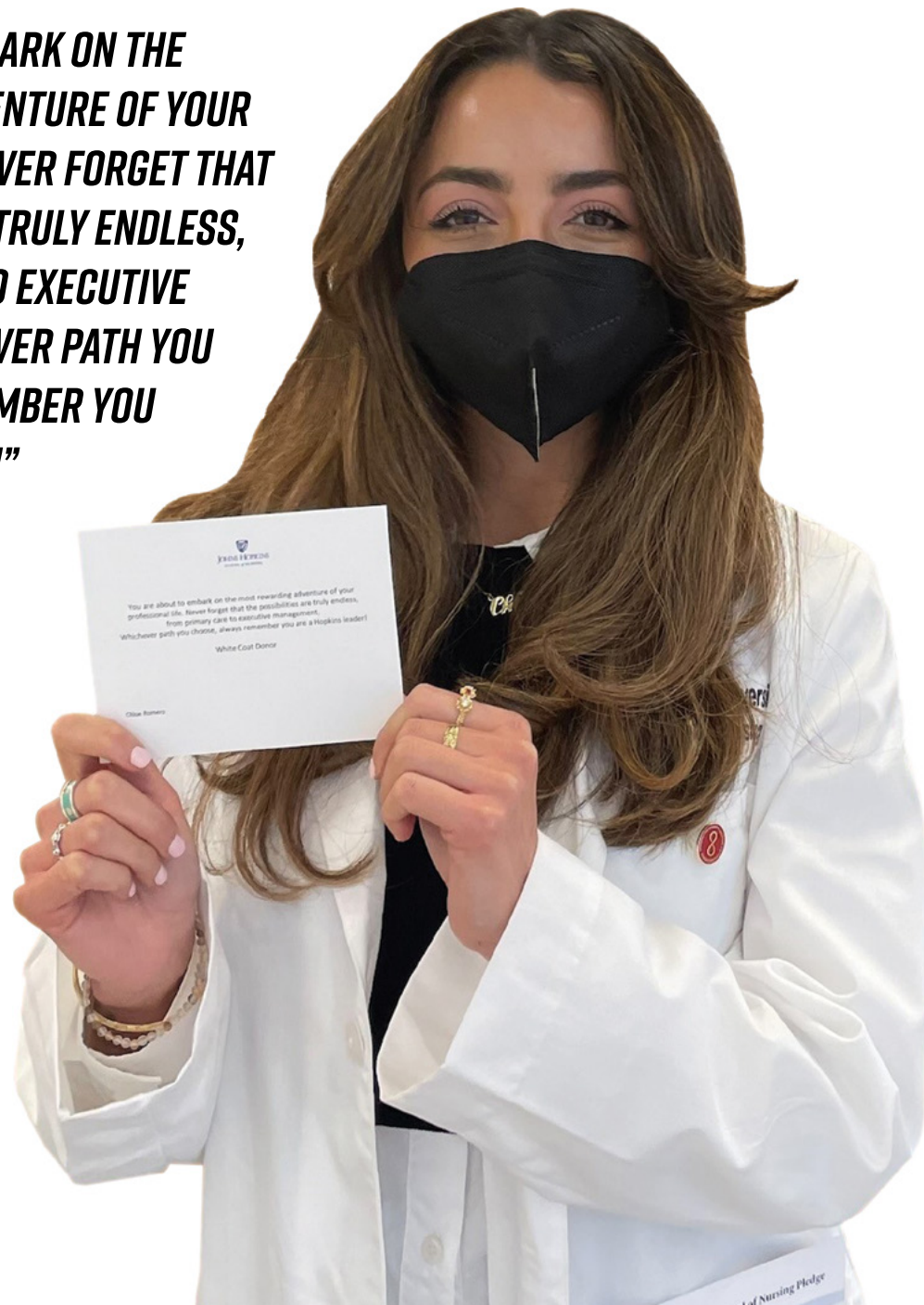
# THE WHITE COAT

On these pages, MSN (Entry into Nursing) program students show off the white coats gifted by Johns Hopkins School of Nursing donors to celebrate the start of their nursing journeys.

See more white coat images and many more snapshots from the life of the school at [FLICKR.COM/PHOTOS/HOPKINSNURSING/ALBUMS](https://www.flickr.com/photos/hopkinsnursing/albums/)

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## PhD Student Joins Bouchet Honor Society

Nursing PhD student Lea Marineau has been selected as a 2022 inductee into the Edward A. Bouchet Graduate Honor Society, established to recognize and continue Bouchet's pioneering contributions to doctoral education.

"We believe that you exemplify the five Bouchet qualities of scholarship, leadership, character, service, and advocacy for those traditionally underrepresented in the academy," wrote Nancy E. Kass, Johns Hopkins University vice provost for graduate and professional education, in her letter of congratulations.

Named for the first African American in the United States to receive a PhD, the Edward A. Bouchet Graduate

Honor Society was co-founded in 2005 by Yale University—where Bouchet, a physicist and educator, earned his doctorate in 1876—and Howard University.

Johns Hopkins was inducted as an institutional member of the Bouchet Graduate Honor Society in April 2018.

Previous Johns Hopkins School of Nursing inductees include PhD-DNP student Emerald Jenkins (2021), PhD student Kelley Robinson (2020), and PhD alumnus Sabianca Delva (2019). ■

## Bloomberg Distinguished Professor Brings Expertise on Disparities and Childhood Obesity

Eliana Perrin, MD, MPH, a nationally recognized leader in patient-oriented primary care, childhood obesity, and health disparities research, recently joined Johns Hopkins University as a Bloomberg Distinguished Professor with appointments at the schools of Nursing and Medicine (Department of Pediatrics).

Perrin has developed, tested, and disseminated many tools to help pediatricians prevent and treat obesity. Her research focuses on what pediatricians can do during well-child checks to support parents in helping children grow up healthy, and her groundbreaking work has had a broad impact on an epidemic that affects 1 in 3 children in the United States.

Perrin has spanned qualitative and quantitative methods and topics—from inflammatory markers in neonates to developing and testing color-coded growth charts to the influence of messages in children's movies—to understand the many facets of childhood obesity and health correlates, particularly focusing on disadvantaged communities. She founded Duke University's Center for Childhood Obesity Research and, with colleagues, created, led, and researched "Greenlight," a low-literacy primary care program to prevent obesity in young children, starting at infancy. ■



## 2022 Excellence in Teaching Awards

Each year, the Johns Hopkins Alumni Association's Excellence in Teaching Award honors faculty members who have consistently demonstrated outstanding teaching skills, including preparation, organization, thoroughness, knowledge of subject, feedback, creativity, and inspiration. Recipients receive an award from JHAA and are recognized during a schoolwide event.

The 2022 Excellence in Teaching Award recipients (quotes are from student voters):

**Assistant Professor Jennifer Milesky, DNP, MSN, RN**—"Dr. Milesky personifies nursing science. She is skilled at breaking down complex topics into easy-to-understand explanations that are interesting and exciting. You can tell that she loves teaching, loves her students, and loves the material."

**Associate Professor Nicole Warren, PhD, MSN, MPH, RN**—"Dr. Warren] is incredibly passionate and actually cares about students learning and understanding of curriculum! She challenges you to think critically, and is so warm and inviting." ■



Jennifer Milesky, DNP, MSN, RN



Nicole Warren, PhD, MSN, MPH, RN

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A JOHNS HOPKINS SCHOOL  
OF NURSING PODCAST**

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ON THE PULSE



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# Society to Cells

*Highlights in published research*

*from experts at the Johns Hopkins School of Nursing*

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## Have You Hugged Your Preceptor Today?

Ask nursing preceptors why they make the effort and the (most often unpaid) time, and many will cite “passion for teaching students” or “professional obligation.” Those who don’t serve as preceptors—or don’t anymore—cite the effort and the unpaid time. They could add work constraints ... perhaps even fatigue over being constantly pressed to do so by nurse practitioner programs and colleagues.

It’s a tough situation on all sides. An American Association of Colleges of Nursing review of advanced practice registered nurse education reported that over 60 percent of schools with nurse practitioner programs expressed extreme concern over a shortage of preceptors combined with the limited number of clinical sites and NP faculty, leading programs to turn away qualified applicants. This plays out while the demand for advanced practice nurses soars.

So NP programs have only further emphasized the search, spreading the burden among faculty to find appropriate preceptors for their students, with some faculty spending 90 percent to 100 percent of their role on clinical placements.

