Interview with Robin Britt

Robin Britt EDD, RN

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RB: We have one Sigma Theta Tau which is the national nursing honor society chapter and we were the 48th in the nation and there’s now like over 550 international and national and when I was “quote” Vice President of the Houston Chapter which was President of the Houston Chapter, Dallas was the quote “Big deal” even though we chartered together, we did everything together we didn’t get our own money so I separated us. So we are chapter 648 and they never thought that they would get to 648 and they are getting close and that’s why they gave me that number and so you can ask me this later but it is a funny story, funny and maybe not so funny for Dallas. But you’ve got to have your own budget no matter what you are running.

NG: Okay so I’m going to begin by just introducing the interview and then start by asking some biographical information and then start by getting into your education and professional life.

RB: Okay.

NG: Alright this is Natalie Garza it is Friday November 21, 2014 and I am interviewing Dr. Robin Burke Britt in her home on Cedar Creek Drive. Okay if you could begin by telling me what your first name is? I mean not your first name your whole name sorry.
RB: Yes that’s a funny story. I was raised Catholic (now reformed) but Mary Robin Burke. I married my husband in ’73. So my first name was Mary Robin. My dad actually wanted to name me Anastasia. I was born in 1950. My mother was going to call me Stacey but somebody got the right idea of May and they named me Robin. So I had had a little sister a year before in 1949 who died of what we then called Hyaline membrane disease which is now called Respiratory Distress Syndrome I, no Surfactant in the lung. As a newborn [born at] 33 weeks, [the same as my sister], I got the first incubator ever at Saint Joseph Hospital. Under OB/GYN Dr. Herman Johnson and my Pediatrician who is long gone both of them Dr. Blocksome and there is a wonderful book that I’m going to share with you about the history of pediatrics and neonatal care with a physician a woman physician here in Houston but I lived at 33 weeks and 4 pounds and 1 ounce and you are supposed to stay until you are 5 pounds. I went down to 3.11 (all newborns go down). But I went back up a little and then the nuns said, “Oh no its 5 pounds 8 ounces.” to my father Mr. Burke and Mr. Burke pulled out his pocket since nobody had insurance in 1950 and said, “Well Sister Mary the last 8 ounces are going to have to be on you.” So they wrapped me up and let me come home. I had to be Mary Robin because you have to as a Catholic have a name that’s a Saint and Robin is no Saint.

NG: Okay and is one of those a Maiden name?

RB: Mary Robin Burke I’m from a native Houston family. A big golfing family and my uncle Jack has won the master’s and that’s my dog Burkey barking. I’m going to get rid of her in a minute. My grandfather was the very first golf professional at River Oaks Country Club. And everybody plays golf but me because when I was born very pre-term
I had very crossed eyes and they did their best one of the most incredible… there were very few pediatric ophthalmologists back then but Dr. Goar (G-O-A-R) a just a genius evidently and was in Houston at Saint Joe’s and I was operated on at age one, three, five and they tried to repair the strabismus which is another term for crossed eyes but mine went out or over corrected. So the brain is so incredible that it just removes that vision so I don’t see two of you as you sit here. So it’s called amblyopia and what’s so wonderful about all of this is that I got to look up my birth record when I went to work at Saint Joe’s in 1970 as a student. So I was breach, turned around inside which is called internal version, had three loops of umbilical cord around my neck and under my leg and my poor mom was 5 feet tall and the most she ever weighed was 100 dripping wet pregnant and so out I came and had these eyes. So I was patched from 6 months to one year. But long story short I don’t play golf because I only have one good eye. So watch out Natalie I’ll be looking over here too.

NG: What is your birth date? You said 1950.

RB: I was born May 6, 1950 and that was 7 weeks pre term. I don’t believe a thing about astrology but that makes me a Taurus.

NG: Okay.

RB: Some people say the characteristic fit but that wasn’t really my due date.

NG: So you say you were from a native Houston family and you grew up here.

RB: I did.

NG: What was that like growing up here?

RB: Both parents were native as well. Both of my parents were native Houstonians.

My mother Mary Evelyn Harris Burke married my dad Edmund Thomas Burke in 1947
and had her first child in ’48 so I had a brother born two years before I was and then I have that little sister who died of the respiratory distress. She lived three days and was actually buried and was 33 weeks gestation. And then I was born in 1950 and I do have an incredible memory since age 3 of my childhood because we lived in a neighborhood called Midlane which was inside the loop, as we would call it now in Houston inside 610, and it had a train right behind it and now it’s a neighborhood that’s still there four or five streets long all with mansions. When I was born I was taken home to this home at number 18 Hackberry Lane. It’s now a mansion. It was a little, tiny World War II ranch house. My father was a Marine, came home from the service went back to school but my mother got pregnant after they were married but they couldn’t, he didn’t finish school. Barely… twelve hours short. He went into the uniform business with my mother’s dad. It was called Harris Uniform business but my dad was on Shepherd so he called it Burke uniform and back then every policeman, every Sheriff, every Constable even every bread man had their uniforms custom made for them. So you would measure everything and my dad invented a waste band that didn’t need a belt. It was not a sansabelt but a waste band that didn’t need a belt and it became quite famous and you can’t copyright an idea but it was really good for golf too. So my dad worked at Burke Uniform and while we were on Hackberry. I would think my dad was quite adventuresome and as was my mother. My mother was a lover of mid-50’s and both of them went to the University of Texas and she was a fine arts major and she loved architectural design and mid-50’s so we built a very maverick house in a neighborhood called Charnwood which was just about 1/2 a mile west of here on the corner of San Felipe and Voss. That is another thing to remind the people listening to that history. When we were growing up in Houston we knew no
Latinos, Hispanics. We knew very few of any other foreign people. We knew of course our black helpers and friends but we didn’t have very many in school with us. So instead of calling the street S-a-n F-e-l-i-p-e “Felipe” [pronounced in Spanish] all Houstonians called it San “Fil··i·pē” and that I think is a really interesting point about Houston that you can tell from every person who was born here in the early 50’s we don’t use any of the correct Latino terms for some of our streets like Navarro Street. We don’t use that. But anyway we moved what they called out to the boonies. I mean San Felipe wasn’t even through Voss to the next area it was literally called “the prairie.” There were farms and ranches out here. This neighborhood, Briar Grove, was here with a few houses but we were the third house on our street and it was a mid-50’s house with actually an island but we called it a cook center because there were no islands in kitchens then. My mother actually put a cook top in an island and we had a round table and an opened concept so the whole thing was rather different. It’s now bulldozed and I can tell you that almost every house that I’ve ever lived in including my lake house up at Lake LBJ is bulldozed and that’s a problem for Houston I think is that all of our history seems to be bulldozed.

NG: Now did she help with the design of that house?

RB: The actual architect was a guy that helped on the design of Champions Golf Club my uncle Jack and a golfer named Jimmy Demaret started building Champions when I was five so we spent most of our weekends out at this golf club on what was then called Jack Rabbit Road, now is 1960, and it was a little tiny country road. He was building this golf club with an architect name Horace Norman and he was a good friend of ours and on the board of the club as was my dad. In fact my dad’s number at the club was #2 after his brother Jackie. [The architect] let my mother do the drawing [for our house] but he then
drafted it. So yes it was a one story mid-50’s which is really not my style now but she had terrazzo tile on the floor I mean you know everybody else had wood. It was just a really interesting fun, angled, a.k.a who is that guy that’s built Frank Lloyd Wright-esque it was a bit of Frank Lloyd Wright who she really loved but she knew that some of his design was impractical for five children.

NG: Oh so there were five of you?

RB: Eventually. My brother was born in ’48, the sister was born in ’49, the one who died. I was born in ’50. My brother John was born on Christmas Day in ’51. Then my mom lost a child at home a little boy. I was the only one there and I think that began my major interest in healthcare in general either medicine or nursing, very traumatic to see a baby in the toilet. So I called the doctor and got the ambulance there and the whole bit. Then mother waited about four or five more years and had what she called her second family which is my brother Jimmy who is 7 ½ years younger than I and lives two streets over. Mother considered this her second family, my sister and brother did as well, because Jimmy was born 7 ½ years later than I, a bit pre-term, but not as much as I. Then literally one year later my mother had her seventh child in 10 years and that was a very Catholic thing to do. My mother was a convert and in 1948 you got converted as you were walking down the aisle in the church. So she converted from Methodist faith to the Catholic faith. Carrie, my little sister is 8 ½ years my junior. All of my siblings live in Houston, all of their children live in Houston, all of their children’s children. I have grandnieces and I’ve got one on the way, grandnephews and one more boy on the way. My dad was one of seven, my mother was an only child. So I had seven sets including my parents of aunts and uncles. It was a village and I have thirty-one first cousins and
the majority [live here], about three are not here in Houston. So I know almost all of their children, things they have gone through. It is lovely to have in Houston a major, big family and having been raised here my earliest memories of school were going to what was called Pumpkin Park for preschool. Susan, Dr. Susan Cooley is restoring [Pumpkin Park] and she is a Ph.D. nurse who I was on her dissertation committee but I have known her since she was a little girl. Dr. Cooley is younger than I but her dad, Dr. Denton Cooley was a good friend of my dad’s and my uncle Jack’s and he was one of the first members at Champions and even though he didn’t play golf and wouldn’t have ever had time to. But that was my first memory of nursery school was going out to Pumpkin Park and there was this nursery school at age three and four and most of us learned to read and/or do some small sums with our numbers before we went to kindergarten. I went to kindergarten actually at the same kindergarten as my husband which is amazing. But then again my husband’s mother and my mother went to Lamar High School together and knew each other through college at different sororities and different activities and then were in each other’s bridge clubs. So I didn’t really know my husband until I left Catholic school and went to Lee High School. Growing up preschool at Pumpkin Park and then Saint Michael’s Church. I was baptized at Saint Anne’s which was the only real church close enough which is on Westheimer at Shepherd but then as soon as Saint Michael’s on Sage Road opened, Catholic Church, that’s where we began to go to church and that’s where I attended from first grade to eighth grade. My kindergarten was at a school that’s been blown down and it was called Rogers and, Will Rogers not T.H. Rogers. Both my husband and I had the same teacher. Her name was Miss Humel and she actually was a polio victim. During the early 50’s lots of polio, all of us were scared
to death we were told not to walk in dirty water, but Miss Humel had Polio and you always remembered your kindergarten teacher because she limped but she lived. Biggest memory of Houston then was you got your milk and your chocolate cookie and your nap. I never took naps so I was always up and Miss Humel would say, “Robin you have to… Mary Robin you have to close your eyes.” Then we started first grade at Saint Michaels and I went first through eighth grade at Saint Michaels which was just a joyous, joyous time. Mary Robin, Mary Robin lots of spelling bees. Lots of awards, lots of fun, fun friends whom I still know to this day and we actually had in each class a nun teaching us. There were two classes where there were lay people but one was Miss Mary Burke. Here I was Mary Robin Burke and I ended up having her twice in third and fifth grade. She ended up getting a parking ticket and taking us all down to court with her. So I was on the first page of the Houston Post with Miss Burke teaching her history lesson with her ticket and us going down to the court. So it just was hilarious. Life was just a lark. Although as we went along during that time period as you know there was the Cold War and many of our parents stored up food, made hallways into bomb shelters. I had some friends and we have some houses here in Houston, one on Tanglewood and one on Kirby that we knew had an underground bomb shelter. And they still are there. So it was a scary time. We learned a drill by the time we got into sixth grade we learned a drill. I was eleven and to get under our desks and put our heads down and I used to ask the Sister, Janet Marie. “What good will this do Sister?” I do vividly remember the day President Kennedy died. I was thirteen and he had been in Houston the night before at the Rice Hotel. We all were well aware of him being a Catholic the first Catholic President, the youngest President and we were all shocked that he was killed in our state. So we
watched TV for three days in a row. Everyone’s parents ran to the school with their cars and picked up their children and took them home and put them in the closets or the hallways and shut the doors because we all thought that Castro, with the Cuban Missile Crisis, that’s who had gotten together with the assassin and had killed President Kennedy. So we really were freaked out. We put the TV with the little rabbit ears in the hall. Finally after about two days my dad convinced my mother to let us out and we got let out and we went back to school after four days. After the burial and after watching little John John and Caroline. Just three solid days and at that age of thirteen I saved the Time magazine, I saved Life Magazine and I saved both of our Sunday papers, The Chronicle and The Post. And I still have them. Very, very important time in Houston.

NG: I want to ask you one thing about your mom. Did she finish her bachelor’s degree?

RB: She did. My mother got a bachelor’s of arts in English. She had eventually changed from fine arts, made it a minor because she decided I mean she was a great painter, a good sculptor. She worked with Charles Umlauf who was a very famous sculptor but he was also a bit of a raconteur or shall I say a misogynist let’s just say he pinched my mother’s rear rather often and then when Farah Faucet ended up going there and he was still living and teaching the same thing happened to her. So my mother used to laugh about that. But yes my mother ended up getting a degree in English and my father ended up being an entrepreneur. He was in so many things and so many businesses. So we were either rich or we were not. I was very used to an upheaval in my life and being kind of a peace maker and “let’s make it all work.” I learned to cook at ten and baby sit at ten and you grew up very fast in a large family being the first girl.
NG: Did your mom ever work outside of the home?

RB: Later but no. I had the at home, get home from car pool, or she was picking us up. The only time my mother ever picked us up was that dag gum missile crisis, and the Kennedy deal, and whenever a dog was killed on the street. We had dachshunds and we were on this very busy road, Voss, and we had dachshunds and they were called, Solong, Howlong and Toolong and none of them lasted very long. So we knew when one of our dogs had died because our mother would come and pick us up and then slowly tell us the story on the way home. And that was really the first three of us Eddie, Robin and John and then we went off to college and left Jimmy and Carrie with mom and dad and they really didn’t finally lose all the kids for quite a while. My mother was very, very, very bright, a genius in fact was invited to Rice Institute to go to school. She went to Lamar, went to Lanier, and Pershing Elementary. I even know her I.Q., and I’ll tell you later how I know mine. Later as my dad would go up and down with businesses she went to be a substitute teacher in English at schools when I was out of college and then later she became a bookkeeper at Sunnyland Furniture which was our biggest and most beautiful furniture store here in town, which no longer exists. But yes I had that typical get home from school my mother had the cigarette in one hand, the cup of coffee in the other, and maybe even two cigarettes and she was a rail. She drank but not until night but then she got, when I was about fifteen mother had to have a hysterectomy and from the blood transfusion she got hepatitis and never drank again. Was told just don’t do it. And the only time she ever did it was when she was dying of cancer in ’86 and her three boys went to visit her with a six pack. They took her outside at Methodist Hospital at the little
garden that the garden club built and they let her have a beer. And of course my sister and I had been there every day and the boys went once but that’s the visit she remembers.

