

Wright State University

CORE Scholar

Wright State University - Miami Valley College of
Nursing and Health Oral History Project

College of Nursing and Health

5-9-2001

Curry, Donna Miles interview for the Miami Valley College of Nursing and Health Oral History Project

Carol Holdcraft

Wright State University - Main Campus

Donna M. Curry

Wright State University - Main Campus, donna.curry@wright.edu

Follow this and additional works at: https://corescholar.libraries.wright.edu/nursing_oral_history



Part of the [Higher Education Commons](#), and the [Nursing Commons](#)

Repository Citation

Holdcraft, C., & Curry, D. M. (2001). Curry, Donna Miles interview for the Miami Valley College of Nursing and Health Oral History Project. .

https://corescholar.libraries.wright.edu/nursing_oral_history/14

This Oral History is brought to you for free and open access by the College of Nursing and Health at CORE Scholar. It has been accepted for inclusion in Wright State University - Miami Valley College of Nursing and Health Oral History Project by an authorized administrator of CORE Scholar. For more information, please contact library-corescholar@wright.edu.

START OF TAPE 1, SIDE A

MAY 9, 2001

CAROL HOLDCRAFT: Okay, this is the first interview of the Wright State University Miami Valley College of Nursing and Health Oral History Project. This interview is being conducted with Dr. Donna Miles Curry on Wednesday, May the ninth, two thousand and one. Okay, Dr. Curry as you know you've been invited to participate in the oral history project and you've had a chance to read and sign the agreement that is before us?

DONNA MILES CURRY: Uh-huh. Yes.

CH: And I'd like to start first of all with just asking you to tell me a little bit about your personal background and how you came to Wright State.

DMC: Well, I had been finishing my masters in St. Louis University in seventy-nine. I had worked as a peds clinical specialist in peds nero but they didn't want to continue the position so I was interviewing all around the country. My real job I wanted was a clinical specialist and Cincinnati was actually asking for interviews. I had friends who worked at Wright State. I had had an instructor, Patty Erhart, who had taught here who had sent me a Christmas card. She had been my instructor at Maryville College and she had said "Oh, if you ever want to teach this is the place to come. It's so exciting." And so I knew of Wright State through that and then my friend from graduate school Trish Tranganstein who is from Dayton, Ohio had come home on Christmas break and gotten a job and she had started teaching and she communicated with me that this is really a great place to work. So when I came to interview, Wright State was willing to pay me to come to interview.

CH: Uh-huh.

DMC: So that's how I got to Ohio. And while I was here I of course interviewed down in Cincinnati too. Both places offered me the jobs. Cincinnati didn't act like they knew at all what they wanted from a clinical specialist and I didn't feel like going to a brave new world. And I knew all these people at Wright State and they actually offered me, they gave me a job offer the day I interviewed.

CH: Uh-huh.

DMC: And that was an amazing event in itself because when I came on one day you're taken to lunch. I was taken to lunch with Peggy Chin, this famous person in nursing and they asked me this question at lunch like "And so what was your favorite nursing theory?" Well at St. Louis University we didn't, if we talked nursing theory no one called it that.

CH: Okay.

DMC: And I had no idea that there was such a thing as a nursing theory.

CH: Uh-huh.

DMC: So, it's funny that- -it's hard hearing with this thing on so I took it off- -and so I said developmental, which being a pediatric person was a good answer.

CH: Good answer. Safe answer.

DMC: Safe answer. The fact that I didn't mention a nursing theory I wasn't like not hired or anything.

CH: Uh-huh.

DMC: But that was one of the big shocks when I came was the whole idea that there were these nursing theories. And I looked back and looked in my notebooks from St. Louis University and everything was written Roy, Sister Colista Roy. Everything, nursing was defined as the adaptation model and that's what I thought nursing was. I

had knew, didn't know anything different from that. So it was kind of interesting that was one of my first exposures to Wright State was my interview was one of the things that was different there was the theory, the heavy emphasis on theory, teaching theory.