In “What Motivates Our Practice Colleagues to Precept the Next Generation?” (*Journal for Nurse Practitioners*), Johns Hopkins School of Nursing faculty members Susan Renda, DNP, RN, FAAN, Marianne Fingerhood, DNP, ANP-BC, Karan Kverno, PhD, PMHCNS-BC, PMHNP-BC, Tammy Slater, DNP, CRNP, Kelly Gleason, PhD, RN, and Michal Goodwin, PhD, MS, RN, FAAN—several of them seasoned preceptors themselves—sought

to establish the needs and motivations of JHSON preceptors and build a clearer picture of how to foster ever more of these crucial relationships. “NP students who work with well-prepared preceptors during their clinical experiences are more likely to contribute effectively to patient care in the future,” the authors explain.

Yet it’s a bit daunting: “Until there is federal funding for graduate nursing education (as it exists in the medical model, Medicare spends more than \$15 billion annually on graduate medical education for medical students), schools of nursing will continue to rely heavily on preceptors as clinical partners in the education process,” they write. “Remuneration will remain an issue, especially because physician preceptors are accustomed to reimbursement for teaching. Nurses are less likely to ask for remuneration because they are more familiar with the not-for-payment model, appreciate the need to grow the workforce to meet demand, and recognize the intrinsic benefits of precepting on a personal level.”

So more incentives must be found on that level, the authors explain. Maybe not open checkbooks, unfortunately, but at least open arms: “One implication from the findings is that schools of nursing can demonstrate appreciation and promote preceptors’ development and engagement by improving preceptor access to faculty mentors and educational resources. The development of preceptor competencies enhances the preceptor as an extension of the faculty.” ■



## Teaming Up for a Win on IPV

The couple that plays together stays together, or at least stays safe.

That’s the idea of Paradise, an immersive app developed at Johns Hopkins that brings cutting-edge storytelling to confront intimate partner abuse, with the knowledge and experience of Johns Hopkins School of Nursing Professor Nancy Glass, PhD, MPH, MS, RN, FAAN, firmly behind it.

Paradise uses game-like AI interactivity to explore why couples stay together or fall apart. Sex, drinking, and money are among the frank topics discussed. The overarching aim: to educate participants about the complexities of intimate partner violence. “We need to try something new and meet people where they are,” explains Glass, who has spent 30 years developing educational programs aimed at stopping intimate partner violence (IPV). “We just can’t always expect people—especially young people—to come in for group or face-to-face therapy.”

According to the National Coalition Against Domestic Violence, 10 million people in the United States suffer IPV annually and 20,000 calls are placed per day to domestic violence hotlines. Approximately 50 American women are shot to death by intimate partners each month, according to the Johns Hopkins Center for Gun Violence Prevention and Policy. The financial and emotional strains of COVID-19 have only caused such violence to spike.

Glass, credited as executive producer, oversaw Paradise’s content, making sure that all its

immersive theatrics remained grounded in public health research. “It’s pretty intense, very creative, and will get people talking,” Glass says of an experience that includes professional voice actors portraying relationships in various stages of unraveling, which may help participants reflect on their own pairings.

Paradise, available to the public, is a collaboration between artist/filmmaker Gabo Arora of the Krieger School’s Master of Arts in Film and Media Studies program, and Darkfield Radio, a British creator of audio programs. Arora calls Glass gutsy for embracing such a creative and tech-driven form of storytelling and is hopeful it will pay off. “I think so much of stuff in this realm is preachy, and not really making you think intimate partner violence is your problem,” Arora says. “But we’re all somewhere on the spectrum. It’s not only about physical violence but about control, and jealousy, and passive-aggressiveness, and a lack of communication—all these other things that play on a conscious and subconscious level.”

Users within healthy pairings should come away with a newfound understanding of the myriad reasons why the abused often remain in such relationships. “One constant question we hear is, ‘Why don’t they just leave?’ ” Glass says. “And so, this should help people better understand the complexities—the economic, emotional, and social things that weigh into each woman’s decision.” ■

Read the full article from *Johns Hopkins Magazine* at **MAGAZINE.NURSING.JHU.EDU/PARADISE.**





PHOTO BY DANIEL MARTINEZ

## Most Trusted Profession, 20 Years Running

Once again, and for the 20th straight year, there's no beating nurses when it comes to the annual Gallup survey in which Americans are asked to rate occupational groups as very high, high, average, low, or very low when it comes to honesty and ethics.

Gallup first conducted its Honesty and Ethics Poll in 1976 and has updated it annually since 1990. A handful of professions have been on the list every year, while Gallup asks about others periodically. Nurses were added to the survey in 1999. The latest poll was conducted December 1-16, 2021.

Nurses earned an 81 percent ranking of "very high/high" on honesty and ethics. Medical doctors were in second place, at 67 percent, with grade-school teachers (64 percent), pharmacists (63 percent), and military officers (61 percent) rounding out the top five most revered professions on the list.

The last time nurses weren't ranked the most trusted profession was in deference to firefighters in the aftermath of the 9/11 terrorist attacks of 2001. ■

## NP the Top Job in Health Care for 2022

It would not be much of a surprise to many in the Johns Hopkins Nursing community to find nurse practitioner atop the list of Best Jobs in Health Care for 2022 compiled by *U.S. News & World Report* and No. 2 when it comes to ranking both the Best 100 Jobs and Best STEM Jobs overall in the nation.

Put simply, NPs practice autonomously and collaboratively with other health care providers to perform assessments, order laboratory and diagnostic tests, diagnose, prescribe medications and treatments, and perform procedures within their authorized scopes of practice.

The Johns Hopkins School of Nursing offers many opportunities to become a nurse practitioner of a certain specialty, or for nurse practitioners to advance their nursing careers. Nurse practitioner is a professionally, personally, and financially rewarding job.

According to *U.S. News & World Report*, NPs earned a median salary of \$111,680 in 2020. The best-paid 25 percent made \$130,240 that year, while the lowest-paid 25 percent made \$94,890.

Registered nurse ranks at No. 5 on *U.S. News's* list of Best Jobs in Health Care. Nurse anesthetist is at No. 8.

Nurse anesthetists are advanced practice registered nurses who administer anesthesia and anesthesia-related services.

Nurses can become nurse anesthetists in the DNP Advanced Practice Track, Nurse Anesthesia program at Johns Hopkins. Current nurse anesthetists can earn a DNP or PhD; the career path will require a doctorate as of 2025. ■

Learn more about the many paths toward becoming a nurse practitioner offered by the Johns Hopkins School of Nursing at [NURSING.JHU.EDU/ACADEMICS](https://nursing.jhu.edu/academics).

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# WE ARE ALL EAST BALTIMORE

NEIGHBORHOOD IMAGES BY DANIEL MARTINEZ



The Johns Hopkins School of Nursing's relationship with East Baltimore is one born of geography, of course, but also history, need, common interest, and shared goals. From community care at the Wald Center and House of Ruth to health education and screenings for families the Henderson-Hopkins School to simple, open, everyday interactions on its streets, JHSON has worked to make East Baltimore, and all of Baltimore and beyond, a better place to call home.

It is why we see beauty and signs of hope in East Baltimore even (and perhaps mostly) at its grittiest—it is a neighborhood alive with color, strength, and possibility. It is why we love *We Are All East Baltimore*, the series of student, faculty, and staff profiles that continues within this issue. East Baltimore is our neighborhood. And we can only get better together. ■





PHOTO BY CHRIS HARTLOVE

## 'Hey, We Know Each Other Here'

*Community feel of Johns Hopkins  
Nursing brings back warm memories  
for Gurtler Scholar*

BY STEVE ST. ANGELO

### **The John R. and Ruth Gurtler Foundation Scholarship**

All admitted or enrolled MSN (Entry into Nursing) students who have served in the Peace Corps will be considered for the John R. and Ruth Gurtler Foundation Scholarship, established in memory of alumna Ruth Ward Gurtler '29, and awarded to one student each year. Learn more about financial aid and scholarships at the Johns Hopkins School of Nursing at [NURSING.JHU.EDU/FINANCIAL-AID](https://nursing.jhu.edu/financial-aid).

**H**alf the battle is just showing up, being open, and trying to make a difference. The rest? Alison D'Oleo-Lundgren will figure that part out as she goes: from East Hartford, CT, to Valencia, Spain, to Boston, MA, to Guayaquil, Ecuador with the Peace Corps, and now to East Baltimore, MD. "I'm adaptable, with support," she says of her journey to ... whatever awaits her out there.

Take the Peace Corps. It transports volunteers to places they've very likely never been before, and may never see again. Memories of the work that volunteers do to support existing local organizations outside the U.S. tend to stay with a returned Peace Corps volunteer (RPCV). But the sensory experiences of becoming part of these communities and families—a happy tradeoff for their service—can fade over time. And of course, beautiful, fresh memories and stories can inspire future volunteers.

