

ABNF, Inc.

A Newsletter for the Members of the Association of Black Nursing Faculty, Inc.



ABNF's Editor Note

Audwin B. Fletcher, PhD, APRN, FNP-BC, FAAN

Happy New Year to you!! I pray you are off to a great academic year. ABNF is as strong or as weak as the <u>sum total</u> of its parts...The degree to which we are willing to be guided by our historical development; the amount of time we are willing to put in; the enthusiasm we wish to show; the problems we are willing to personally tackle; and, the proposals we are willing to generate, will all collectively shape

the course that the organization will inevitably take. The course we take, the things we do, and the examples we set, will tell the world what we do!!!!"

I am excited to release the winter 2019 edition of our peer reviewed newsletter. This edition has the following inclusions:

- President's message from president, Dr. Audwin Fletcher
- Current List of Elected officers and Board of Directors
- Featured Article
 - Reproductive Health Outcomes in African American Women: Introduction to an At-Risk Population in Western New York
 - Master's Enhancement and Student Engagement: Guidelines for Master's Nursing Student Dissemination
- Members on the Move
- Member Benefits
- Call for manuscripts
- 32nd Annual Conference Information
 - o Call for abstracts
- Updated Membership application

If you have news or announcements to share about yourself or your colleagues or manuscripts to submit, please send them to <u>afletcher@umc.edu</u>.

Respectfully, Audwin The ABNF Electronic
Newsletter is the official
electronic newsletter of
the Association of Black
Nursing Faculty, Inc.
(ABNF). Members are
invited to submit articles,
ideas, experiences,
passages, comments and
updates to the editor or
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ABNF Membership -

ABNF Members attend the Annual Meeting and Scientific Conference; contribute to and review the ABNF Newsletter and ABNF Journal; apply for and learn from grants, awards, scholarships, and development opportunities; and establish a united voice on Public Policy.

Fees: \$125 regular membership or \$25 student membership

An application is available in this newsletter or you may visit our website (<u>www.abnf.net</u>) to complete a member application and submit annual membership dues securely using a credit card.

Contact Dr. Ronnie Ursin, Treasurer, as needed for more information at DrUrsin@live.com



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Whew! Where has the time gone? This has been a busy and fast year. I am excited to extend to you the invitation to attend, present your research, rekindle old ties, make new bonds, and experience the "ultimate Chicago experience" at our 32nd Annual Meeting and Scientific Conference, June 5-8, 2019 at The Conrad Chicago – located on the historic Magnificent Mile. This year, we are pausing to honor our very own founder of ABNF, Dr. Sallie Tucker Allen, FAAN. The 2019 conference theme is: "The Sallie Tucker Allen Institute and Conference: Honoring a Living Legend through Excellence in Scholarship, Teaching, and Achievement in Healthcare".

If you have not attended an annual conference in a while, you should make certain not to miss this one. The conference steering committee is planning a wonderful educationally packed and fun-filled meeting. This year, we have a preconference "Writing for Funding" workshop. This workshop, led by Dr. Loretta Sweet-Jemmott, is an added attraction to our already wonderful conference. Dr. Sandra M. Underwood will serve as keynote speaker; and Dr. Barbara Broome will serve as leadership speaker. For more information regarding our 2019 ABNF Annual Meeting & Conference visit our website at abnf.net for registration, hotel, exhibit, and sponsorship forms, as well as membership applications.

I look forward to seeing you in great city of Chicago; but more importantly, I look forward to having you join ABNF. For questions, email at afletcher@umc.edu.

Respectfully,

Audwin Fletcher, PhD, APRN, FNP-BC, FAAN President, ABNF Inc. (2018-2020)

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Featured Manuscript -

Reproductive Health Characteristics of African Refugee Women: Introduction to an At-Risk Population in Western New York

Kafuli Agbemenu, PhD, MPH, RN, CTN-A; Samantha Auerbach, MSN, NP-C; & James Shelton, MS

Refugee Resettlement in Erie County, Western New York

Erie County is the largest metropolitan county outside of New York City, with approximately 922,000 residents and covering over 1,000 square miles (Erie County Department of Health [ECDOH], 2017). Located in Western New York, Erie County was once a leader in industrial steel production, but experienced population and economic decline following national trends of deindustrialization that led to factory closures and employment layoffs (ECDOH, 2017; Edie, 2017).

