

# THE 6<sup>TH</sup> ANNUAL CONFERENCE AAPINA



***“STATE OF THE ART AND SCIENCE: NURSING CARE OF  
ASIANS AND PACIFIC ISLANDERS”***

**MARCH 20-21, 2009**

**WAIKIKI BEACH MARRIOTT RESORT & SPA  
HONOLULU, HAWAI`I**

# Welcome From the President

*Aloha and welcome to our 6<sup>th</sup> Annual conference of the AAPINA, "State of the Art and Science: Nursing Care of Asian American and Pacific Islanders." I hope you find this conference stimulating and energizing and that you are able to enjoy our State as well. Our organization has made tremendous strides in research and care for AAPI. Thank you to the co-chairs and all the hard working volunteers for their support.*

***Jillian Inouye, PhD, APRN***

# *Welcome From The Co-Chairs*

*Welcome to the 6<sup>th</sup> annual AAPINA conference, "State of the Art and Science: Nursing Care of Asian American and Pacific Islanders." We hope you will enjoy our beautiful island state of Hawai'i and plan to do some sight- seeing while you are here.*

*We appreciate the hard work and support of our Conference Committee for without them this conference would not be possible.*

*We would also like to thank our sponsors UHM SONDH, SAMHSA, Aetna, UNLV SON and APCHO.. Your financial support is greatly appreciated. Finally, we would like to thank our exhibitors and presenters.*

***Merle Kataoka-Yahiro***

***Dianne Ishida***

# *Executive Board*

**Jillian Inouye, PhD, APRN**

*President*

Professor, Associate Dean of Research  
School of Nursing and Dental Hygiene  
University of Hawaii at Manoa  
2528 McCarthy Mall, 328  
Honolulu, HI 96822  
Email Address: [jinouye@aapina.org](mailto:jinouye@aapina.org)

**Oisaeng Hong, PhD, RN**

*President-elect*

Associate Professor  
University of California Berkeley, Davis, San Francisco  
Department of Community Health Systems  
2 Koret Way, #N-531D  
San Francisco, CA 94143-0608  
Email Address: [ohong@aapina.org](mailto:ohong@aapina.org)

**Eun Jung Kim PhD, ARNP**

*Secretary*

Associate Professor  
School of Nursing  
University of Washington  
Email Address: [ekim@aapina.org](mailto:ekim@aapina.org)

**Dianne Ishida, PhD, APRN**

*Treasurer*

Associate Professor  
School of Nursing  
University of Hawaii at Manoa  
Email Address: [Dianne@hawaii.edu](mailto:Dianne@hawaii.edu)

**Melen McBride, PhD, RN**

*Newsletter Editor*

Associate Director, Stanford Geriatric Education Center  
Stanford University  
Email Address: [mcbride@stanford.edu](mailto:mcbride@stanford.edu)

**SeonAe Yeo, PhD, FAAN, RNC**

*Past President*

Associate Professor  
University of North Carolina at Chapel Hill  
Email Address: [syeo@email.unc.edu](mailto:syeo@email.unc.edu)

# CONFERENCE COMMITTEE

## Conference Co-Chairs

**Merle Kataoka-Yahiro, DrPH**  
Associate Professor & Graduate Chair  
School of Nursing & Dental Hygiene  
University of Hawai`i at Manoa  
Email Address: [merle@hawaii.edu](mailto:merle@hawaii.edu)

**Dianne Ishida, PhD**  
Associate Professor & Program Director  
School of Nursing & Dental Hygiene  
University of Hawai`i at Manoa  
Email Address: [dianne@hawaii.edu](mailto:dianne@hawaii.edu)

## Program:

**Clementina Ceria-Ulep, PhD**  
Associate Professor & Department Chairperson  
School of Nursing & Dental Hygiene, UHM  
Email Address: [clem@hawaii.edu](mailto:clem@hawaii.edu)

## Abstract:

**Mijung Park, PhD**  
Assistant Professor  
School of Nursing & Dental Hygiene, UHM  
Email Address: [mijungp@hawaii.edu](mailto:mijungp@hawaii.edu)

## Sponsors & Exhibitors:

**Jane Kadohiro, DrPH**  
Assistant Professor  
School of Nursing & Dental Hygiene, UHM  
Email Address: [kadohiro@hawaii.edu](mailto:kadohiro@hawaii.edu)

## Registration:

**Nafanua Braginsky, MS**  
Lecturer  
School of Nursing & Dental Hygiene, UHM  
Email Address: [nafanua@hawaii.edu](mailto:nafanua@hawaii.edu)

**Lorrie Wong, MS**  
Instructor and Director of Simulation  
School of Nursing & Dental Hygiene, UHM  
Email Address: [lorriew@hawaii.edu](mailto:lorriew@hawaii.edu)

## Hospitality:

**Francisco Conde, PhD**  
Assistant Professor  
School of Nursing & Dental Hygiene, UHM  
Email Address: [fconde@hawaii.edu](mailto:fconde@hawaii.edu)

**ASIAN AMERICAN PACIFIC ISLANDERS NURSES ASSOCIATION (AAPINA) 6<sup>TH</sup>  
ANNUAL CONFERENCE**

**MARCH 20 – 21, 2009**

**WAIKIKI BEACH MARRIOTT RESORT AND SPA**

**FRIDAY, MARCH 20, 2009: WAIKIKI BALLROOM SALONS**

11:00 a.m.-1:00 p.m.

**Registration** (Waikiki Ballroom)  
**Posters (Salon 1 & 3) and Exhibitors (Salon 2) Set Up**

1:00-1:20 p.m.

**Opening of Conference** by Co-Chairs:  
Dianne Ishida, PhD, APRN & Merle Kataoka-Yahiro, DrPH, APRN

Opening Chant: M. Puakea Nogelmeier, PhD

1:20-1:40 p.m.

**Welcome:** Jillian Inouye, PhD, APRN, AAPINA President

1:40-2:00 p.m.

**Welcome:** Mary G. Boland, DrPH, FAAN, Dean  
University of Hawaii School of Nursing & Dental Hygiene

2:00-3:00 p.m.

**Keynote Address:**  
Marjorie Kagawa-Singer, PhD, Professor  
UCLA, Department of Community Health Sciences,  
& Professor, Department of Asian American Studies (Salon 3)

3:00-3:30 p.m.

**Break & Exhibits** (Salon 2)  
**Posters** (Salons 1 & 3)

3:30-4:20 p.m.

**Concurrent Sessions**  
**A : Social Justice** (Salon 1)

Jenny Hsin-Chun Tsai, PhD, ARNP, PMHCNS-BC	A Theoretical Model for Determinants of Asian Immigrants' Mental Health and Work Performance
Jung-Ah Lee, PhD, RN	The Equity and Distributive Justice of Healthcare

**B : Education** (Salon 3)

Barbara Burns McGrath, PhD, RN	Academic Partnerships to Promote Nursing Research: Lessons Learned
Eun-Ok Choi, PhD, RN	High Fidelity Simulation-Based Basic Life Support in Nursing Education
Hiromi Hirata, MN, RN	Practice & Perception of the Nursing Care for the Patient with Dysphagia

4:30 – 5:20 p.m.

**Panel:** Understanding Cultural Perceptions: Foundations for IPV Interventions  
Jan Shoultz, DrPH; Lois Magnussen, EdD; Mary Frances Oneha, PhD; Christina Arias;  
Shelly Enos, MPH; Helena Manzano; Doris Matsunaga, MPH; Mili Samifua; Merina  
Sapolu; Selynda Selifis; Cindy Spenser (Salon 3)

5:30 – 6:20 p.m.

**Poster Presentation** (Salons 1 & 3)  
**Exhibits** (Salon 2)  
**No Host Bar** (Open to 7:30 p.m.)

6:30 p.m. – 9:00 p.m.

