LEARNING THE
healer's art
2004

BRIGHAM YOUNG UNIVERSITY
COLLEGE OF NURSING
Never has there been a time of greater need for professional nurses who bring knowledge, skill, and healing to all points of direct patient care. Health care faces increasing challenges of complexity, technology, cost, and access. At the same time, we face insufficient caring staff, increasing rates of error, and growing public dissatisfaction. The health care system itself is ailing. If you or a family member has needed professional health care recently, you know what I mean.

As we all join the aging population, we’re beginning to realize that new services and technologies are only part of what is needed for professional, compassionate care. Increasing empirical evidence demonstrates the importance of healing and spirituality to health care. At critical moments of suffering, individuals and families seek not only expert clinical judgment and skill but also human caring and the compassionate touch of the divine.

The mission of the Brigham Young University College of Nursing is to develop professional nurses of faith and integrity who promote health and healing. In a world clearly needing such nurses—highly skilled men and women with courage, wisdom, and the willingness to practice the Healer’s art—the college is uniquely positioned to provide these leaders. BYU nursing students are among the brightest and best prepared in the nation. Their superb qualifications are reflected in superior ACT scores and entrance university grade point averages exceeding 3.7. In addition, whereas the average age of nursing students nationwide is 32 years and the average age of practicing nurses is 44 years, the average age of BYU undergraduate nursing students is 22 years, potentially a significant contribution to longevity of service.

In this issue we share a few stories of our mission of faith, our state-of-the-art facilities for quality nursing education, our unique approach to mentored-student learning, and our vision for the future. But our goals to make a positive difference in meeting the health care needs of the next generation cannot be accomplished without the help and support of friends. The promise of our outstanding students and our mission for their education require uncommon commitment and investment. We are so grateful to you, our new graduates and their families, our alumni, and you other dear friends of the BYU College of Nursing. On to the future!
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Dear Colleagues,

I am honored to have this opportunity to greet you and express my appreciation and encouragement to you. The College of Nursing is a wonderful place, and you and I are blessed to be associated with this exceptional school.

Although I am new to BYU, I am not new to the profession of nursing. Even before I knew much about the specifics of what being a nurse means, I felt admiration for nurses. Early in my own medical training, I soon learned to appreciate the important role of nurses in health care. One of those roles often not fully appreciated is the key part that nurses play in the education of not only patients but also physicians.

This became readily evident to me as a resident physician at Duke University Medical Center. My wonderful physician mentors taught me much about the theory and philosophy of medicine, but it was often the special nurses on the hospital units who taught me the practices of medicine. It is one thing to be told to start an IV by the attending physician and another to be taught how to really do one.

Thus, I firmly believe that nursing is both a necessary and honored profession and calling. I feel privileged to be associated with you and this increasingly distinguished College of Nursing. Know of my best wishes in all that you do here and throughout your nursing careers.

Sincerely,

Cecil O. Samuelson

Cecil O. Samuelson is the 12th president of Brigham Young University. He has served as a General Authority for The Church of Jesus Christ of Latter-day Saints since 1994. Born on August 1, 1941, Elder Samuelson served a mission in Scotland and is married to Sharon Giauque. The Samuelsons have five children and three grandchildren. Education and career highlights include:

• BS, Molecular and Genetic Biology, University of Utah
• MS, Educational Psychology
• MD, University of Utah
• Dean, School of Medicine, University of Utah
• Vice President, Health Sciences, University of Utah
• Senior Vice President, Intermountain Health Care (iHC)
• President, iHC hospitals
ust spend a few moments with Dr. Russell B. Clark and you may start to believe that he’s found the fountain of youth. It is the twinkle in his eyes and the way that he relishes every moment of the day. Friends say Dr. Clark radiates joy—and that joy is passed on to everyone he meets.

Unbelievably, Dr. Clark will be 103 years old in November, but he refuses to let his age tie him down. As the President’s Leadership Council representative on the College of Nursing Volunteer Leadership Council, he is actively involved in fund-raising efforts at Brigham Young University. Additionally, he has a schedule of activities that would be difficult for most 20-somethings to keep up with. During the summer he traveled around the United States with his family visiting California and Nauvoo. This fall they will travel to Oahu, Hawaii, for the anniversary celebration of the Polynesian Cultural Center. Dr. Clark was present when President David O. McKay first dedicated the center 50 years ago.

