



25 YEARS:

Celebrating Science, Honoring Scientists

Nightin Gala 2018

FRIENDS OF THE NATIONAL
INSTITUTE *of* NURSING RESEARCH

OCTOBER 31ST, GRAND HYATT HOTEL, WASHINGTON, DC



Researcher Casey Hooke discovers what helps children and families thrive after a cancer diagnosis.

DRIVEN TO IMPROVE LIVES THROUGH RESEARCH

At the University of Minnesota School of Nursing, our innovative research and evidence-based practice projects are addressing health issues across the life span in local, state, national and global contexts.

Research Areas of Excellence

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FRIENDS OF *the* NATIONAL INSTITUTE *of* NURSING RESEARCH

FNINR'S VISION is to be a bold voice to communicate the impact of NINR's work to elevate nursing science, improve lives and advance the Nation's health.

FNINR'S MISSION is to provide resources to support nursing research and advance the mission of the NINR. The Friends seek to support research-based nursing practice by educating nursing professionals and the public about the advances made through nursing research and its benefits to patients, families, the community and the delivery of healthcare.

The Friends of the National Institute of Nursing Research (FNINR) is an independent, non-profit organization founded in 1993. Nurse researchers are grounded in clinical nursing practice and focused on the physical, mental, emotional and social needs of patients. They recognize the illness and the presence of health risk factors affecting the overall well-being of individuals.

The healthcare community faces new challenges and opportunities to improve patient care each year. With the continuing leadership provided by NINR and the support of FNINR, nurse researchers will continue to contribute to the enhanced health and well-being of all Americans, especially in a time when cost-effectiveness and quality of care are equally championed by the public and the Nation's decision makers.

NATIONAL INSTITUTE *of* NURSING RESEARCH

The National Institute of Nursing Research (NINR) was established as a Center at the National Institutes of Health (NIH) and as an Institute in 1986. This placement among the 27 Institutes and Centers within the NIH has added a new scientific perspective to enrich the Nation's biomedical and behavioral research endeavors.

NINR's mission is to promote and improve the health of individuals, families, communities, and populations. The mission is accomplished through support of research in scientific areas such as chronic and acute diseases, health promotion and maintenance, symptom management, health disparities, caregiving, self-management, and the end of life. NINR also supports the training of new investigators who bring new ideas and help to further expand research programs. The ultimate goal of NINR's research is its dissemination into clinical practice and into the daily lives of individuals and families.

Welcome

TO FNINR'S 25th ANNIVERSARY:
Celebrating Science, Honoring Scientists



KAREN DRENKARD
PhD, RN, NEA-BC, FAAN
FNINR PRESIDENT

On behalf of the FNINR Board of Directors and membership, welcome to the 2018 NightinGala! This is a special celebration as we recognize the 25th Anniversary of the Friends of the National Institute of Nursing Research.

The celebration of anniversaries is important in many ways. Anniversaries serve to remind us of something that matters to us. In this case, what matters to us is the impact of nursing science and our support of nursing research. The birth of the Friends group was a significant historical event because it was the creation of a community. The impact of nursing science is improving the health of our nation through improved clinical practice, prevention of illness and symptom management. Your presence here at the Gala signifies your support of the important work that is being advanced by NINR.

Tonight is a celebration! FNINR is proud to be strong after 25 years. The Friends group has worked hard to strengthen the Organization, enhance our governance, and increase our visibility and impact in educating and briefing members of Congress on the impact of nursing science on the Nation's healthcare system. Our history is deep, and the work of those who came before us is our legacy. We are excited to share the historical perspective, the achievements of the leaders who created the Organization, and the vision for the future of the Friends group. Thank you for being with us tonight to honor all of the amazing work of nurse researchers who are transforming the healthcare of the Nation.

It has been an honor to serve as the President of FNINR for the past two years, and I look forward to transitioning the leadership to the ever-capable and action-oriented Dr. Connie Delaney.

Celebrating milestones allows us to celebrate growth and hope. Happy Birthday FNINR! And thank you all for coming. Enjoy your evening!