So the organization suggests taking pictures, and especially videos. And it works, says D'Oleo-Lundgren, who spent her 2017-19 tour in and around Guayaquil, Ecuador's largest city. When she watches her own videos taken from a balcony above the bustling coastal city: "I can almost feel the warmth and the humidity and hear the sounds ... like New York City times 10—lots of beeping of cars, lots of yelling and shouting, not in an aggressive way but a 'Hey, we know each other here' way."

She can even taste the encebollado, a fish soup of tuna and pickled onions often served with fried plantains, hot sauces,

and mustard as a breakfast staple. D'Oleo-Lundgren initially recoiled at the idea of soup in the morning, then adapted, saved up all week to enjoy the \$4 delicacy on weekends, and still dreams of the stuff.

She doesn't necessarily need video remembrances of the people she got to know so well, the high schoolers to whom she taught sex ed or the sex workers who she helped stay safe and HIV-compliant, as required by local law. (That might be one of those former high schoolers on the phone with her right now. "They were so great. I told them they can reach out any time, and they do," explains D'Oleo-Lundgren.) As a side project, D'Oleo-Lundgren helped lead a more accessible exercise program for Guayaquil's older folks.

Language was rarely a barrier, aside from initial performance anxiety and a bit of "imposter syndrome," D'Oleo-Lundgren says. She grew up on colloquial Spanish as well as English, so proper "presentation" Spanish was still a reach. Her parents are divorced, with her father now back in his native Dominican Republic. Her mother at one point moved to Spain, dropping her daughter into a Valencia high school, sink or swim. Her new Valencian friends supported her on the all-Spanish essay tests. She helped them with English tests. Everybody wins. They, too, remain in touch.

As for how she ended up at the Johns Hopkins School of Nursing in January 2021, that too is a happy memory, one that got even better when, to her surprise and



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delight, D'Oleo-Lundgren was awarded a Gurtler Scholarship, offered to one student per year based on accomplishments achieved—and those yet to come. “It was the best kind of surprise. I will forever be grateful.” (As an RPCV, D'Oleo-Lundgren was also eligible for a Coverdell Fellowship and successfully sought a Fuld Fellowship in patient safety after hearing previous fellows rave about being able to research and actually see their policy changes implemented—on top of the networking opportunities it offers.)

Nursing wasn't originally in the plan. After high school, D'Oleo-Lundgren headed to Boston University as a pre-med student. “I was doing everything I could to go straight into medical school.” Then, during junior year, she took a class called Reproductive Anthropology. “It changed everything. It completely changed the way I saw reproductive health,” as well as how she wanted to deliver care in this newfound calling, as a nurse rather than as a physician, “to work as directly with people as possible.” And rather than straight to med school, she went straight to the Peace Corps. As in, “I graduated May 21 and was in Ecuador May 31.”

And by the time her Peace Corps tour was up, D'Oleo-Lundgren had a pretty good idea of the next step in her journey, at least the what part. She already had her bachelor's degree, and didn't want to mess around. “I wanted a degree that would get me right into the profession fairly quickly and prepare me to be the best health care provider I can be.” The where? “From living abroad and from moving so many times, I wanted a place that felt like a community. I wanted to feel supported.”

COVID had been raging, of course, and nursing schools were forced to close many clinical sites.

D'Oleo-Lundgren understood that it was through no fault of their own. “But Hopkins was still going strong,” she says. “And, honestly, during the virtual information sessions, I always, always left feeling like the admissions community genuinely cared about me. They wanted to support you through your application process. They wanted to recruit good nurses. ... We didn't know what 2021 was going to look like, but I knew that my best chances were going to be at Hopkins.”

***“I WANTED A DEGREE THAT WOULD GET ME RIGHT INTO THE PROFESSION FAIRLY QUICKLY AND PREPARE ME TO BE THE BEST HEALTH CARE PROVIDER I CAN BE.”***

Today, the Fuld Fellow's patient-safety project involves both critical care and cultural dexterity of providers. “I just fell into the most perfect project I could have found. ... One, I wanted to go into critical care, and now I have two supervisors who are in critical care. And I'm doing work about cultural competency. I come from a background of seeing my father not being able to speak English and needing to get care; people lacking that kind of ability to connect. That's always what I've been interested in. It's really cool.”

She's not sure yet where all this leads, but D'Oleo-Lundgren can't wait to find out.

Does she miss Ecuador? She always will. But it calls all the time, and she's got her videos: “It brings me right back.” ■



## Room to Breathe

*Tracheostomy expert Vinciya Pandian stretches limits on care, on education, on cooperation, and on expectations*

BY STEVE ST. ANGELO

**A**s a practitioner, an educator, and a researcher, Vinciya Pandian—assistant dean for immersive learning and digital innovation at the Johns Hopkins School of Nursing—has seen and studied tracheostomy from every angle but prone herself in a hospital bed.

Her calling wasn't subtle. In fact, it was a sound that drove others away.

In the early 2000s, Pandian took a job as a pulmonary nurse practitioner on a stepdown unit. There, she was exposed not only to patients having undergone intubation due to accident or illness (many waking up to a difficult surprise), but to the reactions of staff nurses to these individuals.

Tracheostomy care takes a certain type of nurse. It is tricky. Minor errors can be catastrophic, causing a patient to “code.” And the sounds made when suctioning the airways of these mechanically-ventilated individuals can be disturbing to the sensitive or inexperienced. “The nurses were afraid of dealing with these patients and avoided them,” Pandian explains. “So they were not getting the proper care.”

Pandian spotted an opportunity to lead and grow as a nurse. She decided to make herself an expert, no matter what it took. Then, she would teach the others. She took the lead not only in caring for the intubated patients but helping to establish training and hospital policy to address the issue permanently.

Today, Pandian, with PhD, MBA, MSN, ACNP-BC, FAANP, and FAAN credentials, among

others, has helped write the rules and set the standards in tracheostomy care, earning her standing as a global authority in these lifesaving interventions. She focuses on education to decrease caregivers' and family members' fears or hesitancy in order to give mechanically ventilated individuals the best hope of finding a new normal—making the most of every breath they've been given back—and developing tools to measure their quality of life and improve communication.

Contributions during the COVID pandemic, in which intubation has saved many thousands of the sick, have only cemented Pandian's status as a researcher and caregiver. It's extremely impressive, and almost as unlikely.

In the traditional, conservative community in India where Pandian grew up, a girl had precious little say in her future. Women are subservient, down to opening the car door for a man on outings, for instance. Daughters are packaged off into arranged marriages for the price of a proper dowry.

Pandian acquiesced to the norms of her community. Mostly. “It's my rebellious nature,” Pandian explains. “Whenever someone said I couldn't do something, I would push myself to show them up.”

For instance, when her father insisted she apply to medical school rather than pursue nursing (a field considered lowly in India), she simply applied to nursing school at the same time and was accepted into both. When the medical school gatekeeper demanded a bribe of 5 million rupees, a sum her dad did not have, Pandian began the nursing journey she preferred at Christian Medical College in Vellore, India.

(A year later, having sold off a rice paddy field, her father asked, “Do you want to try again?” Not for any amount of rupees.)

Likewise, Pandian worked to game the arranged marriage system, if just a little.

Read more profiles from the *We Are All East Baltimore* series at **MAGAZINE.NURSING.JHU.EDU/MEETUS.**

**SHE DECIDED TO MAKE HERSELF AN EXPERT, NO MATTER WHAT IT TOOK.**



Four suitors met her father's criteria. She dismissed the first two, who would demand that Pandian stop working. Tricked by her father into a meeting with a third unsuitable man, she snuck out of the home and disappeared. "I was a runaway bride," she laughs. "I wanted to go after my dreams, to control my own destiny."

The fourth proposal came from a man who had moved to the United States from India at age 4. Pandian pinned her hopes on the notion that a guy exposed to American norms might be more enlightened about women. They met in person, spoke openly about the "predicament" of arranged marriage for both sides, spent months "building trust" through international phone conversations, married in 1998, and have made the arrangement work.

Today, the couple have a 15-year-old son and Pandian is associate director of the Doctor of Nursing Practice-Executive

program and director of the Research Honors program at JHSON, is a tireless mentor to high school and college students interested in research, and has served as a director of practice, education, and research for the Johns Hopkins Airway Program that includes the multidisciplinary Tracheostomy and Difficult Airway Response Team programs. Pandian is editor of the *Journal of Clinical Nursing*, president of the Society of Otorhinolaryngology and Head-Neck Nurses and Ear, Nose, and Throat Nursing Foundation, and vice president of the Nu Beta Chapter of Sigma Theta Tau International.

[Pandian has also spearheaded the development of a space nursing program at JHSON. Learn more about that on Page 26.]

The only thing Pandian's unqualified for, apparently? Saying no to more work: Through years of practice, education, collaboration, protocol-writing, research, team-building, and administrative leadership, Pandian established herself as the go-to on "the whole package" of tracheostomy care—hence the MBA. So, she says, "Everybody called, at every hour of the day." As rewarding as that was, it was equally exhausting.