**Dinner & Entertainment** (Oahu Room)

**ASIAN AMERICAN PACIFIC ISLANDERS NURSES ASSOCIATION (AAPINA) 6<sup>TH</sup>  
ANNUAL CONFERENCE  
MARCH 20 – 21, 2009  
WAIKIKI BEACH MARRIOTT RESORT AND SPA**

<b>FRIDAY, MARCH 20, 2009</b>	<b>POSTERS</b>
-------------------------------	----------------

Chiyong Cha, MS	Health Promoting Behaviors Among Korean Migrant Women
Jeongok Park, MSN, RN ; Shelly Y. Hawkins, DSN, FNP-BC, FAANP; Mary H. Palmer, PhD, RN, FAAN	Heart Failure Patients' Educational Interests About Urinary Incontinence and Overactive Bladder
Voranan Pongquan, MPH	Pressure Ulcer Prevention Education for Certified Nursing Aides in a Chinese Long Term Care Facility
Reimund Serafica, MSN, RN	Concept Analysis of Acculturation Among Filipino Immigrants in the United States
Barbara Tom, PHN, BSN; Nancy McGuckin, MPH, MSN, MBA, RN	Public Health Nursing Interventions with Pacific islander Women
Jing Wang, BSN; Judith Tabolt Matthews, PhD, MPH, RN	Acculturation in Asian Immigrants: A Concept Analysis
Yu Xu, PhD, MSN, RN, CTN, CNE; Helen Zaikina-Montgomery, MA; Jay Shen, PhD	Characteristics of Internationally Educated Nurses in the U.S.
Satsuki Yamashiro, MSN, RN; Kazuko Maeda, DNSc, RN; Izumi Kakazu, MS, RN, Chiaki Kugai, RN	Development of Education in Insularity Health Nursing: A Focus on One of the Islands from Okinawa Prefecture in Japan

**ASIAN AMERICAN PACIFIC ISLANDERS NURSES ASSOCIATION (AAPINA) 6<sup>TH</sup>  
ANNUAL CONFERENCE**

**MARCH 20 – 21, 2009**

**WAIKIKI BEACH MARRIOTT RESORT AND SPA**

**SATURDAY, MARCH 21, 2009: WAIKIKI BALLROOM SALONS**

7:30 – 08:30 a.m.

**Registration**  
**Exhibits** (Salon 2)  
**Posters** (Salons 1 & 3)  
**Continental Breakfast** (Salon 2)

8:00 – 08:30 a.m.

**Presentation: Leading in a Changing Environment**

Marilyn Chow, DNSc, RN, FAAN  
Vice President, Patient Care Services  
Kaiser Permanente, Oakland, CA (Salon 3)

8:30 – 08:45 a.m.

**Short Break**

8:45 – 10:15 a.m.

**General Membership Meeting** (Salon 3)

10:15-10:45 a.m.

**Break & Exhibits** (Salon 2)  
**Poster** (Salons 1 & 3)

10:45 – 11:45 a.m.

**Concurrent Session**  
**A : Women & Children** (Salon 1)

Eunjung Kim, PhD, RN	Korean Immigrant Parents' Perceptions of Korean and American Styles of Parenting
Hatsumi Taniguchi, PhD, MSN, MPH, RN, RNM	The Meaning of the Childbirth Experience for Japanese Mother in the Foreign Country, Hawaii
Annette Manant, CNM, MN	Listening to Women: Prenatal Concerns of Women in Hawaii

**B : Chronic Illness** (Salon 3)

Hong Liu, PhD	The Differences in Diabetes Self-Management Practices by Socio-Demographics and Diabetes Factors Among Chinese Americans with Type 2 Diabetes in Midwest
Nafanua Braginsky, MS, APRN	Cultural Samoan Dance to Increase Physical Activity for Health

11:45 – 12:00 p.m.

**Closing Remarks** from Conference Co-Chairs (Salon 3)

**ASIAN AMERICAN PACIFIC ISLANDERS NURSES ASSOCIATION (AAPINA) 6<sup>TH</sup>  
ANNUAL CONFERENCE  
MARCH 20 – 21, 2009  
WAIKIKI BEACH MARRIOTT RESORT AND SPA**

**SATURDAY, MARCH 21, 2009 POSTERS**

<p>Kathleen Commendador, PhD, WHNP, APRN</p>	<p>The Relationship between Female Adolescent Self-Esteem, Decision Making and Contraceptive Behavior</p>
<p>Jeanie L. Flood; Joan E. Dodgson, PhD; Mary F. Oneha, PhD</p>	<p>Healthcare and Social Service Provider Descriptions of Asian and Pacific Islander Mothers' Breastfeeding Patterns</p>
<p>Akiko Ishibashi, MS, RN; Reiko Ueda, DMSc, RN; Yoshifumi Kawano, MD; Hideki Nakayama, MD</p>	<p>How to Improve Resilience in Adolescents with Cancer In Japan</p>
<p>Kyoung-Eun K. Lee, MS, RN, WHCNP</p>	<p>The Lived Experience of Korean First-Time Mothers who Gave Birth in the U.S.</p>
<p>Mijung Park, PhD, MSN, RN</p>	<p>Culturally Appropriate Psychiatric Mental Health Nursing for Asian Americans</p>
<p>Reiko Ueda, D.M.S., RN; Junko Miyazawa, MSN, RN</p>	<p>Pre-Assessment Tool for Child Abuse Prevention (PACAP) for Multiple Health Workers in Japan: A Comparison Between Suburban and Rural Cities</p>
<p>Kanae Usui; Akiko Hoshino; Ayako Okutsu; Toshiki Katsura</p>	<p>Support of Making Group for Home-Bound Patients with Lymphedema—Characteristics of Participants and Future Prospects of the Group</p>

# Sponsors:

Sponsorship assists in supporting the conference activities.

**UNIVERSITY OF HAWAII, SCHOOL OF NURSING  
& DENTAL HYGIENE**



School of Nursing and Dental Hygiene

*University of Hawai'i at Mānoa*

**ASSOCIATION OF ASIAN PACIFIC COMMUNITY HEALTH ORGANIZATIONS**



**AETNA HEALTH**



**SUBSTANCE ABUSE & MENTAL HEALTH  
SERVICES ADMINISTRATION**



**UNIVERSITY OF NEVADA, LAS VEGAS  
SCHOOL OF NURSING (UNLV, SON)**



# **Exhibitors**

Substance Abuse & Mental Health Services Administration

U.S. Food and Drug Administration, HHS

University of Hawai`i at Manoa, SONDH  
Adult Clinical Specialist Program  
Advanced Public Health Nursing  
On-Line PhD

University of Washington, SON

## **Other Supporters:**

F. A. Davis Company

Elsevier

## **Program Objectives:**

1. Explore current evidence-based care of Asian American and Pacific Islanders
2. Identify strategies that incorporate cultural beliefs and behaviors into nursing education and practice

# Podium Abstracts



# CULTURAL SAMOAN DANCE TO INCREASE PHYSICAL ACTIVITY FOR HEALTH

*Author*

Nafanua S. Braginsky RN, APRNRx, MS, FNP-c

*Abstract*

**Introduction.** The Samoans are among the minority ethnic groups with the highest prevalence of obesity in the world. Massive adiposity and high prevalence of obesity characterizes modernizing adults in this population. Culturally specific dance may be an effective intervention to increase lifestyle physical activity in the Samoan population. Culturally specific dance in groups has been implicated with many health related benefits.

The purpose of this literature review is to explore if cultural dance has been integrated as an intervention to increase physical activity and improve health in the community.

**Methods.** A comprehensive search of available literature related to cultural dance as a physical activity was completed.

**Results.** Evidence has shown that health related benefits of cultural dance include: improvement in functional capacity of sedentary individuals, improved social, emotional, and physical well-being; improved cardio-respiratory fitness, body composition and cardiovascular function. Cultural dance also improves balance in the elderly, and bone mineral density of those with osteoporosis.

**Implications for Nursing.** Based upon this review of the literature, cultural dance has the potential to generate health benefits to provide the Samoans that are obese with the recommended amounts of physical activity. This physical activity is seldom used as an intervention to increase physical activity even among studies advocating culturally-specific intervention. Therefore, in the future, empirical data about a culturally-specific dance intervention to generate health benefits in the Samoan population is highly recommended.

# HIGH FIDELITY SIMULATION BASED BASIC LIFE SUPPORT IN NURSING EDUCATION

## *Authors*

Eun-Ok Choi, RN, PhD\*<sup>1</sup>, Yoo-Sang Yoon, MD<sup>2</sup>, Young Gyun Choi, MD, PhD<sup>3</sup>, Yang Weon Kim, MD, PhD<sup>2</sup>, Jong Cheol Hong, Ph.D. Doctoral Candidate<sup>4</sup> Chae-Min Chun, RN<sup>1</sup>

\* Poster Presenter : Eun-Ok Choi, RN, PhD

<sup>1</sup> Department of Nursing, College of Medicine, and Research Institute of Geriatric Health, Inje University

<sup>2</sup> Dept. of Emergency Medicine, Inje University Pusan Paik Hospital

<sup>3</sup> Dept. of Anesthesiology, Inje University Pusan Paik Hospital

<sup>4</sup> Office of Medical Education, College of Medicine, Inje University

## *Abstract*

**Introduction.** One of the strategies to enhance problem solving abilities to apply critical clinical setting in nursing education is that the development and running of high fidelity simulation clinical settings. The purpose of this study were to develop the scenario and to investigate the impact of a high fidelity simulation based basic life support (BLS) program for nursing students.

