SCHOOL OF NURSING

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Fall 2018

UNMASKING HUMAN TRAFFICKING

One of the most insidious evils of the 21st century passes through the health care system every day. A partnership between nursing and law faculty at U-M has an army of advocates ready to stop it.



PANACEA Fall 2018

University of Michigan School of Nursing Dean Patricia D. Hurn, Ph.D.

Communications and Marketing Director and Executive Editor Mike Brinich

Associate Editor Jaime Meyers

Graphic Designer Jessalyn Tamez

Photography Dave Reginek Jessalyn Tamez Michigan Photography

Cover Art Mike Austin

Contributors Jodi Smolek Colleen Zimmerman Kelly Palkowski

Writers Taryn Aldrich David Pratt

Regents of the University of Michigan

Michael J. Behm, Grand Blanc Mark J. Bernstein, Ann Arbor Shauna Ryder Diggs, Grosse Pointe Denise Ilitch, Bingham Farms Andrea Fischer Newman, Ann Arbor Andrew C. Richner, Grosse Pointe Park Ron Weiser, Ann Arbor Katherine E. White, Ann Arbor Mark S. Schlissel, *ex officio*

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Q&A with Dean Hurn

We bring the Victors for Michigan campaign into focus in this issue of Panacea by chronicling the exponential impact of giving on the entire UMSN ecosystem as well as the public at large. Dean Patricia Hurn sat down for a one-on-one discussion with the person who has led the campaign at UMSN since it began in 2012, Executive Director of Development and Alumni Relations Colleen Zimmerman. Dean Hurn offers her thoughts on the success of the campaign, the important work still left to do and her gratitude for the thousands of UMSN supporters who have participated in the campaign so far.

Colleen Zimmerman: The University of Michigan is wrapping up its very successful Victors for Michigan campaign at the end of 2018. By all accounts it's been incredibly successful. When you think about giving in the future here at UMSN, what should our supporters know?

Dean Hurn: I think we first start by simply saying thank you...and now the work of seeing this through begins. Aside from

the resources the campaign helped raise, which is obviously very important, it also increased our community's awareness about the goals we have as an institution moving forward. There is a lot of energy surrounding new initiatives at our institution that were made possible by support we received from the campaign. Global outreach, innovation and entrepreneurship, faculty development and accessibility for students are among a few of the areas the campaign invigorated. As we implement new programs and hit certain check points in our development of gifts received, it will be important for the UMSN community to stay engaged because I'm sure we're going to identify the need for volunteers with nursing expertise as well as other types of support.

The campaign for the university and our school was enormously successful. When our supporters and the public at large hear some of the huge figures related to this campaign being bandied about, however, I think it becomes even more important to pause and take note of the impact this campaign will have on people for generations to come. A majority of our supporters aren't here on campus regularly. As best we can, I want them to feel the same energy I do every day as I hear students' very ambitious aspirations and learn about the advancements in nursing our faculty are leading because of the gifts made to UMSN. I hope that some of that energy shines through in the pages of this magazine because those stories will give real meaning to the unfathomable financial success of the campaign.

CZ: The goals for this campaign were in place long before you arrived in 2016. How have your goals for the school mixed with the goals of the campaign?

PH: So much of the success of this campaign happened before I was here and rests on the shoulders of our former dean, our development team, our faculty emeriti and staff. When I arrived here, it was immediately apparent that there was a vested interest in helping our students obtain their degrees and graduate. I certainly shared that view as well and saw student achievement as one of the absolute priorities, and I don't think that has changed at all. As we move forward, I want to continue emphasizing student support and scholarships.

Faculty support is another area where school goals and campaign goals parallel each other. Nursing schools are in a remarkable place right now in that the field is going to be competing desperately over the next 10 years for excellent faculty. We're in the midst of a nationwide movement involving nursing in general and nursing faculty in particular, where current faculty are approaching the end of their time in academia. So there is intense competition to maintain and sustain that faculty group over time. We've determined that recruiting, supporting and retaining highly qualified faculty for UMSN is a major priority. Not only will this remain a priority, but I think that competition for the best faculty will only continue to intensify. Working to support endowed professorships, comprehensive faculty support-including ancillary support to enable our faculty to pursue scholarship and new pedagogical methods, taking students all over the world to better understand our role in global health-we have received community support for all these initiatives, and we need to continue expanding these efforts. If we don't, then UMSN won't be in an optimal position to have faculty who run all the programs we offer. Our students are the jewels in the crown, but our faculty-and their qualityare behind the unique opportunities we can offer students. The faculty are the ones who truly promote student success.

CZ: Specifically, what support for faculty stands out to you?

PH: I think we should certainly start by talking about some of the endowed professorships. The Carol J. and F. Edward Lake Term Clinical Professorship has played a vital role in reinforcing our strength in the area of population health. Barbara Brush, who holds the Lake Professorship, has done outstanding work in the Detroit area working to learn more about how nursing can help reduce homelessness recidivism rates for families. Her lineage of students, some of whom are now faculty at our school, have actually gone on to earn named professorships of their own.

Laura Gultekin, who is part of Barb's lineage, became the recipient of the Suzanne Bellinger Feetham Professorship. The Feetham Professorship is focused on families... the intensive need to support and nurture family structure in different kinds of communities. I'm mentioning these two professorships specifically because both of their supporters have remained closely involved with the people they're supporting. Suzanne Feetham is truly interested in the progress of her professorship, as are the Lakes. We need to ensure that our community knows that when you create these professorships, donors don't just ride off into the sunset. We want them to be engaged with what these opportunities mean to the people who are carrying them out.

We've also received other kinds of support for faculty and students that have had strategic impacts on UMSN. The Medvec Nursing Innovation Award is a perfect example of this. Barb Medvec, who was a chief nursing officer for many years and is now on our faculty, got the chance to see first-hand that nurses are on the front lines of creating new ways to take care of patients, and nurses need to be supported in taking risks and developing tools and approaches that make a difference. That particular award is, and will continue to be, very high impact.

What I love about working with donors is being able to develop initiatives where the donors' and supporters' interests align so well with the strengths of UMSN. That's one of the things I'd like to focus on as we go forward and talk about the future.

One such area is palliative care, which will play a major role in the future of health care as the population who needs those services continues to grow. UMSN has a wealth of knowledge and great faculty working in this space right now. We haven't found a match between a donor and that particular strength of ours yet, but I'm sure one will come forward as we have more and more interactions with palliative care nurses. Palliative care is something that resonates with so many people; they understand that nurses need to lead in this area. To do that, we must ensure that our faculty have strong support. Students also need to have opportunities to study it. That's just one example of how the school's areas for growth can be married to our community.

CZ: Other than sharing stories of impact, how do you think UMSN supporters can see the impact of their contributions?

PH: The new School of Nursing building embodies their support and hopefully will

continue to serve as tangible evidence of how community support and gifts have changed the day-to-day lives of faculty and students. Whenever alumni and other supporters come through the school and tour, they can see something that's visibly alive, so they can see exactly what they are investing in. We're very fortunate to have that as a tangible piece. The technology we have in the building is state-of-the-art-for now. We're going to be continually investing in that to make sure it remains state-of-the-art. As health care becomes increasingly technology-driven, our school's technological capabilities are imperative to educating students about how they are going to practice in the future along with affording faculty opportunities to discover new ways to deliver that care.