Pandian credits former Executive Vice Dean Marie Nolan, PhD, MPH, RN, FAAN, with helping her set boundaries and establish a place at JHSON where Pandian could be THE expert and expand on her research, but maintain her energy and enthusiasm while instilling similar drive into her nursing students as an associate professor.

Her quality of life affirmed, Pandian is back to improving it in measurable (and immeasurable) ways for tracheostomy patients and their families. ■



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**"I WAS A RUNAWAY BRIDE," SHE LAUGHS. "I WANTED TO GO AFTER MY DREAMS, TO CONTROL MY OWN DESTINY."**



# FRONTIER NURSING

STORY BY STEVE ST. ANGELO | ILLUSTRATIONS BY JESSIE LIN

*First chapters in a space odyssey being written at JHSON*

In this era of routine satellite launches, million-dollar joy rides to the edge of Earth's atmosphere, crystal-clear images direct from the dusty surface of Mars, and even a fiery "closeup" picture of our Sun, it seems nothing in the world could possibly slow human efforts to explore space, to live on other planets, to raise families and establish businesses, to boldly go where none have ever gone before. To infinity and...

Um, not so fast, Buzz Lightyear. Is that a limp?

“NASA has identified five key hazards to human health and performance in space: altered gravity, radiation, isolation and confinement, distance from Earth, and a hostile and closed environment (on the spacecraft),” write Associate Professor Vinciya Pandian, PhD, MBA, MSN, FAAN; MSN (Entry into Nursing) student Dorothy Coker; and colleague Mark Shelhamer, ScD, of the School of Medicine in “Nursing Care in Space—The Need for Nurses in the New and Evolving Field of Healthcare in Space” (*Journal of Clinical Nursing*).

Brittle bones, radiation exposure, optic nerve degeneration, emotional trauma, and—somewhere down the road—potential childbirth issues at Zero Gravity: These are among the many classic symptoms of a situation in which health care providers aren’t sure what to expect in human bodies with millions of miles on the odometer.

“These factors can cause a variety of health issues,” they write, “including heart and muscle atrophy and fluid shift out of the lower extremities due to weightlessness, neuro-ocular alterations and other difficulties possibly due to increased intracranial pressure, development of renal stones, urinary

tract infections, alterations in the gut microbiome, loss of bone mass and muscle strength, and depressed or altered mood. These issues can ... also cause long-term problems after flight.”

Luckily, nurses down here on Earth and specifically in East Baltimore, MD are laying the groundwork for whatever we’ll meet up there and—the key to the whole ball of carbon—how we’ll fix or treat it.

At the Johns Hopkins School of Nursing (JHSON), Pandian, who serves as assistant dean for immersive learning and digital innovation and director of the Center for Immersive Learning & Digital Innovation, has made a home for a nascent program to begin training a force of nurses ready for what comes next. “Nurses are the experts at care everywhere else. Why not space?” asks Pandian. It was Coker who, during an interview with Pandian for the Research Honors program, brought up the idea. “Oh my gosh, this used to be my dream,” Pandian remembers thinking in response.

In college, Pandian and a roommate, closet space nerds, would gaze upward and outward night

after night to ponder the vastness and beauty of the universe. But her nursing studies kept her grounded. “I was fascinated, but I didn’t take it too seriously,” she says. Then, at a 2014 Global Tracheostomy conference in London, she attended a lecture by the late physicist and author Stephen Hawking, whose theories on the Big Bang and black holes remain foundational. Hawking, wheelchair-bound and himself intubated after years of suffering from amyotrophic lateral sclerosis, nonetheless rhapsodized that day on the possibilities of space science. “When Stephen Hawking dares to dream, I did too.”

But again it went onto a back burner, until Coker showed just how serious she was about a collaboration. “And I went straight to [then Dean] Trish Davidson,” says Pandian.

Both credit Shelhamer, who runs the Johns Hopkins Human Spaceflight Lab, for his mentorship. Shelhamer, an expert in the study of astronaut adaptation to space flight, served as NASA’s chief scientist for human research at the Johnson Space Center from 2013-16.

## LAUNCHING PAD

In practice, it’s not so different from the old-timey notion of “frontier nursing,” a time when caregivers went by horseback, dog sled, or even by foot to remote parts of the United States (and even today, hard-to-reach parts of our world) to bring both healing and preventive medicine to the folks living and working there. It is that spirit of nursing—doing whatever it takes to offer the most people the most compassionate, equitable care—that drives the Johns Hopkins Nursing space project.

And in fact, nurses have been involved in aerospace medicine since before the existence of human spaceflight. Delores “Dee” O’Hara was a pioneer, often the lone nurse assisting with health maintenance of NASA astronauts on the ground in the 1950s, 1960s, and 1970s. Though she never left Earth, O’Hara earned the trust that would guide those in her care from the first human U.S. spaceflight programs (Project Mercury and Gemini), to the Apollo Program (Moon), to the first American space station (Skylab).

O’Hara’s observations and data from these missions plus records from the many flights that have followed offer nurses, physicians, and researchers a glimpse into what might await humans far beyond our atmosphere. And as missions have grown in length (up to one year on the International Space Station, say—or about half of what a trip to Mars and straight home would take, minus prep time), researchers have been able to witness how certain bodies react and recover from weightlessness and even how the mind handles the adrenaline rushes and the scares, the jubilation and the loneliness.

Much more a mystery are the accidents and ailments that might await: Broken bones, serious wounds, bonks on the head, unfamiliar infections. NASA-sanctioned trips are controlled down to the minute and feature professional astronauts trained to take most accidents out of the realm of possibility. And these manned trips to space have stayed (relatively) close to home. If the space race continues to accelerate, though, and your cousins Elon and Jeff start hopping the red eye to the Red Planet, that dynamic will change, and bad things will very likely occur very far from outside help.

## “NURSES ARE THE EXPERTS AT CARE EVERYWHERE ELSE. WHY NOT SPACE?”

So even while they consult the established map of what goes wrong and right on a typical spaceflight, Coker, Pandian, and their team of space nurses are beginning to build the curriculum that will prepare future nursing cohorts for the unknown, both the adventure and the misadventure.

“Space nursing could be defined as a specialty in which nurses use critical thinking and judgment to integrate objective data with subjective experience taking a holistic approach to managing symptoms and improving the well-being of individuals traveling into space,” Pandian and colleagues write in the *Journal of Clinical Nursing*.

For Coker and crew, this means “incorporating space nursing into the current curriculum ... adjusting what we have here on Earth to be applied in space at Zero G and in austere environments.”





## PACK LIGHT AND TIGHT

There's no getting around it: Every ounce of gear, medicine, and literature adds mass to a rocket's payload and will require extra thrust to move from a launchpad into outer space at full speed. And there's no going back for what you forgot.

So, in any space-bound medicine cabinet, every tool must literally carry its own weight and then some. Tools must supply their own power, be low-maintenance, self-explanatory, and built to last. Since there can be no extras, everything must be essential—covering the maximum number of contingencies. Like the early frontier nurses who often brought only what they could carry on their backs or sleds, nurses outfitting space missions will need to maximize ... space.

“That limiting factor is where nursing care, assessments, and skills are going to be particularly important,” explains Coker, who adds that the best course might be to replace what's in the first aid box with what's in the travelers' own memory banks. “Nurses can be part of the health care team that designs astronaut training programs to solve medical emergencies in space with limited resources. We have a unique approach to care, and our skills can lessen the need for or reliance on medical equipment.”

## EQUALITY AT ZERO G

We've got problems enough on Earth. Fix them first.

“These are really good points,” Coker admits. Yet, “You need the confidence to believe that

breakthroughs in space nursing can be helpful and applicable here on Earth.”

For JHSON's Space Nursing Interest Group, she seeks out similarly open-minded students. “It takes being open to really thinking about it, trying to see how nursing would fit, and exploring that. It is a little out there and there is not a lot of research in this field.”

And JHSON's pioneers are taking pains to keep equity part of the equation.

Pandian points to pre-existing conditions or risk factors that—even excluding the tremendous cost of tickets—could be used to dissuade or prevent certain groups from maximizing the opportunities of space travel. She uses high blood pressure as one example.

Just as they already do here on Earth, nurses can step in to: first, establish whether the risk is genuine. Second, counsel all parties on how to best neutralize these risks and any other concerns. So rather than being turned away, those with pre-existing conditions or prone to ailments such as hypertension might be counseled by nurses on best preparations to blunt any complicating factors during the trip.

And there very likely will come a time when nurses might accompany those who need hands-on care aboard the spacecraft, Pandian predicts. So, all aboard!

