

1: Asian Americans and Pacific Islanders in Higher Education

This bar-code number lets you verify that you're getting exactly the right version or edition of a book. The digit and digit formats both work.

Asian American college students also fought for the inclusion of their stories in college curriculum [14]. Scholars believed that Asian Americans and Pacific Islanders had shared experiences with colonialism and had been connected historically through trade and cultures. Scholars, such as Stacy Nguyen, Dr. Pacific Islanders experience a different set of struggles than Asian Americans. While Asian Americans suffer from immigration issues, Pacific Islanders are fighting for decolonization and sovereignty. The term Asian Pacific Islander often focuses on issues facing the Asian American community while ignoring issues facing the Pacific Islander community. In [16] "Remapping a Theoretical Space for Hawaiian Women and Indigenous Women," Hall argues that Asian Pacific Islander movements, as well as mainstream feminist movements, have failed to address issues specific to just Pacific Islanders. Pacific Islanders face a different set of struggles than Asian Americans when it comes to land sovereignty and colonization. These struggles have not been included in APA discourses. The term further perpetuates the lack of accurate information about Pacific Islander communities. Higher institutions address the racial oppression that Asian Americans face, such as the "whiz kid" stereotypes, but fail to address that Pacific Islanders are stereotyped as lazy and not hard-working. Kaunanui continues to argue higher institutions should specifically target "Native Hawaiian and other Pacific Islander" students in recruitment efforts because the students of that category are underrepresented in higher institutions. Lucy Hu argues Pacific Islanders and Asian Americans face a completely different set of racial and economic issues. While the Asian American community has a higher medium annual income than the national average, many Pacific Islanders are living below the poverty line. A Skeptical Asian American Response, [19] " Young argues that Pacific Islanders experience a different set of struggles than Asian Americans, but are ultimately racialized by society in the same ways, such as being seen as "foreigners. Pan-pacific movements should include the decolonization of the Pacific Islands in its platforms. He asserts that colonization has occurred in many Asian nations, such as the Philippines, Vietnam, and Japan, as well. He writes that Asian Americans cannot be separated from Pacific Islanders based on cultural differences. Many Asian nations have nothing in common culturally and many Pacific Islands have nothing in common culturally. Spickard continues to argue that the issues facing Middle Eastern Asian American communities, multiracial Asian American communities, and adoptees from Asia has not been included by Asian Pacific American discourses, either. What all of these groups have in common is struggles with colonialism, orientalism, and racial hierarchies. Asian Pacific American movements should work to include the struggles facing all groups under the pan-racial umbrella of Asian Pacific American.

2: Asian Pacific American - Wikipedia

Asian Americans and Pacific Islanders in Higher Education: Research and Perspectives on Identity, Leadership, and Success presents a compilation of statistical reports, research findings, and experiential accounts that counters the lack of information about this population.

