

KENNESAW STATE UNIVERSITY ORAL HISTORY PROJECT

INTERVIEW WITH L. ANNETTE BAIRAN

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Friday, 10 September 2004
Location: Bentley Rare Book Gallery, Kennesaw State University

DY: Where in the world do we want to start: your illustrious career at Kennesaw or your wonderful life? I've known you for so long, and it's been wonderful. I guess we could go back to your own beginnings, Annette, and where you've been so successful. You're a wonderful teacher; you're a scholar; you're all of those things. What do you think you got from your home, your family, your parents? What got you where you are?

AB: Gosh, see I knew you would ask me a hard question. No, I'm sure it came from my family, and I remember now a retreat, one of those early ones when Dr. Siegel would go. I don't know if you were at the one or not, but she asked us in some little session, a few of us together, she said, "Now, what do you value the most of everything?" And of course, I said, "Family, family." I remember I was talking about that. Anyway, everything sort of runs together for me, and I don't know whether it's because I'm a generalist as far as history is concerned, or because I always seem to see the big picture. My sisters can quote incidents, and I can't remember all of them. All I know is, I have a great feeling about my childhood, a positive feeling but I don't have a lot of events, my historical record is not there.

DY: Well, memory is selective of course.

AB: Selective, right.

DY: And the fact that you've also gone on, and your work has been with family.

AB: Well, true, family and community health.

DY: You must have been born about '35?

AB: I was born in '35 in the country, the red hills of southwest Georgia. Which reminds me, I'm not saying my mother and daddy didn't help to imbue whatever I have in me, but they had to work. And my grandmother kept me out in the country, and we had a tin roof house. I remember that, even when it rains today. I have these warm thoughts because she would just rock me in the chair, and I would hear that rain on the roof.

TS: We've reviewed several books and short stories from southwest Georgia. Which county are you from?

AB: Quitman, which is tiny, I think of Jimmy Carter; he's not far from there. We used to ride up to Plains; the bus took us there for basketball games. Of course, Jimmy is a little older than I am. I didn't know him personally, but the county I live in-- it's in his book. Should I not talk about this?

TS: No, actually we've used *An Hour before Daylight* in our class and also *Turning Point* I've used before.

AB: Oh, I can't remember now which one I read, but anyway, in his political history, Quitman County fits in a lot because of Joe Hurst. I don't know if you remember that . . .

TS: This is *Turning Point*.

AB: That's the one I read then. I started to say that Joe Hurst was seen as a crooked politician, but . . .

TS: Well, that's Carter's take.

AB: Well, I mean they had dead people voting and all that kind of stuff, so that's in Carter's history, and that's where I was. Right there.

TS: Gerontology in action.

AB: Right. So I've not met him; I haven't even been there. I need to go up there and see him.

DY: Did you know I lived in Dougherty County part of my life?

AB: No, that's Albany, isn't it?

DY: Albany. Pecans, yes, so I'm very familiar with that area.

AB: Yes, so we're due west on 82, right by the river.

TS: So you're growing up really is what Carter was describing in *An Hour before Daylight* because he covers the '30's and the '40s.

AB: Is it? I need to read it.

DY: You'd enjoy it.

AB: But his history is similar to mine in terms of growing up in that southwest [area] and seeing the segregation and all the abuses. So anyway, I didn't answer your question but . . .

DY: Wow, that's a wonderful image of your grandmother rocking you and hearing that rain on the roof. You know, the kind of nursing you got sounds like to me what

you wanted to give back to the world, you know, in what little piece of it you could here at Kennesaw.

AB: Well, my mother, again, they worked, but they were honest and hard-working, and my daddy worked in the cotton mills and my mother in the sock mill. And then he had a mental breakdown as they called it, schizophrenia, and he had to quit work. It saved his life because the cotton that's in the air from those—

DY: Right. Lint lung?

AB: Yes, he probably would have died from emphysema or whatever.

DY: Where did you go to school?

AB: Well, it was a little tiny school there that's now closed. It was a small county, very small. Georgetown High School. In fact, it finally burned.

TS: What was it?

AB: Georgetown.

TS: Georgetown is the county seat.

AB: Yes, the county seat. How did you remember?

TS: I've been there before.

AB: What were you doing there?

TS: Something—Kathy used to travel through all the counties of Georgia with the judicial council, so we've been in Georgetown before.

DY: He knows every county and every county seat.

AB: 159, isn't it? Good Lord. Okay, but anyway.

DY: So you came to Crawford Long.

AB: Well, yes, everything—you're going to hate me on this history—but it sort of seems like my life is by default. [laughter]

DY: Mine too! Mine too. It's not like you had this master plan. This came along and you turned here and you turned here.

AB: I did.

DY: Well, look at what it's given us; look at your gerontology.

AB: Yes.

DY: So you went to nursing school is what you did.

AB: Yes, if you want me to back up in terms of why I was saying that, we were poor, and I wanted to go to... Like for instance, Emory, a college, and maybe even medical school. But in those days, if you were female, you didn't even dare dream of something like being a physician. I mean, you were either a telephone operator, a secretary or . . .

DY: A teacher.

AB: Well, see, we didn't have the money for college, so that wasn't an option in those days, at least not for me, I mean. We didn't even have any people to help us get funds. So the option was, if you wanted to pursue something other than telephone operator, secretary, et cetera, with nursing, you could work your way through school at that time. In other words, I think Georgia Baptist had the same. There was Grady and Georgia Baptist, Crawford Long Now, Emory was the expensive one because it was a college, and I forgot how many thousands it cost, which was like millions to us. Anyway, I chose Crawford Long Hospital because my cousin had a relative that worked there. We got into Crawford Long, and at that time, the total cost for three years—I think we didn't even have a week off during the year—was \$250.00. But see, we worked. We sustained the hospital.

DY: That's the way you paid your tuition.

AB: We worked eight hours, six days a week. I got into nursing by default. I enjoyed it tremendously and finished that diploma program. We got six months at Georgia State for the basic courses. If you ask me why I got into education, I think maybe this is where I should have been anyway, but I loved nursing too. You see, everything I get into, I love.

DY: Are you still practicing?

AB: Well, I have to stay certified as a family nurse practitioner, and it takes time to do that. Most nurse practitioners who are also educators, have a hard time managing their work load because of all we have to do in terms of teaching, scholarship, and service. So most of them practice a half-day or more a week. I do my half-day on Monday at the clinic here on campus. Although, I used to practice at the MUST [Ministries United for Service and Training] Clinic.

DY: Where is their clinic, Annette?

AB: The MUST Ministries? It's off of Highway 41, 41 and Canton Highway. It's in the back. It's been there for years, and it's expanding too.

DY: I've worked in the kitchen there and didn't even know there was a clinic there.

AB: Really? Let's see, we've had it, I don't remember, early '90's. But it was at another site before when MUST was on Church Street Extension, remember?

TS: At the Elizabeth Methodist Church over to the four lanes.

AB: Yes, yes. And the College has not only that clinic, but two more--St. Stevens, and another one.

TS: St. Stevens on Roswell Street.

AB: Yes. Our students help to staff it; Troy Spicer directed it first. He was on our faculty. We've had graduate students to precept there, and then the undergraduate students volunteer to help along with other nurses. It's really a great community focus. I mean, I could talk forever about it.

TS: Well, you were talking about you got a certificate in nursing from Crawford Long?

AB: They call it a diploma.

TS: Diploma, excuse me.

AB: They call it a diploma program.

TS: A diploma program that led to what degree?

AB: No degree.

TS: No degree.

AB: Then you could qualify to be registered with the state, which is an RN, Registered Nurse.

TS: Right. Yours truly had to take a test after you got through to do this?

AB: Yes, state board exams.

TS: Okay. So are you like eighteen years old at this time?

AB: Well, I went in when I was seventeen, and I finished when I was nineteen.

TS: So we're talking about getting through about 1955, then.

AB: Well '56, but my birthday is in December, so I was nineteen when I graduated.

TS: So '56, and then it's fourteen years after that before you get a bachelor's. Did you just work in a hospital?

AB: Yes, I worked; wherever I was, I worked.

TS: Where all did you work?

AB: Okay, first let's see, I worked with three urologists in Atlanta for a year.

TS: Urologists?

AB: Yes, kidney.

TS: Which clinic was it?

AB: It was a private practice: Fowler, Coleman & Holsenbeck.

