

NEWS BRIEFS



**María Cora, MA, UCSF HCGNE
Project Director**

The Hartford Center enthusiastically welcomes María Cora as the new Project Director. María also serves as the Associate Director of the Lesbian Health & Research Center, a joint program of the UCSF SOM and SON. Her experiences include work as Program Coordinator for the UCSF National Center of Excellence in Women's Health and as Program Director for the Aqua Foundation for Women. During her time as the Coordinator of the Office of Women's Health at the San Francisco Department of Public Health, María designed the SFDPH strategic plan for women's healthcare for 2003-2006. As a community activist, she devotes her energy to the pursuit of social justice and the promotion of cultural competency. She is also a gifted filmmaker and the lead vocalist of the Latin jazz women's ensemble Azúcar Con Aché. María has a BA from Harvard University and a MA in Ethnic Studies from San Francisco State University.

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UCSF/John A. Hartford Center of Geriatric Nursing Excellence

Educating Nursing Leaders to Care for Our Elders



Director's Reflections



Meg Wallhagen, PhD, GNP-BC, AGSF, FAAN

Spring brought lots of rain so we are surrounded by newness and renewal, and it is in this context that I would like to share some exciting changes that have taken place in the Center. María Cora joined the Center as our new Project Director. María brings many talents to this role and we are extremely thankful to have her as a core member of our team. In addition to María, Dr. Heather Leutwyler, who graduated last year after completing her doctorate in three years as a Betty Irene Moore Fellow, joined our faculty as an Assistant Professor. Heather brings a fresh perspective and much energy to the Gerontological faculty and has quickly started to build her scientific career which focuses on promoting the health and well-being of persons with serious mental health conditions. Heather is serious about health promotion; she recently ran the Boston marathon with her husband – so she's not all work!

On a more serious note, the care of older persons faces enormous challenges in these difficult fiscal times. These challenges highlight the critical importance

of the Center's core mission, expanding the numbers of nurses with expertise in issues faced by all of us as we get older or experience any form of chronic illness, to the future of health care and healthy aging. The stories within this newsletter demonstrate how our students, graduates, and faculty are addressing key health issues. Findings from these various studies and perspectives can help shape practice as the changes initiated by the health care reform are implemented.

I am especially interested in this interface between research and practice, an interest that has grown during this past year during which I have had the honor of being a 2009-2010 Atlantic Philanthropies Non-Residential Health and Aging Policy Fellow. This program offers a unique opportunity for professionals with a background in health and aging to receive the experience and skills necessary to make a positive contribution to the development and implementation of health policies that affect older Americans. The experience has already significantly broadened my understanding, not only of the legislative processes and context, but also of the importance of the work that we do and the importance of sharing this knowledge with those specifically involved in developing health policies.

At the same time, we can't do this alone. We would value your input and suggestions as we continue to work to gain support for our students during a time of limited resources. Please feel free to contact me or María and to give us feedback on the Center and the newsletter as well as the stories shared. This is our Center and we strive to undertake programs that support the education and growth of the students. Your insights are welcome. In addition, if you are interested in hearing about our Scholarship or Center Sustaining Funds, or other Center support opportunities, please let us know. We are always delighted to receive donations.

LEADERSHIP

Hartford Center Hosts UCLA SON Dean



Dr. Courtney Lyder, ND, GNP, FAAN

The Hartford Center hosted Dr. Courtney Lyder, the Dean of the UCLA School of Nursing for a two-day visit on February 16-17, 2010. Dr. Lyder spoke eloquently about his career development and life experiences as the featured guest speaker at the Hartford Center Winter Leadership Dinner. During his visit he also held individual meetings with UCSF SON Dean Kathy Dracup, members of the UCSF faculty and SON students.

Dr. Lyder's achievements stand as exemplary models of tenacity, 'outside the box' thinking, leadership and scholarly success. He was the first minority to earn tenure at Yale's School of Nursing and the second youngest member inducted into the American Academy of Nursing. As Dean of the UCLA SON, he is the first African American male to lead a U.S. nursing school, and one of fewer than 3% of U.S. deans under age 45.