With five children, 38 grandchildren, and at least 60 great-grandchildren, Dr. Clark says his family is one of the greatest blessings of his life. He grew up on a ranch in Montpelier, Idaho, with nine brothers and sisters, where he learned the value of hard work by spending hours in the saddle herding his family’s cattle. But it was the example of his mother, who was known throughout the area for saving newborn babies, that inspired him to choose a career in medicine.

Dr. Clark had to work very hard to get through school as a medical student, and he earned every penny needed to support himself. Experiencing such sacrifice developed in him the understanding and compassion that has guided him throughout his life.

He has vivid memories of the depression. While a young doctor, he was riding on a train through Chicago on Thursday, October 24, 1929. Whenever the train stopped, newsboys would climb aboard shouting headlines announcing the stock market crash. By Sunday the
Students of the Healer’s Art

By Carolyn W. Sutherland
“Nursing care is holistic,”

the instructor was saying. Holistic? Another new vocabulary word. “Holistic nursing means caring for the whole patient—physical, mental, emotional, and spiritual.” Well, of course. That makes perfect sense. I am more than just a body, and so is everyone else.

Like the rest of my classmates, I filled my brain with nursing knowledge, my hands with nursing skills, and my pockets with reminder cards to get me through that first day of actual, hands-on patient care. Cautiously, tentatively, I stepped into my first patient’s room. I would take vital signs and record them on the patient chart. Then I would do a baseline assessment and record that on the chart. My skills were raw, and my ability to think about what I was doing was challenged by the sheer terror of doing it on a real patient for the first time.

That morning passed, and so did I. Eventually I would own the skills that I had strung, like so many individual beads, on a tenuous strand of thought, and I could arrange them and use them differently, suitably, for each new patient. And I thought less and less about holistic care. I didn’t have to think about it. It was just the natural, logical way to do nursing.

Unlike nurses, patients don’t go to school to learn how to be patients. They just come onto the nursing scene without a script and play it out according to their own ideas about what the character they are playing should do. And they bring more than their physical bodies with them. They bring fear and pain of one kind or another and hope or discouragement and knowledge and opinions and experience.

Brand new babies are the least experienced and the most natural of all. They come full of opinions and needs and ready to express them. “It’s so bright; it’s cold; it’s noisy; it’s dry, and my lungs are getting all full of air; I’m out of control; my arms and legs are just flapping around; I need tightness, warmth, slipperiness, muffled noise—”

When the patients, infant or adult, are all settled in, calmed, reassured, informed, and assessed, and when the paperwork is done, we have acquired quite a bit of information, and we go to work. We make a plan, we check orders, and we do everything we can to help patients meet their goals and get back into the routine of their lives. We consider the whole patient, and our plan includes attending to their psychosocial needs and their spiritual needs, as well as their physical needs. We are nurses. We give holistic care.

What qualifies us to give holistic care? Is it our knowledge of the holistic needs of others? I don’t think so. Knowing that patients have emotional needs is a start, and learning how to communicate effectively is helpful. Understanding something about human psychology and knowing some therapeutic behaviors and language are helpful. Our own life experience gives us empathy and helps our responses to be more genuine and more insightful. But that is just the beginning.

What is our preparation for providing spiritual care? At Brigham Young University (BYU), we are uniquely positioned for and highly committed to preparing nurses who are role models in the spiritual as well as the physical aspects of holistic care—practitioners of the Healer’s art, we say—who invite the Spirit into the healing process. What does that mean?
**THE HEALER**

In the College of Nursing at BYU, we have adopted one of the hymns in the Latter-day Saint hymnbook as our college hymn. The title of the hymn is “Lord, I Would Follow Thee,” and the third verse reads as follows:

*I would be my brother’s keeper; I would learn the healer’s art.*
*To the wounded and the weary I would show a gentle heart.*
*I would be my brother’s keeper—Lord, I would follow thee.*

Who is the healer spoken of in those lines, and what is the healer’s art? Those questions may be interpreted in two ways. One way is generic: nurse as healer. We want to learn the art (and skills) of helping people heal.