NG: What about the encouragement of you all to continue your education beyond high school. Was that expected or just hoped for?

RB: Absolutely expected. In fact, you had so many grades in Catholic school I remember twelve to thirteen grades whether it was deportment, or conduct as they called it, getting along with others, whatever. But then there was English, math. Everything was separate though. There was no Social Studies or no what do they do with all the sciences now? We had biology separate from anatomy. We even had a chemistry lab at Saint Michaels finally. But yes we got a quarter for every A. So you could earn up to thirteen quarters you know. That was money back then. All of us were expected to go to college, expected to graduate. All but two did. The two that didn’t were two boys who went to college had a lot of fun were six and nine hours short and ended up getting great jobs while in college and starting their own companies for instance. All three of my brothers have started their own firms. My dad was the same way, he never worked for anyone. He started everything he ever worked in. So yes it was an expectation. When I was growing up I had a very, very healthy interest in medicine and I wasn’t sure in those days you did not become a physician as a woman. We had very few role models even in the fifties and sixties. It’s hard to believe but I did not get a woman pediatrician until I was fifteen and the only reason we got her is because we hated our other pediatrician and he was a guy who was mean. So my mother found this woman for my little sister and one day I came home from school with just this belly ache and this awfulness, it went on for three days my grandmother tried to cure me with vitabath in the tub. It turns out that we
went to Dr. Bickel, Laura Bickel was a maverick pediatrician here in town and even when I went to see her she was in her sixtiesso she was definitely one of those women in healthcare in Houston early. So Bickel I believe was B-I-C-K-E-L. She immediately did this terrible exam on me called a rectal exam. I jumped off the table and was diagnosed with appendicitis. My white blood count was twenty-one thousand, I was being told this at age fifteen. So they rushed us down to Saint Luke’s hospital without my dad. I said, “Can’t you wait for my dad?” She said, “Oh no Robin you are about to burst your appendix.” By then I was called Robin because when I got to high school I gave up Mary. But yes we were very much expected to go to college to be successful. That was the norm in all of my friends, most of my friend’s families.

NG: And was the expectation UT since you parents went there?

RB: Well actually my dad did take me to meet and talk with Dr. Denton Cooley he was a very good friend of his. My dad would have been eighty-nine and Denton is about ninety-two now the same age as my Uncle Jack. He wanted me to go, my dad wanted me to go into medicine. And I thought that was what I would do because my little sister Carrie ended up being quite ill with a congenital anomaly and my mother because of the pre-term labor activity she took a medicine called Bendectin which was it turned out to be almost like thalidomide (29.38) for the reproductive system. It caused a lot of anomalies in a girl’s genital urinary system. So my sister ended up with both of her ureters from her kidneys being so narrow that they didn’t carry fluid from the kidney to the bladder. So at age 3 ½ finally it was diagnosed by Dr. Bickel and she was taken to Texas Children’s and two little holes taken out of her kidneys. She held bags for two weeks while the ureters healed and they reattached them and this was Dr. Herb Seybold
who was absolutely a miracle worker with pediatric urology and that’s the Herb Seybold that was the Kelsey-Seybold, one of them. He has many brothers but Mavis Kelsey, Herb Seybold. There weren’t as many Seybold’s that stayed involved. Watching my sister walk down the halls I was then 8 ½ years older than she so what was I 11 ½ or 12 and she is walking down the hall she was tiny she had 105 fevers all the time. I was up with my mother. I was on the floor. We would put her on the cool floor. She hated the cool bath. So the tile on the bathroom would get down those 105 fevers. We had no clue that you weren’t supposed to give a child aspirin, Reye Syndrome, so we gave aspirin to kids back then and nobody got Reye Syndrome that we knew of. But yes that was the beginning of my zeal to go to medical school. UT, not necessarily, my brother absolutely he wouldn’t go anywhere else. Football, football, football. My other two brothers nowhere else would they go. I actually wanted to go to Emory in Atlanta and I don’t even remember why but I think it was something Dr. Cooley said. He went to Johns Hopkins after UT but I remember getting a small scholarship from Emory but not enough to cover room, board and coming back here. That was a long trip. So my dad just sat me down and said, “You have to go to UT” and I said, “Well then you need to get me a place to live.” Everything was always last minute. So dad sat me down and said, “You know you have to go to UT and I said, “Great get me a place to live I already had a roommate,” she was my dad’s best friend’s daughter. He was our dentist, Dr. Walter Roop he was in the Hermann Professional Building, such an old building. It’s gone. It was just beautiful forties architecture, just beautiful, like art deco. So off I went to UT as a freshman and was sort of an undeclared major but said sciences. Then in my sophomore year we had one of those counselors, you got talked to every year by a counselor at UT and she asked
me, “Don’t I want children?” I said, “Yes I even know how many I want four.” She said, “Well how can you be a physician and have children?” At the time I didn’t even think that was a strange question to ask. You know we were really brought up to raise a family, be at home, teach them to read, read at night, do the illness thing, we were raised to raise the children and stay home. Our generation my generation which people find difficult to believe but my mother was at home, most of my friend’s mothers were at home and my mother was at home all the way through my siblings my “second family” you know always at home. But she loved the fact that she had a bachelor’s because neither… her mother had a two year degree in handwriting of all things. She was fabulous but she was also a master seamstress and her dad had a junior college degree but he was really a master tailor. My grandparents on the other side on the Burke family neither one had a college degree, but in families that were very well known. The Burke family, to me, was so Irish. They came into Philadelphia, they passed up Boston, passed up New York, not friendly cities and they went wherever William Penn was, Philadelphia because that was the friendly city and maybe we wouldn’t have such Irish persecution. The only way my grandfather got down to Fort Worth was because the Colonial Country Club asked him to come be a Golf Pro and that’s where my grandmother was in Grapevine and that’s how they met. My grandmother’s name was Quo Vautis Quail and yes Dan Quail is in her family. And she married Jack Burke, Sr. Even from those grandparents I think they expected us especially post World War II when people had been in, women had been back in those… you know you heard stories of women working and being in the work force and they did rather well and that was the beginning for me of my mom saying, “Oh no, no, you might be lucky enough to be at home” but let me tell you
something every day my mother would write up a budget. I still have her notes. Little budgets, little tiny, weekly meals, unbelievable budgeting. I never do that. Because I got married and we had two jobs and two cars. And we got a house after five years of marriage which was really not that unusual for them either because so much was helped for my parents because of the post-World War college help. What was that law called?

NG: For veterans you mean?

RB: Yes.

NG: The GI bill?

RB: The GI bill. That helped a lot with so many people. Yes I was expected to go. Off I went to UT and then met this counselor who kind of said to me, “Will you just go talk to the Dean of the College of Nursing?” Well I did and her name was Dr. Billie Brown and I will never forget her. She was absolutely the most one of the most influential woman I have ever met. She of course was in her fifties then I would say maybe late forties, not married didn’t have children but had this unbelievable enthusiasm for nursing. But of course I want you to know the nursing program at UT was in the only left over World War II shack. To me that was the culture and the attitude toward nursing then. This building you know when I had just come from class in English from you know Cullen Hall or something and I’m in this little shack. I say a shack, it was wood it was in the middle of campus. I was like, “Wow!” She says, “Well this is our home. But we are here, we are in the middle of campus and we have a Bachelor’s degree.” She said, “You don’t know how important that is.” She said, “I have a diploma. I had to go back and get my bachelor’s. I had to go back and get my Master’s and I had to finally go back and get my doctorate and it wasn’t in nursing because there weren’t any.” So she really did…
Dr. Brown and to this day Dr. Brown is now eighty-seven and she lives in Manchaca, Texas in Central Texas. We still email and we talk and she is one of my sponsors that got me in the American Academy of Nursing, kind of the hall of fame of nursing, and who told me I wouldn’t really care about it. She was right. She has been one of the greatest influences. So I changed my major to nursing that semester. Then, in your sophomore year nursing fundamentals started while you were taking your pre-recs, it’s so different now. Now it’s like two plus two, you don’t start any of your programming. I will tell you that the sciences were hard. I did get to take calculus and physics off my plate because that was on the pre-med plate and I was happy about that because math has never been my forte. English and languages were always my forte, and Science but yes Billie Brown showed me the difference between physicians and nurses and she just flat out asked me, “Do you want to be there for five minutes with the patient or do you want to be the all-day support for the patient and the family?” And I just knew I wanted to be at the bedside. So it wasn’t any sort of negativity or you know, you won’t make as much money or the prestige would be different because you thought you might work three, four years as a nurse have your first child and maybe go in and out, school nursing and whatever, and she kept telling me, “That’s the greatness of our profession. You could even come and teach part time you know and still raise a family.” That was the influence and it was not a negative one at the time. I think back on it now and think that I didn’t have children. I tried seventeen years to have children I didn’t have children. I was very bright. I could have done medical school. I have been asked it so often now, “Why didn’t you go to medical school?” that it’s become disgusting almost. My answer is always, “It just wasn’t such a big deal back then.” Yes I really wanted to be a physician
because I met Dr. Denton Cooley who was changing lives for children, you know repairing hearts the size of a strawberry. So it was not a negative thing. I ended up absolutely excelling in nursing and I didn’t even have to study. It was amazing. It was hard. We spent fundamentals of nursing in Austin. It was University of Texas System of Nursing then but there were only two campuses, Austin and Galveston. Galveston was actually the first school in the state. I believe it started in 1898 and UT and came along in Austin much later I want to say in the forties maybe the early fifties. It was called UT Austin System School of Nursing. And it’s been very difficult for me because I graduated from UT Austin. After having fundamentals in Austin in a nursing home there was only one hospital, Seaton because Saint Davis was very new and wasn’t allowing students. So I was asked to go on a bus and go look at the Galveston campus with a bunch of girls and there were so many of us, only two men in our class, our entire class. So we all got on this bus, those that would even consider going to Galveston. Well I had a boyfriend who was coming into Houston from Sam Houston State every weekend so I thought, “Hmm, well I’ll go look.” But I never had any intention of not graduating all four years in Austin. My parents came up to every game we all went to every game. I was a little sister of the Deke’s I didn’t go through rush because I knew that I was going to have a nursing friendship, I was going to be in a more professional network. I also had a roommate who got no bids the day of rush and I was so upset that I got all these bids on the Gregory gym that I said, “Lets’ go skiing” at our lake house and Cindy and I went skiing. I hated this snobby stuff. It was amazing to me that later in life it became such a big deal. “Why didn’t you become a doctor?” Because nursing was so respected and
really doctors considered us invaluable. But no we were not the major decision makers then and that’s going to be an interesting part of this discussion.

NG: So I mean it was a big deal to be getting a bachelor’s?

RB: A big deal.

NG: Because we still didn’t have very many people getting a bachelor’s in nursing?

RB: It was a big deal and Dr. Brown emphasized that more than anybody and she ended up teaching us Trends in Nursing which was really nursing history. Boy she went all the way from Florence… She went all the way from the Deaconess Nuns you know I ended up teaching nursing history too as well and there’s a Dr. Connie Ayres who is down at TWU you might want to meet because she is a nursing historian. We have a lot of nursing historians and in nursing history. So everywhere I go across the world I try to go to hospices which were the first nursing units, they were in churches usually. They were off of the church and it was done by nuns. Everywhere I go I try to go see, like I’ve seen Florence Nightingale’s home in Florence. I’ve seen you know her hospital that she worked in, in London of course they even did the research I haven’t been to the Crimea but isn’t not called the Crimea anymore. But yeah it was very unusual for a young woman to be getting a Bachelor’s degree and there were only fifty of us, fifty to sixty of us in the class the whole class but we did admit twice a year, fall and spring. So when I got to Galveston and looked around Galveston had brand new hospitals. John Sealy had just been redone. Jenny Sealy the psychiatric institute was brand new. Shriner Burns for Children was brand new. I mean this was 1969 summer and then they had Saint Mary’s Hospital for women which was just all OB/GYN everything just about a whole building for women and children and newborns. So we all looked around and my roommate my
friend that came with me who went to Saint Anne’s [grade school] and Saint Agnes [Academy], I also went one year to Saint Agnes and expected to stay at Saint Agnes and then dad had a reversal of fortune and I went to Lee High School where my husband-to-be was in my homeroom. That’s not exactly how we got married.

NG: At Lee High School?

RB: At Lee High School.

NG: Oh okay.