Dean Lyder, ND, GNP, FAAN, also serves as a professor at the UCLA SON and as the Assistant Director of the Ronald Reagan UCLA Health System. He is a respected researcher in patient safety and geriatric nursing and a leading advocate for healthcare diversity. In the past 17 years, Lyder has received as a principal investigator or co-investigator nearly \$12 million in research and training grants related to the healthcare needs of older adults. He has published more than 165 books, book chapters, articles and abstracts, and presented more than 500 lectures throughout the U.S. and abroad.



<http://nurseweb.ucsf.edu/www/hcgne.htm>

DONORS January 2007- May 2010

The Hartford Center Directors, Gerontological Nursing students and faculty extend their sincere appreciation to our donors for their recent generous contributions to the **Jeanie Schmit Kayser-Jones Scholarship Fund** and to the **Center Sustaining Fund**. This private support is essential in helping sustain the Center and foster the professional development of its students.

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The Center is also deeply grateful for the ongoing support of:
The John A. Hartford Foundation
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Community Impact:
Patrice Villars, RN, MS, GNP,
ACHPN and the SFVA Palliative
Care Program

I am a Gerontological Nurse Practitioner UCSF graduate with a strong background as a community hospice nurse. My expertise is in the areas of care of the elderly and of people at the end of life. I think differently when I approach patients and families who are facing a life-threatening illness. I think pathophysiologically, I think in terms of differential diagnosis, I think about the unique physiology and develop-

mental place that elderly people and their families are in. I am involved exclusively with palliative care service as the nurse practitioner representative for consult services in the San Francisco Veteran's Administration hospital and in our Community Living Center, or CLC, which is the name for our nursing home. I am the hospice coordinator for our 10-bed designated unit in our CLC and, together with our interdisciplinary team, do a lot of teaching for nurses, nurse practitioners, physicians, social workers and other disciplines that rotate through our service. I have a strong relationship with the UCSF gerontological nursing program. As an Assistant Clinical Professor at the UCSF School of Nursing, I'm a guest speaker for the geriatric advanced practice nurses when they are in their academic setting as well as a speaker in the end of life course that's offered through the Department of Physiological Nursing.

In my role as a preceptor, I guide students and supplement their academic learning in a clinical setting. I get to learn from my students, who are wonderful and fresh, and bring to me

all of the most current information out there. I get to experience their growth and their learning, and support them in that. It gives me great pleasure to understand their interest, their enthusiasm and their background, and to move them into a deeper broader place of understanding the elderly and end of life care.

With the veterans, mostly I feel we support them where they are in their disease process, allowing them to know that somebody is with them. We are here to provide physical and psychosocial comfort, to provide them often with housing, and to provide an institution where they feel safe and cared for. I think that I am the type of preceptor that helps people think in a different way than a more traditional nursing or medical model. I think I teach them about listening, about interdisciplinary work, working with teams, I teach them how to work with a veteran, what it means to be a veteran, what it means to work with people who do or don't have a family or support system, to look at people holistically and respectfully.

Hartford Center Scholarship Awards for Fall 2009

The UCSF/Hartford Center of Geriatric Nursing Excellence offers biannual Student Scholarship awards designed to assist graduate students with a documented need who evidence a commitment to the care of older adults.

These awards are possible due to the generosity of the John A. Hartford Foundation and the William Randolph Hearst Foundation.

The following photos accompanied by statements by the Fall 2009 scholarship award winners serves as brief introductions to these accomplished future leaders in the field of gerontological nursing.



Voranan Lukploy Pongquan,
BA, MPH.

Inspired by my loving grandmother, my goal is to become a future GNP and work alongside patients to empower and change health outcomes. I want to provide comprehensive direct patient care in a manner that reflects cultural understanding, while also maintaining health promotion. I will play a key role in reducing health disparities among the underserved

population and continue to research culturally-appropriate interventions to create beneficial health outcomes for the elderly.