CH: So where you had gone to school you were taught under the Roy model but it was never really emphasized that that was a theory or that that was ah --

DMC: But it was never called I mean she came every year to talk to us but it was a Catholic school and she was just another one of the nuns.

CH: Uh-huh.

DMC: (Laughs) So you know it was kind of like you just figured that she was just the head Sister's best friend or something that they had coming in. (Laughs)

CH: So, what year was this?

DMC: I came in seventy-nine.

CH: Okay.

DMC: I came spring quarter, nineteen seventy-nine to teach at Wright State.

CH: - -To teach at Wright State. So you were doing this interview in?

DMC: Oh, sometime during that winter quarter. So that was the winter of seventy-nine and stuff.

CH: Okay.

DMC: So that's how you know they gave the offer and my father said "You can go anywhere for a year. You know try it out." And I came and I'm still here indirectly twenty some years.

CH: Okay. So have you been here continuously during that period?

DMC: No. I worked here until nineteen eighty when a large group of us resigned because of the politics that were going on at the time and took a job in charge of critical

care at Children's Medical Center for a couple of years. Then got into parenting and had a baby and didn't think that being an administrator was compatible to parenting and they, Jill Oroszi, the business manager here called me up one day. She said, "I hear you're bored." (Laughs) "And would you like to come back and teach again?" And so I came back and taught until I, and during the time I was teaching here then Donna Dean was an acting Dean and she was saying you know if you really want to stay in teaching you should start your doctorate.

CH: Uh-huh.

DMC: So I started my PHD at Ohio State then. So I'm working part time, doing my PHD, have a baby, then had another baby, decided that maybe I should take a little time off. So I took a few years off there and came back in eighty-nine full time as first an instructor, then finished by PHD in eighty, became an assistant prof and the rest is history.

CH: So you've been here since that time?

DMC: Yeah, continuously since eighty-nine, right.

CH: Tell me about what you remember most vividly about those early years at Wright State.

DMC: What's most vivid about, this is when it's good to have the questions ahead of time. (Laughs) Um, well it was just, it was an inspiring thing. It was challenging because I was asked to teach things to the students that I think were exciting and progressive and I actually didn't know when I came. I mean everything was conceptually based.

CH: Uh-huh.

DMC: And we were, I came from a medical model program. So I was doing as much homework every night, more than the students just to keep one step ahead of them

but it was exciting because when you've been fairly recently out of a graduate program it all made sense. It was like the most wonderful post masters experience that you could go into and we had the structure of the teaching assignment which is still my dream to this day is we would only have classes for four days a week and Fridays was a professional day. So there was never, we didn't have any meetings or required meetings or classes on Fridays. That was your day to do scholarship or to work as a practitioner or something, which is what I usually did. I worked at Children's. Well, but they would also offer these impromptu workshops. So Gert Torres was writing her book on curriculum and she did four-week series where she gave us the galley proofs for her curriculum book and I learned more about curriculum. It was like sitting at the feet of a master with her. And then there was a couple of us, there were like three of us that were fairly new master type people that were all hired.

CH: Uh-huh.

DMC: Trish Trangenstein, Margaret Cruckmeyer and Linda Delaney and myself that were all fairly new to teaching and we would frequently be the whole population of these workshops. So we did that on several Fridays. And then Joann Ashley was here and she would do book club kind of things where she'd have us read books on Feminism. Again I'd gone from a Catholic program where I had no idea; feminism was something you know that was Ms. Magazine.

CH: Uh-huh.

DMC: And in reading, we'd read these books and we had these discussions. You know Shulmouth, Firestone and the dialectic of sex and things like this. And just listening to things it was like an education. I was constantly learning even though I

had a job and was here teaching students. It was more like a post masters program I call it. It really was kind of neat.