RB: Which is now the absolutely worst high school in the city. It was one of the best high schools it was brand new. We were the third class. It was fabulous. But no when I went to Galveston I jumped off that bus and never looked back even though once again the nursing school was in a place called well my home was in Vince Saint Hall which was a World War II barracks and the nursing school was in a hall a long brick World War II barracks but they had been through Carla the Hurricane in ’63 they had been through… they stood. So they were considered safe places. So yes our lab for looking was a few little dummies. I mean most everything was done on the job learning. And most all of us ended up working part time as students knowing that we would even get more mentorship than we would from these nurses who were so busy and we would be laid on them but our faculty were with us all the time and that was a model I always, always went by is that you don’t leave your students dumped off with a person mentoring them for free. That’s what we do in nursing. Now this just reminds me of medicine, you do dump off physicians. You dump them off and there is never an attending in the hospital, they are on call. There is just a resident or maybe even a chief resident but he might be sleeping in the hall in the little resident’s room. So I was so shocked in the difference in the models
between teaching in medicine and being absolutely hovered over in nursing. You couldn’t give a shot, start an IV, put down a nasal gastric tube without your instructor being with you. So we ended up teaching all the med students how to do all this when we got into practice because we said, “You can’t just watch one and do one”. We were so shocked at the difference between the medical training and I had a lot of physicians in my family and lawyers. It was kind of a model of apprenticeship rather than real… I mean I will say that the baccalaureate nursing group was very, very focused on making the baccalaureate program collegiate absolutely on the Oxford model of critical thinking, no “blap, blap, blap.” I still have some of my nursing school notebooks, they were so wonderful. I mean they brought in an article the very first one I can ever remember was, “How would you feel if you were shell shocked?” Or something on that it was absolutely and article in the social sciences about what we do to patients in hospitals and we essentially take all their power away by putting them in a gown, putting them in a bed and saying we are the boss. We take off every personage and you are in “my hospital” and nursing was trying to absolutely change that model, the patient should be involved in the care. We did these nursing care plans the night before we were assigned a patient or two or three as we got more and we were told to develop a care plan that is individualized to that family, that patient, interview as many people as you can. I’ll never forget Mr. Green a double amputee, a diabetic, still smoking, still drinking. I’ll never forget making his care plan. I’ll never forget Mr. Green because to individualize the way he likes his trach care done, the way he likes his colostomy done, the way he liked his legs wrapped you had to combine the science and not abrogate the science of what you were going to do but you had to individualize. When did he want it done? What kind of things did he
like together which was more efficient for us? I will never forget in nursing school the efficiency model. It was almost like we had all these efficiency experts in and I had to take marketing in nursing school. Marketing! I had all these football players cheating off of me in Austin. Marketing so that I understood how the hospital marketed themselves to patients. I mean what we put out there as our mission and our goal and our objectives and we were an objective oriented nursing program and it’s still to this day. That’s the model is you teach by objectives. What exactly are you expected to do as a result of this class, this lecture, this experience, this group project what are you expected to be able to do in effective psycho, motor, socio-cultural, what psychological what are you expected to do as a result of this learning experience? And I will just never forget the difference between the curriculum in medicine and the curriculum in nursing and I don’t mean to be negative or at all critical but we were shocked (most of us) that they were seriously dropped off and they would never show you. In their little white coats these little med students in little white coats, short ones, that differentiated them from the residents who finally got a long coat and then the real docs who actually got to have monograming on their lab coats, their white lab coats. Nurses were not allowed to wear lab coats. At Methodist Hospital Dr. Michael DeBakey wouldn’t allow nurses in the 70’s to wear a stethoscope around their neck. So yes there were a lot of barriers to us using our skills from a baccalaureate program, an entire program in health examination. We’re talking otoscope, opthamoscope, we learned that in the 60’s the late 60’s. We almost were disappointed that we weren’t asked to do that when we got out. That was a real paradigm shift and we weren’t even allowed to use all of our skills.

NG: So I want to make it clear did you then finish your nursing degree in Galveston?
I did but I didn’t go back to Austin. The only graduation was in Austin but we had a pinning ceremony. We also had new uniforms for the University of Texas School of Nursing. They put us in orange stripes. Little tiny stripes thank God. My roommate and I were actually in the Galveston newspaper showing off the new UT uniform. The UT cap the white cap looked like a pill box and we knew from nursing history that, that cap came from a time when nursing was considered a domestic very unprofessional Sairey Gamp in Charles Dickens type. It came from that little white cap that was kind of a muffin cap and that’s how it evolves so we were ready to give up our caps the minute we… You know we didn’t even have critical care units when I was graduating. The first critical care unit in Galveston that I can remember was in ’72 when I was graduating. I watched them do tracheotomies on the units so it was very unusual. Your patients were very critically ill out on the units and it was really great for experiences but no I finished in Galveston and we had this pinning ceremony which was really “the thing” because there is a huge long history in nursing about your school whether it’s a diploma school of nursing, your pin was your thing. Everybody else also still had capping ceremonies but at UT no capping ceremony. They did not want to influence our thought that we were in any unprepared to be critical and critical thinkers and decision makers and be alone with patients and not be frightened and not have to call the doctor every minute. We were prepared. So I went to work. I worked as a student in labor and delivery and in the burn unit. In labor in delivery here in Houston every weekend at Saint Joe’s and I was even in a leadership program there that taught me to be a manager nurse a nurse manager, we called it head nurses back then. I was taught to be a head nurse. So every Thursday night I worked at John Sealy 7C it was a burn unit. I
will never forget it. Critically ill patients twenty of them in burn beds and every day you had to take them to pools and debride the skin and we didn’t have the medications we have now for pain. You couldn’t put them to sleep with morphine or we would be bagging everybody and keeping them like in an operating room. It was a very, very stressful thing to take all this skin off of people. Then I was working in labor and delivery at Saint Joe’s birthing these happy things and of course sad things happen, dead babies and maternal mortality was high from hemorrhage and infection and being put to sleep for your baby you weren’t awake for your baby, not in the 60’s and 70’s and 50’s and certainly I, when I got out of school you want to know how I made my decision where to go to work? Who was going to give me the 7:00 to 3:00 job? Even though I was not a morning person I took Saint Joe’s because they offered me the 7:00 to 3:00 job and that’s where I went to work two days after I graduated. I bought my car one day after. I never had a car, I never lived anywhere but a dorm, never in an apartment. Some of my friends had cars so we’d get into Houston and back but I bought my first car the first day after I graduated. I’ll never forget the car payment was $86.68 and we went and rented an apartment that my roommate finally decided my roommate from college wouldn’t come home for three months. She wanted to stay in Galveston and get some experience. So I stayed at home for three months working at Saint Joe’s in labor and delivery and becoming cross trained which was also totally new. This nun Sister Lambert had gotten a bachelor’s degree, gone back to school from her diploma, older lady, and I was born there so here was Sister Lambert she was now a Bachelors she said, “No y’all are going to be trained to do newborn care, post-partum after delivery, you are going to be trained to work with moms before they deliver and they are having troubles and you are certainly
going to be trained in labor and delivery and operative care.” I had to become a scrub nurse. I had to learn to pass instruments. I got to do that one day in nursing school. I mean I had to learn five sets of instruments from caesarian section to hysterectomy to normal deliveries it was amazing. Yes I saw surgeons throw things at my head. Yes there was a lot of sexual harassment in those days. I will never forget being at the coffee bar in my new little white uniform my white shoes polished my white hose and this physician I remember his name I still sort of know him, he is old and retired. He came up and ground himself against the back of me and I turned around and I said, “I am going to tell Sister Lambert.” And this doctor was a Catholic and I don’t know had nine children or something. It wasn’t an M.D. he was a D.O., a doctor of osteopathy. We did have a prejudice against D.O.’s back then. Are they really doctors? And he didn’t have a residency in OB/GYN we had a residency program from UT at Saint Joe’s with Dr. Talty Dr. Joe Leusia oh my gosh Dr. Leuchey Dr. Strailey. Josephy Strailey, Dr. Anthony Leuchey we’re talking people that were maverick’s in OB/GYN. You delivered breached babies with a pair of forceps, they were called breach forceps. You could do C-section in less than three minutes. Those people could deliver, of course we did so many episiotomies fourth degree even which goes down into your rectum to get these babies out. Forceps deliveries were very common, C-section deliveries were not as common and while I was a student the first fetal monitoring machine was brought to Saint Joseph Hospital, Corometrics was the company. It was like a… I mean we’d been listening to babies with stethoscopes in our ears putting them on a mother’s abdomen finding first where the back was because you can feel the babies heart best through the back so with fetal scopes. Later on we did get these hand held sonar because you do know that fetal
monitoring came from the work in sonar from sub marines in World War II. Obviously sound travels better through water and from sonar which I can’t believe I can’t remember the acronym that stands for submarine radar something but through sonar we got our first fetal monitor and we found out that the heart beat transfers best in the amniotic fluid. We got our first fetal monitor where you put the jelly on and you know did the Leopold’s maneuvers and found the back of the baby and knew whether the baby was breach or vertex which is head first. It was just an exciting time and I also started the first Lamaze program but they wouldn’t allow me to do it at Saint Joe’s. The doctors were absolutely against it. Mother’s should not be making decision about their births. It was a very controversial time in ’72. Dr. Reed from England, Dr. Lamaze from England these people I still have their books these were maverick doctors. You had mothers who were going to stay awake who were going to know how to breathe during their labors who weren’t going to be medicated the minute they walked into the door and who weren’t going to take nitrous oxide or laughing gas and weren’t going to take general anesthesia and be put to bed and not know for two days what kind of baby you had. This was unknown of. I had to go out to a hospital called Sharpstown Hospital who allowed me to start this Lamaze course. I went and was trained down with a group of young women and some midwives and I’ll never forget my first Lamaze class because I taught cradle to grave. You know I taught your pregnancy all the way through the newborn period. That’s what the curriculum was and I was certified by a group that’s still around, ICEA the International Certification Education Association for Lamaze Educators and this was amazing to me because I really had a problem seeing these women just out. You couldn’t hand this beautiful baby who is crying I mean they were out with their tongues lolly
gagging. They may not have put them completely to sleep and they may not have intubated them but yes they were being bagged with oxygen.

NG: As I just told you off the audio that I wanted to ask you about a couple of things that you were talking about. Your experiences brought things to mind and one was about the way nurses used to dress. I was thinking about it recently kind of outside of this because my husband is a nurse and I was thinking you know he goes to work really comfortably dressed and it seems the most efficient and then I thought they didn’t used to dress like this all the time they had to wear skirts and hose and things like that. So what is your opinion of the transformation? Did you at the time think it was restrictive or anything like that?

RB: It’s such a good question but it changed rather quickly. When we were in school we weren’t even allowed to wear pants with our uniform. I mean our uniform was a dress. White hose, the cap I mean we were allowed to take the cap off only if we were in labor and delivery or if we were in an operating unit you know. When I first went to work all the women wore dresses. Saint Joe’s didn’t even allow that. But within a year because the doctor’s used to just come in dressed from the office and they would just put on a scrub gown, not scrubs but a scrub gown and we would tie it up as you know we would glove them and tie them up but we also had gloved, had a gown on underneath so we were really hot. We had on the underwear, the hose, the very kind of restrictive uniforms. But within one year from ’72 to ’73 I will never forget this because I started my graduate program in ’73 they started giving physicians and nurses these new scrub outfits and they were green. Don’t ask me why they were green. There were no white ones, no blue ones, no anything. They were green and I don’t know the history of that, I
wish I did. You need to find that out because I think it’s fascinating that you know those scrubs were washed in the hospital laundry, they could never be taken home. You were never allowed to wear them to the grocery, to your bed. You know you weren’t allowed to run around with your name tag on as a nurse. You should go home and change out of your uniform. These were items of infection control, so within a year I started going to work and I would change from my nursing outfit into a scrub outfit still with my white polished shoes, my white hose but now it was pants and most of us would let the shirt fall down below our waste because we didn’t want to emphasize any of our figures and I even wore… This is going to go on the record but I have very large breasts but I did not want to emphasize that at all so I wore an even larger scrub and I didn’t tuck it in and look really cutesy or anything. Because I had that experience with that physician who ground his private parts into me into my rear end. I’ve never told anybody about that. It changed very quickly. For years, twenty I would say, we told students you did not take your scrubs home, you didn’t buy them at some store, they were washed in the hospital. You picked them up and put them on in a locker room. You put your clothes, you finally got that you could wear your own clothes to work, not your nursing outfit but your own clothes. You put it in the locker and you put on the “clean scrubs.” You still had to wear white shoes and another reason I think this changed is we began to get more men in nursing and there weren’t really very many nice white uniforms for men so I think that was part of the change. I would say from 1968 when I first started wearing a uniform when I was a candy striper at Southwest Memorial Hospital, a candy striper which was a pre-nursing nurser. Southwest Memorial Hospital now Memorial Hermann Southwest was on Highstar right near the Fiesta it housed 100 patients and I was a candy striper with
an apron on but every nurse was dressed we’re talking this was 1966, ’65, ’64 every nurse was dressed to the nine’s hats, white, white, white. I’ve almost become a believer in going back to white for the nursing color because to me now you wear the yellow the brown the pumpkin it has become so confusing and I also do feel that there is not enough infection control around clothing and what you bring in from the outside and I think the Ebola activity right now can just tell you that a person can sneeze on you and for a couple of days you can have some organisms that will live and I’ve seen nurses wear scrubs 4, 5 days in a row. Not what we would ever, ever have been allowed to do. And even until the end of my career in 2009 I would always ask if they had scrubs that they could give me from work.

NG: And at the time was it different scrubs from the doctors or were they all the same colors?

RB: They were all the same.

NG: Okay.

RB: That did but they still had their lab coats. You know they had their white lab coats. Eventually we were allowed to wear what we call scrub jackets and then finally in the mid ‘70’s to late ‘70’s we were allowed to wear lab jackets with our name on them. I’ll never forget I put mine up in Jefferson Davis one day I was with students in the mid ‘70’s and all of my pins my Master’s pin from TWU in gold, my gold UT pin, 14 karat gold my Sigma Theta Tau pin all of it got stolen off of my uniform, my lab coat because you would have to hang them outside of labor and delivery.

NG: Oh that’s terrible.

RB: I didn’t like that. It took me a while to replace those but I did.
NG: And then I wanted to ask you about sexual harassment because it was you know even though you said that there is increasing numbers of men coming into nursing it was still predominantly woman that were nurses and still predominantly men that were doctors. So do you think that there was a lot of harassment?

