

Asian American Reproductive Justice Oral History Project
Sophia Smith Collection, Smith College
Northampton, MA

TU-UYEN NGUYEN

Interviewed by

JUHEE KWON

July 27, 2013
Berkeley, California

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with generous support from the Royce Fellowship

Narrator

Professor Tu-Uyen Nguyen (b. 1972) was born in Vietnam and escaped to the United States as a “boat person” in 1979. After spending her childhood in Virginia and various parts of California, Dr. Nguyen received her bachelor’s degree in Biology and Comparative Literature from University of California, Irvine in 1995. She went on to University of California, Los Angeles, where she received her master’s in Community Health Education/Promotion in 1998 and her PhD in Public Health in 2004. Dr. Marjorie Kagawa-Singer served as her advisor during her doctoral studies and introduced to her to the field of breast and cervical cancer research. Dr. Nguyen joined the faculty at California State University, Fullerton in 2007 and is currently an Associate Professor within the Asian American Studies Program.

She has worked extensively with various Asian Pacific Islander (API) community-based organizations as part of her work, including Orange County Asian Pacific Islander Community Alliance (OCAPICA) and National Asian Pacific American Women’s Forum (NAPAWF). In 2009, she led the California Young Women’s Collaborative, a year-long community-based participatory research course on API community health and sexual/reproductive health for college students. The course was titled, “Asian Pacific Islander (API) Community-Based Health Research and Field Studies” and also offered a social action component to apply their research results in conducting outreach and advocacy work. Dr. Nguyen also serves on the board of OCAPICA.

Interviewer

Juhee Kwon (b. 1991) is an undergraduate at Brown University, studying Biology and Ethnic Studies.

Restrictions

None

Format

Interview recorded in MP3 file format using Google Voice. Two files: (a) 26 min 57 secs, and 21 min 28 secs.

Transcript

Transcribed and edited for clarity by Juhee Kwon. Reviewed and approved by Tu-Uyen Nguyen.

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Transcript of interview conducted July 27, 2013, with:

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by: JUHEE KWON

GOOGLE VOICE: This is call is now being recorded.

KWON: Okay. So this is Juhee Kwon. Today is July 27, 2013. I'm conducting a phone interview with Professor Nguyen for the Asian American Reproductive Justice Oral History. So thank you so much for taking time out and doing this.

I was wondering if we could start from the very very beginning, if you could give us a quick intro and maybe some family background, how you grew up, and also how you developed your political consciousness.

NGUYEN: Okay. Gosh, let's see. I actually came to the U.S.—well, I was born in Vietnam, and at the age of seven, my family and I escaped from Vietnam as part of the boat people exodus. We came to America in 1979. We first lived in Virginia for a year, and then my family and I moved over to California.

I think having gone through that experience as a child, I didn't quite understand at the time, why we were leaving Vietnam, but I think when we came to Virginia, I very quickly learned about how I was very different from everyone else. Because I think I was only one of two or three Asian students in the entire school, and all the other students were mainly Caucasian, White. And so I knew from a very young age, what it meant to be different. I didn't know any English at that time, and so I was put into an ESL [English as a Second Language] class, and so I knew at a very young age, of what it meant to basically feel left out and not part of the normal crowd, right? So I think growing up with that kind of background, it made me very aware, and it made me very empathetic towards others who were not as easily accepted into the regular, normal activities in school and in part of social life in general. And having that experience really made me, I think, lucky, in the sense that the work that I'm doing today is an outgrowth of that, and I get a lot of meaning from being able to work in the community and to be able to develop a lot of the services that I wish I had growing up as a kid. So I think, in a nutshell that's how I developed my political consciousness from a very young age.

1:05

KWON: So from ESL all the way to professorship at Cal[ifornia] State [University,] Fullerton, what kind of educational path did you take, in terms of high school, college, and then your life after college as well?

