Message from Dr. Efrat Dagan, Chair of the Department of Nursing

Dear Friends and Colleagues,

This year, I am happy to bring the news that our Cheryl Spencer Department of Nursing has successfully launched Israel’s FIRST nursing doctoral program. With our increasing academic achievements such as obtaining research funding and producing peer-reviewed publications, the reputation of our faculty and educational programs have continued to develop and grow. Because of these accomplishments, our institution has been extremely supportive of this new and unique doctoral program. We hope that graduates from our nursing doctoral program will be Israel’s future nursing leaders and work internationally to promote the field of nursing and health care for the world’s diverse communities.

Let me introduce two of our doctoral students:

Ilana Dubovi

Since completing my academic training as a registered nurse, I have worked for seven years at Rambam Medical Center and at the Child Health Clinic (the Israeli Ministry of Health services). I have enjoyed tremendously working in the clinical field as a nurse, but I was also enchanted with academic and research endeavors. Recently, I have managed to fulfill my dreams by combining my PhD studies and by working as a coordinator and creator of computer simulations for nursing students at the Cheryl Spencer Department of Nursing in the University of Haifa. My doctoral topic aims to develop educational technologies for nursing students to increase patient safety. I envision taking part in the development of new and effective software tools for the welfare and advancement of nursing educational research at the University of Haifa.
Shirly Luz

I am a registered nurse and a graduate of the MPH program at the University of Haifa. In the past, I worked for seven years as the Deputy Nurse in charge of an internal medicine ward and as a Clinical Instructor at the Carmel Medical Center. Later, I had the opportunity to change employment and work at the Sheinborn Academic School of Nursing in Tel-Aviv Sourasky Medical Center (Tel-Aviv University), where I worked as a Clinical Instructor of internal medicine and also was the Coordinator for the first two years of the bachelor's degree of nursing's clinical program. I started my PhD at the Cheryl Spencer Department of Nursing with the goals of gaining a deep understanding of the championship phenomenon in nursing. My vision is to take part in the development and implementation process of innovation in hospitals and in the development and empowerment of nurses who are champions of innovation.

This newsletter will present some of our faculty’s activities. Although our faculty engage in many overlapping and interdisciplinary fields of research, five main topics characterize our studies. These include: clinical research in nursing, equity in health care, healthy aging, professional nursing education, and safety and quality in health care administration. Below we present the most recent works from 2014 of our research faculty.

I hope you will enjoy reading through our work.

Warmest regards,

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The Cheryl Spencer Institute of Nursing Research

Upcoming Events

“He was able to get dressed by himself...” – The Hope FoR better hospitalization processes and outcomes for older adults. The conference, organized by Dr. Zisberg, will be held in April 15, 2015. This conference provides a platform for presentations and discussions of research and practice focused on improving care for hospitalized older adults, and better outcomes for this frail target population. We expect that this conference will bring together researchers, managers and practitioners from nursing and other allied health fields.

The conference will begin by setting the stage for broad perspectives on the issue of caring for the older adults, understanding the determinants and outcomes in acute setting by a keynote speaker, the world-renowned researcher Prof. Covinsky - a clinician-researcher in the UCSF Division of Geriatrics. The keynote presentation will be followed by presentations from an interdisciplinary team of researchers who will present the results of the Hospitalization Process Effects on Functional Outcomes and Recovery (HoPE-FOR) study - a multisite longitudinal project conducted in Israel. Additionally, professionals from a number of hospitals with embedded geriatric teams will share their perspectives on the topic. The conference will be summarized by a Panel-discussion on the topic: "How to implement recent research evidence into daily hospital practices." The panel members will include medical, nursing and political leaders in the field. The conference will be followed by a seminar with the research team of the HoPE-FOR study and guests on the following day. The seminar aims to establish a national framework that will promote care for hospitalized older adults.
Recent events

- **Opioids – analgesia and addiction: two sides of one coin?** Prof. Dorit Pud chaired a symposium, held in March, 2014. The growth of long term opioid therapy for chronic pain patients demands an ongoing evaluation of the associated benefits and risks including addiction. The aim of this symposium was to bring together researchers and clinicians who are experts, and study pain and addiction. The symposium was unique in its multidisciplinary approach and aimed to enable the development of new treatment guidelines and original research directions, leading to the development of novel therapeutic approaches.