RB: I think it was very I was in a Catholic hospital at first so there were these Catholic doctors who thought they were the paragons of virtue. But there were these subtle like calling the nurses honey, sweetie, “hon” instead of Miss Burke or I mean they immediately took your first name. You would have never called them anything but Dr. Luche, Dr. Straley, Dr. Talte you know, Dr. Stefanno, you know you would have never done that. But they took liberties with our names which to me was such a subtle form of putting our level of education on a different one from theirs. I had great relationships with physician colleagues because most of us who had become baccalaureate were only about five of us on my unit, Lanelle Pipes had gone to TWU I came from UT. I’ll never forget these girls who came and they changed things. My first research study was on we were putting in what they called medi-cuts (111.48) which were plastic catheters now instead of butterfly well we always put in butterflies for the women because we were going to take them out in a day. But we got to put them totally asleep and giving them all this Pitocin and we needed to do all these other meds and so we ended up using plastic catheters. (This is a tangent an anacoluthon I’ll get back to the uniforms.) But I remember doing my first research study on should we use a sterile wrap for this IV because we were just using non sterile 4 X 4’s and just tape and they would turn red and I was just very interested in this new, “What are we doing is this right?” We didn’t have any evidence so even then most of us were questioning why do we have to turn this
whole bed around to make this woman lay on her left side to have an enema. But then so the harassment was occasionally overt as I shared with you earlier. Arms around you just kind of these little hugs and maybe squeezing you. You wanted to get along, be along in a labor and delivery unit especially because nobody was allowed to rotate to that unit from other places because it was a very specialized unit. I could be rotated anywhere you know especially any other OB/GYN but at that point rotation was very common if you didn’t have a lot of census on this floor you’d be taken to this floor. But nobody could rotate to labor and delivery because it was such a specialized unit. You had to know pregnancy. You had to know fetal monitoring. You had to know C-section. You had to know how to operate. You had to know how to do a D&C and don’t forget I was at a Catholic hospital. If you were going to do a D&C you had to get a pregnancy test done to make sure you had to make sure the baby was dead. I’ll never forget a certified, there were certified registered nurse anesthetists there only two. But it was pretty unusual because there were so many deliveries at Saint Joseph we only had J.D. as a county hospital (Jefferson Davis) there really wasn’t much going on. There wasn’t any OB at Memorial then. Saint Luke’s had a little but really Saint Joe’s was it and we were doing 500 and 600 babies a month. So it was very busy. And yes I thought the residents and the medical students were very respectful because we were teaching them. But the staff physicians or the attending’s were definitely taking liberties with almost all of us except the older women who had come from diploma programs and they had had taught them. I mean like, “Yeah we used do all your courses for you. Now they will only allow nurses to teach nurses.” I would say something like, “Well we had a wonderful lecture by a physician on how to deal with forceps delivery you’re not excluded from the curriculum
but do you think that physicians should teach physicians well I think nurses should teach nurses nursing?” So there was this older nurse school of the doctor’s always right, the patient still had a little bit of this. The doctor’s always right but along came these baccalaureate nurses going, well I know an awful lot. I just diagnosed that breach and he hadn’t even done that up until now in his office. And I just told him, by the way (and by the way it’s really hard to turn the last two weeks of your pregnancy) it’s hard to go from breach from vertex or head first to bottom first. So yeah the harassment was definitely there for those of us young unmarried even married. And I think the worst I ever had though was that doctor who ground himself into me I just was absolutely I couldn’t even hardly speak. I was making the coffee. And in this little alcove and he just did that and I turned around and I said, “I think Sister Lambert would really not like that.” I can’t even believe I said that. I was 22 years old. But even later, later as I taught nursing she would have residents who would come in and put their feet up on the bed or up on the bedside rail or something so and lay back and say, “Tell me what’s going on nurses.” So there was a lot of disrespect for nursing that bordered on harassment and emotional abuse.

And I think it was very difficult in that era of the 70’s and 80’s when really things were changing rapidly and we were trying to keep up with all the incredibly increase and knowledge in the 70’s and 80’s and increase in medical and healthcare information.

While maintaining a professional demeanor and yet still being called “Robin.” When I got my doctorate I finally had to say to a physician, “Well you can call me Dr. Britt or you can call me Mrs. Britt. Just don’t call me a bad name.”

NG: Okay well I think we will pause there.

End of part 1
NG: This is Natalie Garza it is Wednesday January 14, 2015 and I am interviewing Dr. Robin Burke Britt in her home. Okay so I want to begin by talking about your decision to go to grad school and to pursue a Master’s degree. When did you start that?

RB: I always knew I would do that degree. That was “the one” I knew I would complete because I had such mentors in my undergraduate program at the University of Texas (and one especially) who wrote something on a paper I wrote that said, “You need to really pursue graduate education and teach.” So I actually got out of school in May of ’72 and I was 21 but I turned 22 the day I bought my first car and went to work which was only a week after graduation. And I worked at Saint Joseph Hospital as I explained and I was there as a student and also worked at John Seeley as a student so I felt very prepared to go to school but also I felt very prepared to work. But I wasn’t sure I was prepared to do both. So I had to work full time. I was living at home for three months to save money and I believe that I applied school for graduate school at UT Austin in the spring of ’73 and got admitted. And I started also dating my husband in January of that year and by June eventually he was sure he was ready for marriage because he asked me to get married (we’d hardly ever discussed it.) And he said, “Well you’re headed off to Austin I think I better do something waylaid this or what with this because I was going in September). And I said, “Well of course I’ll marry you.” You know we got married in November. So that September I changed to Texas Woman’s University Houston Campus which as I mentioned before I hardly knew was here. It had been here since 1960 but right here in the medical center kind of the well-known secret it reminds me of Bio Bend a well-known secret. Or a known well known institution. And I started my first course which was genetics and I also took I’ll think of it in a minute it was really hard. The
genetics was fascinating. So I started my first semester and I was with a man who was teaching his first semester of graduate school and he was getting married for the first time and so was I. He was marring a nun. (They are no longer married.) But he is married to a very close friend of mine. And we got married in November of that year and I remember thinking, “How do you get married, work full time and go to graduate school 6 hours?” And I thought about 12 just to get it over with. And by the way back then graduate programs were really 36 hours and you could choose a thesis or a scholarly project. I chose a thesis but then we got married and my husband got transferred to El Paso. Quickly turned my thesis on first time mothers over the age of 30 as compared to their childbirth educators and I turned that into a review of literature and moved to El Paso in December and that was my graduation from that school December. Even though I didn’t meet the deadline so I didn’t get the degree until May so I started teaching at UT El Paso in January of 1975 and I was 25 and the students thought I was 16.

NG: I think you mentioned this before but what was your husband doing?

RB: He was in marketing and advertising and he had gotten a job with what was then called Beckton Dickenson a huge medical sales firm and his company was giving him half of Texas and all of New Mexico and the fun thing that happened was that I had a little car, a little Mercury Capri that I bought and I had to sell it because he got a company car and I got his 1972 240Z. We called it the yellow submarine and it was yellow with black stripes. As you know the Beetle song “The Yellow Submarine” and it was 5 shifts and a stick and five come on, 5 speed and I had a great time in that car except that time in El Paso when it was icy and I just slid off the hill where we lived. And right into a little ice bank. It didn’t hurt the car but I had to walk back up the hill.
NG: I was wondering how you because I was looking up at your teaching jobs and the first one was at UTEP and so that’s how you ended up in El Paso.

RB: Stayed a whole year. Incredibly the interesting group of older women that were teaching there. That had been teaching there for years. I mean I was like this little new thing. But also I had been educated in a different way than they had. Very holistic incredibly critical thinking was a real big thing and preventative healthcare. They had been raised (many of them) had gone to diploma programs first and then gotten and gone back to get their baccalaureate and their Master’s and at that time the terminal degree in nursing was the Master’s program. There were very few (maybe one in New York and one in one in California) very few doctoral programs in nursing.

NG: So when you said you did a review of the literature was that literature on women who were first time mothers over 30?

RB: Yes they were called elderly primigravida. They were really called that at 35 but there was a true prejudice in OB units if you came to have your first baby at 30 or over. It was like “Whoa this was a pregnancy.” I invented a term called pregnancy delayer because this was right when women were you know we had two periods. Women went to work in World War II and then they finally went back home a little bit and my mother was at home for a good most of my life and then all of the sudden in the 70’s women went back to work. But I don’t think any of us thought we would stay there more than three or four years before we had our kids and stayed home with car pool and maybe worked a little bit on the weekend. That was the plan.

NG: Now so then that ended your time while you were teaching at UTEP you weren’t doing any clinical?
RB: Yes actually I worked part time at Hotel Dieu which was one of the first hospitals ever in the Southwest it was a mission hospital but also had some midwives and I worked on the weekends there. I worked always. It didn’t matter whether my contract was nine months or 12 months at the State of Texas I always had a practice somewhere. That was unique for teaching. But I had a strong belief that people are always telling, “Oh you teach.” What’s that saying? “You teach so you don’t know anything?”

NG: Those who don’t do teach.

RB: Those who don’t do teach. I hated that! So I felt very strongly of course if you are in the clinical setting with 10 to 12 students if you don’t know what you are doing somebody will die. Because when you bring your students to the clinical setting the nurses pretty well feel that you are going to be supervising and it’s hard (especially when you have them spread out over 5 floors or 10 or whatever it is.) I was sure in shape back then I ran those stairs. But yes…

NG: It was important to you to continue.

RB: Very and I think you will find that most of the people my age felt it very important to do something to demonstrate clinical expertise and I started all the IVs for the students I would put in all the fetal scalp electrodes. I would put on all the fetal monitor and pretty soon the nurses got to know who know what and who didn’t. Because there were those educators who just dropped their students off and said, “Well I’ll make rounds.” And that was the, “Hi how are you?” rounds. “How ya doing?” And if there was a problem she might trouble shoot. But most of us that were educated at TWU got a very good grounding in sitting down with a student and really not just, “What did you bring on cards today?” But you actually got this patient last night. You got to think about
this everything that this patient has going on. What’s the plan of care for today and you go through the chart and you say, “Wow your patient is a new mother. She has a pulse of 120 today. Do you have any idea what that could be related to?” And the smart ones could go, “Well her estimated blood loss was only 350 ccs so I’m going to check her hematocrit later and see if she is anemic.” and ones not so with it would go, “I have no idea.” And I thought that was brave of them. So I’d say, “Well I’m going to give you a moment. Just think what would a high heart rate be related to in any way with a new mother?” And if they came up with something like anxiety I’d talk a little bit about that. “Well what other vital sign might be related to that? If you knew somebody was very anxious? Like their respiratory rate. And then if they just couldn’t come up with a thing I had a deal because I was very young and I didn’t want to be a witch but I had really high standards. So I’d say, “Well tell me how you think you’ve prepared for today to take care of this patient? Because now we have a high pulse…” (and then I would flip and I would show her that this woman was anemic all through her prenatal care. “She had stopped her iron now that she was she had a baby and was here for the third day.” And that was a big change. You know babies. People who had had babies used to stay I don’t care if it was vaginal or C-section. C-section stayed 6-7 days and vaginal births stayed at least 3. Now they are out the door in 24 hours and C-sections might stay 2 days, maybe 3 if they have a complication.

NG: So then you said you were at UTEP for a year and then what happened after that?

RB: My husband got transferred to Saint Louis and I had to stay. I felt I could have broken the contract but I felt strongly that I shouldn’t. Was transferred to Saint Louis but I felt strongly that I should finish the summer contract. I had a year contract. Again as I
mentioned if you are with the State of Texas you either got a 9 month contract, occasionally a 12 month but rarely and I just flat told them I said, “I have to work year round I need we are raising money to get a house and have children and I’ve got to have a 12 month contract.” So it was hard but I got it. And I think that’s one thing that still hasn’t changed is nurses just still don’t negotiate. They get to a job or an educator job or a clinical job and they say, “What are you offering?” And I taught my nurse practitioner students everything about business. I mean I taught the course in advance practice nursing and you have got to negotiate. You are worth a lot. So that I hope is beginning to change. I hope you see that in this project because that has to change so that the worth of the nurse or the nurse practitioner or the nurse clinician or the registered nurse baccalaureate degree or the professional nurse as we call ourselves is given due respect by other healthcare providers. But as I moved in three months I moved to Saint Louis. I was so shocked when I moved to Saint Louis I had only seen one diploma program in my life and it was in Lubbock and it was called the Methodist Hospital Diploma Program of Nursing. That was the only one left in Texas which you would think Texas was so far behind. Wow I got to Saint Louis and I was interviewing for job and I went a month early with my husband to interview and there were 9 hospitals, nine in the city of Saint Louis which by the way is a bunch of municipalities still Creve Coeur, Florissant, whatever that is where they are having the riots. Every one of them had one had a hospital with a diploma program, their own fire department and their police department. You could go 10 miles and you could be in another district. Like a ton of little Bellaire, Houston, you know Bellaire, Texas’. So I chose to go to work at Saint Louis U. Sorryfully, my husband’s brother came in to visit us on his way back to William and Lee
(W and L) in Virginia and they are both wine freaks and so they wanted to run we were going to go to the Busch stadium and they wanted to run into the 905 and see all the good wines and I'm slowly getting out of the back seat with my car knowing this will not be a short visit and a man approaches me a large, tall black man with just looked kind of homeless which wasn’t real common then. And he said, “Ma’am do you have any change?” I said, “I’m so sorry I really don’t.” I’m looking in my wallet and he whips out a gun and he said, “Ma’am you don’t understand” and then I got really flustered, “No I don’t.” He said, “I want your purse. Give me your purse.” I said, “But there’s nothing in it I never carry more than $3 or $4.” I was kind of laughing.” Then I got really serious and I said, “Oh!” I just threw the purse at him just so I was on the other side of the car and I just threw my purse and he was just about to pick it up when the manager of the store came out I was assuming he was the manager and he had a gun and it was like at .38 versus a .45 and he just waived this man off. He kind of went. Waived him off and I said, “Are you calling the police?” You know we didn’t have 911 then. I said, “Are you calling the police? I’m not hurt. But I’m shaken up a little.” He was walking towards me to get the purse and I didn’t know what else. And so I called Saint Louis U the next day because it was right next door to the Busch Stadium and I said. “You know I’ve had three or four offers from other people and please forgive me I know this is getting close but I’m going to take this job and Maryville College which was right around the college from my house in Creve Coeur and it was a small private Catholic College and they were going from and Associate Degree to a baccalaureate that year. So I was going to be in on accreditation and it sounded really fun. The same money and I’ve never been frightened of anything ever. I’m still not, still stupid. But I just decided downtown Saint
Louis was a little bit iffy. And it was. Especially East Saint Louis. And that was where I was going to have to be working with students in the hospital. So I just changed to Maryville College and that was a very, very instructive year. In fact one of my students moved to Houston because of me and she went on and got her Midwifery certificate and started Spring Branch and I’ll never forget her. It was a good year. But I did not love Saint Louis and I really thought their medicine was very far behind and I chose a hospital called Saint John’s Hospital that did not have a diploma program so we wouldn’t be in the way of nurses that thought they were better than us. Because that was very common. Diploma nurses felt like they got three years of nothing but in the hospital education and the saddest thing was that as I mentioned before they couldn’t transfer those course work hours anywhere because most of them were not related or had a contractual agreement with any higher learning institution. So I thought it was sort of a cheat for women. Where you should at least be able to get credit for this to get your baccalaureate or whatever. So many of us tried to do it what we could to make contracts over the years with various women who’d had diploma education. I remember distinctly the physicians in Saint Louis as being so different than the ones I knew in Texas - which you would think would be different. Saint Louis was has Washington University which had just closed their nursing school and they had Saint Louis U a very highly respected… two med schools in one city, you know which we did not have. We had Baylor at the time. And I really appreciated my faculty and the students they were all they were all young women who were younger and the very first day I taught there the Dean came to the program, the President of the school came to the lecture, anther Dean from another department came and I thought, “What is this you know trial by fire?” But the funniest
thing that happened was that a student finally raised her hand and she said, “Mrs. Britt” and depending on what decade I taught you it was Robin, Mrs. Britt or Dr. Britt, “Mrs. Britt I am sorry” and she was on the front row, “Can you tell me what I is?” She was talking about the newborn? I said, “Could that be the newborn I or could that be me as in I?” and sure enough my Texas accent was terrible and many of them asked to take me. Which I finally had one of them replay the tape and I heard and I went, “Oh my gosh I am one big accent!” And I tried to be very, very culturally more sensitive after that. Even colloquialisms like you know, “That stuck to a baby like a hair on a biscuit.” You know little things like that that you learn from childhood little colloquialisms that you don’t think need to be explicated to other people even in other states (but yes they did) and certainly foreign students which we did not have any (very few) in the 70’s. So I really loved Maryville and I enjoyed the year, made lots of friends and I even had a couple nurse practitioners that were practicing in pediatrics and I still keep in touch with her. Gosh this has been what 1975 to 1976 I stayed there one year and then my husband got called home he got offered a job in Houston once again I stayed for my 3 month finish of the contract and finished out the year and then got home in Houston in ’76 and while I was in Saint Louis he bought our house and I pretty well got to come see it one day - one weekend in a little neighborhood called Largemont that was kind of a native Houstonian neighborhood, 4 streets and we bought the home for $59,500 a 3 bedroom two bath house and I was but Kyle was he called me and we didn’t have cell phones and he called me from a…