2:53

NGUYEN: Yeah, so I'll fill in the blanks (laughs). That was a big jump, right? From seven years to Cal Fullerton. I went to school in Virginia for a year, and then we moved to California, and I went to elementary school in Orange County. And that was a big change because coming from Virginia to Orange County, it was sort of the opposite experience, being surrounded by a lot of Asian communities, and so—

KWON: And was it specifically Vietnamese folks? Was there a Vietnamese community already?

3:38

NGUYEN: Yeah, so when—right—so when we first moved here, we lived in Tustin and we moved around to the outskirts of Huntington Beach and Westminster, and mainly there were a lot of Vietnamese students at that time. And then a few years later on, I went to Monterey Park. And that's where I went to middle school and junior high, and as you know, Monterey Park is the Chinese Beverly Hills, what they term the Beverly Hills in Chinatown, up in Monterey Park, and so I was surrounded by a lot of Chinese and other Asian ethnic groups as well. And then after Monterey Park, we moved to Irvine, and I went to high school in Irvine. And so again, a lot of Asian communities, and mainly Taiwanese, Chinese.

I went to UCI [University of California, Irvine] for my undergraduate education and was a Bio[ology] major, and quickly learned that I actually gravitated more towards the humanities. Because I took a humanities course and really fell in love with writing, and reading the classics, and also being exposed to Asian American Studies for the first time at UCI. And I got involved in a lot of activism, in joining certain clubs and organizations like the AP [Asian Pacific] Student Association.

There was a refugee organization at that time called Project Ngoc or Project Pearl, and they basically helped Vietnamese refugees coming from Vietnam. I was able to volunteer during my freshman and soph—The summer of my freshman year, I went on a volunteer trip to Southeast Asia and volunteered in the refugee camps, in places like Singapore, Malaysia, Hong Kong, Indonesia. We went basically throughout Southeast Asia, wherever the refugee camps were and that just totally changed my perspective on things, because I realized how privileged I was in the sense that I was getting an education that a lot of minors were not being able to access. My role in volunteering on the trip was to interview unaccompanied minors, meaning that these were kids under the age of eighteen, who had left Vietnam as boat people, and they left without their parents or any adults, basically. They went alone, and so there was no one

looking out for them, no one to protect them. And when they came to the refugee camp, at that time, you had to go through a screening process in order to get accepted into the U.S., and since they didn't have any family with them, they didn't quite know what to do. They couldn't prove, basically, any of their status as refugees. And so my job was to interview and get their stories, and then after that summer, I went back to Washington D.C. and spent about two months in Washington D.C. and worked with refugee organizations to try to get them to hear for these case of unaccompanied minors so that they could get accepted into the U.S. And so that helped me to understand the political system, as well as how certain things worked in D.C., and so that was really an invaluable experience to look at the policy issues and how you can affect and create change through policy. Yeah. And then after—yeah, uh-huh. Go ahead.

KWON:

Oh, how did you get into community health and that aspect of your work?

7:49

NGUYEN:

Yeah, so I majored in Biology, and because I loved the humanities so much, I decided to double major in Comparative Literature. And after graduating from UCI, I had thought about going to medical school. My parents are both in the health field. My dad is a dentist, my mom is a pharmacist, and so they always encouraged me to go into the health field, because they knew it was a stable profession. They wanted me to become either a dentist or a pharmacist, but those two careers never really appealed to me (laughs). So I did many internships during college [but] didn't see them as something that I could see myself doing. But medical school was something that was interesting to me, and so I went through all the classes, took the MCATs [Medical College Admission Test], and applied to schools, but I didn't get accepted into any medical schools.

And so I took a year off and worked as a physical therapist aid, and sort of tried to figure out what I wanted to do. A friend of mine was going to public health school at UCLA [University of California, Los Angeles] at that time, and she said, "You know, if you're still interested in applying to medical school. Public health is something that a lot of schools look highly upon, and this is a good way to get some experience." And at that point, I didn't really know what public health was or what the field was really, so I just researched and found it and decided to apply to UCLA and got into their master's in Public Health program. And when I went into that program, I thought, Well, this is a good stepping-stone to medical school.