NIGHTINGALA PROGRAM | *October 31, 2018*
25 Years: Celebrating Science, Honoring Scientists

WELCOME AND OPENING REMARKS
FNINR President Karen Drenkard, PhD, RN, NEA-BC, FAAN

FNINR 2018 FAYE GLENN ABDELLAH
LEADERSHIP AWARD PRESENTATION

DINNER

SPECIAL 25 YEAR ANNIVERSARY PRESENTATION

FNINR 2018 RESEARCH AWARDS

Ada Sue Hinshaw Award | Welch/Woerner Path-Paver Award | President's Award | Protégé Award

Presented By:

Connie W. Delaney, PhD, RN, FAAN, FACMI
FNINR President-Elect

CLOSING REMARKS
Karen Drenkard, PhD, RN, NEA-BC, FAAN

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2018 FNINR

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As of 9/21/2018

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MedStar Health is proud to support the Friends of the National Institute of Nursing Research at this year's NightinGala.

MedStar Health's 8,400 nurses are dedicated to high-quality patient care, and are creating the future of nursing practice.

Tonight, we congratulate the award winners on your scientific achievements, which improve the health of patients everywhere.

MedStar Franklin Square Medical Center*
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2018 FNINR

Awards

FAYE GLENN ABDELLA LEADERSHIP AWARD

The Faye Glenn Abdella Leadership Award is presented to an organization or individual with a sustained or lasting impact on nursing science either through advocacy, institutional leadership, or individual program of research that has led to the public awareness of the value of nursing science in improving health at the individual and/or population levels.

ADA SUE HINSHAW AWARD

The Ada Sue Hinshaw Award is the preeminent award given by FNINR in honor of the first permanent Director of the National Institute of Nursing Research, acknowledging the substantive and sustained program of science that affords the recipient recognition as a prominent senior scientist.

WELCH/WOERNER PATH-PAVER AWARD

The Welch/Woerner Path-Paver Award is given to a mid-to-late career nurse scientist who has achieved one or more breakthroughs in theory development, research methods, instruments, or subject matter that has paved the way for other scientists and who has influenced and mentored the next generation of nurse researchers.

PRESIDENT'S AWARD

This year, the President's Award is given by FNINR to acknowledge a nurse scientist whose research is aimed at "big data," including application of big data in nursing and health care research; research about technological advances that allow the collection and analysis of health care to determine new knowledge about behaviors and interventional impact; and analysis of big data to discern and impact social determinants of health.

PROTÉGÉ AWARD

The Protégé Award is given to an evolving nurse scientist who shows great promise in advancing science and who is within the first six years of completing either PhD or Post-Doctoral study.

THE *Faye Glenn Abdellah* LEADERSHIP AWARD



Celebrating the Life and Legacy of RADM FAYE GLENN ABDELLAH

The Friends of the National Institute of Nursing Research is pleased to announce the first issuance of this award to honor Dr. Abdellah will be at the 2018 NightinGala, FNINR's 25th Anniversary.

Dr. Abdellah was instrumental in the transfer of the Center for Nursing Research, Division of Nursing (DN), Bureau of Health Professions, Health Resources and Services Administration, United States Public Health Service (US PHS), to the National Center for Nursing Research at the National Institutes of Health (NIH). The Center was the forerunner of the National Institute of Nursing Research (NINR). She felt strongly that nursing research belonged at NIH.

Dr. Abdellah, a policy expert, spearheaded obtaining Congressional authority for the transfer. On November 21, 1985, Congress established the National Center of Nursing Research at NIH to conduct, support, and disseminate information respective to basic and clinical nursing research, training and other programs in patient care research done by nurses.

Dr. Patricia A. Grady is the Director Emeritus of the National Institute of Nursing Research at the National Institutes of Health. She recently retired after serving as the Director of the Institute for over 23 years. Her impact on the discipline of nursing science has been profound, leading the Institute through many years of increasing scientific, political, and financial support for nursing research, helping NINR-supported scientists become leaders of research teams that include nurses, physicians, and other interdisciplinary scientists. Her vision and guidance helped to make nursing science, with its unique clinical emphasis, an essential component of the NIH and a critical link among the laboratory, clinic, patients, and families.



PATRICIA A. GRADY
PbD, RN, FAAN

Dr. Grady's commitment to supporting the best of nursing science across the life span led to important advances in wellness and prevention, self-management of chronic conditions, symptom science, advances in diagnostic and therapeutic technologies, and caregiving and palliative care support. In both extramural and intramural contexts, Dr. Grady guided the NINR and its staff as new ideas were explored, and usual practices were enhanced to improve the health and wellness in the U.S. and beyond.

Dr. Grady's leadership and guidance steered nursing research toward new scientific areas, including palliative and end-of-life care, genomic research, symptom science, and precision health. Her strategic vision positioned nursing equally with other research disciplines at NIH and helped to raise the level of scholarship of nursing researchers. Under her watch, NINR developed and maintained a strong commitment to supporting research training for the next generation of nursing scientists, the large majority of whom are women, by devoting more resources to extramural training awards (as a percentage of budget) than nearly any other NIH Institute or Center.

