

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel in the order listed for Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Barbara Given, Ph.D., R.N., F.A.A.N.		POSITION TITLE University Distinguished Professor, College of Nursing Principal Investigator	
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Ohio State University, Columbus, OH	B.S.N.	1964	Nursing
Ohio State University, Columbus, OH	M.S.N.	1965	Med-Surg/Nursing/Admin.
Michigan State University, East Lansing, MI	Ph.D.	1976	Admin./Higher Education

A. Positions and selected Honors.

1966-78 Undergraduate Medical-Surgical Nursing and Research, School of Nursing, MSU
 1977-80 Associate Professor, Assistant Director of Graduate Program, College of Nursing, MSU
 1980-87 Professor, Director of Graduate and Research Programs, College of Nursing, MSU
 1987-2001 Professor, College of Nursing, MSU
 1990-1997 Associate Director for Cancer Prevention and Control at the Cancer Center at MSU
 1996-2000 Associate Director, Institute for Managed Care, MSU
 1997-Present Walther Cancer Institute, Research Scientist
 2000-Present Senior Scientist, Institute for Health Care Studies, MSU
 2001-Present Research Fellow, Michigan Public Health Institute
 2001-Present University Distinguished Professor, College of Nursing, MSU

Outstanding Faculty Award, Michigan State University (1983).
 Distinguished Contribution to Nursing Science Award at the American Nurses Foundation (1994).
 Recognized as a Distinguished Faculty Member of Michigan State University at the Higher Education Awards, Michigan Association of Governing Boards of State Universities (1995).
 Oncology Nursing Society's Distinguished Researcher Award (1995).
 Governing Council of the American Academy of Nursing for a three-year term (1995-1998).
 Friends of the National Institute of Nursing Research Congressional Breakfast Presenter (1999).
 Life Time Achievement Award, College of Nursing Alumni Association (2000).
 Michigan State University Distinguished Professor Award (2001).
 Elizabeth McWilliams-Miller Award for Excellence in Research, Sigma Theta Tau International (2001).
 Friends of National Institute for Nursing Research Pathfinder Distinguished Researcher Award (2001).
 ONS Schering Excellence in Cancer Nursing Research Award (2002).
 MCC's Spirit of Collaboration Award for collaboration on "Characteristics of Patients Who Enter Clinical Trials". (2002)
 Midwest Nursing Research Society Honor a Researchers (2004).

B. Selected peer-reviewed publications (in chronological order).

Kozachik, S. L., Given, B. A., & Given, C. W. (2003). Testing the efficacy of an intervention directed toward family caregivers of cancer patients: The family care research program. In J. W. Hawkins & L. A. Haggerty (Eds.), *Diversity in health care research: Strategies for multisite, multidisciplinary, and multicultural projects* (pp. 160-180).

Given, B., Sherwood, P., Given, C. (2003). Family care during active cancer care. Commissioned White Paper. *National Cancer Institute, Cancer Education Series*.

Given, B., Sherwood, P., & Doorenbos, A. Z. (2003). Caregiver scenarios: Caregiver role strain, caregiver health, caregiver skill, respite for the enmeshed caregiver, competing role demands-occupational, competing role demands-personal and social. Commissioned work by the *National Cancer Institute* for the consumer education series "*Facing Forward*".

Jablonski, A., Gift, A., vonEye, C., Given, C., Given, B. (2003). A test of the theory of unpleasant symptoms. *Research in Nursing and Health*.

Sherwood, P., Stommel, M., Murman, D., Given, C., Given, B. (In press). Primary Malignant Brain Tumor Incidence and Medicaid Enrollment. *Journal of Neurology*.

Stommel, M., Kurtz, J.C., Given, C.W., & Given, B.A. (In press). A longitudinal analysis of the course of depressive symptomatology in geriatric patients with cancer of the breast, colon, lung, and prostate. *Health Psychology*.

Given, C., Given B., Rahbar, M., Jeon, S., McCorkle, R., Cimprich, B., Galecki, A., Kozachik, S., DeVoss, D., Brady, A., Fisher-Malloy, M., Courtney, K., & Bowie, E. (2004). Does a Symptom Management Intervention Affect Depression Among Cancer Patients. *Psycho Oncology*.

Given, C., Given, B., Rahbar, M., Jeon, S., McCorkle, R., Cimprich, B., Galecki, A., Kozachik, S., Brady, A., Fisher-Malloy, M., Courtney, K., & Bowie, E. (2004). Effect of a Cognitive Behavioral Intervention on Reducing Symptom Severity During Chemotherapy. *Journal of Clinical Oncology*, 22(3). 507-516.