8:56

And as I got into the program and learned more about public health, I really became interested in it as a career and as a profession. And after I finished my master's program, after two years, I was offered a fellowship by my advisor at that time. And she said, "I think you have a lot of potential, and I think you should go on and get your PhD," and she offered me a fellowship and I thought, Wow, you know, when is this opportunity ever going to come again? And someone's paying me to

continue with school. And so I took her up on the offer and applied for the PhD program and got in. And then that basically just opened up all kinds of doors, because I got involved in working in cancer and also working specifically with a lot of Asian Pacific Islander communities. Because my advisor was Marjorie Kagawa-Singer, I don't know if you know—

KWON: Oh yeah, I do know her. Yeah.

NGUYEN: Yeah, yeah, yeah, yeah. She was my main advisor, and she got me involved in a bunch of research projects. I met a lot of people in the community and really found a lot of joy and meaning in working with these folks on all kinds of different health programs. Mainly around breast and cervical cancer in the Asian Pacific Islander community, and so—

KWON: Yeah, how does your work relate to Professor Sora Park Tanjasiri's work? You guys have a very parallel life. I already interviewed her, and (inaudible)—

11:20

NGUYEN: Oh, you did?

KWON: Yeah, she also did public health, did cancer. So how does your work relate with each other?

NGUYEN: Yeah, so because Margie [Kagawa-Singer] was my advisor, she got me involved in a lot of the research that she was involved with, and so I got involved in the cancer field because of Margie, basically. She got me involved me in a project—we were working with AAPCHO [Association of Asian Pacific Community Health Organizations] at that time. Are you familiar with AAPCHO?

KWON: Yeah.

NGUYEN: Yeah, and they had a breast cancer project where we worked with several organizations, nationally. It was my first exposure to working with the Pacific Islander communities, too. So a lot of the work that I'm involved in today is because of Margie and how she introduced me to a lot of her research she was working on at that time. Yeah.

KWON: So do you do a lot of research now? But I also know you do the NAPAWF [National Asian Pacific American Women's Forum] California Young Women's Collaborative [CYWC]? How does that relate to the rest of your work?

12:31

NGUYEN: Yeah, so I found that in the past few years I've had a lot more interest in working with youth programs and younger folks—high school as well as

college. And when I first started teaching the NAPAWF class, Lisa Fu—she was working at NAPAWF at that time. Do you know Lisa?

KWON: Yeah, she used to be an Organizing Director? Is that right?

NGUYEN: Yeah, so she used to work with NAPAWF, and she was transitioning out of her role then. And she connected me with NAPAWF to propose having us teach the CYWC class. And this was the first time that the class actually became a class. So in the past, NAPAWF had CYWC as sort of a special project and had people sign up through independent study or—it was a special project that NAPAWF came into colleges and tried to recruit students [for], as a special study that they could do on their own. But at [Cal State] Fullerton, we decided to turn it into a formal class, and we actually—

KWON: So before when it wasn't a class, who actually advised the students?

13:58

NGUYEN: It was Amy Lam, and she was a staff at NAPAWF.

KWON: Oh, okay.

NGUYEN: Yeah, so basically she came in to recruit students at the colleges and then it was basically just a project of NAPAWF. And they used the campuses as their sites to recruit students. But it used to be very small. It was maybe five to twelve students in any one year that they did that, and when we brought it to Fullerton and opened it up, as a formal class, we got a lot of interest. And also not just from girls but also from male students—

KWON: Yeah.

NGUYEN: Because we can't restrict the class; we have to open it up. So that really changed the direction of things and opened up a whole new way of training young college students about reproductive health. And involving that male voice, I think, was really valuable, because it brought in a new perspective. Even though it was still supposed to be a space for training young girls to become leaders, I think having the guys and the male students in the class, it trained *them* to be allies and so that was a really good experience, I think, for all the students.