### **Methods.**

#### **1. Development of scenarios and the self-efficacy scale for BLS**

High fidelity simulation program for BLS in nursing education was developed in pursuit of enhancing the competence to perform best practices under the situation of CPR and to develop problem solving abilities which save and support one's lives.

The developed scenarios were focused on three critical situations; asystole situation, ventricular fibrillation situation and complicated situation (ventricular fibrillation and asystole situation).

Self-efficacy scale for BLS was developed based on the guidelines of revised BLS by American Heart Associations (AHA) in 2005.

#### **2. Application and running for high fidelity simulation of BLS scenario**

The high fidelity simulation BLS program were consisted of three parts as follows; pre instruction lecture for 20 minutes, practice experiences using high fidelity simulations for 20 minutes and the last part - debriefing for 20minutes – three simulation situations on SimMan for saving life situations.

Self-efficacy scale for BLS was used at the points of pre and post program to evaluate the differences of nursing student's self efficacy for BLS exposed to the program. Pre and post scores of the self-efficacy scale for BLS were rated by the thirty six nursing students who participated at the program.

**Results.** There were significant differences on the levels of self-efficacy between the pre (the score of 71.7) and the post point of program (the score of 98.3) ( $p=.0001$ ). Immediately after the program, qualitative data were analyzed and the qualitative descriptive finding was that they were excited at the new high simulation program and enhanced feeling of self-confidence of BLS performance.

**Implications of Nursing.** From the results of this study, positive effects on enhanced self confidence and the level of self-efficacy scale for BLS, the high fidelity simulation in critical and clinical setting can be a new innovative strategy for competency based nursing curriculum.

# PRACTICE AND PERCEPTION OF THE NURSING CARE FOR THE PATIENT WITH DYSPHAGIA

## *Authors*

Hiromi Hirata, RN, MN, School of Nursing, Fukushima Medical University, Japan  
Masami Shimizu, RN, MN, School of Nursing, Fukushima Medical University, Japan  
Kanno Naoko, RN, Fukushima Sogo Ryouiku Center, Japan  
Tsuchiya Sachiko, RN, Fujita Public General Hospital, Japan  
Noriko Hirano, RN, Fukushima Medical University Hospital, Japan  
Keiko Watanabe, RN, Fukushima Saiseikai Hospital, Japan

*Presenting Author:* Hiromi Hirata

## *Abstract*

**Introduction.** The number of patients in Japan who have dysphasia are increasing owing to the aging population in Japan. If a patient is unable to eat through his/her mouth because of dysphasia, the patient's quality of life will be unquestionably decreased. Unfortunately, this sometimes happens, even though the patient may still be able to eat through his/her mouth if they received appropriate care.

The purpose of this study was to investigate current practices of nurses for patients with dysphagia, as well as investigate nurses' perceptions toward care for this patient population.

**Methods.** A questionnaire was developed to analyze nursing practice and perception toward care for patient with dysphagia. The questionnaire asked responders if they put care for dysphagia patients into practice, if they had problems while caring for the patients, and if they had chances to receive education or training about methods of care for dysphagia. Three letters of questionnaires were mailed to each one of 145 hospitals (all hospitals were in a single prefecture of Japan except maternity hospitals) and the letters asked the person in charge to give the questionnaires to nurses who worked for dysphagia patients; 237 out of 435 questionnaires for this analysis were returned. SPSS statistical software was used to analyze the data.

**Results.** 75.1% of the responders were doing the care for patients with dysphagia such as oral care, ice massage, and swallowing exercise. The problems to practice for the nurses were lack of unity for the technique among staff, lack of knowledge and technique of the practice, and labor shortages. 84.8% of the respondents state that they would participate if they have chances to receive education or training for the practice.

**Implications for Nursing.** Over 70% of the responders were doing the proper care for dysphagia patients, although many of them were not confident about their technique and felt that they needed to receive appropriate training. These findings will be used to continuing education workshops regarding care for patients with dysphagia.

# KOREAN IMMIGRANT PARENTS' PERCEPTIONS OF KOREAN AND AMERICAN STYLES OF PARENTING

## *Authors*

Eunjung Kim, PhD, RN, ARNP  
Associate Professor  
University of Washington School of Nursing

Haesang Im, PhD, RN  
Visiting Scholar  
University of Washington School of Nursing

Eunyoung Nahm  
Faculty  
Seoul Women's University

Seunghye Hong, MA  
Doctoral Student  
University of Washington School of Social Work

## *Abstract*

**Introduction.** The goal of this study was to explore 28 Korean immigrant parents' perceptions of Korean and American styles of parenting.

**Results.** This study revealed that Korean immigrant parents perceived differences in Korean and American parenting in the following three areas: parental warmth (proximity and physical contact), parental control (decision making and setting limits and consequences), and supporting education (focus of achievement and supporting academic achievement). Parents also reported that their style has been changing due to exposure to American culture.

**Implications for Nursing.** These findings could be used to develop a culturally and linguistically competent parenting program for the Korean immigrant population.

This study was supported by a grant awarded to E. Kim "Korean American Parent Training" K01 NR08333 and "Korean American Parenting and Children's Behavioral Problems" P20 NR008351.

# THE EQUITY AND DISTRIBUTIVE JUSTICE OF HEALTH CARE

*Author*

JUNG-AH LEE, PhD, RN Assistant Professor  
Program in Nursing Science, College of Health Sciences,  
University of California, Irvine  
Irvine, California

*Abstract*

**Introduction.** All human beings should have an equal chance in healthcare but at present they do not. However, a question is emerging whether distributive justice in healthcare services should be delivered to each in proportion to ability to pay or to each in proportion to need.

The aims of this essay were to explore the meaning of equity in health care via diverse theoretical perspectives, and to resolve the questions involved in the establishment of equitable health care. Entitlement, egalitarian, contractarian, need-based, and utilitarian theories were reviewed.

**Results.** There are conflicts in interpreting and creating definitions of norms and the relative importance or values assigned to each when designing a fair and equitable universal health insurance plan. Therefore, it seems inevitable that equity issues are best considered as pluralist since there is disagreement. Also, rival concepts, theories, and disciplines should be weighted and balanced, through assessing the contradiction and the force of each. The issue of equity or distributive justice in healthcare is associated with the fair allocation of benefits and burdens between people who deserve of care and people who are in a position to pay for it, and the two groups may or may not be the same. With an increased awareness of the importance of fundamental health care for all individuals, we should consider divergent and potentially contradictory theories of equity of health care in evaluating the fairness of the current system of medical care and when devising the best health care plans so they can be persuasive and satisfying to all citizen of the twenty-first century.

**Implications for Nursing.** Considering the importance of liberty for the vertical and horizontal equality, policy makers should be alerted to find a rational policy to satisfy for all, more emphasizing the accessibility of the poor.

# THE DIFFERENCES IN DIABETES SELF-MANAGEMENT PRACTICES BY SOCIO-DEMOGRAPHICS AND DIABETES FACTORS AMONG CHINESE AMERICANS WITH TYPE 2 DIABETES IN MIDWEST

*Authors*

Yin Xu, PhD, RN<sup>1</sup>, Wei Pan, PhD<sup>2</sup>, Hong Liu, PhD<sup>3</sup>

<sup>1</sup> College of Nursing, University of Cincinnati

<sup>2</sup> College of Education, University of Cincinnati

<sup>3</sup> Asian Health Coalition of Illinois

Presenting author: Hong Liu

*Abstract*

**Introduction.** Although Asian Americans have a lower body mass index than people of White Americans (McNeely & Boyko, 2004), they are at greater risk for diabetes mellitus (DM). The Chinese population, as the largest Asian group in the U.S., has a rising prevalence of diabetes (14.6%) (Carter, Pugh, & Monterrosa, 1996). Diabetes self-management (e.g., medication taking, diet, exercise, blood glucose monitoring, and foot care) is the cornerstone to prevent or delay diabetes-related complications. The purpose of this study was to examine the differences in DM self-management practices by socio-demographics and diabetes factors in Chinese Americans with type 2 diabetes.