CH: Uh-huh. So a lot of the focus of the discussions had to do not it sounds like with the day to day operations of teaching the students but more with exploring ideas, the book clubs- -.

DMC: Well the curriculum stuff was very much pragmatic. I mean how can you teach you know you don't go out and just teach whatever you want to. She had the principle that I think most of us follow that you know you have to start out with a philosophy and then from the philosophy you develop curriculum strands, the key concepts. With her it was horizontal and vertical strands which was, I still like it today. It makes sense then. And how you write courses, the whole philosophy of, I still like her philosophy of education that you should never use a classroom lecture time to do anything that the student couldn't be doing on their own. So that you shouldn't be standing up and lecturing because if your just spoon-feeding them content they can get that from the book. You should be using the time in class like to do things like case studies and processing of the information. Now she said that. That doesn't mean that we all did it. I think we still primarily lectured.

CH: Uh-huh.

DMC: But I think it's a great philosophy for teaching.

CH: So there was some innovative type ideas?

DMC: Oh yeah. I'm trying to think. You know I remember designing electives with people.

CH: Uh-huh.

DMC: That I didn't, that was really, we worked as a team. It was very collaborative. I was also involved, they were starting to write the nursing process textbook at the time that came with Janet Griffith and now I'm blanking out her name, Julie, no it was Griffith and Christianson, Paula Christianson who was actually I did a lot with socially because we were both single young women. So we did lots of stuff together Paula and I. Really neat people but when a bunch of us all resigned and left in nineteen eighty and the book wasn't really done for some people that was a good time to back, to either step out of, the person who I was co-authoring the book with decided not, we decided not to stay with the book which is a shame because it was a very successful book. (Laughs)

CH: Uh-huh.

DMC: And we were writing the chapter on analysis in the nursing process.

CH: Uh-huh.

DMC: I was doing that with Suzanna Ryan.

CH: Okay.

DMC: So that was, I mean that was so exciting because I didn't really feel like I was mentored in scholarship and we were doing all this stuff in big groups. It was very collaborative. So it was real exciting. So I think that's what made it sad when so many of us left in nineteen eighty but I think the outcome of that was for the good of the community.

CH: Can you tell us a little bit more about that period of time before the resignations? What was going on?

DMC: Well what was going on, I think you have to look at the whole of the climate of the community was. The perception in the community was this was pretty

much; this is the first bachelorate school in town, at least officially. So people had a lot of interesting, I wouldn't say they had a lot of respect for bachelorate graduates, they hadn't proven themselves. I don't think that's what, people weren't really sure. In the health care community I think oh, well you have a bachelorate degree you think you're better than us. And it's interesting because I saw that in St. Louis too. Because I started off in an AD graduate and we said that the same thing about the St. Louis University graduates. Oh, they think they're better than us. But I don't know we did that in other places. So you come and you've got people, you're working in a situation where people have already put up, I don't know what I want to say, a wall or something that they want you to get around.

CH: Uh-huh.

DMC: And so you have to try and prove yourself. And then the perception in the community that our graduates also weren't clinically competent. That they didn't come out with a lot of skills, like they weren't, as far as they didn't know how to do things.

CH: Uh-huh.

DMC: What Gert's philosophy was is that you give people concepts. You can train monkeys; she didn't like the concept that you train nurses. You educate nurses. You can train animals. And so given the amount of appropriate period of time once you start in your job then you would do well. Actually she had data at the time for satisfaction that sure right immediately on hire the person with an associate degree graduate the people were happier with at the employer but a year down the road they were happier with the bachelorate graduate because they had the ability for adapting and growing more then kind of the associate degree person had maxed out. But regardless of us having this data we had this perception in the community that we weren't doing our job.

They also had the perception that the state boards, we weren't passing state boards as a high rate as they'd like which I, that's another topic of discussion on the merits of state boards.

CH: Was that a topic within the college the merits of state boards at the time? Do you recall?