KWON: When the students come in or when they're reading the syllabus or whatever and then they're signing up for this class, what are some of their ideas of what the class is going to be? Because when I sign up for classes and if I had seen a reproductive justice class, before I knew about the RJ [reproductive justice] movement, I don't exactly know what I would expect out of it.

15:38

NGUYEN: Right. Yeah so I had to explain a lot in the recruitment [process]. Since it was the first time that the class was offered, students had a lot of questions, like what is this class about? And the way that I framed it, I made it more of a general introduction to community health issues, with a special focus on reproductive health and sexuality, as well. I put in there sexual health, and so that got a lot of students interested. But the way that I structured the class, it was more on learning about Asian Pacific Islander community health issues, but with a special focus on women's issues and sexual and reproductive health. It made it a little bit broader and more accessible to a lot of students, because sometimes when students don't have exposure to these kinds of classes, they get scared off or if they're not familiar with it, they're not likely to sign up for it. And also because the class, it was a new class, it didn't satisfy any general education credit—a lot of students would have—it took them something special basically for them to sign up. And so having NAPAWF as a sponsor, that was a big incentive for a lot of students to be able to get access to field trips, for example, or possibly being involved in something bigger than the class.

KWON: What kind of field trips did you go on?

17:32

NGUYEN: So for the first class [in 2009-2010], we had the students go to Sacramento as part of the API Policy Summit. Usually every year, there's an organization called APIs CAN—it stands for APIs California Action Network—and they organize a policy summit in Sacramento. So that was the perfect opportunity for the students to learn about policy issues and what kind of voice they could have on the national level. We took them to Sacramento, and it was a good capstone to the class, because it's a yearlong class. So the first semester, we teach the students about community-based participatory research methods and what it means to have these kinds of spaces for API communities to be able to talk about their health issues and to become active in their own community health. And then the second semester, we actually have the students do social action projects, where they take the data that they collect and they analyze it and then they go out into the community to try to basically educate others about the issues and to come up with projects where they are able to talk to their peers on campus, as well as other community members about why it's important to learn about sexual and reproductive health issues in the community.

KWON: When was that first class? What year was it?

19:12

NGUYEN: This was in 2009-2010, so we started in fall of 2009, and then it ran through the spring of 2010.

KWON: And has it been going on every year?

NGUYEN: No, so the first time that we taught it, it was that year [2009-2010], and it was the first time that it was offered as a class. And then the following year, NAPAWF wanted to open the opportunity to other colleges. Because this program has been to UC Berkeley, UC Davis, San Francisco State [University], so they've been trying to get it into different colleges. And so after Fullerton, it was at UCI, and then the year after, they were supposed to do it at UCLA, but then they decided to stay at UCI to see how it would work out as possibly a permanent class. And then last year [2012-13], they decided to bring it back to Fullerton. I think they were trying to get it to UCLA, but that didn't work out, and so they wanted to keep it in Southern California.

KWON: I actually went to the March [2013 NAPAWF] Summit where your class presented with the information and everything like that. If you could—

20:33

NGUYEN: At UCI?

KWON: Oh, not at UCI. In Washington D.C.

NGUYEN: Oh, right, right, right. This year. Uh-huh.

KWON: Yeah, yeah, yeah. It was really impressive, yeah.

NGUYEN: Oh, you were there? Okay.

KWON: Yeah. Yeah, I went to the little presentation—

NGUYEN: Oh, wonderful.

KWON: I have never seen so many students interested in [reproductive justice].

NGUYEN: Yeah, yeah, so—

KWON: I was amazed that there could be a class.

21:03

NGUYEN: Right, right. Yeah, so a lot of the students who were there presenting—that was our whole class, basically. I think we were only missing one student, who couldn't go. It was really awesome to be able to do it with University of Minnesota [Twin Cities] this year, as well. So they were the new cohort, and it was really exciting that it expanded outside of California this year. So I don't know if you had a chance to interview Melissa Kwon yet.