CZ: You mentioned technology in the School of Nursing building. What impact is technology having on how you think about nursing education and innovation?

PH: The Sim Lab in the new building may comprise up to 50% of where our undergraduate students receive their clinical nursing education. Those technologies will change how we educate our students. We're also looking very closely at the area of telehealth, but it's important to distinguish between telehealth and telemedicine. Telemedicine involves using many different technologies, like the Internet of Things, to deliver health care to people who live outside of population centers where health care is more easily accessible. Telehealth is much broader than telemedicine. It's not necessarily focused solely on treating a disease process; it's

about providing the whole continuum of care, which is so vital to nursing practice. It looks at health prevention or population health on a wider scale, before patients are even ill. And it can be used to help people who are already ill monitor their conditions more effectively to enjoy a higher quality of life. They can have more control and a greater sense of agency by personalizing their own care.

Telehealth is the technology that will drive patient-centered care. In our building, as we outfit it to train students and as our clinical faculty continue to practice, I think capitalizing on telehealth is going to be a real game-changer in terms of how we deliver care and how we help students consider how they will provide care throughout Michigan in the future.

CZ: What have your experiences been working with donors?

PH: They all want to engage with us because of something that's inside of themsomething they have thought a lot about or have become passionate about recently. The campaign provided a structure and a bigger picture for people who knew they were part of a wave, not just a ripple. Our donors and supporters have a sense of immediacy to contribute and make a difference now. My job is to make sure they can be 100% confident in knowing that wherever they choose to invest their money, time and pride, there will be progress made on the vision we share for our institution. People will come and go at our school, but donors should know there will be continuity in their contributions.



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HOMECOMING 2018

2 Erickson Ph.D., RN, AHN-BC, 2013 Distinguished Alumni may of Mechigan School of Austin

Helen

1 Helen Erickson, Ph.D., RN, AHN-BC, FAAN (BSN '74, MS '76), was presented with UMSN's Distinguished Alumni Award. Erickson was one of the earliest champions of holistic nursing care that supports the unique perspectives of each individual. She served as a UMSN faculty member from 1976 to 1986. She also served on the faculties of the University of South Carolina College of Nursing, where she was Associate Dean for Academic Affairs, and the University of Texas at Austin School of Nursing, where she was Chair of Holistic Adult Health.

Linda

EMMINI













- Joyce Crane (right) (Ph.D. '89) accepts the UMSN Lifetime Achievement Award on behalf of her close friend and colleague Jo Anne Horsley (BSN '62, MS '68, Ph.D. '71), who was posthumously honored during this year's homecoming ceremonies at UMSN. The award, presented by Alumni Society Board of Governors President Linda Zoeller (left) (BSN '71, MPH '74, Ph.D. '96), recognizes Horsley's contributions to the nursing profession and excellence in the practice and science of nursing.
- **2** Alums take a look at one of the infant mannequins in UMSN's high-tech Clinical Learning Center.
- **3** Joyce Grames (BSN '55) sent a letter to Associate Professor Patricia Abbott, Ph.D., RN, FAAN, after reading about her in a previous issue of Panacea. Now, they're pen pals and met for the first time at this year's homecoming festivities.
- **4** UMSN Research Fellow Jade Curry Burns (Ph.D. '16, BSN '03) greets the Vice President of the Board of Governors Dan Tounsel III (BSN '03), his wife Dr. Ruby Long-Tounsel, son Dylan Long-Tounsel and Marilynn Magoon (BSN '56, MA '80).
- **5** UMSN student Katherine Gillette and her grandmother, alumna Nancy Gillette (BSN '64), with former UMSN dean Dr. Ada Sue Hinshaw (right).
- **6** No U-M celebration is complete without a round of "The Victors!"

UNMASKING HUMAN TRAFFICKING

One of the most insidious evils of the 21st century passes through the health care system every day. A partnership between nursing and law faculty at U-M has an army of advocates ready to stop it.

By Taryn Aldrich

THE NOTION OF BEING SEPARATED FROM ONE'S FAMILY UNDER NEFARIOUS CIRCUMSTANCES IS TERRIFYING, YET IT HAPPENS EVERY DAY TO VICTIMS OF HUMAN TRAFFICKING.

Human trafficking is often portrayed in the media as analogous to the sex trade. In reality, however, the scope of human trafficking is surprisingly broad; it involves a host of industries and victims, hitting much closer to home than we might think.

The National Human Trafficking Hotline defines trafficking as a form of modern-day slavery. Labor trafficking involves forcing an individual into labor or services by force, fraud or coercion; sex trafficking refers to the same indentured servitude in which commercial sex is either induced by force, fraud or coercion or in which the person performing the act is younger than 18.

UMSN has partnered with U-M's Law School to help trafficking victims. It is the first collaboration of its kind in the country, bringing together the unique and disparate skill sets of nursing and law. A generous gift from a fervent U-M supporter, Kathie Soller, has opened new doors to extend the program's reach.

AN UNLIKELY MEETING

Michelle Munro-Kramer, Ph.D., CNM, FNP-BC, an assistant professor of nursing in UMSN, and Bridgette Carr, JD, clinical professor of law and founding director of U-M's Human Trafficking Clinic, met serendipitously-they were each working on projects in Ethiopia during the fall of 2015. When Carr and Munro-Kramer connected there, they were inspired to collaborate and later began to focus their efforts on human trafficking.

Neither came into human trafficking work intentionally. Carr was working in a legal clinic representing asylum seekers. She received a call about a case involving foreign women who had been brought into Detroit and forced to work in a strip club; they needed lawyers. Although Carr initially turned down the case, she met with the women and later agreed to take it. She and her colleagues on the case were eventually deemed experts in human trafficking. Her work then broadened into situations involving other foreign nationals and finally to those involving all victims (domestic or foreign) of all types of trafficking.

Munro-Kramer's research has focused on gender-based violence, especially sexual violence among adolescent and college-aged women. She and another UMSN faculty member, Michelle Pardee, DNP, FNP-BC, collaborated on a clinical article, and Munro-Kramer discovered overlap between screening measures and response when identifying violence against women.

Then, Munro-Kramer said, "I met Bridgette [in Ethiopia] and learned more about the clinic. I was really interested in the health care needs [of that population]."

A GIFT FOR GROWTH

Soller's longtime partner, Curtis Mack (LLM '73), is a lecturer at U-M's Law School and introduced Soller to U-M's work around human trafficking. Soller attended an informational talk that inspired her to contribute to the institution's human trafficking efforts. She was trained as a nurse, and although she is no longer practicing, she previously worked in hospitals and with the Mountain Family Health Plan, an arm of the Peace Corps operating in West Virginia.



Signs of human trafficking

- Scripted or inconsistent history
- Unwilling or hesitant to answer questions about injury or illness
- Accompanied by an individual who does not allow the patient to speak, refuses patient privacy
- Resistant to assistance
- Unable to provide address (moves frequently)
- Unaware of location, current date or time
- Not in control of their own money
- Not being paid or wages withheld
- Inability to keep appointments or follow care instructions
- Exhibiting paranoia, anxiety, fear or submission during visit
- Malnourishment or poor health



"I became a nurse because I wanted to help people," Soller stated.

