RECONNECT, REFLECT, RENEW
REUNION 2015
Class Act  
The Class of 1965 marks its golden anniversary.

Life (and Work) After Nursing School  
By Sibyl Wilmont ‘08  
Connecting alumni with students to help teach them lessons they won’t get in the classroom.

The DNP Difference  
Our grads explain how the clinical doctorate opened doors for their careers.

Nurse Midwifery Comes of Age  
By Francine Russo, PhD  
Meet three of our program directors who have shaped the practice of midwifery.

ON THE COVER:  
Student Sandra Bennett-Reach (left) and Keville Frederickson Tornasson ’64 (right)
Welcome to your 2015 Columbia School of Nursing reunion.

To mark the occasion, we have prepared a special edition of our Columbia Nursing magazine. In the following pages, you will find photographs and articles that pay tribute to our long tradition of excellence in academic education, research, and clinical practice. For example, as this year marks the 10th anniversary of our pioneering DNP program, we asked graduates from the program to reflect on the degree’s influence on their professional and personal lives. You can read how the degree has helped them to advance their careers and achieve their personal goals beginning on page 8.

One of the most heartwarming attributes of our alumni is their willingness to give back to the school that, they tell us, has meant so much to them. One of the ways they express their appreciation has been by participating in a recent program that has paired students with our alumni as mentors. On page 4, you’ll read how these experiences influenced our students in ways that not only reinforce their formal education but will help shape their careers as compassionate caregivers.

Columbia Nursing’s nurse midwifery program, the oldest in the nation, is celebrating its 60th anniversary this year. Just as women’s attitudes have changed over the years toward caregivers involved in their pregnancy, birth, and the postpartum period, so has our nurse midwifery program. On page 10, you’ll meet three of our 10 visionary nurse midwifery program directors who have guided our program from strength to strength.

Finally, we pay tribute to the Class of 1965 with a special photographic essay that we hope captures the energy and enthusiastic character of this special group of former students, a product of their times as well as of their Columbia Nursing education.

I hope you enjoy your day with us, reconnecting with old friends and re-establishing ties to your school.

We’re glad you’re here!

BOBBIE BERKOWITZ, PhD, RN, FAAN
Dean, Columbia University School of Nursing
Mary O’Neil Moninger Professor of Nursing
Senior Vice President, Columbia University Medical Center
Much has changed in nursing since 1965. When students from the Class of ’65 matriculated, nursing was one of the few professions open to women, and it was expanding: The nurse practitioner role had its inception in the mid-1960s as a response to the nationwide shortage of physicians.

Students were required to wear a uniform in that era: a starched white cap and black stockings and shoes the first two years, and white stockings and shoes for their third year. The students’ custom was to joyfully ing their black stockings over a campus wall after completing their second year.

But one thing remains the same for the graduates from the 1960s and today: A Columbia Nursing education provides students with the foundation for rich and varied careers, from the bedside to the boardroom.

Excerpt From the Class of 1965 Yearbook:

Three years of “psychosocial maturation,” three years of “socialization and reorientation,” three years of role-models and role-makers, three years of striving to attain that goal of professionalism deemed so desirable—these are just a few concepts we have imbibed in the last three years. Sounds stuffy, you say? Do the memories of standing on the roof watching them light “our” bridge or of playing leap-frog in the hall or of solving the world’s problems with the maid or of rushing out to catch that train sound stuffy? I hope not. All of these add to something which we have been cultivating throughout our years here—an individualism lled with warmth and fond memories; an individualism found in the midst of the group, those who are our peers and superiors; and individualism that can only be sign ed by growth and maturity. My wish for each one of us is that we continue to nd beauty and love and pain and growth in the world around us and within us.
As informal mentors, Columbia Nursing alumni reflect on their pasts to show students their futures.

When she began Columbia Nursing’s Entry-to-Practice (ETP) program, San Francisco native Anna Szarnicki wasn’t sure what job opportunities might be waiting for her as a psychiatric-mental health nurse practitioner. To her delight, she discovered a world of options, thanks to her informal mentor, Abby Stuthers ’98, MPH, with whom she was paired for a unique day-in-the-life experience in January—a new initiative jointly launched by Columbia Nursing’s offices of student affairs and alumni relations.