KWON: No, she's a little busy, but I'm trying to get in touch with her. Yeah.

NGUYEN: Uh-huh. So she's actually from Minnesota, and she basically helped to write the grant to be able to get funding for teaching the class over in Minnesota. Yeah.

KWON: I know you said that you present the class in a kind of a broader community health perspective, but what kind of background do you have in reproductive justice and having that gender lens to look at health issues?

21:59

NGUYEN: Mhmm. So a lot of the work that I've been doing in my PhD studies and also in the community has mainly been with women. So with breast and cervical cancer, we worked with a lot of different women from all kinds of API communities, and I think having that experience really helped me to have that gender perspective, in terms of how important it is to have a space for women to be able to talk about their issues, but also looking at it from the perspective of how important it is to involve the family and to involve the male allies and the male perspective as well in these types of issues. Because I think, traditionally in public health, often times, programs tend to focus on people who are going through the health issues. So with breast and cervical cancer, a lot of work is centered around getting the women in for screening and educating them about the issues and reducing the stigma around the screening. What we've found in working with the API community is that it's just as important to involve the men and the family members, because often times, they're the ones who are driving the women to their appointments or they're the ones who sometimes are finding the cancers, while they're having sex or they're having—it's the males and the family members who are affected when they get diagnosed with cancer, for example. And so we found that it's just as important to educate these members, just as important as it was to educate the women themselves. Because you need that support system.

KWON: Right.

NGUYEN: And so I think having that perspective and coming into the reproductive health and sexual health and reproductive justice field, I saw how important it was to also involve the male allies, and—while at the same time, pointing out the gendered political consciousness and the need for that space, for the girls to develop their leadership skills. So I think it's a happy medium, in terms of involving the male allies and their family members. And I think it's a tough balance sometimes to be able to provide that space for the girls but also have that space for the male students to be allies, right? And then when you involve family members, it also opens up a whole can of worms in terms of what are your responsibilities, too, to educate the moms, the dads. Because we've run across a lot of issues about how the students in the class would be learning about these things, and then they would talk with their moms or dads or family members, and [they have] the responsibility of having to educate those family members

and letting them know what's going on. And then it opens up all kinds of conversations about why you need to get screened for certain things, and why are you having sex and, you know, things like that, and so I think it's really interesting how it's different. Yeah.

KWON: Yeah, is there some kind of silence or stigma around talking about specifically breast cancer or cervical cancer or sexual health?

25:55

NGUYEN: Absolutely. Yeah, so I think that a lot of the work that's been done in the last decade or so—a lot of it has concentrated around educating women and their families about the stigmas that are attached and how cancer can strike anyone. It doesn't discriminate. In terms of sexuality, I mean, you probably are very aware, in the API communities, a lot of these issues are never talked about, right? So a lot of that, we work through in class. At first, the students are very shy to talk about these issues and they don't want to touch it and they get very giddy and, you know, giggles. By the end of the school year, they can't wait to talk about it, because they learned so much and they've realized how important it is.

END OF FILE 1

FILE 2

GOOGLE VOICE: This call is now being recorded.

NGUYEN: I wonder if it's like a thirty-minute limit.

KWON: Oh, okay. Well, I think we have plenty of time left, so we should be okay.

NGUYEN: Okay. Basically—

KWON: You were talking a little bit about the students in the class and how they got really excited towards the end of the semester?

NGUYEN: Mhmm. Yeah, so they basically couldn't wait to talk to other people about what they had learned, and I think it opened up a lot of conversations with their family members, particularly. So a lot of them got the courage to talk to their moms and dads. That was really great to see, because these students came into the class at the beginning of the year, not really wanting to talk about things, and by the end—after they had educated their peers, the community members—to see it actually affecting them personally and having them think about these issues themselves, I think that was the major breakthrough.

KWON: Yeah, you said also after [the students] collect the data and [they] analyze it, the students also go out and do some kind of work in the community.

1:02

NGUYEN: Mhmm.