DMC: No, not necessarily. Only that we refused to teach to the boards. You know? That was not, again that was not what bachelorate education was about was not teaching to the boards.

CH: Uh-huh.

DMC: So it's like sure you could sit and just spoon-feed the students what they have to regurgitate for boards but that wasn't what the philosophy of our education was.

CH: Uh-huh.

DMC: So you have that going on and some people were unhappy and I don't know who it originated from in all honesty at the time but the School of Medicine decided that we weren't preparing the kind of nurses that the health care community needed. So, they wanted to develop their own nursing program over in the School of Medicine to put out clinical RN's as they called it.

CH: Uh-huh.

DMC: So, I'm not sure if they were going to put out a diploma. And then the other feeling at the time was that wanted to take our existing program and totally put it under the College of Medicine which of course nursing having fought so hard to get so independence and not being able to progress that was just like you know if you listen to all the feminist topics that we've talked about over the years and things. I think that was just something that was just unconscionable. (Laughs)

CH: Uh-huh.

DMC: And so, we had this one meeting one day when we all walked over into Dr. Beljan's office and he would have been I guess the Provo, I don't think they used the term Provos then. And basically in that meeting they insulted us to no end. I mean they said your [sic] incompetent. The community perceives you guys as incompetent as nurses, that you don't know how to teach and so why should we let you keep running this nursing program.

CH: Uh-huh.

DMC: And that's nothing but the worst thing to tell somebody because I personally of course because I had had five years or six years of clinical experience at that time did not feel that I was clinically incompetent.

CH: Right.

DMC: I was probably at the peek [sic] of my expertise and I got, you know that inflamed it.

CH: So that meeting was called? Or that was a meeting that-

DMC: I don't know remember who called it or whether we asked for it or they asked for it but we walked over. It was held in the boardroom, the old boardroom in Allyn Hall.

CH: Uh-huh.

DMC: And so, I can remember many people then talking about resigning and I held out for a while because I didn't want to resign until I knew I had a job.

CH: Uh-huh.

DMC: We had people calling us and interviewing us from Dayton Daily News about the whole issue. So it wasn't like everybody put in resignations all literally at one time.

CH: Right.

DMC: I mean there was some who put them in to begin with and then I waited until closer 'til the end of May I think because I'd gone and spoke with the director of nurses at Children's. She was ecstatic. She was like oh, I'd love to have you, and put you in charge of critical care.

CH: Uh-huh.

DMC: So, once I knew I had a job, I'm not a real brave person.

CH: Well you were supporting yourself.

DMC: (Laughs) Really I was single. So I, that's when then I put in my letter of resignation. I think there was eighteen of us or so that resigned. It was, I perceived it as the entire faculty but when I look back on it now I guess there were still a handful of people that stayed. Period. And then there were some who only stayed over the summer to help the transition of whoever new came in to work. But I thought it was an interesting thing because my perception of it was right or wrong whether we did the right thing or not it was the best thing for the community. The back of it, it was interesting, you were talking about the time before we all did this. It was interesting we had these discussions and we'd have faculty meeting, we had curriculum meeting every Wednesday afternoon, every, I think once a month at least, in the afternoon it would be either curriculum or faculty meetings. At those, Gert was really quite charismatic, and would talk about the issues. The discussion was just quite interesting about it. And it's funny because I can't remember the details at all about that but the discussions were quite sharp and pointed about you know what should you do. I really think she was influential in making me feel like I was doing the right thing.

CH: Uh-huh.

DMC: But like I said whether it was right or wrong you know after the fact I think the best thing that it happened was for the communities. Here you know you have all these futuristic, educated nurses now working in the agencies that wouldn't have been in the agencies to begin with. And I think it actually was the best thing for the community because like Bonnie Summerfield and I went to Children's and Bonnie was in nursing education and I was in the clinical area and I think in our own ways if you look at Children's philosophy of, they didn't have a philosophy of nursing for the hospital. I wrote the philosophy at Children's Hospital. You know you go through and you look at some of the policies and things we influenced and you can see Wright State's School of Nursing influence.

