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From the President’s Pen
Oisaeng Hong, PhD, RN

Dear AAPINA members,

Happy spring to you all!

According to Chinese Zodiac Calendar, Year 2011 is “Year of the Rabbit”, and rabbits symbolize such character traits as creativity, compassion, and sensitivity. Rabbits are also friendly, outgoing and prefer the company of others. Rabbits are a well-known symbol in the Western civilization as well. Their important role in the Easter festivities as the "Easter bunny" can be attributed to their determined nature, with which they can successfully adapt to their environment, and prosper in their habitat. It is remarkable how these two different cultures picked up on two different, yet important set of traits the rabbit possesses. I hope all of us observe and master not just some, but all of these traits so together we can fulfil the mission and goals of AAPINA.

During the past months, many events occurred: 1) Meeting with Dr. Samuel So, Director of the Asian Liver Center at Stanford University to discuss collaborations to reduce serious liver disease including Hepatitis B and liver cancer, which is disproportionally high among the AAPIs; 2) Celebrating our 8th Annual conference in Houston; 3) Launching a collaborative project with NCEMNA on Genetics and Genomics in Nursing Practice; 4) Enrolment of the National Association of Indian
Nurses of American (NAINA) as the first organization member of AAPINA, bringing over 600 NAINA members into the AAPINA membership; and lastly, 5) Participating in a national AAPI stakeholder group.

To elaborate on the last point, in early March, Dr. Howard Koh, Assistant Secretary for the U.S. Department of Human Health and Services (USDHHS) and Dr. Garth Graham, Deputy USDHSS Assistant Secretary hosted a meeting in Washington, DC of community stakeholders of Asian Americans (AAs) and Native Hawaiians/Pacific Islanders (NHPIs). As the AAPINA president, I was invited along with representatives of over 15 organizations in the AANHPI communities. This is the first time AAPINA was included in the broader AAPI community. Together, the group made recommendations to address issues of concern to the AA and NHPI communities and submitted them as part of the White House Initiative on Asian Americans and Pacific Islanders (WHIAAPIs).

Based on the recommendations, the USDHHS identified four over-arching health concerns and issued a plan to improve the health and well-being of AANHPIs. The four sections are:

I. Prevent, treat, and control Hepatitis B Viral infections in AANHPI communities;
II. Improve data collection in AANHPI communities;
III. Align the healthcare workforce with the needs of AANHPI communities; and
IV. Improve health conditions and access to health care services for NHPI.

For more information, please visit http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=3&lvlid=573

A stakeholders’ meeting is expected to occur on a regular basis in DC. I will ensure that AAPINA’s concerns and issues are represented and made visible at these future meetings. We are in an exciting time of AAPINA’s organizational development. Your participation and devotion to AAPINA’s growth and health and wellbeing of the people we serve is particularly critical. Best wishes to us all as we move forward.

Sincerely,
Oisaeng Hong

From the Editor’s Desk
Melen McBride, PhD, RN, FGSA, Editor
Jing Wang, PhD, MPH, RN, Co-Editor

Spring is passing us by so fast, summer is almost here. In this Spring 2011 issue, we would like to highlight Dr. Chow’s article “being a nurse gives life meaning.” March 11th was a very sad day for the country of Japan and the whole world. The earthquake struck off the coast of Japan, churning up a devastating tsunami taking away thousands and thousands of lives. Our hearts were mourning on behalf of the victims, survivors, and families of lost loved ones. This sad event made us appreciate more the meaning of life: people, happiness, and more importantly, giving. Thus, you don’t want to miss this article on how being a nurse gives meaning to life.

Our current AAPINA newsletter team spans over Pennsylvania, California, Arizona, Michigan, North Carolina, and soon in Texas (as Jing is moving to Houston in June). We would like to continue to expand our newsletter network to more states, so that we can share more stories from more members. We ask that you encourage friends who are AAPINA member become part of the newsletter team or volunteer yourself to help us build a more interactive platform for our AAPINA members. We hope you find the AAPINA newsletter a resource for your professional growth in nursing. We are here to listen and support your needs.

May is graduation time, congratulations to all AAPINA new grads! Enjoy the sunshine and flowers!
Each of us was created for a reason. As a native Californian, I was a bilingual tailor’s daughter—the youngest of the three children. We each had supportive roles in the shop. The tailor shop was in the front and living quarters in the rear—amidst bolts of corduroy, woolen tweeds for trousers, and stacks of pigskins and cow hides for leather jackets. No doubt, customer service was the uppermost goal.