KWON: What is that called again?

NGUYEN: Social action.

KWON: Oh, social action, yeah. What kind of projects have they done?

1:14

NGUYEN: For example, in our class, we had three components as part of their social action work, and this included community—so they had to go out into the community and build relationships with community-based organizations. They put on workshops, they held press conferences, they participated in rallies, and they worked with several community-based organizations to educate community members about what they'd learned.

And then the other component was campus social action. So this is where they worked with community organizations and clubs on campus to educate their peers. They would hold workshops, and then they would also go to the student health or the women's center on campus, and they would basically educate their peers and hold discussions around the issues that they were learning about.

And the third component of the social action was social media. Students would blog, they would get on Tumblr, they would form Facebook pages [or] communities, and basically spread the word on social media and on the Internet. So it was our way of basically getting students out and applying what they learned, and working on their public presentation skills. While in Washington D.C., for example, we also had them do legislative visits, and so they went and educated the Congressmen. We also did that locally. We met with local politicians to have the students also educate at the [State] policy level, so—yeah, mhmm?

KWON: Can you tell me about some of the successes that the social action programs have had around the campus, in terms of educating their peers?

3:23

NGUYEN: Yeah, so on our campus this year, a lot of students outreached to the sororities and fraternities on campus, and we actually had a campaign. One of the students wrote into a campaign and won like a box of five hundred condoms or something like that. So they brought these condoms to meetings with the fraternities and sororities and gave them out, and this was a good opportunity to basically educate their peers about what you can do to protect yourself, what are some STDs that you need to be aware of, what are some skills to negotiate condom use, what are some birth control methods, and they also shared the data from the survey that they did. It was a good opportunity to have a lot of the fraternities and sororities talk about these issues. And for many of them, it was the first time. Many, especially for the fraternities, a lot of the guys were really shocked about learning about the cervical pap smears and things like that. They didn't know anything about that. And so it was a good way for the students to really introduce these topics into these clubs and organizations. Yeah.

So that was on campus. We also did some workshops in the student health center and the women's center. The students held a lot of discussions to educate the peers and then in the community, they actually worked with some local community based organizations like KGA [Khmer Girls in Action], for example, where we're hoping to do a joint community forum with them in the future. I don't know if you know about the Yellow Lounge thing that's coming up next Saturday?

KWON: Oh, in August. Yeah, yeah.

5:38

NGUYEN: Yeah, yeah, yeah. August 3rd, I think?

KWON: Yeah.

NGUYEN: Yeah. Are you going to be there?

5:48

KWON: No, I'm not. I'm actually currently in Berkeley, but I was there a couple weeks ago, and I talked to Sophya [Chum] from KGA, and so she gave me a little pamphlet. Yeah. Are you going to be involved or you're going to be like a supporter?

NGUYEN: Yeah, I'm supporting them, and I'll probably try to make it that day just to support them. They came out with a report a couple of years ago on reproductive health and justice, so—yeah, they've done a lot of work, and some of the students also worked with Cambodian family—Have you heard of OCAPICA?

KWON: Yeah.

NGUYEN: The Orange County Asian Pacific Islander Community Alliance. Yeah, so they worked with them. We also had Open Mic Night, where we organized an open mic with Common Ground. I don't know if you've heard of that group.

KWON: No. What kind of work do they do?

NGUYEN: Yeah, so Common Ground is an open mic group that's mainly focused on API communities, but they involve everyone. It happens every first Thursday of the month, and it's basically a space for people to come and talk about—they usually have a community spotlight, where they spotlight or highlight a community-based organization that's doing work. They usually have a theme, and it's very social justice oriented and a space for a lot of creative folks to be able to share their talents in music, art, spoken word, poetry. Yeah, so the students did a lot—mhhh?

KWON: Oh, no, no. Go ahead.

NGUYEN: Yeah, so just they basically came up with their own idea for what they wanted to do in the communities and on campus, so it was a way for them to really apply what they had learned.

