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ANA NEWS

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MESSAGE FROM THE PRESIDENT

Dear ANA Family,

It was great seeing you at INS San Diego! I was reminded of how fun it was to connect with friends and meet colleagues the old-fashioned way: in person. Our annual meeting highlighted how much we have accomplished as an association— and our social hour reinforced how strong we have become as a community. In the next few years, our Executive Committee aims to create programs to build upon this great foundation we have inherited so that we can continue to serve the evolving needs of our ANA membership, the field of neuropsychology, and our colleagues worldwide.

We want to announce some exciting leadership transitions. Congratulations to Drs. Julia Chen, Chrissy Lee, Lisa Graves, and Neha Dexit for their nomination and acceptance for the Chair positions of the Advocacy, Education, Media, and Resource Committees, respectively. Thank you to Drs. Rowena Ng, Shehroo Pudumjee, Angeles Cheung, and Sara Chan for their leadership and contributions as past committee chairs. Our new leaders will join the current chairs of the Membership, Research, and Student Committees, Drs. Porrselvi AP, Elizabeth Choi, Preeti Sunderaraman, and Erin Kaseda, M.S., in our quarterly inter-committee meetings with the Executive Committee to discuss cross-committee collaborations. The Education and Research Committees will be collaborating on a research-focused mentorship program to launch soon!

Our three ANA task forces have been productive with meaningful activities for which we are so grateful.

The ANA's OPT Task Force, led by Drs. Doris Hong (Past Chair) and Kritika Nayar (Chair) was formed to support international trainees and professionals in clinical neuropsychology. International trainees from psychology doctoral programs are granted one year of work authorization (Optional Practical Training, [OPT]) after completing their doctoral degree, which for clinical neuropsychology trainees, poses a substantial barrier for those wishing to pursue a two-year post-doctoral fellowship. The task force has emerged as a leading group across psychology in raising awareness and advocating for tangible support for trainees and training programs.

The ANA's INS Taiwan Task Force, led by Drs. Daryl Fujii, Porrselvi AP, and Wen-Yu Cheng have been actively coordinating our academic presentations for the conference. Please stay tuned for updates on the specific topics and presentations for the INS 2023 Taiwan meeting. The Membership Committee has actively planned the Social Hour and materials for the ANA booth. Please mark your calendar for July 7th for our ANA-Taiwan Social. We'd love to see you there!

The ANA's International Liaison Task Force was recently formed to enhance our support for existing international members, expand our professional connections in Asia, and facilitate collaborations in education, clinical, and research activities where appropriate. With current members from India, Japan, Malaysia, Taiwan, and the UK, the task force will meet throughout the year to discuss strategies and recommendations on how the vision/mission of ANA can be enhanced to empower neuropsychologists of Asian descent worldwide.

It is an honor to begin my service as the third president of our Association. I am incredibly privileged to have the opportunity to collaborate with numerous passionate, skilled, and highly regarded colleagues who share the same objective of advancing the ANA's vision: to ensure the accessibility and provision of excellent, culturally sensitive neuropsychological services for all individuals of Asian descent. I value your feedback and ideas, so please feel free to reach out to me anytime at president@the-ana.org.

Sincerely,

Christopher Minh Nguyen, Ph.D.



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Featured Neuropsychologist: Farzin Irani, Ph.D., ABPP-CN

by Jas Chok, B.S.

In this issue, we look to Dr. Farzin Irani to share her career path, perspectives on the field, and mentorship.

Farzin Irani, Ph.D., ABPP-CN is a first-generation immigrant from India who is fluent in Gujarati and Hindi. She is a board-certified neuropsychologist whose background includes a Ph.D. from Drexel University, a pre-doctoral internship at Brown University, and post-doctoral fellowship at the University of Pennsylvania. She is currently active in private practice, teaching, writing, editing, and serving various local and national neuropsychology and cultural groups. She recently edited a clinical handbook that assembled case studies from across the world to increase understanding of cultural diversity in neuropsychology. She recently finished her term as Secretary for ANA.

Dr. Irani, what motivated you to be a neuropsychologist? How did you get into this career?

Thank you for that question. My path to neuropsychology was not a straight one. Like many people, it started in a Master's program. I did a Master's in Counseling before I started my doctoral program, and I wanted to work with schools and the community as a counselor.