**Methods.** A cross-sectional survey research design was used in this study. A survey instrument was administered to a convenience sample of 125 Chinese adults with type 2 diabetes in the Midwest. Correlation and multiple regression analysis were conducted.

**Results.** The mean age of the participants was 71 years, more than 50% of them have eight or less years of education, about 10% are illiterate and do not read and write either Chinese or English, and about 67% of the sample has a household income of less than \$10,000. The participants were most likely to perform medication taking (90%) but less likely to perform diet (35%), exercise (31%), and foot care (38.1%) behaviors. Only 18.6% of the participants self-monitored their blood glucose levels daily. Differences were found in DM self-management practices by socio-demographics and diabetes factors. For examples, older patients with lower education and income levels were less likely ( $p < .05$ ) to engage in DM self-management practices than younger patients with higher education and income levels. The patients who have longer duration of diabetes and use insulin as treatment more frequently ( $p < .05$ ) performed glucose self-testing than those who have less duration and use oral hypoglycemic agents

**Implications for Nursing.** This study showed that older patients of low socioeconomic status and patients with less duration of diabetes and non-insulin treatment are at greater risk for not performing DM self-management practices culturally and linguistically appropriate interventions to promote DM self-management in older minorities of low socioeconomic status are warranted.

# LISTENING TO WOMEN: PRENATAL CONCERNS OF WOMEN IN HAWAII

## *Authors*

Annette Manant, CNM, MN  
Joan Dodgson, PhD, MPH, RN

## *Presenting Author*

Annette Manant, CNM, MN  
*Preferred presentation format*

## *Abstract*

**Introduction.** Improving maternal and newborn health is a fundamental public health goal in the U.S. Many states, including Hawaii, have not met Healthy People 2000 -2010 maternal and newborn objectives. Understanding issues that are both unique and common to populations broadens our perspective on the needs of prenatal women. To understand why maternal objectives are not being met, monitoring systems (e.g., PRAMS, Pregnancy Risk Assessment Monitoring System) were initiated. Few researchers have analyzed PRAMS antenatal comment data, none in Hawaii. The study aim was to describe the prenatal concerns of women living in Hawaii.

**Methods.** A descriptive qualitative study using cross sectional prospective data was conducted to answer the question: What are the concerns experienced prenatally by women receiving health care in Hawaii? The social ecological paradigm was used as the conceptual framework for this study. The data were collected from PRAMS 2000-20003 mailed surveys by the Hawaii State Department of Health. The sample was women who wrote comments about their antenatal experiences. The concerns of women (N = 269) during their prenatal period were extracted from these data and analyzed. Data analysis was a two-phased content analysis process. Five conceptual categories emerged from 22 codes. To ensure a rigorous process during the data analysis a number of steps were taken including maintaining an audit trail, verification by an external coder, and discussions aimed at reaching consensus concerning decision-making.

**Results.** Five categories encompassed the women's concerns: Facing Health Issues, Experiencing Health Services, Feeling Unsuccessful, Being Left Out, and Relating to Family and Friends. A picture developed of maternal concerns similar to those reported by researchers in other geographic areas; however, maternal concerns that were unique to the socio-cultural dimensions of the Hawaiian Islands were also found.

**Implications for Nursing.** Concerns unique to prenatal women in Hawaii are related to their socio-cultural context and could increase understanding of other similar populations. Areas for future research are explored in the study and possible prenatal policy developments are discussed.

# ACADEMIC PARTNERSHIPS TO PROMOTE NURSING RESEARCH: LESSONS LEARNED

## *Authors*

Barbara Burns McGrath, RN, PhD \*  
University of Washington

Jillian Inouye, RN, PhD  
University of Hawaii Manoa

Kendra D. Hayward, B.A.  
University of Washington

Margaret M. Heitkemper, RN, PhD, FAAN  
University of Washington

## *Abstract*

A partnership was formed between the University of Hawaii Manoa and University of Washington-Seattle Schools of Nursing that now spans 10 years. What started as a series of informal consultations (2000) steadily grew and culminated in an NIH funded institutional research collaboration (2004-2009). The creation of strategic cross-cutting linkages places academic institutions in stronger positions to address emerging health care problems. Enriching research environments supports this goal by strengthening administrative capacities, contributing to evidence base of women's health, and developing the skills of individual investigators. This presentation will provide an overview of the process of developing an inter-institutional collaboration and highlight selected research studies that resulted from that collaboration. The individual studies demonstrate the strength of matching biobehavioral methods with culturally sensitive approaches to examine gender-related issues and health disparities.

\*Presenting author

# UNDERSTANDING CULTURAL PERCEPTIONS: FOUNDATION FOR IPV INTERVENTIONS

## *Authors*

Jan Shoultz, DrPH, APRN  
Professor  
Department of Nursing  
University of Hawaii at Manoa  
Honolulu, HI

Lois Magnussen, EdD, APRN  
Professor  
Department of Nursing  
University of Hawaii at Manoa  
Honolulu, HI

Mary Oneha, PhD, APRN  
Director of Quality Assurance  
Waianae Coast Comprehensive Health Center

## *Abstract*

**Introduction.** The research question was, "What are the cultural perceptions, responses and needs of selected individuals and groups served through a variety of programs that are affiliated with the three participating community health centers (CHCs) regarding IPV?"

The theoretical foundation for this study is Critical Social Theory, a post-modern philosophical perspective that acknowledges that while there are many truths and many voices to express those truths, some voices are privileged and others are marginalized. The use of the Community Based Participatory Research (CBPR) approach to this study is consistent with the perspective of Critical Social Theory.

**Methods.** This mixed methods descriptive study included two phases (individual interviews and focus groups) and was conducted over a two year period with three cultural groups. Both women who had, and those who had not, disclosed that they had experienced IPV who were 18 years and older participated. Analysis of qualitative data was accomplished using content analysis. Quantitative data included perceptions of the acceptability of violence and demographic data. The individual and group perspectives were combined and provided insights regarding the cultural group's perceptions of IPV.

**Results.** Cultural perceptions and responses differ not only among the cultural groups, but in contrast to Western notions of family, male and female roles, and family life. Protective factors that once existed in the native country of an immigrant population or in an indigenous population prior to Western contact are no longer present. IPV was a part of the childhood experience of many Native Hawaiian women and is commonly perceived to result in visible injury. Chuukese women viewed IPV as directly related to their partners' marital infidelity and believed women's role is to maintain peace within the family. Filipino women were reluctant to disclose IPV due to fear of deportation, shame, cultural shock, and fear of retribution to their family. Women in all three cultures experienced IPV and saw that it had great impact.

**Implications for Nursing.** External agencies including the CHCs are important to women in identifying IPV and providing resources and support. Culturally appropriate IPV interventions will need to be tested.

**Funding:** NIH/NINR Grant #1R15NR009424-01A2

# THE MEANING OF THE CHILDBIRTH EXPERIENCE FOR JAPANESE MOHTERS IN THE FOREIGN COUNTRY, HAWAII

*Author*

Hatsumi Taniguchi. PhD, MSN, MPH, RN, RNM  
Department of Nursing Human Science, Graduate School of Medicine, Health Kyoto  
University

*Abstract*

**Introduction.** When giving birth in a foreign culture, women's challenges are increased exponentially because of bi-cultural conflicts and the presence of limited support.

The purpose of this study was to describe the process and meaning of the childbirth experience for Japanese mothers who were transitioning to motherhood soon after they moved to Hawaii.

**Methods.** The research design was descriptive, using a phenomenological approach reflected in Colaizzi's method. A sample consisted of 10 Japanese expatriate women who temporarily relocated to Hawaii because of their husband's job.

**Results.** The major findings of this study consisted of four Theme Categories: Challenges Living Overseas, Challenges of Motherhood, Reaching the Goal of Motherhood, and Relationship with Others. In describing the process and meaning of their childbirth, the new mothers recognized their parents' values which included not only an appreciation of their efforts in raising them, but also their love which involved "knowing an unknown memory" of when they were babies. The new mothers also identified themselves as the "irreplaceable" mother for their new family. They believed their childbirth experience in Hawaii helped them to become more emotionally mature as individuals as a result of overcoming hardships in the foreign country.