As for discoveries made by ours as well as other nations in space, an international agreement (the Artemis Accords) has been built—and signed by



**“SPACE NURSING COULD BE DEFINED AS A SPECIALTY IN WHICH NURSES USE CRITICAL THINKING AND JUDGMENT TO INTEGRATE OBJECTIVE DATA WITH SUBJECTIVE EXPERIENCE TAKING A HOLISTIC APPROACH TO MANAGING SYMPTOMS AND IMPROVING THE WELL-BEING OF INDIVIDUALS TRAVELLING INTO SPACE.”**

a dozen nations so far—to spread the wealth of scientific data, control traffic somewhat, and, where necessary and possible, provide emergency assistance, just as nearby vessels might respond to an S.O.S. on Earth's oceans.

From NASA: “International cooperation on Artemis is intended not only to bolster space exploration but to enhance peaceful relationships between nations. Therefore, at the core of the Artemis Accords is the requirement that all activities will be conducted for peaceful purposes, per the tenets of the Outer Space Treaty.” Signees include the United Kingdom, Canada, Japan, Australia, Italy, and the United States.

There are many phases of the moon between now and a moment when such cooperation is universal

and nursing on Earth benefits from celestial caregiving. But the space project at JHSON has already taken one giant leap toward being among the first colonies to welcome that day.

“It's a new thing,” explains Coker. “It's going to take a little while.”

She acknowledges that as part of an accelerated master's program, she might no longer be at JHSON to see the space nursing program hit full throttle.

“That's great. As long as I can keep doing the research that I'm doing and keep going, I'm fine with that. ... To see Dr. Pandian so excited makes me excited for what's next.” ■



## ‘Like an NGO of Knowledge’

*Center for Global Initiatives a force multiplier for nurses and health care across the world*

The world needs to invest more in nursing, the backbone of any health system and essential to the achievement of the Sustainable Development Goals.

It seems simple enough to say it. But as Nancy Reynolds, PhD, RN, FAAN, professor and director of the Center for Global Initiatives (CGI) at the Johns Hopkins School of Nursing, will tell you, optimizing the full contribution of the nursing profession remains a critical challenge. As seen vividly with the COVID-19 pandemic, health problems of the 21st century transcend national boundaries. While many agree that well-prepared nurses are critical for the actual delivery of health care around the globe, what is less well appreciated are the unique contributions of nurses in creating solutions in global health care delivery. Importantly, nurses are educated to evaluate social, psychological, economic, and biological aspects of health and illness, making them uniquely qualified to address interrelated determinants of health and develop evidence for sustainable global health solutions.

Awakening and harnessing that power is where everything starts for CGI. Established in 2011, the center serves as an operational umbrella—a force multiplier—for existing and developing international education, practice, research, and policy initiatives. The idea is building knowledge infrastructure to inform policy and support the capacity development of a diverse cadre of local nurse scholars, educators, and practitioners who

are best positioned to address the local health challenges of their own health care systems and communities.

It is an approach to health equity and sustainable change that has led to international collaborations in 26 countries, from India, to Bahrain, to the Democratic Republic of Congo, to the Philippines, to Ukraine, to Guatemala, with more memoranda of understanding, or MOUs, in the works. Most have included consultation with schools of nursing on establishing graduate programs, webinars on mutual topics of interest, and building or enhancing research infrastructure and capacity, “like an NGO of knowledge,” explains Reynolds.

CGI also brings some of the brightest minds from partner nations to JHSON as international visiting scholars to work directly with top nursing researchers and providers. “Facilitating local-to-global knowledge exchange and development is a win-win. It is never a one-directional thing,” says Reynolds, also associate dean of global affairs at JHSON; director of the World Health Organization’s Collaborating Centre for Nursing Information, Knowledge Management; and co-secretary general of the Global Network of the WHO Collaborating Centers of Nursing and Midwifery. Her own research focuses on low-cost cellphone technology to improve the management of HIV among vulnerable populations, primarily in collaboration with colleagues in Ghana and India.

## ‘Community-Driven’

Part of the secret to community care in more remote or less resourced parts of the globe is to remember why you are there—even when you aren’t there physically—and who you are serving, those who will still be living there when you have moved on.

“You need to remember the human aspect,” explains Associate Professor Catherine Ling, PhD, FNP-BC, FAAN. Through the CGI, Ling directs efforts to support rural community health care capacity in Guatemala. JHSON students have traditionally spent time on the ground in the Central American nation each year doing health screenings, community education, minor physical infrastructure like installing stoves, and learning to work as a team—and to hear as well as see the need.

“These missions are community-driven,” explains Ling, whose own scholarship is focused on improving primary care for vulnerable populations. “We approach health care with the recognition of the community as the driver of care, not as secondary,” Ling says. “The community will let you know what it needs. We must be holistic and multifaceted in our approach to be authentic.”

The COVID-19 pandemic has of course limited any official travel for JHSON groups, so the Guatemala experience has been a virtual one since 2020, the last time Ling was there. Today, she’s here to report that the virtual experience, using simulation technology, can in some significant ways be better. Take equity—for the nursing students themselves. Even though Johns Hopkins takes care of many of the logistics, students must balance financial and time costs. Remove the boots-on-the-ground aspect and far more students can fit. Meaning that while in-person trips can accommodate six to eight students, “That’s half of what we can do virtually,” says Ling. “We want to make sure it’s open to any student who’d like to have the experience ... prelicensure, DNP, or PhD.”

Far from limiting, the virtual experience has allowed students to stick to community need and how to address it as a group. The tech is outstanding and simulations are “complex and layered,” Ling explains, while data and control end up in the hands of these community groups, where it should be.

“These are rural, underserved communities with very specific needs,” Ling says. “We were free to address these very specific needs, to focus.” And far from disappointment at never leaving East Baltimore, the latest Guatemala cohort nevertheless gave a thumbs up to the experience of collaborating and making a difference. As Ling says, the care doesn’t change, whether you’re at a villager’s door or at the other end of a Zoom call. “Our grassroots practice is our global practice.” ■

Learn more about the CGI at [NURSING.JHU.EDU/CGI](https://nursing.jhu.edu/cgi).

## ON THE PULSE PODCAST



### Episode 12: The Crisis in Ukraine

Associate Dean of Global Affairs Nancy Reynolds explains “Nursing’s Role and How All of Us Can Help.” The world is witnessing the largest European invasion since World War II. The invasion of Ukraine by Russia continues to unfold, and many people in both countries and the surrounding nations are caught in an escalating crisis and are seeking refuge. Reynolds details the situation on the ground and how people everywhere can be helping.



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*And the DAISY Award for Extraordinary Nursing Teams for 2021 goes to ... Meyer 9. Meet more recent DAISY Awards winners on Page 40.*

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NEWS FROM JOHNS HOPKINS HOSPITAL & AFFILIATES



## A Letter from Deborah Baker:

The slow return of spring always inspires a sense of renewal, growth, and excitement for what lies ahead. In many ways, the profession of nursing is also experiencing a spring awakening. After two challenging years understanding and managing the COVID-19 pandemic, we have the perspective to see the incredible innovation and creative problem-solving that nurses employed during the COVID response, which has now taken root. Nurses have developed an adaptive competence that now defines us—we have learned to pivot, to think differently, and to step out of our comfort zones.

Throughout the pandemic, nurses were often asked to take on new roles or learn new, specialized skills. Today, I see that same desire to learn, grow, and lead in so many of our nurses. Rates of nurses earning certifications in their specialty areas continue to rise and nurses are joining and leading professional practice councils providing thought-leadership as subject matter experts. We continue to design evidence-based practice, research, and inquiry projects to improve patient care, clinical operations, and staff engagement.

Having a spotlight shone on our profession brings new understanding to the pivotal role nurses play and the impact we have—from a small gesture of caring for a patient, to influencing widespread change at the system level, to mentoring the next generation of caregivers.

The mental health of individuals and of teams has also been brought into sharp focus during the pandemic, and we are grateful for the Johns Hopkins Medicine Office of Well-being that provides support, education, and awareness—keeping this important aspect of a healthy work environment top of mind for all who lead health care teams.

Helping to ensure all caregivers are able to achieve a healthy work-life balance, having the time and space to build their resiliency, will require innovative ideas around care delivery models, scheduling, and job sharing, just to name a few. A lot is changing at a rapid pace, but what remains constant is what brought us to this profession in the first place—caring for patients, supporting families, and improving the health of our communities.