CH: In different organizations.

DMC: Yeah. I think it really had its good impact. So that was that.

CH: Okay. What were the challenges you faced in fulfilling your role at Wright State?

DMC: The challenges. You want just; you want me to address just those early years or all of my years?

CH: We're really focusing on the years form [sic] nineteen seventy-three when the college opened to nineteen eighty-three. So if you could-

DMC: In my first years like I mentioned earlier was coming in from a different model because I came from a medical model curriculum. Clinically I had no problems teaching the students when I was in Peds but I didn't know the nursing theories. I had to quickly learn all the nursing theories. That little book by George became like my bible. I had to learn to think in the nursing theories and to grade the student's papers. So that was a personal challenge. The other thing was sometimes you were asked to clinically

teach in areas that, because conceptually you should be able to walk into any study. Occasionally I was asked to cover clinicals in areas that I didn't know. And so that was challenging.

CH: For an example might be?

DMC: Psych. I did psych. (Laughs)

CH: Uh-huh you did psych?

DMC: There was a time when, I can't remember who, for some reason someone couldn't cover the psych and it was community psych granted so it wasn't inpatient and it was down the boarding houses there on Lexington and the people were outpatient psych. Basically what the students were doing they were doing community nursing.

CH: All right.

DMC: Okay, I can handle community but the population we're working with were these psychiatric patients in the boarding houses. So the students were going in doing lectures health teaching to them on personal hygiene and you know pretty benign type stuff. But still I was dealing with a client population that I knew minimal about. You come in from an associate degree program had just the tiniest taste of psych nursing. So that was something of course they don't do anymore. (Laughs) But that was a challenge.

CH: Okay.

DMC: So then I came back in eighty-two, between eighty-two and eighty-three I taught clinical and that's all. I did was teach clinical. I had no challenges then. It was actually fine actually. I had a good team. Again we really used the team concept when we taught and I liked that. That's something I think we've lost currently. We don't really work as a team on our courses. So that was a big thing way back then.

CH: What were you trying to accomplish in those early years while at Wright State?

DMC: Me as an individual personally?

CH: Uh-huh.

DMC: Oh, I guess I was just trying to get a springboard on my career. You know to try one more thing of where I wanted to go as an educator. I guess that was my personal accomplishment other than putting food on the table.

CH: Okay. Describe your relationship with administrators within the college.

DMC: Within the college?

CH: Yeah.

DMC: Okay. I had a good relationship. I mean I had a lot of respect. I was in awe of a lot of them. My one direct supervisor, oh I'm blanking on her name, she went to New York State. It began with a B, a short name. She went to the VA shortly.

CH: Carol Batra?

DMC: Excellent. Thank you. Carol Batra was wonderful. She was kind of covering some of the aspects of the undergraduate program. I remember reporting to her for some stuff. And then Marg Stanton who was the actual associate dean who I otherwise directly reported to. You know I didn't feel like there was anything I ever couldn't talk to her about. I didn't really seem to have too many problems.

CH: Uh-huh.

DMC: And then Gert was your typical dean I guess. You really didn't see the dean very often. You know she was always off doing speaking engagements. I think that's a part of the job as a dean. The dean you really didn't see. One summer we were here and I taught and her birthday fell in the summer. So we threw a surprise birthday party

and we trashed her office. We covered it with like a disco, it was the disco era, and we made disco dancing shoes for her. And she just loved it. So, as a group entirely it was, much more a, what do you call it, a fiat management model.

CH: Okay.

DMC: I didn't feel like you know it was them and us. That you know I could walk across the hall to people like Joann Ashley and sit her chair and ask questions. Everything was very, I think that was a really neat thing, very growth promoting for me. The same thing with Gert and a lot of us did things socially together too which I'm not sure that's the best thing when you're working but we would do picnics at people's houses in the spring. So I think it really helped the cliqueness [sic]. I don't know that anybody didn't participate in stuff like that like the birthday party.