Typically, being a Chinese-American in San Francisco, the importance of schooling in two languages was emphasized. After completing a baccalaureate degree in nursing at Stanford, during the Korean War years, I found a way to overcome the lack of financial resources to complete the Master’s degree by joining the Army Nurse Corps through the Army RN Student Program. After myriad of experiences, including staff nurse, nurse educator, camp nurse, school health nurse, and a member of the Army Reserves, I re-entered active duty and joined the Commissioned Corps of the US Public Health Service (USPHS), the uniformed service of public health professionals led by the Surgeon General. I liked the fact that the Corps was responsible for delivering the Nation’s public health promotion and disease prevention programs and also supported research. Over the years, I had such assignments as Deputy Chief Nurse, USPHS; Deputy Director, Office of Long Term Care, OASH; Chief, Quality Assurance, Division of Long Term Care, Health Standards & Quality Bureau, Health Care Financing Administration, Baltimore, MD; Supervisory Clinical Nurse, Indian Health Service, Rosebud, S.D; Assistant Director of Nursing and Director of Patient Education, National Hansen’s Disease (leprosy) Center, Carville, LA; and Director of Nursing and Medical Educator, Fort Worth (TX) Medical Center, Federal Bureau of Prisons.

Since retiring from the USPHS, I have enjoyed the 11-year opportunity of being a Senior Volunteer Fellow of the National Council on Aging with headquarters in Washington DC. My role as the Director of the National Interfaith Coalition on Aging (NICA) that consists of a diverse network of religious, faith-based, and professional organizations to promote the spiritual well being of older adults and prepare persons of all ages for the spiritual tasks of aging. NICA served as a catalyst for new and effective approaches to spiritual growth such as encouraging best practices, networking, and conducting annual Wingspread Conferences.

We are now in transition. NCOA will be meeting with representatives of these organizations and communicating by webinar about NCOA’s Social Impact Goals. Our efforts are to continue to help seniors improve their lives, particularly to promote a healthy lifestyle, live independently, improve their mental health, and gain economic security such as helping seniors find jobs and benefits. Through its Center for Healthy Aging, NCOA has been promoting Stanford University’s Chronic Disease Self-Management (CDSMP) through an online program called Better Choices, Better Health and community workshops. Thus far, organizations in 46 states have hosted over...
1,700 CDSMP workshops with more than 18,000 older adult participants.

In retrospect, when we are serving, whether as a volunteer or for compensation, life becomes meaningful and what we do may become significant years later. One of the intangible rewards of aging is the joy we receive when we unexpectedly reunite with a former student or colleague and learn about their successes and achievements--many years later. In essence, eventually making a positive difference as a nurse researcher, teacher, mentor or nursing service administrator is one of the reasons the endeavors of the nursing profession remain respected, worthwhile, and satisfying.

GERO-SECTION

Help For Your Geriatric Patients and Elders in Your Family

On June 15, 2010, the national “IPT Elder Investor Fraud Survey” marked the World Elder Abuse Awareness Day. Results for the U.S. revealed:

- 7.3 million older people (one out of every 5 older person, age 65+) have already been victimized by a financial swindle.
- 50% of older adults exhibit one or more warning signs of current financial victimization; more than 1 out of 3 (37%) are currently being pitched by “people (who) are calling me asking for money, lotteries, and other schemes," while less than 19% of adult children believe their parents are having these experiences.
- Only 5% of adult children who are in touch with their parents’ doctors report “the healthcare providers ever mention[ing] any concerns about your parents handling of money or relayed any concern from your parent about handling money."
- nearly 1 in 5 (19%) in the above group report the health care provider has mentioned concerns about "your parents' mental comprehension"; only 2 % of older adults, age 65+ or say their healthcare provider has ever asked about "how you are handling money issues or problems."

A video [http://www.investorprotection.org/learn/?fa=eiff eVideo](http://www.investorprotection.org/learn/?fa=eiff eVideo) was created as part of the Elder Investment Fraud and Financial Exploitation (EIFFE) Prevention Program (EIFFE) ([http://www.investorprotection.org/learn/?fa=eiff e](http://www.investorprotection.org/learn/?fa=eiff e)).


* Excerpt from the Investor Protection Trust (IPT) website, adapted by the newsletter editorial team.

Useful Websites for Sleep in Older Adults

Sleep problems are very common in older adults. Nevertheless, clinical concerns on their sleep are often ignored and are not well assessed or managed by health care providers. Older minority adults may need more attention regarding lack of access to resources or cultural differences on sleep habits. The following websites provide information on sleep in older adults to understand sleep problems for this population. They offer useful tips for health care providers.

- National Institute on Aging
Below are professional sleep organizations that health care providers can join,

- American Academy of Sleep Medicine
  http://www.aasmnet.org/
- Sleep Research Society
  http://www.sleepresearchsociety.org/

Appreciation and Impressions
2011 AAPINA Annual Conference
Reimund Serafica, PhD (c), MSN, RN
University of Hawaii at Manoa

I would like to thank AAPINA for the scholar-ship award I received at the 8th Annual AAPINA Conference in Houston, Texas. I feel honored to be the recipient of this scholarship. As a doctoral student this gift means a lot to me. I joined AAPINA in 2006 when I was researching Schools of Nursing with PhD programs. I discovered the association’s website inadvertently and was fascinated by its mission and purpose.