In response to this economic depression and drain of human capital, Erie County invited refugee resettlement, and now accepts the large majority of the approximately 5,000 refugees that resettle in New York State (Bureau of Refugee and Immigrant Assistance [BRIA], 2016; ECDOH, 2017). The city of Buffalo is the primary location for refugee resettlement within the county. The refugee population has led to renaissance and diversification of the area, with new immigrants bolstering the local population, starting businesses, purchasing real estate and revitalizing formerly failing neighborhoods.

African refugees make up 23% of resettled refugees, with Somali Bantu representing the largest refugee population in Erie County (BRIA, 2016). In fact, Somali now routinely rates as one of the top languages spoken in the Buffalo public school system (Partnership for Public Good [PPG], 2014). Considering the substantial African refugee resettlement in Western New York, and the dearth of information on this vulnerable population in the literature, we chose this as a location for further exploration of health issues. We further decided to examine African refugee women because they are even more at-risk for poor health outcomes because of experiences in country of origin, or during the displacement and migration process. In this article we introduce a sample of African refugee women under retrospective study, and highlight factors placing them at increased risk for poor reproductive health outcomes.

Resettlement in the United States and Continued Challenges to Health

Upon resettlement, African refugee women continue to face significant challenges to their health due to barriers such as language, culture, religion, and education (Hauck, Corr, Lewis & Oliver, 2012; Kalich, Heinemann, & Guahari, 2016). Beliefs regarding health in the United States (US) healthcare system, particularly preventative and reproductive healthcare, often do not match the concerns or values of African refugee women, setting up a discordance of values that can lead to underutilization of healthcare services (Banke-Thomas, Agbemenu, Johnson-Agbakwu, 2018; Pavlish, Noor, & Brandt, 2010; Saadi, Bond, & Percac-Lima, 2015).

African refugee women also experience added discrimination due to a combination of racial and political biases within our society related to their race, gender, language, and refugee status, further distancing the relative comfort and acceptability of our healthcare system from African refugee women (Banke-Thomas, Agbemenu, Johnson-Agbakwu, 2018; Hauck et al., 2012). The confluence of these challenges may lead to disparities in health outcomes and further unmet health needs, especially related to reproductive healthcare (Banke-Thomas, Agbemenu, Johnson-Agbakwu, 2018; Gurnah, Khoshnood, Bradley, & Yuan, 2011). As such, understanding reproductive health outcomes among African refugee women is critical to our aims of eliminating health disparities among vulnerable populations such as this one.

Somali Bantus and Refugee-Related Risk Factors for Health

As aforementioned, Somali Bantu are the most populous African refugee group in Western New York. They comprise a diverse group of people with a complicated history of slavery in their country of origin, and are considered to have been particularly discriminated against and persecuted during the Somali civil war in the 1990s (Stephen, 2002). After fleeing persecution as an ethnic minority in the Somali civil war, many Somali Bantu families lived for years in refugee camps in Kenya, before being considered for resettlement in the United States (Upvall, Mohammed, & Dodge, 2009; Van Lehman & Eno, 2002).

Life in refugee camps limited Somali Bantu women's access to healthcare, exposed them to poor living conditions with few economic opportunities, with a high likelihood of exposure to gender-based violence, such as

physical and sexual assault (United Nations High Commissioner for Refugees, 2001-2015b, 2003;Upvall et al., 2009). Other gender-related health risk factors for African refugee women include low levels of education, which contribute to lower levels of health literacy, and lower overall societal position, which can restrict their abilities to make health-decisions (Banke-Thomas, Gieszl, Nizigiyimana, & Johnson-Agbakwu, 2017).