At Bonnier Corporation, your privacy is important to us. This Privacy Policy applies to all of the products, services, and websites offered by Bonnier Corporation and its subsidiaries or affiliated companies collectively, "Bonnier". To better protect your privacy, we provide this notice explaining our privacy practices and the choices you can make about the way your information is collected and used by Bonnier. Jeremy Thompson, General Counsel N. Privacy Department N. Orlando Avenue, Suite Winter Park, FL You may also ask for a summary of the information that we have retained, how we have used it, and to whom it has been disclosed. For your protection, we may require that you authenticate your identity before we provide you with any information. An overview of the information that Bonnier may collect You are able to take advantage of many Bonnier products, services, and websites without providing any information that personally identifies you by name, address, or other personally-identifying information. We only collect personally-identifying information when you voluntarily submit it to us. Sometimes, we need personally-identifying information in order to provide you with the products and services that you request. Depending upon the product or service, we may ask you for a variety of personally-identifying information. This might include, for example, your name, address, e-mail address, telephone number, gender, and birth date. We may also ask for other information about you, such as your credit card information when you are making a purchase , interests, income, or education level. We consider certain identifying information "sensitive. Some types of personal information will NEVER be requested or collected, such as information on your race or ethnic origin, political opinions, trade union memberships, religious beliefs, health, sex life, or sexual orientation. You may choose not to provide us with any personally-identifying information. In that case, you can still access and use many portions of our websites; however, you will not be able to access and use those portions of any Bonnier website that require your personal information. Many Bonnier websites include community features, such as online forums and message boards. Information that is posted in these areas becomes public information and the use that any third party makes of this information is beyond our ability to control. You should exercise caution before disclosing any personally-identifying information in these public venues. If you elect to submit content that includes information that can be used to identify you, you must assume that the content can and will be displayed on any website on the Internet. At some Bonnier sites and through certain promotions, you can submit personally-identifying information about other people. Some Bonnier websites also provide referral services to help you inform a friend about our websites, products, or services. We will only ask you for the information about your friend that we need in order to do what you request. Our properties may feature Nielsen proprietary measurement software, which will allow you to contribute to market research, such as Nielsen TV Ratings. To learn more about the information that Nielsen software may collect and your choices with regard to it, please see the Nielsen Digital Measurement Privacy Policy at <http://> These companies may use information you have shared e. Our partners use this information to recognize you across different channels and platforms over time for advertising, analytics, attribution, and reporting purposes; any information collected is stored in hashed or non-human-readable form. These companies typically use a cookie or third-party web beacon to collect this information. To learn more about this behavioral advertising practice or to opt-out of this type of advertising, you can visit <http://> Bonnier websites sometimes may offer contests, sweepstakes, or promotions that are sponsored by or co-sponsored with identified third parties. By virtue of their sponsorship, these third parties may obtain personally-identifying information that visitors voluntarily submit to them in order to participate in the contest, sweepstakes, or promotion. If a third-party sponsor beyond our control will obtain information that you supply us, we will notify you at the time we collect the information from you. Some of our websites contain links to other sites. By clicking on these links, you will leave the website operated by Bonnier and this Privacy Policy will no longer apply. How we use the

information we collect We use the personally-identifying information that you provide us to fulfill your requests for our products, programs, and services, to respond to your inquiries about offerings, and to offer you other products, programs, or services that we believe may be of interest to you. We sometimes use this information to communicate with you, such as to notify you when you have won one of our contests, when we make changes to subscriber agreements, to fulfill a request by you for an online newsletter, or to contact you about your account with us. We do not use your personal information to make automated decisions. We may syndicate the publicly available content of our community areas to unaffiliated third-party websites, using RSS or other technologies. The information you have shared in the community areas may be included in this syndication. We will use the personally-identifying information that you provide about others in order to provide the products or services that you have requested; for example, to enable us to send them your gifts or cards. These lists will never contain sensitive information. If you do not wish for your e-mail or postal address to be shared with companies not owned by Bonnier who want to market products or services to you, you have the opportunity to opt out, as described below. You may also opt out of the receipt of any marketing materials from Bonnier as described below. We may transfer your sensitive personally-identifying information to other Bonnier offices for internal management and administrative purposes. In addition, your personal data will be transferred to other Bonnier offices where necessary for the performance or conclusion of our contractual obligations to you or for your benefit. Transfers of personally-identifying information may also be made where necessary for the establishment, exercise, or defense of legal claims. We do not transfer personal information internationally. Bonnier will only share your sensitive personal information with outside companies or individuals in any of the following limited circumstances: When we use trusted businesses or persons to process personal information on our behalf. Before sharing any personal information with outside parties, we require that these parties agree to process such information based on our instructions and in compliance with this Privacy Policy and any other appropriate confidentiality and security measures. Before we share your sensitive personal information outside of the previously listed circumstances, we will ask you for permission first. Please note that this only applies to sensitive information, as defined above. We may also use, transfer, sell, and share aggregated, anonymous data about our users for any legal purpose, such as analyzing usage trends and seeking compatible advertisers and partners. In no event will this aggregated data contain any information that could be used to identify individual users of our products or services. How we protect the safety and integrity of the information we collect We take appropriate physical, electronic, and procedural measures to safeguard and protect your personal information. We use a variety of security measures, including encryption and authentication, to maintain the confidentiality of your personal information. We store your personal information on systems behind firewalls that are only accessible to a limited number of persons, each of whom is required to keep the information confidential. When you transmit sensitive personal information to us, like credit card information, we offer the use of a secure connection to our servers. To the extent you select the secure connection method or your browser supports such functionality, all credit card account information that you supply is transmitted via secure encryption technology. We will provide notice if we become aware of any security breach that may affect any sensitive personal information pertaining to you that we have stored on our systems. Bonnier employees, agents, and contractors who have access to personally-identifying information are required to protect this information in a manner that is consistent with this Privacy Policy and may not use the information for any purpose other than to carry out the services they are performing for Bonnier. These individuals are bound by confidentiality obligations and may be subject to discipline, including termination and criminal prosecution, if they fail to meet these obligations. Bonnier only collects personal information that is relevant to the purposes for which it will be used. Though we do take appropriate steps to review and update the information that we store to ensure that it is accurate, complete, and current, we also depend on you to update or correct your personal information when necessary. You may correct or delete any or all of the personal information you have provided to us at any time. Many of our websites provide means to review and update the personal information that you have provided on that website. To inquire about personally identifiable information that Bonnier has collected about you, or about other ways to correct factual errors in that information, please send us an e-mail at privacy@bonnier.com