The 8th annual two-day conference included concurrent oral sessions, poster presentations, a keynote by Dr. Jillian Inouye, and featured speaker, Dr. Philip Xu. All the oral presentations were engaging and educational. The poster presentations were equally interesting and informative. Although the attendance was smaller than previous conferences I found it more effective since the presenters and the audience were more connected which generated more meaningful discussion. There were many opportunities to learn about new ideas and share ideas.

I also found it incredibly interesting to participate in the general membership meeting where AAPINA members express their opinions and offered recommendations on pertinent issues that involve the association’s policies and strategies. The networking experience is priceless. I was able to reconnect instantly with my classmates and professors from the University of Hawaii at Manoa and with colleagues from North Carolina and became re-acquainted with some of the finest and brightest researchers in nursing.

I observed the executive officers and conference planning committee’s enthusiasm in finding and welcoming old and new members. It was wonderful to meet and talk with leaders, practitioners, educators and researchers who share the same interests.

As a novice nurse researcher I have gained wonderful insight into the tremendous work involved to improve the research-practice-education connection in nursing. It is reassuring to know that so much effort and enthusiasm is being channeled into this area and the experience reinforced my passion for nursing education and research. The camaraderie is almost palpable amongst the group.
and by the end of the conference we were comrade-at-arms, forming teams to begin preparations for the next conference. I’m already looking forward to the 9th annual conference.

To me, AAPINA conferences are always inspiring, motivating, and professionally rewarding. With this experience, I hope to participate in every conference from here on.

Editors’ Note: Reimund Serafica’s abstract on “Filipino Older Adults’ Beliefs about Exercise Activity” will be in the next issue.

**MEMBER’S NEWS**

**Tsu-Yin Wu**, Professor and Director of Healthy Asian Americans Project at Eastern Michigan University, recently published a paper in the Journal of Community Health, titled, “Ethnicity and Cardiovascular Risk Factors among Asian Americans Residing in Michigan.” Asian Americans currently represent one of the most rapidly growing immigrant populations in the United States. Although the significance of cardiovascular disease (CVD) risk factors such as hypertension, high blood cholesterol, diabetes, smoking, has been well documented through studies of other ethnic groups (particularly Whites, Blacks, and Hispanics), fewer studies examine or compare the prevalence of CVD risk factors among subgroups in Asian Americans; in response to this need, the prevalence of CVD risk factors were examined in Chinese, Filipino, Hmong and Vietnamese Americans. Overall, it seems that the most urgent hypertension and cholesterol problems were found among Chinese and Filipino participants, while the risk of diabetes may be highest among the Hmong participants. In addition, the paper also revealed the unique characteristics in seeking preventive care among Asian Americans. Dr. Wu also presented a paper, "Transforming Nursing Curriculum to Reduce Stress and Improve Coping in BSN Graduates" at the Midwest Nursing Research Society 35th Annual Conference, Columbus, OH, March 24-27, 2011.

**Double Milestone for Jen Jenice Guzman-Clark**, an AAPINA member since 2008, successfully defended her doctoral dissertation titled “Predictors and Outcomes of Early Adherence to the Use of an Asynchronous Communication & Monitoring Telehealth Device” last March 11, 2011 at the UCLA School of Nursing. Her doctoral committee included Drs. Betty Chang, Theodore Hahn, Janet Mentes, and Gwen van Servellen (chair). Dr. Guzman-Clark plans to apply for research funding to continue her work in the study of older adults and chronic disease management using telehealth technolo-gies, while working as a Gerontological Nurse Practitioner in the VA Greater Los Angeles Healthcare System and being an Assistant Clinical Professor for the UCLA School of Nursing. Above is a picture of Dr. Guzman-Clark with her husband, Oliver Clark, and one year old daughter Kairi on the day of her Final Defense.

**ANNOUNCEMENT**

**Nominations for AAPINA President-Elect and Treasurer**

Dr. Jillian Inouye has requested this announcement to be sent to the membership for review and response. This is a call for nominations for the position of Treasurer and President-Elect for AAPINA. The close of nominations is June 1, 2011. If you are interested to nominate yourself or other AAPINA members please email one of the following:

Jillian Inouye: jinouye@hawaii.edu
Simon Omana: simon.omanac@va.gov
Angela Chen: Angela.CCChen@asu.edu
NEW AAPINA Secretary

Congratulations to Merle R. Kataoka-Yahiro, our new AAPINA Secretary!

Special thanks to outgoing secretary, Eun Jung Kim, for her outstanding contributions to the organization for the past several years!