The Winter Break Alumni-Student Connection paired more than 75 students with alumni working in their fields of interest, either in New York or back in their hometowns. The pilot program had two goals: first, to offer students an insider’s view of the broad range of career paths available to advanced practice nurses, and second, to expose them to the breadth of workplace options outside hospitals and in other settings they may not expect. That was also a goal of alumni, many of whose comments revealed a common theme: that advanced nursing practice rewards those who embrace entrepreneurship, value autonomy, and make leadership a habit.

Perfect Pairings

“I was blown away that Abby is doing exactly what I want to do,” said Szarnicki. Having experienced mentorship programs at other institutions in the past, she was pleased by the appropriateness of her match with Stuthers, who works in the setting and with the population that most interests her—an Upper East Side shelter for men diagnosed as MICA (mentally ill/chemically addicted).

During her time with Stuthers, Szarnicki learned that, depending on the level of bureaucracy and time constraints...
of a particular setting and population, psychiatric NPs may spend a lot of time doing medication management and often find it challenging to focus on therapy and “quality time” with patients. Stuthers valued the experience, too. Curious about the ongoing changes in Columbia Nursing Psychiatric-Mental Health Nurse Practitioner program, she learned through Szar nicki that “it goes deeper into advocacy for patients, advanced practice, and for systems change that focuses on creating more humane, less bureaucratic interdisciplinary care environments for our patients who need greater access to services.”

Michelle Stupka, a first-year ETP student interested in becoming a pediatric nurse practitioner (PNP), was matched with Rachel Samuels ’05 ’07, PNP who works with chronically ill children—most diagnosed with severe neurodevelopmental disorders—in foster care at The Children’s Aid Society. Stupka accompanied Samuels on children’s foster-home visits and at a specialty appointment at Kings County Hospital, where she met a young boy living with cerebral palsy and global developmental delays.

“He was incredibly fearful of his medical appointment,” Stupka said, “but as we consola
d and tucked him safely back into the stroller, he smiled at me. He was nonverbal, but what he communicat
d through his smile really touched me. He lit up and it lit something up in me, too. It is a privilege to witness the resiliency in these children and it makes me even more passionate about a career in pediatrics; these children are truly inspiring.

“I was blown away that Abby is doing exactly what I want to do,” said Szarnicki.

Out of the Box
Margaret Romero ’98 ’00, NP-C, lives and breathes entrepreneurship, working full time as the medical director of an integrative medical office on the Upper West Side of Manhattan, and leading a weight-loss business she founded. She was matched with second-year Adult Geriatric Primary Care Nurse Practitioner student Lara Trevino, whose main interest is in complementary and alternative medicine.

“From my clinical experience,” said Trevino, “it seems like patients are interested in taking active roles in their health but sometimes do not know how to manage the stress of their disease. I am interested in learning about alternative practices because it encourages preventative care that can be more individualized and comparable with a patient’s values, worldview, belief, and philosophical orientations toward health and life.”

Indeed, Trevino got the opportunity to learn first-hand from Romero, a 10-year veteran of the field, how integrative, or functional, medicine differs from mainstream, Western practice. For example, Trevino learned how to think more holistically, considering a person’s general well-being instead of focusing on separate body systems. She learned from Romero how “slowing down helps patients manage their lives and heal by maintaining good sleep hygiene, meditating, and learning appropriate nutrition.” She appreciated the time Romero took in evaluating patients and taking their histories—a full 45 minutes in one case—and suggesting combinations of functional testing, vitamin supplementation, and meditation—that would address a patient’s complaint.

“I applied this thinking with obese moms in the Bronx,” said Trevino. “One patient said she had stress headaches and would eat to relieve her stress. I encouraged her to watch free yoga and meditation YouTube videos, and she has significantly fewer headaches and has lost 20 pounds. She learned how to take an active role in her health care and feel motivated to improve her life.”

Romero believes that NP students should know that, with so many career options, including travel and per diem work or autonomous practice (in New York), they don’t have to feel locked in to hospital or clinic jobs.

“The fun part is creating the job and life that YOU want rather than relying on whatever full-time jobs are out there,” Romero said.

Stuthers agrees, saying: “Whenever I tell nonmedical folks what I do, their first question is always, ‘which hospital?’ Working in a hospital is a great fit for many people, but I prefer the autonomy, immediacy, and mission of the not-for-profit experience.”
Each One, Teach One

As much as they offered their students, the alumni reaped rewards from their experience, too.

“The thing that resonated with me was how I remember having many of the same questions she did when I was starting out as a new nurse,” said Samuels. “When there are so many opportunities and unknowns, where do you even begin?”