I had never heard of neuropsychology until I went to work as a research coordinator at the University of Pennsylvania in the Department of Neuropsychiatry. There, neuropsychologists worked on a team doing a variety of work ranging from neuroimaging to computerized neuropsychological testing. That is where I first became exposed to the field of neuropsychology. While I was there, I volunteered to observe a brain autopsy, and my mind was blown; I got to see this 3-pound organ in slices and began to put structural and functional connections together. I said to myself, "Wow, this organ is impacting so much of what we do and how we behave, think, and feel." That is where I was hooked and how I started on my path toward neuropsychology.

What cultures do you identify with?

I was born in India and immigrated to the West as a preteen. I consider myself bicultural because I value my own Indian origins and have also integrated into the mainstream Western culture. I speak Gujarati and Hindi and come from a small religious minority community in India called Zoroastrians or Parsis. My positionality is also influenced by my reduced hearing and other aspects of who I am. I am a cis-woman, and



at this point in my life, I identify as being well-educated, mid-career, and being privileged enough to own a private practice. However, that was not true earlier in my life because I certainly did have barriers related to finances, language, and the immigrant experience, but, at this point, this is where I am at.

Looking back, how has your cross-cultural journey unfolded throughout your life and career?

Cross-culturally I have had many lived experiences that led to where I am at now in terms of

A lot of the roots were placed during my Master's program. I remember talking very readily about culture and my identity and processing it. We were talking about how we interact with our worlds and all the intersectionality that is present. As a new immigrant, when I first came here, I did not know much about racism. This is not to say that there is no casteism, heterosexism, patriarchy, or colorism in India because all of that is there, but I just did not know about racism. Therefore, as part of my training, I learned about how racialized society is in the United States; this informed my understanding of my positionality with the world as it comes to each of my identities.

When I got to the doctoral program in the early 2000s, I was a little disappointed that we were not talking about culture. Back then, we were not talking about culture and neuropsychology

and people of color who have the aptitude and interest in scientific research but do not make it for many structural reasons or barriers that are in place. This includes funding barriers, productivity-based expectations, or just being in a place where there are a lot of balls to juggle personally and professionally. Then it comes down to what are the most important balls that need to be juggled? For me when my children were young, it was important for me to be with them, so I made the hard choice to leave academia and go into full-time private practice for that reason. But I could not leave easily. Therefore, now I keep involved with it. I do a lot of teaching, research, and service, in addition to clinical and administrative work in my practice. I continue to try and stay involved in ways that are fulfilling.

"We are now having professional conversations about justice, diversity, equity, and inclusion - in way I have never seen before. It is now at the forefront of our dialogues in our field."

like we do now. It was all about brains.

Regardless, I remember my supervisors and myself struggling with what to do with somebody who didn't fit the mainstream mold. What do you do? We simply managed with whatever tools we had at the time when it came to tests or norms or even just thinking about what things were important. I remember the very first time I saw the 'pretzel' on the Boston Naming Test. I was like there is no way me coming from India at that time would have known what a pretzel is. Aspects of who we are, are always present in everything we do professionally and personally.

What were some of your expectations for your career path when you first started this process?

I was not expecting to be in mid-career, in private practice, and doing so much service related to DEI work — that was not my planned career trajectory. I was supposed to be in an R1 institution doing neuroimaging research. That was my expectation earlier on.

And how did you get there?

When I started in the field, I did go down that "publish or perish route." I went down the extensive teaching and research path, but along the way, I became part of that leaky pipeline in academia when you have women

What might you consider doing differently based on what you learned throughout your career?

One of the things I have learned through this career path is that we need to be flexible in terms of our expectations for ourselves, other people's expectations of ourselves, and what life throws our way. Having that flexibility gets you to a place where, at least for me, it can be extremely fulfilling. I am happier now from a career perspective than ever because I am now at a place where it is value-based. I am doing things that are rooted in meeting my personal and professional values and needs.

Additionally, I would tell other trainees to be reflective as they go through this path. It can be easy to get into a "go go go" mode where you are going through practicum, to internship, to post-doc, and then to board certification or whatever your first job is. It can be very easy to get into that mode, but it is important to pause and reflect on whether the things you are doing are consistent with your values and giving you fulfillment. Some of us feel happy doing one thing, whereas some of us need a lot more to keep us

fully fulfilled career-wise, and that is okay too.

What has been the biggest change you have seen in relation to cultural neuropsychology?

Since the public murder of George Floyd and so many others, racial injustices have been unveiled much more publicly. We are now having professional conversations about justice, diversity, equity, and inclusion — in ways I have never seen before. It is now at the forefront of our dialogues in our field. That is an awesome place to be because these are dialogues that people have been trying to have for a long time.

