Dear Friends,

It’s been a busy fall at the College of Nursing! Here are some of the highlights:

SEPTEMBER

For 2022, the College of Nursing Bachelor of Science in Nursing (BSN) program was ranked 10th in the country by U.S. News & World Report. Our Master of Science in Clinical Nurse Leader program was also ranked 11th. The first College of Nursing investiture celebrated the following faculty appointments:

Julie Zerweck, PhD, RN, FAHA, FAAN, Keeling Dean’s Chair in Nursing
Barbara Rakel, PhD, RN, FAAN, Dr. Rita and David Frantz Professor of Nursing
Keeva Herr, PhD, RN, AGSF, FCSA, FAAN, Keeling Professor of Nursing
Harleah Buck, PhD, RN, FP-CN, FAHA, FAAN, Sally Mathis Hartwig Professor of Gerontological Nursing Research

We also recognized the Frantz, Keeling, and Mathis Hartwig families whose generous gifts established these prestigious positions.

The fall 2021 Bachelor of Science in Nursing graduates with his Bachelor of Science in Nursing, was O’Sullivan, PhD, CRNA, ARNP, who never received a pin when graduating with his Bachelor of Science in Nursing;

Seventy-one students and one professor received their nursing pins in a ceremony at the Iowa Memorial Union. Seventy-one students and one professor received their nursing pins in a ceremony at the Iowa Memorial Union.

For Julie Vignato, PhD, RN, RNC-LRN, CNE, the focus on listening is personal. Her brother struggled with mental health issues before committing suicide eight years ago.

“He’d be frustrated,” she said. “He’d say, ‘Julie, why doesn’t my brain work right?’ Ever since then, I’m like ‘OK, so that’s it, this is my focus for my Ph.D., this is how I’m going to honor him.’

“But it’s perinatal mental health,” she said, adding with a laugh, “my experience is in maternal child nursing, so I don’t know what to do with males.”

Vignato’s current research focuses on the comorbidities of depression and pain during the perinatal period—the third trimester of pregnancy and one year postpartum.

“We’ve found, in my postdoctoral work, that when women have pain, they go to their providers, and they’re minimized. They might be told to do non-pharmacologic pain management, not longer.”

Vignato noted that pain in pregnancy has been under treated historically because it is thought of as an acute problem that’s not long term or chronic. Her research shows, however, that not treating this pain can have lasting effects.

“If the untreated pain prevents a woman from sleeping, causes her to feel helpless and hopeless, she can’t function and do with males.”

LISTENING TO WOMEN: PAIN

The Future of Nursing 2020-2030 report describes nurses as the bridge–builders who connect with people and communities to ensure they have what they need to be healthy and well.

There is, however, an essential step that must be done before those connections can be made. That essential step is to listen. Listening to women, in particular, guides the research and daily practice of three College of Nursing faculty, Drs. Lisa Segre, Julie Vignato, and Ann Weltin.
LISTENING TO WOMEN: GYNECOLOGICAL HEALTH

As a family nurse practitioner who is also a certified nurse midwife, Ann Weltin, DNP, FNP, spent years listening to and caring for women and their children at a low-income clinic in Milwaukee, Wisconsin.

During that time, Weltin delivered 400 babies and described it as incredibly rewarding to “walk with women during the best times of their lives and sometimes the worst times of their lives, when things didn’t go right.”

After moving to Dubuque 10 years ago, Weltin found another way to focus on women’s health: the federal funding program, Title X. Administered by the Health and Human Services Office of Population Affairs, Title X offers a wide range of reproductive health and pregnancy-related services, including wellness exams, sexually transmitted infection testing, cancer screening, birth control, and health education.

Since the program’s inception in 1970, the network of nonprofit health and community service agencies that receive Title X funding have served more than 290 million low-income or uninsured clients, the majority of whom were women. The program prioritizes providing access to high-quality services regardless of a patient’s ability to pay and advancing equity for all.

Weltin currently runs the Title X program at Crescent Community Health Center, a Federally Qualified Health Center. She has also been teaching future nurse practitioners for the past 12 years and joined the College of Nursing as a clinical associate professor in 2021.