Current Study

In this section, we report on reproductive health data of African refugee women retrieved from Erie County electronic birth certificate data in Erie County from the years 2007-2016. African refugee women accounted for 1% (n=789) of the 77,891 births identified within this time period. Of the women in this sample, 68.3% were born in Somalia and 5% in Burundi, with the rest, in approximately equal amounts, being born in the Democratic Republic of Congo (9.8%), Eritrea (8.9%), and Rwanda (7.7%). The number of births to African refugee women increased over the study period, making up 0.6% of all births in 2007 and 1.4% of all births in 2016.

Approximately 79% of African refugee women in the sample were between the ages of 20-34, 17% above the age of 35 years, and 4% under 20 years, a statistic that somewhat mirrors the general US population. Slight more than 70% of the sample had less than a high school education, another unfortunate side effect of life in refugee camps where formal education may not have been available, especially for adults. BMI stratification appears similar to the US population, however, because you do not have data on length of stay in the US, and weight on immigration, it is difficult to interpret this data. However, research on acculturation has noted that rates of obesity in immigrant populations tend to increase with length of time in the US (Agbemenu, 2016). In regards to maternal medical risk factors, it is noteworthy that rates of previous c-sections are the most reported risk factor. According to available literature, this could be due to poor maternal health before pregnancy, beliefs about adverse effects of c-sections, or late presentation for medical care during labor (Banke-Thomas, Agbemenu, & Johnson-Agbakwu (2018).

Demographic and reproductive health information regarding the study sample of African refugee women are listed below (Table 1).

Table 1
Characteristics of African Refugee Sample in Current Study
Sample Characteristics n (%)

Sample Characteri	<u>bties</u>	<u>11 (70)</u>
Age (years)	<20 20-34 35+	34 (4.3%) 621 (78.7%) 134 (17.0%)
Education	<high school<="" td=""><td>521 (70.3%)</td></high>	521 (70.3%)
	≥High School	220 (29.7%)
Number of Previous Live Births- Living	0 1-4 5+	122 (15.5%) 453 (57.4%) 213 (27.0%)
BMI	<18.5 18.5-29.9 30+	20 (3.6%) 395 (71.7%) 136 (24.7%)
Maternal medical risk	Pre-pregnancy diabetes	8 (1.0%)
factors	Pre-pregnancy hypertension	5 (0.6%)
	Gestational Diabetes	56 (7.1%)

Maternal Infections in 62 (7.9%)
medical risk pregnancy
factors Previous 166 (21.1%)
cesarean

Total 789

Conclusion

Understanding reproductive health outcomes of African refugee women resettled in the United States will illuminate areas for improvement and allow for targeted health interventions for this underserved population. Exploring these outcomes is the first and critical step towards informing clinical priority areas and directing future research directions. Targeting health interventions for this population will require an emphasis on culturally congruent care, such as gender and language-concordant clinical staff and improved understanding of potentially different cultural approaches to healthcare; however we first must understand the areas in which African refugee women experience disparate health outcomes. In future research, we intend to conduct analyses that compare this African refugee group to US-born Caucasian and US-born African American within Erie County in order to identify disparities in reproductive health outcomes.

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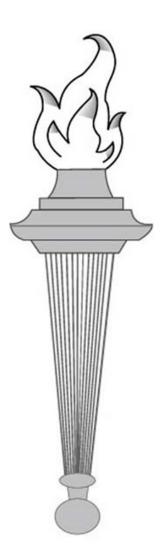
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Featured Manuscript -

Master's Enhancement and Student Engagement: Guidelines for Master's Nursing Student Dissemination Joyce Johnson, Ph.D. RN; Cathy Williams, DNP, RN; Leslie Jones; Linda Amankwaa, Ph.D., RN, FAAN; & Louise Wrensford, Ph.D.