We are definitely having more national conversations about inequities and racism and all the other -isms that we are affected by. We have also now reached a place where we have professional cultural identity groups. The

Hispanic Neuropsychological Society (HNS) has been around for a while. They were here way before any of the others. ANA was the second cultural identity group that entered the field, then the Society for Black Neuropsychology and the Queer Neuropsychological Society. This has been transformational in many ways for us to have these spaces created to meet other people and create a community so that we can learn, advocate, grow together, and support. It is a game-changer. It has been really important and decentered how we used to think about things — away from the dominant culture and towards centering all of our communities.

In contrast, what and in which direction do you think that we as a field need to continue working on to improve?

We have started conversations that are important for our field, but we have yet to reach a place where DEI is integrated in a transformational way, meaning it is not present in everything we do. Recently, I heard Dr. Antonio Puente say, "There is no such thing as cultural neuropsychology. Neuropsychology is cultural." That was something that stuck with me.

We need to move away from this siloing of certain people doing culturally centered work.

Not everybody is doing it, so what ends up happening when you have just a few people doing this work is that you end up with invisible labor. They used to call it the minority tax, which is when a few people, usually BIPOC individuals, are doing this extra work and not getting credit for it. Our field needs to do better by advocating for institutional recognition of this invisible work that many people are doing and for everybody to take care of each other.

What motivated you to seek board certification in neuropsychology?

There is no better way to demonstrate competence to yourself and others than by going through a process that allows you to reflect on your knowledge base and skill set when it comes to neuropsychology. I always had board certification in the back of my mind. I never thought that I would not receive it, so it was almost like I did not see my training as being complete until I finished getting board certified.

Do you have any tips or words of wisdom you would like to share with those who are engaging (or planning to engage) in this process?

Continue to engage and plan to engage in the process. It is a very rewarding process. You will learn a lot about what you know and do not know as part of that process. If you have a setback, do not give up. Seek out mentorship and supports along the way to get you through. Also, recognize that preparing for boards, studying for exams, and preparing your materials, will require extra time. So, give yourself that time and commit to the process. It will increase your confidence in your skills as a neuropsychologist and practice areas. There is also another incentive to be board certified — it increases your value and recognition to the public since you have gone through a process where your peers have vetted you.

You have a culturally informed approach in your practice. What advice can you give to those aiming towards this approach?

One of the things I have learned as I was working on developing the resources is that there are four foundations to providing culturally informed, aware, sensitive, and competent services.

First, you got to have knowledge. You need to have the appropriate cultural knowledge about the communities you are working with. You can get that knowledge by educating yourself. Many resources are available to do that, but also immerse yourself in communities, talking to people from the communities, being on listservs, and reading the literature related to those communities. The knowledge piece also includes Dr. Daryl Fuji's ECLECTIC model.

All of those variables, such as education, culture, language, and testing situations, are important to consider as part of an evaluation. It is also important to know the culture of neuropsychology at a given time. For example, the pandemic and demographic changes on the national and international levels have impacted our understanding of health inequities and gotten us closer in ways we were not before.

The second piece is awareness. This is coming from Dr. Stanley Sue's original model around cultural competence. Awareness includes awareness of yourself and other people. Self-awareness is being aware of your own implicit biases. Dr. Rex Swanda calls it hot spots, soft spots, blind spots or spots of unawareness. The idea is that you reflect on those 'spots.' Trainees have a beautiful opportunity during supervision to take the time to understand those spots and what areas they have privilege in that creates power in the work that we do but are unaware of. In addition, awareness includes being aware of how you impact other people. For example, microaggressions that people experience on a day-to-day basis. Dr. Anita Hamilton has talked about this. She spoke about these high rates of microaggressions in neuropsychology trainees and neuropsychologists that create harm. Therefore, we need to be aware of our impact on other people.

Third, we need to develop the skills that are needed for doing culturally informed practice. Drs. Orlando Sánchez and Ted Judd have laid out 13 competencies that are needed, including, what skills you need when working with an interpreter.

Last, the fourth piece that I and others have argued for includes the idea that we need to do more advocacy, and ANA is a champion at recognizing the importance of advocacy. Our Advocacy Committee is splendid and does an amazing job at recognizing and having a pulse on the important aspect of what is happening in our social world that impacts neuropsychologists, trainees, and those we are serving. We need to be willing to act as social change agents. All four of these pieces are necessary to provide culturally informed evaluations or services to those we are working with.