- **From standardization to resilience: How does the day-to-day life in healthcare organizations shape safety in handovers.** The conference, organized by Professors Anat Drach-Zahavy and Anit Somech focused on “nursing handovers” through a resilience theory lens. Its main aim was to elucidate how the day-to-day life in healthcare organizations shapes safety, and to suggest organizational strategies for enhancing resilience in handovers. Presentations explored the working strategies health providers develop and employ in their day-to-day routine in an attempt to identify warnings or "red lights," which enable them to maintain patient safety, in spite of the load and interruptions characterizing their workplace. The conference consisted of an introduction lecture on resilience and safety by a keynote visiting speaker, Dr. Emily Patterson, followed by three sessions concentrating on specific safety issues during handovers.

Alumni Association

Our new Alumni Association of the Cheryl Spencer Department of Nursing has been launched. Currently, we are in the process of contacting all of our alumni, starting with our first class, who began in 1995. The initiative for the alumni association is based on the goal of establishing professional collaborations among alumni and faculty.

We have opened a facebook link for this purpose. Please enter: https://www.facebook.com/pages/%D7%90%D7%A8%D7%92%D7%95%D7%9F-%D7%91%D7%95%D7%92%D7%A8%D7%99-%D7%94%D7%97%D7%95%D7%92-%D7%9C%D7%A1%D7%99%D7%A2%D7%95%D7%93-%D7%90%D7%95%D7%A0%D7%99%D7%91%D7%A8%D7%A1%D7%99%D7%98%D7%AA-%D7%97%D7%99%D7%A4%D7%94/798212533577206
The Cheryl Spencer Department of Nursing is Pleased to Present our Most Recent Activities, Listed Alphabetically

Clinical Research in Nursing

Dorit Pud


Association between variants of 5-hydroxytryptamine receptor 3C (HTR3C) and chemotherapy-induced symptoms in women receiving adjuvant treatment for breast cancer

Dorit Pod · Gil Har-Zahav · Yad Laitman · Tami Rubinek · Adva Yeheskeli · Sarah Ben-Amiti · Bella Kaufman · Elkan Friedman · Zvi Synson · Ido Wolf

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Abstract Administration of chemotherapy is associated with a wide array of symptoms affecting quality of life. Genetic risk factors for severity of chemotherapy-induced symptoms have not been determined. The present study aimed to explore the associations between polymorphisms in candidate genes and chemotherapy-induced symptoms. Women treated with at least two cycles of adjuvant docetaxel and cyclophosphamide, with or without paclitaxel for early breast cancer (n = 105) completed the minimal symptom assessment scale and provided blood for genotyping. DNA was extracted from peripheral blood leukocytes and assayed for single nucleotide polymorphisms (SNPs) in GTP cyclohydrolase 1 (GCH1), rs10483639, rs7383641, and rs8007367, catechol-O-methyltransferase (COMT), rs4880, and 5-hydroxytryptamine (serotonin) receptor 3C (HTR3C), rs6766410, and rs6807362. Genotyping of HTR3C revealed a significant association between the presence of rs6766410 and rs6807362, but not age or stage at diagnosis, predicted severity of symptoms (p = 0.001 and p = 0.006, respectively) and explained 12 % of the variance in each regression model. No association was found between the genetic variants of GCH1 or COMT and symptom score. Our study indicates, for the first time, an association between variants of HT3C and severity of chemotherapy-induced symptoms. Analyzing these genetic variants may identify patients at increased risk for the development of chemotherapy-induced symptoms and targeting the serotonin pathway may serve as a novel treatment strategy for these patients.