During her time in West Virginia she worked in the coal fields, helping women. Donating to UMSN-and thus facilitating Carr and Munro-Kramer's collaborationoffered her another way to contribute for the greater good.

When asked what had compelled her to give a gift to UMSN, Soller shared, "I wanted to be involved in something that I felt was very worthwhile. Something that would make a difference in the world. ... I wanted to really do some good."

Her gift has enabled the U-M Law School and UMSN to collaborate in education, advocacy and eradication efforts around human trafficking, the scope of which has yet to be achieved at other institutions.

Soller greatly admires the progressive spirit that permeates U-M. "Everything [the school does], before they put their stamp of approval on it, it has to be the best it can be or they won't do it," she remarked.

Carr and Munro-Kramer's teamwork perfectly exemplifies U-M's commitment to innovation.

JOINING FORCES

Thanks in large part to Soller's generosity, Carr and Munro-Kramer have collaborated extensively to raise awareness of human trafficking in all its forms.

Most U.S. data on human trafficking victims who have sought help tend to focus on women in sex trafficking; however, this is only one segment of the trafficked population.

Carr explained, "[Focusing on sex trafficking] makes people feel better. ... When we watch something about sex trafficking and say to ourselves, 'Well, I don't buy sex and I don't know anyone who buys sex, so I'm not a contributor.'"

Labor trafficking is different: "You have to walk away thinking, 'I'm a contributor'," Carr noted. "'I buy goods and services created by exploited individuals.' And we all do."

According to Munro-Kramer, a unique aspect of the clinic is that faculty and students see victims of labor traffickingnot only sex trafficking–and can gather data to better understand these forms of victimization. Such information can enrich the knowledge base around human trafficking overall.

As part of their educational efforts, Carr and Munro-Kramer worked with Pardee on a continuing education webinar. Munro-Kramer explained that the state of Michigan requires all state-licensed health care providers (e.g., nurses, physicians, pharmacists, social workers and massage therapists) to be educated on human trafficking, and this webinar meets that standard. The webinar has been made available to UMSN's preceptors, and each faculty member provides her own expertise: Munro-Kramer provides an overview of human trafficking; Pardee, who works clinically and has encountered victims of trafficking in the clinical setting, presents information on screening and relevant questions that might be useful for health care practitioners; and Carr offers information on trafficking in a legal context along with additional details about the clinic.

The human trafficking clinic at U-M's Law School is the first of its kind. Its purpose is twofold. In addition to students earning seven credits when they take the clinic, Carr said, "The clinic has two jobs: it's to train law students on how to be lawyers, and it's to provide excellent legal services to [human trafficking survivors]."

Carr and Munro-Kramer have worked on human trafficking-related initiatives in and outside the clinic. One such project is a human trafficking database.

Munro-Kramer explained, "Two graduate students and two undergraduate nursing students worked with the law students and staff at the clinic to develop a database to understand the health care needs of trafficking survivors who seek services [there]."

The database includes client information the clinic can use to build legal cases on behalf of victims. It also provides the nursing faculty with a better understanding of the health care needs of human trafficking victims. The hope is to apply this information to develop a standard intake form for the clinic that can be used to ensure that clients' physical and mental health care needs are addressed appropriately.

HELPING THOSE IN NEED

Victims are connected with the Human Trafficking Clinic through diverse channels.

"Clients contact us in a variety of ways," Carr said. "There is a national human trafficking hotline–a 1-800 number–available 24 hours a day. If someone calls into that and they need services and we're the right match, we ... get a call from the hotline."

Most cases come to the clinic through law enforcement or referrals.

Carr added, "We have deep, collaborative relationships with a variety of law enforcement partners, including the FBI, Homeland Security, Michigan State Police... they'll contact us [about cases]." The U.S. Attorney's Office, domestic violence shelters, churches and other nonprofits are additional sources of referrals.

A focal point of Carr and Munro-Kramer's work is victim identification; however, the signs of human trafficking appear to be as diverse as its forms.

"There are so many," Carr said. "And it depends on the context. But [generally], if something feels 'off'-you're getting that feeling in your stomach like 'Something's not right here'-and the typical labels don't fit: it's not child abuse, it's not domestic violence ... then it might be human trafficking. It might be someone who's being compelled into service for financial gain."

Munro-Kramer agreed that potential signs of trafficking are rarely definitive and are quite broad.

Soller also mentioned intuition when discussing the valuable role that nursing plays in addressing human trafficking. Put simply, she said, "Nurses are more in tune with human beings."

She added, "[Not everyone] would look at a 14-year-old that is kind of sick and dirty-looking and think, 'This child's being abused.' When nurses look at people, they look at them first as a patient. And if they see something that they think is abnormal ... then [they] feel compelled to help."

This "educated intuition," as Soller called it, shapes every aspect of the nursing profession. "[Nurses] have to be more alert to what people are before they treat them," she explained. "They have to know where [patients] are coming from or what their problems could be to problem solve and ... get to it as quickly as possible."

In many ways, nurses are uniquely equipped to aid trafficking victims. After all, these professionals are on the front lines of health care.

"Nurses see [trafficking victims] more than anybody else," Soller remarked.

Trafficking victims may be brought into clinics and hospitals for medical care when they fall ill. In many cases, Soller pointed out, nurses are the first professionals with whom victims come into contact in these settings.

PUTTING RESEARCH INTO PRACTICE

The challenges inherent in identifying human trafficking have served as an impetus for a collaborative educational effort, made possible by Soller's gift to UMSN: in the fall of 2017, Carr and Munro-Kramer teamed up to teach a multidisciplinary problem-solving class. Carr explained that the course, offered through U-M's Law School, brought together students from law, nursing, business, social work, public policy, public health and medicine to learn to identify victims of human trafficking in health care settings.

She added, "It was fantastic to teach with Michelle. We'd met in Ethiopia and then we worked together on research and [did the] webinar series ... and then to be able to pull it all together and co-teach a collaborative, multidisciplinary class was really fun for me."

Soller pointed out the value of a multidisciplinary class, noting that nurses could offer students from other fields a new perspective on what it is like working on the ground with human trafficking victims. The more people know about this issue, the more compelled they may be to do something about it.

Munro-Kramer echoed this sentiment. "It was very fun, and I think the students really appreciated the diversity of viewpoints." By combining her experience as a clinician and researcher with Carr's legal expertise in providing services for trafficking survivors, Munro-Kramer said, "The class worked out really well."

MAKING NEW CONNECTIONS

Carr and Munro-Kramer's work together has allowed them to cultivate unique relationships beyond those that exist between U-M's Law School and law enforcement agencies. Michigan Medicine is aware of the clinic's services, and health care providers can reach out to the clinic directly to make client referrals.