You have such an impressive background, career trajectory, and are actively involved in numerous things (e.g., clinical practice, teaching, mentorship, scholarship, service, and advocacy in neuropsychology) while serving in leadership positions. How did you get involved in all of it? What pieces of advice do you have for individuals who want to do all these things?

My first advice is to have a nice stack of wine to enjoy with friends and family. Kidding aside,

it is important for us to do things that fuel us. You must do things that energize you and are consistent with your value system.

I do not find this work to be burdensome because when I do this work — I am talking about the invisible labor work, the stuff that we do not get paid for, the stuff that we get passionate about — I love it. I love learning about other cultures. I love traveling to other countries and sharing that knowledge, trying to understand, and trying to have an impact in a positive way. We do not have to have a big impact. We just need a little ripple. You can drop a little pebble in the water and create a ripple effect down the road. Find things that you value, that give you energy. I will also add that a lot of this I am able to do now in the mid-career stage because my children are older, and I am settled in my practice. It is doing well. I know what I want now.

Secondly, do not try to do a lot if you are in an early career phase because that can set you up for stumbling along the way. Instead, do the things that give you joy. Do not do busy work for the sake of doing it; do things that bring you joy and are consistent with what you want to do, and say no if you cannot.

The power imbalance is definitely there in early career and it can be difficult for early career psychologists to say no, but with support and good reasons that you can articulate to whoever is asking, you can always say no. Nobody can make you do anything that you do not want. It is important to do that from a self-care perspective for yourself and your longevity in the field.

How have you worked in incorporating self-care into your life? What does it look like these days?

I have a work hard, play hard philosophy. I work very hard when I am at work, and when I am not at work, I do not. My weekends and evenings usually, for the most part, are mine, my family's, and my friends. At this point in my career, I can say that it does not intrude into my day-to-day. My self-care has been my time with my family, watching Netflix, enjoying different foods and wine, going for massages, and all the other privileged stuff that I can do now. I also enjoy reading, hiking, and traveling, which fuel and rejuvenate me. I also do mindfulness, yoga, and exercise regularly. All of that goes a long way, and to be honest with you, sometimes self-care is also not thinking about a report and thinking about an ANA secretarial role instead.

You also were an editor for a book, Cultural Diversity in Neuropsychological Assessment, what was it like to engage in this process?

It was amazing from top to bottom. I got to meet a lot of international global

neuropsychologists through this process, who have become good colleagues and friends, and introduced a lot of new perspectives to me and others. Before I started my journey with this book, one of the existing schemas I had tucked away in my head was that it was a "challenge to work with people like you and me" because there are not enough norms out there and we just do not know what to do.

One of the things I found really refreshing in this approach, where we centered the voices of those who are serving culturally and ethnically diverse communities throughout the world, was that it is not a challenge to work with us, it is doable. There are people who have developed a bunch of resources. There are norms that have been developed that are available. If you look for them, they are there.

We still have a long way to go to continue to develop our toolkits. We are not fully where we need to be, but there are resources available. This was something impactful for me because I learned a lot about how other people are doing neuropsychology in different parts of the world where there are different cultures of neuropsychology too. It was mind-blowing and helped me grow. I hope it helps other people also grow through the process of reading what is in the file drawers of other people throughout the world — since this is a case study book. We tried to make it also very reader friendly, and the point was to help people learn about each other.

What would you like others who are starting graduate school to know about the most rewarding and fulfilling part of the work you do?

I would say that neuropsychology can be what you want it to be. It is amazingly flexible, so you can choose to do clinical work where you can really see the sexiness of brains, geek out on all the neuroanatomy and psychometrics, and all that fun stuff to help impact the lives of people in positive ways. You can choose to do teaching if that is what you want to do, impart your knowledge to others. You can choose to do research, sharing knowledge about all kinds of things that are really interesting to study. You can choose to do service, do a lot of giving back to the field and the community. You can do advocacy that can change the culture at macro system levels, as well as have an immediate impact on the individuals, systems, and organizations that you are working with. It is impactful work, and it could be really fun to do. You can make it whatever you want to make it. There is no one path that needs to be taken at all.

What are some facts your colleagues and students would be surprised to learn about you?

I do not know how surprising it would be, but my family and I travel a lot. We have traveled to almost every continent. We have an app that tracks where we have traveled, and we have got over 30 countries under our belt. The only continents we have yet to go to are Antarctica and Australia. The other thing I will share is if you have not met me in person, I am actually really short. I am less than five feet. I am tiny in person, so I love all this virtual stuff because nobody knows.