She views gynecologic health, from period-onset to post-menopausal changes, as a huge part of a woman’s quality of life. “We also know that worldwide, cervical cancer is still one of the leading causes of death among women, so low-income women, especially those who haven’t had the opportunity to be screened regularly—that’s an unbelievable service,” she said.

For Weltin, women’s health care education is fundamental.

“The youngest person I delivered a baby for was 12,” she said. “We are seeing children younger and younger who don’t know what to do with their bodies. They’ve never been educated about sexually transmitted infections, birth control, pregnancy, and how easily it occurs.”

Nurses can have a key role in this education and in women’s health care in general, Weltin noted, because their training teaches them to be cognizant of the total person.

“When we’re looking at the ability to care for women from multiple cultures, to meet the sensitive needs of women, perhaps who have been traumatized in some way sexually, the needs of people who may identify sexually with others, or who have low trust in their own body, the nurse has the opportunity to be screened regularly—that’s an unbelievable service,” she said.

LISTENING TO WOMEN: POSTPARTUM

Although we know that one in seven women experience postpartum depression, providers and health systems struggle with the best way to support and treat this group of women. Logistical issues such as cost, time, and transportation may preclude treatment. Other times, the reasons are rooted deeper, such as stigma and lack of trust. According to decades of research conducted by College of Nursing Professor Lisa Segre, PhD, adding Listening Visits to the array of treatment options providers choose from is one way to increase the likelihood that women get the treatment they need.

First instituted by a British public health nurse in the 1980s, Listening Visits are now being delivered by home-setting nurses. The nurses are trained in postpartum mental health, empathic listening, and problem solving. In sharing with a non-judgmental nurse who fully listens, the patient often develops a clearer perspective and is open to collaborative problem-solving.

“The underlying rationale for this intervention is that women often just need someone to listen to them as they sort out their own situations, rather than necessarily requiring mental-health specialist care,” said Segre.

While many things may be different between the United States and British health systems, the perception women have of nurses as trusted, caring providers is not one of them. Through her research, Segre has shown that women of all economic levels find it acceptable for postpartum depression screening and counseling to be provided by nurses, and more than half the women surveyed were “definitely willing” to be counseled by a nurse.

“The nurses agree. Ninety percent of the nurses surveyed ‘agreed’ or ‘strongly agreed’ that nurse-delivered counseling was a good idea, nearly 50 percent were regularly providing some form of counseling already, and approximately 75 percent were willing to participate in a counseling skills training program.”

The next step in Segre’s work was assessing the effectiveness of Listening Visits in the United States. She found a statistical and clinically significant improvement in depressive symptoms among participants who had six listening visits in their home or Oh-Go-Yi’s office during an eight-week period, and qualitative assessments indicated that the women valued this approach. What’s more, the improvement was sustained, and the mood continued to improve during the following eight weeks. Additionally, a cohort of participants who began their Listening Visits eight weeks postpartum also experienced significant improvement.

“After discussing the Listening Visits concept with Segre, neonatal nurse practitioner Rebecca Chuffo Davila, DNP, NNP-BC, FAANP, recognized the potential value of this intervention for mothers of hospitalized newborns. The two decided to team up and take the Listening Visits model to a new location—the neonatal intensive care unit.”

The NICU research is moving into the community as well. Segre and Chuffo Davila are currently bringing together a broad group of collaborators, including the Iowa Neonatal Quality Collaborative, the Advanced Practice Institute in the University of Iowa Hospitals and Clinics Department of Nursing, Mercy Health in Waterloo, Iowa, two medical anthropologists, and a NICU parent advisory board, to create a pathway for implementing Listening Visits in community NICUs.

The research shows that “listening matters. My one goal in life is to have Listening Visits implemented as a standard of care in all NICUs.”

Listening Visits are one way to increase the likelihood that women get the treatment they need.
In Loving Memory of an Iowa Nurse

Mary Noel Cline made an indelible impact as a nurse over the course of her four-decade career. Now, her husband, Phil Cline, is giving back to honor his late wife and her passion for nursing.

