

BIOGRAPHICAL SKETCH

NAME Lutenbacher, Melanie	POSITION TITLE Associate Professor		
eRA COMMONS USER NAME			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
University of Texas, Austin	B.S.	1974	Nursing
California State University, Long Beach	M.S.	1986	Nursing
University of Kentucky College of Nursing, Lexington	Ph.D.	1994	Philosophy (Nursing)

A. Positions and Honors**Positions and Employment**

1974-1975	Clinic Nurse, Sadler Clinic, Inc., Conroe TX
1975-1976	Staff Nurse, Student Health Center, Murray State University
1976-1977	Nurse Supervisor, Student Health Center, Murray State University
1977	Charge Nurse, Memorial Hospital, Clarksville, TN
1977-1978	Public Health Nurse as Regional WIC Nurse, State of TN, Montgomery County Health Dept.
1979	Public Health Nurse as Teen Health Educator Family Planning Program, State of TN, Mid-Cumberland Regional Office
1980	Nursing Director, Drake Student Health Center, Auburn University; Staff Nurse, Vanderbilt University
1981-1982	Home Health Nurse, Private Duty - Home Health, Upjohn Healthcare Services
1983-1984	Nurse Coordinator, Preschool Developmental Clinic, Alberta Children's Hospital
1984-1988	Instructor II, Assistant Professor, University of Calgary, Calgary, Alberta, Canada
1987-1990	Clinical Associate (Family Nurse Practitioner), Calgary General Hospital Family Medicine Center
1988-1990	Assistant Professor, Faculty of Nursing, University of Calgary, Calgary, Alberta, Canada
1990-1993	Research Associate, College of Nursing, University of Kentucky, Lexington, KY
1993	Pediatric Nurse Practitioner, Family Care Center, Lexington, KY
1993-2002	Assistant Professor, Vanderbilt University School of Nursing, Nashville, TN
1994-1997	Clinical Research Associate, Metropolitan Health Department, Nashville, TN
1997-2002	Director, Pediatric Nurse Practitioner Program, Vanderbilt University School of Nursing
2002-pres	Associate Professor, Vanderbilt University School of Nursing
2002-2007	Director, PhD in Nursing Sciences Program, Vanderbilt University School of Nursing
2003-pres	Kennedy Center member, Vanderbilt University, Nashville, TN
2005-pres	Associate Professor, Department of Pediatrics, Vanderbilt University School of Medicine

Honors

1991-1992	University of Kentucky, Chandler Medical Center Fellowship
1991	Sigma Theta Tau International Honor Society of Nursing.
1992-1993	University of Kentucky, Graduate School Academic Fellowship
1995	Best of Image Award, Sigma Theta Tau International, Inc.
2001	Vanderbilt University School of Nursing Dean's Award for Scholarly Achievement

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

- Langdon, J., Isherwood, R.T., Lutenbacher-Webne, M., & Tenove, S. C. (1989). Canadian baccalaureate community health nursing education: Present status and future trends. *Association of Community Health Nursing Educators Newsletter*.
- Hall, L.A., Sachs, B., Rayens, M.K., & Lutenbacher, M. (1993). Childhood physical and sexual abuse- Their relationships with depressive symptoms in adulthood. *Image: Journal of Nursing Scholarship*, 25, 317-323. (Awarded Best of Image Award, 1995)
- Norman, L., & Lutenbacher, M. (1996). Process of continual improvement in a school of nursing. *Nursing and Healthcare: Perspectives on Community*, 17, 292-297.
- Lutenbacher, M., & Hall, L.A. (1998). The effects of maternal psychosocial factors on parenting attitudes of low-income, single mothers with young children. *Nursing Research* 47, (1),25-34.
- Sachs, B., Hall, L.A., Lutenbacher, M., & Rayens, M. K. (1999). The physical health of rural mothers and their low birth weight children. *Journal of Community Health Nursing* 16(4), 209-222.
- Sachs, B., Hall, L.A., Lutenbacher, M., & Rayens, M.K. (1999). Factors influencing the potential for abusive parenting by rural mothers with low birth weight children. *Image: Journal of Nursing Scholarship*, 31, 21-25.
- Cooper, W.O., Lutenbacher, M., & Faccia, K. (2000) Components of effective youth violence prevention programs for 7- to 14-year olds. *Archives of Pediatrics and Adolescent Medicine* 154 (11): 1134-1139.
- Lutenbacher, M. (2000). Perceptions of health status and the relationship with abuse history and mental health in low-income single mothers. *Journal of Family Nursing* 6(4), 320-340.
- Lutenbacher, M. (2001) Psychometric assessment of the Adult-Adolescent Parenting Inventory in a sample of low-income single mothers. *Journal of Nursing Measurement* 9 (3), 291-308.
- Lutenbacher, M. (2002). Relationships between psychosocial factors and abusive parenting attitudes in low-income single mothers. *Nursing Research*, 51(3), 158-167.
- Lutenbacher, M., Cooper, W.O., & Faccia, K. (2002). Planning youth violence prevention efforts: Decision-making across community sectors. *Journal of Adolescent Health* 30 (5), 346-354.
- Cooper, W. O., Lutenbacher, M., Faccia, K., & Hepworth, J. (2003). The Development of a Tool to Guide Youth Violence Prevention Planning. *Public Health Nursing*.
- Lutenbacher, M., Cohen, A., Mitzel, J. (2003). Do we really help? Perspectives of battered women. *Public Health Nursing* 20 (1), 56-64.
- Lutenbacher, M., & Cohen, A. (2004). Breaking the Cycle of Family Violence: Understanding the Perspective of Battered Women. *Journal of Pediatric Health Care*.
- Lutenbacher, M., Karp, S., Ajero, G., Howe, D., & Williams, M. (2005). Crossing Community Sectors: Challenges Faced by Families of Children with Special Health Care Needs. *Journal of Family Nursing*, 11(2), 162-182.