Allison Reilly, BA, BSN

I am in the second year of the Gerontological MS program, nurse practitioner track. My clinical interest is in the care of frail older adults with Alzheimer disease and other dementias. In particular, I am interested in strategies to help families reduce the stressful effects of dementia on family life. For the comprehensive exam, I will review the literature regarding the use of analgesic pharmaceuticals and nonpharmacologic interventions to address the assessment and management of multiple pain problems in non-verbal older adults with dementia.

CONGRATULATIONS to UCSF SON scholar **Caroline Stephens, PhD, MSN, APRN, BC on her selection as a **2010-2012 Claire M. Fagin Fellow in Academic Geriatric Nursing.****

As a postdoctoral Fellow, she will receive \$120,000 to support advanced research training, mentorship, leadership and career development.



Karen Schreier, BA, BSN

I am a second year student in the Gerontological NP Program. I am focusing my study on geropsychiatric issues such as dementia and depression. My long-term goal is to contribute to the growing body of evidence based nursing research through interdisciplinary efforts focused on symptom management and disease detection in older adults.

Change Agent Program Selects UCSF SON Graduate

One of our Gerontological Clinical Nurse Specialist graduates, Karen Sheng, has been selected by the Gordon and Betty Irene Moore Foundation to join the second Cohort of their Change Agent Program that is administered by the Center for the Health Professions here at the University of California, San Francisco. Launched in 2009, the program is inter-disciplinary and is designed to develop and support emerging hospital leaders in all departments, particularly individuals with a passion and vision for change. The overall goal is to measurably improve quality and safety in Bay Area Hospitals by equipping participants with the leadership and management skills needed to effect and sustain positive change – regardless of their position within a hospital. Over the next 12 months, participants will attend 5 seminars, which cover project management, strategy development, and communication. They will also be asked to apply their new skills by developing two patient improvement projects in their own hospitals.

IN THEIR OWN WORDS-PART 1



Ab Brody, RN, PhD GNP-BC

Geriatric Palliative Care: Matching Treatment with Patient Goals

As a geriatric nurse practitioner providing primary and palliative care to a cognitively impaired population, I am constantly required to read subtle signals or rely on the report of unskilled caregivers or family members in order to understand how a patient feels, any pathology they might have, and what the goals of care are. As a provider, my goal is to ensure the best care for the patient and to provide “patient centered” care. However, when the patient can’t share or determine their own needs, the burden of how to craft a care plan falls to the provider and the family, not the patient.

Those of us who work in this area often times hear from family that their loved one “wouldn’t want to live like this,” and we are forced to ask what “like this” means. If we are ensuring a patient is comfortable, doesn’t have any anxiety or paranoia, even without having full cognitive capacity, would they be content? Or would the patient not be content regardless once they have lost cognitive capacity? If not, what does that mean for how we provide care to the patient? Thus our profession spends a great deal of time deciphering what a patient would want, then enacting a plan of care that meets the patient’s goals of care and current needs.

I detail this process extensively to show the true power of the geriatric palliative care clinician, to “match treatment with patient goals,” as recently stated by Dr. Diane Meier a pioneer in the field. Often palliative medicine physicians are referred to as doctors of death and hospice nurses as angels of death. This has even trickled

into the mainstream where our field has had its reputation shattered by political assertions of “death panels.”

In reality, what we do is take the time to sit down with patients and family and ensure that their needs are met. Unfortunately today’s primary care providers and hospitalists often do not have the time to direct care and ensure patients and families are informed and understand their options and available treatments. Therefore as palliative care clinicians we become the purveyors of information that allows for truly informed decisions making. This enables us to help patients live fuller richer remainders of their lives through matching their treatment with their goals, managing their symptoms, and providing compassionate care (and we decrease costs too)!