TS: Okay, I just wondered if it was McDonald; you know, Larry McDonald's father had a urology clinic.

AB: Really? Well, Dr. Fowler was sort of old at the time, so I don't remember . . .

DY: Was this downtown?

AB: Yes, right on Peachtree and I can't remember, close to the Civic Center. But nevertheless, then I met Bill. He was at Crawford Long in x-ray, and I met him, we dated some, and married. And then he moved from Atlanta; Kennestone got him up here to work. So he moved up here, and we married after he moved. So we actually lived at the corner of Maple and Kennesaw Avenue in that old house. Is it Brumby? She had a clothing store on the square, was it Brumby?

TS: Well, there was a Brumby that . . .

AB: Not Brumby, because that's the rocking chairs I'm thinking about.

TS: Right, I know, but there was one that lived in a house on Maple Avenue.

AB: Well, it's on the corner of Maple and Kennesaw Avenue, and she rented these two rooms to us. She had a clothing store; she's one of the well-known names in Marietta history, but I can't remember her name.

TS: Dr. Dennington is the only one I can think of that had a house.

AB: Now, he bought the house later, but this lady owned it first.

TS: Okay, but that's the house you're talking about.

AB: Yes, the one that Dennington lived in. He was my dentist too. But nevertheless, we lived there. And then the job... I can't remember how Bill heard about this job in Venice, Florida, but we moved to Venice, Florida. He worked in x-ray, and I worked as a private duty nurse there. I got pregnant and had my first baby there. It was a small community.

DY: Now we've been hearing a lot about it on the news with these hurricanes coming in.

AB: Yes, but south of Venice, Punta Gorda. We lived in Venice a while and then moved to Nokomis, which is another little town just right up the road. But we both worked in Venice. Then, Kennestone called him back. They offered him more money. So we came back here, and I can't remember now if it was '60 . . . But we stayed here about three or four years. Well, we lived in a trailer park there at Kennesaw Mountain, close to where Highway 41 joins Church Street Extension--where there used to be a chemical plant.

TS: North Chemical.

AB: There was a chemical plant and a little trailer park; I think it's entirely run down, but we lived there for several years. The kids were little and roamed around, and I did some private duty, and I did part-time floor nursing too, staff nursing.

DY: At Kennestone?

AB: "Float," they called it, where you worked wherever they needed you. I came in from 3:00 to 11:00, and they told me to go to whatever floor.

DY: This was at Kennestone, right?

AB: At Kennestone Hospital, right. Bill worked there for twenty-something years. But in the interval, one of the x-ray companies contacted him to work. He accepted that, probably in the latter part of '64. In '65, we moved back to Florida, to Temple Terrace, and lived there. He was on the road for a year, which he did not like. Then he quit that and came back to Kennestone, so we moved back. [chuckle] But all in all, he's been there for years. So then, I worked again—wait a minute—in the interim before going back in '65 for one year.

DY: Private physician?

AB: No, another urologist. Dr. Donald May. I worked full time in his office. When I came back from that move, I started doing private duty again for years; that matched with the family. We lived in a rental home, and then we built up here in Kennesaw. We've been here since 1966. So I did again, float and private duty, and Bill was still working in x-ray. Then I decided to go back to college. Medical College of Georgia was offering an off-branch BSN completion program.

DY: Where was this, at Georgia State?

AB: Literally, in an old building at Georgia State. Georgia State didn't have their BSN program, so Medical College came over for RN's that didn't have a baccalaureate degree. We called it RN-to-BSN. I got into that to finish my baccalaureate. It took two or three years to finish that.

DY: Because you were working of course.

AB: Years.

TS: What was your maiden name?

AB: Grubbs. Oh also, I didn't know if you wanted the rest of it.

DY: So then you went to Emory?

AB: Yes. I worked in public health, and again, talking about defaults. I wanted to be with my family and the kids in the summer, and you know how nursing was then. Well, the senior nurses got the day shift, and do you think the young ones could get that? No, we worked evenings and nights. Well, I went into public health for a year and loved it. It was day shift with the weekends off, and I loved that. Then I decided though to go for my masters degree, and I majored in public health, community health. They called it public health then, public health nursing with a minor in education. So you get half education, half community health. Then I came back, and I was going to work in public health again. The director wanted me to come back. And again, by default—I thought, I sure would like to have my summers off! [laughter] You know, I only lived four miles away, so I came over here and applied to Kennesaw College. Public health lost me.

DY: So that's how you got to KSU. Now I see.

AB: Yes, but I feel apologetic when telling people that my focus was not education, and it wasn't even really nursing. [laughter]

DY: But don't you think a lot of times we get places by something that takes us there and by not a conscious linear path?

AB: Yes, but I couldn't go where I first was thinking---medicine. I mean, there was no way. I couldn't even afford to go to Emory Nursing School, much less medical school in those days.

TS: So we had a little nursing program, four years old and a junior college, and Charlotte Sachs running the program I guess.

AB: Yes.

DY: I remember Charlotte.

AB: Did you interview her?

TS: I have not interviewed her.

AB: Oh, you need to get her.

TS: I probably do.

AB: Oh, you do.

TS: Sachs, for the tape. Charlotte Sachs.

AB: Exactly.

TS: What was it like?

AB: When we came here?

TS: Yes, in the nursing program.

AB: There were about five of us here. [laughter] Charlotte, myself, June Walls and another one or two. And Judy [Julia L.] Perkins came the year after I did, and Judy, of course, later, in '79, when Charlotte stepped down . . .

DY: Charlotte was still here in '82? That's when I came.

AB: Yes, but she . . .

DY: She was not running the program, was she?

AB: No, she stepped back down to faculty status.

DY: And Judy came in.

AB: Anyway, the program was very small, and we were in the same building that we are in now that has been renovated, the same building. We had our little faculty meetings with four or five of us. [laughter] We had the nursing lab downstairs. And biology and chemistry . . . I remember where all those people in the building were too. So we've moved . . . I can't remember how many times we've moved; I think seven times. I'm sure everybody else has moved around too.

TS: Sure.

DY: Well, actually English [hadn't] until we got this new addition; everybody's been in Humanities. In fact, ya'll were in the Humanities too, for a while, [the] history [department] was.

TS: Yes.

AB: But anyway, am I getting too much off track or not?

DY: No, no, no, no. I think it's pretty clear why you came to KSU, in that you were guided here. But why did you stay?

AB: Well, I love it! I love it in many respects. It just, there was a saying now, of course, I didn't bring it with me, that GNA, Georgia Nurses Association, used to put on little trinkets and things. It was something about "to teach is to . . .", anyway, in essence it meant to be with a person forever.

DY: To teach is to touch a heart forever.

AB: Something like that. Or, “To teach is to touch lives forever.”

DY: So your love is teaching.

AB: Yes, I love teaching; I do. I believe [it’s] the best side of me, so to speak. It’s not the lecturer in front of a big audience, which some people can do very well. I mean, I can stand up there and do it. But I do more of the mentoring kind and behind the scenes, both of which are probably the best of me. Encouraging students, praising them, giving them constructive feedback. But of course, also maintaining standards. Some students think I’m so nice due to the way I come across, that they think they don’t have to fulfill their objectives, and that’s not true. I mean, what is it someone told me? Sometimes kindness is thought of as weakness. But nevertheless, I’m kind to students, but I still maintain the standards and sometimes they’re surprised. [laughter] I help them through it, though.

TS: It seems like the standards were so high that it was almost controversial maybe about the time that you came here. Wasn’t it?

AB: Well, we were called the little Georgia Tech in the Pines.

TS: Yes, I don’t know; the flunk out rate was such that it seems like I remember when there were students who were complaining about the program publicly.

AB: That’s right. I don’t remember how many, but we did have a lot of nursing students to fail out in the beginning.

TS: And I think the response was “Well, do you want these people to be taking care of you in the hospital somewhere if they don’t know this stuff?” [chuckle]

AB: That’s right. I forgot about the fail-out problem. It may have been a third or fourth of the class.

DY: I remember that now that you mention it.

AB: In the ‘70s.

DY: Which speaks well for your program. Well, you’ve done this so many times, haven’t we all, done the narrative for tenure and promotion.

AB: Yes!

DY: And had to say—and you’ve already begun talking about this—what your philosophy of teaching is.

AB: Yes. And see, that always hangs me up, too.