Interdepartmental lines of communication between the clinic and health care providers have developed as well. Munro-Kramer pointed out that she and Carr have had opportunities to inform others about human trafficking, including deficiencies in the research and the need for interdisciplinary collaboration. Munro-Kramer participated on the planning committee for a 2018 Michigan Meetings session, a three-day conference on ending gender-based violence. A clinic representative was also on the committee, allowing for human trafficking to be incorporated into the conference in a more central way.

"[The collaboration between the Law School and UMSN lets us] learn from each other and make others in the health care realm more aware of ... the need to watch out for [human trafficking] clinically," Munro-Kramer said.

Several nursing students have had the chance to work in the clinic. Munro-Kramer noted that she has received overwhelmingly positive feedback about this opportunity. In one case, a doctoral student took Carr and Munro-Kramer's course on identifying trafficking victims in health care and later became involved in the clinic's database analysis. "[The student has] really valued the interdisciplinary collaboration and being able to speak about this problem beyond the health care perspective," Munro-Kramer shared.

The same can be said for undergraduate students who have assisted with data collection.

"They've also really valued getting a different understanding of 'public health nursing," Munro-Kramer stated, especially because their time in the clinic has exposed them to new realities in the surrounding community. Students have also learned how they can work with different groups and what to watch out for on a community level.

LOOKING TOWARD THE FUTURE

Carr and Munro-Kramer have allocated Soller's gift across several projects as outlined in their five-year plan. They hope to expand the clinic's database and make educational sessions around human trafficking more widely available, including the webinar. Munro-Kramer also mentioned getting more students involved to identify the health care needs of trafficking survivors.

In the same vein, she and Carr would like to develop tools and clinical resources to help health care providers identify trafficking victims. Evidence-based resources to do so are scarce, especially for clinical assessment and policy. Once a clinical staff member has a sense that something may be amiss with a patient, Munro-Kramer said, there are few guidelines about what to do next. "A lot of clinics and hospitals are just starting to develop those policies," she added. "So what we develop for the health care realm could involve those."

She and Carr also aim to continue raising awareness about trafficking on a broader scale.

"The health care field [knows about] human trafficking, and there are articles coming out about it," Carr said. However, more remains to be done.

She emphasized that collaborations such as that between the Law School and UMSN are exceedingly rare.

"That's what makes this gift so important and essential," she noted, referring to the opportunity to do interdisciplinary work aimed at helping trafficking victims as comprehensively as possible.

Carr noted that much of the medical literature on human trafficking has pulled data from similar sources, resulting in "myths and misconceptions." Munro-Kramer also acknowledged the challenges associated with this type of research, particularly because the population tends to be hidden and vulnerable. She explained, "It's difficult to really

IT CAN HAPPEN TO ANYONE



capture individuals that are experiencing [trafficking] with a rigorous study." Many studies have included small samples and thus do not reveal the true scope of the problem. She and Carr would like to carry out research with larger samples if possible, although victim privacy concerns present other obstacles.

Munro-Kramer also hopes to engage in more collaborative research based on the clinic database to enhance the literature and let others know about their interdisciplinary focus.

Carr remarked, "The work that Michelle and I get to do together [brings] the health care piece into it."

Their efforts remain grounded in the reality of anti-trafficking work and are instrumental in helping victims at the moment they come out of slavery. This work provides a perspective on care currently missing from health care conversations about human trafficking.

EXPRESSIONS OF GRATITUDE

While Carr and Munro-Kramer are proud of their work to this point, they emphasized their thanks to Soller and UMSN for being flexible and willing to try something new.

Carr shared, "I definitely have a sense of gratitude toward Kathie for funding something that is atypical. ... These types of cross-unit collaborations, and the gifts that are attached to them, are rare." "I think [Soller's gift] has brought a lot of value," Munro-Kramer agreed. In addition to involving nursing students in the multidisciplinary class and clinic projects, "[We get to be] really innovative [even though] what we produce might not be typical academic output. ... The school has really embraced the webinar and what we've learned."

Soller, too, is thankful.

"I'm so grateful that I can [contribute]," she said. "It's a gift for me, too."

She credited Carr and Munro-Kramer with first envisioning how they could apply their expertise to help some of those who needed it most, adding that if their efforts can save even one child, then their work is worth it. She called their collaboration "inspirational."

"They are working hard," she said. "These are people who care-really, genuinely care. They want to see an end to man's inhumanity to man."

Soller has high hopes for their collaboration in the future, which is "being handled beautifully" even now.

"[The clinic] has done such an incredible job locating [victims]," she explained. "Getting them back into the mainstream of life and arresting the people that were kidnapping them or selling them."

In light of the progress Carr and Munro-Kramer have made thus far, Soller has no doubt that their work will continue to save lives.

She also emphasized the value of the hands-on experience students gain from Carr and Munro-Kramer's class, noting that she would like to see enrollment become so heavy that they need to open another section. She has long-term hopes as well. For starters, she would like similar collaborations to be initiated elsewhere. She acknowledged that eradicating human trafficking entirely may be idealistic; however, she would ultimately like to see more people become involved with this collaboration and others to limit the number of people being harmed.

To learn more about Carr and Munro-Kramer's work or to support their efforts, please contact Colleen Zimmerman (cmzimme@umich.edu or 734-764-1545).

Call the National Human Trafficking Hotline (1-888-373-7888) to get more information, make a report or learn more about human trafficking.

ALUMNI NEWS

Greer Glazer (BSN '76)

National League of Nursing's Mary Adelaide Nutting Award for Outstanding Leadership in Nursing Education

Karen Wismer Hollingsworth (BSN '76)

Michigan Medicine Chief Nursing Information Officer, Interim

Julie Postma (BSN '98)

Assistant Dean of Research at Washington State University

Julie (Lasecki) Thompson (BSN '89)

Practice manager and clinical manager of Beaumont Southgate Family Practice, Pediatrics and Urgent Care, approaching 30th anniversary

Linda Weglicki (Ph.D. '99) Dean of the Medical University of South Carolina's College of Nursing

2018 AAN Living Legend Joanne Disch (Ph.D. '85)

Christine E. Kasper (Ph.D. '82) Dean of the University of New Mexico College of Nursing

Suzanne Miyamoto (BSN '02, MS '04, Ph.D. '09)

Named the American Academy of Nursing's new Chief Executive Officer. Miyamoto previously worked for the American Association of Colleges of Nursing (AACN) where she served in a variety of roles since 2006, most recently as AACN's Chief Policy Officer. Her role at AAN is effective Dec. 3.



Miyamoto and Dean Patricia Hurn in Washington, D.C.

Jane Bodine Williams (BSN '66)

Honorary Doctor of Humanities degree from Rhode Island College (RIC). Williams retired from her position as professor and dean of RIC's School of Nursing earlier this year.

Laura Haskins (BSN '11)

Inspired by a three-week experience in Ghana while a BSN student, Laura Haskins knew she wanted to work in a global setting one day. She is now putting her education and six years of oncology nursing experience to work in Haiti as an oncology nurse educator at one of the only public cancer clinics in the country. Her role is primarily capacity building but also covers quality improvement, curriculum development, clinical practice guidelines and research.