Introduction

Dissemination is an important goal for researchers. By definition, dissemination is the communication of research findings to the public. Many researchers complete their research but fail to disseminate this knowledge so that others may benefit from their extraordinary work. This is called the "research to practice gap" within the literature (Wilson, Petticrew, Calnan & Nazareth, 2010). Thus, while research may be beneficial, its use and lasting effects are not actually available to those who need it the most in practice. "Research should be disseminated with others…" (Timmins, 2015).

Recommendations for dissemination as noted in AHRQ (2012), suggest: "The targeted distribution of information and intervention materials to a specific public health or clinical practice audience. The intent is to spread knowledge and the associated evidence-based interventions" p.2. While there are many forms of dissemination of knowledge, our model includes presentations (oral and poster) and publication. We suggest within this document that dissemination ought to be intentional among academic institutions with graduate programs. We know that only a percentage of doctoral research is ever published and it is surmised that an even lessor of masters graduate studies are disseminated beyond oral defense.

ProQuest is a nationally known repository of dissertations and master's thesis documents. University libraries also often house student dissertation and thesis work. However, not all universities have protocols or models for this first level of dissemination of student research work.

The purpose of this article is to outline a disseminate model used to increase the exposure of graduate student research within University A (UA), historically black college. We discuss the process in creating a working dissemination model and guideline for presentation of graduate student thesis work each year. Reporting on the historical development of this Master' dissemination model, that was created while fulfilling grant objectives, is the another purpose of this study. Finally, we describe outcomes of the grant work and a summary of the number of student presentations during grant years.

Background

University A (UA) began its Master of Nursing program in the late eighties and thus celebrates 30 years next year. As one of the few masters of nursing program in the area, it has served several hundred masters nursing students. A final requirement of the master's nursing program is the master's nursing thesis. Faculty noticed that students experienced challenges with this requirement as well as dissemination. To address some of these challenges, UA applied for and was awarded, a Masters Enhancement Grant in the fall of 2009. This grant opportunity focused on assisting students from educational or economically disadvantaged backgrounds who were in pursuit of full-time master's nursing, math education, and science education studies. Grant resources and written objectives of the grant, resulted in dissemination activities. This model contains 5 stages used to assist graduate nursing students in the completion of their thesis and dissemination of their data-based, IRB (institutional review board) approved research. This process and these stages began approximately 5 years ago with math and nursing graduate students. It is now a university-wide Graduate Research Symposium held each year in the spring. Here, we document history, processes and stages guiding the engagement of master's students in the dissemination process.

Goals of the Masters Enhancement Grant

Goals of the grant included academic and fiscal support for students, as well as resources for programs to facilitate teaching, reinforcement of skills and research concepts. Nursing informatics and forensic nursing were additional objectives. Other significant areas of the grant included faculty development, support for faculty to facilitate student scholarship and dissemination of faculty research. Our guideline reported here, focus on dissemination by faculty and students. Dissemination, within this report, comprises poster presentations, oral presentations, and publications.

At the start of the grant, nursing students rarely presented or published their research, even though 90% of graduate nursing students completed a thesis. Initial years of the grant focused on enhancement, such as advanced practice skills to assist students with learning dictation, assessment, and data management using statistical analysis software. Math faculty were enlisted to assist with research tool preparation/instrumentation and statistics as students prepared research studies.

Historical Progression of Model for Master's Student Presentations and Dissemination

In the Fall of 2013, our master's enhancement grant administrator raised a question about how dissemination efforts of students could best be achieved in a timely manner. Together, faculty along with staff of the nursing program brainstormed for several days and months. The outcome was the development of a graduate research symposium in which master's nursing students and math education present research projects internally, within the university setting. Creating this activity for students sounded simple, initially. However, processes for implementation developed exponentially over the past 5 years requiring documentation of stages, for organization and refinement. These activities resulted in the structure of the current symposium.