DY: It does me too, Annette, because I do what you do, I start describing, this is how I come to students. And maybe that is the philosophy.

AB: Hmm. Well, in terms of respecting the student and caring for them, encouraging them to learn, listening to them, and trying to make exceptions when needed in terms of family or whatever. As far as methodologies, one of mine, well, a global one, is trying to get active involvement on the students' [part], active involvement. Also, I try to use Socratic questioning. I propose something--case study, whatever, and get them involved in thinking. I do that on-line now. I keep thinking about research, undergrad research that I was teaching on-line using case situations. And when they have to answer all these questions and they interact with each other on-line, they say "We think it's this, or we think it's that."

DY: So are the conversations better than in the classroom?

AB: Oh, to me, I think the ones in class are really... Now, I don't mean close all the classrooms, but the on-line class is rich. The ones I've taught... I don't mean it's me, I mean it's the students. I've had some students in their evaluations to say, "I would take all on-line [classes] if I could." It's amazing because... I need to bring some of those evals from the students to read to you. They said, "This way the monopolizers..." And they used another adjective, meaning students who take over.

DY: The classroom and speak more than others?

AB: They can't; they're silenced, so to speak. I mean, they can talk, but everybody does. The silent students have their right. Part of the course is, they're mandated to give so many entries and to answer so many questions in discussions, and so it's rich. It is rich.

DY: What about the face to face? What about you who love working with people so much; you must get that some place else.

AB: You're right. Well, I miss not recognizing them. See, at least when I do the research course. Now some of the faculty have put tests online and allowed them to get a proctor and take the tests, which is fine. But I haven't. With the on-line research, I haven't done that yet. I have them to come in to take the final exam because I tell them way ahead, that if they have any problems with scheduling...

DY: They need to work through, yes.

AB: Yes, but when they come in then, I don't know their faces. That's the only... But you know, I could ask if they would give me a picture to try to see them as I'm interacting for the eight weeks.

DY: But you probably feel as if you know them because you have read so much of what they've written.

AB: Right. But the on-line, I just can't get over how I wasn't ready for it in the beginning because I thought, "Wait a minute, face to face is best." And after I got into it, I taught theory online. And even that, which I thought would be hard to do on-line [teaching theory], discussion questions just blossomed. Since then, I have taught more research on-line and again, I am just always amazed. I know they're creative and smart, but to see it coming out, I think "Gosh, I could have never thought of that!"

DY: Who do you think has shaped your pedagogy?

AB: Well, I call that the active style. I was doing that before, but it seemed like it was so rich on the on-line, and maybe it's the structure of it that they have to enter so many discussions, you know, answer so many discussion questions, interact with each other so many times. And other faculty do this too, and I'm sure they've experienced similar things.

DY: Do you find that you spend more time?

AB: Oh, good Lord!

DY: See, because that's what I would think would be the drawback.

AB: Oh, Lord.

DY: You could just sit at that computer forever.

AB: Oh, that's the downside. And see, well, most of us that do this prefer not to have, say, more than twenty-five students because you're just killing yourself if you're trying to answer all of them. It's everyday, not that you necessarily go in [to the computer] every day, but if I go off for a weekend, I still get on and try to see what's going on and answer questions. That is the downside. But one reason that we have this, I think, in the undergrad--although I'm in the graduate program, and I don't know as much about the undergrad as the others, is the RN-to-BSN program, which was developed to be on-line, so their offerings have to be on-line. The traditional students can opt to take the online courses too, but they were set up for the RN-to-BSN because it's advertised as a total on-line program for them. I had my diploma, but I didn't have my . . .

TS: How do you do clinical stuff on-line?

AB: Well, you don't do the clinical on-line. See, now you're asking me a question I don't know how to answer. When I was an undergrad, they still had to do clinical and community health. Community health is one area that they generally don't get in the two-year programs or the three-year. It may be that that's the exception; they still have to do some community clinical. I would think that's it. Now I'm ashamed that I don't know the answer. [laughter]

DY: Oh no!

- AB: But there's so much going on in the undergrad and grad programs that I can't keep up with it.
- DY: Well, in your perspective, that's such a valuable thing that you bring, is that when you've been here and seen the program just literally grow, and you've grown with it, and I always think of you in terms of the gerontology that we have. Why don't you talk about that some? I remember when you were working on that.
- AB: Well, yes, and I'm sort of out of that now, which is a shame. It's just that things have evolved. But back, Barbara Karcher and I and Sybil Meyers--way back, I don't know if it was early '90s or late '80s--wanted to get something going on this, and we worked, and Jane Bruno and others joined us. We met and worked on a minor and were awarded a consultant from the Association of Gerontology in Higher Education, and he came and helped us. We did get the minor and submitted it and got accepted. I don't know now if it's still on board, but from that we went forward and developed a certificate. I can't remember what year that was that it went forward, but it was held up, I will say; it didn't go through at that time. So we sort of dissolved after that. I don't know if that was--it was in the '90s.
- DY: If you'll allow me to use this metaphor, and I think you'll love it, you know what it sounds like to me? That you're a very good mother. That you give birth to this, you let it grow, as we let children grow, and then you have to just let them go and you let them go and yet you keep going on to something else.
- AB: Well, do you know the president hired Dr. Stillion in I forget what year.
- DY: Judy.
- AB: I say to spearhead the gerontology process. Dr. Stillion.
- DY: Yes.
- AB: So they have that going now, and of course, I think she's semi-retired. But Barbara Karcher now is the director of the CAREing Center. I've been on the Board, and there are different branches of that. They offered, Dr. Stillion and others—and again I was on that too, to help develop a professional certificate. It was for people working in places like Atherton Place or assisted living or other settings for older adults. They've offered this for several years. I don't know if it's still on now. Again, I've had to withdraw from that to do other things. They offered the gerontology academic certificate too, but I think it was based on what we had developed previously.
- AB: I did some Continuing Education within gerontology, and then one thing that I did want to say. Well, it sort of branches off. I've done some research with faculty on gerontology, like with Anne White, and I'd like to focus more on it, but it's just that the time is gone. I'm tangential here--but the College has WellStar monies that came to our College for scholarship. We have two scholars in residence: one

in African-American studies and one in ethics, Gloria Taylor and Lois Robley. Then we hired two additional scholars, one being for gerontology. Did you know that?

DY: No.

AB: Yes. David Mitchell has been hired for gerontology.

TS: I met him at the opening of school.

AB: Did you? Yes. And we've hired Lucia Kamm-Steigelman for women's health.

DY: Now, you have also done work in women's health.

AB: Yes. Menopause is the area in which I've done research. I'm too much of a generalist; I have to fade in and fade out of these areas.

DY: I think that that's your gift and your strength too. Well, you say you're a generalist, but then you get in there, and you become specialized, and you develop a program, and then you go on and develop another program

AB: I did teach women's health a couple of times, but anyway...But what I did want to tell you before I leave gerontology is that... I forgot this until I reviewed what I've done in my vita, and this goes back to... You're probably going to have to cut me off whenever you want me to stop, because I'm talking so much.

DY: No, I think we're fine.

AB: When Tina Straley was here for, was it . . .

DY: Graduate dean?

AB: Yes. She started Scholarship KSU. It was a group of us scholars who got together periodically and discussed various topics, and she tried to get faculty from each discipline.

DY: Was that that thing that Bob Hill was running?

AB: He helped also on it. Let's see.

DY: I know what you're talking about vaguely.

AB: It was a scholarship group, and I think when we were still in it when Teresa Joyce came on board [as Dean of Graduate Studies]. And I think after that it dissipated. But nevertheless, we met, and here we were from different disciplines. I'm sure Bob Hill was in that too.

DY: I think he moved into that after he no longer chaired the English department. I think he moved on over there and was working on that.

AB: He did. But in the beginning, I remember she wanted us to do some type of project and work on it across disciplines. And she said, “Annette, for instance, you’re gerontology.” “And Don McGarey...” Do you know him? He’s a biologist.

DY: Yes.

AB: Okay. I didn’t know how I would fit with him, a microbiologist. What can I do? She said, “Why don’t you get with Annette?” The microbiologist with me! I tell you, we did a course, taught it once, and we haven’t offered it again. But that was the most fabulous learning experience for me.

DY: What was the course?