Efrat Dagan

Michal Granot


Pain modulation efficiency delays seeking medical help in patients with acute myocardial infarction

Michal Granot\textsuperscript{a,b}, Phina Dagui\textsuperscript{c,d}, Wisam Darwish\textsuperscript{a,d}, Doron Aronson\textsuperscript{a,d}

Abstract
Rapid repertusion is crucial to reduce mortality in patients with ST elevation myocardial infarction. Prehospital patient delay, defined as time from symptoms onset to the decision to seek medical attention, accounts for a large proportion of cases with delayed repertusion. However, whether pain modulation processes are involved in this phenomenon is not known. We hypothesized that prehospital patient delay may be affected by a reduction of paracrine pain perception and pain modulation. Pain threshold, magnitude estimation of suprathreshold stimulation, mechanical temporal summation and conditioned pain modulation (CPM), and recall of pain magnitude at the onset of chest pain were obtained in 67 patients with first ST elevation myocardial infarction. The study's primary outcome was prehospital patient delay. The median patient delay was 24 (interquartile range, 0.5-72) hours. Of all psychophysical pain measures including pain threshold, magnitude estimation of suprathreshold stimulation, mechanical temporal summation, as well as CPM, only warm sensation threshold was independently associated with lower clinical chest pain intensity ($P = 0.001$), Multivariate regression analysis ($R^2 = 0.449, P < 0.0001$) revealed an inverse independent association between chest pain intensity ($P < 0.001$) and patient delay, whereas efficient CPM was positively associated with prolonged patient delay ($P = 0.034$). The electrocardiography showed ischemic areas on T waves not associated with chest pain intensity or patient delay, indicating that ischemic tissue is not a dominant component that determines pain response. In conclusion, beyond the perceived chest pain intensity, the activation pattern of descending inhibition pathways during coronary occlusion affects pain perception and behavior during acute coronary occlusion.

Keywords: Diffuse noxious inhibitory control (DNIC), Myocardial infarction, Pain modulation

Moshe Bronshtein


Tamar Shochat


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**Equity in Health Care**

Cheryl Zlotnick


**Trends and predictors of primary dental care health services for adults in Israel**

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**Objectives:** Guided by the Andersen-Arab Behavioral Model of Health Care Utilization, this study compared primary dental care use trends between 2000 and 2010, and differences in primary dental care use between Israel’s two largest ethnic groups, Jews and Arabs. **Methods:** Two waves (years 2000 and 2010) of cross-sectional data collected from a nationwide sample of the population’s health knowledge, attitudes and practice were used. This study uses the sample of Israeli Jews (n=2595) from 2000, and the nationally representative sample of Israeli-Jews (n=4259) and Israeli-Arabs (n=175) from 2010. **Results:** Primary dental care use increased between 2000 and 2010 in Israel. Arabs who had at least a high school diploma, average or higher income, no dental pain and reported flossing their teeth were more likely to use primary dental care, but the use was even lower among Israeli-Arabs than Israeli-Jews. Women, associated with a use of primary dental care but differing by ethnic group were being older than 65 years, having a net-income, higher employment, and health risk factors such as smoking and obesity. **Conclusion:** As with other western societies and as indicated by the model’s three factors (i.e., predisposing, enabling and reinforcing/need), disparities in primary dental care use found based on income (i.e., enabling); immigrants and ethnic minority status (i.e., predisposing) and health risk such as smoking (i.e., reinforcing/need), it is evident that health promotion activities are needed to target specific population subgroups or reduce disparities in primary dental care utilisation.

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**Daphna Birenbaum Carmeli**


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**SOCIETY OF HEALTH & ILLNESS**

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**Health journalism in the service of power: ‘moral complacency’ and the Hebrew media in the Gaza–Israel conflict**

Daphna Birenbaum-Carmeli

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**Abstract** The power of health news as a vehicle in the production of meaning in the service of power is the core of this article. Tracking the media coverage of a medical service, it shows how a routine practice can be invoked at a time of armed conflict so as to enhance a benevolent state image. The case at hand is the medical treatment of Gaza children in Israeli hospitals. A series of Internet searches revealed a group of publications on the subject in the Hebrew media, during and shortly after Israel’s assault on Gaza in the winter of 2008-2009. In the press articles the treatments were invariably constituted as the epiphenomenon of Israel’s compassion towards the enemy’s children. This image relied, however, on a simultaneous silencing of other aspects of these treatments, which would have challenged this image. The monolithic depictions give rise to the notion of reversed moral panic or ‘moral complacency’, wherein the media amplifies a little-known social phenomenon into an epiphenomenon of societal values and changes it with significance on a national scale. The article ends with considering some features that possibly render health news an especially convenient domain for state-supportive media presentations.