Asian Women’s Health Research Network (ASIA-WH)

Eun-Ok Im, PhD, MPH, RN, CNS, FAAN,
Professor and La Quinta Motor Inns Inc. Centennial Professor in Nursing
The University of Texas at Austin School of Nursing

The Asian Women’s Health Research Network (ASIA-WH) is an international network of researchers who work to promote the health and wellbeing of Asian women. Our goals include: (a) developing networks of international multidisciplinary collaboration through communication among experts with similar research portfolios; (b) providing resources and support for development of research programs in Asian women’s health; and (c) creating a culture of mentoring to prepare the next generation of researchers in Asian women’s health.

Since its inception in June 2007, ASIA-WH has laid the groundwork to forge international relationships. The network currently includes researchers from three countries: United States, South Korea, and Taiwan. Each country will have its own organizational structure. The Korean side has an organizational structure in place; they hosted three annual conferences, to advance their mission. The Taiwan side is working on their infrastructure and is planning to have their first collaborative conference in June 2011. The three sides have met and disseminated their work at national and international conferences including the 2008 and 2009 American Academy of Nursing conferences and the 2010 Southern Nursing Research Society (SNRS) Conference.

We will continue the international collaborations as well as strengthen research partnerships among the three groups. The Korean side started its research efforts including a series of studies on depression across the life span. They plan to collaborate with other international partners in a comparative study on depression across the life span.

Recently, ASIA-WH joined AAPINA as a research interest group and we are now inviting AAPINA members to join our group. If interested, please contact the co-chairs, either Dr. Eun-Ok Im (eoin512@gmail.com) at the University of Texas at Austin or Dr. Salimah Meghan (meghanis@nursing.upenn.edu) at the University of Pennsylvania.

Calling Our Nurses: Save AAPIs from Chronic Hepatitis B and Liver Cancer

Chrissy M Cheung, MPH
Perinatal Research Coordinator
Asian Liver Center, Stanford University

Chronic hepatitis B infection is one of the largest racial/ethnic health disparities in the United States. One in 12 AAPIs have chronic hepatitis B, compared with 1 in 1000 white Americans. Most AAPIs who are infected are foreign-born or have foreign-born parents and became infected unknowingly from mother-to-child transmission at birth.
Chronic hepatitis B is a silent killer and causes 60-80% of liver cancer cases worldwide. Most AAPIs are unaware of their infection because they have not been screened by their doctors, many have no symptoms and their blood test results for liver enzymes may appear normal. Without appropriate monitoring or treatment, one in four people with chronic hepatitis B will die of liver cancer or liver failure. For these reasons, liver cancer caused by chronic hepatitis B is a leading cause of cancer death in AAPI men. Yet elimination of hepatitis B is possible since it is vaccine-preventable, and lifelong medical care and appropriate treatment of those chronically infected can reduce the complications of liver disease and liver cancer.

The Asian Liver Center at Stanford University is reaching out to the nursing community to promote hepatitis B and liver cancer awareness, screening and vaccination and to help eliminate this silent killer by doing the following:

• Test all AAPIs and pregnant women for HBsAg (test for chronic infection) and anti-HBs (test for immunity)
• Give all babies the first dose of the hepatitis B vaccine within 12 hours of birth
• Give all babies born to HBsAg-positive women 2 shots (hepatitis B vaccine and hepatitis B immune globulin) within 12 hours of birth
• Ensure that all babies complete the 3-shot hepatitis B vaccine series


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AAPINA GERO Group

As you may know, we have had an AAPINA-GERO-goggle group, which is a special interest group on gerontological/geriatric nursing. It has been minimally active and has a small membership at this time. The interest group was formed when AAPINA received a small grant several years ago from the Gero-Nurse Competency Project at New York University School of Nursing to provide training to professional nurses who practice in various specialty areas.

Dr. Melen McBride, who provided leadership for the AAPINA training grant, Dr. Jing Wang, co-editor, and I (Dr. Yeonsu Song) plan to activate the group. The proposed goals for the group are to: 1) share information and knowledge related to gerontological/geriatric nursing, especially for older minority people; 2) create and extend the network between the gero-group members; and 3) identify specific needs of the older minority population on practice, teaching, research, and policy, with emphasis on older Asian American and Pacific Islanders.

Our first step is to find out who among the AAPINA members are interested in gerontology/geriatrics, have formal training in this specialty, are involved in teaching, clinical care, and/or research on older adults and others who would like to know more about aging for professional or personal reasons.

Please respond to Yeonsu at song.yeonsu@gmail.com with the following information: name, email address, telephone, current position, institution affiliation, and specific interest in aging. The information you provide will be used to communicate with you and will not be distributed or shared with any third party.

Thank you and we look forward to hearing from you soon.

Yeonsu Song, PhD, RN, Jing Wang, PhD, RN, and Melen McBride, PhD, RN