AB: And for him. I brought it so I could remember what it was titled. And we didn’t have a large taking [of students] on it, but I tell you, I will always thank Tina for putting us together. I see Don occasionally, and we were going to try to write something up—of course, we haven’t had the time. But we came up with a fabulous course. And even when the course finished, we had the students—it was his idea to get them to do a poster—and they presented their posters on their projects here in the student center. But the title was “Aging Across Species, Gender, and Time: an Interdisciplinary Approach.” We had Russell Akridge to come, a physicist, to come and speak on the aging of the universe in a lecture. And then Don... And I can’t explain how he did it all because I don’t have his notes. I didn’t review his notes before I came. But just beautifully he talked about the biological and ecological perspective in aging from the first forms on. Some that didn’t age, and how others started aging. The mechanisms by which biologically they changed in to forms that did age. I did the sociological perspective, which was a time perspective. And I used menopause as a prototype for the gender differences in aging, which to me is exciting. But what Don did in his biology lectures... Well, see, again, I like biology, I like chemistry, I like everything.

DY: Well, and to put it in context, to put what you knew in that context, no doubt--gave you a real different perspective on it?

AB: Yes, it did. But I mean, we got together anyway, and pulled this together in terms of the aging of the universe and the biological and sociological. And as I put at the end here, if you don’t mind me reading one part. This is an abstract; we presented it at one of the gerontological regional meetings. I said, “This is also a serendipitous outcome; teachers often experience increased creativity and gain greater clarity of concepts when teaching collaboratively across disciplines.” I mean, I think we learned a hundred times more than the students.

DY: Oh, Tom and I, you’re preaching to the choir here. That’s exactly right.

AB: I’ll never forget that, never.

DY: So you did that course—how was that offered? It was undergraduate then; was it not?

AB: It was listed in biology, nursing, and sociology, if I remember right. Yes, three areas. What do you call it where you can get . . . ?

DY: Cross listed.

AB: Cross listed as an elective for biology and . . .

DY: How many students did you have in it?

AB: I think we had twenty-something.

DY: That's wonderful.

AB: About twenty. We wanted more.

DY: Have you done anything like that since?

AB: No. Time, again—see. Tina gave money for our release to do this, the course. And if I could live a few more lifetimes . . .

DY: [chuckle]

AB: No, I mean, really. I would love to do it again. In fact, after I went back and read some of the stuff I've done I was thinking, "I've got to get in touch with Don." You just cannot believe. . . . And of course, he was saying the same thing about learning from me, what I've learned from him. It was team-taught; we were always there together. And it takes some time to develop the lectures and get there, and it's the time element in terms of that. I'm sure we would offer it again if we could.

TS: What was your Ph.D. in?

AB: Sociology.

TS: And that was gerontology?

AB: Gerontology. And that was by default.

DY: I was going to say, how did you focus on that? That's really interesting. I mean, I see how the gero comes in.

AB: Well, sociology covers a broad content area. I mean, I can't name them all.

One was aging, but the reason I got into that was by default. I went to Georgia State, and talked to sociology because that's what I thought I would like. Sociology, community health and all this fits in so well. Community is an area;

mental illness is an area; race and ethnicity; deviance; urban-rural. So I talked to Frank Whittington; [he] is the one that I talked to about coming in [to sociology]. He says, "I'm teaching this course on aging this summer. Why don't you come in and join me?" So that's where I got an internship . . . [laughter]

TS: What was his name?

AB: Frank Whittington. He heads the gerontology, the Georgia State Gerontology Center.

TS: He's still there?

AB: He is there now.

DY: So that was your first class?

AB: In gerontology. And then after I got sold on that, I thought, "Hey, my concentration is in gerontology." But I wanted to take all the courses that they offered. I mean, in all the other areas. Race and ethnicity. Mental illness.

DY: So you were working at the same time that you were getting that doctorate.

AB: Yes, uh huh. As most of us.

TS: Did you do the doctorate because you knew the masters in nursing was coming?

AB: No. I remember Herb Davis... I went to him one day and I said, "Herb, what do you think about me going back for my doctorate?" Let's see, this is in the late '70's. He says, "Well, Annette, you don't really need it." Because we still had the two-year program.

DY: You got it in '85?

AB: Yes. That's when we started the four-year program. But he says, "You don't really need it; I don't know why you want to." I said, "Well, I'm interested." See, I was doing it for my enrichment. But it paid off, and then we got the baccalaureate program going and then the other. For the graduate program though, they needed faculty to teach in the graduate program, the nurse practitioner program, to start it.

DY: Yes, and you had to have a doctorate to do that, did you not?

AB: No, but you have to be certified as a nurse practitioner or family nurse practitioner. WellStar helped us on this to get started. Judy Perkins asked if any faculty wanted to return to school because you had to go back to get a post-masters, at least in this, in order to teach in it. Two or three of us did.

TS: So this is what you did in '96?

AB: '96. I went back for nine months; I went to Emory.

DY: Oh, the post-masters.

AB: It was a full time post-master's. So we took the courses. They had a track where if you've already had a masters degree in nursing, they didn't make you do everything over.

TS: So FNP is for Family Nurse Practitioner.

AB: Yes, and there's other nurse practitioners, too. Family is the generalist.

DY: I'm looking at the mid-80's and thinking about when you got that Ph.D. in sociology. Wasn't that a time here at Kennesaw when we had faculty going back who didn't have a terminal degree and getting a terminal degree?

AB: Well, nursing and art were sort of exempt, weren't we?

TS: You had the terminal degree.

AB: A masters was a terminal degree in nursing at that time. I went back in '78. I must have been talking to Herb about '77 or '76, saying what do you think about this?

TS: '78 is when you started that?

AB: I started in '78 and finished in '85.

TS: Of course, that's when we started junior, senior level classes. Let's see, you said it was '85 before you had the bachelor's in nursing [program here at KSU]?

AB: That year or '86, one. They hired some faculty in '85.

TS: So you were still teaching the two-year program.

AB: Yes, it may have been '86 when they started the courses. They hired some faculty in '85.

TS: Right. Back when we were in the process of transitioning to a senior college, people that didn't have Ph.D.'s were strongly encouraged... In fact, I finished mine in '78, and there was money from the Foundation for awhile, at least to help pay for dissertation typing back when you typed a dissertation.

AB: On the typewriter. [laughter]

TS: Hired professionals to type a dissertation, things of that sort. And then all of a sudden, we had all these Ph.D.'s arrive, and they were bent out of shape that they were still paying people to get their doctorates who had been here already, so they cut the money off at that time.

AB: I remember when I took a computer course. Remember we didn't have computers and Steve Scherer . . .

DY: Steve, who laid the underground cable in this institution!

AB: I know! I said, "Steve,"--I don't even remember where the computer was located, but if you want to tell for the [audio] tape, but it was this big, about this big...

TS: Two foot by three feet or something.

AB: I don't even think they called it a computer, I mean, terminal. In other words, you typed into it, and you put the phone on the modem to get to Georgia State. He lugged this heavy--would you call it a terminal--heavy, huge like typewriter-thing into my office. I kept it there to take my courses, to do some of the computer courses at Georgia State.

DY: You've just been cutting edge all along! That is just amazing!

AB: Put it on the modem, take the telephone, and put it on.

TS: I imagine the twenty-year olds today can't even vaguely imagine what we used to work with.

AB: I know. I remember Martha [Bargo], and she was... I mean, the computer we had at first, was it an Apple? I can't remember; it wasn't the IBM's. I think it was the Apple.

TS: I think Apple was the first personal computer we had.

AB: She was doing really well on it, and I did a little bit on it, and then I remember we got some PC's.

DY: Yes, Martha got real interested in that.

AB: It wasn't in my office, but it was up in a little room in the Pilcher Building. I even remember Nancy King coming in to work on her dissertation!

DY: What do you think—this is sort of a standard question, and it's going to be since you have so many significant accomplishments. I mean, at least on paper, you know, you have a lot. When you look at your website, your vita, and what you've done, you have a lot of places there that a lot of people would have just stopped and said, "Okay, I've done this now, I'm fine." But you didn't stop.

AB: I'm just interested in life.

DY: What do you think is your most significant professional accomplishment?

AB: Aye, aye, aye. That's a hard one.

DY: Isn't it hard, but it's fun. You can say anything; there's not a right or wrong.

AB: [laughter] Well, you know, just like I was telling about the one with Don McGarey, it's just an invaluable learning experience and a disciplinary . . .

DY: It's teaching.

AB: I know it is. It's teaching.