Primary care priorities in addressing health equity: summary of the WONCA 2013 health equity workshop

Efrat Shadmi∗, William CW Wong†, Karen Kinder§, Iona Heath∥ and Michael Kidd¶

Abstract

Background: Research consistently shows that gaps in health and health care persist, and are even widening. While the strength of a country’s primary health care system and its primary care attributes significantly improve populations’ health and reduces inequity (differences in health and health care that are unfair and unjust), many areas, such as inequity reduction through the provision of health promotion and preventive services, are not explicitly addressed by general practice. Substantiating the role of primary care in reducing inequity as well as establishing educational training programs geared towards health inequity reduction and improvement of the health and health care of underserved populations are needed.

Methods: This paper summarizes the work performed at the World WONCA (World Organization of National Colleges and Academies of Family Medicine) 2013 Meetings’ Health Equity Workshop which aimed to explore how a better understanding of health inequities could enable primary care providers’ (PCPs)/general practitioners (GPs) to adopt strategies that could improve health outcomes through the delivery of primary health care. It explored the development of a health equity curriculum and opened a discussion on the future and potential impact of health equity training among GPs.

Results: A survey completed by workshop participants on the current and expected levels of primary care participation in various inequity reduction activities showed that promoting access (availability and coverage) to primary care services was the most important priority. Assessment of the gaps between current and preferred priorities showed that to bridge expectations and actual performance, the following should be the focus of governments and health care systems: forming cross-national collaborations; incorporating health equity and cultural competency training in medical education; and, engaging in initiation of advocacy programs that involve major stakeholders in equity promotion policy making as well as promoting research on health equity.

Conclusions: This workshop formed the basis for the establishment of WONCA’s Health Equity Special Interest Group, set up in early 2014, aiming to bring the essential experience, skills and perspective of interested GPs around the world to address differences in health that are unfair, unjust, unnecessary but avoidable.
Healthy Aging

Anna Zisberg


Maayan Agmon


Increased Insomnia Symptoms Predict the Onset of Back Pain among Employed Adults

Maayan Agmon1**, Galit Armon2*
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Abstract

Background: Back pain is among the most prevalent pain disorders causing chronic disability among adults, and insomnia is a common comorbidity. However, whether insomnia precedes back pain or vice versa remains unclear. The current study tested the temporal association between insomnia and back pain.

Methods: A longitudinal design was used to investigate whether changes in insomnia over time predict the onset of back pain and vice versa. The study was conducted on a cohort of active healthy working adults (N = 2,131, 34% women) at three time points (T1, T2, and T3) over a period of 3.7 years (range = 2.3–5.12) years. Logistic regression analysis was used to test whether increased insomnia symptoms from T1 to T2 predicted the onset of new back pain. Ordinary least squares regression was used to test whether the existence of back pain at T2 predicted an increase in insomnia from T1 to T3.

Results: The results indicated that after controlling for sociodemographic variables, self-reported health, lifestyle behaviors, and anthropometrics, a T1–T2 increase in insomnia symptoms was associated with a 1.40-fold increased risk of back pain at T2 (OR = 1.40, 95% CI = 1.10–1.71). No support was found for reverse causation; i.e., that back pain predicts subsequent increase in insomnia.

Conclusions: Insomnia appears to be a risk factor in the development of back pain in healthy individuals. However, no evidence of reverse causation was found.

Oleg Zaslavsky


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**Professional Nursing Education**

**Hadass Goldblatt**


**Giving Voice to ‘Age at the Edge’ – A Challenge for Social Workers Intervening with Elder Abuse and Neglect**

Tsva Band-Winterstein - Hadassah Goldblatt - Sara Alon

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Abstract The purpose of this qualitative study was to learn about social workers’ experience of the therapeutic encounter with victims and perpetrators of elder abuse and neglect and its implications for their personal and professional lives. Participants were 17 experienced women social workers, who worked with abused and neglected older adults in Israel. Data were collected by in-depth semi-structured interviews, which were later transcribed and content analyzed. Four main themes were revealed: (1) The Complexity of the Experience of the Therapeutic Encounter; (2) Circles Echoing Between the Professional and the Person; (3) Between Growth and Attraction; and (4) Experiencing the Mission and its Meaning. As time is running out for older adults, the “now or never” perspective shapes social workers’ encounter with older adults, opening a unique kind of dialogue. Implications for practice and further research are discussed.