We are excited to celebrate all nursing staff during National Nurses Week, May 6-12, with the apt theme “Caring for Tomorrow.” Thank you for all you do for those in our care and for each other. ■

*Deborah J. Baker, DNP, APRN, NEA-BC, FAAN, is senior vice president for nursing for the Johns Hopkins Health System. She also serves as vice president for nursing and patient care services at The Johns Hopkins Hospital.*

## ‘The Nurse Antigone’ Shines Light on Grief, Strength

To many inside as well as outside the profession, the plight of nurses during COVID can look a bit like a Greek tragedy. (A recent survey by the American Association of Critical-Care Nurses found that 66 percent had considered leaving their jobs because of experiences during the pandemic.)

“Nurses talk about how in the beginning everybody was clapping and cheering and calling us heroes,” Cynda Rushton, PhD, MSN, RN, FAAN, Anne and George L. Bunting Professor of Clinical Ethics, told the *New York Times*. “But then as time has gone on and you think about the social unrest, the political divide, the anger that has developed in response to the pandemic, nurses—as the people who are closest to the patient—have been the recipient of that anger or that violence and frustration.”

How appropriate, then, that Theater of War Productions would produce a version of the Greek tragedy *Antigone* with nursing in mind and with Rushton in the key advisory role. The March reading of *The Nurse Antigone* at the Johns Hopkins School of Nursing was the first in a yearlong initiative of 12 performances in collaboration with nursing organizations around the country.

In the Sophocles play *Antigone*, the title character is determined to properly bury her fallen brother, considered an enemy of the throne, even though that has been forbidden by the new king. When she does the right thing anyway, the king orders Antigone buried alive. “[*The Nurse Antigone*] is a play about not being able to live up to your own standards of care and about deferred grief, which I think is the moral injury of the pandemic,” Bryan Doerries, a founder of Theater of War Productions, told the *New York Times*.

Those in the play included author Margaret Atwood (*The Handmaid’s Tale*) as well as actors Tracie Toms (*Rent*), Taylor Schilling (*Orange Is the New Black*), Ato Blankson-Wood (*Detroit*), and Bill Camp (*The Queen’s Gambit*). Included in the Greek Chorus was Johns Hopkins Hospital’s Aliko Argiropoulos (nurse clinician II in oncology and a graduate of the Johns Hopkins School of Nursing).

After the play, Argiropoulos helped facilitate an audience conversation on topics such as the treatment of minorities during the pandemic and normal times and dealing with colleagues who refuse to do the right thing for the good of all. “It was liberating to hear nurses from various backgrounds talk about their experiences, frustrations, hopes, and thoughts,” explains Argiropoulos. “I didn’t feel alone. We were able to validate each other’s feelings, realizing that this phenomenon is universal, and that we all have endured very similar situations.” ■



# Butterfly Effect

*Nurse-midwives use technology to bring quality care to women where they are*

BY SARAH SAKANDA AND INDRANI KASHYAP

In Dziwe Health Center in Blantyre, Malawi, nurse-midwife Precious Dausi is using a portable ultrasound scanning device during women's antenatal visits to determine accurate gestational age and identify potential complications early. A continent away, in India's Gogunda community health center in northwestern Rajasthan, nurse-midwife Sumitra Kumari Bhamawat uses a tablet-based app in the labor room to retrieve women's comprehensive antenatal history and keep a close watch on the progress of their labor, receiving alerts in case of any complications.

Never before has frontier technology reached so close to where women live, providing nurse-midwives like Dausi and Bhamawat working in remote, often understaffed and overburdened health facilities, with the tools to offer better and timely care in the rural communities they serve. "In the past, nurse-midwives at our facility could only offer basic antenatal care, such as checking heartbeat, monitoring growth and, in advanced stages, checking the position of the unborn child. They could not make exact findings by palpation of a woman's abdomen," says Dausi, 28.

The World Health Organization recommends that pregnant women receive at least one ultrasound scan before 24 weeks' gestation. But in Malawi, a

country that has adopted the WHO guideline at the national level, this service is unavailable in many rural health facilities like Dziwe. In rural areas, only pregnant women who have been identified with a potential complication that requires ultrasound confirmation are referred to the tertiary referral hospital for scanning, which could be miles away. This process can lead to ill health and even death as complications are often identified at an advanced stage of pregnancy.

To address this situation, Jhpiego, a global health leader and Johns Hopkins University affiliate, with funding from the Bill & Melinda Gates Foundation (BMGF), started implementing a research study within the ANC/PNC Research Collective (ARC) to assess the feasibility and acceptability of integrating an ultrasound scanning device, Butterfly iQ, with antenatal care. Testing different strategies to introduce obstetric ultrasound services is a priority for the Malawi Ministry of Health as it works to improve the quality of antenatal care.

The Butterfly iQ is a rechargeable, handheld digital scanner that can help overcome barriers of inconsistent electricity and lack of computers at most rural health facilities. Users download the Butterfly iQ app and connect the scanner to a phone or tablet, which displays the images. Being portable, nurses are able to provide ultrasound at



PHOTOS BY JHPIEGO

***"THINKING AROUND DIGITAL HEALTH IN NURSING AND MIDWIFERY FOR ANY SETTING SHOULD NOT BE RESTRICTED BY A LACK OF CONSISTENT ELECTRICITY OR OTHER POOR INFRASTRUCTURE."***

the point of care, even in the remotest areas. In partnership with the Malawi College of Medicine-Johns Hopkins University Research Project, Jhpiego is training 50 rural nurse-midwives like Dausi with the knowledge and skill to use the Butterfly iQ to expand access to ultrasound and reach 1,500 pregnant women.

Digital tools can be a force multiplier in the hands of health providers in low- and middle-income countries whether they are assisting in infant circumcisions, learning new diagnostic skills, or helping map underserved communities that need HIV prevention and treatment. Jhpiego is investing in digital health strategies to accelerate delivery of quality of care where it counts.

"Thinking around digital health in nursing and midwifery for any setting should not be restricted by a lack of consistent electricity or other poor infrastructure. Many patient and provider technologies are being developed with use of a smartphone which can be solar-powered and we know the global south has outpaced the west in everyday digital functionality—such as SMS mobile money and cash transfers," said Pandora Hardtman, Jhpiego's chief nursing and midwifery officer. "In several of our programs across diverse geographies, we are working to capacitate nurse-

midwives to use technology, not only to provide quality care, but also to break barriers to equitable access to health information and services."

In Rajasthan, India, for example, under the BMGF-supported, Jhpiego-led Antenatal Risk Stratification—Intelligent Continuum of Care program, nurse-midwife Bhamawat and her colleagues have learned to use a tablet-based app called Prasav Watch (meaning "delivery watch"). The app flashes a red alert in case of complications and prompts the health worker to take timely action. "We are catching life-threatening conditions in time," says Bhamawat. "The app has also reduced the need for referrals," adding, "the referral site gets a similar alert and receives all [the woman's records] through the app before she arrives."

In addition, digitized antenatal care (ANC) records are now available to labor room staff like Bhamawat through a 16-digit unique ID number that the mother received during her ANC check-ups.

The uses of people-centered, provider-oriented technology are vast, says Hardtman. ■



# DAISY AWARD WINNERS



## October 2021 | Teresa Kane

Teresa Kane, RN, of Weinberg 5B, was nominated by a fellow nurse who described how Kane always goes the extra mile for her patients. “The patients love her, and she is truly a nurse who has dedicated her life to the passion of oncology nursing and providing phenomenal care.” In addition, Kane was highlighted for her calm demeanor and expertise, especially when a patient’s status becomes critical.



*Recognizing Johns Hopkins Hospital nurses for skilled, compassionate care that goes far beyond the call of duty.*



## September 2021 | Corey Summers

Surprised by the DAISY Team in the cardiovascular progressive care unit, Corey Summers, RN, was even more touched when the patient who nominated him joined the award ceremony with his wife via Zoom to highlight the supportive and compassionate care Summers delivered when the patient was in distress. “He stayed with us. He reassured us. He distracted us. He carried us through a truly distressing and scary night.” Summers expertly guided care, showing “compassion that was heartfelt and helped us beyond measure.”

## November 2021 | Anna Lou Paniza

Anna Lou Paniza, RN, of Bloomberg 10 North, our in-patient adolescent care unit, was nominated by a fellow nurse who wrote that she was shocked to learn that Paniza hadn’t received a DAISY Award already, because she “is one of those nurses that gives all of herself, every shift, to her patients, families, and coworkers.” The nomination letter also described how Paniza creates amazing bonds and relationships with the families she cares for and is “the backbone of leadership on nights.”



## August 2021 | Andrew Driscoll

A fellow nurse’s nomination described Andrew Driscoll, RN, of the pediatric intensive care unit (PICU), as constantly exemplifying hardworking, compassionate care, and wrote in detail about a time Driscoll went far above and beyond to lift the spirits of a child who was on the unit for an extended period, including his birthday. The patient was in an isolation room, meaning his parents could not be present. So Driscoll stepped in. “He hung additional birthday decorations, helped the boy interact socially, got him out of bed and to his chair, set him up with video games ... and it was during all this that I saw a smile so big on this child’s face that I had not seen in all his days in the PICU.”