DY: It's teaching, and the fact that you come together with other colleagues.

AB: And let me say this: most all of my work as far as scholarship, well, in teaching too, but scholarship which to me feeds teaching, just like service does.

DY: It's collaborative.

AB: Yes, I did want to say that. Collaborative. Because I'm thinking now, I haven't talked about the menopause research I did. [It] was with Kathy Smith who... North Georgia College got her, but she and I--and women's health is her area. She's big in women's health--but I did want to say, most everything I've done has been with other faculty. I'm not out there alone. I did want to give them credit.

DY: Well, to me, that's always been one of the marks of a strong teacher because we do talk to other people. We do want to see what other people are doing, and the intellectual aspect of it too is very important.

AB: Yes. Well, it shares the work and shares the ideas. But I've worked with a lot of different faculty. I can't even name them all right now.

DY: Annette, since you have been here, your tenure here has just spanned so many changes. Have you seen a change or evolution in the intellectual climate on our campus?

AB: Hm. In what respect, just any respect?

DY: Well, I'm thinking about when we collaborate; when we do interdisciplinary work or cross-disciplinary work, we get that validation from our colleagues. We get that intellectual energy and validation.

TS: Have you felt more pressure to do publications or research? Has scholarship become more important to the intellectual life? Has teaching been affected by the change in the climate? Have we brought in new people with different interests than the old folks? Us old folks?

AB: [laughter] Well, the intellectual climate is changing, yes, from where I sit in the College. I see this as very positive. It's changing toward including scholarship, definitely. It's not necessarily for everyone. At least what we're working on in nursing, and I'm sure the other departments too, on what we call tracks . . .

[tape off momentarily]

AB: So I was talking about tracks.

DY: When did your College start tracks?

AB: Well, the different departments--we haven't finalized them yet. And in nursing, we've been looking at them: if you want to focus on teaching, what would be the load? If you want a balanced track, to specify what would be, I say the requirements, to meet expectations within that track?

TS: The balance between service, scholarship, and teaching.

AB: Yes. Or not teaching only, but predominately teaching or a balanced track or a scholarship track. And so we've been working on those trying to finalize that.

DY: Like the College of Business . . .

AB: Yes, I mean, I haven't seen theirs, but I know they have tracks.

TS: So you teach fewer classes if you go the scholarship route, and a heavier load for teaching [route].

AB: And you have to have some outcomes, of course, from the scholarship track, to be meeting expectations in that area. We're working on them; we've worked on it about a year. So in other words, it's right at the final stage. I'm assuming the other two departments are doing the same thing because our new dean is in favor of this, and I am in favor of it. Even though I love teaching, I've been doing scholarship anyway.

DY: But you've also been teaching a heavy load along with that, right?

AB: Hm-hmm. And again, I don't know what I would choose. We only have to choose one track we want to go for in terms of our evaluation, for our annual evaluation by the school.

DY: Who's your new dean?

AB: Richard Sowell. Do you know him?

TS: Yes.

AB: Yes. I wasn't on the screening committee--but I was thinking this was probably one reason why they got him; he had gotten large NIH grants and [has] done a lot of research. He was in nursing at the University of South Carolina and was Chair of one of the departments. But anyway, some of the psychology teachers used to tell me, "The bar has been raised." I'm sure from the University, too. And I remember the VP at our beginning session [this fall], when Dr. Black was

speaking. He said something about research--I don't remember if he said it's been thought of as an ugly word. He said something like that; that research had not been looked upon favorably or whatever. We need to go forward with perceiving it to be valuable. Excuse me if I'm misquoting him, but he was making a statement for research to be included, and I hope he forgives me if I misstated him. But I noted that he did say we do need to be looking at research. And of course, with so many masters programs--I've forgotten how many we have. And we're proposing a doctoral program in our College.

DY: You are?!

AB: Yes, did you not know that?

TS: What's the program?

AB: Oh no, don't ask me!

DY: Are we a university--okay, I didn't know our University could offer that.

AB: It's a Doctor of Ethical Leadership degree.

TS: Yes, we're moving forward. Are you talking about a program through the RTM Institute? Is that going to be through your college?

AB: Yes.

DY: That's what Judy does, isn't it? Judy Stillion. Is that Judy's?

AB: It may be named the same, but it wouldn't be. I think it's named Leadership, Ethics and—not CAREing.

TS: Character. Leadership, Ethics and Character.

AB: Initially, it started with the College of Education and us, our College looking at it together. So if we have a doctoral program . . . In fact, we've hired someone that will teach in it. Right now he's having to teach with all of us.

TS: Really?

AB: Yes, Dr. Jonathan Vangeest, he's been hired. But to have masters programs and doctoral programs . . .

DY: Then you have to have a faculty doing research.

TS: I just didn't realize that that was coming through your College.

DY: Me either, Tom; I think that's where my surprise came from too.

AB: And of course, I've loved research all the time, and I used to do it just for the fun of it. I still do, so it didn't hit me like it hits some people. Some people have told me, "Hey, I came here because this is a teaching institution, and I want to teach, and I don't want to do research." Well, if we have tracks, and they can choose teaching, and of course they would have to do more teaching but . . .

TS: Well, your College is unusual I think, isn't it, in that you've really got, I guess Phys. Ed. is part of your college?

AB: Phys. Ed. and Human Services. And you know the Masters in Social Work is going to follow. . .

TS: Oh, that's under that?

AB: Human Services. There's three departments in our College: Nursing, I say Physical Education . . .

DY: We all do. HPS.

AB: HPS—Health . . .

TS: Is recreation in there?

AB: Health, Physical Education, and Sports Science.

DY: It dates us, ya'll!

AB: I think it's Health, Physical Education, and Sports Science, but that can be checked too.

TS: Okay, whatever they are.

AB: It's Human Services, HPS, and Nursing; that's us. And again, we have the Social Work Masters; I forget what stage it's in. It's going through the curriculum process, the masters portion.

DY: Is it down at the Board [of Regents] yet?

AB: I don't think so. I don't know.

TS: Are you talking about the doctorate?

AB: No, the Master's in Social Work.

DY: MSW?

AB: MSW.

TS: Okay, the Master's in Social Work.

AB: I think the Board has okayed that, but it's still going through our channels. Sometimes, the Board... I've been on the GPCC [Graduate Policy & Curriculum Committee] for years, and I know some programs, even for Business and all, have been okayed by the Regents, but then have to go [through]our channels, which to me is perfunctory. But, I mean, I'm not against it.

DY: That's right, it does go down to the Board of Regents before it comes to, before it goes to . . .

AB: To say, why go through all this [KSU] process if it's not going to make it [at the Board]?

DY: Right.

AB: I know we had a Business proposal once or twice to come through that had already been approved by the Regents. Yet we had to still go through all that. So we have the doctoral program hopefully coming forward. This year we started a new nursing masters. The Nurse Practitioner masters degree has been there since it got started in '96. Once we added a track, Acute Care Nurse Practitioner, which not many people wanted. So we dropped that, but we then added the Adult Nurse Practitioner. But then this year, we've added another masters. Again, some of the courses will be taught together, but it's Advanced Care Management and Leadership. It's not a Nurse Practitioner Masters, but it's more similar to what we call a Clinical Specialist. They'll take some core courses with us, but they'll also take some Business courses and a course out of Conflict Management. Isn't that something?

DY: How exciting, Annette!

AB: I know, it is. Advanced Care Management and Leadership is the title.

DY: Are you going to be working in that program?

AB: Well, see, they're in one class. In this first semester, they take all the same courses.

DY: Okay, so it's a cohort program?

AB: Yes, it is. But I think we have six students in the ACML Program. So they decided to cut back on the number of nurse practitioner [NP] students. In other words, because we used to have forty-something NP students entering in the fall.

DY: I don't know how y'all did it.

AB: So they cut the number of NPs down to thirty-five or so. We wanted to allow ten spaces for the new program, ACML.