CH: I was going to ask about colleagues and so it sounds like you're answering that already but your relationships with the colleagues.

DMC: Yeah, I think it was really quite good because you know when I think of, it's kind of like your years, when you think back to your years in college as you develop these intense relationships that are friendships that you'll have all of your life or you have the potential. I look at those early years as almost like I felt like my years when I was first here were like a continuation of college. It's those professional collegial relationships that I initiated during that period I could probably go to most of those people still and you get so much from, like Susanna Ryan was a few years ahead of me and we always had a chair there and we- - (recorder is turned off and then back on) projects together and it was just, I think it was very open. It was kind of neat. Agnes Bennett her chair was always there to talk about, we did an elective once on human sexuality and at

first I was just going to teach it because I thought it was an important topic that students should have.

CH: Uh-huh.

DMC: And she says well you know I'm your CB person. You really should have me on it and Linda Delaney should be on it because she's an adult aspect because your peds. So we did a lifespan perspective to human sexuality in that elective which, so we worked as a team. It was just a really, a good elective. It probably should be taught again.

CH: How about with students?

DMC: Well the challenge I personally had at that time and what is true at Wright State then is still true now is that our average age of our students is sometimes around twenty-five. At the time I came here to teach at Wright State I was twenty-four. So I was quite a young masters prepared person again because I finished my AD when I was nineteen and bachelorate degree at twenty and my masters at twenty-three, it just kind of happened.

CH: Uh-huh.

DMC: Child prodigy, (Laughs) But so my, I found hard to have relationships with students because I was so close in age to them. I mean I had good relationships you know there were some students I met that I thought were you know delightful students but I'm trying to think of any of them right now that I still have, Sandy Bonamason who used to be at Hospice was one of them. What I thought was neat was we had these community health groups and what we would do with the curriculum is you would have this group of students and you'd have them in one course you'd be their faculty advisor for their community health project where they assess the

community and then in the next course they actually implement it. So those ten students that might be in that community group you really got to know across two quarters. So that's the group Sandy was in. Mike Davis, oh, I'm blanking on her name, she's a school nurse in Kettering Public School. It will pop in my head at some point but so you got to know that group really well. But it was real tempting because the students would be trying to do things like the School of Nursing with the School of Medicine we're going to do some powder puff or not powder puff, some flag football team or something like that. And I felt like I was still a kid in some ways and I wanted to go and join them and play but is that the most appropriate thing for the faculty person to be doing? So that was just kind of a challenge at that point.

CH: A little bit of a challenge for you because you were so young at that point.

DMC: Yeah. I think that's the one reason in some ways I went into Pediatrics as I felt close, I could distance myself and work professionally with babies as a nineteen year old versus working with adults.

CH: Right.

DMC: So I think I kind of went through that same thing then as an educator. Now I feel like I'm everybody's mother. (Laughs)

CH: I'm old enough to be your mother. Tell me about your relationships to community institutions such as hospitals, agencies, etc.

DMC: That's a good one, relationships. When I first interviewed at Wright State one of things they did which I really liked and we don't do that as much as we used to is they took me on a tour of Children's Medical Center. And Lois Fish gave you the tour, she had been faculty at Wright State and I think was then working at Children's in nursing education.

CH: Okay.

DMC: And so she a: new 'Wright State's curriculum really well because she taught there and she knew the hospital. And I remember thinking what a neat hospital this was. I had been at a peds hospital in St. Louis that was, there's two hospitals in St. Louis and one was St. Louis Children's Hospital which was Wash. U's Med Center which is where all the money was. I was in the Catholic Medical Center which was Cardinal Glennon Hospital for children which we took everybody regardless. So you didn't have as much of the market. So just the facilities where [sic] so much prettier. When you're the only peds hospital in town you get lots of money. So, I established a really good relationship with them. I would work there, like I said, on my professional day probably once a week and half the reason besides keeping your skills, we were only paid thirteen five. That was my starting salary was thirteen five. Well you know my annual salary had been sixteen thousand in nursing before that.