The other interpretation is specific: Jesus Christ as healer. In the King James translation of the New Testament, the story is told of a woman who believed that if she touched the hem of Jesus’ robe she would be healed of a 12-year affliction. The Savior was aware that someone had touched him, and He turned to see who it was. When the woman explained, Jesus said, “Daughter, be of good comfort; thy faith hath made thee whole.” The dictionary defines whole as healed, in sound health, complete.

Jesus healed the woman by faith—His faith and hers. Both of them believed that he could heal her, and he did. He was whole; she became whole.

**TEACHING THE HEALER’S ART**

When Karl G. Maeser, principal of the fledgling Brigham Young Academy, inquired, “President Young, I am ready to go to Provo; what are your instructions?” Brigham Young, leader of the pioneer movement and founder of the school that was to become BYU, responded with this succinct message:

“Only this. You ought not to teach even the alphabet or the multiplication tables without the Spirit of God. That is all. God bless you. Good-bye.”

What does it mean to teach with the Spirit of God? At the Last Supper Jesus Christ met with His disciples. He told them His time had come to leave mortal life, but Heavenly Father would send a comforter to them.

“These things have I spoken unto you, being yet present with you.

“But the Comforter, which is the Holy Ghost, whom the Father will send in my name, he shall teach you all things, and bring all things to your remembrance.”

The Holy Ghost is the Spirit we speak of. We invite him into our classrooms and encourage our students to invite him into their lives. We “seek learning, even by study and also by faith.”

“Karl G. Maeser’s views of ‘teaching with the Spirit’ include knowing our subject matter supremely well and demonstrating love for our students, colleagues, and superiors as well as encouraging students’ individual growth and ethical behavior.”

These ideas are reflected in the Aims of a BYU Education, which are that “a BYU education should be (1) spiritually strengthening, (2) intellectually enlarging, and (3) character building, leading to (4) lifelong learning and service.” These aims are intended to “lead students toward wholeness.” It is in this environment that the College of Nursing (CON) at BYU has been educating nurses for 50 years.
In the 1800s Florence Nightingale established schools of nursing based on her knowledge of good nursing. Ms. Nightingale was the first scientific nurse, the first nurse researcher, and she brought dignity and respect to nursing. The kind of preparation nursing students receive at BYU might well be what Florence had in mind when she said, “Nursing is an art: and if it is to be made an art, it requires as exclusive a devotion, as hard a preparation, as any painter’s or sculptor’s work; for what is . . . dead canvas or cold marble, compared with . . . the living body—the temple of God’s spirit?”

Indeed, each human being is a son or daughter of God, our bodies formed by our earthly parents and our spirits created by God, our Heavenly Father. Nursing the whole patient—body and spirit—requires a nurse who is whole.

Our students are like many other nursing students. They work and study diligently, and they sometimes complain about homework and exams. But they are also different from many other nursing students. They come to this university because they believe in its mission and aims. They enter to learn the art and science of nursing, to be taught, as Brigham Young admonished, with the Spirit of God.

Whether they consciously think about it or not, these students are following Paul’s teachings, directed not only to those of his day but also to those of our day:

“[They are] not ashamed of the gospel of Christ.”
“[They are] an example of the believers, in word, in conversation, in charity, in spirit, in faith, in purity.”

They go forth to serve as nurses with intelligence, knowledge, compassion, and spiritual strength, uniquely qualified for holistic nursing because they, too, are whole.

REFERENCES
8. The mission of Brigham Young University and the aims of a BYU education (Provo, Utah: Brigham Young University, 1996), 3, 14.
10. Romans 1:16.
11. 1 Timothy 4:12.

Carolyn W. Sutherland, MS, RN
Acting Coordinator, CNS Master’s Program
At Brigham Young University, there is an increasing and impressive emphasis on the pursuit of research and scholarly activities by undergraduate students in order to enhance overall educational experiences. It also affords them a “head start” for graduate studies and builds on their fine preparations. In the College of Nursing, professor emeritus Sandra Mangum has involved her students in perioperative nursing courses in research, which culminated in professional presentations and publications with the students as copresenters and coauthors. Students in Dr. Elaine Bond’s critical care clinical group had the opportunity to present and publish with their professor.

Funding opportunities for undergraduate research are provided by the Brigham Young University Office of Research and Creative Works (ORCA), which serves as an incentive for student involvement in research. Dr. Renea Beckstrand requires students to submit an ORCA proposal as part of her advanced critical care clinical elective course, and several of the proposals received funding in 2003. Work on these research projects with faculty mentors is ongoing.