Dr. Grady's contribution beyond NINR extends to the many trans-NIH groups that she led or co-led during her tenure at NIH, including the Pain Consortium, the Public Trust Initiative, the Science of Behavior Change Initiative, the Office of Emergency Care Research Steering Committee, and the Roadmap Initiative on Interdisciplinary Research Teams of the Future, among many others. Prior to her tenure as Director of NINR, Dr. Grady served first as a program director and then both as Deputy Director and Acting Director of the National Institute of Neurological Disorders and Stroke at NIH.

Dr. Grady earned her undergraduate degree from Georgetown University, then pursued her graduate studies at the University of Maryland, earning her master's degree at the School of Nursing and a doctorate in physiology from the School of Medicine. Her research areas included hypertension, cerebrovascular stress, and cerebral edema. She was elected to the Institute of Medicine (now the National Academy of Medicine) and has been recognized for her contributions through numerous honorary degrees and awards from universities across the United States as well as many prestigious scientific and nursing organizations.

THE *Ada Sue Hinshaw* AWARD



JACQUELYN CAMPBELL, *PhD, RN, FAAN*

Jacquelyn Campbell, Professor and Anna D. Wolf Chair, Johns Hopkins University School of Nursing, is a national leader in research in the field of intimate partner violence (IPV) and trauma and health outcomes. Her research on these health effects have been groundbreaking, with some of the first published studies on the health effects of abuse during pregnancy (e.g. LBW, 1999, from her first R01 funded by NINR), a classic *Lancet* article in 2002 synthesizing knowledge to date including hers on the gynecological, neurological, chronic pain, and physiologic stress response related health outcomes, the intersections of HIV and IPV (co-author, first scientific article, 1999), IPV in the workplace and most currently in Traumatic Brain Injury among abused women (2017) as well as articles on strategies to improve the healthcare response leading to changes in emergency departments, primary and prenatal care.

She is known for the first published nursing research article (1981) on homicide of women which demonstrated that women are most often killed by current or former husbands or boyfriends with IPV the major risk factor for partner homicide and this research trajectory has continued with her landmark 2002 national intimate partner femicide study and a global analysis of data on IPV homicide in 2013. She also developed in 1985, validated from 1990-2009, and has widely disseminated the Danger Assessment (DA) that assists abused women to more accurately assess their risk of homicide in an abusive relationship. Each of her 10 major funded (as PI) major research grants (NIH, CDC, NIJ, DoD, DHHS, DOJ) has built on, broadened, deepened and translated the knowledge discovered in the ones before. Her studies have paved the way for a growing body of interdisciplinary investigations by researchers in the disciplines of nursing, medicine, and public health that together have led to improvements in the healthcare system response to IPV as well as collaborations with DV service and justice sectors, policymakers and the public across the globe.

Her research results and expertise is sought by national and international policy makers to address violence and its health effects on families and communities. As a nurse educator and mentor, Dr. Campbell leads by example in inspiring new generations of nursing, medicine and PH researchers through mechanisms such as PI (2000-2016 and 2018-2023) of the only NIH funded interdisciplinary pre and post-doctoral training in research in violence and trauma, advisor for more than 30 PhD students in nursing and other disciplines with dissertations on violence. Elected to the National Academy of Medicine in 2000, Dr. Campbell also was the IOM/AAN/ANF Senior Scholar in Residence and Founding Co-Chair of the NAM Forum on the Prevention of Global Violence. National service highlights include membership on the congressionally appointed U.S. Department of Defense Task Force on Domestic Violence starting important research on DV in the military and two US Senate testimonies on violence including needed research.

ELLEN M. LAVOIE SMITH, *PhD, APN, AOCN®, FAAN*



Ellen M. Lavoie Smith is Associate Professor and the PhD Program Director at the University of Michigan School of Nursing. Dr. Smith's research is well recognized as pioneering and pivotal in identifying interventions for chemotherapy-induced peripheral neuropathy (CIPN), a life-altering complication of neurotoxic chemotherapy for which no known treatments have been discovered. Her most significant research role to date was as principal investigator for an NCI-funded multi-site randomized placebo-controlled trial to test duloxetine as a treatment for painful CIPN. This groundbreaking research revealed duloxetine efficacy, with the results published in *The Journal of the American Medical Association* (2013).