**Implications for Nursing.** The childbirth experience was instrumental in providing an opportunity for the women to reflect on their lives and to find the direction needed for their growth and transformation to successful parents.

# A THEORETICAL MODEL FOR DETERMINANTS OF ASIAN IMMIGRANTS' MENTAL HEALTH AND WORK PERFORMANCE

*Author*

Jenny Hsin-Chun Tsai, PhD, ARNP, PMHCNS-BC  
Assistant Professor  
University of Washington School of Nursing  
Seattle, Washington

*Abstract*

**Introduction.** Mental health and substance use problems are prevalent in the working population and profoundly affect work performance and risks for injuries. Researchers also established a body of knowledge examining the pervasive influence of social factors such as social discrimination, workplace, and social support on health. Asians are typically not specifically considered in these studies. Drawing from separate literature, this presentation discusses a theoretical model that focuses on social determinants of Asian immigrants' mental health and work performance.

**Description of Concepts.** This theoretical model consists of six latent variables. Social discrimination refers to unfair or preferential treatment toward individuals who are perceived to be a member of certain social categories such as race, immigration status, and occupational gradients. Job concerns include organizational psychosocial factors (e.g., job content, salary and welfare, job insecurity, physical and psychological demands, and autonomy over duties) that adversely influence worker health and performance. General job concerns and immigrant-specific job concerns are included. Social support is defined as perceived instrumental and emotional support received from family/relatives, friends, co-workers, and supervisors. Mental health problem is indexed by psychological distress, somatic symptoms, and daily functioning; substance use is indexed by number of non-medical use of drugs, drug abuse symptoms, alcohol abuse symptoms, and amount of alcohol consumption. Work performance refers to the degree to which workers' job performance is adversely affected by mental health problems or substance use. Absenteeism (time spent away from job), presenteeism (working less effectively), and critical incidents are indicators of work performance. Social discrimination, job concerns, and social support are hypothesized to have significant effects on Asian immigrant workers' work performance, mediated by their mental health problems and substance use.

**Implications for Nursing.** Asian immigrants are understudied and underrepresented in health research. This theoretical model proposes an integrated approach to provide knowledge and enhance understanding of the effects of multiple social factors on Asian immigrant workers' mental health and work performance. The new knowledge allows nurses to specify determinants of Asian immigrant workers' mental health and work performance and the mechanisms by which an intervention might work with this workforce.

# Poster Abstracts



# HEALTH PROMOTING BEHAVIORS AMONG KOREAN MIGRANT WOMEN

*Author*

Chiyong Cha, MS  
School of Nursing, University of Washington  
Seattle, WA

*Abstract*

**Introduction.** Migrating population is growing rapidly. The number of Asian migrants escalated from 28.1 million in 1970 to 43.8 million in 2000 worldwide. Among those, half are females. Yet, there is a gap in our understanding of their health promoting behaviors. The purpose of this study was to compare the health promoting behaviors among Korean women, Korean immigrant women and immigrant women and to identify the contributing factors of health promoting behaviors.

**Methods.** A total of 20 articles (ten for Korean women, four for Korean immigrant women, and six for immigrant women) were retrieved from CINAHL, PubMed, and KISS databases. Inclusion criteria were quantitative studies which utilized Health Promotion Lifestyle Profile with six dimensions; self-actualization, health responsibility, physical activity, nutrition, interpersonal relationships, and stress management.

**Results.** Reviewed studies showed that Korean women were practicing health promoting behaviors more frequently than immigrant women. Women with Korean descents more tried to promote their health through nutritional means. All three groups of women tried to promote their health more frequently through nutrition followed by interpersonal relations, and self-actualization. They reported engaging themselves less in Physical activity followed by Health responsibility.

Number of years in the U.S. and English proficiency were the predictors of all six health promoting behaviors. Health insurance coverage had positive correlation to self actualization and interpersonal relations. Number of preschool kids was negatively correlated with physical activity, nutrition, interpersonal relations, and stress management. Studies of Korean immigrant women reported marital satisfaction as a significant variable, yet studies of other ethnic women measured marital status instead. Ethnic identity was reported as a significant predictor in other ethnic groups, but it was not measured in Korean women studies.

**Implications for Nursing.** Comparisons reflects the existing health disparity among minority population. Understanding the cultural meaning of contributing factors might help health care providers develop interventions for Korean migrants. Influenced by Confucianism, Korean women put their family members' needs over their own. As health insurance had a negative correlation with health promoting behaviors, a low health insurance rate of Korean temporary migrants should be noted.

# THE RELATIONSHIP BETWEEN FEMALE ADOLESCENT SELF-ESTEEM, DECISION MAKING AND CONTRACEPTIVE BEHAVIOR

*Author*

Kathleen Commendador, PhD., WHNP, ARPN

*Abstract*

**Introduction.** Adolescence is a period of transition that involves biological, cognitive, psychological and social changes. During the vulnerable transition period of adolescence, decisions relating to contraception may occur. The purpose of this study was to examine the relationship between female adolescent self-esteem, decision making and contraceptive behavior. Understanding the relationship between female adolescent self-esteem, decision-making and contraceptive behavior has contributed to the knowledge base about female contraceptive behavior. Gaining further insight into these relationships will help health care professionals provide counseling and health care to female adolescents.

**Methods.** Using a descriptive cross sectional survey design, data were collected from a convenience sample of 98 female adolescents aged 14-17 who came to 5 different clinics in Hawaii for health care. Along with a brief demographic questionnaire, global self-esteem was measured by Rosenberg's Self Esteem Scale (Rosenberg, 1965), decision-making was measured by the Flinders Adolescent Decision Making Questionnaire (Mann, Harmoni, Power, Beswick & Ormond, 1988) and sexual activity and contraception use was measured by a Sexual History and Contraceptive Use Questionnaire developed for this study. The conceptual framework for this study was Janis and Mann's (1977) conflict theory of decision-making. Descriptive statistics, logistic regression and correlations were used to analyze associations and correlations between age, global self esteem, decision self esteem, decision coping (vigilant and maladaptive) and contraceptive use for sexually active female adolescents.

**Results.** No significant associations or correlations were found between age, global self-esteem, decision self esteem, decision coping (vigilance) and their decision to use contraception in sexually active adolescent females. There was, however, significant negative correlation ( $p < .05$ ) between maladaptive decision-making and contraceptive use in sexually active female adolescents. This suggests that sexually active adolescent females with higher maladaptive scores are less likely to use contraception. There was also significant association ( $p < .05$ ) between maladaptive decision-making in contraceptive use and sexually active female adolescents. For every one unit increase on the maladaptive scale, the odds of using contraception were estimated to decrease by 7% meaning those who scored higher on the maladaptive scale were less competent or poor decision makers and less likely to use contraception.

**Implications for Nursing.** Adolescents who score higher on the maladaptive decision-making scale are less competent in decision-making and are less likely to use contraception. Interventions focused on improving decision-making skills and stimulating thinking around not only sexual issues, but also relationship and communication in adolescent issues, may facilitate more competent decision-making.

# HEALTHCARE AND SOCIAL SERVICE PROVIDER DESCRIPTIONS OF ASIAN AND PACIFIC ISLANDER MOTHERS' BREASTFEEDING PATTERNS

## *Authors*

Jeanie L. Flood,\* Joan E. Dodgson, Mary F. Oneha

## *Abstract*

**Introduction.** The low initiation and short duration of breastfeeding among Pacific Islander mothers highlighted the need for more research into the problem. The aim of this study was to describe the perceptions of health care and social service providers related to influences affecting the disparities found in breastfeeding patterns among this population.

**Methods.** A focused ethnographic approach with a social ecological framework provided a community contextual perspective. Healthcare and social service providers (N=20) working with Pacific Islander childbearing women were interviewed about their perceptions about the low breastfeeding rates in their community. The predominant population served is Native Hawaiian/part Hawaiian followed by Asian and Other Pacific Islanders.

**Results.** Four patterns of influence emerged from nine categories and 43 codes. The patterns were (a) Lived Unfamiliarity, (b) Missed Opportunities, (c) Shaped by Connections, and (d) Stressed by Circumstance. The multidimensional nature of the influences on infant feeding behaviors, which include cultural, socioeconomic and familial factors, were illuminated and will be discussed using a community-focused framework. Gaps in breastfeeding support services were identified with possible next step strategies.