And the other thing I think is important for trainees to hear, was that I was rejected from doctoral programs twice before I finally got into my dream program. So never give up, you land where you need to land eventually. I believe that wherever you go, wherever you end up in your path is where you are supposed to be.

Do you have any tips or words of wisdom for current graduate students and mentors?

The main message would be to be self-reflective along the way. Take advantage of being in training. You do not have to know it all right now. The advantage of being in training is that you are there to learn. So learn, ask questions, challenge, and share your experiences. We are in a transition zone where we need to be doing some training of the trainers when it comes to DEI work. We are not there yet, so it is not on trainees to be educating, and it is not the responsibility of their supervisors or mentors either. However, you can share your truths as you are experiencing them and use the supports that organizations like ANA and all of the other sister organizations are providing to empower you to speak up and pursue paths that feel gratifying to you. There are so many opportunities out there at this point.

"The ocean is wide. You can drink as much of it as you want." Do it. Take the sips that you need from a value-based perspective. Do things that are consistent with what fulfills you.

How can ANA support you?

ANA itself is a support. I give hats off to Drs. Daryl Fujii, Nick Thaler, Mimi Wong, and Lauren Mai, who conceptualized and had the foresight to create ANA. The existence of the organization is support enough for me.

Are there any suggestions you would like to share with our early and mid-career readers?

Early career, do the things that help you advance in your career, and keep an eye out for things that are gratifying to you and get rid of the things that are not. Mid-career, we are at a place where we can do more to serve and

give back than we are able to do in early career when we are trying to juggle a lot more. Mid-career comes with its own challenges as well but, at least for me, my role in mid-career has been much more about giving back to the field. So, if those opportunities are present, take them and provide mentorship, sponsorship, and support to those coming through the pipeline.

Research Highlights

by Jessie Li, M.A., Jas Chok, B.S., and Jie Chang, M.A.

Readers will find direct links to the respective articles by clicking on article titles.

1. Examining memory performance in body dysmorphic disorder (BDD): A comparison study with obsessive compulsive disorder (OCD)

Both body dysmorphic disorder (BDD) and obsessive-compulsive disorder's (OCD) clinical profile can be associated with significant neuropsychological or cognitive deficits. Compared to BDD, OCD has extensive research on cognitive functioning; as such, there is a need for increased research examining the effect of BDD on memory.

To learn about BDD's impact on memory, the authors directly compared memory functioning among a healthy control group (n = 26), patients with BDD (n = 19), and patients with OCD (n = 15) in Tehran, Iran. The following neuropsychological tests were administered to examine the patient's cognitive functioning: Rey-Osterrieth Complex Figure Test; Logical Memory, Verbal Paired Association, Digit Span, and Spatial Span subtests from the Wechsler Memory Scale-III.

Results from this study suggested that participants with BDD had more severe memory deficits relative to the healthy controls and OCD group. While BDD patients demonstrated significantly poorer performance on spatial working memory, compared to the



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control and OCD groups, both BDD and OCD groups showed similar verbal memory challenges, specifically on Logical Memory. Additionally, BDD patients displayed an impaired ability in working memory, specifically, the ability to hold and manipulate verbal and spatial information simultaneously.

The findings theorize the underlying cognitive challenges that might contribute to BDD's presentation and note possible areas to target in treatment through cognitive training. Further research focusing on different areas of cognitive functioning in BDD may aid in developing interventions for various memory deficits, such as utilizing organizational strategies to reduce repetitive behaviors like mirror-checking or hyperfixation on minor details. Ultimately, by targeting memory functioning, clinical symptoms may also be ameliorated simultaneously.

2. Effects of language and acculturation on neurocognitive performance of Japanese Americans

Given the relative shortage of guidance on interpreting neuropsychological performance data of Japanese Americans, the present study examined the effects of language and acculturation in neuropsychological performances of 100 Japanese Americans aged 45 and above. Half of the participants identified as being Japanese-dominant in their language abilities, and the other half English-dominant. Cognitive abilities investigated include naming (verbal and olfactory), language fluency, and learning and memory (verbal, visual and



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Research Highlights

(Continued)

neuropsychological performance in Japanese American examinees.