- DY: So the intellectual climate then, it's been, what you've been doing—the University has caught up with you, Annette. Finally, I think, what you've been doing all along as a teacher and a scholar.
- AB: Well, I've loved research.
- DY: And your service is phenomenal too!
- AB: Well, thank you. The one year, when I got the KSU Distinguished Teacher Award, which was Spring of 2000... Later, after it was all over—about a year later, someone who was on the awards committee told me... “Annette, I just want to tell you that your materials were seamless in terms of the three areas [teaching, scholarship, & service].” I thought that was a very good compliment.
- DY: It's a wonderful compliment.
- AB: Seamless between the three areas.
- DY: It says you do what you love, and it comes out in these ways that fortunately the institution honors!
- AB: Now, of course, I haven't gotten NIH grants, and all that. But with the WellStar money, I think we'll really be going strong. Other nursing faculty members have submitted proposals for NIH grants. So we will be getting them in the future. Now, with the scholars... There are four scholars now: African-American Scholar, who is Gloria Taylor; Lois Robley, who is the Ethics Scholar; David Mitchell, who is Gerontology; and Lucia Kamm-Steigelman, who is Women's Health. So they will be on a research track because they are designated scholars. We will really be seeing materials coming from them. Now, what has helped also is that Richard [Sowell, the Dean] hired Tim Akers as Assistant Dean for Research and Graduate Studies. And one thing that I didn't realize because I've never been in a research institution, is that you need to have published in an area prior to getting some large grants. And see, then me having been a generalist, I'm sort of spread out everywhere. It's a disadvantage because I haven't focused in one area. And that's another thing: focus in one area, as Richard's been telling us, become published in that area, and go forward in that area. He did that in his HIV/AIDS research, and he had others to do likewise. He was telling us, for instance, that one member of his research team would focus on depression among persons with HIV/AIDS, and then become expert in that area and be able to get grants. So he's taught us a lot.
- DY: Where do you see yourself going?
- AB: Well, you see, right now, it's hard to get published in one area. Like how long can I live to become really good in one area, focused. So that's sort of problematic.
- DY: But you don't necessarily have to do that. Can't you do basically what you want to do now?

AB: Well, yes, he's not saying we must do this, but . . .

DY: But I mean you don't need it for promotion, you don't need it for anything like that.

AB: No, but since I'm still interested in research of course, always. Since Tim Akers came aboard, he's been helping faculty with whatever initiatives they're trying to do. Of course, Richard Sowell is... Again, his area is HIV/AIDS. And then Barbara Blake hired in I think two years ago, and she'd worked in HIV/AIDS. And Tim Akers came from CDC where he's worked with HIV/AIDS, STD, TB, and you name it.

DY: Very interesting.

AB: So he said we should form interest groups; so one group was HIV/AIDS, and I got on board with them. There's Tim, Barbara, Gloria Taylor, and I. So we've been working a whole year on a contract for the State Department of Human Resources, HIV/AIDS section, \$250,000.00. So that's my research. I mean I'm working on that. We've conducted thirteen focus groups all over the state. Gloria and Barbara did those, and I've transcribed those two hour focus groups and analyzed the data from those. And Tim has done tons of work. I mean, we've pulled it all together and gotten our mid-year report in. We're still doing more surveys. I mean, it's extensive. Then the other part, if you want me to talk research, is that Janice Long hired in two years ago, and she was from WellStar. In fact another faculty too. They said we stole them, but they've stolen faculty from us. [laughter] You might edit out that word "stole," but she came. And she and Patricia Hart were very interested in starting a diabetes program for Hispanics. And so, here's Tim on board, and they got together and wrote a grant. Patricia left the next year, and Janice got the grant for \$200,000 dollars from Healthcare Georgia Foundation. It was half the year last year, and this year, and so Janice then didn't have Patricia to help her. So she asked Carol Holtz... Janice and Carol can speak Spanish; I can just speak a little bit. She asked Carol and me to help her, and so we have been helping her with the grant—which has just been tremendous. She's hired a Colombian MD, Astrid Rivera, as staff. That has been going... So between helping with both of these . . .

DY: It seems right up your alley, too.

AB: It is.

DY: Grant writing is. I've only just done a little bit of it, and you've done some too, Tom. It can be fun, in that it does pull all that stuff together. You know, your intellectual interests.

AB: But trying to get funding is just another . . . [laughter]

DY: Then you just feel like you've hit the jackpot or something when you get one, and then it's very addictive.

TS: Are you doing any research with students?

AB: Not at the moment. I have though, in the past. So, if you want me to speak some on that instead of getting so excited about our grants. But, you know, what we do is have research assistants who are students. One is in the Conflict Management Program; one is in the Public Administration Program, and then we have work study students. And I've just applied for a SALT student too, from Nancy King, to help us. We're still integrating students in there. Now, in the diabetic grant, we've been able to integrate undergrad nursing students much more. They come to help. There are support groups; there are exercise groups, nutrition groups. And also MUST Ministries where students can go, too. They help there, too. But anyway, students have helped tremendously. They do education sessions for the Latinos, and I'm surprised at how many can speak some Spanish too. But as far as student research, pedagogical research, in the past, I have done it. Beverly Farnsworth and I did a couple of things: one was attitudes toward mental illness and attitudes toward alcoholism. The sample consisted of volunteer students in the psychiatric nursing course, which I taught about five years. The other research we did was test reviews. We labeled it, "Faculty Roast for Students' Learning" because they used to "roast" us, you know--test reviews that argue you down. After they had finished the exam, we would put the items on the screen and give them the answers, of course, and the rationale. So we'd hand out the answers and the rationale for them. This is why these are right, and this is why this is wrong. And then if the students still didn't agree with us, and they found something somewhere that countered the answer, we allowed them to write it up in full and turn it in to us. If it were valid, we accepted it.

DY: What a good intellectual exercise for those students.

AB: And we got that published in a nursing journal. Let's see, we did a cultural model and Carol Holtz helped me. We got that published, "How to Teach Cultural Empathy" for nursing students to be empathetic.

DY: How do you do that, by the way?

AB: It's very hard.

DY: I can imagine it would be.

AB: But, you know, if you go in a room, and patients are doing things you don't understand, some nurses will get their backs up about that. Like, "Why would they do this, that, and the other? That's not clinically clean enough." Or whatever. And the other thing was when I taught medical sociology for several summers, and I loved that too. And I did oral exams in there, which the student... Yes, so I got that published too. But they weren't used to that, and they were scared to death. But I just... I told them areas I was going to ask some questions on, and each one had to make an appointment with me.

DY: Oh, you did it singly with the individuals.

AB: I did it individually in about an hour appointment. Something like this.

DY: Sort of like this.

AB: Yes, it was. And I said, this is good practice for later. They would have to come up, and sort of pull the ideas together in terms of theory or whatever I was asking them, and they did generally good. They were nervous, but the evaluations were that they were glad that they had that experience. Because they have to sit and then think, "Okay, now what?"

DY: I bet you put them at ease.

AB: Yes, I did. If they couldn't pull it together, I helped them with probes, but you could tell if they had not studied at all. That came out.

DY: You said earlier that you love mentoring.

AB: Yes.

DY: Well, let me turn that just a little bit and ask you whom do you consider your most significant mentors? You've worked so collaboratively and that can be a mentoring relationship too, a collaborativeship can be.

AB: I don't know that there was one that was older. I mean senior, when I came here.

DY: Oh, I don't know that a mentor has to necessarily be senior, does it Tom?

AB: Well I meant one that already knew the ropes, in other words, when I came here.

DY: Yes, okay.

AB: Charlotte was head of the department, so she was busy, but she helped some.

DY: See, I loved Charlotte. I thought she was a scream!

AB: Others there helped me, but I think it's the collaboration. I don't mean to be mean-spirited, but I didn't see myself as having a mentor per se. You know, Charlotte was there if I needed her, but they were all busy. And later we became... It was structured, like when new people coming on board. How many years ago was that, fifteen or whatever? If you were interested, you were assigned a mentor.

DY: You were assigned a mentor?

AB: Yes.

DY: Yes, but that was so informal. I know in my department, there were only just a couple of people who took it seriously.

AB: Well, one time it was University-wide because Tom Moore in Business was assigned to me and to Pam Rhyne in Biology. And we would go out, and have lunch about once a month. So that was a good mentoring experience.

TS: What about professors along the way? Anybody that was a mentor in particular?

AB: Gosh, I hate to say, I'm sure there was.

TS: It sounds like you were a pioneer.

DY: It does!

AB: Somebody's going to hear this transcript and scream, "She didn't mention me as mentor!"

DY: Oh, but that's not going to happen. Nobody's going to say--gosh, it's not like the Oscars when you have to . . .