**Implications for Nursing.** The insights of healthcare workers are important because of their close proximity and involvement with the health of their community. Their descriptions of the influences on breastfeeding patterns could guide the development of interventions aimed at increasing breastfeeding initiation and duration in this population. This would be a step to reduce disparities in breastfeeding rates and to ensure that all mothers receive the preventative health effects of breastfeeding.

## HOW TO IMPROVE RESILIENCE IN ADOLESCENTS WITH CANCER IN JAPAN

### *Authors*

Akiko Ishibashi, MS, RN, Reiko Ueda, DMSc, RN, Yoshifumi Kawano, MD.,  
Hideki Nakayama, MD.

### *Abstract*

**Introduction.** Researchers have identified the need to explore the resilience of childhood cancer patients to improve their quality of life (Haase, 2004). Haase recognized that intervention factors such as hope, positive coping, and social support are influential in developing resilience. The Self-Sustaining Process model (Hinds & Martin, 1988) is defined as a natural process that adolescents experiencing serious health threats move through to comfort themselves to develop hopefulness and resilience, resourceful, and adaptable. The model includes four phases: cognitive discomfort, distraction, cognitive comfort, and personal competence.

**Methods.** This case study utilized semi-structured interviews and Social Network Map (SNM) to explore how adolescents with cancer develop resilience during the cancer experience. After a university-based ethical review committee approved this study, 7 adolescents with cancer aged 11-18 years and their mothers participated. The mothers answered only SNM. Pattern-matching logic was applied for analysis. It relates several pieces of information from the same case to a theoretical proposition. In a case study, internal validity is supported if all the patterns fit with the proposition. However, if the patterns do not fit, even if one variable does not fit, the propositions would not be accepted. The Self-Sustaining Process can serve as a theoretical proposition and a guide to define the case and unit of analysis.

**Results.** Findings indicated that initially, five adolescents who were told of their cancer diagnoses moved through the process during the cancer experience. Also, in newly-diagnoses and relapse-experienced adolescents, a slight difference was noticed in terms of their response to studies and their hope levels. Second, two adolescents who were told of their diagnoses indirectly did not experience a complete passage through the phases comprising the process. Lastly, the adolescents and their mothers received support from their families, friends, and relatives.

**Implications for Nursing.** This study suggests that an understanding of individual and cultural differences is important to improve resilience in adolescents with cancer. Because of the small sample surveyed by this research, further studies are needed to validate these and develop appropriate nursing intervention techniques.

# THE LIVED EXPERIENCE OF KOREAN FIRST-TIME MOTHERS WHO GAVE BIRTH IN THE U.S.

*Author*

Kyoung-Eun K Lee, MS, RN, WHCNP  
PhD student in School of Nursing, University of Washington

*Abstract*

**Introduction.** The trend of recent global migration has been highlighted the importance of cultural awareness among health care providers because they increasingly interact with the diverse population migrating here in the United States (U.S.) from all over the world. The awareness of different culture and its impacts on minority women's health care experiences is particularly crucial in obstetrical care settings because the pregnancy and childbirth, which is a fundamental experience to human existence, therefore the most meaningful life event to a woman, is largely influenced by the socio-cultural context in which the birthing mother is belong to and most familiar with. Despite the increasing number of Korean women as health care clients in obstetrical settings, there is no existing research that describes Korean women's childbirth experiences in the U.S. The purpose of this research is to explore the lived experience of Korean first-time mothers who gave birth in the U.S. and to describe the essential meanings of the experience from their own perspectives.

**Methods.** The phenomenological approach was used to guide the research methods. A purposive sample of 5 Korean first-time mothers who gave birth in the U.S. was recruited from a mid-eastern city. An open-ended in-depth interview with each participant was conducted in Korean within 3 months of postpartum period. The interviews were audiotape-recorded. The data from the interviews were transcribed in verbatim style. The transcripts were coded, reviewed, and analyzed for recurrent themes and categories, then translated to English in final data analysis process. The emerged recurring themes were categorized as positive and negative aspects of their experiences.

**Results.** Positive aspects included encountering friendly staff, their husband's active involvement in childbirth, strengthened attachment between husband and wife, freedom from traditional rituals and taboos, and good environment for the baby's life. Negative aspects included difficulty in making medical decisions, feeling isolated as a couple, cultural differences in foods, difficulty in understanding medical vocabularies, and confusion in navigating different health care delivery system. In addition, it was interesting finding that the Korean first-time mothers in this study sought pregnancy and childbirth related information rather from Korean and American web-sites than from their clinics.

# HEART FAILURE PATIENTS' EDUCATIONAL INTERESTS ABOUT URINARY INCONTINENCE AND OVERACTIVE BLADDER

## *Authors*

Jeongok Park\*, MSN, RN; Shelly Y. Hawkins, DSN, FNP-BC, FAANP; Mary H. Palmer, PhD, RN, FAAN (\* presenting author)

## *Abstract*

**Introduction.** Urinary symptoms are prevalent in heart failure (HF) patients. HF may affect urinary function through increased nocturnal urine production and pharmacological therapies, such as diuretics, may exacerbate existing UI or contribute to the development of new UI. These conditions may be reduced by self-care practices such as regular toileting, intake fluid regulation, and pelvic floor muscle exercise. To design and implement a successful health education program about continence self-care practices, determining potential participants' desire for information about bladder health is essential. The purpose of this study was to determine HF patients' educational interests about UI and OAB based.

**Methods.** A secondary analysis was conducted on a data from 182 HF patients who reported being incontinence. The Chi-square test was used for differences between categories.

**Results.** Only 31 (17%) of participants answered "yes" to the question "Have you asked for more information about urinary leakage or OAB?" However, 116 (64%) answered "yes" to the question "Would you be interested in learning more about urinary leakage or OAB?" HF patients' educational needs were significantly different by clinic/hospitalized patients and diabetic status. 11% of clinic and 23% of hospitalized patients answered "yes" to the question about asking for more information about UI and OAB in the past ( $p = .03$ ). In addition, 74% of clinic versus 55% hospitalized patients ( $p = .016$ ) and 55% diabetic vs 73% non-diabetic patients ( $p = .014$ ) answered "yes" to the question about their interest in learning more about UI and OAB in the future. In conclusion, although less than 20% of HF patients asked about the information of UI and OAB in the past, 64% expressed educational interests in the future. Clinic and diabetic HF patients were more interested in receiving information than hospitalized and non-diabetic patients.

**Implications for Nursing.** Clinic and diabetic HF patients will be good targets to conduct health education about UI and OAB. In addition, health care providers working with HF patients should provide health information about UI and OAB to their patients as many HF patients express a desire to learn more about these topics.

Funding Source: Detrol Clinical Research Program, Pfizer, Inc. 2005-2007

# CULTURALLY APPROPRIATE PSYCHIATRIC MENTAL HEALTH NURSING FOR ASIAN AMERICANS

*Author*

**Mijung Park, RN, MSN, PhD**

Department of Nursing  
University of Hawaii at Manoa

*Abstract*

**Introduction.** Asian Americans (AA) are one of the fastest growing ethnic groups in the United States. Health disparities in health service use, health coverage, and health outcome among AA populations are well documented. A critical strength of most AA communities is strong family and social ties that buffer many AA individuals from the negative health consequences of life and health crisis. Despite the critical role that families play in AA life, there is a scarcity of research on family processes and how they relate to health practices and outcomes in this population.

Ethnic minorities who suffer illnesses highly stigmatized within their communities are difficult or impossible to recruit. In this presentation, a new way of investigating the phenomenon was proposed: Tapping into the practitioners' broad experiences with minorities. The knowledge developed via practice is important because it provides us with a realistic understanding about the practice and their clients

**Methods.** The purposes of this presentation are to 1) address methodological issues of studying ethnic and cultural minorities and 2) illustrate characteristics of culturally appropriate psychiatric mental health nursing for AAs. This presentation is based on a hermeneutic phenomenological study. Participants were 20 psychiatric health care providers from various clinical settings. Providers were Registered Nurses, Psychiatrists, Social Workers, Psychologists, and Residents, and had, on average, 16.3 years of experience in treating Asian Americans. In individual interviews lasting approx 90 minutes providers' narratives about incidents of care with AA patients and families, as well as their philosophies of care with AA were elicited. Analyses included paradigm case, exemplars, and thematic analysis.