## December 2021 | Emily Gillman

Emily Gillman, RN, made a big impression as soon as she met the patient who nominated her for the DAISY—welcoming him warmly and putting his entire family at ease. Her uplifting attitude helped the patient get back on his feet after a serious surgery, and her kindness and clinical knowledge made the family feel comfortable and well-informed. “We feel so lucky to have had such a wonderful angel for three days,” says the nomination letter. “She had the most amazing attitude and it lifted us up all day.”



## July 2021 | Sarah MacLean

Sarah MacLean, RN, of the neonatal intensive care unit was nominated by a mom not only for her extraordinary care but for a seemingly simple but incredibly meaningful act. MacLean made a craft and wrote a special note for her patient’s older sister—“from” her new baby sister. “This small gesture that Sarah did made [big sister’s] entire life. She has the picture and note hanging in her bedroom and talks about it every single day.” The nomination letter goes on to say, “She is the most caring and compassionate person I’ve ever met.” ■

Images of other JHH DAISY Award winners are at [MAGAZINE.NURSING.JHU/DAISY](https://MAGAZINE.NURSING.JHU/DAISY)



For questions about the DAISY Award or to nominate a nurse, contact [DAISYAWARD@JHMI.EDU](mailto:DAISYAWARD@JHMI.EDU)

*Patricia Jefferson Gibson celebrates with the Class of 1970. Read what she and her fellow alumni have been up to on Page 49.*

See more images from Alumni Weekend on page 46.

# VIGILANDO

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NEWS FROM JOHNS HOPKINS NURSES' ALUMNI ASSOCIATION

Patricia Jefferson Gibson '70

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Jane Ball receives the Alumni Association Heritage Award at An Evening with the Stars in November 2021 from fellow alum Sarah Szanton, dean of the Johns Hopkins School of Nursing.

## ALUMNI UPDATE

JANE W. BALL, DRPH, MPH, RN



### Dear Alumni,

Springtime weather is finally emerging, allowing us to have more outdoor activities. It is also the time of year that Johns Hopkins University Alumni Weekend occurs. This year, the Johns Hopkins School of Nursing participated by hosting alumni from three classes—1970, 1971, and 1972—for Reunion Weekend. Two classes of these jubilant alumni had to postpone their special 50-year anniversary reunions because of COVID. That made this gathering of alumni even more special, with over 60 class members attending.

A special program was designed that allowed the alumni optimal time to engage with classmates while adhering to guidelines for public health and safety during the event. Reunion Weekend began with the SON Discovery & Innovation Showcase, featuring the innovative work of faculty and students, followed by a cocktail reception on Thursday evening.

On Friday morning, Dr. Nancy Glass presented the Isabel Hampton-Robb lecture “Women and Pandemics: How Disease Furthers Gender Inequality.” Individual

class groups then rotated through three sessions. One was a tour of the new School of Nursing building, allowing alumni to gain an appreciation of changes in nursing education over time via simulations. The next session, “Capturing the Legacy”—a favorite of mine during my own 50-year anniversary celebration—was an opportunity to share memories about life as a student nurse. This session was recorded for the classmates and will become part of the Johns Hopkins Nursing Archives. The third session was free time for classmates to use reminiscing or to visit the hospital rotunda.

On Saturday, alumni gathered for brunch and to be presented with their 50-year medallions during the Awards Ceremony. I enjoyed the opportunity to meet with these alumni classes and hear some of our shared memories of the Johns Hopkins Hospital School of Nursing.

The weekend was quite successful, and everyone enjoyed the opportunity to gather and share memories. Alumni unable to attend will receive their 50-year medallions by mail. ■

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# ALUMNI REUNION WEEKEND



Many more of Daniel Martinez's images from Alumni Weekend are at [FLICKR.COM/PHOTOS/HOPKINSNURSING/ALBUMS](https://www.flickr.com/photos/hopkinsnursing/albums/).



## Remembrance

### *Diane Demarest Becker, '64, was a champion of community care*

Diane Becker, ScD, MPH, RN, an expert in the prevention and management of coronary disease, a champion of community care, and a devoted alumna, died at her home in Baltimore on November 17 with family at her side. She was 78.

“Diane was an extraordinary person who made impressive and lasting contributions to cardiovascular disease prevention research and public health throughout her career,” said Dean Emerita Martha Hill, '64. “She showed amazing strength and determination throughout her life coping with severe progressive illnesses including lupus and breast cancer. Her participation, especially her impressive IT capabilities, in planning the 50th reunion, was central in revitalizing lasting friendships.” They also allowed her to attend (by Zoom) the opening of the Class of 1964 Terrace, for which she helped raise more than \$500,000. “Shortly after she entered hospice care she wrote, ‘Was really a happy moment for me. And I talked too much as usual. I have so enjoyed getting to know you all in recent years and especially at this particular time when life has an incredible amount of meaning.’”

“Diane was very accomplished professionally, but most of all I cherish my memories of her as my friend,” added Eileen Leinweber, '64. “She was a strong, smart woman ahead of her time.”

Dr. Becker (front row, third from left in photo) in 1987 was the first nurse to receive a primary academic appointment in the School of Medicine with a joint appointment in the School of Public Health. Her landmark NIH-funded study known as GeneSTAR continues to produce new knowledge regarding biological, genetic, behavioral, and sociocultural risk factors of coronary disease as well as effective interventions.

Dr. Becker partnered with pastors from 250 East Baltimore churches to form the award-winning Heart, Body, and Soul Inc., an independent nonprofit organization designed to create real-world health care delivery alternatives in inner-city African American communities. At the Johns Hopkins Brancati Center for the Advancement of Community Care, she was the founding director of research, focusing on community diabetes care and prevention in East Baltimore. Her work to reduce health disparities earned awards from the American Heart Association, American Association of Medical Colleges, and President George W. Bush. In 1995, she was awarded a prestigious Robert Wood Johnson Foundation and Institute of Medicine Federal Health Policy Fellowship. She retired in 2018.

“She leaves a great legacy as a role model to all the alumni and students she touched throughout the years,” said Dean Sarah Szanton, PhD, RN, FAAN. ■



## CLASS NEWS

### **Congratulations to the 2021 AANP State Award Recipients:**

AZ – **Timian Godfrey, '19**  
 HI – **Bradley Kuo, '16**  
 VT – **Jeri Wohlberg, '00**  
 DE – **Ena M. Ndi, '15**  
 DC – **Carolyn Summer, '15**

**Dr. Carol Rosenberg, '17**, and her start-up, **READY.SIM.GO**, were the second-place winners of NursePitch, an interactive event co-sponsored by the American Nurses Association.

**Cynthia Thurlow, '98, '01**, published her first book with Penguin Random House, *Intermittent Fasting Transformation*, on March 15.

**Janet Barnes, '20**, was among the Johns Hopkins Hospital nurses who recently received a Daisy Award (meet more recent winners on Page 40).

**Dr. Catherine X. Marea, '20**, was one of two recipients of the 2021 Hillman Innovations in Care Award from the Rita & Alex Hillman Foundation.

**Dr. Jennifer Milesky, '16**, and **Dr. Courtney Garry, '21** were among the Johns Hopkins affiliates who received awards during JHSON's annual gala, An Evening with the Stars.

**Dr. Cheryl Nelson, '21**, received the Allegany College of Maryland's 2022 Community Engagement Award for supporting the COVID-19 vaccination efforts in Allegany County, MD.

### **Class of 1970 Updates:**

**Lynne Jones Bryant** lives in Hollywood, FL. She received a BSN from the University of Maryland, MSN from the

University of Pennsylvania, and EdD from Florida International University. Most of her clinical experience was in the ICU. She then began teaching nurses how to be educators at several universities and retired in 2018 from Nova Southeastern University. Since retiring, Lynne and husband Gregg travel to Virginia to spend the summer at a lake cottage, where they enjoy hiking and kayaking.

**Patricia Jefferson Gibson** continued her education with a BSN from Hampton University and an MS in gerontology from Virginia Commonwealth University in addition to a certificate in infection control and prevention from the University of Virginia. She worked on a pediatric med-surg unit at Hampton General Hospital in addition to roles with the Veterans Administration and Hospice of Central Virginia. In 2022, she is semi-retired, working two days a week in infection prevention. She loves reading medical mystery and espionage novels, teaching Sunday school and Bible study, and volunteering at a nursing home. She has two daughters and two grandchildren and lives in Chesterfield, VA with her husband.