She turned that memory into a valuable experience for Stupka, who said it made her consider how nurses are in a unique position to see families’ socioeconomic challenges through the lens of health care, and how the cornerstones of nursing—advocacy, teaching, and patient education—address them. Samuels, who is also a preceptor for ETP students in their community health rotation, took Stupka under her wing when she requested a placement with her for this semester.

For Samuels, the reward was clear: “As a graduate of the same nursing program, I have the opportunity to come back and speak with incoming professionals such as Michelle, who will be joining me in a career that I love and am so passionate about; that’s exciting for me.”

Stuthers has a different take. “I entered nursing in the mid-'80s,” she said, “when the field was negatively publicized as one where experienced nurses were unreasonably tough on newer ones. I always want to be an example of how untrue that is today! Just by offering a little of our time and hospitality, we can add value to a student’s education and expose them to something they’ve never considered.”

“One of the most valuable aspects of my nursing education now is gaining insight and knowledge from experiences of those well established in the field,” said Stupka. “Having somebody to talk with who has gone through our program and who matches my own goals has been invaluable. I would be more than willing to give back in the same way.”

ETP student Michelle Stupka, left, worked with underserved children after being paired with pediatric nurse practitioner Rachel Samuels ’05 ’07, right.
The

DNP Difference

The Doctor of Nursing Practice, or DNP, program at Columbia University School of Nursing was among the first in the nation, and in the years since it was established, DNP programs have proliferated at nursing schools across the country. Columbia Nursing’s DNP focus is unique among these programs for its distinctive emphasis on comprehensive clinical care.

“Because of my Columbia DNP degree, I was able to carve out a managerial role in a medium-sized private company within the relatively new but rapidly expanding health care industry of convenient care. The degree taught me that I am well equipped to tackle any nursing leadership role in health care; I have all the tools I need to address population health, IT, and quality improvement issues.”

— Julie Lindenberg ’07
Associate Professor of Nursing,
University of Texas Health Services

“I was initially educated to provide primary care in an outpatient setting. Earning the DNP degree broadened my expertise to include acute care patient admissions and follow-up. Learning how to care for patients across sites and over their lifespan has been extremely valuable to me, not only as a practitioner but also as a faculty member who is able to share this knowledge with new nurses and providers. The DNP also provides the added benefit of enabling me to be a stronger member of health care team collaborations among various providers.”

— Karen Desjardins ’98 ’05
Director, Combined BS/MS Program
Assistant Dean of Academic Affairs,
Columbia Nursing

“Without the DNP, I don’t think I would have felt that I could own my own practice and provide a full range of care to my patients. The DNP gave me the confidence to take care of all my patients, by teaching me how to research a subject, evaluate the evidence, and use the resources available to me to enhance my clinical skills.”

— Deanna Tolman ’11
Owner and Family Nurse Practitioner,
Head2Toe Healthcare LLC

The DNP program at Columbia Nursing offers a terminal degree that prepares the advanced practice nurse with the knowledge and skills necessary for comprehensive care of patients across sites and over time,” says Susan Doyle ’10, DNP, NP, DCC, director of the DNP program. “The advanced practice nurse with a DNP degree is well positioned not only to manage the individual patient, but also prepared to improve outcomes through translation of research into practice.”

Not only has Columbia Nursing’s DNP program graduated a cadre of exceptional nurse leaders, it is changing the focus of nursing for the 21st century by helping revolutionize the way health care is delivered in this country and around the world.

Columbia Nursing’s DNP program enters its second decade, graduates reflect on how the experience has changed their careers.

The Difference
“Having a DNP validates my professional abilities. It got me through the door into the president’s office at Mount Sinai Hospital to convince him I was the person to develop a live donor center at the Recanati/Miller Transplant Program. I was able to use what I learned about health care delivery and practice management to write a business plan. I am currently director of the program and lead a multidisciplinary team in patient care, research, and health promotion. I participate in many local and national initiatives led by physicians to improve the quality and access to care for live organ donors. I have the same voice, regardless of my discipline.”
— Dianne LaPointe Rudow ’05
Director, The Center for Living Donation, Mount Sinai Hospital