Keywords Elder abuse and neglect - Social workers - Experience - Qualitative research

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**Orit Cohen Castel**


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**Factors associated with adherence to glaucoma pharmacotherapy in the primary care setting**

Orit Cohen Castel, Lital Keinan-Boker, Oma Geyer, Uzi Milman, and Khaled Karkabi

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Received October 23, 2013; revised April 30, 2014; Accepted May 7, 2014.

Abstract Background. Primary open angle glaucoma is a leading cause of irreversible blindness. Objective. To identify factors associated with adherence to glaucoma pharmacotherapy in the primary care setting, focusing on physicians’ role. Methods. Patients were recruited from primary care clinics and telephone-interviewed using a structured questionnaire that addressed patient, medication, environment- and physician-related factors. Physicians’ data on pharmacy claims were retrieved to calculate the medication possession ratio for measuring adherence. Results. Survery hundreds thirty-eight glaucoma patients were interviewed. The multivariate analysis identified eight variables that were associated independently with adherence. Barriers to adherence were found to be low income, believing that ‘it makes no difference to my vision whether I take the drops or not’ and relying on someone else for drop instillation (exp(B) = 2.41, P = 0.0001; exp(B) = 2.17, P = 0.0001, respectively). Older age, having a glaucoma patient among close acquaintances, taking a higher number of drops per day, taking a prostaglandin drug and reporting that the ophthalmologist had discussed the importance of taking eye drops as prescribed, were found to promote adherence (exp(B) = 0.56, P = 0.0001; exp(B) = 0.08, P = 0.0001; exp(B) = 0.37, P = 0.0001; exp(B) = 0.06, P = 0.0001, respectively). No association was found between the patient’s relationship with the family physician and adherence to glaucoma treatment. Conclusion. Adherence to glaucoma pharmacotherapy is associated with patient-related, medication-related, physician-related and environmental factors. Ophthalmologists have a significant role in promoting adherence. However, the potential role of family physicians is unfulfilled and unrecognized.


News from our International Programs

The International Program at the Cheryl Spencer Department of Nursing is continuing to expand collaborations for students and faculty.

- **Master's Program** – The first inaugural two-week intensive summer semester of three nursing courses, conducted in English for international graduate students, will be held from June 8-July 2. The theme of the summer semester is - Nursing Spheres of Influence: One-on-One, in Groups, and for Populations. All courses will give examples here in Israel and abroad.

- **Bachelor’s Program** – This year 20 students from Norway will be taking theoretical and clinical courses (i.e., community health, surgery, pediatrics and psychiatry).

- **Faculty collaborations** – Active collaboration have extended to universities in England, Norway, Canada, and several states in the US.

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**Summer Semester for Nurses**

At the University of Haifa, we will be opening a four-week summer semester (taught in English), which includes three courses for registered nurses with a bachelor’s degree and nurses already in Masters’ Degree Programs. This semester provides an opportunity to join other international students in the city of Haifa Israel (situated on the coast of the Mediterranean Sea). These courses will discuss the rapidly changing landscape of health care, where nurses are a crucial part of the global workforce in hospitals, clinics and community settings.

**The Academic Program**

Students have the option of taking up to three courses.