Over the next ten years, as the baby boom generation ages, the need for geriatric palliative care will become even greater, and thus the UCSF Hartford Center of Geriatric Nursing Excellence (HCGNE), its students, and faculty have increased our focus in palliative care. However, with a negative image, funding in this area will become more difficult. Therefore, the next time you hear of death panels, Dr. Death, or angel of mercy from a family member, friend or colleague, I urge you to counter with what palliative care is and why it is so important for the future of our aging population.

A UCSF SON Post Doctoral Student Perspective-Dr. Robert Pope

The University of California San Francisco/Hartford Center for Geriatric Nursing Excellence (UCSF/HCGNE) was an essential component in the development of my academic career and my program of research. As a 2009 UCSF graduate, I look back at all of the Leadership Development events and the many conferences I attended with appreciation for the support and guidance afforded me by the HCGNE. The John A. Hartford Foundation (JAHF) is a recognized “industry leader” developing health care leaders in Geronto

logy and Geriatrics and its aca-



Robert Pope, RN, MSN, PhD

demical awards afford its scholars with instant recognition. I know, I was a 2004-2006 pre-doctoral scholar in the JAHF Building Academic Geriatric Nursing Capacity (BAGNC) program.

Throughout the Doctoral program at UCSF, students encounter “tipping points” where decisions are made that influence the direction the scholar will take and the support of the UCSF/HCGNE helped me keep these tipping points in perspective. There were times I felt that the focus of my research was too difficult to pursue, but was always given the needed emotional support and encouragement from my academic advisor, Dr. Margaret Wallhagen, to stay the course. With limited personal financial resources, the end of the two year BAGNC financial support presented new challenges.

It was at a weekly meeting, offered in support of HCGNE students, that I was approached by a JAHF Claire Fagin Post-doctoral scholar, Dr. Ann Mayo, regarding an opportunity she felt I should pursue. Ann encouraged me to submit an application for the American Nurse Association/Substance Abuse and Mental Health Association’s Minority Fellowship Program (ANA/SAMHSA MFP). I submitted my application, but was not at all confident that it would have a positive outcome for me. At about the same time, an abstract submitted along with Dr. Wallhagen and Monika Eckfield was accepted for presentation at the International Council of Nurses held that year in Yokohama, Japan. This was a project developed by Dr.

IN THEIR OWN WORDS-PART 2



Monika Eckfield, RN, MSN, PhD
Candidate

Peer support and Faculty Mentoring Results in Community Involvement and Impact.

As a doctoral student in the School of Nursing at UCSF, I have benefitted greatly from my participation in the Hartford Center of Gerontological Nursing Excellence (HCGNE). In particular, I am grateful to my fellow students and faculty mentors who have encouraged me to translate my research interests into actions that have already begun to have a positive impact on the lives of older adults.

The focus of my research is on older adults with hoarding and cluttering behaviors. Over the past few years these behaviors have received much greater attention from the public media in the forms of documentaries, talk shows and “reality” TV shows, newspaper and magazine articles, and websites. However, research on these behaviors, particularly on older adults who may be dealing with a host of other age-related health and social changes, has been slim. To address this research gap, I have conducted a qualitative study with 22 adults between the ages of 65-91 who live in extremely cluttered homes in the San Francisco Bay Area. To my knowledge, this is the first study of its kind that has directly asked older adults to share their insights on factors that lead to the behaviors, how the behaviors have changed over time, how aging affects living in a severely cluttered home, and how health and social service

providers might best assist them when they are ready to make changes to their home environments.

Throughout each stage of the research process, I have received support and guidance from my peers and faculty mentors in the HCGNE. For example, as I developed interview questions for the study, my fellow gerontological nursing students weighed in with suggestions for topics that I hadn’t considered. They also gave me ideas about how to design a recruitment strategy that would target individuals from a broad range of cultural and socioeconomic backgrounds. Discussing these points with a group of peers who are also immersed in aging issues really helped me craft my research plan.