bonniercorp. Do not use this email address to send questions about your subscription. To protect your privacy and security, we will take reasonable steps to help verify your identity before granting access or making corrections. We will decline to process requests where we cannot verify the identity of the requester. We may also decline to process requests that are automated, repetitive, systematic, or impractical, or that might jeopardize the privacy of others. In some limited circumstances, such as to resolve disputes, troubleshoot problems, and enforce our policies, we may retain some of information that you have requested us to remove. Therefore, you should not expect that all of your personal information will be completely removed from our databases in response to your requests. We only use the information we collect for purposes consistent with this policy. If we propose to use your personal information for purposes beyond that explained in this policy, we will provide appropriate notice before doing so and we will provide you with the means to opt out of those uses. We will not use your sensitive personal information for any purposes other than those described in this Policy unless we have obtained your consent. Your privacy options If you prefer not to receive e-mail communications from other companies, you may choose to remove yourself from any e-mail lists that we provide to third parties for marketing purposes by sending us an e-mail at emailoptout@bonniercorp. You will still receive information from Bonnier and its various brands, but we will not share your address information with anyone else. If you prefer not to receive postal communication from other companies, you may choose to remove yourself from any postal mailing lists that we provide to third parties for marketing purposes by sending us an e-mail at emailoptout@bonniercorp. Box , Harlan, IA We only want to communicate with you if you want to hear from us. If you prefer not to be contacted at all, you may opt out of receiving any communications from us at any time by notifying us at emailoptout@bonniercorp. You may also notify us by sending mail to the following address:

3: Predictors of STDs Among Asian and Pacific Islander Young Adults | Guttmacher Institute

The White House Initiative on Asian Americans and Pacific Islanders team recently headed to Arizona to engage with the Asian American and Pacific Islander (AAPI) community on the topics of workforce leadership, business and jobs, and senior healthcare.

