

## Editorial

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Ruth McCorkle, PhD, RN, FAPOS, FAAN, an international leader in healthcare and a pioneer in oncology nursing, symptom science, hospice, and palliative care, died peacefully at her home in Connecticut on August 17, 2019 surrounded by her family.

### From Battlefield to Bedside

Born Margaret “Ruth” McCorkle in Johnson City, TN on March 4, 1940, her parents, John Joseph McCorkle and Virginia Upchurch McCorkle, inspired her voracious work ethic. Her life’s vocation was preceded by experiences with the United States Air Force Nurse Corps, helping mortally wounded soldiers transition from battlefields in Vietnam to their untimely deaths. Her experience serving our country influenced her vision of the nurse’s role in assisting vulnerable individuals cope with life’s most difficult circumstances, as well as in bringing death out from the shadows and ultimately to academia, research endeavors, and clinical practice. This led her to study at St. Christopher’s Hospice in London and later to cofound the Hospice of Seattle and the Northwest Regional Oncology Society, culminating in the development of the Symptom Distress Scale and the Enforced Social Dependency Scale, both groundbreaking measures in psychosocial oncology that have become essential tools for symptom assessment and management practice across every medical discipline. Notably, Ruth was the *first* non-medical research recipient of a National Cancer Institute Research Training Grant, was elected to the Institute of Medicine in 1990, and was named Nurse Scientist of the Year by the Council of Nurse Researchers in 1993. In 1994, Ruth received the Oncology Nursing Society’s Distinguished Researcher Award and in 2013, the Oncology Nursing Society awarded her with the Lifetime Achievement Award for her accomplishments in oncology nursing.

After 12 years on the faculty of the University of Pennsylvania, Ruth joined Yale Cancer Center and the Yale School of Nursing in 1998 and focused her career on psychosocial oncology, symptom science, palliative care, and quality of life research. As the Florence Schorske Wald Professor of Nursing at the Yale School of Nursing, she was an international leader and award-winning pioneer in oncology nursing. Ruth was continually funded by the NIH for over 40 years. As the Principal Investigator on seven clinical trials, she furthered the role of Advanced Practice Nurses on the quality of life and survival among chronically ill patients. As Florence Schorske Wald Professor Emerita of Nursing and Professor Emerita of Medicine and Public Health at Yale University, Ruth continued her work as Director of Psychosocial Oncology at the Yale Comprehensive Cancer Center until her retirement this past Spring of 2019. In 2018, she was awarded the Yale Cancer Center Lifetime Achievement Award and honored for her lifetime of service to teaching, nursing, and for her leadership, the *first nurse to ever receive this honor*. In the same year, Ruth received the American Academy of Nursing’s highest honor of “Living Legend.” The Living Legend designation is the American Academy of Nursing’s highest honor.

### The Godmother of Oncology Nursing

What is so clear from all of Ruth’s colleagues and students and friends, from each account of her impact on the fields of oncology nursing and palliative care, is that her incredibly vast list of accolades and accomplishments is matched by a tremendous legacy of CARE: Ruth was a true caregiver, she gave of herself fully to all who had the gift of working with her and taught us how to do the same with our colleagues and patients.

I met Dr. McCorkle just 7 years ago, when she — the Godmother of Oncology Nursing — and Dr. Jimmie Holland — the Mother of Psycho-Oncology — were walking arm in arm to dinner at the annual meeting of the American Psychosocial Oncology Society. Dr. Holland, who up until her death almost 2 years ago was continuing to spread the gospel of psycho-oncology worldwide, introduced me to Ruth and said “Allison, this is my good friend Ruth. Ruth is a good person to know. You two should discuss caregivers.” What an understatement! Over the course of the next 7 years, I would come to know that by *good*, Dr. Holland

meant kind, generous, honest, insightful, creative, trailblazing, inspiring, and innovating, a force-of-nature yet down-to-earth. No wonder they were friends, they were — and always will be — oncology royalty, but more than that, amazing women, amazing humans. They demonstrated by example that commitment to family and career can co-exist in exquisitely beautiful ways, and in so doing, created a legacy of self-care that all of us working in palliative care should make a priority to realize.

As with our beloved Jimmie, Ruth provided mentorship to all those lucky enough to come across her in the professional space and would go to great lengths to advocate for her mentees. Though my formal academic collaborations with her were limited, they were meaningful and provided me with the gift of these moments of mentorship, some of which I believe now were the most formative of my career thus far. Between grant drafts were conversations Ruth initiated about the development of Memorial Sloan Kettering's initiatives to support caregivers, how to build structures that would support the development and maintenance of these initiatives, and where she saw the field of cancer caregiving going. These conversations — like those with Jimmie — also always included questions, such as, "Are you taking any time off soon?" "Is work treating you well?" "What is going well in your world?" reminders that my role as a human was just as important as all the others I fulfill. Our most recent collaboration was one we completed last summer, the textbook "Cancer Caregivers" published by Oxford University Press. Soon after I began working on the manuscript, I received a package from Ruth — a copy of her textbook, *Cancer Caregiving in the United States: Research, Practice, Policy* (Talley et al., 2012). Among her many accomplishments, Ruth helped to put cancer caregivers on the map, give them a voice and bring light to the significant challenges they face and the power they represent. A note accompanied the textbook, one of great collegiality and generosity. It was in one of Ruth's groundbreaking studies two decades prior that the essential role of cancer caregivers to patients living with cancer was first documented (McCorkle et al., 1989). The purpose of this landmark study was to describe spouses' psychological distress across the caregiving trajectory

from the patients' diagnosis until 2 years after the patients' death and to test the effects of an oncology nursing intervention on patient and caregiver outcomes. The results indicated that spouse caregivers randomized to the oncology home care intervention and taught to help care for their loved one during their illness reported significantly less depression and paranoid ideation during bereavement than caregivers not taught these skills. These findings demonstrated that caregivers' psychological distress can be positively influenced after the patients' death through involvement in providing care during the patients' terminal phase of illness (McCorkle et al., 1998). While perhaps she did not intend to become as such, many — including myself — surely look upon the *Godmother of Oncology Nursing* as also the *Mother of Cancer Caregiving*. Indeed, in what is now the beloved *Forward* to my textbook, Ruth writes: "[before our study] the word 'caregiver' was not a part of our vocabulary ... Informal caregiving by families and friends has been an essential part of patients' experiences of living with cancer, but it was not until the last decade of the twentieth century that we documented how important caregiving is to the patients' well-being and the caregivers' health." It is so very much due to Ruth that the word "caregiver" is now a consistent part of our professional lexicon and that caregivers are now recognized for the critical roles they play.

For this, for everything that Ruth brought to our fields, we are profoundly grateful and truly blessed. Ruth will be missed by all, but her legacy will live on in each of us as we carry her vast and meaningful work forward. Thank you, Ruth.

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