In the spring of 2014, UA held the first Graduate Research Symposium (GRS). At the symposium, students presented their posters *emanating from* graduate thesis work. Faculty were asked to think about the next objective of the grant. That next step was to present outside of the university at local, regional and national levels. Since UA is situated in Georgia and near the border of Florida, we first asked a representative of the Florida Nurses Association to consider our students in the next conference planning. The planning committee agreed to review submissions by our students for inclusion in the 2015 conference. Several UA students presented creative posters in spring, 2015 and since that time UA has been given an annual invitation to the North Florida Nursing Association Conference.

In 2015 the Graduate School at UA, under the leadership of the Graduate Dean, began to plan a UA graduate conference. In collaboration, it was decided to expand the grant's graduate student symposium to include graduate students and faculty from across the university. With this change, poster presenters increased from approximately 20 to 40 presenters. Faculty were invited to present at the symposium as either poster or podium presenters. This represents the next major change for the model of dissemination.

In 2016, the dissemination plan was extended to publications. The compilation of abstracts from posters had been considered as a conference proceeding; however, the breath of distribution of this information seemed too limited. While at a national conference, we discussed the possibility of this activity with a journal editor. We asked the question: "would you consider a guest student edition with a faculty guest editor"? The answer was a resounding yes. Our next step in the dissemination model was created at that point and the summer journal publication is currently in progress with 9 students and faculty publishing as teams.

Dissemination Model: 5 stages

- 1. Research/Thesis class
 - a. Research Class
 - i. Literature review poster
 - ii. Proposal Paper
 - iii. Either acceptable at the Symposium (completed in the class)
 - b. Final graduation thesis course
 - i. Students prepare the thesis in final course prior to graduation.
 - ii. Final thesis presented as poster for symposium
 - c. Either or all of these may participate in the Symposium each year. The symposium is held in the spring and these papers are the final papers of these courses.
 - d. Posters created from university template. Final papers from thesis and nursing research courses in the spring of each year. Math courses and university courses with capstone papers participate in poster or podium presentation.
- 2. Preparation of Poster
 - a. Faculty Mentors
 - b. University Poster Support

- 3. Presentation of posters at Symposium
- 4. Presentation of Posters at State, Regional or National Conference
- 5. Publications
 - a. Selected ABNF Journal—Special student issue.
 - b. Repository—University A, Library

This 5-step model was developed after the grant administrator and thesis coordinator reviewed timelines and completed work each year to plan for dissemination. We outlined stages needed to arrive at the same end goal; which was dissemination each year in the spring.

Critical Processes: Timeline and Communications

Over the past 4 years, our Grant Administrator created even more detailed critical processes which include a timeline and written communications used to guide students toward dissemination success. The timeline and a discussion of selected communications are detailed here.

Critical Timeline

The timeline that we have used over the past 4 years include the following:

- After the first year, appointment of Graduate Symposium Committee.
 - a. This group includes all graduate faculty who have graduate programs within the university.
 - b. We set our date, time and place in the fall of each year.
 - c. Pivotal communications and organization of symposium by Leslie Jones
 - d. Announcements sent to students early spring
 - e. Abstract/proposal dates sent late February
 - f. Proposals and posters due late March
 - g. Posters due early April
 - h. Posters presented internally for practice dissemination April
 - i. Posters presented externally late April

Critical Communications

Many, if not all, communications were created by the grant administrator. Sample communications include:

- a. All masters grant participants are matched up with a faculty mentor and a letter is sent to both parties.
- b. A "conference call" appointment is set up for any students that are new to the symposium. All aspects of the research process are reviewed.
- c. A "Save the Date" announcement goes out campus wide.
- d. Call for proposals/abstracts is sent out campus wide and community wide, with a link to the application/submittal program.
- e. Postcards are emailed to surrounding colleges and universities, inviting them to participate in the event; mailed to members of the local Chamber of Commerce, inviting them to attend the event.
- f. Once abstracts are reviewed, individual letters are sent out to students that may include comments for revisions. Students can then begin to work on their posters.
- g. Students can access the poster template from the Graduate Research page and begin to design their posters.
- h. An email communication was sent to all presenters reminding them of the "poster printing cut-off date.