C. Research Support

Ongoing Research Support

Family Voices of Tennessee (Howe)

2002-2010

The Tennessee Family-to-Family Health Information Center: Maternal Child Health Bureau.

The overall purpose of this project is to increase the knowledge, ability, and satisfaction of families who have children with special health care needs (CSHCN) to participate and advocate effectively on behalf of their children's health care needs. The project is a collaborative with Family Voices of Tennessee, the Tennessee Title V Program, Tennessee Voices for Children, and the Vanderbilt University School of Nursing. Specific aims of the subcontract are to: increase knowledge and understanding of families with CSHCN; increase capacity to respond to the needs of these families. Y1 activities are completed and included a series of focus groups across the state of TN to assess barriers/challenges to families with CSHCN. Content analysis of data is complete and is being used, in conjunction with national surveys related to CSHCN.

Role: PI of subcontract

(Lutenbacher) 2006-2010

BlueCross BlueShield Tennessee Health Foundation
Tennessee Connections for Better Birth Outcomes

The overall purpose of this randomized clinical trial is to determine if there is an additive effect of combined medical and biobehavioral interventions to prevent PTBs and to reduce healthcare costs in a sample of high risk women (n = 300) who have a history of at least one PTB. Study groups include one treatment and one control group. *The medical intervention* is conventional prenatal and postpartum care that may include intramuscular (IM) progesterone (17-P) administration during the prenatal period. *The biobehavioral intervention* is an integrated System of Care (SOC) that includes nurse home visitors who engage women during their prenatal care and through the 18 months after delivery. Regularly scheduled prenatal care is alternated between home visits by advanced practice nurses and clinic visits by obstetricians or nurse midwives. In addition to an expected decrease in the rate of PTB, we expect the SOC to facilitate longer intervals between any subsequent pregnancies and enhance maternal and child health outcomes.

Role: Co-PI

(Lutenbacher) 2007-2008

Vanderbilt Center for Nashville Studies

Preventing preterm births: Identifying needs of Hispanic women in Nashville TN

The overall goal of this study is to gain knowledge that will help reduce health disparities and improve TN maternal and child health indicators in Hispanic women with a history of at least one preterm birth. Study questions include 1) What are the most common needs identified by Hispanic women who have had a prior preterm birth experience? 2) What challenges and barriers do Hispanic women face when trying to meet their health and family needs? 3) What is the typical experience for a pregnant Hispanic woman in the Nashville health care system? 4) Are commonly used measures in perinatal research applicable to Hispanic women?

Role: PI

Completed Research Support

(Lutenbacher) 2002-2006

Vanderbilt University Medical Center Grant

Comparing risk factors between African American mothers who deliver a term infant with African American mothers who deliver a preterm infant

The overall goal of this study was to compare the presence and absences of risk factors commonly associated with preterm births in two groups of women: African American women who had recently delivered a term infant and African American women who had recently delivered a preterm infant (<37 weeks gestation).

Role: Co-PI