Can you give us an idea about your professional background and your pathway to nursing?

When I was 18 years old I had to make a choice about career and going to university. I was very interested in the idea of helping people. Nursing seemed a great choice because I was attracted to learning those skills and entering into the profession. Back in the day in Holland (late 1970’s) the BSN was emerging as a new option. The Hanzehogeschool, a university in my hometown of Groningen, was just starting a BSN program when I graduated from secondary school. I entered this program and graduated in 1982.

To me the BSN seemed efficient because it covered all the areas of nursing at once. Mental health nursing, pediatrics, acute care, they were all discussed. After having completed my practicum in mental health, I became committed to that domain of practice, really like working in that area, and have done so ever since. The BSN set the stage for my career, and I have been happy I made the choice of nursing.

When I entered the School of Nursing I had no idea about nursing. I soon became involved in the debates of the time, mostly around what nursing really was. I thought, how can these people not know what nursing is? It seemed a simple answer to me until I started interacting with my professors, students, other nurses, patients, and the literature, and then I realized that nursing was complicated! In this BSN program we were introduced to the ideas of holistic nursing and primary care. At the time I found it very hard to grasp or understand where these ideas came from. So I thought, I need to study this more. The concept of nursing theory really grabbed hold of me and after my BSN I entered the University of Groningen to pursue a masters in philosophy. I completed this degree in 1989.

How does one go from nursing to philosophy to history of nursing, which is your current focus?

My clinical focus after the BSN was in mental health nursing. This is where my interests really still lie. In 1982 I went to work at the university hospital in the psychiatric clinic. This hospital was very progressive and interested in new models of nursing practice. I was thus exposed to a lot of new initiatives that were inspiring and intriguing.

During my philosophy studies my supervisor was a professor who was an expert on critical social theory. He told me to stay focused on nursing in my study of philosophy, where I could study the development of nursing as a science. This was a good compromise for me at the time, because I wanted to pursue academic work while continuing to be involved in the clinical aspect of nursing.
I graduated with my philosophy degree (MA) in 1989, and then entered a masters of nursing program (MSN) at the University of Pennsylvania (Philadelphia) at around the same time. I was fortunate to win a scholarship to do so.

You mentioned that this philosophy professor had an amazing influence on your career. Do you have other nursing teachers who helped shape you?

One of my teachers in my BSN program became a nursing leader in the Netherlands. His name was Dr. Rob Van Der Peet, and he wrote a series of highly respected nursing textbooks that became a standard work for nursing education in the Netherlands and perhaps beyond. Other instructors that really shaped my practice and stimulated my thinking were Lammie Hadders and Mieke Walenkamp. Because our BSN cohort only had about 60 students, we traveled through the BSN program with the same teachers the entire time, and they knew us well. The same is true for my teachers in philosophy. I was fortunate to have Dr. Lolle Nauta as my supervisor. His thinking has had a lasting impact on my career.

While at the University of Pennsylvania, you pursued both a MSN and PhD in nursing, graduating in 1997. How did you come to find nursing history?

The goal of my masters program was on clinical specialization – I worked with families and received training as a family therapist. Margaret Cotroneo was my mentor. I was not interested to do an empirical study on mental health nursing, for example. My questions were more broadly about the development of nursing as a profession. During the early years of my study at the University of Pennsylvania I discovered that there was a Center for the Study of the History of Nursing at the U of P, and I became involved with the students and professors there. Some of the questions I had found while working with these nurses had to do with linking conceptual elements with historical knowledge and theory. I asked, how do theories come about? How do nurses go about making nursing theories and shaping their practice? Did mental health nurses for example use psychological theories when this field was founded? I soon found out they did not, at least not around 1900 in Dutch asylums, but I did learn much more about the development of the field of psychiatric nursing once I began to study it historically. These questions and many new ones still drive my work to this day.

Dr. Joan Lymaugh at the U of P was a tremendous influence on me in my doctoral work. She helped me to get involved in a history project of the International Council of Nursing (ICN) by giving me a chance to be a RA (research assistant). This project turned into a book on the ICN. Lessons and techniques I learned while working with these amazing nurses helped inspire my dissertation work. My dissertation was on the history of mental health nursing in the Netherlands, which has been published as a book. [This book is called The Rise of Mental Health Nursing: A History of Psychiatric Care in Dutch Asylums, 1890–1920, Amsterdam University Press, 2003.]

After graduating from U of P, how did you come to be at UBC in the nursing department?

When I received my PhD, of course I needed to find work. My first job was at the University of Alberta in Edmonton. I did not mind coming back to North America (I was back in the Netherlands by the time I finished my PhD) to work in Edmonton because I believed that there was a broader evolution of nursing. I was interested in, and I was not particularly wedded to one particular country. I found another opportunity at the
University of Calgary where I expanded my program of research further. In 2004, the UBC School of Nursing offered me a position which gave me another opportunity to more fully expand my work on nursing history. Of course, I accepted.

**Having practiced and studied nursing now in several countries, why is nursing important?**

Nurses help people who want to stay healthy and people who are sick. Speaking more generally about the registered nurse, we need to look at the context of health care and be very proactive about retaining nurses who are taught to critically think. That is the essence of what nurses do.

In terms of my interest in history, this lens provides context to what nurses do. We need to look at clinical issues as well as where nursing has come from – and that is the history piece.

**Finally, what does the Killam Award for Teaching mean to you and what did you do to celebrate?**

This award is quite an honour!! As an instructor, you encourage people to think in new ways. I have loved teaching ever since the first time I stood in front of a group and taught. Regarding my graduate students, I really want people at this level to feel encouraged to share their ideas and to learn and develop their thinking. Generally I feel I could contribute back to students what I have received myself in terms of excellence in education. I really want people to have a good learning experience.

To celebrate, my family and I had dinner and we were happy about it!