- **World Health Issues and the Trans-cultural Role of the Health Professional** – This course will explore some unique roles of the nurse here In Israel including making visits to nurses in the kibbutz, an Israeli commune, and in youth villages or boarding schools. We also will have the opportunity to visit different communities including Druze in Dallet Al Carmel and Moslems in Akko (Acre). Perspectives will include the health care environment as a programmatic, regional, nationwde and global scale. Examples will be drawn from Israel, the United States and several other countries around the world.
  - Cheryl Zlotnick, RN DPH

- **Field Experiences – Glimpses of the Israeli Health System in Practice** – Most learning experiences for this course will be at the sites. Students will be able to engage in many observational experiences by visiting several unique services sites such as the Drop of Milk (Tipat Halav) program, a national and award-winning program in which all newborns in Israel receive multiple screenings and health care; and a Continuing Community Care Program in which patients rely heavily on technology (e.g., respirators, infusions, specialty equipment) and are receiving services at home.
  - Dalit Wilhelm, RN MA

- **The Patient-Professional Relationship: Beyond Compassion Fatigue and Vicarious Trauma** – In this course, professionals will learn about the emotional, cognitive, and behavioral impact resulting from their therapeutic encounters with trauma survivors. This important topic encompasses sensitive issues such as secondary traumatic stress, compassion fatigue, vicarious trauma, moral distress and burnout, as well as compassion satisfaction, vicarious post-traumatic growth, and resilience. Trauma not only has an impact on the professionals’ work relationships and competency, but also can spill-over into their private life. Thus, this course examines (1) theoretical and clinical aspects of the multi-faceted impact of trauma on the health professionals, and (2) sensitive and unspoken.
  - Hadass Goldblatt, MSW PhD

For more information about the program and to apply, please contact the University of Haifa International School at: info@summeruniv-haifa.ac.il

For more information about the summer semester at the Cheryl Spencer Department of Nursing at the University of Haifa please visit their website at: http://ahalif.org/index.php/summer-programs/nursing-summer-semester
About Us

Senior Faculty

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Research Interests
- Women’s health
- Health policies
- Reproductive technologies
- Health inequality
- Health and politics in Israel

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Research Interests
- Prenatal diagnosis with transvaginal ultrasound
- Fetal anomalies during the first trimester
- Cardiac defects in fetal development

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Research Interests
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- Nurses health
- Teamwork in healthcare

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Research Interests
- Psychophysical pain assessment
- Mechanisms of pain modulation processing
- Pain disorders in women
- Transition from acute to chronic pain
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Research Interests
- Psychophysical assessment of pain
- Factors predicting pain perception
- Cancer pain
- Neuropathic pain
- Opioids

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Research Interests
- Sleep, health and development across the life span
- Shift work and other Circadian Rhythm Sleep Disorders
- Cognitive Behavioral Therapy for Insomnia (CBT-I)

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Research Interests
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- Professionalism in nursing
- Reforms in nursing education systems

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Research Interests
- Health service trends in primary and preventive care
- Ethnic disparities in service utilization and health status
- Families in Transition: homeless, foster care and immigrant youth

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Research Interests
- Hereditary breast-ovarian cancer
- Cancer genetics
- Oncology
- Genetic susceptibility to late onset diseases
- Genetic counseling
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Research Interests
• Professionals’ experience of the encounter with family violence, trauma and other sensitive topics
• Patient-provider relationships in healthcare and social services
• Violence against healthcare staff
• Domestic violence

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Research Interests
• Health services research
• Quality of care and outcomes
• Equity in health and health care
• Chronic illness and multi-morbidity
• Risk adjustment and predictive modeling
• Integration of care across care settings

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Research Interests
• Geriatric syndromes, Frailty
• Caring for frail older adults in hospital and long-term settings
• Life Routine and its influence on physical and mental function of older adults
• Instrument development and testing
• Emotional Intelligence and its application to HR in Nursing

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Research Interests
• The association between cognitive function and motor performance
• Aspects of motor learning through use of new technologies such as virtual reality games

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Research Interests
• Education in the health professions
• Graduate (residency programs) and post graduate education (Continuing Medical Education programs)
**Orit Cohen Castel** *(research interests - continued)*
- Physicians’ development as clinicians (professional development) and teachers (faculty development)
- Patient –doctor communication and adherence to chronic medical treatment

**Oleg Zaslavsky, RN, PhD**
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Research Interests
- Geriatric syndromes / frailty
- Positive aging
- Longitudinal Modeling
- Latent Class Growth Modeling

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Research Interests
- Philosophy of Nursing
- Nursing Education
- Discourse of Nursing Professionalization

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Research Interests
- Life Review in elderly people
- Health promotion in community
- Epidemiology
- Settings promoting health

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