“Being able to understand and interpret clinical research studies is one of the pillars of evidence-based practice. The DNP has been invaluable in providing me with the ability to take best clinical practices as they are described in the literature and apply them for the improved management of my patients. In addition, the DNP degree has helped me understand many of the nonclinical essentials that make an important difference to the successful management of my patients, such as understanding the nancing of health care. Finally, Columbia’s DNP program taught me how to organize my thoughts, convey them in writing, and publish papers about various topics in clinical practice.”
— Marlene McHugh ’89 ’91 ’08
Assistant Professor, Columbia Nursing Associate Director of Palliative Care, Montefiore Medical Center

“I was able to get a position teaching nursing and become director of the AGNP track at the University of Massachusetts, Boston. The DNP degree taught me that asking good questions and getting correct information leads to great leadership. The degree made it clear to me that the future of nursing depends on what we do as leaders of the profession.”
— Jennifer Hackel ’12
Clinical Assistant Professor, University of Massachusetts, Boston

“One of the benefits of earning my DNP degree at Columbia Nursing is that it has opened up career opportunities for me that I wouldn’t have thought possible to pursue. My experience at Columbia Nursing was instrumental in my securing a teaching position at Georgetown University. The emphasis Columbia Nursing’s DNP program places on evidence-based decision making has enabled me to be more effective as a team leader. Both the DNP degree and Diplomat of Comprehensive Care (DCC) credential I received earned me peer recognition among nursing and medical colleagues of comparable levels of clinical expertise.”
— Patricia Wahrenberger ’07
CRNA, Roger Williams Medical Center

“There is no question that having a DNP has helped open up more opportunities for me in my nursing field of practice. For example, it enabled me to engage in higher levels of the decision-making process in the workplace. As a result, more doors have opened for me to advance in my field. The DNP also gave me the confidence not to be intimidated by others in positions of power. The DNP degree has helped validate nurses as excellent leaders. In addition, the DNP has helped nurses achieve a new level of respect from non-nurse peers for nurses with any advanced degree. The DNP has helped nurses be recognized for what they are: experts in their field.”
— Roxana Sasse ’92 ’11
CRNA, Roger Williams Medical Center

“Earning a DNP degree has helped enhance my ability to initiate and engage in global health opportunities. I was already a clinical leader prior to my earning a DNP; but among the many benefits of having the DNP is my increased credibility with others in the health care hierarchy. It has also enabled me to have an enhanced impact when working with legislative leaders and policymakers.”
— Laura Zeidenstein ’05
Associate Professor, Columbia Nursing Director, Nurse Midwifery Program

DNP students Michael Olivier-De La Torre, left, and Philip Gyura right.
NURSE MIDWIFERY
Comes of Age

By Francine Russo, PhD

AS COLUMBIA NURSING’S MIDWIFERY PROGRAM reaches its sixth decade, we celebrate its progress and success as the first program of its kind in the United States and one of the finest in the country. The program’s many graduates are not only highly skilled practitioners but critical thinkers educated to become leaders and policymakers. Former Planned Parenthood president Faye Wattleton ’67 is among the school’s well-known midwifery graduates, who include local and national legislative policymakers, directors of global health initiatives, and practice owners and managers within the health care system.

Guided by a series of remarkable directors, the program has continuously evolved to anticipate the complexity and growth of the field, anticipating future needs of women and the profession. From the 10 forward-looking midwifery pioneers who have guided Columbia Nursing’s program, we have selected three who have been beacons in guiding the field.

SIXTY YEARS:
We Honor Our Directors
Mary Irene Crawford
Hattie Hemschemeyer
Eunice “Kitty” Ernst
Carole Kaufmann ’63
Joyce Beebee Thompson
Barbara Whalen Decker ’60
Betty Carrington ’71
Ronnie Lichtman ’77
Jennifer Dohn ’85 ’05
Laura Zeidenstein ’05
When Mary Crawford became a certified nurse midwife in 1953, the profession was scarcely recognized by the United States medical establishment. It would be another 16 years before the American College of Obstetricians and Gynecologists (ACOG) officially recognized the practice of nurse midwifery. Shortly after her certification, Crawford took the opportunity to practice in the obstetrics department of Johns Hopkins Medicine. It was the first time any nurse midwife had practiced in a major university medical center. She did indeed practice, but her title was “obstetric assistant.” Having a “midwife” listed in practice, it was thought, might ignite controversy.