December 1, DOI: Such information is vital to developing effective interventions to reduce STDs within this group. Logistic regression analysis was used to assess factors associated with ever having had an STD. Being female odds ratio, 4. Perspectives on Sexual and Reproductive Health, , 39 4: The number of Asian and Pacific Islander adolescents and young adults is also on the rise: STDs are among the most common infectious diseases in the United States,[4] but the majority of young adults, including those who engage in high-risk behaviors, vastly underestimate their own risk of chlamydial and gonococcal infection. The previous studies that examined women in this group used small samples, employed limited statistical analyses,[15,16] relied on regional rather than national samples[16,17] and focused on only one ethnicity,[18] resulting in a lack of generalizability. The present study will provide a fuller picture of the occurrence of and the factors associated with STDs among a nationally representative sample of Asian and Pacific Islander young men and women. Asian and Pacific Islander adolescents and young adults appear to have a somewhat lower risk of contracting STDs, including HIV, than do other racial groups because a lower proportion of them engage in sexual activity. For instance, Asian and Pacific Islander adolescents are less likely to be sexually experienced than white adolescents, but among those who are sexually experienced, the groups do not differ in age at first sex or lifetime number of partners. Further, sexually experienced Asians and Pacific Islanders are more likely than their white counterparts to have had multiple sex partners in the recent past. Level of acculturation may also help to explain their sexual behavior: In findings from the Behavioral Risk Factor Surveillance System, the proportions of Asians and Pacific Islanders aged 18 and older reporting HIV risk behaviors in the past 12 months were similar to the proportions among other racial groups. Some risk factors have been extensively studied, but without a focus on Asians and Pacific Islanders. For example, a systematic review of the literature found that eight of 11 empirical studies focusing on the relationship between alcohol consumption and STDs showed a significant positive association between alcohol use and STD risk. Additionally, epidemiological studies have consistently linked several sexual behaviors to the acquisition of STDs. From a systematic review of the literature, Warner and colleagues concluded that condom use is strongly linked to a reduced risk of gonorrhea and chlamydia in both men and women in the United States. An year-old who had her first intercourse at age 13 is more than twice as likely to contract STDs as an year-old whose first intercourse occurred at age The model provides a social-cognitive framework for understanding and predicting preventive health behaviors. It also assumes that one adopts preventive health activities when one views the benefits of these activities as greater than the barriers or costs and that the readiness to adopt preventive health behaviors can be stimulated by cues to action, events that may be internal e. Although this model has been useful in predicting HIV preventive behavior,[33,37â€”39] it has not been applied specifically in other STD studies. However, findings on the relative importance of its constructs have varied. Unlike studies that focus on only one or two Asian ethnic groups, our study includes several, to help us understand the intergroup differences in STD acquisition. We examined three central research questions: In this nationally representative sample, what proportion of Asian and Pacific Islander young adults have ever had STDs? How do Asian and Pacific Islander young adults who have had an STD differ from those who have not on selected characteristics? Add Health is an ongoing, population-based survey, which was designed to assess the health-related behaviors of a large nationally representative sample of middle school and high school youth. It employed a clustered sampling design, in which the primary sampling unit was the school. Weighted oversampling by design yielded population-based estimates. A detailed description of the sampling frame has been published elsewhere. At Wave 3, when participants were 18â€”27 years old, biological samples were collected to be tested for STDs. Our study is based on data from the 1, Asian and Pacific Islander young adults female and male who completed Wave 3. Eighty-five percent of the young adults in this sample reported that they had had