**Sherry Sye Kolbe** lives in Towson, MD and received her BSN from the University of Maryland. For 10 years, she worked as a community health nurse with Baltimore City and then spent 20 years with the Baltimore County Department of Aging. For the final 10 years of her career, she was a program manager with the State Health Insurance Program (SHIP) and educated the public about all facets of Medicare. Sherry enjoys being a grandmother, playing bridge, and continuing to volunteer with SHIP.

### JOHNS HOPKINS IN MEMORIAM

Lucia Kelso Adlfinger, '44  
 Doris Armstrong, '57, (Education) '69, (Honorary) '70  
 Jeffery C. Baldwin, '94, '14  
 Diane Demarest Becker, '64, '78, (BSPH) '79, (BSPH) '84  
 Norma T. Brough, '80  
 Johanna Petree Dilworth, '52  
 Eileen Timms Doll '70, (Carey) '94  
 Lois Messler Gustafson, '61  
 Carol Nelson Inz, '58  
 Patricia Berry Kalvestrand, '57  
 Theodora Colantonio Kares, '81, (Education) '86  
 Nancy J. Kelley, '70  
 Wendy A. Kimmel, '64  
 Louise Johnson King, '52  
 Nancy Hastings Klein, '68  
 Mary Lou Dailydas Perin, '64  
 Margaret Roth Piercy, '63  
 Barbara Hall Richardson, '58  
 Geraldine Ann Waybright Settle, '51  
 Lynette Centofanti Sisson, '70  
 Sandra L. Snyder, '68  
 Jane Buettner Stevick, '63  
 Amelia Poole Sudderth, '62  
 Lois Hutchinson Surgenor, '46  
 Elizabeth Raab Williams, '56

*We deeply regret our error in posting of the passing of Reshma V. Jhaveri, '11 in the 2019 issue. We sincerely apologize to Reshma and her family for this incorrect announcement.*

**Class of 1971 Updates:**

**Janet Amendt Girard** is currently enjoying retirement and spending time with her six grandchildren. Janet worked in ambulatory care for 40 years.

**Janice May Jezyk** is still working as a nurse. She assists with collecting data and blood samples for an National Institutes of Health study on drugs used in children. She also assists in documenting quality and risk data on adult patients with chronic conditions for a family practice office. In her free time, she enjoys native plant gardening, enjoying and taking care of her backyard pond, quilting, and of course her grandchildren.

**Janice Wright Kilby** is retired. She enjoys going to the beach, looking for shark teeth, traveling, and reading. She is on two boards in development. She has also received her master's and multiple certifications. Unfortunately, Janice's husband recently passed from Agent Orange/Vietnam after a long battle and she is still adjusting after 50 years of marriage.

**Joan Monchak Lorenz** is currently retired but is active in knitting baby sweaters to sell at a local artisan shop, landscaping her small but high-maintenance property, playing with her almost 4-year-old grandson, trying new recipes, or traveling to visit loved ones.

**Nancy Rees MacKenzie** volunteers two days a week at a local cat shelter and, pre-pandemic, volunteered one day a week at a local elementary school. She enjoys gardening, hiking, snowshoeing, exploring Oregon, and spending time with her family, especially her 3-year-old granddaughter.

**Pamela Magnuson** is still working at a nursing school, typically working one-on-one with students. After graduation, she earned her BSN from the University of Washington with joining Sigma Theta Tau and a nomination for Dean's Medalist Award. She knits, enjoys music, and attends concerts and theater. In 2003, she survived a stroke and had a heart transplant while being a single parent to her children.

**Roxanne Mushok Nelson** enjoys her retired life with her husband in the beautiful Pacific Northwest. She looks forward to resuming her travels in the near future, volunteering as a librarian in their retirement community library, and enjoying the antics of their cat, Rufus.

**Barbara Bernhard Scharf** enjoys caring for her grandchildren, yoga, and quilting. She obtained an MSN/MPH at Hunter College and a PhD at the University of Maryland. Her research examined nursing from an occupational health perspective and family support at end-of-life care. She is living with her husband, Steve, and has four grandchildren.

**Class of 1972 Updates:**

**Anita Rauch Betschart** is currently working part time for a staffing agency as an escort nurse for school field trips, flu shot clinics, and wellness fairs. As soon as COVID retreats, Anita hopes to return to Haiti for her ninth trip since 2009 as part of a volunteer medical team. She enjoys watching her grandkids, knitting, quilting, gardening, and volunteering at her church. It's been more than 50 years as a nurse and Anita still enjoys doing what she does.

**Virginia M. Boyle** is retired and is currently volunteering with her church. She goes to nursing homes, decorates the altar, and is a food runner for soup kitchens. Virginia was an ER nurse in NYC, Virginia Beach, and Long Branch, NJ. Her final position was as a home hospice case manager.

**Wendy Peek Davis** has worked in intensive care, med-surg, OB, and in the OR after her BSN. After obtaining her MSN, she became a family nurse practitioner and is still practicing until retirement. Wendy participates in volunteer activities at her church and enjoys quilting, knitting, and reading. She has three wonderful children, with their spouses and 13 grandchildren.

**Maureen Kane Parkhurst** has been a nurse for 41 years at Johns Hopkins Hospital. She likes to read and has done a lot of traveling in and out of the country with her husband.

**Susan K. Sell Partusch** enjoys reading, swimming, playing tennis, walking, and traveling. She is an active member of the Oncology Nursing Society. Oncology was her main career path after nursing school.

**Mary Jarrett Saubert** is active with her local Organ Transplant Support Group. Mary and her husband spend winters at their vacation home in San Felipe, Mexico, where she enjoys giving back to the local people in San Felipe. Mary has been nominated three times for Nurse of the Year for the state of Indiana

and has written a small book about some of her organ transplant recipient patients.

**Judy Jones Sisk** volunteers for a free medical clinic for the uninsured population. Additionally, she volunteers for Golden Retriever Rescue and facilitates vet care for foster animals. She enjoys gardening, reading, and training her dogs. Her achievements include being a mother and being recognized by her peers and the community with several oncology awards.

**Elaine Davis Soyars** enjoys traveling, reading, swimming, and volunteering at a free clinic. She is currently working part time in a home health care

setting. She raised a family to successful adulthood and has taken them to Bolivia to work as missionaries for several years. She has managed health care for these missionaries and volunteered as a school nurse during that time.

**Cynthia Sweigart Strube** is currently retired. She received her BSED at Millersville University in Millersville, PA after graduating at Hopkins. ■

**Reunion Weekend**

Reunion Weekend 2022 was a wonderful time to reconnect at an in-person event at the beautiful new Johns Hopkins School of Nursing. The 50-year honorees from 1970, 1971, and 1972 attended and received special gifts and Golden Gift bags. It was great to see and hug everyone again.

**Distinguished Alumni Award**

The Church Home Distinguished Alumni Award is given to a graduate who has demonstrated continual excellence in the values and knowledge bestowed upon them by Church Home. The award also recognizes that the recipient has incorporated these ideals into a career and life as a respected caregiver and citizen. It was an honor to present the 2022 Award to **Patricia Kniffin Roberts, '65**. Pat has spent a life of continually "giving back." Pat's

commitment to nursing education, the community, the arts, and animal rescue clearly made her the #1 Nominee and perfect selection to receive this prestigious award. It was extra special that Pat's son, Bert, his family, and Pat's grandchildren could be present to honor a woman who is loved and respected by so many.

**Archive Treasures**

Recently, I had the pleasure of meeting with **Margaret "Peg" Armstrong, '55**, to collect some very unique and interesting articles for the Archives. Who would still have their State Board results, class notes, and cape? Yes, Peg (pictured at right), a collector of many treasures, wanted to be sure that the items she saved for nearly 70 years found a good home. The items were turned over to the Alan Mason Chesney Archives, where all of the Church Home memorabilia is housed. ■

**CHURCH NOTES  
IN MEMORIAM**

Patricia Palasik Bowler, '64  
Mary Ellen Bramble Craig, '62  
Carol Heil Drabo, '63  
Mildred "Polly" Heim Hesterberg, '52  
Beverly Pendleton Smith, '73  
Darlyn Schaeffer Warwick, '66

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## THE BACK PAGE

**A great career choice—even if it wasn't your first:** Johns Hopkins puts out the welcome mat for all career changers who have a bachelor's degree and a calling to work in nursing. The MSN (Entry into Nursing) program offers such switchers the chance to reset, then re-enter the workforce as respected nursing colleagues. On the facing page, meet a few students for whom nursing is a very new direction, from ballet to biostats (Noa Lin), from salmon to stethoscopes (Elena O'Shea), or from white hat—OK, blue helmet—to white coat (former UN human rights volunteer Hepsibah Effange). Meet more at [MAGAZINE.NURSING.JHU.EDU/CAREER2](https://MAGAZINE.NURSING.JHU.EDU/CAREER2).

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