2018 American Academy of Nursing fellows:

Kathleen Bobay (Ph.D. '03) Hala Darwish (MS '03, Ph.D. '03) Doris Grinspun (MS '91) Rebecca Lehto (Ph.D. '04, MS '97) Lixin Song (Ph.D. '09) Patricia Thomas (MS '93, BSN '83)



UMSN's partnership with Nobel Peace Prize winner

Dr. Denis Mukwege was named a winner of the 2018 Nobel Peace Prize for his work to end sexual violence against women.

UMSN Professor Janis Miller, Ph.D., RN, APRN, FAAN, met the Congolese surgeon when Mukwege was awarded U-M's Wallenberg Medal in 2010. Mukwege and Miller saw an opportunity to join forces and improve the care and related research for survivors of trauma. They founded the International Center for Advanced Research and Training in the Democratic Republic of Congo (DRC) with collaboration from U-M and DRC partners.

UMSN's partnership expanded when Denis' son, Alain Mukwege, came to UMSN in 2015 as a research associate working with Miller.

"U-M is a university that has an eye open to the world," Alain said. "People here know... by exchanging knowledge you can empower communities here and very far away."

FACULTY NEWS AND ACCOLADES



Debra Barton, Ph.D., RN, FAAN UMSN Associate Dean for Research

Sue Anne Bell, Ph.D., FNP-BC

NIH K23 for "Individual and Community Drivers of Hospitalization among Older Adults after Disaster."

Appointed to the National Quality Forum's Healthcare Readiness committee.



Barbara L. Brush, Ph.D., ANP-BC, FAAN

National Academies of Sciences, Engineering, and Medicine committee report, "Permanent Supportive Housing as a Foundation for Health: Evaluating the Evidence."



American Psychiatric Nurses Association grant, "Arab American Women with Recurrent Depression: Self-management Strategies and Social Determinants."

Deena Kelly Costa, Ph.D., RN

Co-director of the National Clinical Scholars Program based at U-M's Institute for Healthcare Policy and Innovation.

Gina Dahlem, Ph.D., FNP-C, FAANP

Public Health Nursing's Article of the Year for "Beyond rescue: Implementation and evaluation of revised naloxone training for law enforcement officers."



Lynae Darbes, Ph.D.

R01 from the National Institute of Mental Health/NIH for "Testing strategies for couple engagement in prevention of mother-to-child transmission and family health in Kenya."

Ivo Dinov, Ph.D.

Vice chair of UMSN's Health Behavior and Biological Sciences department.

Christopher Friese, Ph.D., RN, AOCN®, FAAN

Appointed member of the Governing Board of the Patient-Centered Outcomes Research Institute. National Academy of Medicine Emerging Leaders in Health and Medicine.

Professor Emeriti Beatrice Kalisch and Sally Lusk

2018 American Academy of Nursing Living Legends



Elizabeth Kuzma, DNP, FNP-BC Program lead for UMSN's Family Nurse

Practitioner program

Deborah Lee, MSN, FNP, ACNP-BC American Nurses Foundation Grant for a study to characterize vincristineinduced peripheral neuropathy prevalence, severity and temporal patterns during the second year of all treatment to elucidate timepoints for future intervention research and identify children at the highest risk for dysfunction.

Jody Lori, Ph.D., CNM, FACNM, FAAN R01 from NIH/National Institute of Child Health and Human Development for a randomized controlled trial in Ghana on group antenatal care.

Lisa Kane Low, Ph.D., CNM, FACNM, FAAN Greenwall Foundation Grant for an electronic fetal monitoring study



Milisa Manojlovich, Ph.D., RN, CCRN American Academy of Nursing fellow

Marjorie McCullagh, Ph.D., RN, APHN-BC, COHN-S, FAAOHN, FAAN

Chair of American Academy of Nursing Health Behavior Expert Panel. American Academy of Nursing Edge

Runner



Barbara Medvec, DNP, RN, NEA-BC

American Association of Colleges of Nursing's inaugural AACN/Apple Digital Innovation Bootcamp: From Content to Action.



Elected to the board of the Nursing Network on Violence Against Women International as a member-at-large.

Marie-Anne Sanon Rosemberg, Ph.D., RN

Vice Chair for Research for UMSN's Systems, Populations and Leadership (SPL) department.

Center for Occupational Health and Safety Engineering Pilot

Project Research Training grant for "Occupational Inhalation Exposure to and Health Risk of Volatile Organic Compounds of Hotel Housekeepers."



Akshay Sharma, Ph.D., MBBS, MPH NIH R21 examining the acceptability and feasibility of self-collecting biological specimens from high-risk populations.



Clayton Shuman, Ph.D., RN

Huffman Splane Emerging Nurse Scholars Forum



Ellen Lavoie Smith, Ph.D., APRN, AOCN®, FAAN

Welch/Woerner Path-Paver Award by the Friends of the National Institute of Nursing Research



Rob Stephenson, MSc, Ph.D.

Chair of UMSN's Systems, Populations and Leadership department

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Marita Titler, Ph.D., RN, FAAN Co-wrote"Evidence-Based Practice for Nursing and Healthcare Quality Improvement" book as a comprehensive guide to planning and conducting EBP and quality improvement projects.



Terri Voepel-Lewis, Ph.D., RN

Protégé Award from the Friends of the National Institute of Nursing Research



Olga Yakusheva, Ph.D. UMSN Chair of the Faculty





By David Pratt

Michelle Fry Hanson Scholarship Fund: Supports graduate students at UMSN.

"I'm a 'mature student,'" Mary Anne Ramer declared. "I could have given birth to most of my classmates!" Ramer delayed her nursing education due to family constraints. She and her husband had followed his job from Philadelphia to San Diego to Sault-Sainte Marie, Mich., where, with her youngest in elementary school, Ramer earned her BSN from Lake Superior State University. Then the couple made their last move to Macomb. Mich., 75 minutes northeast of Ann Arbor. It was time for Ramer to get her Doctor of Nurse Practice (DNP). "Our youngest entered college," she said. "I told my husband, 'I want to go to U-M. When I'm done I'll support you in your second career, and we can be old and happy!"

Ramer chose to pursue a DNP out of one part inspiration, one part practicality: "In San Diego I took my kids to a pediatric nurse practitioner I really admired," she recalled. "Once I was working as a nurse myself, I knew I wanted to do more for patients, the way she did." In terms of practicality, she remarked, "A DNP is becoming the gold standard for entry level nurse practitioners the same way that BSN is for RN's. I could get my master's and be 'grandfathered in' when the rule changes, but I'd rather earn the doctorate now in just one more year than go back later for two additional years." Ramer added, "I am also obtaining a certificate in nursing education so I can teach. I would love to pass on my knowledge and passion, how there are extraordinary days and days when you cry in the car before you go home, but the good far outweighs the bad. When a kid runs in and gives you a hug and says, 'You are my favorite nurse,' that is the best ever. To take that to the next level as a nurse practitioner-I am humbled to have that opportunity."

The Fry Hanson Scholarship has helped Ramer with the 2.5-hour round trip from Macomb, including staying over on evenings when she finishes late at the hospital with a class the following morning. Other financial challenges accompany being a "mature" student: younger students are eligible for loans that older students may not be, although they can apply for FAFSA. "A scholarship can make us cry when we get the notice," Ramer said. "It can make that much of a difference. I truly thank Ms. Fry and Mr. Hanson for their incredible generosity."