I have had the opportunity during my 15-year career with the Brigham Young University College of Nursing to mentor some of our most gifted students. In 1997, while in Guatemala as part of an international nursing clinical elective, Rosemarie (Susie) Vega and I interviewed Guatemalan childbearing women about their birth experiences. Susie received an ORCA undergraduate research award, and her research was subsequently published. As a labor and delivery nurse working in two Utah County birthing units and as case manager for an obstetrician, Susie continues to promote the most appropriate high-quality care for Hispanic women in her practice. Susie will be sharing her expertise in labor support for Hispanic women when she teaches her nursing colleagues perinatal Spanish at the 26th Annual Utah Perinatal Association Conference October 2003 in Salt Lake City.

Building on her Healthy People 2010 assignment in the core nursing courses, with Dr. Rosanne Schwartz as her mentor, Terumi Matsumura Hong conducted a study of the perceptions of breastfeeding support in first-time mothers. She received an ORCA Scholarship to facilitate her work, which culminated in her honors thesis. She also presented her findings to perinatal nursing staff at Utah Valley Regional Medical Center, where the study was conducted and her work was published. Terumi is currently supporting her husband in his medical education at Chapel Hill, North Carolina.

Robin Kartchner also built on her Healthy People 2010 scholarly paper, receiving two ORCA Scholarships to facilitate her work on the meaning of childbirth to Chinese women. This phenomenological research, conducted in the People’s Republic of China, became her honors thesis as well. Not only was her work published but Robin has also presented her research at national and international conferences and received the 2003 Outstanding Clinical Research Paper Award from the Association of Women’s Health, Obstetric, and Neonatal Nursing (AWHONN). She is now pursuing
This has been my experience in mentoring undergraduate students. The satisfaction I have personally gained from mentoring these students includes receiving renewed enthusiasm for my professional role, witnessing observable growth and development in my students, sharing what I have learned that may be of benefit to others, and learning from others who have a fresh perspective and an abundance of positive energy. I am grateful for the opportunity to experience reciprocal, interactive learning with those I have mentored. The process has culminated in the rewards of reaching goals and growing together.

**STUDENT-MENTORED REFERENCES**


**OTHER REFERENCES**


Lynn C. Callister, PhD, RN
Professor

Byu College of Nursing
With Mrs. Brown’s condition rapidly deteriorating, the student nurses discussed their course of action. Mrs. Brown complained of being light-headed and not feeling well. Working together and acting quickly, they assessed her condition and found that her vital signs were changing and she was bleeding after the delivery of twin babies. The student nurses called upon lessons learned during their theory classes. They reviewed the medical orders, determined what nursing actions were necessary, administered the necessary and preordered medications, and continued to monitor the patient’s progress.

Mrs. Brown’s hemorrhaging was, in fact, a state-of-the-art simulation using the college’s recently acquired human patient simulator, which the students have affectionately named Sam. With pulses, respirations, heartbeat, and various other vital signs, Sam simulates real life by responding to the care administered by the student nurses.
students. He is a part of the Nursing Learning Center (NLC), a center designed to improve the learning environment by providing students with enriched opportunities to learn patient care. Such an environment helps students develop confidence and critical thinking skills, experience the emotions of caring, and synthesize the knowledge learned in their book work with the skills learned in their clinical experience.

**CONFIDENCE**

Through their studies nursing students have developed the skills and knowledge needed to succeed; however, initially they are often nervous or unsure of themselves in clinical care. The NLC’s simulation technology allows students to see their own capacity and potential by actively engaging in critical situations with real-world demands.

“The simulator boosts confidence. As a nurse there are so many things you must take into account: the emotions of the patient, the physiology of the patient, and what the doctor’s orders are. With the simulator you are forced to take all of those things into account. There is nothing that you can do on paper that can make you feel that way. The simulator is perfect for giving students exposure to more stressful situations,” says Natalie West, ’04.

**CRITICAL THINKING**

For nurses to be successful, they must be able to quickly analyze a situation, prioritize information, and act purposefully. Although they are among the most important, these skills are difficult to teach in a classroom from a book. And actual clinical practice does not always allow the novice learner appropriate experiences for practicing clinical judgment. A simulated learning atmosphere sharpens critical thinking skills by providing students with real-life situations.