Dr. Smith continues to make substantive contributions to oncology care through her collaborations with multi-disciplinary experts in CIPN and pain. Following participation in two NIH CIPN state-of-the-science meetings, world leaders in the field reached the consensus that the next national multi-site study should build upon the only positive published study—Dr. Smith's duloxetine trial—to test whether duloxetine prevents CIPN. Dr. Smith worked with a basic science researcher to obtain preliminary data supporting duloxetine-induced CIPN prevention using an oxaliplatin-induced neuropathy animal model. The findings were strongly positive and support a multi-site duloxetine prevention trial (R01) that is currently being considered for funding.

Dr. Smith has also advanced the field by refining, developing, and testing new CIPN assessment methods. She led a NIH/NCI-funded study designed to test and refine the EORTC-QLQ-CIPN-20, a patient-reported outcome measure. Dr. Smith and her team revised the tool to improve its reliability and validity; the modified QLQ-CIPN20 is poised to evolve into a gold-standard CIPN PRO measure.

Dr. Smith has also led/co-led research to identify risk factors for developing chronic cancer treatment-related pain, including painful CIPN, in adults and children. She led a pilot study to explore whether a physiologic and biobehavioral phenotype predicts the development of chronic pain following breast cancer treatment. Her findings suggest that addressing high pain sensitivity, trauma exposure, and cognitive factors (e.g., catastrophizing and pain beliefs) before the initial breast cancer surgery might prevent severe chronic pain later on. Dr. Smith and colleagues have also identified pharmacokinetic and genetic predictors of CIPN in adults and children that could serve as valid biomarkers. These discoveries will inform future targeted approaches to treat or prevent CIPN and pain.

In addition to her research, she directs the UM Nursing PhD Program, teaches research courses at the undergraduate and graduate level, and serves on dissertation committees as both chair and member. Dr. Smith has mentored 45 undergraduate/graduate students and junior faculty, and has co-authored 22 papers with students and postdoctoral fellows.



SHANNON N. ZENK, *PbD, MPH, RN, FAAN*

Shannon N. Zenk is Collegiate Nursing Professor at the University of Illinois at Chicago College of Nursing. Widely recognized as a pioneer in food desert research, Dr. Zenk brought national attention to the problem of access to nutritious foods in low-income and minority neighborhoods. Through studies in Chicago, Detroit, and across the nation, she showed that low-income, segregated neighborhoods are often bereft of healthy food options, which may contribute to poor diets and obesity.

Her breakthroughs in big data research include creative use of electronic health record (EHR) data to generate nationwide, longitudinal evidence on environmental contributions to obesity and minute-by-minute monitoring of people's movement using global positioning system (GPS) technology to more accurately capture their environmental exposures. Two nationwide projects are combining EHR and detailed environmental data to study millions of Americans and identify how food and active living policies and environmental changes can improve body weight and metabolic health of groups disproportionately affected by obesity. One study is a 7-year study of over 3 million adults receiving healthcare from the U.S. Department of Veterans Affairs. In this study, she is providing much-needed evidence on not only longitudinal environment-health relationships, but also environmental modification of weight management program effectiveness. The second study is an extension of this work to 8 million individuals across the lifespan, using five years of athenahealth EHR data. Recognizing that the typical focus on residential environments may mis-specify environmental influences on health, Dr. Zenk broadened her research to more precisely measure environmental exposures across the day where people conduct activities and spend time (activity space). Over two weeks her approach generated over 20,000 locations per study participant. Her activity space research represents a novel shift in the study of environmental determinants of health that has rapidly gained traction. She has linked these data with minute-by-minute information on physical activity (collected via accelerometer), diet, and psychosocial factors (e.g., stress assessed via ecological momentary assessment surveys) to understand how psychosocial factors interact with the environment to affect within-person daily and momentary differences in behaviors. This research has implications for new kinds of interventions, including just-in-time adaptive interventions that provide the right type/amount of support at the right time to support healthier behaviors.

Dr. Zenk has published some 100 journal articles and book chapters and she is an appointed member of the NIH Community Influences on Health Behavior study section; Associate Editor for the interdisciplinary journal *Health & Place*; Guest Editor for the *Food Environment, Diet, and Health* Special Issue of the *International Journal of Environmental Research and Public Health*; and current RWJF Clinical Scholar.