CH: Okay.

DMC: So to kind of live at the standard of living that you were used to you needed to work quite a bit to make up for that income. So that was my, primarily in those early years was the only people I really directly worked with was Children's Medical Center. It was a good relationship and obviously because then they picked me up when I left and I still have that relationship. I think it's a good relationship with them. I now have relationships with more agencies.

CH: Uh-huh, but at that point that was primarily Children's Hospital.

DMC: Yeah, that's truly, that's truly the only thing I knew. (Laughs)

CH: Okay. How did your experience at Wright State affect your career since then?

DMC: Oh, interesting. Well I think in some ways, it's interesting, because I left would I have ever gone into administration at Children's you know if I hadn't left. If I hadn't come here and hadn't left would I have done what I did. And I think the expertise that I gained in those years I worked in Children's when I came back to the teaching made me even a better teacher. And so it's kind of a ripple affect [sic] and I possibly maybe wouldn't have ever gone on for a doctoral degree if I hadn't taught here. Like I said when I came back the second time to teach in eighty- two Donna Dean was an acting dean at the time and said well if you want to stay in education you need to go on for your doctorate and here's a good program at Ohio State that I know a lot of people have done because they didn't have the PHD in nursing then.

CH: Right.

DMC: And you should degree in family relations and human development with a minor in developmental psychology which is what I did and so I think you know because of that I went on to do what I'm doing and I came back. It's like a big circle.

CH: Was there emphasis at the time you were here before eighty in having masters prepared people go on and get their doctorate?

DMC: You know at that point people seemed to be talking like the master's degree was your terminal degree that you could stop. I really didn't get that message. We had people who were getting tenured at the masters level in nursing in the college. I didn't feel that then but I think that was just starting in the early eighties was now masters isn't good enough. You need to go on for the doctorate degree.

CH: Okay.

DMA: But when I did teach here at Wright State, when I first came the majority of the faculty weren't doctorally prepared. The majority were just masters prepared.

CH: But there was a leadership that was doctorally prepared like Dr. Chin.

DMC: Right. She and Ashley and Falcow and Batra and Donna Dean was gone at the time because she was one of the people who had been here when the school first opened who then got the word well if you want to be an administrator you should go on, pretty much at that point if wanted to be in charge you were told to go get your doctorate. So she'd gone and got the degree in educational administration leadership at Ohio State. So she was gone. I did not know her when I first came because she was off doing her doctorate at Ohio State.

CH: Okay.

DMC: And Julie George actually was doing it too because she had come and was doing like her practicum or something where they follow around a leader, an administrator. So she follows the dean around every minute of every day, even into the bathroom. So I guess she had to keep a journal of what the dean does, what does a dean do. And I can remember seeing her do it and maybe Sue Fitzsimmons was following somebody because Sue was also getting her PHD at the same time because she had just left and was working on that.

CH: Okay. Is there anything I did not ask you that you would like to talk about or share?

DMC: About during those early years, none I can think of right now.

CH: It comes to my mind, Donna as we think about these questions that we're not asking specifically about relationships with the wider Wright State community of teachers, faculty and administrators.

DMC: Uh-huh. With the rest of the campus?

CH: Right.

DMC: So, we should add a question on that?

CH: I think so.

DMC: So, do you want to ask me about the rest of that?

CH: Yeah. Tell me what you recall about your interactions as the nursing faculty with the rest of campus.