Kyle: Pay phone.
RB: A pay phone! To tell me that our house might be under water and I was watching the news that afternoon and you could just see that Houston with helicopters flying over it. This was 1976 and sure enough we had a horrible flood and the good news is that our house was in the middle of the street and was the only one that didn’t get water in it.

NG: So was this just heavy rain?

RB: Yeah! And they had made this, you know they had made more concrete. Westpark had just been made four lanes and they failed to put a drainage ditch under the new piece of concrete. So they started digging up Westpark in the next 5 years and they put this huge drainage ditch under there and we never flooded again in our neighborhood until Allison in 2001. Or was that 1991. Yeah it was 1991. Allison.

NG: No I think it was later.

RB: All I know is it got the entire Med Center and not our neighborhood at all.

NG: But that wasn’t this house?

RB: No we lived in that house from ’76 until ’93. I wanted to have children, tried for 17 years and made it to age 41 with 7 different fertility docs and I was reading more than they were and sadly we had some technology but not a lot but we could do hysteroscopies and look up inside the uterus and my mother had taken a drug called DES diethylstilbestrol (which was very common in women in the 50’s and 40’s - even up to the 60’s) and it was a drug highly associated with reproductive anomalies in girl children even in male children and I was just I thought I had been checked upside down and one side and then down another and my husband had had a football injury at 13 and they of course didn’t check him they just kept him in the hospital two weeks and gave him antibiotics and that was right to the groin and so it’s a good thing we married each other.
But I tried until 41 because they kept saying, “You will get pregnant. You will.” And then I had a lot of people telling me, “If you just adopt you’d have one.” That was the most disheartening. The most disheartening comment I have ever had. Except this one which is, “If you don’t have children it’s the only reason you stay married. Children complicate marriage and that’s why people divorce.” I said, “Gee that’s not my experience. All of my aunts and uncles stayed married. My parents stayed married, my husband’s parents stayed married.” I said… Hurtful! Really for 17 years I went to 7 you have to go every 3 years to a different doc because they get tired if you don’t get pregnant. And I even went to the doctor who went off to Norfolk, Virginia where the first invetro baby was born in Houston and he’s the one who cut off something of my cervix that he thought was a polyp. Would you believe that at age 51 my current OB/GYN took me in and said, “You have a huge mass in your uterus.” And I went, “You’re kidding?” She said, “Yes. We’ve got to go in and see what this is?” Would you believe that because my mother took diethylstilbestrol I had a completely septate uterus which is a septum of skin all the way down the middle of uterus and it makes the uterus kind of a heart shape. Now I had had ultrasounds, hysteroscopies, I had had more, as much technology as one had had until 1991 and after your 40 until 1996 after you were 40 you couldn’t adopt and there were no foreign adoptions. So people like Edna Gladney, the Baptist School, The Catholic charities none of them would let you adopt after you were 40. I had so many doctors offer me babies. Like, “Oh gosh this women’s unmarried. She is with Catholic Charities but she would give you this baby.” I’d go, “There’s a couple waiting on that baby!” The whole thing was bazar. But as a very solid Catholic until 28, reformed after that, a little bit more biblically oriented, I felt very
strongly that there was a plan for my life and I was going to have children I was going to have children, somehow it would happen. And there she is right there. She’s 2 ½ 24 pounds and that’s the 5th one. That’s the 5th infertility dog. That’s Berkey. And she must be smelling you. You must have a dog.

NG: I do. I have two.

RB: I’ve always had two. That was hard. It’s harder to get care for them. It’s harder to pay for them. But anyway. Let’s go back to the 70’s and just say that when I came home it was tough to discover. We had five baccalaureate programs within spitting distance or at least an hour from UT Galveston to Houston Baptist University, UT Houston had just become an Independent entity and I knew there was Texas Women’s University. I wasn’t sure I wanted to go to the same school. Back then there was sort of a thing that it may still be hanging on that you might should get degrees from different programs or teach at different programs and I did not want another degree. Natalie I did not want another degree. I wanted 4 children and a car pool. That’s what I wanted! I wanted to still practice but maybe part time. So I was still practicing. I came home and I got my job back that summer at Saint Joseph and I decided over the summer to go back to work at Texas Women’s University and this may hurt some people in this history but my own school University of Texas was the least welcoming. They asked me as I had been in UT El Paso for one year but then while I went to Maryville in Saint Louis I really wasn’t keeping up. I mean I was second year teaching turning an AB program into a baccalaureate program by the time I left, wrote the accreditation documents and was one of the few that was Master’s prepared because they had been teaching associate degree and now they were hiring Master’s prepared educators and I was so shocked when I went.
to UT they asked me, “Well what did you do about the fact that UT has been split up from a system into individual units?” and I just looked at them and I said, “You know I’ve been out of the state and I do belong to the Alumni group but I was working very hard full time and practicing. I practiced at Saint John’s hospital.” I’ll never forget being with students who needed some extra when you are sick you have to make it up in nursing school. There’s a certain number of days you have to meet and I would let them do it on the nights when I worked because I was insured and the sister, the nun who ran the school had no problem with it, the dean was Sister Jeremy a I forget the kind of nun she was because I was raised with Loreto nuns. She wore white I remember that. And I remember the first day it iced and I was in that little 240Z. I called her on the phone and I said, “Sister I don’t know how to get to Saint John’s in this car in this weather.” She said, “I’ll be right there Robin I’ll be right there.” She came in her truck and picked me up and took me to Saint John’s hospital to be with the students. I said, “This is great. I hope somebody can take me home.” But I was working at Saint Johns and I’ll never forget that night because a woman was in labor and you know there are certain it’s called a Friedman’s curve and it’s still called that there are certain there was a Dr. Friedman who was in the 50’s who developed a curve of normal labor for both first time mothers and mothers that are multi gravitas, multi para actually, more than one live child being born. A certain number of hours for each stage of labor you know first stage pushing stage, third stage, which was delivering and then forth stage which was two hours post-partum and then there was times for each stage, each phase of the first stage, you know the first phase which was 0-3 cm we call it kind of dormant stage, you know then we get into the active phase of labor, 4-8 centimeters then we get into transition which is where
the women quit laughing and they get quite anxious and serious and then we get to 10 centimeters which is the end of transition and that’s where the second stage starts and they start pushing if they are first time mothers if they are not the nurse catches the baby most of the time because the doctor is waiting for your call at home or at the office and often they didn’t arrive. But I’ll never forget this one night this woman had gone on into labor and I was kind of whispering to the student in the corner and I had taken her out of the room because I had told her, “This is your second day in OB you know labor and delivery and I want you to know that this particular woman is developing a serious a serious complication.” And it was called a Bandl’s ring. And it is still called that. You know the uterus has its own pace maker just like the heart but it also has this unique capacity where when it contracts in labor it never fully goes back to its completely non contractile state. Well the uterus will contract and contract and contract trying to have a baby and over time it will literally it is almost like a wash rag. The cervix doesn’t contract but the fundus does so the uterus really can actually twist. And you develop this ring palpable ring in the middle and it’s a preeminent source cause of uterine rupture. So I’m palpating this and I’m showing this to the student. Now I’m not the nurse for this patient. I had a patient who was in prodromal labor you know getting ready to maybe even go home and so I was walking around (with the nurse’s permission) to show the student the different things and we had fetal monitors by then as I told you. We got them in the early 70’s. So I’m showing her and I’m showing her that you know this nurse will be calling the doctor soon and I’m trying and the doctor finally came on his own and he did nothing. So I had a burden then. I had been in that room and so I went to the nurse manager which was called a supervisor for the night. You know we needed to have more
and more terms as we got into nursing. You need more and more terms as we got into nursing that were business like. In fact at one time we were told to call our patients, “Clients. Clients.” I really reacted against that business model. We needed to be more business-like and understand the cost of things because truly we didn’t even know what an IV bag cost. If they knew how many IV kits they threw away because “they dropped something” they would have just been in shock. But I had to call the supervisor and about this doctor and I said, “He’s just sitting there.” I said, “This women’s about to rupture her uterus.” You know I’d been practicing essentially since 1970 because I had been in L&D for six years by then. I’d seen this. No doctor of mine would have ever stood for even two seconds they would have said, “She has to have a C-section now.” And stopped the Pitocin because I was sort of saying to the student. “You need to stop the Pitocin you need to put her on Mag sulfate. You need to relax the uterus.” But I was sort of whispering this and this doctor heard me. He said, “Are you questioning my judgment?” I said, “Well no sir if your judgment is she needs to stop the Pitocin, stop the uterus and go to get a C-section I’m not questioning your judgment.” And he just looked at me with these mean eyes and walked back in that room and it wasn’t 10 minutes later she was going back for in for a C-section. But the supervisor came too and that’s what I mean by assertiveness in nursing. If you are afraid to go into what we call the chain of command which is taught to us like a religion but it is not taught to you if you are a foreign nurse and it’s not taught to you if you were in a diploma program. There was a doctor on the unit most of the time. But in today’s world you know we’ve changed. 80 hours is the work week for a resident which means that many times from 11-7 we have no resident now. Gosh Methodist Hospital has residents from Cornell Hospital in New
York so they come for these little rotations and they might spend 6 weeks in OB. So what can you learn in 6 weeks? And they don’t spend any time at Ben Taub which is the place that has 600 babies a month and all the complications. So it was a very different environment for me and I just but I’ve never been shy and I’ve never been afraid to be fired. And maybe because you could always get a job as a nurse you know? My husband everybody would just joke with me. Because even when we went into the 80’s into the huge recession of the 80’s and gas was at $4 a gallon and we were sitting in gas lines and the oil field went under which is currently beginning to happen my husband lost 3 jobs in 10 years and I was duly employed in two different places eventually three just because I loved it and I didn’t have kids. So I had to keep going. I mean I had to keep going Natalie. It came to the fact that when I got home to Houston that in the early 80’s they finally the Dean, the President finally said, “You know if we’re going to be we started a Ph.D. program in the late 70’s at TWU one of the first in the state and UT was right along with us. UT Austin, not UT anywhere else. So we had the two doctoral programs. Well none of us wanted to drive to Austin or drive to Denton and as actuality as an employee of TWU could not get your doctorate at the same school. So a bright group of people from A&M, U of H and Baylor College of Medicine wrote a Kellogg Grant and got a wonderful grant from Kellogg called Allied Health Administration and Allied Health Education and Leadership and it was a really an administration and leadership educational degree. Now if you went to A&M it was a Ph.D. because that’s the department that was offering. The coordinating board gives you little things you can offer. You can either offer this degree or that degree but if you don’t have that you can’t offer that. You have to propose for it you have to wait two years. You know it’s an
amazing conundrum. So that’s why I kept going. I went back in ’81 and I started my doctorate very gingerly still in ’81 wanting to have children. My mother became ill in ’86 with lung cancer so I took a year’s leave of absence. Can you feel this? I was like okay I’ll get this degree. But I had to stay working because that was the 80’s and my husband was in the advertising world. If you lost your big account like Schlumberger in the oil business you lost your job. So it was a very frightening time and that was the first year of my first infertility dog. And then I think the scariest thing in that decade was for men. Men finally realized that if their wives didn’t work they were anxious. They were very anxious and I really think that decade of the 80’s changed an awful lot for people, women, men. Not just the women’s movement. And I read everything about the women’s movement. And as a conservative Catholic you weren’t supposed to be a feminist. You were supposed to be whatever God wants you to be right? And I wasn’t really kind of reformed until I was 28. So while I read everything that what am I blanking on Friedman and Bagozi oh Bella oh you are testing my memory?