Student Success with Dissemination and Presentations

Over the course of the grant, presentations made by faculty and students in the department of nursing, as well as in mathematics, have increased greatly. In 2014, one to two nursing faculty and two to three senior faculty in mathematics, were presenting on a regional and national level. Seldom were students included in these presentations. In 2014, at the initial graduate research symposium 15 graduate nursing students and one mathematics education student presented their research. One of the nursing students went on to present their poster

at a regional nursing conference. One Mathematics student presented at a national conference with his faculty member. In addition, in that same year, two additional graduate mathematics education students, along with their faculty member, presented a poster at a national conference.

In 2015 the symposium, with involvement of the Graduate School, was opened to other colleges across the UA campus. Three faculty members and two Special Education graduate students completed podium presentations. Thirty students, including 13 graduate nursing students, presented posters. Ten graduate nursing students, along with a faculty mentor, attended and presented posters at a regional nursing conference. Two of those students later presented at a second regional conference. Two mathematics education students also presented that year, one at a state conference and one at a national conference.

In 2016, four faculty members made podium presentations and 63 students, several in teams, completed poster presentations. This group included 12 graduate nursing students. Nine of these nursing students went on to present, by poster and verbally, at a regional conference. Two mathematics education students did podium presentations.

In 2017, 59 students were scheduled to present posters at the symposium. Twenty-one of these students were graduate nursing students. While a tornado forced us to cancel the symposium, posters were later displayed in the University atrium for two days for viewing. One Mathematics Education student presented at a joint national conference. Five nursing students presented at a regional conference, and one nursing student also presented at a state conference and a national conference.

Currently, manuscripts containing content from eight nursing research projects, presented during previous symposia, have been accepted for publication in a nursing journal. This journal volume is scheduled to publish in late 2017. The next symposium is scheduled for spring, 2018 with intentions to continue offering the opportunity to apply to graduate students and faculty members regionally.

Summary

Program enhancement is a critical element of continuous program improvement. University A's master's enhancement grant program was determined to be a beneficial process for advancing students and faculty in the area of scholarship and thus dissemination of knowledge.

As students and faculty are provided opportunities to grow in skill and comfort in the area of presentation of scholarly content, these nursing professionals gained exposure experience by presenting to their newly completed research. The sharing of this dissemination model encourages other graduate programs in nursing and other disciplines to increase the extent to which graduate research is shared locally, regionally and nationally. Acknowledgements: We would like to thank the UA Masters Enhancement & Expansion Grant Program (U.S. Department of Education #P382G09011-13) and Brandon Walker, along with the following sustaining Graduate Research Symposium committee members; Dr. Devi Akella, Dr. Abraham Andero, Dr. Linda Amankwaa, Dr. Robert Dauphin, Dr. Louise Wrensford, Ms. Hattie Ford, and Ms. Leslie Jones for the support, dedication, and continued development towards the success of our graduate student research opportunities. All Faculty and Staff of Albany State University, Albany Georgia

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Members on the Move

Gloria McNeal, PhD, ACNS-BC, FAAN, was recently named a Well-Being Champion by the American Association of Retired Persons Public Policy Institute. Dr. McNeal was selected as part of an elite group of 10 leaders who are cultivating a culture of health in the transformation of her community. Dr. McNeal's work currently focuses on improving access to care for residents of the underserved communities of Watts, Inglewood and Compton in Los Angeles County. Dr. McNeal serves as Project Director of the National University Nurse Managed Clinic, which is a HRSA-funded virtual nurse-led initiative that has delivered primary care services to over 600 patients in its three years of operation. Students and faculty in eight (8) different disciplines participate in this interprofessional collaborative practice model. Telehealth technologies are used by the clinic team to monitor biometric data remotely. Dr. McNeal's work was also showcased in a recent issue of the University of Pennsylvania School of Nursing Magazine.