**Results.** Study findings illustrated that providers assumed multiple roles when working with AA populations, including: 1) cultural brokering, 2) supporting families in transition, 3) recognizing and treating culture-bound syndromes, and 4) becoming Zen (like) practitioners.

**Implications for Nursing.** Culturally specific treatment approaches, such as constantly re-negotiating provider's own illness model and embracing patient's illness model, were employed to calm the patient and to establish and maintain trust with family members. This study finding will provide insights into means of delivering adequate services to AA families.

# PRESSURE ULCER PREVENTION EDUCATION FOR CERTIFIED NURSING AIDES IN A CHINESE LONG TERM CARE FACILITY

*Author*

Voranan Pongquan, MPH

*Abstract*

**Introduction.** Presence of pressure ulcers among residents in long-term care facilities represents a significant and preventable health problem. The prevalence of pressure ulcers in nursing homes range from 2.3% to 28%, while the incidence of new cases ranges from 3.1% to as high as 73.5%. Pressure ulcers remain a significant indicator of the quality in care for residents in the long-term care setting. In order to reduce the prevalence of pressure ulcers, it is crucial to focus on preventative measures that will lead to high quality care for residents in long-term care facilities. Education can heighten the awareness of skin care problems, increase knowledge, and also provide the basis for informed decision making to reduce the risks of pressure ulcers. This study aimed to contribute to the development of educational strategies for pressure ulcer prevention in a long-term care setting for certified nurse aids.

**Methods.** The project consisted of developing, implementing, and evaluating an education session on pressure ulcer risk prevention. The total sample consisted of 38 CNA staff members from Country Villa Los Feliz, a facility consisting of 98% of the residents being Chinese. The Pressure Ulcer Prevention Education for Certified Nursing Aides explored the retention of knowledge attained through a comprehensive pressure ulcer prevention education as well as a follow up booster session for certified nurse aides. Overall knowledge of pressure ulcers was operationalized as four outcome variables; overall knowledge of pressure ulcer prevention, identification of common pressure ulcer locations, identification of pressure ulcer risk factors, and pressure ulcer prevention methods.

**Results.** The study results demonstrated a significant increase in passing scores for overall knowledge of pressure ulcer prevention from 25% to 75% ( $p < .000$ ) for all certified nurse aides. There were also significant increases in passing scores for identification of common pressure ulcer locations (18% vs. 81%) and identification of risk factors for pressure ulcer development (38% vs. 61%).

**Implications for Nursing.** By increasing knowledge and awareness of pressure ulcer risks with the goal of improving the quality of care in long-term care facilities, we can directly impact the quality of life for residents.

# CONCEPT ANALYSIS OF ACCULTURATION AMONG FILIPINO IMMIGRANTS IN THE UNITED STATES

*Author*

Reimund Serafica, RN, MSN  
University of Hawaii at Manoa

*Abstract*

**Introduction.** Although acculturation is frequently used as a variable in studies relating to immigrant health, there is a noticeable lack of information regarding how Filipino immigrants acculturate in their host culture. Epidemiologic studies consistently demonstrate that people who migrate from one part of the world to another quickly adopt the chronic disease patterns of their new host country. It is imperative to understand the process of acculturation that occurs within this group and its impact on their lifestyle choices and health status.

The purpose of this analysis is to analyze and clarify the definitions of the concept of acculturation in the Filipino population in the United States and to explore current measures of acculturation. This also intends to illuminate the role of acculturation in exploring lifestyle choices of Filipino immigrants.

**Methods.** The concept analysis strategy of Walker and Avant was selected as an organizing framework for this analysis. This method was chosen because of its iterative and stepwise approach. The method's eight steps were followed.

**Results.** Attributes of acculturation among Filipino immigrants include interactions between two cultures, learning process, values and practices and adaptation to a new sociocultural context. The continuous contacts of individuals of Filipino origin to the sociocultural contexts of the individuals from the United States, the Filipino ethnicity and language, strong family ties, religiosity, and uses of traditional medicine are the antecedents of the concept.

**Implications for Nursing.** The cumulative findings of this analysis have provided critical information for nursing research in exploring and understanding the impact of acculturation on lifestyle choices of the Filipino population. Acculturation is a multidimensional concept involving the interaction between two cultures and the process of change that occurs as a result of the interaction. A more accurate assessment and measurement of acculturation among Filipinos in the United States that involve a comprehensive evaluation including language abilities and preferences, length of residency in the United States, age at time of entry into the United States, socioeconomic status, educational level, sociocultural context, values, beliefs, and practices is needed.

# **PUBLIC HEALTH NURSING INTERVENTIONS WITH PACIFIC ISLANDER WOMEN**

## *Authors*

Barbara Tom, BSN, PHN (Primary)  
Nancy McGuckin, MPH, MSN, MBA, RN

## *Abstract*

As a poster presentation the authors would like to share the work being done by public health nurses in Waipahu, Hawaii with the Micronesian population living in that area and beyond. Public health nursing is more than case management and is more than program management it is the intersection of nursing practice with families, individuals, neighborhoods and communities with business, community organizations and public policy makes. This poster presentation will show the progress of work undertaken in the last 5 years and highlight the role public health nurse assumed to enhancing the health of the Micronesian community through individual care, family care, community grassroots organization and community development.

# PRE-ASSESSMENT TOOL FOR CHILD ABUSE PREVENTION (PACAP) FOR MULTIPLE HEALTH WORKERS IN JAPAN: A COMPARISON BETWEEN SUBURBAN AND RURAL CITIES

*Authors*

Reiko Ueda, RN, Litt. D.M.S. and Junko Miyazawa RN, MSN

*Abstract*

**Introduction.** Child maltreatment has increased in recent years (Henry et al., 2003), its estimated incidence being about 1.5/1000 of the population aged 0-17 in Japan (Ministry of Health, Labour and Welfare, 2002). The New Child Abuse Prevention Law in 2007 stresses the importance of primary prevention and intervention in communities. Multiple health workers have urgent needs for a useful screening tool for identifying the needs for intervention.

The purpose of this study is to develop the Pre-Assessment tool for Child Abuse Prevention (PACAP) and to introduce it to children's caregivers and various health and welfare workers.

**Methods.** A total of 184 primary caregivers for children aged 0-4 in two cities (a suburban city of Tokyo <K> and an island (rural) city in Okinawa Prefecture <A>) and number of health workers participated in this study at the occasion of children's health check-up. A semi-structured questionnaire (PACAP) that consisted of 18 questions was tested. The subjects were asked to answer the PACAP, and those with high score ("risk") group were followed up. In order to reduce false positives, new scoring methods such as "risk score" and "adaptive score" were introduced. The reliability and the validity were tested.

**Results and Discussion.** The PACAP was well accepted and posed no difficulty for subjects in answering the question. The main results were as following: 1) The cutting points for "risk case" was 7 points in K and 6 in A, and that for "high risk cases" was 8 points in both cities. 2) As for the distribution of "risk cases" and "high risk cases", the percentage of "risk cases" was 3.9% in K and 8.5% in A, and that of "high risk cases" was 3.0 % and 1.2% respectively. 3)

Confirmation: Seven of 102 (6.95%) subjects in city K who were identified as "risk" or "high risk" cases were followed and the second test a month later showed an overall improvement.

**Implications for Nursing.** These results suggest that PACAP seems to be effective for child maltreatment prevention both from the standpoint of population strategy as well as risk strategy .

# SUPPORT OF MAKING GROUP FOR HOME-BOUND PATIENTS WITH LYMPHEDEMA – CHARACTERISTICS OF PARTICIPANTS AND FUTURE PROSPECTS OF THE GROUP

*Authors*

Kanae Usui\*, Akiko Hoshino\*, Ayako Okutsu\*\* and Toshiki Katsura\*

*Abstract*

**Introduction.** Sustained daily self-care is one of the most important treatments for preventing deterioration of lymphedema, however it is difficult to keep on caring. We started the support to making group of patients with lymphedema so that they can maintain motivation of care continuation. We have held the meetings for three times till now, and this time we report the characteristics of the participants and future prospects of the group.

**Methods.** 1) Recruitment and study participants. We dispatched the document to 62 patients of the “counselor's office for women with lymphedema (outpatient service in Kyoto University Hospital)” to invite them to the meeting. Self-report questionnaire was distributed to the initial patients, who participated in each meeting held it in June and October, 2008.