3. Study of neuropsychological deficits in late onset depression

The current study sought to examine neuropsychological performance in older adults with late-onset depression (LOD), and compared performance to a healthy control (HC) group. Participants with a Montgomery-Asberg Depression Rating Scale (MADRS) score of five or less, with presence of psychotic symptoms, catatonia, suicidal risk requiring electroconvulsive therapy (ECT) or a Hindi Mental Status Examination (HMSE) score of less than 24 were excluded from the study. Participants with decompensated or severe medical illnesses and severe visual or hearing impairment were also excluded from the study. The sample included an LOD group of 76 older adults with onset of mild or moderate depression (as defined by DSM-IV-TR) after age 50, and an HC group of 76 older adults matched for age, gender, and education, with no history of psychiatric illness.

Both groups were administered the Geriatric Depression Scale (GDS), MADRS, Hamilton Anxiety Scale (HAS), HMSE, and the NIMHANS Neuropsychological Battery for Elderly (NNBE). Researchers explored common vascular risk factors and found a statistically

significant proportion of participants with diabetes mellitus (DM) in the LOD group but no significant differences were found for hypertension. No significant differences were present in regard to age, sex, and education level between groups. On cognitive testing, results indicated diffuse deficits including attention, executive function, visuo-spatial skills, and verbal and visual memory in the LOD group. Recognition memory and logical memory were relatively well preserved in the LOD group in comparison to HC. Researchers also found a negative impact of depression severity on attention and executive functions.

Limitations of the current study include inability to establish cognitive deficits as a direct cause of depression, due to most LOD patients taking psychotropics at the time of assessment. Researchers also acknowledge that white matter hyperintensities and medial temporal atrophy impact cognitive functioning, and how the absence of this information is limiting. The participants included in this study were representative of a hospital sample, and thus the findings cannot be generalized to community settings. Researchers emphasized the need for routine assessment of cognitive functioning in older adults with depression, and encouraged future research to consider medication effects and screening for amyloid biomarkers to exclude Alzheimer's pathology in future samples.

olfactory modalities).

The English-dominant group performed better than the Japanese-dominant group on naming tests. Acculturation level explained group differences in odor and verbal naming, and language dominance explained additional variance beyond acculturation on verbal naming as measured by the Boston Naming Test-2 (BNT-2). The English-dominant group was better at identifying odours common to American culture. Acculturation level predicted better performance in verbal and odor learning for the English-dominant group. However, no group difference was observed for visual learning as measured by the Brief Visuospatial Memory Test-Revised (BVMT-R). Acculturation level also explained group differences in verbal fluency performance.

Researchers concluded that dominant language is a significant predictor of neuropsychological performance in Japanese Americans. In most instances, the performance difference could be accounted for by acculturation level, except in verbal naming. The BVMT-R emerged as minimally affected by language dominance in this population, whereas BNT-2 was susceptible to influences of both acculturation and language. This study was limited by the lack of data on participants' cognitive performance in Japanese. Finally, the researchers recommended considering generational status, education and immigration history when interpreting



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ANA Leadership Transitions

by Jessie Li, M.A.

The ANA Executive Board and Committees have recently undergone leadership transitions. We would like to express our deepest gratitude and thanks to our former chairs for their service, and extend a warm welcome to the incoming chairs!

Executive Board

Former President: Nicholas Thaler, Ph.D., ABPP-CN
New President: Christopher Nguyen, Ph.D.

Former Secretary: Farzin Irani, Ph.D., ABPP-CN
New Secretary: Rowena Ng, Ph.D.

Former Treasurer: Michelle Madore, Ph.D.
New Treasurer: Shehroo Pudumjee, Ph.D.

Former Member-At-Large: Alexander Tan, Ph.D.
New Member-At-Large: Yue Doris Hong, Psy.D. & Christina Wong, Ph.D.

Former Student Representative: Jennifer Lee, Ph.D.
New Student Representative: Erin Kaseda, M.S.

Education Committee

Former Co-Chairs: Angeles Cheung, Ph.D., ABPP & Michelle Chen, Ph.D.
Incoming Chair: Chrissy Jisun Lee, Ph.D.

Resources Committee

Former Chair: Jasdeep Hundal, Psy.D., ABPP-CN
Incoming Chair: Neha Dixit, Ph.D.

Advocacy Committee

Former Co-Chairs: Rowena Ng, Ph.D. & Shehroo Pudumjee, Ph.D.
Incoming Chair: Julia Chen, Ph.D.

Media Committee

Former Chair: Sara Chan, Psy.D.
Incoming Chair: Lisa Graves, Ph.D.