LaDonna K. Northington, DND, RN, BC was recently elected as president elect for the Society of Pediatric Nurses (SPN). The SPN is the pediatric nursing organization for pediatric nurses. The mission of the Society of Pediatric Nurses is to advance the specialty of pediatric nursing through excellence in education, research and practice. Dr. Northington has been participating in the organization since 1991, holding various positions including membership on the Clinical Practice Committee, Chair of the Clinical Practice Committee. She served 4 years as a member of the Board of Directors and is currently serving as the Newsletter Editor. Her term as president elect is 2019-2020 and will assume the role as President from 2020 - 2022.

Kathleen Parker, PhD, APRN-CNP is the current VP of ABNF. She Works as Health Promotion Disease Prevention Program Manager and Veterans Education Coordination at the Oklahoma City VAHCC. Dr. Parker served as the Chief Nurse Ambulatory Care (detailed) for the past FY and supported the activation of new VA clinics and expansion of telehealth in primary care during that time to improve access to care for Veterans. She serves as the Champion for APRNs and with the implementation of full practice authority (FPA) federally, implemented the changes and drafted the local performance standards and privileging documents. Nationally, Dr. Parker serves as Chair of the VHA Office of Nursing Services (ONS) Evidenced Based Practice Field Advisory Council and as a part of the national consultation team, providing leadership and guidance in EBP implementation across the VA health care system. Currently Dr. Parker is working on funding towards establishing two local VA APRN residency programs.

P. Renee Williams, PhD, RN, CCE, Professor and Director of Continuing Nursing Education at the University of Mississippi Medical Center School of Nursing (SON), received notice that the SON was awarded reaccreditation for another 3 years as an Approved Provider by the Mississippi Nurses Foundation, an accredited approver by the American Nurses Credentialing Center. Additionally, Dr. Williams was appointed by the ANCC to serve as a National Appraiser for the Joint Accreditation for Interprofessional Continuing Education. This organization provides the opportunity for organizations to be simultaneously accredited to provide medical, nursing, and pharmacy continuing education through a single, unified application process, fee structure, and set of accreditation standards as Healthcare Teams.

Barbara Washington, Ed.S, MSN, RN BC (Retired) was recently appointed as the chair for the Association of Black Nursing Faculty Foundation. As a lifelong learner, Barbara was a nursing education leaders of the greater Metropolitan Chicago area. She has been an active member, serving in various capacities, for ABNF for over 20 years. Most recently her volunteerism to the organization was past treasurer and she currently serves on the Board of Directors. Her community service involvement exemplifies the mission of ABNF, Inc.

The Association of Black Nursing Faculty, Inc.



Membership Benefits

Membership provides access to:

- A quarterly journal focused on the outcomes of minority health consumers
- A semi-annual newsletter focused on member activities and upcoming events
- A membership directory
- Research and education mentors
- Networking opportunities
- Continuing education activities on research and education topics
- Research and dissertation grants
- Undergraduate and graduate student scholarships
- National and international conference presentation opportunities
- A collective dialogue in the development and implementation of public policy statements impacting healthcare
- A cohesive voice when responding to issues that affect nurses and nursing education
- Health-related issues and educational interests that benefit vulnerable community

Want to become a part of the Association of Black Nursing Faculty?

Visit us at www.abnf.net
Contact us by email at abnf.secretary@gmail.com

Call for Manuscripts - The ABNF Journal

Call for Manuscripts

The ABNF Journal, the official journal of the Association of Black Nursing Faculty, Inc. (ABNF) invites members and others to submit papers, ideas, experiences. case studies and book reviews. Send query letters or manuscripts to: abnf.manuscripts@gmail.com

EDITORIAL OBJECTIVES

The purpose of *The ABNF Journal is* to: (a) serve as a vehicle for publication of original research. and other health related manuscripts, materials and reviews written by minority and non-minority nursing faculty members in higher education; (b) communicate these research and other findings to the membership of *ABNF* and interested others; (c) serve as a linchpin for Black nursing faculty members with similar research interests; and (d) aid Black nursing faculty members in keeping current on research related to Black health care issues long neglected by other nursing publications.