Sherwood, P., Given, B., Doorenbos, A., & Given, C. (2004). Forgotten voices: Lessons from bereaved caregivers of persons with a brain tumor. *International Journal of Palliative Nursing*, 10(2), 67-75.

Sherwood, P., Given, B., Given, C., Schiffman, R., Murman, D. & Lovely, M. (2004). Caregivers of persons with a brain tumor: a conceptual model. *Nursing Inquiry*, 11(1), 43-53.

Given, B., Given, C., Rahbar, M., Sherwood, P., McCorkle, R., & Jeon, S. (2004). Reactions of family caregivers to a cognitive behavioral intervention for patient symptom management. *Cancer*.

Given, B., Sherwood, P., & Given, C. (2004). Symptom Clusters. Chapter of "Pocket Guide to Managing Fatigue in Cancer," A. Schwartz, Ed. Jones, and Bartlett, chapter 8, 143-162.

Given, C., Given, B., Rahbar, M., Jeon, S., McCorkle, R., Cimprich, B., Galecki, A., Kozachik, S., DeVoss, D., Brady, A., Fisher-Malloy, M., Courtney, K., & Bowie, E. (In Press). Does a symptom management intervention effect depression among cancer patients: results from a clinical trial. *Psycho-Oncology*.

Given, B., Wyatt, G., Gift, A., Sherwood, P., DeVoss, D., & Rahbar, M. (In Review). Burden and Depression Among Caregivers of Cancer Patients at the End-of-Life. Submitted to *Psycho-Oncology*.

C. Research Support.

Ongoing Research Support

NCI (K05 CA91832) Given, B.A. (PI) 9/1/02 –8/31/06

Science of Family Involvement in Advanced Cancer Care

A secondary analysis will be conducted on data from four randomized clinical nursing intervention studies to determine if the intervention had an effect on caregiver recognition of patient problems, caregiver involvement in care and patient outcomes. Strategies used by the caregiver will be analyzed to determine if they can be classified using the Schumacher model.

Role: Principal Investigator

Walther Cancer Institute Given, C. (PI) 7/1/00 – 6/30/04

Senior Scientist Award

The goal of this award is to advance research in behavioral oncology through the Behavioral Cooperative Oncology Group (BCOG). Objects of this position will be to: 1) analyze data and publish research papers in peer reviewed journals; 2) carry out existing research projects where funding is currently in force; and 3) develop grant applications for funding by such agencies as the National Cancer Institute, American Cancer Society, and the Department of Defense.

Walther Cancer Institute Given, C. (PI) 7/1/99 – 6/30/04

Comparison of Delivery Methods for Supportive Care

The major goal of this project is to identify patients newly diagnosed with advanced disease and patients with recurrent disease and follow them to death or for up to nine months beginning with patients (and caregivers if available) who were entered into treatment during the past six months and continue for up to six months prospectively.

Role: Co-PI

NCI (R01 CA79280) Given, B. (PI) 4/8/03-3/31/07

Family Home Care for Cancer – A Community-Based Model

To reduce the number of and severity of symptoms reported, physical role impact, social function and emotional distress for patients with cancer undergoing chemotherapy. Patients receiving an 8-week, 6-contact nursing intervention targeting pain and fatigue will be compared to patients receiving standard oncology care.

NCI (R01 CA030724) (Given, C.W.) 5/1/03 – 10/31/07

Automated Telephone Monitoring for Symptom Management

To improve the management of symptoms, patients with cancer undergoing chemotherapy will be monitored using an automated telephone system to record the severity of 7 prevalent symptoms for up to 8 consecutive weeks. Outcomes include; significant reduction in symptom severity and improvement in health states.

NCI Nail, L. (PI) 4/1/04 – 9/30/06

Symptom Clusters in Cancer

Completed Research Support

Michigan Department of Community Health Nerenz, D. (PI) 10/1/02 – 9/30/03
Cancer Prevention, Outreach and Cancer Control for Patients in Medicaid Managed Care Settings
This study consists of two sub-projects. The first is an examination of care and utilization of underserved cancer populations utilizing Medicare and Medicaid cost data and the second explores access to chemoprevention trials in underserved cancer populations.
Role: Program Leader