KWON: You also mentioned a little bit about KGA and OCAPICA, but what's your involvement with them and with those community organizations?

7:55

NGUYEN: Yeah, so KGA—I'm mainly a supporter. I've been supporting them throughout the years, and I usually try to help out with their events by attending or donating money. We've been trying to get them to be more involved with CYWC, because a lot of the work that they're doing is very similar, and we've been trying to form some partnerships there between the two organizations.

With OCAPICA—I actually have a very long history with OCAPICA, I started out as one of the first interns at OCAPICA, when they first opened their doors—yeah, in 1997.

KWON: Wow.

NGUYEN: Yeah, a lot of the work that I did with Margie was in partnership with OCAPICA, and right now, I actually sit on the board of OCAPICA. And we recently got a big grant to work on youth programs, and that's a collaboration between Cal State Fullerton and OCAPICA. It's one of those organizations that I've been involved with since the beginning, and I do a lot of partnership work with them (inaudible).

KWON: Yeah, so it seems like you're pretty involved with community health work, but I was also wondering—because you're a professor and you're an academic—how you personally position your work within the larger, broader scope of the reproductive justice movement or API movement.

9:40

NGUYEN: Yeah, so I guess I'm not your typical community health professor in the sense that my appointment is through Asian American Studies. I don't have any formal training in that field necessarily, other than the fact that I've done a lot of work in the community with API organizations and folks around community health issues. When I was hired into Asian American Studies, they were looking for someone who had a lot of community work experience, so that they could basically interact with students on a more applied level and get students to be more connected with community issues and to work within the community. I became very aware of the political beginning of Asian American Studies and how these classes came about, and it was through a lot of mobilization and advocacy and organizing on the parts of students and community folks. And so I think I have the best of both worlds, in the sense that I am able to teach a lot of API students about social justice issues, and then my background is in public health, specifically around cancer and working with API communities. And so I get to expose them to what the applications can look like in the community around community health issues and what it means to be able to empower communities to take care of their own health, and also to affect policy and to create change not only through health education but also through a lot of advocacy around policy work. Yeah.

KWON: I don't know if I also asked you this question, but I was also wondering how you had initially gotten involved with NAPAWF?

12:00

NGUYEN: NAPAWF I had heard about them—I think it was doing work in the community. I stumbled upon their organization, and my first exposure was

at a conference that they had—gosh, I don't even remember how long ago that was. Maybe ten, fifteen years ago?

KWON: Was it towards the beginning of the organization?

NGUYEN: Yeah, yeah. I would say it was probably the second phase of the organization, when Kiran was the head of the organization. It was at their tenth anniversary conference at the—Where did they hold it? Was it LMU, Loyola Marymount? I forgot, but before that they also had a conference in, I think, Washington D.C. So it was basically through the conferences and the meetings that they had that I first got my exposure to NAPAWF. And it was just a really cool group of women, strong empowered, really fierce sisters coming together and learning about these issues and how important it is to get involved in policy and civic engagement work. Yeah, that was my first exposure was through—I believe it was a conference I attended. Yeah.

KWON: I'm kind of jumping around everywhere right now, but I just wanted to wrap up really quick. I don't think I also got a chance to ask you about the current health disparities that exist in API communities. Since that's kind of the core of your work, I was wondering if you could talk a little bit more about that.

13:45

NGUYEN: In terms of what the pertinent issues are, in my perspective?

KWON: Yes.

NGUYEN: I think probably one of the biggest issues is mental health. I think that's an area that still has a lot of stigma, regarding API communities particularly. A lot of people don't want to talk about it, because they don't quite know a lot of the mental health advancements that are going on. They still think it's something about "crazy people," right? If you have certain issues, mental health issues, and [are] seeking help for it, there's a lot of stigma around it, more so than, say, some of the more chronic diseases, like cancer. I think with a lot of education within the last few years, a lot of people are more aware and educated about those kinds of chronic diseases, and so that has helped a lot. But I think with the mental health field there's still a lot of stigma associated with certain mental health illnesses. And so I think that's a big big area that a lot of people still don't talk about.