NG: Betty Friedan you’re talking about?

RB: Betty Friedan and Bella she had the strangest name it was not Bella Legozi who became an actor and played Frankenstein and then of course the beautiful Gloria Steinem you know I read everybody but I already felt like feminist. I was already very assertive. I negotiated my salary at TWU. People were mad because I got more than they did. I went, “Did you not? There’s always got to be room for something?” “Not in a state school there’s this range?” I said, “That’s just it. There’s this range.” I said, “Ask for the top of the range. Show your evaluations.” I must have been a maverick. I definitely was called by my students. I had a nickname do you want to know it?

1 Bella Abzug
NG: What was it?

RB: Brutal Britt. Isn’t that terrible? I was called Burkey when I was first a nurse very young the ward clerk called me that Mrs. Lopez. I eventually her daughter Monica is now a huge social worker here. Mrs. Lopez is long gone but every time I see Monica I say, “Your mother was the sweetest most darling thing and she nicked named me Burkey” But going back to starting at TWU I had my Master’s and they immediately we had a Master’s program going and I started teaching in the baccalaureate program teaching women’s health, teaching a little bit of newborn because that was my specialty as well. Actually pediatrics I had maternal child nursing clinical nurse specialist degree but as I mentioned before when TWU was teaching me way back then we also had a non degree very not well looked at by doctors a nurse practitioner program. So we took physical assessment and didn’t even get credit for it because it was outside of the classroom. And we took pharmacology and we didn’t get credit for it because it was outside of the classroom. And that’s I think what I mentioned to you that I was at Saint Joseph’s I was a Red Cross Nurse and I started the first Lamaze class and I had to leave Saint Joseph’s to go over to Sharpstown to teach it. So I’m not telling you that doctor’s were enlightened. They were the boss and many still feel that way if they are over 50. And what they say goes and “the patient needs to listen to me I know best.”

NG: Now I don’t remember where your doctorate was from?

RB: It was from that program and it was a joint degree from U of H and Baylor. You either spent 15 hours of your courses at Baylor College of Medicine School of Allied Health (Dr. Holcolm and he is still there) and you could go to A&M and drive to this College of Education there and get the rest of your hours and be in the College of Education.
Education or in another 15 hour core of your choice. I ended up choosing education for everything because it really was my second career. Nursing was first, education was second. I pretty well knew that I could have my cake and eat it too. I could stay and maintain my skills but also I could I love teaching. In fact I put on Facebook just yesterday a historian wrote that a teacher never knows how long, a teacher’s influence may last forever they may never know how long it goes on and you don’t. Because you teach someone and then they teach maybe in your style and then they teach critical thinking and then they say, “Oh no, no you gotta look at the chart. You can’t just sit here and flap some cards at me about what you wrote down last night about the patient.” And I had it must have been 10 people, 10 students from the past wrote notes on Facebook last night. “Dr. B” or “Mrs. B” or “Brittle Britt” or “Thank you so much” or you know what is really sad. When I retired in in ’90 I’m sorry when I retired in 2009 I threw out everything out of my office because everything is digital now and I had all these lectures and I had all these notes. Years of evaluations that were this thick that you had to turn in in writing. You know which years of notes from students and I really am kind of sorry I threw those away. I kept some of those awards and I locked them up in a I put a few in a box up in the attic because I don’t have children and I don’t know if my nieces and nephews… they love me but I don’t know how much they will care about my awards and I just got another award a month ago at TWU for the Alumni of the year. It’s a lovely piece of crystal that I wish they had spent the money on the fund that I raise money for which is the Friends of the College of Nursing which is the only slush fund that the Associate Dean has which is to feed people you know instead of having faculty bring in food feed them. Bring them Subway whatever you bring and if the student has a fire give
them $1,000 and I’m still on that board. I have a big thing about that too. I’m not
making friends anywhere. But would they ever ask a physician, a physician who was the
partner in his firm to bring breakfast and if they did who would cook it? If it was a he?
Turn that off a minute.
NG: Can you tell me what your dissertation was on?
RB: Well I took that same thesis project that I had turned on to review the literature
and what was great was I had a review of the literature up until ’75 I had to just fill in up
until ’87 now because I went through the doctoral program I would take I finally had to
take what they would call a oh it’s a particular period of time where you would have to be
full time in the school in the doctoral program you… I’ll remember that about 3:00 a.m.
Natalie and I’ll call you. It’s a time when you just have to be full time at the school. So I
took a one semester leave of absence and my mom was ill anyway and I took that
semester and I got the entire I don’t know if you remember about the 80’s but this was
also the decade of AIDS and HIV and the beginning of it. We knew something about it
by ’81 but I was still sticking my raw hands in placental fluid with no gloves in ’81 just
to catch a baby or to keep a mother safe. By ’83 most of us were wearing gloves. But I
had this huge interest still in me wanting to be a first time mother over the age of 30. By
this time I was getting to be over the age of 35. And I didn’t really want to be called an
elderly primigravida if I were healthy, if I were normal height for weight if I were normal
body mass index you know I didn’t want to be old if I didn’t have hypertension or you
know you didn’t look as old as my mother did at 35 but then again she had 7 children in
10 years and smoked 3 packs a day and you know had hepatitis from a blood transfusion.
So I did it on the perceptions of educational needs of first time mothers over the age of 30
as compared to their child birth educators. And it was so interesting. The worst thing in the world could ever happen to you Natalie happened to me. I had my whole family together and I had defended the first, my first offense which took about an hour and you orally defend your project and I was already allowed into the City of Houston Bureau of Health Statistics and I sat for three months in a chair with this recorder and I read in in Harris County every mother who was 30 years of age or older first time mother in the birth records and I read in her name, her address, her zip code but nothing else. I wasn’t allowed to put in any other data. I did not include in my sample anybody who had lost a child. And that was well denoted on the birth certificate. But this was about ’85 when I got to do that. By the time I defended in ’87 they closed the Bureau of Health Statistics because of HIV. I was the last person who ever got to go get a random sample. I had 9,700 women in Harris County who had had first babies over 30 and I needed a sample of 400 to reach power. So I just used a random number table and chose 400. I had a survey that I had done a pilot study on with women at the school who had had their first babies over 30 and there were tons (both students and faculty) and I did about 51 to get enough reliability and validity on the data and it’s a good, it’s a really good questionnaire. Sorry fully I never published that data. Right after that my mother died in ’86. I defended my dissertation in ’88 and but the very first night that I sent out the women’s questionnaires I had 400 for the I had the entire population of certified, ICEA the International Certification of Child Birth Educators ICEA’s (I think it’s IDEA today) and there were like 450 and I just took them all and that was okay because there was no way to find any other educators and if you could prove that to your committee and it was great to have certified educators. And then I took a random sample of 400 women out of the
random number table. My family came over and we used different stickers. One was the mothers were red for blood loss (sorry!) and the educators were green. I don’t know why because it was my favorite color and then I put two different stamps. One was I had a baby bird stamp back then and then the educators actually had a teacher stamp. I think the postage was 22 cents. I can’t remember. That’s the one thing I wish I hadn’t thrown away was my all those questionnaires. That night they went out that day. Don’t ask me how somebody gets a mail in a day. But that night I was giving a 40th birthday for a friend (my husband’s partner in fact). And I got my first phone call from a mother and she said, “Mrs. Britt this is Rhonda Smith I wanted to let you know I got your so interesting questionnaire and I’m going to tell you the best news I fixed it for you!” And I turned green and I said, “What do you mean Mrs. Smith?” She said, “Well on the very first page of your four page questionnaire…” it was all just a Likert scale “Somewhat agree, agree like…” and I was using I was going to have to co-vary for age and I was using some very good but complicated statistical analyses and she said on the very first page goes, 4, 3, 2, 1 because obviously you always want you most liked your best thing to be the best. You want the most numbers and this is my most valuable educational thing. Right? That’s for statistics. The next page was 1, 2, 3, 4. I had a heart attack in the middle of this party. I got through the party. The cake my husband even hired some belly dancer. I had taken belly dancing years ago. We had some belly dancers to come. (Not a striper a belly dancer). By the time these people left at 11:00 I started crying and I went and looked at the questionnaire and I saw it. I mean Natalie this questionnaire had been reviewed by my committee 4 people by a friend at work by every one of my family 7 of them. Many of them who were well educated and I didn’t do it on the pre-test it was
done correctly on the pre-test. This was purely a typo by the typist. We had typist back then and I went and had a typist type in all my (which I hope you are doing) because it was a very tough number I mean it was 9,700 women…732 I mean that’s the sample I. Well by midnight that night after I got up out of a dead sleep, crawled down the hall…crying and saying, “Where is my four children and a car pool? I don’t want a PhD.” I was choosing a new random number table and picking out 400 new women and by 3:00 I had them typed up and by 7:00 I had called my entire family and they came over the following weekend and we sent out 400 new ones with a purple sticker for “I’ve been wounded,” [as in] a purple heart, that was my dad’s idea (my mother was dead). A new stamp, I’m sorry I can’t remember that stamp but I’m sure it was a purple heart too. Do you know that I ended up not using any of those 400 originals but out of those women over the age of 30 most of whom were professionals, most of whom were working, most of whom had made this really educated choice about delaying their pregnancies into their 30’s, 37% of whom had a C-section, 37%. This was also the era of high risk fetal monitoring and a lot of false negative issues. But unbelievable malpractice money being paid by doctors and suits and lawyers. There were so many lawyers. There were more lawyers than doctors. But long story short I decided I would not, I went and told my whole committee. I called and mea culpa, mea culpa, mea culpa and was so grateful I didn’t do it to the childbirth educators it would have just killed me because they would have just thrown it away the second time. Because I got from the mothers a 93% return rate. Have you ever heard of that? Never. If you ever want to do a study do it on women over 30. And the childbirth educators were also I got an 86% return rate. It was unheard of. So I ended up I did publish this data eventually but I ended up adding in for the data
women that fixed the survey half the women went to the next page and saw and fixed the survey. 4,3,2,1, 4,3,2,1, 4,3,2,1 and they fixed it. So for my defense I used just the women that got the brand new spanken’ but that was such a… I can remember it like it was yesterday. I wasn’t in this house but I had a similar hall. And my poor dog was crying with me and my husband was snoring.

NG: Can you tell me about your work at Planned Parenthood?

RB: Well first of all in my Master’s program I was put there as part of my clinical. As a Catholic that was really interesting because I couldn’t tell any of my relatives. They weren’t doing abortion then because Texas didn’t allow it in the 70’s. But I was put with this doctor that I swear to goodness looked just look Omar Sharif. And I had just seen Doctor Zhivago and I was married. Actually it was my first semester and I got to do everything. It was the most wonderful experience. So it was wonderful to be educated by it was a nurse practitioner there and she was a renegade. She was an older black lady. I will never forget her she was my mentor forever because when I went back to get my nurse practitioner add on, my Master’s add on it was a combined program between Planned Parenthood and TWU and Marie Tekle (T-E-K-L-E) and if you can find this woman I still have a home phone number for her there is no other woman that should be in this project than Marie Tekle. She got a certificate you know for years you know nurse practitioners started in 1964 the same year as Medicare and Medicaid and physicians assistants and started out as a PNP program in Colorado and the school of nursing was so upset by it. I mentioned this to you before. They did not want nurses to be little doctors. It was such a tumultuous time and I was only 14 but when I got to school at 18 it was still going on and we were well aware of this, “nurses are nurses we have our own code of
conduct our own license our own this we are not under physicians like physicians assistants” and it was a very strong philosophy well into the 80’s. Marie Tekle knew that these poor women who had no insurance who had no way to contracept unless they got to Planned Parenthood and I had read a lot about Margaret Sanger anyway. You know she’s one of those people like Ben Franklin who has a good side and a bad side. Of course I read most of the good. She was a maverick and I really believed in women’s choice and to this day while I’m very pro-life I am very pro-choice and I think you can do that because it’s all about legislation. Do you legislate someone’s choice? What if they are not the same religion as you? What is this? What if they are atheist and they don’t even believe that life begins in the womb? You know so the whole thing was a conundrum for me. But I learned everything at Planned Parenthood. And then my mentor Dr. Pat Smith who never went and got her doctorate she is another one who is 72 now and would be incredible for this project but she took me to Lion’s Avenue Clinic a Houston City Clinic and because we did SOAP notes (Subjective Objective Assessment Plan - just like the doctor’s did) we took care of our own population. I’ll never forget my first patient was a 17 year old single teenage mother who also had anorexia and the baby nearly died and gosh her name was Natalie, Natalie that little girl and I felt so strongly about my population. They were mine. It was unheard of. So my Master’s degree was so oriented toward being an independent clinician. Even though you were going to be a clinical nurse specialist which today is more associated with acute care like going into the acute care setting and knowing everything about a newborn and what’s wrong and what’s right. So you didn’t normalize and what’s wrong but you had to know that to be a nurse practitioner too. And now there are acute care nurse practitioner’s but there are still acute
nurse specialists. Nurses have cut their throat off to spite their nose. We have so many initials that the public does not understand that to this day I only put after my name, R.N. for registered nurse, W.H.N.P.-C which means, woman’s health nurse practitioner nurse certified and then my doctorate, Ed.D. and then because I got invited to be in this American Academy of Nursing which is supposed to be some … okay I’m going to say this right. It is an honor. It is a great honor to be a fellow in the American Academy of Nursing was to be chosen to be one of the most it was a juried award you were chosen as one of the most what’s the word for in any area whether it was clinical or scholarship or service or all four or all three or something or some other unique contribution you were juried or you were chosen by a select committee and it was to be an honor. Well I really didn’t want to do it to be honest. I was about to retire. I thought I was. It ended up being a year. But to be a fellow in the American Academy of Nursing is supposedly the hall of fame and I still do pay the $600 a year for that. Because I have not let go of my license, my certifications, my CNE’s, my CME’s I have not let go of that yet. That’s my adaptation problem.

NG: And how long did you work at Planned Parenthood?