AB: It was collaborative because, just like I said with Don McGarey, whom I didn't even know, from Biology. He was new, but within nursing, I worked with so many faculty [members]. It just happens that I was here the longest, and the other faculty that were here are gone. It's like I'm the last one left. You know, the longest one standing.

DY: Or the oldest girl in the family is the one who ends up helping others.

AB: I am the oldest daughter.

DY: Oh you are? That's interesting.

AB: But it's been collaborative in terms of mentorship: Barbara Karcher and people I worked with through the years. And then again, nursing--I just can't name them all. I mean, Beverly Farnsworth, Carol Holtz, Gloria Taylor, Anne White, Kathy Smith.

DY: Is Anne the one running the clinic now?

AB: Anne Nichols is running the clinic.

TS: But there's really nobody that was the role model for you going into nursing or education?

AB: No.

TS: You just kind of fell into it.

AB: I just fell into it! I didn't know of any nurse; I don't think I knew a nurse, I mean, I didn't.

TS: There weren't any in Georgetown, I guess.

AB: Well, they were in the hospital in Eufaula, Alabama, across the river.

DY: Jimmy Carter's mother.

AB: That's right! But I didn't know her. She was a nurse in the Peace Corps.

TS: Quitman County probably didn't have an abundance of doctors or nurses.

AB: We had nothing, I mean, there was a physician there eons ago when I was probably ten or nine. I was delivering papers on a bicycle, and it had rained. And I slid as I was going to this one house, and broke my ankle. And he came out and fixed it, but he was right there.

TS: Well, you were ahead of your time. I never heard of a newspaper girl.

AB: I must say I cut lawns too, for fifty cents. Huge lawns, push mower.

DY: Not motorized?

AB: Fifty cents. And then they had bushes and things, and I used a swing blade. It's a wonder I didn't cut my leg off. [laughter]

TS: They wouldn't let me mow lawns because I didn't have glasses back then, and I couldn't see. Everybody kept the grass so short in our neighborhood that I never could see where the lawn mower had been. It all looked the same to me. [laughter] So nobody wanted to pay me to cut their grass!

DY: Well, fortunately you could do other things!

AB: That's so funny!

DY: Well, let's see, what have we not asked Annette or heard from you?

AB: I just remembered something.

DY: What? A mentor!

AB: [laughter] In high school—is that all right?

DY: Yes.

AB: An English teacher that was very strong.

DY: Always an English teacher!

AB: I remember her to this day.

TS: You said, “I don’t ever want to be an English teacher!”

AB: Well, no, but see, what little grammar I have, I remember her teaching me that grammar.

DY: You’ve got a lot of grammar and remember you used to call me and ask me questions, and you haven’t any more and it’s broken my heart! Call me again.

AB: I’m sorry! I have called you occasionally, but you weren’t at the phone. But she instilled the grammar, and I can still remember her. She was very forceful. Beautiful woman, but man!

DY: That’s why you loved it then.

AB: Yes, I did learn and loved it.

DY: So what is it? That’s interesting. I’m thinking about what you said about your having standards. You’re kind; you respect students; you honor where they are, but you have standards, and they have to meet those. I’m wondering if this woman was kind of a prototype.

AB: That may be part of it, and I just didn’t know it. There were other teachers too, and they were nice, but I remember her more than anybody!

TS: It is amazing that the ones that probably would get zapped if you had student evaluations are the ones we remember through time years later.

AB: Oh, she would have gotten from most of them. She would have gotten bad ones because she made them do a lot and learn a lot, and they didn’t want to.

TS: I wonder, I think sometimes we stereotypically think that those rural schools weren’t very good and probably test scores aren’t . . .

AB: Yes, but it was good in general.

TS: Yes, but still sometimes, and I think maybe some of those teachers that were really tough--I’ve heard this with black teachers in the days of segregation too--that they really felt like those that had the ability were not going to let them slack off; [they] were going to make them reach their potential. The others would tolerate [it], but those who really have the ability were going to push.

DY: Tough love.

AB: Yes, tough love.

TS: Yes, because you were preparing them for a tough world.

AB: Yes, but see, I always thought the school . . . That I didn’t get the education other people did, in content anyway. We had no geometry, no trigonometry, no

languages. I just can't forgive them yet for not having languages. I'm trying to learn Spanish still; I'm taking courses in Spanish.

TS: Probably half the population is Spanish coming here now.

AB: Yes. So I didn't have that offered when I could have just eaten it up.

DY: You're eating it up now. Nothing slowing you down.

AB: I'm still striving. I wish I had a few more lives to read all the Classics and the literature. I really do. I love history; you name it: literature, philosophy, biology, chemistry.

DY: You're never going to retire. I mean, I know you're going to retire at some point, but then you can just start going around to classes. That's what I want to do. I want to go around and take people's classes.

AB: Hey, that's an idea!

DY: Don't you think that would be fun?

AB: I took art ten or fifteen years ago. I had some time, and I took Tom Salter's class. Yes, I did.

DY: Dear Tom.

AB: I don't even know how--I want to take music appreciation. I don't even know the different classics in music. See, I'm so ill-educated that way. And especially in nursing; they didn't allow any electives. Not that that's an excuse for me not going back, but I have hardly any liberal arts education, except sociology, and that was at the doctorate level. So I kind of missed out.

DY: Oh, I think you're getting it along the way. And just think, as we do with our older students, when they come in, they're just so wonderful.

AB: That reminds me.

TS: Dede's got a doctor that takes practically every class she teaches; he's a retired physician.

AB: Really?

DY: Yes.

AB: How nice.

DY: He's wonderful. He and his wife both.

TS: He was in when we did the joint class a year ago, I guess.

AB: That reminds me of two things: George Beggs, years ago when I was coming back to pick up my baccalaureate. Because see, again, I had that diploma, and I could pick up the courses here. I remember Herb Davis walked me over there to be hired in, and Sturgis said-... He'd already had my transcript. He said, "You are the first returning student as faculty." And I was. And Elaine Hubbard was the first graduate [who returned as faculty].

DY: Elaine Hubbard?

AB: Yes, but I was the first student to return. I couldn't finish here; there was not a baccalaureate. So I picked up my courses and went to Georgia State.

TS: What years did you go here?

AB: Let me see. Was it '67 or '68?

TS: You got your bachelors in '71.

AB: I took some classes; it was '68 I think. I picked up political science and literature.

TS: '68 was our third year.

AB: Third year, what do you mean?

TS: Third year that we offered classes at Kennesaw.

DY: We started offering classes in '65?

TS: Fall of '66.

AB: No. Oh, wait a minute. I'm saying the wrong decade, I'm sorry. Wait a minute.

TS: You started teaching here in '72.

AB: Wait a minute. I was trying to figure when I took political science because George Beggs taught it, and he was saying... That reminded me of what you said. He said, "It seems like the..." I don't know if he said the more mature student; I was older than the others. He said, "How do you manage to do all of this?" Because he had ten books he required you to read, and the final exam was on that. And I had a family and was working. He was bragging on me. I was thinking that was in '68.

TS: But you got your bachelor's in '71 so it had to be before then.

AB: But you had courses in '68. The nursing program started here.

TS: Yes, the nursing program started in '68.

AB: So I could have been taking political science here in '68.

TS: Absolutely. Our first classes were the fall of '66.

DY: Who did you have for literature? Do you remember?

AB: No. The name I don't. Because I came in the first night, and I think it was literature she taught us, and then her husband had some...

TS: Cary Turner? Cary Walsh?

AB: No, I know Cary Turner. I think this woman was either—she wasn't one that was here . .

TS: Part-time?

AB: But her husband had something wrong with him, and then somebody else came and finished it. So I don't remember. No, it wasn't Cary Turner. I can't remember. I can look... Maybe I can go back. *Banner* doesn't hold that, does it?

DY: No, not that far back.

AB: I'll have to go back.

TS: I've got the old catalogs if she was full time.

AB: Do you? Well, I can go back on my transcript and find out what semester. Yes, I'm sure I have all those folders somewhere. I keep everything.

DY: I know what else you've done too. You've taken some continuing education courses too, because we were both in some of Karen Thomson's continuing education courses.

AB: Oh yes, yes, I forgot that.

DY: Remember that? I think it was Alternative Healing.

AB: Right, we did yoga or stretch exercises. I couldn't even stand up on one foot!
[laughter]

TS: You must not sleep very much.

AB: Yes, I do. I get my eight hours.