“In the nursing labs, initially students learn to perform basic skills, but as they progress in the program they need to practice critical thinking skills including interpretation, analysis, planning of care, and evaluation. Simulated patient situations allow students to practice these skills in a safe environment where they can try out their ideas and patient care decisions without the fear of harming a patient. Current research indicates that enrichment activities such as in-depth case-study discussions or practicing nursing care on the human patient simulator do increase critical thinking scores,” says Patricia Ravert, assistant professor and director of the NLC.

**HOLISTIC CARE**

Nursing is more than knowledge and skills. Nurses must learn to cope with their own feelings in order to meet the physical and emotional needs of their patients. With the help of technology, instructors are better able to teach holistic nursing. For example, during one simulation using Sam, the patient dies from complications and the students are left to comfort a distraught spouse (a research assistant in disguise) who happens to appear on the scene just as her husband expires. Simulated scenarios such as this teach students how to successfully handle various psycho-social issues with patients and families.

**BRINGING IT ALL TOGETHER**

Simulated experiences help students synthesize the various elements of their course work. They are able to incorporate information from the classroom and skills from labs and clinical learning experiences into their care of a simulated patient. “When working with the simulator, there are a lot of little gaps and little things the books don’t cover. You understand what’s going on, but until you practice them you’re not comfortable with them,” says research assistant Troy Bailey, ’04. The NLC is an important and innovative way to make critical nursing situations come to life.

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The BYU Nursing Learning Center must constantly expand and adapt to reflect the changing health care environment. It is an important part of our students’ education. One of the major goals of the college is to provide a state-of-the-art simulated laboratory experience for every student. If you would like more information about the BYU College of Nursing goals to improve our students’ learning environment or would like to make a contribution to this important effort, contact Mary Lynne Clark at the College of Nursing Development Office at marylynne_clark@byu.edu or (801) 422-9219.
Modern Western nursing had its roots in Christian religious orders. Catholic orders, established in the 1600s, were followed by Protestant and Lutheran deaconesses in the 1800s. Nursing was considered to be a “calling” and allowed women to provide care to those outside their own households. When the pioneers of The Church of Jesus Christ of Latter-day Saints came west to “Zion,” women with a rekindled desire to serve God and each other continued in that tradition. Our current experiences as nurses and nursing students from Brigham Young University have built upon those early traditions of service, even as we have specialized into many different arenas.

My own experiences as a trauma and disaster nurse have been challenging and rewarding. I love to bring order out of chaos when there has been a natural or manmade disaster. I love the stimulation and excitement of saving a life in the face of overwhelming odds following a serious accident or illness, when a patient is on a ventilator, has many vasoactive medications, and requires numerous interventions. However, as I tell my critical care students, no patient ever comes back and says, “Thank you for knowing how to read my PA catheter values and titrate my medications accordingly!” What they say is, “Do you remember that night when I was so scared and you put your arms around me?” During such interactions I feel the greatest validation for the service we provide to patients and clients.

As I reflect on the unique role of a Brigham Young University nursing education, I am reminded of the injunctions displayed at the west entrances to BYU. One says “Enter to Learn. Go Forth to Serve.” The other says “The World Is Our Campus.” The basic tenet of service is doing for others that which they cannot do for themselves. Our profession, grounded in service, relieves suffering and helps people care for themselves. BYU nursing students and graduates, versed in the physiological and psychological components of nursing and backed by their high moral standards, have the potential to provide such service in many settings and in many countries as they interact intimately with patients and clients at vulnerable points in their lives.

Vulnerability occurs for numerous reasons: disease, disaster, accidents, ignorance, and lack of resources to attempt healthy habits. Many opportunities outside paid professional positions abound for nurses to intervene in these circumstances, both to teach preventive measures and to assist clients, friends, and associates through serious health threats. Nursing service can include volunteering with food and care coalitions, the American Red Cross, senior citizen centers, shelters for battered women, mental health crisis centers, community emergency education programs, and others. BYU nurses become health care resources in neighborhoods and communities, first-aid specialists, and first responders at accidents. Additional avenues for nurses wanting to give nursing service include health missions and missions as older married couples or single sisters, as well as humanitarian work through numerous organizations anytime throughout our lives. Within the scope of each nurse’s expertise, he or she can identify many more areas in which to serve. May I share two examples?