LISA CARTER-HARRIS, *PhD, APRN, ANP-C*



Dr. Lisa Carter-Harris is an Assistant Professor at Indiana University School of Nursing. She has worked to improve shared decision-making between clinicians and their high-risk patients regarding lung cancer screening. Dr. Carter-Harris is recognized as a pioneer leading the science that emphasizes the importance of the patient perspective in complex lung cancer screening decisions. Her research has advanced the field by generating new knowledge about the patient's perspective on the decision to screen for lung cancer and the influence of stigma on this health behavior, which has significant implications in transforming health behavior and health communication both in the population eligible for lung cancer screening and for other health care decisions that demand joint decision making between the patient and clinician.

Dr. Carter-Harris' early work is foundational in this area and includes development of the only conceptual model to guide research about lung cancer screening from the patient perspective, development of four new valid and reliable health belief scales to measure perceived risk of lung cancer, perceived benefits of, perceived barriers to, and self-efficacy for lung cancer screening, and the only study to examine the decision to opt-out of lung cancer screening after receiving a recommendation from a clinician. Her research findings have led to system-wide changes at Kaiser Permanente Washington, where she holds an Affiliate Investigator appointment, including the development of a decision aid. Finally, these foundational studies informed the development of LungTalk™, the first computer-tailored decision support tool designed to prepare screening-eligible patients to: 1) engage in a discussion with their clinician about screening; 2) make a screening decision; and 3) for current smokers, move them forward in their readiness to quit. Dr. Carter-Harris is also currently testing her conceptual model on lung cancer screening participation from the patient perspective after being awarded one of the few R15 (Academic Research Enhancement Award) grants from NCI using an innovative mixed methods design.

Dr. Carter-Harris is the only nurse to serve on the Center for Disease Control and Prevention's Panel on Surveillance of Shared Decision-Making in Lung Cancer further helping to shape the national conversation on lung cancer risk and lung cancer screening.

Dr. Carter-Harris was the first nurse to be awarded the highly competitive and prestigious Cancer Research Network Scholar Award funded by the National Cancer Institute. Because of her exceptional contributions to research, she was awarded the 2018 Distinguished Wilson Wyatt Alumni Award at the University of Louisville and is selected to be inducted as a Fellow in the American Academy of Nursing.



TERRI VOEPEL-LEWIS, *PhD, RN, FAAN*

Dr. Terri Voepel-Lewis, Associate Research Scientist at the University of Michigan School of Nursing, has achieved international recognition for her research related to pain assessment and management. Her early clinical research focused on pain assessment and management in vulnerable populations of children with limited verbal ability. This work included development and testing of the Faces Leg Activity Cry Consolability (FLACC) observational pain assessment measure and clinical evaluation of the self-report Numeric Rating Scale.

Dr. Voepel-Lewis's pain assessment publications have been included in multiple systematic reviews and the FLACC was recommended among few well-validated behavioral measures for assessing pain in children in clinical and research guidelines.

Establishing valid pain assessment tools during her early career facilitated Dr. Voepel-Lewis's ongoing work related to pediatric pain management and analgesic safety. Her clinical studies focusing on opioid-related adverse events and patient monitoring were among the first to identify factors placing patients at risk in general care hospital settings.

Recognizing the inherent risks of prescription opioids, Dr. Voepel-Lewis turned her attention to opioid safety in the home setting. Over the course of her dissertation work, she developed and tested a complex model of decision-making to explain how parental and child factors influence pain management decisions. This research identified key knowledge, perception and preference factors that contribute to potentially unsafe analgesic decisions. Since earning her doctorate in 2013, Dr. Voepel-Lewis has built an innovative program of research to simultaneously address pain and opioid safety in the home setting. Building on her foundational exploratory work, Dr. Voepel-Lewis developed and tested a novel intervention, the Scenario-Tailored Opioid Messaging Program (STOMP) to improve opioid risk knowledge, shift analgesic preferences and enhance pain management decision competency. A preliminary randomized trial supported the efficacy of the STOMP for parents, and given the program's adaptability to a variety of high risk populations and scenarios, this intervention has the capacity to be widely applicable for educating vulnerable groups of patients with pain.

Dr. Voepel-Lewis's current research uses randomized and factorial research designs to enable the identification of latent factors that predict unsafe opioid decisions and that place children and adolescents at ongoing risk. She has also broadened her work to better understand risky analgesic decisions among older adolescents and emerging adults who self-manage their own pain. The potential high impact of Dr. Voepel-Lewis's research was recently recognized with funding from the National Institute on Drug Addiction (R01DA044245). Dr. Voepel-Lewis's visionary research has the potential to broadly influence practice and policy – particularly in light of rapidly shifting views and laws related to opioid prescribing and close alignment with the National Pain and Drug Control Strategies.

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