Ramer would like to encourage more support for mature students. "We can have a difficult time returning to school and fitting in," she said. "But we have real-world experience. In undergrad, my classmates didn't notice kids' developmental milestones the way I did. My professor said, 'You're really on top of this.' Of course I was. I'd had four kids!"

Ramer spoke for those kids and for kids everywhere, as well as herself, with a closing message for those who might establish future scholarships at UMSN or elsewhere.

"Education is the one thing you can invest in that gives unlimited returns. Like tree roots, it goes deeper and deeper. There are benefits-some of which you cannot see, but you know they are there. We need to keep watering those roots."

GONZALO GONZALEZ

Gateways Fellows Program

By David Pratt

Gateways Fellows Program: Supports students as they explore how to build a range of graduate, post-graduate and professional careers in nursing that will help them make a difference for diversity in the world around them.

Ann Arbor native Gonzalo Gonzalez came to U-M for his B.S. in Biology and "quickly wanted more," he said. "I wanted to work with people, using what I had learned through biology. My mom is a neonatal ICU nurse at Michigan Medicine, and she told me about all the opportunities in nursing. I had seen the support network in the biology program and heard there was a great network at the U-M School of Nursing, too."

In considering what inspired him to pursue nursing, Gonzalez explained, "Nurses are at the bedside 24/7 with patients. You get to understand patients and families and help them at their most vulnerable." He decided that a DNP degree was the best fit for him. "I want to work as a pediatric primary care nurse practitioner," he said, "understanding and treating patient issues [and] then apply that knowledge as a professor, which the DNP allows me to do."

A chance email informed Gonzalez about the Gateways Fellows program. The program supports early career research for nursing students, particularly at the intersection of nursing and issues around ability, citizenship, class, gender, race and sexual identity. Gateways Fellows receive a host of benefits: scholarship assistance; experience in research, writing and publication; and support from peers and faculty with related interests.

"I wanted to learn from colleagues," Gonzalez said, "and Gateways had roundtable peer review. This is crucial, getting your research critically reviewed by others and seeing other ways you might frame your thinking. We all looked forward to these meetings; it's amazing to hear what others are interested in." The



fellowship also helped Gonzalez pay for books, which can cost up to \$400 or more per semester for nursing students-even when buying e-books.

Gonzalez's research involves personalized health care. "So much of nursing education is seeing people as patients," he explained. "We need a paradigm shift, to think about patients as unique human beings. Each patient interaction is a unique experience; you must learn everything you can about the patient on a personal level, beyond their diagnosis. We need more nurse scholars who can develop evidence-based practice through research, implement it for patients and improve quality of care."

The Gateways program is headed by Rushika

Patel, Ph.D., UMSN's chief inclusion officer. Gonzalez has served on Patel's student committee and has found inclusion work meaningful. "It unearthed my passion for understanding the health demands of underserved populations and for personalized health care," said Gonzalez.

What has Gonzalez experienced at U-M as a minority himself? "The university has supported me in my endeavors and made me feel welcome," he said. "I have always had a group of classmates and faculty to lean on in times of need. I got this from the Gateways program, and I am so grateful." Still, Gonzalez noted, Latinx people are terribly under-represented in graduate programs. "That needs to change," he said. "That'll be me in the long term!"

NAOMI NICHOLS Jacob Scholar

By David Pratt

Denise Shough Jacob Endowed Scholarship in Nursing Fund: Provides financial support for nursing students from Detroit who have overcome obstacles, are first-generation college students or are committed to serving historically underserved or underprivileged populations.

Detroit native Naomi Nichols always wanted to be in health care. She completed an internship in high school with nurses at Detroit Receiving Hospital. "I fell in love with nursing," she said. "I loved how hands-on nurses were and how attentive-the time they spent with patients-and how knowledgeable they were." Nichols is now in her third year at UMSN with a Jacob Scholarship, awarded to first-generation students from underrepresented groups. Preference is given to students from Detroit. The scholarship helps with expenses, especially with books.

"Without that scholarship, I would have to hold down a job along with everything else," Nichols said. "Luckily, the scholarship is paying for the things I was most concerned about. I am very grateful not to have that stress I might have had."

So far, Nichols has loved her time at U-M: "I'm learning a lot about nursing and about life," she said. "There is a lot Michigan has to offer that I can't get anywhere else. The Jacob Scholarship, of course, and I got another scholarship through the alumni program. [UMSN] has an amazing alumni base. The school's resources and the academic life are amazing compared to other nursing schools. We have access to the nursing-specific resources at the U-M Career Center and we have [Counseling and Psychological Services]."

In terms of future plans, Nichols predicted, "I'll either go into emergency pediatrics or maybe be a neonatal nurse practitioner. I always wanted to work with babies, and I have a cousin who works in [the] NICU. I visited and was amazed to see how the unit



functioned. I also like emergency because it is fast-paced, and you never know what you're going to get out of it." Nichols hopes to one day earn her DNP.

When considering a time when she could perhaps become a scholarship donor herself, Nichols reflected on the cycle of support. "Your school helps you, so you give back, and then some time in life, you might be helped by the person you supported." She shared another reason to establish scholarships: "There are some people who have the skills to be something, like a nurse, and they would be amazing at it, but they don't get the opportunity. Those people's dreams are a good reason for someone to give back to their school."

Nichols offered the following advice to students just starting out, as she was two years ago. "Push through!" she said. "Nursing school is in no way easy, but when you get to the level where you can make a difference in someone's life, it is worth every hour of studying. The difference you make in the world is totally worth it!"



By David Pratt

Sara and Robert Rothschild Global Health Scholars Program: Provides global health experiences to students at UMSN.

Katrina Coley wasn't entirely sure what to expect when she set off for Monrovia, Liberia last summer. "The people were very friendly," Coley recalled of her arrival, "And there was not much of a language barrier." As Coley would discover, many of Liberia's 4.7 million people speak one of the languages collectively known as "Liberian English." Liberia is in southern West Africa, bordering the Atlantic with Sierra Leone to the west and Côté d'Ivoire to the east. The capital, Monrovia, is prosperous and busy, with a population of one million; however, everyday conditions proved challenging. "In one of the maternity waiting homes," Coley said, referring to residences for women who develop complications late in their pregnancies, "There was no air conditioning and electricity was inconsistent."

Coley had long wished to go abroad but could not afford it; she thought she

would have to wait to travel until she was a practicing nurse. "Then the Rothschild Global Health scholarship fell into my lap," she said. She already knew a bit about Liberia from one of her mentors, Jody R. Lori, UMSN Associate Dean for Global Affairs. Lori applies a human rights framework to improve maternal and newborn health in areas that present cultural, gender-based, geographic and socioeconomic barriers.

Coley and Lori traveled together to Monrovia and joined a UMSN graduate student who was gathering data on maternity waiting homes. The three then met with a constellation of professionalsrepresentatives from Africare, a Liberian health non-governmental organization; Monrovian health care workers; and Liberia's deputy minister of health-to discuss ways to improve food security in maternal waiting homes. "The homes are located right by hospitals and clinics," Coley explained, "So women have access to skilled care. If we improve the sustainability of the homes, we increase hospital deliveries." These measures can collectively reduce maternal and infant mortality.