DMC: I think my interactions were pretty positive. Again I was fairly a novice instructor. I'd done some teaching in St. Louis but not, I mean obviously I was pretty much, I'd pretty much would consider myself a novice instructor. I always was amazed that these, other people would accept you as a colleague pretty evenly. I was immediately thrown onto university committees. I was on the agenda and elections committee, which at first I thought oh this is a cushy job. We just would get together and come up with the agenda for every faculty organization meeting but low and behold because there was a vote done in faculty, the university faculty level related to this issue of whether or not they should allow the School of Nursing to go under the College of Medicine, the School of Medicine. So here I'm at this big meeting where I'm in charge and helping with this election and it was interesting because they stack, at that time they did what they've done traditionally is they called all the School of Medicine has all these people who are considered faculty which is proportionately, a disproportionate number of people really for their discipline because everybody that's out there that the university ever touches they call faculty. So they stacked this room. (Laughs)

CH: This is a general faculty meeting?

DMC: It was a general faculty meeting called to vote on the issue and I don't remember exactly we'd have to pull out the archives on that but it was very political to see how the School of Medicine mobilized faculty there.

CH: So there was a large number of physicians who held faculty status?

DMC: So that was a fascinating piece to see but I thought in general it seemed like the rest of the faculty seemed to support us. I think Jim Sayer was president as always. (Laughs) I can't remember exactly who else I worked with on that committee but you know it was pretty positive. You know you pretty much taught within your department so other than committees you didn't interact with that many people.

CH: Okay.

DMC: So, but otherwise it was pretty positive.

CH: Okay. What do you recall the campus looked like at that point?

DMC: Oh, the campus. (Laughs) You know what's interesting I had interviewed at another college, Southern Illinois University in Edwardsville and the similarities between the two campuses was so striking. You're out in basically a ruralish area that's kind of farm land and on the one side on Colonel Glenn there was the old farm where the horse stables were which are gone of course that's when they put the Nutter Center in that was taken away. So, there was these horse riding stables, the campus basically was the library, performing arts center, the quad with Fawcett, Oelman, Allyn Hall and the med school was just, had just been built. Of course you go over to the old student union and that's the only gym we had and the only dorm was Hamilton Hall. Period. So it was a lot smaller than what it is now. But we were on Fawcett on the third and fourth floor. We had our offices on the third floor. We were sharing offices. We were all packed in. The only people, it's interesting here we think the window's the big deal back then you've got your own office if you were like tenured. So like Agnes Bennett was tenured as a masters prepared person but you tenured and you got your own office. The only offices that they gave to single people by themselves were inside offices with no windows. So those of

us that got windows were in the outside offices that shared. So I shared an office with Kathy Leonard and then Kathy Eilers.

CH: Lots of changes.

DMC: We were packed in like little sardines. We used to do required mass advising. Oh, we were talking about students earlier, I forgot that. Every quarter your students all were required to come and see you as a faculty advisor.

CH: What was that like?

DMC: And then you'd go through their program of study with them. It was chaos. (Laughs) You know they had these set times that they'd have to come for these appointments and I mean in some ways it was a good way to meet them.

CH: You at least touched base with all of your advisees once a quarter to sign their registrations cards.

DMC: Exactly. So that was something different that we did then. I thought that was pretty good. But that was the campus. There wasn't much campus life at the time. I don't think there was as much, it's definitely grown, the university's definitely grown since then.

CH: Pretty much a commuter--

DMC: There was no place to go out to eat. We had the faculty dining room and then we had a faculty bar. That's gone. (Laughs) But if you wanted to eat there was Tuddy's here or you had to go into Fairborn to some little bity hole in the wall but there weren't really restaurants around here. So that's all changed.

CH: Uh-huh.

DMC: No fast food, no food court so that was a little different.

CH: I want to thank you so much for sharing your memories of these experiences that you've had and we will be typing up a transcript that we will allow you to clarify any of the names that you may have mentioned.

DMC: Okay.

CH: Thank you.

DMC: Okay.

CH: End of interview.

END OF INTERVIEW