RB: A full year as a student. Because and (which was so great because…I’m going to stop there just there and say that was really great). But then in 1989 we discovered in this city that there was an incredible dearth of primary care OB/GYNs and while we had a nurse midwifery program at Baylor College of Medicine they were trained by physicians there were no nurses they didn’t even put RN after their name. We didn’t really understand all this. It was a little bit controversial. In fact it closed down. Mainly because physicians still don’t in this city midwifery is still not accepted. Out of home
births are still not accepted. Everybody goes, “Well what if you have the cord around the neck?” “Well okay you know you could die in the hospital at that too if you can’t get there in two minutes.” But I then started working with Planned Parenthood with a friend of mine who took the job and it was going certificate as a Women’s Health Nurse Practitioner because they were the ones who opened one and Marie Tekle was the one who took it at Planned Parenthood back in the late 60’s. ’64 was the beginning and back in the late ‘60’s and early 70’s they had a woman’s health Nurse Practitioner program that was soon stopped but Marie Tekle was one of the students and that’s why she was so great to work under as a student because you put in your own IUD you did your own prenatal care, you did, you did everything. There can’t be anything more important than studying it and then being able to do it because that was one of my huge goals with students. “Don’t you dare get out of this place…” We even had a check list. “What do you mean you haven’t started an IV? What do you mean you haven’t put in an NG tube?”

NG: So this was in the 90’s you said that?

RB: Late 80’s ’89 and I did that until ’94, ’93 and then I took the course because it was then I got it affiliated with TWU. It wasn’t a doctoral course it was a post Master’s and I got my Dean onboard and the whole bit and they were all very leery that Planned Parenthood was the one that wouldn’t say that associate degree nurses couldn’t come and do it because so many of them were in the community, out in the boonies. So after three years, thank God I had graduated. I went back through it. I had taught the whole OB/GYN unit but I went back through it myself and the fun thing about a certificate program is Natalie is you can have as many clinical hours as you want and we required to
have 1,000 and in my graduate program I was only required to have 400. So the magnitude of having that much more clinical. I won’t tell you that was not hard to be working and doing that. But this was Bill Clinton and Hillary Clinton’s first time as President and Vice President I call her and they were doing the Hillary Billary Healthcare plan and nurse practitioners were going to be involved and so I was the first faculty that went back to become a nurse practitioner. And I wanted to be ready. I was sure. Pat Stark, the dean at UT was on the committee. I hope she is this project.

NG: We interviewed her last year.

RB: Great she probably didn’t go on as long as I did.

NG: We’ve got about 40 minutes and I need to ask about two big things. One is the Friends of the College of Nursing and the other is the Sigma Theta Tau so we’ve got to make sure to get those covered. So I wanted to ask how did the Friends of the College of Nursing get started at TWU?

RB: I had a Dean, Dr. Beth Anderson in the 80’s and she eventually went down to UTMB and she was probably one of the brightest women I ever met. She was a public health expert. She got her doctorate in public health, wrote a book with Dr. Judy McFarlane was probably in this project. They were both experts on violence I mean maverick experts on violence against women. And then it turned into family violence but they did the very first pamphlet for women and then they did the first danger assessment for women because as you know the most dangerous part of violence is having the woman leave the home. I mean murder is so common. But I was made acutely aware while I was in this doctoral program of the lack of money that the associate dean had. We had three, four campuses. I used to call them campi just for fun. Denton was the
mother campus and had a school of nursing there. We had two campuses in Dallas. Parkland Hospital Campus and Presbyterian Hospital Campus. Now the nursing was taught at Parkland because that was where all the main patients went and the OT and the physical therapy were taught over at Presby and they are now together. But then we had Houston since 1960 so the nursing school actually began in Dallas as an offshoot of Parkland Diploma Program Hospital School of Nursing. It became a total baccalaureate over two years. Parkland completely let go and the first Dean of our school was the Dean of the Parkland School of Nursing. Incredible woman. I was lucky to meet her.

NG: Who was that?

RB: I’m blanking. We will have to go to Google. I can see her face on the wall. It’s going to drive me crazy. But we will Google that when you turn this off. But when I was in the doctoral program I was so shocked that the associate dean couldn’t even help me with my year off or my semester off to do residency. (It’s called the residency in the doctoral program.) I had to take it off without pay - totally without pay. That was a scary decade of the 80’s for me and my husband. So we were still trying to save back from my husband losing those jobs. And I just went to my. I just… there was not a penny being raised for the whole university. There wasn’t even a development department at our university and I was in the Junior League. I was in various sundry things including Sigma Theta Tau who raised money. You know we built a building in Indianapolis with ten columns and our own chapter bought a $10,000 column. So I was shocked and as a woman of native Houstonian I just said, “You know Dr. Anderson we need to start (and I called her Betts) we need to start a Friends program. You know back then everyone was a friend of something. A friend of the library, I was on the board of
that for 100 years. A Friend of Urban Harvest a friend of something. I wasn’t very creative but let’s have a Friend of the College of Nursing Houston. And then let’s get it going here and let’s move it to Dallas and Denton and that’s exactly what happened. So I started it. I gave a little seed money. A whopping $500. But that was so we could offer CE for students that were ours. We offered free CE if they came over and gave a contribution to the Friends of the College of Nursing a small contribution. Nothing like you pay going to a conference and getting 6 CEU’s or 9. So sorryfully my Dean got array with the big Dean my associate got array with the big dean and literally the day my mother died I came back to school from Methodist and I went home first after she died at 4:00 a.m. and I had to lecture that day. I couldn’t believe it but I did. It was a lecture no one could take. And finally they called me and they said, “Jo Ann Devillis is going to take this.” (She wasn’t a Ph.D.) and she was a pediatric nurse and I went, “She is going to teach labor and delivery?” So I came and I did this lecture but first I went to this meeting and everybody was in the conference room and everyone was crying and the Dean just fired our Dean our associate Dean just fired her. Of course she already had a job if she wanted it at UTMB they had already called her. She had been recruited all over the nation. And it was over petty things it was over petty things. But I just cried and cried and cried. And then I cried and cried and cried because my mother died. And then Betts. This woman I felt was more. She was one of my sponsors for the American Academy of Nursing that’s how close we’ve kept. And the last thing she said to me was, “You must keep this money going. It’s the only thing we have to even give $100 to a student who can’t afford books! That was it.” So I remember truncating that lecture that day and going home and we gave a fairly quick funeral. My mother had been sick for a
full year. But not really sick until the last few months of her life. And she died paralyzed because of a nursing error. She got a blood clot on her spine after a debulking of a tumor. And a Filipino nurse just didn’t want to call the doctor at night. So I got there at 7:00 that morning and I called the doctor at home and he came running over and did more surgery but she died paralyzed. So I ended catheterizing my own mother. She died paralyzed.

She died November 21, 1986. That was the day that Betts got fired. So I continued this program. We did a 40th anniversary of the college. We did a 45th. We did a…when the school, the university turned 100 we were in 2001, 1901 it was started 2001 I did the 100th anniversary I did a program called “The Great 100” and we had nurses from all over that were nominated to be “The Great 100” and the saddest thing was we got so many that were so close to us you know our own faculty our own this our own that. But they were the most accomplished. We had a blind committee. So I then, my father died in 1996 and we started a golf tournament for him. And I was working my tail off on this golf tournament and it was all for junior golf. Well I don’t play golf. I’m the only one in my family that doesn’t play golf. First of all I only have one eye that really works and I was good but I couldn’t tell you where the ball went. But number two I never had time to play golf. And all my brothers and even my youngest sister played golf. Well I had the second year of this and I said, “You know…” Eddie was my brother my oldest and he loved this thing and we started it at Memorial and we just had our 18th year and from the 2nd year on one of the charities was the Friends of the College of Nursing. Junior Golf at Saint Thomas. The Eddie Burke Senior Junior Golf Tournament at Memorial the only PGA certified golf tournament so you can move up in rank and the Friends of the College of Nursing. And so I’m able to give them… it’s not a whole lot it started out in the $900
area I’ve gotten up to $5,500 a year. Because I myself I’m the only one doing it because the faculty are so busy. I’m sorry to tell you that today Natalie it’s just a cycle. You go through cycles where the School of Nursing when I first started I had two clinical groups we didn’t have enough faculty they were aging and retiring and now we’re back in the same thing. And now I have this huge guilt trip that I should go back to teach.

NG: So what is the status of the Friends of the College of Nursing now?

RB: The Associate Dean came to the tournament as usual this year. She is new but she is a close friend of mine. I always have helpers from TWU who help me get auction items. It’s not as much as I’d like but I have a cadre of at least 6 people who come. Dr. Rebecca Crepper she comes and spends the night and does the accounting with me. She’s an MBA and her husband plays in it. Ann Saint Germaine her husband plays every year. But long story short it’s active in Houston. We’ve got a purse or we’ve got about $20,000 in the it’s not a lot but since it’s only been since ‘83/’84 I think it’s a good start and it’s showed the big Dean that they too need a slush fund and they’ve too tried to take money out of our little Associate Dean fund but I wrote the bylaws and it’s not allowed.

NG: So you said this is mostly for faculty and students for you know kind of extra?

RB: Emergency needs, feeding them like we have a pinning ceremony so we feed the students at that. We can’t afford yet to buy their pins like the partners program. And I do want you to know that Pat Stark started the partners program three years after I started the Friends of College of Nursing and I had four campus to deal with. Pat had one. I think Dr. Stark is one of the most admirable nurse advocates I have ever known. And as you know she is getting her just deserve. She was just recently awarded what was it something not a Hollywood star of fame but something and she is now big up in the UT
System School of Medicine but I feel like she is a maverick dean and sorryfully deans like that are few and far between. I can’t tell you how many letters I get a day wanting me to be a dean somewhere. But I would probably put my foot right in it. And that’s my talent. Is dean by influence. I kind of loved it. Dean by influence. But I’m very proud of that and I have to admit that each year that it comes around every September it’s usually the first week of October every Tuesday and one day it happened on 9/11 we were having our tournament and at 8:30 all of us turned on our TV’s we had to be there by 9:00 we all saw the second building go down but we all went to the tournament because everybody called us and said “We’ve been told to go home and we don’t want to.” We played the golf tournament. It was our most profitable day ever. It was really our most profitable day. It was amazing. It was also early on after my dad’s death. It really wasn’t was it? 2001 he died in ’96. November 25, of ’96. So we just had our 18th year and I want it, it’s in my will it’s in my will they will get a sum of money that I hope will be another seed of endowment because the associate deans really don’t have time to raise money and really none of them are bent toward that. And as you know back in gosh ’90 I guess ’89 no wait when did we build the new building? I’m sorry Natalie this is all running together and I haven’t looked at any notes or gone online. But I did get appointed by, I got asked by the President and Chancellor of the University to Co-chair the only Capital Campaign TWU had ever had at that time. And that must have been in 1999 and I did that for no 2001. I retired in 2009 and I did that for 7 years and but also worked full time. So we were building a new building and the Dean the big Chancellor President knew from everybody knew that I had started the Friends of the College and that it was the only fund that had any money it and she came and asked me as a native
Houstonian if I would Co-Chair that Campaign with her. She was in Denton and it was hard but yes my reputation got around as, “Please y’all give money to your own place. Support your own place.” But now I’m going to tell you something that I hope won’t knock your socks off. But nursing school is not unlike nursing education nursing as an institution, nursing as an educational institution is not like any other business. You’re not paid enough to do what you do. You are asked to do more than you can do. You never leave for the day with having anything finished. And there was a lot of hard by women that had been teaching at that school and we were inside the hollowed … lines of the early medical center. Which is now as you know we have a south campus we have a north campus, we have a dad gum campus near Austin so these women and I wasn’t young. I was in my later 50’s when… my early 50’s when this happened. 55ish and there were women who wouldn’t give me a penny. I was shocked. Because they said, “I don’t want to leave this building.” The building has asbestos. The building was woefully. We couldn’t even wire it for online teaching. We couldn’t wire it! So I mean…But the president had come in and just mandated it and didn’t get our buy in and you know it’s kind of like if the airlines get the buy in or the people aren’t going to follow the rules. So we had a lot of unhappy people and it was my job. I called it a Pollyanna job. But I knew and I wanted the technology. I had been teaching all around everywhere going to Vienna going everywhere, going to Russia, going to Czechoslovakia going to places to speak where oh my gosh we thought we were behind? They can’t even take our licensure because their education was so, so, so rote, so behind in terms of science. So yes the College of Nursing Fund is still there. I hope it continues. I plan to continue fundraising for it in some way until I die. Now let’s start with Sigma Theta Tau.
This is a really fun story. Sigma Theta Tau was begun in the 30’s by and I hope I have that year right by 6 women who went to the Indianapolis. Okay now I’m going to make you stop because I’m not going to get this wrong. Well I’m going to confess and say to Natalie that I had to go and get this right about Sigma Theta Tau because I feel so strongly about honor societies and what they stand for in their mission and it’s unusual to have an honor society for your educational area and in 1922 having already had some honor societies such as Phi Beta Kappa, Phi Kappa Psi other groups around six nursing students from the Indianapolis University training school which was a diploma program and they wore little domestic hats like Sarah Gamp in Charles Dickens and they had dresses down to their ankles and they were taught by physicians but they did have three influential nurses. But the three woman, Mary Tolle Wright, Edith Moore Copeland, Marie Lingeman, Elizabeth Belford, Elizabeth McWilliams Miller and Ethel Palmer Clark were all born in the 1800’s and in 1922 they got their advisor together to start and honor society for nursing because nursing was not in the higher education area at that point and many universities weren’t even admitting women period. That’s why TWU really began in 1901 because many universities didn’t even admit women. But thirdly they knew that their curriculum was a very difficult and worthy of an honor. And so they did it. And they started it in Indianapolis at the University of Indianapolis it was actually the Indianapolis Hospital School of Nursing Training. Well then the University of Indianapolis soon after took them under their wing and they would begin to turn them into a some sort of degree but not quite a degree and that took a while but today there are over 450 chapters of Sigma Theta Tau and Sigma Theta Tau starts for honor, courage and love and there is a pin and there’s no hat and it was very slow growing from the 20’s to
the 60’s, very slow because baccalaureate programs were just being begun for nursing and I’m sure in your history you’ve determined that between the 20’s and the 60’s whoa! I mean we jumped. But then so did medicine. Medicine had a huge report that came out in the 20’s that said, “No more of this on the job training.” So Sigma Theta Tau and there are Greek name historical I can’t quote those sorry. But it amazes me that in 1922 these six young women that were students started this with a faculty advisor and they went and to other schools and recruited other chapters and they had bylaws and I’ve seen the original bylaws in the chapters and they had they were just amazingly mentored as well. So of course next it went to Johns Hopkins and then it went to whatever school was alive and well and very well respected. New York University one of the first. In New England one of the first ones but interesting to me that it started in the Midwest or the group of women that actually started on the farm. Not really metropolitan women. So by the time my graduation came around in 1972 we were taught about Sigma Theta Tau but not a lot. Most of us knew about the other honor societies that other people were getting about graduation little now we call them key chains or fabs or something or little ribbons or something that you wore if you were Phi Kappa Kappa, Phi Kappa Gamma, Phi Kappa what? Phi Beta…

NG: Phi Beta Kappa.