Faculty mentors like Dr. Carroll Estes and Dr. Meg Wallhagen encouraged me to seek out individuals and organizations in the community and throughout the country who were interested in hoarding and cluttering issues. This led me to become involved in the Mental Health Association of San Francisco’s Annual Conference on Hoarding and Cluttering, the Institute on Aging’s 2008 and 2010 educational programs on Compulsive Hoarding in Older Adults, and the San Francisco Task Force on Compulsive Hoarding. Also, because of the support of the Hartford Foundation, the HCGNE, and other scholarships and grants, I have been able to travel to conferences across the country to meet leading researchers in hoarding behaviors from Smith College, Boston University, and UC San Diego, as well as collaborate with gerontological colleagues from NYU, Oregon Health Sciences University, UCLA and other leading centers of geriatric nursing research.

I am grateful for the support and encouragement I have received as a part of the UCSF/HCGNE. Because of the center, students and faculty have a place where they can channel the energy and enthusiasm we all share for studying aging issues and improving health care for older adults. As a result of this, I have already been able to make an impact on improving care for older adults in our community.



So Young Shin, MS, RN, GCNS-BC, PhD
Student

The Contribution of the HCGNE for Patients and Nurses.

Gerontological nursing is a very special and broad field, which includes adult health, community health, family health, health education, and health promotion for older adults, family, and caregivers. It allows nurses to work in diverse health care settings and systems, with both the healthy and the sick. In collaboration with other health care professionals, gerontological nurses provide health care emphasizing health prevention, health maintenance, and health promotion.

During my clinical practice, I felt that there were considerable limitations in implementing nursing interventions based on current theoretical knowledge and scientific research. I realized that narrowing the gap between theoretical knowledge and clinical practice is an imperative task for nursing researchers to achieve reliable rationale in providing evidence-based nursing care and developing effective interventions to improve the quality of health care. Therefore, I decided to pursue a nursing PhD program to be able to perform practical and useful research for both patients and nurses. One of the reasons I chose to study at UCSF was because it had been designated a Hartford Center of Geriatric Nursing Excellence (HCGNE).

When I first encountered the HCGNE, I was so impressed by how the HCGNE has contributed to gerontological nursing and the overall health of older adults. The HCGNE provides

The Contribution continues on 8

FACULTY NEWS



Janine Cataldo, RN, PhD was recently invited to be on Core Scientific Planning Committee for the 2011 International Association of the Study of Lung Cancer World Conference. She served as Chair for a Control Session and Discussant for Abstracts for the Posters on Lung Cancer Survival during the 13th World Conference on Lung Cancer convened by the International Association for the Study of Lung Cancer in San Francisco from July 31-August 4, 2009.

Dr. Cataldo also was invited to be a consultant for WHO Ageing and Health Meeting held in Geneva Switzerland and was selected to be a NINR P30 Faculty Scholar. She received a Research Award for Junior Investigators from Clinical and Translational Sciences Center and the American Cancer Society Institutional Research Award for New Investigators.

During the past year Glenna Dowling, PhD, RN, FAAN, HCGNE Associate Director chaired the Search Committee for the Chair of Family Health Care Nursing, was selected to be a member on the School of Nursing Dean Search Committee, was appointed by Chancellor Desmond-Hellman to serve on the Chancellor's Advisory Committee on the Status of Women and was invited to serve on the National Advisory Council for Nursing Research, National Institutes of Health. In March 2010 Dr. Dowling completed her three-year term as a member on the Board of Directors for the American Association of Neuroscience Nursing.



Dr. Dowling also attended the XIXth Congress of Gerontology and Geriatrics in Paris where she presented a poster "Rest-Activity in Patients with Frontotemporal Lobar Degeneration (FTLD). This past January she made a presentation entitled "Healthy Sleep Tips" at Smith Ranch Homes as part of an outreach to retirement homes in the Bay Area. She also received, in partnership with Red Hill Studios, two grants totaling \$1.1 million from the National Institutes of Health to continue development, production and testing of computer-based physical therapy games for patients with Parkinson's disease and cerebral palsy. The grants are part of the American Recovery and Reinvestment Act of 2009.