sexual intercourse. Acculturation was measured, as in past work,[24] as a four-level ordinal variable. Respondents were classified as U. This variable was dichotomized as none versus any. Five behaviors were assessed as sexual risk behaviors; each question was dichotomized. Respondents were asked if a condom had been used at last vaginal intercourse; if they had ever paid someone to have sex with them; if they had ever been paid for sex; how old they had been the first time they had vaginal intercourse coded as 1 for those who had had sex before 15, 0 for those who had been 15 or older ; and with how many partners they had had vaginal intercourse in the past 12 months more than one sex partner in the past 12 months was coded as 1, and one partner or no partners was coded as 0. Health Belief Model measures were assessed using five items. Perception of responsiveness to treatment was measured by the following question: How strongly would they approve or disapprove? Statistical analyses Stata 9. Reported percentages, excluding descriptive statistics, are estimated and incorporate population-based weights. Bivariate analyses of relationships between STD status and explanatory variables used a chi-square test; results were adjusted to account for the complex survey design. Explanatory variables that had p values of less than. For this study, missing data might arise from deliberate or random nonresponse, perhaps in relation to the sensitive nature of requested data. Results of analyses using list-wise deletion may produce biased results because of missing data. We then compared results from list-wise deletion methods and results from multiple imputation methods in terms of the direction, magnitude and significance of effects. The mean age of young adults in this study was 22 standard deviation, 1. Ninety percent of our sample reported speaking English at home; those who spoke English at home and were U. A low proportion of the total sample reported exchanging money for sex: Overall, respondents perceived their susceptibility to STDs as low mean, 1. Respondents were highly influenced by both external and internal cues to action 4. STD predictors Gender, several of the sexual risk behaviors and most of the Health Belief Model constructs were significantly associated with an STD diagnosis at the bivariate level Table 3. Participants who had ever had an STD, when compared with those who had not, perceived themselves to be more susceptible to STDs mean, 1. Young women had four times the odds of young men of having had an STD odds ratio, 4. Indians were significantly more likely than Filipinos to have had an STD 4. Respondents who had ever been paid for sex and those who had had more than one sex partner in the 12 months prior to the interview also had increased odds of ever having had an STD 4. The more respondents perceived that STDs are responsive to treatment, the higher their odds of ever having received an STD diagnosis 2. In the multiple logistic regression model, having had sex before age 15 was no longer significantly associated with having received an STD diagnosis. Agreement between each pair of sexual risk behaviors was quite low kappas, 0. Chlamydiaâ€™a risk factor for pelvic inflammatory disease, which can lead to ectopic pregnancy and infertility[43]â€™was the most common STD in our sample, in keeping with national trends. Even after we controlled for other background variables, Asian and Pacific Islander females had odds four times as great as their male counterparts of having had an STD. This gender disparity may stem from the fact that many sexually active women get regular gynecologic exams, during which they are screened for asymptomatic STDs; men are less likely to get tested. However, the gender disparity in our sample is larger than that found in other studies of nationally representative samples. The most compelling explanation may be that Asian and Pacific Islander women have broader and more racially diverse sexual networks than men. Studies consistently show that Asian and Pacific Islander women have higher rates of interracial dating and interracial marriage than their male counterparts. One of the few relevant empirical studies found that 13 out of 15 Indian men interviewed in New York City perceived that they had no personal risk for HIV, and only four out of 15 knew about STD transmission. To explain this lack of association, a follow-up analysis was conducted. Since our sample as a whole became acculturated during the transition to young adulthood, the effect of acculturation was difficult to detect. To elucidate the effect of acculturation on STD diagnosis, future studies should recruit more recent immigrants or children of immigrants with lower levels of acculturation than those found in our sample. Believing that STDs were not readily responsive to treatment i. Having such beliefs may help individuals exercise caution in selecting intimate partners, may encourage them to change sexual behaviors to avoid exposure to STDs and may help them to reduce their number of sexual partners. An HIV prevention study[54] supports these results: Perceived severity was an important predictor of whether

Asian and Pacific Islander college students adopted preventive behaviors. The perception that STDs are not readily responsive to treatment may be an incentive for adopting preventive actions because it may be associated with fear and threat. In such studies, loss to follow up will inevitably occur. We have analyzed Wave 3 data cross-sectionally; thus, factors associated with both attrition and outcome could bias results. Our outcome variable of STD history was based on self-report. Therefore, we may have underestimated STD occurrence. In addition, Add Health did not differentiate between STDs caused by sexual intercourse and those that can be acquired by other means. For instance, females in our sample reporting vaginitis could be referring to yeast infections, a form of vaginitis that is not sexually transmitted, thus misclassifying their conditions. By the same token, bacterial vaginosis is strongly associated with sexual intercourse and with other STDs. However, women become more susceptible to bacterial vaginosis with increasing age, even in the absence of intercourse. HIV, chlamydia, gonorrhea and trichomoniasis. Despite the presumed measurement error of STD self-report, it is an appropriate method in sample surveys. Because list-wise deletion may produce biased estimates, we conducted additional analyses using multiple imputation methods; [67] estimates for variables of interest were essentially unchanged. This is easily understood as a consequence of the additional power offered by imputation methods. We conclude that bias because of missing data is minimal, and should not alter our interpretation of the results. Conclusions Our findings have important implications for practice and policy. First, raising public awareness of the risks of STDs, especially among young women, is essential. Future research should also explore the sexual networks of Asians and Pacific Islanders, including the extent of network exposure and concurrent sexual partnerships across racial groups, [68] to shed light on the mechanisms and pathways of STD acquisition. Second, given the high vulnerability to STDs of Indian young adults, designing special prevention efforts to provide STD education and to encourage the development of protective sexual behaviors within this group should be a priority. Third, considering that exchanging money for sex was significant in this study, communities with large numbers of sex workers should be targeted; public health outreach efforts are needed to engage this group in a comprehensive service delivery model including STD testing, counseling and case management. Fourth, promoting service coordination along this continuum is also essential, because older adolescents and young adults are difficult to track and often fall through the cracks in service systems. A fifth issue for attention involves the Health Belief Model. In light of previous research, [54] as well as findings from this study indicating that greater perceived severity of STDs is associated with lower rates of STDs among Asian and Pacific Islander young adults, interventions for Asians and Pacific Islanders should consider building on these health beliefs. Consensus is growing that STDs among Asians and Pacific Islanders have to be seen within the larger social and cultural context in which they live.