As a Red Cross disaster nurse at the Pentagon following 9-11, I worked with nurses from across the United States. All these nurses volunteered for a minimum of
three weeks to provide relief from suffering while helping survivors and families begin to help themselves through their fears and adaptations. Day after day I watched these nurses help those who couldn’t help themselves: holding a hand here, giving a hug there, or offering a word of quiet assurance. We certainly didn’t cure all the physical and emotional health concerns, but our service helped the clients to know someone cared and that they were not alone while dealing with their tragedy.

During a semester in Amman, Jordan, nursing students experienced the joy of serving those with special needs. Students’ journal entries provide a moving picture of the outcome of their service. One student, working with a failure-to-thrive baby in a government hospital, observed, “Faten is a five-month-old infant. When I met Faten, she was struggling. She . . . was in a corner in a barren room, trapped in an isole. Because she was never held during feeding, she was a poor sucker. She was never held and rarely received physical contact. No wonder her chart said she had brain atrophy—she had no stimulation. I knew I could make a difference. . . . We decided to hold Faten and Ahmed. They need touch!”

Another student provided insights after these students worked with Faten: “A few days later the nurse said Faten was going home because her sucking was much better. I really feel that we helped her, and it is very exciting to see progress in the children.”

The BYU nursing students also worked with the Jordan River Foundation to direct at-risk children at Jabal al Nasser, a Palestinian Refugee Camp. One student reported, “We have taught the kids about wound care, dental care, nutrition, exercise, diabetes, and emotions. I really feel like they have learned what we have been trying to teach.”

Another commented, “I have to say this has been one of my most favorite activities here in Jordan. This is one area where we are involved that I know we are making a difference. These children are amazing to me. They obviously do not live under the best conditions, but they are happy and so well behaved. What does the future hold for these children? I don’t know. But I know that we are able to brighten their lives each time we are with them and my prayers will be with them always.”

In reflecting on the experience, another nursing student stated, “All in all, the most important thing I learned from my time at Jabal al Nasser is that love is the universal language. These children know we adore and love them. They feel comforted with us. . . . We have helped these children find a haven—a place they can come to feel adored—and hopefully, even in a small way, they can understand that they are of infinite worth.”

In the February 2003 Ensign, President James E. Faust said, “As we plan to reach, involve, and serve the one, the principles to be kept before us on a panoramic screen in heroic size are the two great injunctions of the Savior to all of His children: love and serve God and love and serve our fellowmen.” As BYU nurses, we incorporate President Faust’s challenge into our personal and professional lives, providing service to family, friends, clients, and patients, wherever they may be. Enter to Learn. Go Forth to Serve. The World Is Our Campus!

Elaine Bond, DNSc, RN
Assistant Professor
Fund-raising (development) is a most interesting endeavor. I am often asked if I enjoy it, and usually the comment “I would never like to ask people for money” follows.

What my questioning friends don’t understand is that I have one of the most rewarding careers there is! Nursing touches us all, and I have the opportunity to help others invest their personal resources in a very critical and worthwhile cause. These donors are some of the most interesting and wonderful people I have ever met.

After many years of being involved with nursing, I can personally testify of the sacrifice, tears, laughter, and integrity of individuals who choose to give. What a difference these wonderful people make in the lives of nursing students and faculty! More than just asking for money, my role is about building lasting friendships. I treasure the memories of years spent listening to touching family stories while setting up a scholarship in memory of a loved one. I’ve gone grocery shopping for a frail donor, helped weed gardens, and attended many birthday parties and baptisms. Each of these memories is attached to a wonderful and generous individual who chose to make the world a better place by giving to nursing.

I extend deep appreciation to those who have and will step forward to participate generously in the needs of the college. Whether it a scholarship, help in the recruitment and retention of outstanding faculty, funds for new research, or a planned gift, please remember that together we can keep the BYU College of Nursing on the cutting edge of nursing education.