But Crawford impressed the physicians at Hopkins with her contributions: the calming human touch and the deep understanding of the birth process that she shared with patients. In 1954, she began working at Columbia Presbyterian Medical Center’s new obstetrical clinic. In 1955 she founded the nurse midwifery program at Columbia University School of Nursing, the first graduate midwifery program in the nation. It was also the first midwifery education program located within a university. Now midwifery students could gain their clinical expertise in a university-affiliated hospital.

Under Crawford’s leadership, the fledgling program grew, eventually graduating more than 200 high-caliber nurse midwives. As a leader, she also influenced and nurtured more than 20 faculty members. Crawford was known as caring, articulate, and courageous—with a touch of wicked humor.

As one of her successors, Joyce Beebe Thompson, wrote at the time of Crawford’s death in 1979, “Under Mary’s leadership, faculty were encouraged to carry out her belief that education should be the leader and not the follower of the profession.”

In her lifetime, Crawford saw momentous progress in the profession. By 1970, for example, nurse midwifery was expanding in private practice. In 1971 ACOG finally recognized nurse midwives as practitioners.
Just months after Betty Carrington became director, she found herself facing major system-wide changes. Moving in a new direction, Columbia Nursing required that all faculty now had to be practicing clinicians as well as educators. This duality would come to be seen as a great strength of the school, but it meant a tumultuous initiation for Carrington. The full-time nurse midwifery faculty of six was soon reduced to one. Carrington adapted successfully, developing her own midwifery-focused faculty over time and attracting outstanding students. An African-American pioneer, she was also able to fulfill her wish, she said, “to serve women of color and poverty.”

“In my life I’ve often been the only person of color to take on a particular role,” Carrington said. “I don’t know where that courage or strength comes from, but that’s what I brought to Columbia Nursing.”

Although she held a new EdD in education administration (from Teachers College) when she became director of Columbia’s midwifery program, Carrington had taught at SUNY Downstate for seven years. She was also a veteran public-health nurse and, for many years, had been a midwife to underserved women and children, primarily in poverty-plagued areas of Brooklyn.

At Columbia Nursing, she taught her students to be more sensitive to African-American, Caribbean, and other women of the African Diaspora. She developed an affiliation between the school and Harlem Hospital, in which she practiced and supervised her students’ practice. She taught students what she called “cultural competency,” bringing them to the Abyssinian Baptist Church and to the Schomburg Center for Research in Black Culture, a specialized Harlem branch of the New York Public Library focusing on people of African descent worldwide. She believed midwives would serve their patients better if they understood their patients’ cultures.

In one initiative, she created a course in nutrition at Columbia Nursing to teach students how to guide their patients to eat well within the context of their own cultures. “They needed to know,” she said with a laugh, “not everybody eats eggs and bacon, steak and potatoes.”

Carrington said she is proud that she guided the nurse midwifery program safely through a difficult transition and left it, “stable, well established, with good faculty continuing after me.” She said she’s also proud that the cultural competency she instilled remains a core value of the Columbia Nurse Midwifery program.
When Laura Zeidenstein took charge of the program, she was already a champion on behalf of women and midwifery all over the world. In her writings and consultancy to advocacy groups, she brought attention to such causes as the need for gender equality and the care of women who suffered from genital cutting. She remains sensitive to women marginalized or stigmatized, from LGBTQ people in the United States to traditional birth attendants in Bangladesh. She has delivered close to two thousand babies and has been a key part of a nurse midwife-owned practice, Midwifery of Manhattan.

As director of the Nurse Midwifery program, Zeidenstein has dedicated herself to imbuing it with her central feminist and humanist values. Her “feminist base,” she said, has made the program’s peer-focused mentorships central. “Ours is a very relationship-based program,” she said, “in which lifelong collegial relationships are formed.”

Under Zeidenstein, the program has challenged, guided, and nurtured students to develop leadership qualities: becoming involved politically, for example, to make the health care system better serve all women. At least 20 of her students have shown leadership by publishing in the Journal of Midwifery and Women’s Health, contributing evidence-based knowledge to the field and gaining recognition for their work.

Students have also learned they can become policymakers and advocates for the profession. Program graduates are now influencing policy nationally and globally, from Planned Parenthood to Doctors Without Borders.

Health care systems throughout the world have increasingly come to recognize the value of midwives to women’s and children’s health, due in part to the Columbia nurse midwives trained under Zeidenstein. “We educate midwives who know how to work within the system,” she said, “but who can also rock the boat.”
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Alumni Reunion 2016
Save the Date Friday, April 29, 2016

See You Next Year!