4: Consent Form | Diversity Best Practices

Asian Americans and Pacific Islanders face increased barriers to good health because of systemic and historic injustices. However, most or all of the disparities in health outcomes are masked because data is aggregated into one racial category instead of many diverse ethnicities.

5: Navy Celebrates Asian American, Pacific Islander Heritage Month

Negative stereotypes of Asian-American/Pacific Islander men being undesirable, while stereotypes of Asian-American/Pacific Islander women as exotic and sexualized are also psychologically damaging. A damaging result of the model minority myth is that many Asian-Americans/Pacific Islanders are invisible minorities.

6: Health Perspectives: Asian Americans & Pacific Islanders | Center for Health Progress

Asian Americans and Pacific Islanders in Higher Education: Research and Perspectives on Identity, Leadership, and Success presents a compilation of statistical reports, research findings, and experiential accounts that counters the lack

of information about this population. Although the community of AAPI students and professionals is higher.

7: Asian Americans and Pacific Islanders in the U.S. Navy

Last month, a landmark study called "Tokens on the Small Screen" confirmed what even casual TV watchers have probably observed: the Asian American and Pacific Islander (AAPI) population is.

8: Health Perspectives Infographic Series Archives | Center for Health Progress

Celebrating Asian American and Pacific Islander Heritage Month Posted on May 21, by Jim Borland, Acting Deputy Commissioner for Communications During the month of May, we observe Asian American and Pacific Islander (AAPI) Heritage Month in the United States and celebrate the accomplishments of this community.

Pricing on Purpose Stabilize tool advanced avid manual John Denver Love Songs Arranged For Harp General chemistry 10th ed pkg w solutions manual The marriage service of the Book of common prayer New York : TIF as an unused act and its substitutes Kenneth W. Bond High speed steels Institutional Repositories The object voice Mladen Dolar The opinions of the Confederate attorneys general, 1861-1865 Alex Rodriguez (Benchmark All-Stars) 52 Dates for You and Your Mate The Lydias; Or The Development Of Female Character How to read a temple Introduction to access 2010 23 Chapter 11: A Rift in Ivan 4:18 Gentrification and local schools : women shape the urban landscape Cluster analysis introduction in data mining Lake Murray, boat chart/road map Ninja burger honorable employee handbook University physics 13th edition volume 3 Appendix, M: U.N.C.I.P. Resolution of 13 August, 1948 (S/1100, Para 75) J. Schwinger: Quantum Electrodynamics III: The Electromagnetic Properties of the Electron-Radiative Corre To improve relationships between the school board and the superintendent Doing Nothing Is Sometimes Preferable The technological bluff Appendix, V: India-US Relations: A Vision for the 21st Century The world guide to cheese. Opening words about God onto creatio continua Rossini and his school Groundwater hydrology 3rd edition The Ruined Cottage Life of Francis Marion. A. C. Benson and the thread of gold. Manga tokyo ghouls Mosbys Review Cards Designing With Coreldraw 5.0 (Prisma Be An Expert! Series) Colossians (Thanksgiving and prayer (1:3-14) The rise and fall of slavery. New regulations for road transport