With regard to her future, Coley plans to keep international work in mind. "They make it easy for us students at U-M," she said. "We have all these opportunities at our fingertips. You just have to keep pursuing."

Looking back on her time in Monrovia, Coley concluded, "The most important thing I got was a global perspective. I saw what people faced there, and it reflected issues here. For example, I could easily identify the main issue around access to health care in Monrovia: they don't have the transportation! And now I see more clearly that that's a problem here, too, for older people or those living on the street. Awareness of [the] world in which you live is especially important for nurses. People look to us to think holistically."

She added, "All I learned abroad underlines the importance of these scholarships. I am very thankful. ... Without the scholarship I wouldn't have gone, because I simply wouldn't have been able to pay. So it has made all the difference in the world, and it will continue to."



Giving Perspective

By Taryn Aldrich

A gift to UMSN aims to enrich learning through global studies.

Bob and Sara Rothschild have long been inspired to help others.

"Through the years," Sara said, "We have learned that partnering with developing countries and tapping into all of the energy and ingenuity of the people there is the best way we can make a contribution to the world."

The Rothschilds generously funded the Rothschild Global Health Scholars program, established at UMSN in 2016; however, their interest in community wellness emerged years earlier.

EARLY INSPIRATION

The Rothschilds traveled to the region of Cape Town, South Africa in 2004 and met with friends engaged in humanitarian efforts in the area. One project involved the development of a single-room library that was soon filled to capacity. The Rothschilds decided to help fund the library's expansion.

A year later, Sara (BSN '65) traveled to Botswana with Habitat for Humanity, where a fellow volunteer pointed out the need



for a library. The Rothschilds were inspired to continue the work they had begun near Cape Town, and the Bob and Sara Rothschild Family Foundation was born.

Since then, 16 libraries have been built within various villages in Botswana. The Rothschilds visit the country two to three times per year and have cultivated close working relationships with leaders in the Ministry of Youth Empowerment, Sport and Culture Development, and more recently the Ministry of Health and Wellness. Their continued visits have revealed other resources in Botswana that could be either developed or improved.

Clinics are just one example, as many were built in the 1970s and are in need of some updates. In speaking about the conditions in Botswana and similar countries, Sara said, "Transportation is [an] issue–[residents] might be an hour from the nearest hospital–but they find ways to manage. It's eye-opening. ... We wanted to make a contribution to help students who are interested in studying in another country [be able to] do that."

PROMOTING A GLOBAL OUTLOOK

The Rothschild Global Health Scholars program is intended to support nursing students in exploring–and hopefully engaging in–health-related opportunities in developing countries.

Scholarships have been used to defray the costs of travel to Botswana, Liberia, and other parts of Africa.

"[We wanted] students at [U-M] to have a scholarship [to travel] into a developing country to have a global experience," Bob explained.

UMSN similarly emphasizes the importance of global immersion. For example, UMSN's global health minor is one of the first such offerings in the country. Twenty-three students had declared the minor in 2018, up from five when the program launched in 2016.

In a survey of incoming freshmen for the 2019 academic year, 95% were highly interested in having a global immersion

opportunity at U-M, up from 68% in 2016; 95% of students surveyed also reported that the opportunity to study abroad during their nursing program influenced their decision to choose UMSN.

Student interest is blossoming, and the Rothschilds' gift makes global opportunities available to more and more students every year.

"It's a big commitment to travel abroad in many respects," said Jody Lori, Ph.D., CNM, FACNM, FAAN and Dean of U-M's Office of Global Affairs. "Some students can't even fathom that they could afford to do this. ... [The Rothschilds'] gift is helping those students to achieve some of their dreams."

As a UMSN alum, Sara was thrilled to be able to give back to her alma mater.

"My experience at U-M was really a positive one," she said, "and I've always been grateful that I had the opportunity to be a student there."

The Rothschilds hope their contribution will help students realize "what a small world we live in."

"Americans don't have all the answers," Sara pointed out, adding that we should be open to learning from people from other cultures. "It's very valuable for people of any age [but especially in college] to have an experience in [developing countries]."

A HANDS-ON EXPERIENCE

Students were first afforded an immersion experience in Botswana in the summer of 2017, when a team of five UMSN undergrad students traveled to Botswana with clinical instructor Judith Policicchio, DNP, RN, APHN-BC. They met with five students and a faculty member from Oregon State University in the village of Maunatlala, where they spent a month immersed in community health.

Policicchio has an existing relationship with the University of Botswana's nursing school, and her students conference via Skype with students there during the winter semester.

"With the Rothschilds facilitating and supporting [these] efforts ... I really wanted to be able to take students over there," Policicchio said. "[But] it takes a lot of time and planning."

Policicchio's students relished the opportunity. "They had the time of their life," she stated. "It was an interdisciplinary experience, so they had the chance to see how it is to work with someone else that's outside of [their] field."

The Rothschilds also had the chance to hear students' feedback after the trip and were happy to find that it had been an apparent success all-around.

"The students [who] went really did feel it was worthwhile," Sara said. "They really got a lot out of it."

Bob concurred. "[The students] were so impressed with the people and how they

"AMERICANS DON'T HAVE ALL THE ANSWERS. IT'S VERY VALUABLE FOR PEOPLE OF ANY AGE (BUT ESPECIALLY IN COLLEGE) TO HAVE AN EXPERIENCE IN [DEVELOPING COUNTRIES]." - SARA ROTHSCHILD

were treated and how ... appreciative the village was of them coming there."

Policicchio reiterated the value of the trip for her students. "They got to see a place that they had never, ever experienced before. They had a tremendous experience working alongside the community."

HOPE FOR THE FUTURE

The Rothschilds hope that these and similar experiences can foster UMSN students' appreciation of how resourceful people can be in other parts of the world, particularly in areas without access to what many developed countries take for granted.

"We see value in students having an experience ... [with people who] have found answers to things that are just not demanded of [people in developed countries who] have so many things at [their] fingertips," Sara said.

Ideally, the realization of these disparities will have an enduring impact. Sara explained, "In countries where the resources of water and power-very basic needs are sometimes real challenges. ... When [students have] that experience, then they bring a different perspective when they are returning to the United States. They might even be interested in working in a more global setting."

Bob agreed with this assessment. "I'm hoping that students, after having this experience, will change ... their direction of what they might end up doing 10 or 20 years from now," he said. "Maybe they will take on a position, because of their experience, to [be involved] in global health. ... That would be a very positive outcome."

Such an outcome could extend well beyond nurses and the individuals they help. "Students and people that do global things," Bob stated, "have [a positive] impact on our country."

In Botswana, for example, the country's approach to health care is already shifting. "The whole aspect of wellness is ... taking hold in Botswana," Sara said. "The Ministry of Health, they changed their name ... to the Ministry of Health and Wellness. They're looking at 'How do we stay well?'"