EDITORIAL PROCEDURE

The ABNF Journal is published quarterly. Submission of manuscripts and other materials will be peer reviewed by at least three members of the Editorial Review Board.

When submitting manuscripts and other materials with multiple authors, please indicate the primary author who will receive all correspondence. In compliance with the Copyright Revision Act of 1976, query and Transmittal letters accompanying materials should contain the following statement: In consideration of *The ABNF Journal's* reviewing and editing my submission, the author(s) undersigned transfers, assigns and otherwise conveys all copyright

ownership to Tucker Publications, Inc., in the event that such work is published in *The ABNF Journal*.

When submitting materials, please indicate whether the materials were prepared while the authors(s) were employed by the U.S. government. Accepted manuscripts become the property of Tucker Publications, Inc. Although not required, query letters are welcomed. Manuscripts should be submitted as a Microsoft Word document to the Editor at abnf.manuscripts@gmail.com

MANUSCRIPT FORM

Manuscripts should be typed or printed in standard manuscript form as outlined in the latest edition of the American Psychological Association Publication Manual, e.g., doublespaced; 1-1/2 inch margins. Abbreviations should be spelled out the first time they are used. Separate pages should be used for the title page, the author(s) biographical sketch(es), the abstract with the key words, acknowledgment, references, tables and figures, typed one to a page, with legends. The title page contains the title of the manuscript, which should be short, and the name and address of the author(s), which should appear nowhere else on the manuscript. Upon acceptance of your work, all authors and co-authors will be requested to sign a release form.

Call for Manuscripts - The ABNF Journal (cont.)

A few important notes about your manuscript:

- 1. The **abstract** should never exceed 100-150 words
- 2. Up to five **index words** should be listed on the key words page following the abstract.
- 3. Each page should be **numbered consecutively,** beginning with the title page.
- 4. The body of the manuscript **should not exceed 14 pages** (3500 words).
- Please DO NOT utilize hard returns at the end of each line - allow the word processor to perform default word/line wrapping.
- 6. At the beginning of each paragraph, please use a preset TABBED INDENT (vs. spaces).
- 7. **Italicize references** in your reference lists and **do not underline.**
- 8. Ensure that only the title page contains any reference to the author(s)
- 9. All research studies must include a statement related to IRB approval.
- 10. Do not include tables within the body of the text. Place each table on a separate age at the end of the document.
- 11. Letters of consent for publication of patient photographs must accompany

- the manuscript if patient identification is possible. Parental consent or consent of legal guardian must be obtained to permit publication of a photograph of a minor.
- 12. Illustrations, pictures, photos, tables, graphs, maps, schematic diagrams, charts, artwork, conceptual models or quotations must be fully identified as to author and source. If text material totaling 200 words or more is borrowed verbatim or if illustrations, tables, etc. are borrowed, written permission must be obtained from both the publisher and author. Letters granting this permission should be forwarded with the manuscript.
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- 14. Letters to the editor are published at the Editor's discretion and should follow the guidelines for manuscript preparation.

 A transmittal letter containing copyright assignment should accompany the letter to the editor.

MANUSCRIPT SUBMISSION

Please email the original manuscript as a Microsoft Word document to abnf.manuscripts@gmail.com

Hardcopies of your manuscript will not be accepted.

Join us for Association of Black Nursing Faculty, Inc's 32nd Annual Meeting & Scientific Conference in Chicago, Illinois June 5-8, 2019



Call for abstracts

If you have cutting edge research you would like share and present at our 32nd Annual Meeting and Scientific Conference, please visit our website at www.abnf.net for abstract information.

The deadline for abstract submissions is March 01, 2019

ASSOCIATION OF BLACK NURSING FACULTY, INC

Membership Application/Renewal Form and Dues Statement

New Member Recruitment begins November 1st Membership Renewal is effective January 1^{st} – December 31^{st}

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