Heather Leutwyler, RN, PhD has been selected by the Clinical and Translational Science Institute Career Development Program (CTSI KL2) to receive a KL2 Scholar award, effective

July 1, 2010. Scholars receive 4-5 years of salary support, 75% protected time to pursue multidisciplinary clinical research with training and mentoring, the opportunity to obtain a master's degree in clinical research and a small start-up research fund.



Nancy Donaldson, RN, DNSc, FAAN is one of seven new members that have been appointed by Department of Health and Human Services Secretary Kathleen Sebelius to the National Advisory Council for the Agency for Healthcare Research and Quality (AHRQ). The council provides advice and recommendations to the Secretary and the director of the agency on priorities for a national health services research agenda. The council consists of 21 members from the private sector and seven ex-officio members from other federal health agencies. To learn more about the council, go to <http://www.ahrq.gov/about/council.htm>

Meg Wallhagen, PhD, GNP-BC, AGSE, FAAN was elected this Spring to serve on the Board of Directors for both the American Geriatrics Society and the Hearing Loss Association of America. She also was invited to participate in an international discussion on hearing loss and communication partners held in February in Denmark by the Ida Institute.

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Dr. Margaret Wallhagen, *Director*
Dr. Janine Cataldo, *Associate Director*
Dr. Glenna Dowling, *Associate Director*
Dr. Heather Leutwyler, *Associate Director*
Dr. Nancy Stotts, *Associate Director*
Maria Cora, MA, *Project Director*

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scholarships and other diverse opportunities for nurses and nursing students to have professional knowledge, experience, and skills as experts in gerontological health care for the elderly. The HCGNE also supports nursing researchers: (a) to discover scientific information and develop effective interventions for older patients by conducting high-quality clinical trials, and (b) to establish practical guidelines for nurses based on the findings of the studies which could be directly applied in clinical settings. The Try This Series and The How to Try this Series from the Hartford Institute for Geriatric Nursing at New York University are good examples of researchers and nurses attempting to apply theoretical knowledge into clinical practice, and contributing to health promotion for older adults suffering from multiple chronic diseases.

Especially as an international student, I have often been frustrated due to many restrictions when looking for financial resources and academic opportunities. International students cannot apply for most scholarships, internships, and other learning experiences. However, I have found opportunities to be able to learn and grow as a nursing researcher in the HCGNE at UCSF. Through the HCGNE, I am able to share knowledge and experiences with colleagues, participate in experts' presentations, and apply for some scholarships. I believe that these generous contributions of the HCGNE can help all nursing students, regardless of their nationality, to expand scientific knowledge and professional knowledge, and eventually, to be able to contribute to improving health and life quality for older adults.

Dr. Robert Pope from page 5

Wallhagen to give her mentees international posure and she and I traveled to Yokohama to present our research findings.

Participating in the ICN had an unexpected benefit. Two members of the selection committee at the ANA/SAMHSA MFP were in attendance at this conference and I had an opportunity to interact with them. Shortly thereafter, I was accepted into the Minority Fellowship program and given support throughout my remaining time at UCSF. The support of the ANA/SAMHSA MFP continues in the form of a post doctoral award here at UCSF/HCGNE. Additionally, through my advocacy of care for an underserved population I was recently selected to serve on the Board of Directors at Mental Health America.

The support and guidance of the UCSF/HCGNE allowed me the time I needed to develop a program of research, afforded me opportunities to network with senior researchers in my area of interest, and gave me a respected springboard from which to launch an academic career. I am convinced that the good fortune I am experiencing today is an outcome of my affiliation with the UCSF/HCGNE. Simply stated, the UCSF/HCGNE helped make an impossible dream, a reality.