RB: My mother was Phi Beta Kappa at UT and she kept saying to me, “You need to be Phi Beta Kappa.” I said, “Mother there is an honor society for nursing and you have to be asked and you have to be in the top third of your class. And you have to make a 3.0 or better. Actually back then it was 3.5.” And do you know in 1972 we got our little letter. I’ll never forget my roommate and I and my two sweat mates and I getting it. They
wanted $60 to buy the pin and to join the program. Natalie none of us had $60 to our name. We called our parents and most of us had been working through school. You know I literally said, “I can’t afford this I’ve got to buy a car. I already have a job I have to buy uniforms.” and I turned it down.

NG: I’m sorry to cut you off but can you tell me about the TWU Beta, Beta chapter that administratively broke off?

RB: Well that was me and it was about money again. When I went to the graduate program in 1973 and I graduated in September of 1973 I graduated in December of ’75 they had just chartered their first Sigma Theta Tau class and I thought, “Maybe I should do that as a student?” But I knew I was moving to El Paso. I thought, “Well I’ll do this at UT.” And I didn’t. Do you know that I didn’t join Sigma Theta Tau until I was asked as a faculty member in 1978 and it was called a community leader because this was really for students but we have a master’s student agreement now and a doctoral student you can enter at enter level of a student hood but now we have a community leader area and I joined as a community leader. In ’78 5 years after I graduated I became immediately involved because to me the mission and the goal were just so fabulous to only baccalaureate students could join, huge issue of why would a nurse want a 2 year degree and then have to go back to get a four year degree to go up in administration or get more money or get to teach. You couldn’t teach without a Master’s degree. So we all, those of us that got baccalaureate’s just were very involved in the baccalaureate pleads as the entry level education and it was a tough decade. Because I was also head of the TWU National Student Nurses Association. I was their advisor. I let them sleep in my room. And I just kept telling them, “You’re going to get on the Elevator and there’s going to be
some AD students that will probably spit on you.” And we had lots of problems with that. We had faculty with AD schools and by the way associate degree schools proliferated. Even though they were started by a wonderful Master’s prepared nurse who just knew thought that we needed more nurses and it was closer to their home it was a two year degree. It’s been a tough road. But I became very involved with Sigma Theta Tau and by 1984 I was president. But I wasn’t called President. Since we chartered the program and we were literally three campuses, Denton, Dallas and Houston the biggest campus at the time was Dallas Parkland. The biggest number of students, the largest number of faculty. So they got the presidency and the person in Houston was the second vice President. And in Denton they just went to the Dallas meetings. And I just suddenly realized after two months on the job that they also got all of our budget every person who renewed every year or every new student that we got or every new member all the money went to Sigma they took 10% or something and they sent the money back to Dallas. Now I really like the Present of the Dallas campus. She was a wonderful woman. But I called her the very first week that I had to pay some money to something and I went, “I have to get you to give me the work order to get money for a conference we’re putting on with Prairie View A&M which is the 4th the 5th baccalaureate program available to people.” And she said, “Yeah you do.” And her name was Steele I’ll never forget it. (Marian) and I said to Marian, “Marian this is not going to work.” I said, “You know this is not going to work. How has this been working?” She said, “Well it’s been difficult.” Well then I called international and by then it wall called Sigma Theta Tau International because other called like officially our territories Puerto Rico, American Samao, our territories really wanted to be members in the honor society. So we changed our name from Sigma
Theta Tau to Sigma Theta Tau International in the 80’s and I called the President of the entire Sigma Theta Tau International who just happened to be my very first Dean at UT the one who talked me into talking me into changing from pre-med into nursing and her name is Dr. Billy Brown and she should be in this history because she started her life in Galveston went from Houston to Galveston and Galveston to UT Austin and now lives in Manchaca, Texas and at 90 is alive and well and active in Sigma Theta Tau. I talked to Billy that day. We were chapter 48 TWU was Chapter 48 and I believe it was, don’t quote me but we might have even started this chapter in the late 60’s. Because I do remember that Pat Smith my mentor was one of the charter members and we now have a closet because of me with all of our stuff in it and a file cabinet and we started having an archivist who kept everything. But I actually went up to a Sigma Theta Tau conference every two years. It’s a biannual conference. Every two years it’s in Indianapolis at our mother building - its gorgeous. We were the first, it cost $10 million dollars to build back in the 80’s which is unbelievable. And it has a nursing library, a nursing research … its unbelievable what we have done. Way more than Phi Beta Kappa … whatever I can’t remember... We are one of the few honor societies that has its own building with their own research library and their own catalog of nurse researchers. You want to be involved with this group. So I made a conscious decision to be involved with two nursing groups. The first one was the American Nursing Association and then the Sigma Theta Tau was my second. You cannot spread yourself around in these groups because then nothing gets done. So when I suddenly I had been with ANA and TNA with so long and I became a nurse practitioner I joined the American College of Nurse Practitioners and I still have to belong to the ANA because I am a American Academy of Nursing
Member. I really put my focus on Sigma. And Billy Brown worked with our chapter in Dallas and I can’t tell you how many times the Dallas people and I went up there within the next year when I said we have got to separate financially. We cannot I don’t… none of us we took a huge vote. You could be a chapter at large in the Houston area you know and maybe just take in people from where ever who moved from Indianapolis and didn’t want to affiliate with UT’s Chapter of Prairie view Chapter. None of us wanted us to lose our number 48 because it was now at 300 or 250 or something and we didn’t want to lose our 48. You know we we were one of the top 50 that had an honor society. You know can you imagine? But that was big from 22 to the late 60’s we only had 50 some odd chapters. So you see how it grew slowly. Billy Brown that woman can find a way to do anything and she went with my proposal and it was cosigned by my president in Dallas and my second vice presidency. And we also only got to have officers that were second, second, second, second. It didn’t sound very good. You really didn’t want to run for them. But we each had a Houston and Dallas had a what do you call it when you go to conference you each had a delegate. That was good. But Dr. Brown took a proposal to the board and at the time Nell Watts was the Executive Director and she had been since 1950 and she stayed until 1990. Nell was just shocked. She had never had anything like this and she said to Billy, “Well Billy the only thing I can think of was.” “I’ll never think we’ll get to 600 chapters. Let’s make Houston 648 and we’ll make Dallas 048 but they are all 48 and we will just divide them financially. They will get all of their members. Their members will change to 648 every inductee every new member will get a card that said 648 on it.” (Mine still has it) and that was very satisfactory to all involved. Would you believe we are still at what did I say 550 chapters worldwide? So I hope to goodness
we don’t get to 648 because I don’t know what they will do then. But yes it was a very important financial move and would you believe within 4 years of that happening one of our members died. One of our Houston members and she was a charter member and she gave the Sigma Theta Tau Houston Chapter 648 $10,000. $10,000 now that may not sound like a lot but for us it was like a shot in the arm and Houston got to keep all of it.

NG: Was there any animosity from the Dallas or the Denton?

RB: At first yeah there was some animosity from everybody. Well some of the previous presidents said to me, “Robin you just have to do this and you have to do this, and you have to this work order and you have to get online.” And I went, “I’m having trouble getting people to run for office as second vice president. My nominating committee can’t get anybody.” It ended up being just faculty from the school who were just kind of taken by the throat. “You will run.” We needed community members. We needed people. We needed our students. So if you were president that was a big deal. Well I stayed on as three years. It was normally a two year presidency, second vice presidency. So I became president and stayed on for two years as the president so it would rotate, Dallas and Houston as well as Houston with the vice president. Yes as first just like the building Natalie it was new it was different but I’ll tell you what the treasurer was so happy. And people like Rebecca Crepper who was there and had an MBA and was the treasurer of Sigma Theta Tau at the time which didn’t hurt our Sigma Theta Tau International I was her campaign chair. After I was her campaign chair they quit campaigning because I mean I had pencils I had pens I had flyers. I had campaigned all over everywhere and she became treasurer which was the first major office a TWU person had held at the international level. So yes it was at first difficult but Sigma Theta
Tau became my focus for a long time. I became a distinguished lecturer. I was chair of many, many committees. I especially was on the foundation side in the late 80’s they started a foundation for Sigma Theta Tau knowing that they needed at 501(3)c to endow the organization and this was after building the building. Concomitant with and just a really start woman including Dr. Crepper just said, “We’ve got to have our own dollars, our own foundation.” Things like Bayou Bend that I’m a docent at now Natalie. Mrs. Ima Hogg left the house and all the furnishings but not a trust to run it. We have to raise $3 million dollars a year. Sigma is still raising money but they are in a pretty good position. Because they started things like The Virginia Henderson Fellowship. And I gave, my father died and that year they started The Virginia Henderson Fellowship in ’86 and ’87 and I gave $5,000 of whatever little bit I got from my dad and I got my name on the original wall etched in glass. Little did we know there wouldn’t be any more glass but my name’s up there and I’m very proud of that fellowship.

NG: Are you talking about in the main building?
RB: Yes in Indianapolis. You can go and see Robin Burke Britt and by then I didn’t have my doctorate that wasn’t until ’88 but I was so proud of this. I don’t know why I have always had the notion that one must be self-sustaining. Maybe it’s from being in a family where we were up and down like my dad was an entrepreneur but he didn’t really like to carry through but we were always up and down but I always felt the notion that every place should be self-sustaining and I feel this way about people as individuals. The straighter you can stand and not lean on everybody else is good but if you need to lean, lean on the right people the ones that can get something done.
NG: Was there anybody else besides the Billy Brown that was involved in helping to separate?

RB: My entire board and the Dallas Board and Billy Brown and her entire board?

NG: Do you remember who was on your board at the time? Sigma Theta Tau is interested in some of that history?

RB: I know they are especially Mary Ann Vincent my little mentee and Adrian Melissinos. I can’t believe I threw all those records away.

NG: Okay.

RB: But they are in there. They are there in that closet. They are there at that international. They are in their board records. Okay I want to say that Dr. Krepper was probably the treasurer of the larger organization. Rebecca Krepper she is still at the school. Adrian needs to interview her. I’m afraid that my friend Dr. Marian Steel died. She was a very, very fierce woman, very difficult to approach. But boy she was pragmatic and that really helped the cause. She was very powerful. I was just kind of, I still looked young. I wasn’t given the greatest of respect but I shoved it through, and Dr. Brown really. She just knew the problem I was having. I was having to take twenty-five steps to get a dollar. And we didn’t even get all the money. We were given 65% of what we actually were putting in. So I know Adrian Melissinos and Mary Ann Vincent. The current officers are so wonderful and I want to be able to remember that really well. And you know what anything that I come up with could be on my computer because I saved my entire TWU life on a hard drive.

NG: Yeah I mean they might be interested in that information at the archives if you have it.
RB: The big names were Marian, the Associate Dean at the College of Nursing at Dallas at the time and president of Sigma. Can you imagine you had to be the Associate Dean and president? Then me and Rebecca Krepper, Dr. Billy Brown, Nell Watts who was the executive director, sorrowfully she is gone. But Billy Brown is around. She is in Manchaca, Texas I can email her today. You know I’ll do that. I’ll email her and see if she remembers anything about that. Because we are unique, there is no other, they’ve never done it again. I don’t think they will. Everybody else now has to be an at large chapter. But I am so grateful that we all still as TWU are Sigma Theta Tau Beta Beta Chapter so we had just gotten into the double doubles you know it had been, alpha, betas. In fact I believe of course Indianapolis is Slpha but I know that UT Galveston is something like Beta. They were born in 18 something as a baccalaureate program. Well a little degree program.

NG: Well is there anything else that you feel like you need to mention or you thought we would talk about? I feel like we talked about a lot?

RB: I feel sorry for whoever is going to transcribe this? I hate to be so anacoluthon-esque you know I’m tangential at the best. I think actually Natalie you had a wonderful schedule of questions. What this is reminding me of the vagaries of memory that people should keep diaries. In fact I have I kept diaries for years and I still have them. I have a feeling that I can go to one of my little TWU calendars and find out exactly the day this happened. I didn’t throw those away. I’m also reminded that your career is fleeting and get everything out of it while you’re in it. I’m reminded also that even though you have a niggle or a doubt about something, a niggle is a Texas term for doubt. If you are over 50% there you need to move forward. It’s not a 90 thing not even a 99 thing because
that’s humanism, that’s who we are. And I’m reminded of how much I miss, not so much academic committees and some of the petty jealousies that go on in any organizations. I keep telling people the grass is not greener, trust me! But I’m reminded of the patients. I remember the students I can remember like it was yesterday. Some of the details. Like the young woman with the Bandl’s ring. So there are unbelievable random access memory back here that you can access through this kind of work and there’s a group in Austin called Folk Life Resources. My husband loves outsider art and Folk Art and they have done a history project on those artists that were untrained artists so I just want to say that whoever began this project from Adrian to you who’s running it that it is so valuable. Nursing to me we are the most respected we are the most respected healthcare field by patients and I think it comes from some unduly amazing sense of commitment. I’ve always wished that more nurses didn’t smoke and I’ve always wanted to know if nurses got divorced at a less rate than other professions. So I’ll end on that. That I’m still thinking on research questions and thank you so much.

End of interview