OPT Task Force

Former Chair: Yue Doris Hong, Psy.D.
Incoming Chair: Kritika Nayar, Ph.D.

Committee News & Highlights

by Ivy Cho, M.A.

In the spirit of building a strong community and desire to provide a space for members to learn and be empowered to participate more with ANA, we will be including a section highlighting updates from each ANA committee. We hope to use this section as a way to facilitate information and participation in our ANS community, so that everyone has access to a seat at the table.

Education Committee

The ANA Education Committee welcomes all inquiries at education@the-ana.org.

Description your committees' mission, duties, and how to join:

The Asian Neuropsychological Association (ANA) Education Subcommittee seeks to counter the underrepresentation of Asian individuals in the field of neuropsychology by providing education to the communities we serve and mentorship to the next generation of neuropsychologists.

New committee chair and members:

Chrissy Lee, PhD (Chair)
Brian Mizuki, PsyD, ABPP-CN
Winnie Ng, MA
Martin Woon, PhD, ABPP-CN
Jerrold Yeo, PhD

Updates about ongoing projects/initiatives:

ANA Mentorship Program: Professional members mentoring graduate-level students members.

- Expansion of Mentorship Program to: ABPP Mentorship to professionals

Apply for the ANA Mentorship Program Mentors: [HERE](#)
Mentees: [HERE](#)

Webinar Series: ANA Education Committee is dedicated to continue monthly programming for ANA members on neuropsychological, cultural, and supervision/training related topics.

- February and March 2023 Topic: Two part series - Dr. Angeles Cheung (previous Education Committee Chair) discusses private practice
- April and May 2023: Two part series - Dr. Chrissy Lee (new chair) Culturally-grounded supervision

Office Hours: On hold due to minimal engagement. Focus group questionnaires will be distributed in the upcoming quarter to re-assess need and potential topics of discussion.

Resource updates:

Webinars and slides are available to members on the website, see Education Tab.

Recruitment notices:

None at this time.

Student Committee

Description your committees' mission, duties, and how to join:

The purpose of the ANA Student Committee is to create a central group led by trainees (students, interns, and postdoctoral fellows) under the auspice of the larger ANA organization in order to increase trainee membership, participation, and collaboration; to keep ANA informed of trainee needs within ANA and the field of neuropsychology; and to create an interactive environment that enriches the relationship between trainees and current professionals. The mission of the ANA Student Committee is to: a) foster a community for neuropsychology trainees of Asian descent or trainees working with individuals of Asian descent; b) promote the professional development, cultural competency, and international collaboration of ANA trainees; and c) enhance ANA's mission to ensure the accessibility and provision of excellent, culturally sensitive neuropsychological services for individuals of Asian descent with trainee-led initiatives. The ANA Student Committee has established many initiatives, including our monthly Community Corner bringing you ANA committee updates, trainee resources, and discussions. Our monthly Research Digest showcases the latest in research relevant to ANA's mission. We hold regular events to provide additional resources, networking opportunities, and space for trainees to connect and discuss their experiences, often in collaboration with trainees from the Society for Black Neuropsychology and the Hispanic Neuropsychological Society. Finally, the committee has developed a peer mentorship program, including a resource drive for mentors and mentees. You can also see updates and content relevant to our students on social media such as Twitter (@AsianNeuropsych) and the ANA Facebook. Connect with us through our email: anastudentcommittee@gmail.com. Interested in getting involved? The Student Committee's Peer Mentor Program is currently recruiting for new mentors and mentees! The Student Committee will also be recruiting for 3 new members in Summer 2023.

INS Taiwan Meeting

by Maiko Sakamoto, Ph.D.

The INS Taiwan Meeting is going to be held in Taipei, Taiwan, as our first ever meeting in East Asia, in association with the Taiwan Association of Neuropsychological Development and Mental Rehabilitation (TANDMR).

The conference will be held between July 6 and 8, 2023, and we are having a special city tour on July 9. The program can be checked [here](#).