2) Study variables

- Information of lymphedema; cause, site of lesion formation, elapsed years, et al.
- Relationship between patients.
- Effects of participation; CES-D score, find supportive relationships, empathy, et al.
- Demographic variables; age, sex, cooperator, et al.

3) Intervention

The meeting was held for around 2.5 hours in the weekday afternoon with two parts, in the first half we provided training session, skill practice, information of remedy, in the latter half, had a group conversation with tea and snack.

We made an original “self-care notebook” and distributed it to participants so that they can write down their daily treatment and maintain motivation of care continuation.

**Results.** There were 32 participants, and 24 people of those replied a questionnaire (response rate 75%). All participants were women, the average age was  $56.3 \pm 7.8$  (44-75). 2 of them have upper-extremity lymphedema, and 20 have lower-extremity lymphedema, 16 (66.7%) notice symptoms for more than 3 years. The average score of CES-D was  $13.9 \pm 9.8$ . Correlations between age and CES-D score were 0.33. 84.2% of them have no/less relationships between patients, and 95.8% had felt sympathy with each other to participate this meeting.

**Implications for Nursing.** What we showed was having mutual support helps continuation of self-care for patients with lymphedema. We still support this group, and examine the effect of that.

\* Department of Human Health Sciences Graduate of Medicine, Kyoto University

\*\* Kyoto Municipal Junior College of Nursing

# ACCULTURATION IN ASIAN IMMIGRANTS: A CONCEPT ANALYSIS

*Authors:*

Jing Wang, BSN\*, Judith Tabolt Matthews, PhD, MPH, RN

*Abstract*

**Introduction:** Acculturation has been recognized as a significant variable among researchers focused on immigrant health, yet inconsistencies in definitions and applications of this concept exist across investigations involving Asian immigrants.

**Methods:** To clarify the concept of acculturation in Asian immigrants, we employed the concept analysis technique developed by Walker and Avant (2005) by identifying all uses of the concept; determining its defining attributes, antecedents, and consequences; identifying a model case and contrary case; and defining empirical referents.

**Results:** The concept of acculturation has been widely investigated in anthropology, psychology, sociology, medicine, and nursing. Acculturation is often confused with assimilation. While the latter is a process by which individuals from a minority culture, of necessity, absorb the norms, beliefs, and values of the main culture, the former occurs when individuals willingly create a hybrid by blending their minority culture with the main culture. Attributes that define acculturation involve multiple dimensions: language used at home or work, socialization and communication preferences, daily living habits, ethnic identity, and cultural values and traditions. Prior to becoming acculturated, Asians must have been exposed to their original culture. Additional antecedents include continuous contact with both Asian culture and western culture, and a willingness to blend the two cultures. Consequences of acculturation are changes that occur in individuals' behavior and attitudes. An Asian immigrant's life story of successful acculturation constitutes a model case, whereas failure of an Asian individual to become acculturated is a contrary case. The most widely used scale for measuring Asian-American acculturation is the Suinn-Lew Asian Self-Identity Acculturation Scale. Few of the defining attributes are typically used to represent acculturation in most health research. Indeed, the preceding scale fails to adequately measure the multi-dimensionality of acculturation, their cultural values in particular.

**Implications for Nursing:** Nursing researchers should realize that acculturation is a process that results in blending of two cultures rather absorption of Asian culture by western culture. Further, assessment of acculturation should reflect attention to its multiple dimensions in relation to Asian immigrants' health attitudes, behaviors, and cognitions, and specific interventions targeting Asian immigrants at different levels of acculturation should be developed.

# CHARACTERISTICS OF INTERNATIONALLY EDUCATED NURSES IN THE U.S.

## *Authors*

Yu Xu, PhD, MSN, RN, CTN, CNE  
Associate Professor/PhD Coordinator  
School of Nursing  
University of Nevada, Las Vegas  
Las Vegas, NV  
[yu.xu@unlv.edu](mailto:yu.xu@unlv.edu)

Helen Zaikina-Montgomery, MA  
Department of Psychology  
University of Nevada, Las Vegas  
Las Vegas, NV

Jay Shen, PhD  
Associate Professor  
School of Community Health Sciences  
University of Nevada, Las Vegas  
Las Vegas, NV

## *Abstract*

**Introduction.** To assess the demographic, educational, employment characteristics and job satisfaction of internationally educated nurses (IENs) as compared with U.S. educated nurses (USNs) using 2004 National Sample Survey of Registered Nurses (NSSRN). Additional comparisons were made with the 2000 NSSRN when appropriate.

IENs are becoming a prominent part of the U.S. RN workforce. In 2004, IENs constituted 3.5% of the U.S. RN workforce. However, it is widely believed that this number is grossly under-reported. Little research on this proportion of the U.S. RN workforce is available to date.

**Methods.** Secondary analyses were performed on datasets of the 2004 NSSRN. Frequency analyses were performed on the data and differences were examined via chi square and t-tests.

**Results.** The highest proportions of IENs were from the Philippines (46.4%), Canada (23.9%), and the UK (8.0%). While on average IENs are younger ( $M = 46.1$ ) than USNs ( $M = 46.6$ ) in 2004 they were getting older as a group when compared to 2000 ( $M = 45.0$ ). A higher proportion of IENs than USNs held a baccalaureate degree (41.6% vs. 30.4%) whereas USNs mostly held an associate degree (8.7% of IENs vs. 41.6% of USNs). A significantly higher proportion of IENs held a baccalaureate degree in 2004 than in 2000 (47.8% vs. 38.3%). A significantly higher percent of IENs than USNs resided in urban areas (88.8% vs. 74.4%). More IENs than USNs reported being currently employed in nursing (91.2% vs. 88.7%) and more IENs worked full time than USNs (81.5% vs. 70.9%). IENs' and USNs' primary work settings differed significantly with more IENs working in hospitals (70.3%) than USNs (58.8%). Job satisfaction ratings also differed significantly between IENs and USNs. Fewer IENs reported being extremely satisfied with their job than USNs (18.8% vs. 28.4%) and more IENs reported being neither satisfied nor dissatisfied with their current job (12.2% vs. 7.7%). Job satisfaction ratings also differed for IENs between 2000 and 2004: fewer IENs were dissatisfied with their job (16.6% vs. 14.3%) and more were overall satisfied (73.8% vs. 68.2%) with their current position.

**Implications for Nursing.** The data revealed that IENs retain some previously reported characteristics (still younger and better educated as a group, primarily living in urban areas, mostly working in direct patient care positions in acute care settings). The data also indicated that there are some new emerging characteristics (i.e. aging as a group, accelerating rate of being prepared at the baccalaureate level, higher overall job satisfaction). The observed characteristics of IENs have implications for recruitment, retention, and U.S. nurse workforce planning and policy. In addition, the distributions of IENs' job satisfaction ratings and their tendency to be neutral toward job satisfaction, as well as their interpretation of job satisfaction warrant further examination.

# DEVELOPMENT OF EDUCATION IN INSULARITY HEALTH NURSING: A FOCUS ON ONE OF THE ISLANDS FROM OKINAWA PREFECTURE IN JAPAN

*Authors*

Satsuki Yamashiro, RN, MSN, Kazuko Maeda, RN, DNSc  
Izumi Kakazu, RN, MS, Chiaki Kugai, RN  
Okinawa Prefectural College of Nursing

*Abstract*

**Introduction:** This preliminary research seeks to make the best use of the systematic research that will be executed to pursue the conceptual framework and the education method of "insularity health nursing". The purpose of this study was to clarify the role, practical ability, and educational needs of nurses in an island in Okinawa Prefecture.

**Methods and Participants:** Participants were four professionals who worked for the hospital or the health center in a island (nurse, public health nurse, and two doctors), and had abundant experience in medicine, health and nursing. Participants understood the research purpose and methods. Data were collected by semi-structured interviews, and each interview was taped with the permission of participants. Collected data were analyzed using content analysis techniques.

**Results:** The feature of nurses' role and the competencies participants perceived to be required in their practice consisted of emergency care, infection management, assessment, referral/coordination, professionalism, and holistic patient approach. In addition, the barriers to continuing education were the insufficient learning environment and the lack of learning opportunities.

**Discussion and Implications for Nursing:** The nurses' role and nursing practice indicate that the generalist who is able to correspond with various situations is required; on the other hand the nurse who has advanced specialty is also necessary. These findings suggest that educational supports in both continuing education and graduate program are needed.