Sincerely,

Mary Lynne Clark
Development Director
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This past summer, we had the opportunity to travel in Otavalo, Ecuador. Our route took us climbing high up a mountain on a steep dirt road. We saw tiny hands waving from humble dwellings, large eyes looking out of narrow shops, and women scrubbing their laundry in canal streams. These conditions are repeated in thousands of villages all over the world where the inhabitants have precious little. How blessed we are for what we have. How blessed we are that we can impart of our substance.

Millions of times in the course of a year, humanity rolls up its sleeves to help heal the ills of the world. In the classes and clinics of the BYU College of Nursing, the students grasp selfless service early. Many give their summers to aid and heal those who live in Third World conditions. Despite a shortage of supplies in the hospitals and clinics where they volunteer, they carry in what they can and endure long, fatiguing routines. The students give solace and comfort, knowing that if conditions were different more could be accomplished. Their lives are changed forever, and each healing touch they leave behind will be remembered by those they serve. Imagine if more students could participate in this noble undertaking.

Every dollar budgeted to the College of Nursing is stretched to the maximum. Fortunately, many of us have the opportunity of donating our resources so that nursing students may succeed in their quest to serve others through research, medical aid, and scholarship.

I invite, implore, and beseech you to give a generous gift to the goals and growth of the BYU College of Nursing and its outstanding, dedicated faculty and students. Their excellence in scholarship and research will benefit an untold number, perhaps here, perhaps thousands of miles away.

—Laura Ainsworth
The BYU College of Nursing is excited to announce Carol Brumfield as our honored alumna. A member of our first graduating class, Carol has spent nearly 50 years devoting her life to nursing. After serving a mission to Brazil from 1958 to 1960, she joined the College of Nursing faculty and taught for 16 years, benefiting more than a thousand students with her knowledge, expertise, and friendship. At the college’s 40-year anniversary, those attending voted Carol one of its two most influential instructors. She moved with her family to Mississippi in 1974 but returned to Utah in 1986 to manage a service for women and children. Here she again had a positive impact on BYU nursing students during their clinical rotations. Currently serving as a member of its alumni board, she continues to be an advocate for the College of Nursing. Carol and her husband have three children and live in Spanish Fork, Utah.

The Honored Alumni Award is bestowed each year upon one alumnus of the BYU College of Nursing who has given outstanding service to profession, community, nation, or church. During Homecoming the honoree is featured in the annual College Honored Alumni Lecture Series, is invited to a special luncheon with the president, and is a guest of the university at all other Homecoming events.

ALUMNI BOARD INVITES NEW MEMBERS

Do you want to make a difference? Do you want to stay connected to BYU? Our committees are looking for interested alumni who want to make the board a bigger support to the college and a better resource for the students. We are interested in alumni from across the country who want to serve as board or committee members. Don’t hesitate because you do not live near the university. In this electronic age you do not need to live in Utah to be a board member. Your unique talents can contribute to the betterment of the College of Nursing and its students wherever you are.

If you are interested in participating on the BYU College of Nursing Alumni Board, please contact Carol Bush, alumni president, at carolbush@byu.edu.
Dr. Lynn C. Callister

The BYU College of Nursing congratulates Dr. Lynn C. Callister for becoming one of 82 new fellows inducted into the American Academy of Nursing. Callister is the only nurse from Utah to receive this honor in 2003. “This is the highest honor awarded to a professional nurse,” said dean Elaine Marshall. “Lynn is a tireless contributor to nursing. It is wonderful to see her recognized in this way.” One criteria for academy membership is recognition by one’s peers for having made outstanding contributions to nursing over and above those required in one’s position of employment. Dr. Callister has worked to uncover knowledge about cultural aspects of childbirth, promote culturally competent nursing care, and improve perinatal and neonatal care throughout the world. Recently named a Fulbright scholar, she will be working with the St. Petersburg State Medical Academy next spring to teach about maternal and newborn nursing and women’s health. Callister will also conduct outcomes of the St. Petersburg Women’s Wellness Center and make professional presentations in Moscow and Ukraine.

Faculty Publications 2002–2003


For a complete listing of faculty publication, presentations, and awards, please visit the nyc College of Nursing Web site, http://nursing.byu.edu/.
From my first day as a nurse I wanted to cure. I wanted to care. I wanted to heal.

—Dr. Elaine S. Marshall

From “Learning the Healer’s Art,” a devotional address given 8 October 2002 in the BYU Marriott Center.