TS: You work twenty-four hours a day.

AB: No, that's something I need. I need eight hours at least. And if I don't, then it gets me.

TS: I don't think I've ever seen a forty-three page vita before!

AB: Well, you know, that needs to be cut down. Service on the committees and all. Instead of redoing it, see, I just keep adding. Instead of going back and cutting all the committees! So is there anything else?

DY: Let's see, Tom, have we gotten pretty much everything what we came to get?

TS: How would you define master teaching?

AB: Oh gosh, you ask the hardest questions! [chuckle]

TS: We've asked everybody for a definition, and we've had a bunch of different answers.

AB: I'm not good at defining things. I think I'm more a critiquer than I am an idea person.

TS: What makes you a master teacher?

AB: Well, I think in how I deal with students. I say deal with students, interact with them and respect them. That sounds maybe simple, but it's not. I mean, by simple, it may sound too basic. But if you've got teachers that know all this fancy content, and they're not treating... I've heard students say, oh, you know. "In the classroom when she answered a question, you could tell she was putting you down" or whatever. And it's subtle, and it just hurts me so bad. And again . . .

DY: It does me too, Annette.

AB: They said, "Well, one student asked, and the student was a practitioner in this area of women's health and this person, oh . . ."

DY: It's an abuse of a privilege.

AB: Well, so being courteous and respectful which I would to anyone, but to students especially. And trying to meet them and assisting them—in this course that I'm teaching this semester. See, I'm not giving you a definition; I don't really know a definition. I know it from the inside. But the students have a research proposal, and they have to implement and conduct it. Then write it up in one semester versus a year, so it's not quite the scope of a thesis. They've had research the semester before, and wrote a proposal. So now they're carrying it out. I've told them that I will help them, and I do. They can come, and I'll help them in setting up a codebook, if it's quantitative. I use SPSS. I'll help them totally with that. And I help them enter the data and analyze the data, so that they can get through it and not have to pay somebody to do it. Then I hook up with... Talk about collaborate. For several years now, Lewis Van Brackle and Marla Bell, statisticians, have assisted the students. First, I had just asked if they would come over and give a lecture, and he said, "You know, we do service, and we would volunteer our time for the students." So for years now they come over and give a lecture the first night, and tell the students what they're about. Then the students

- make appointments with them, and they assist them with statistics. The students already have a proposal, but they need help with what sample size they need, and what kinds of statistical tests are going to work with their data and design. Then they can make another appointment to get help with writing it up—to help them express in a paragraph what they’ve done statistically. And it’s just been a great thing. All the professors ask for is a letter, which I tell the students to write up for their service, because it’s free. So see, then they don’t have to pay for a statistician, or for anybody to help them code the data, and enter the data.
- DY: So finding resources for students, that takes your time and your energy and yet it’s all for them.
- AB: And that’s exciting. They hate to do this project, but after they’ve collected the data... We always allow them, if it will work for them, to research an area that they’re interested in, but it has to be within a certain scope within primary care nursing. So when they come back from what I call the second presentation, which is an informal group describing their results and findings, they’re excited. Just to see their excitement is exciting. And then I ask that they submit their paper for publication. An article written for a certain journal, one that I approve, so it’s an article manuscript. And some have gotten published too. And I print off the articles that graduates have gotten published, and hand them out as examples. “Here they are, not long and complicated, but very good nurse practitioner journal articles.”
- DY: You know, you make it all seem so easy, Annette. I can see why you’d be wonderful as a teacher. You’re accessible, and your subject is accessible, and it’s going to be rewarding and fun.
- AB: Thank you.
- TS: Do any of the nursing professors ever come to you for advice on teaching?
- AB: Maybe. Now another thing I used to do is mentor new faculty coming on board. And at times they would pair you up, especially if we had a new faculty in community health, and I would mentor them. So we all have done that. In fact, now, this year, Ann White and Jane Brannan got a grant from the Georgia Hospital Association to do this mentorship formally. So now they’re asking for faculty to be mentors. We’ve got a lot of new faculty too, because we’re growing so fast. I think we had 800 students apply for spring semester, and we could only take 120. Eight hundred qualified.
- DY: Wow.
- AB: And we’re taking more undergrads. We’re admitting them twice a year, and they’re looking to see if we could possibly add more faculties and admit three times a year. The undergrad program is mushrooming.
- TS: Well, there’s a demand out there.

- AB: And see, there's a nursing shortage. Of course, you know that. But not only is there a nursing shortage, even more critical is the nursing faculty shortage. The median age is fifty-one years, and in ten years most all of us [current faculty] will be retired. I mean, nationwide.
- DY: Wow. Who are these faculty [members] who got this mentoring grant? I'm very interested in mentoring.
- AB: Ann White and Jane Brannan. They just saw it a few weeks ago and applied for it, and I think it's from Georgia Hospital Association. You see, nurses are not attracted to education, and nursing education doesn't pay [well]. The nurse practitioners can go out... They graduate and go out and get a job paying a lot more than if they come in and teach for us.
- DY: Hasn't the medical profession in the medical schools...? Don't they have a very strict mentoring system in there already set up?
- AB: Well, yes, after they graduate from medical school, I mean, their residency is mentoring.
- DY: Yes, because I've done some research on mentoring, and what's interesting is that in higher education that is where mentoring is not done unless women do it. Women are the ones who will do it most of the time.
- AB: I don't know how much mentoring is done in med schools. That's interesting, and I have heard... And when I taught medical soci [ology], I've had statistics on things, but in nursing in general, there have been high failure rates. But in med schools, they don't fail out, in general. And the thing is, I haven't had time to look into that, but I think they helped the med students. I mean in other words, if you stack your criteria really high, you know you're going to get the cream of the crop anyway. But if something does happen, I think they do mentor them to keep them in. So if you want to get in med school, you are unlikely to fail out. That's what I've heard! I don't know whether you want to edit that out or not because I've not done the research. But students do fail in nursing. I've talked and talked. But I was thinking, you talk about students and how to interact with them, and it's not an outstanding case, you might think. Fifteen years ago or so, I had this student. I don't know how to describe her: she was irritating. Yet she didn't irritate me as much as she irritated her peers, the other students. They just did not like her. This happened to be in my clinical group. If you're in clinical, you have a small group; it's not like the large lecture halls.
- DY: No, it has a certain kind of intimacy, doesn't it?
- AB: Yes. So I had her in clinic, and we would have conferences every day. It was like ten or twelve students in the hospital setting with eight-hour shifts. And you'd have a conference like for thirty minutes or an hour, and you could just see the others seethe every time she opened her mouth. I'm sure other teachers could do the same thing, but I thought, you know, I need to do something about that. I

didn't want to embarrass her or confront her in front of a group, so after a session I had an individual session with her. I talked to her about this, and I told her, "I think a good way to handle this is just you don't even speak. I know you've got a lot to offer . . ." I wanted to encourage her, but I said, "Just don't even offer it to them and just listen to them. And then after we have our clinical meeting, then you talk to me and tell me." And she sat there quietly with the others, and then their hostilities sort of dissipated. Because usually she was very verbal, and she took over, and she monopolized them and made them feel like they didn't know anything. That's a small example. But I thought, well that worked. And I'm sure other faculty [members] come up with little things like that.

DY: Oh, I don't know. That's a problem we all have.

AB: She was very irritating.

DY: And we don't know what to do. Often they irritate you too.

AB: Oh she did, and I had to... Every time I had to stop myself and think, now, who knows what goes on in her life; who knows "where she is." That's not for me to consider anyway. I've got to take who she is. Oh, she was very irritating!

DY: Well, congratulations on that one!

AB: But if you can work with the ones that are not ...

DY: Well, those are our challenges.

AB: Yes, the challenges. Anyway, I'm talking too much.

TS: Well, I think we started this project with the assumption that there was a tremendous amount of achievement on our campus, intellectual achievement, scholarly achievement, and maybe because we stay in our disciplines. I think it comes out loud and clear in this interview what we've been doing in this series.

AB: Well, with our college moving like it is and hopefully getting the doctoral program on board, and Dr. Sowell moving in terms of more grants and research...

DY: I'm so glad you are in such a good, dynamic place.

AB: I am too. I wish I had more years to live, and so I'll just see how it goes.

DY: You're making the best of what you got here!

TS: As long as Betty Siegel keeps going, there's no need for any of the rest of us to retire is there?

AB: She's my model.

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