When Mary Noel Iber (62BSN) was forced to move temporarily because of a fire at her University of Iowa sorority, she never expected her short-term housing situation would lead to a romance. Neither did her future husband, Phil Cline (61BA, 87MA).

"After the fire, she was living with Nancy Swisher (43BA), who was a good friend of my mom’s," says Phil, who grew up in Iowa City. "They concocted a story that there was an attractive nursing student living with Nancy, and this nursing student thought I was really special. Come to find out, she didn’t even know me. It was a classic setup, but I pursued her anyway and eventually got a date."

While a romance developed and they were married two years later, both Phil and Mary, who went by Noel, also received life-changing educations at Iowa. Phil became an administrator and CEO for three different hospitals throughout his career, while Noel had a four-decade career as a nurse—including serving as a head nurse at UI Hospitals & Clinics and at a primary care facility for an Inuit tribe in Kodiak, Alaska. She was also an avid volunteer and loved sailing and kayaking.

"Noel was someone who could do just about anything, and she opted to become a nurse—it was hardwired into her," says Phil, who lives in Eden Prairie, Minnesota. "She demonstrated such empathy for others."

When Noel passed away in 2016 after a courageous battle with cancer, Phil knew he wanted to honor Noel and her nursing career. That’s why Phil made an outright gift to create the Mary Noel Cline Memorial Nursing Scholarship at the University of Iowa, which will provide support for nursing students with financial need. The first recipient will be selected this spring.

"I knew how much she enjoyed her time at Iowa, and knowing what being a nurse meant to her, this seemed like a great way to honor and memorialize her," says Phil. "There are students out there that maybe don’t have families who can support them through nursing school—like Noel did. And if they have the skills that will make them great nurses, this seemed like a compelling reason to help future nurses."

Outstanding Young Alumni Award 2022

Sarah (Pfiehler) Hackethal (19BSN) started her career as a staff nurse at the Medical Intensive Care Unit at UI Hospitals and Clinics. In 2018, she was promoted to assistant nurse manager. In 2020, she was honored as the Daisy Nurse Leader, and in 2021, recognized as one of the 100 Great Iowa Nurses.

According to her nurse manager, Sarah brings a relentless passion for her patients and the staff who serve them. Her spirit, drive, and heart for helping patients and educating others to do so are readily apparent. She was responsible for the planning and execution of a COVID surge unit and instrumental in expanding bed capacity, improving patient flow, and cross training nurses.

Sarah is pursuing her Master of Science in Nursing—Clinical Nurse Leader degree at the College of Nursing, with expected completion in May 2022.

Distinguished Alumni Award 2022

Colonel Aaron Gopp (04CRNA) works in private anesthesia practice in Fruitland, Idaho. Col. Gopp earned his Bachelor of Science in Nursing in 1997 and was commissioned in the U.S. Navy Nurse Corps, where he remained until 2001 when he transferred to the Army Reserves.

Col. Gopp has held many leadership roles in the Reserves during the past two decades and has deployed to Afghanistan five times and once to Iraq.

As the director of anesthesia services and later commanding officer of the 915th Forward Surgical Team, Gopp was responsible for the preparation of the entire surgical team. He also trained healthcare personnel and civilian providers from Britain, Iraq, and Afghanistan to deliver complex surgical care to patients with severe injuries.

In spring 2020, Col. Gopp was part of a team that deployed to New York to assist on the front lines of the COVID-19 pandemic. He collaborated with personnel from state and local agencies to create a functioning hospital at the Javits Center, where he subsequently worked in the ICU.

Col. Gopp currently leads the 730th Medical Training Support Battalion and serves as a senior observer/coach trainer. In June 2021, he received the Order of Military Medical Merit, which recognizes excellence and promotes fellowship and esprit de corps among Army Medical Department personnel.

Gopp is a founding member in an all-CRNA anesthesia practice that serves medical centers in rural Idaho and Oregon. He has mentored new CRNA colleagues and serves as a faculty advisor to the new CRNA Doctor of Nursing Practice program at Westminster College in Salt Lake City, Utah. He has served on the Board of Directors for the Idaho Association of Nurse Anesthetists and the Oregon Board of Nursing Advanced Practice Committee.
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