Walther Cancer Institute Cimprich, B. (PI) 7/1/01 – 6/30/04
Successful Transition to Survivorship Following Breast Cancer Treatment
This study is developing and evaluating a program, TAKING CHARGE, to assist women who have completed breast cancer treatment in dealing with the problems that they confront in resuming cancer treatment in dealing with the problems that they confront in resuming every day life activities. Using a sample of 120 women at three BCOG sites, we are studying whether the program improves emotional and physical well-being, eases adjustment in family, work and social roles, and increases quality of life.
Role: Co-PI

MSU Foundation Gift, A. (PI) 7/1/99 – 6/30/03
End of Life Center of Excellence
The Research Center of Excellence in End of Life is created to develop a program of research around the needs of individuals at the end of life. Numerous chronic diseases will be included with a special focus on symptom management including depression, dyspnea, pain and fatigue.
Role: Co-PI

NINR/NCI (R01 CA79280-07) Given, B. (PI) 6/17/97 – 3/31/03
Family Home Care for Cancer-A Community-Based Model
The major goal of this project is to determine if, when compared with conventional care, patients undergoing chemotherapy as a component of primary treatment, who receive the Cancer Care Intervention experience fewer symptoms and less bodily pain, improved emotional health (less depression), and lower levels of symptom severity, activity limitations due to symptoms, to improve patient physical functioning and to reduce anxiety.

Walther Cancer Institute Giesler, B. (PI) 7/1/98 – 6/30/02
Prostate Cancer Quality of Life for Patients and Caregivers
The major goal of this project is to compare the effects of a cancer care intervention with standard cancer care management on newly treated prostate cancer patients with clinically localized disease and their spouse/partner. This project will refine and pilot a prostate cancer care intervention focused on the patient/spouse dyad aimed at improving the quality of life during the first year following treatment, a critical period when side-effects tend to be their most severe.
Role: Co-PI

NIH/NIMH (R01 MH57099-01A2) Smith, R. (PI) 4/1/99 – 3/31/02
Improving Outcomes for Somatizers in Managed Care
The major goal of this project is to provide improved care at the same or reduced costs for chronic somatizing patients, those patients without disease explanations for their prominent physical symptoms. It is predicted that a comprehensive multidimensional management intervention will lead to the following changes: 1) improvement in mental health, physical health, satisfaction with care, and economic productivity; 2) decrease in pain, nonpain physical symptoms, anxiety, depression, and health care utilization. 3) No change in costs for health services used is expected.
Role: Co-Investigator

Michigan Department of Community Health Farrell, J. (PI) 10/00 – 9/01
Cancer Prevention, Outreach and Cancer Control for Patients in Medicaid Managed Care and Community Based Programs

Work on this grant was separated into two subjects. The first project seeks to demonstrate successful models for cancer screening and continuing cancer care within selected models of Medicaid managed care. The second project seeks to survey patients on phase II and III clinical trials in order to determine if those who participate in these trials perceive their care differently from a psychosocial benefit perspective than those who refuse participation and are receiving standard therapy.

Role: Program Director, Co-PI

Michigan Department of Community Health Given, B. (PI) 9/01/98 – 9/30/01
Telephone Smoking Cessation Service

This project is designed to evaluate the effectiveness of the 1-800 counseling for smoking cessation for Medicaid recipients. Based on the results and effectiveness a statewide program will be set up to offer a smoking cessation service.

Dept. of Defense Wyatt, G. (PI) 3/99 – 2/01
DAMD17-98-1-8318

Improved Follow-up of Breast Abnormalities through Comprehensive Breast Care in Women 40 to 70 Years of Age
This study will test a three-component intervention designed to enhance primary care physicians' skills in secondary prevention, diagnosis and follow-up of abnormal findings in the control of breast cancer. It is directed at a population of physicians (resident in training) in which a pilot study has shown suboptimal management of breast problems. A standard-based approach to breast cancer, which in turn will improve prognosis, will be implemented.

Role: Co-Investigator

Michigan Department of Community Health Farrell, J. (PI) 10/99 – 9/00
Cancer Prevention, Outreach and Cancer Control for Patients in Medicaid Managed Care and Community Based Programs

This project seeks to demonstrate successful models for cancer screening and continuing cancer care within selected models of Medicaid managed care.

Role: Program Director, Co-PI

Dept. of Defense Wyatt, G. (PI) 9/96 – 8/00
(DAMD17-96-1-6325)

A Subacute Care Intervention for Short-Stay Breast Cancer Surgery

The major goals of this project are to deliver and assess an in-house intervention designed to target the period of time immediately following initial treatment (surgery) and continues through the critical first 2 weeks (subacute care) until women are back into the formal health system for adjuvant therapy.

Role: Co-Investigator