Of course, sexuality and sexual health and reproductive justice is—especially for the younger folks—is an area that I think still needs a lot of work, [in] getting the younger students to be able to talk about these issues with their family members and their peers. I think there's still a lot of stigma associated around those areas as well. People are just embarrassed right to talk about these issues. Yeah.

And as far as the health disparities, I think a lot of times people think that Asian are healthy and we fare better than others, in terms of the model minority [myth], and that goes for health issues as well. I think often times, it discredits a lot of the problems and ignores a lot of the disparities that do exist, especially with, for example, the Pacific Islanders or the Southeast Asian groups that experience not only stigmas associated with these health problems but also the structural policy and institutional barriers—in terms of not being able to access services because of language problems or not being able to have health insurance to be able to pay for a lot of the services, not knowing where to go, not knowing to how to navigate the system.

A lot of the work that I've done in my research centers around health navigation, where you have certain community health navigators or peer lay health advocates that help people to learn about the system. Because it's very complicated figuring out how to use your health insurance to all the changes that are going on to get medication or things like Plan B or what's covered under what. And then also advocating for yourself, and if you get diagnosed with something, where do you go for services? And how do you get benefits? A lot of these things, it's very complicated [even] for someone who is very fluent in English, and if you can imagine not knowing the language and trying to wade through all these issues, it's very overwhelming. And so sometimes people just don't want to go in for a screening, because they think, Well if I get diagnosed with cancer, what are my options, right? I don't have money, I don't have treatment services available to me, so I would rather not know. And so a lot of the issues that people encounter have to do with institutional barriers and structural policy issues that we need to change as well, and that contributes to a lot of disparities, because API communities often don't get the funding that they need for programs, because we're often seen as a model minority and we don't have problems and so forth and so on. Yeah, so—there's no shortage of issues to work on.

KWON: Unfortunately. Maybe perhaps on a more positive note though, what do you think are still the strides that the Asian American reproductive justice [movement] needs to make, and what are some potential solutions or alternatives? What are some promising directions that the movement is taking?

18:45

NGUYEN: Well, I think it was really great to see NAPAWF collaborating with other organizations across racial, ethnic, gender lines, class lines. And I think more of that collaboration needs to happen, because when you hear from one voice in the community, it's not as strong as hearing from multiple communities and from millions and millions of different voices, right? A lot of these issues affect our communities along with other communities, and so I think that collaboration is really key. If you look at a lot of the funding that's coming out of the government, a lot of it focuses on

collaboration, because I think there's that recognition that it doesn't affect just one community in isolation, often times it affects a lot of communities, and what is effective and successful in one community can maybe applied to maybe other communities as well. Because a lot of times we're going through the same kinds of barriers and problems. And so I think working together and collaborating is really key in decreasing a lot of these disparities that exist. Yeah.

KWON: Well, that's all the questions I have, but did you have anything that maybe I didn't mention, but you want to mention as to put into the oral history?

20:26

NGUYEN: No, I think you pretty much covered everything with your questions. I'm really glad that you're focusing on this area.

KWON: No, it needs to be done. I couldn't find any literature on it, so I was like, "Never mind. I'll just go find it myself."

NGUYEN: (laughs) That's terrific. Yeah.

KWON: Well, thank you so much.

NGUYEN: I'm glad you—yeah, thank you, and let me know if you have any other questions later on. I'd be happy to help out with whatever I can.

KWON: Yeah, I will send you a legal release form, and you can sign that and then I'll give you an address to mail it back. Hopefully that'll take care of everything.

NGUYEN: Okay.

KWON: So I'll be in touch.

NGUYEN: Okay, sounds great.

KWON: All right. Thank you so much.

NGUYEN: Thank you.

KWON: Okay. Bye.

NGUYEN: Okay. Thank you, Juhee. Bye.

END OF INTERVIEW