Keynote Speakers:

Dr. Jonathan Evans, Ph.D., Professor

Keynote Speech 1: "Grand Challenges for Global Neuropsychology"

Dr. Masaru Mimura, Ph.D., Professor

Keynote Speech 2: "Early Detection of MCI and Dementia"

Dr. Akira Midorikawa, Ph.D., Professor

Keynote Speech 3: "Paradoxical functional facilitation in various brain injuries and diseases"

Dr. Michael Chee Wei Liang, Ph.D., Professor

Keynote Speech 4: "Napping: A Contemporary Review of an Age Old Practice"

Dr. Rumi Tanemura, Ph.D., Professor

Keynote Speech 5: "Friendly assistive technology for patients with cognitive impairments"

Dr. Vicki Anderson, Ph.D., FAPS, FASSA, FAAHMS, FASSBI

Keynote Speech 6: "Clinical Research in Child Brain Injury: Generating Knowledge, Implementing Evidence, Improving Outcomes"

CE Courses:

Min-Fang Kuo, Ph.D. "The principles of transcranial direct current stimulation (tDCS) and apply tDCS protocols for clinical treatment"

Nara Andrade, Ph.D., Professor "Social Cognition in Pediatric Neuropsychology"

Alberto Luis Fernández, Ph.D., Professor "Bias and equivalence in cross-cultural assessment"

Melissa Lamar, Ph.D., Professor "Exploring the Past, Present, and Future of Cerebrovascular Disease & Cognitive Aging"

Pre-Opening Symposium:

"Interventional Neuromodulation in Psychiatric and Neurologic Conditions"

Presenters:

Shawn McClintock, Ph.D. "The neurocognitive effects of magnetic seizure therapy in the treatment of psychiatric illnesses"

Benjamin M. Hampstead, Ph.D., ABPP-CN "Transcranial direct current stimulation across the aging-dementia continuum"

Michael A. Nitsche, M.D. "Medication effects on stimulation-induced Neuromodulation"

Our own ANA members are also presenting:

"Asian Neuropsychology in the U.S.: Current State and Future Development"

Discussant: Daryl Fujii, Ph.D.

Chair: Chris Nguyen, Ph.D.

Presenters:

A.P. Porrsvi, Ph.D. "Developing a collaborative framework to support neuropsychology training and knowledge exchange for psychologists of South Asian descent"

Bao Chan Tran, PsyD "Neuropsychology of Vietnamese, Vietnamese Americans, Vietnamese Australians: Current Practices and Future Directions"

Vigneswaran Veeramuthu, M.Ed. Psych "Culturally- and Linguistically-Sensitive Intraoperative Tasks for Malaysians"

Wen-Yu Cheng, PsyD "Enhancing Collaboration between Psychologists of Taiwanese Descent in Taiwan and the US for Neuropsychological Training and Practice"

"Multicultural Neuropsychological Approaches to Test Development, Adaptation, and Data Collection"

Discussant: Chris Nguyen, Ph.D.

Chair: Jonathan Evans, Ph.D.

Chris Nguyen, Ph.D. "Neuropsychological Commentary Applications of the International Test Commission's (ITC) Guidelines for Translating and Adapting Tests"

Jonathan Evans, Ph.D. "Reducing cultural and linguistic bias in test adaptation: Lessons learned from adapting the Addenbrooke's Cognitive Examination III for the Bengali-speaking population in India"

A.P. Porrsvi, Ph.D. "Lessons from the Development of a Computer-Assisted Test Battery for Resource Optimization"

Truc Tran Thanh Nguyen, B.S. "Normative data for common neuropsychological tests to evaluate dementia in cognitively normal Vietnamese people"

Bob Bilder, Ph.D. "Towards and International Neuropsychology Network: Lessons Learned from the National Neuropsychology Network"



We hope to create a conference where researchers from around the world can network and promote the further development of neuropsychological research, especially in Asian countries. We have diverse topics, and cutting-edge studies will be presented by well-established speakers from all over the world. We are especially thrilled to have Drs. Min-Fang Kuo and Nitsche who are world-renowned experts in neuromodulation, such as transcranial direct current stimulation (tDCS).

We look forward to seeing you at the INS Taiwan meeting!

Community News

Announcements & Recognition

Preeti Sunderaraman, Ph.D. published an article with the ECNPC committee, on which she was the Science Officer, and recently retired from this position. Dr. Sunderaraman's **publication can be found here**. Congratulations, Dr. Sunderaraman!

The Advocacy Committee recently published an article about continuing education in diversity and multicultural factors. The **publication can be found here**. Congratulations, Dr. Ng, Dr. Pudumjee, Ms. Aratsu, Dr. Chen, Ms. Do, Dr. Hong, Ms. Lanza-Gregory, Dr. Miao, Dr. Nguyen, and Dr. Wong!



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Coming soon: ANA Merchandise

ANA will soon have official merchandise for purchase! The ordering system will be launched in celebration of AANHPI heritage month, and beyond!