The state of health care in various countries, and the measures being taken to broaden its scope, present prime opportunities for nurse involvement. To that end, Sara emphasized the potential for students to collaborate with other health care professionals. She hopes their funding will help "[UMSN students connect] with other leaders in the health field when they have a chance to travel to conferences or for educational purposes ... [and] meet other people who are leaders in their field."

The Rothschilds would also like to see U-M students have opportunities for extended

GLOBAL LEARNING





Botswana - Clinical immersion and interprofessional experience for community health nursing students to better understand rural health care in Botswana.



Liberia - Global learning experience for students to help disseminate UMSN research findings to the Ministry of Health, County Health Team members and community stakeholders.



South Africa - Clinical immersion for students to visit hospitals in Johannesburg and learn about the challenges facing pediatric care in South Africa.



Thailand - Learning experience aimed at improving students' skills in forming and translating ideas into entrepreneurial ventures and enhancing their global mindset through collaboration.



Zambia - Experience for students to work with rural communities to evaluate the impact of community mobilization and micro-financing to improve maternal and newborn health in Zambia. stays as part of their Global Health Scholars program, as they have found more immersive stays to have a greater impact on students.

"We believe there is a lot to be gained in this exposure that students can have when they're working for a month or two in a developing country," Sara explained.

Bob agreed. "We like students to spend, when they do a global health project, ... hopefully a month at a given place because that gives them much more experience with what's really going on."

MUTUAL BENEFITS

Along with her students, Policicchio has felt the effects of her time in Botswana.

"I can't even begin to tell you how it's changed my perspective," Policicchio said. "I could have never, even gained the appreciation [for the differences in how UMSN and Botswana provide nursing education] by not traveling there. ... Seeing the different role that nurses play [in Botswana] ... it's changed me tremendously."

She credited the Rothschilds with facilitating these types of connections. "It's just been a blessing for me, personally, to get to know the Rothschilds," Policicchio said. "They've been so supportive of mentoring me and helping me to understand the climate and conditions in Botswana to make me a better colleague to the School of Nursing over there. It's been a real pleasure."

Policicchio hopes to extend her international

collaborations by emulating a model of care from the University of Wisconsin, where foreign partners are involved in the nursing education process and share clinical experiences. She would like to foster connections between nursing student groups at UMSN and in other countries.

"To have a colleague that's in a foreign country and to be able to talk about the different situations that you're facing and to have joint learning opportunities," Policicchio said, "I think that is probably the most rewarding experience that I could facilitate."

Students and faculty are not the only ones who have been enriched by the Rothschilds' gift.

"We gain something by our interactions and our contacts and our contributions," Sara said. "We are not only giving, we are receiving from these other countriesreceiving their friendship and their insight."

The Rothschilds hope that students will continue to experience the same. "We really have a passionate belief that [global work is] of value, and we [think it's important] to give students that opportunity."

So does UMSN.

"We know we want our graduates to be global citizens," Lori said. "We want to have an impact on improving the health and wellbeing of underserved populations everywhere, that's what we do as nurses. ... Their gift is helping [us] to fulfill that mission."



My Beginnings

By Jade Burns (Ph.D. '16, BSN '03)



Jade Burns is a research fellow at UMSN. She has more than 10 years of experience working with youth in a variety of clinical, community-based and academic settings. Her research is centered on innovative approaches using community-engaged research and technology to improve health care and sexual health outcomes among adolescents at community health care centers. In addition to her research, Burns is a clinical expert on pediatric and community-based health care. She has taught courses at UMSN focused on population health, fundamentals in nursing and interprofessional education.

I never planned to pursue nursing; little did I know that a call from UMSN would change everything. Shortly after graduating from U-M with a degree in biology, I accepted a position at a UCLA summer enrichment program for high school students interested in STEM. I was considering working in either secondary education or public health at the time. Then, I was offered a job with UMSN, as I had developed many connections across campus from having coordinated various pre-college programs. The position involved introducing middle and high school students in a pre-college program to the field of nursing. I knew little about nursing but connected well with teens, and the work seemed like an opportunity I couldn't pass up.

The program was nicknamed GENESIS (Gaining Education in Nursing Education; Strength in Science) and helped prepare under-represented students with the skills they needed to succeed in college. GENESIS sought to motivate students from disadvantaged backgrounds to become nurses and then return to underserved areas to improve patient care. My work with this program introduced me to a range of nursing specialties, from a day in the life of a BSN-prepared nurse to the role of a Ph.D.-trained nurse-scientist. I learned that nurses are not only some of the most trusted health care providers; they also serve as educators, community liaisons and patient advocates. I fell in love with the idea of nursing. Even more, though, I was eager to combine my passion for education, science, community wellness and health care into one profession. In the end, my time with GENESIS recruited me into nursing.

I applied to nursing school and attended UMSN's second career program. My first job was in the emergency room at Henry Ford Hospital in Detroit, Mich. I realized the importance of teamwork in high-stress situations and learned to provide effective care to trauma, acute care, mental health and pediatric patients. I was introduced to triage but spent most of my time in QuickCare with adolescents and young adults. Later, I went to work in the public school systems in Metro Detroit (Romulus), where I was exposed to school-based health care clinics while learning to address teens' health care needs. I loved working with that population and decided to become a pediatric nurse practitioner.

I attended the University of Pennsylvania's pediatric nurse practitioner primary care program and requested clinicals in urban environments, taking care of pediatric and teen patients. My training was excellent; while in the program, I took a Ph.D. cognate course on designing interventions to promote health equity and reduce health disparities. The class addressed communitybased research and collaboration with community organizations, from churches and clinics to barbershops and schools. After graduating as a certified pediatric nurse practitioner, I accepted a position at a federally gualified health center in Detroit as a pediatric nurse practitioner and was later promoted to the director of Healthy Teens Community Care Center, an adolescent clinic. The clinic offered primary care to adolescents and young adults who were homeless, pregnant, new parents, and so on, but one of the clinic's focal areas revolved around sexual health. I discovered that I had countless questions about how to improve adolescent health care, as the clinic's programming was helpful but seemed insufficient. I wanted to know why adolescents did not utilize preventative services earlier and how we could promote clinic access among this population. I was especially interested in identifying barriers and facilitators to such care and finding creative ways to inform teens about sexual health outcomes. I realized the course I had taken on intervention design could be put to good use!

It was then that I decided to return to school for a Ph.D. in nursing to fully explore my interest in adolescent sexual health and behavior. I am completing a post-doc to a tenure-track position at UMSN's Center for Sexuality and Health Disparities, where I am working to improve health care and sexual health outcomes among adolescents at community health centers by using community-based participatory research and technology to reach adolescents. I have long known that I would like to give back to Michigan communities, and especially Detroit, because myself and my entire family have roots in the area. I was raised in Michigan and greatly appreciate the many opportunities that my time here has afforded me. As a researcher and clinician, I am committed to serving the city of Detroit and training health care professionals and researchers to work in urban community settings. I also strive to establish productive community-academic partnerships to promote health-centered collaboration. I never expected to fall into a job at UMSN after college and much less predicted that I would one day become a nurse myself; however, this fortuitous path has been lined with unforgettable experiences that have enriched my role as a nurse and my education at U-M.



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VICTORS FOR MICHIGAN

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