

PPIA Rewsletter

End of 2013 Edition

Send correspondence to: Pacific Northwest Ilocandia Association

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501-(C)3 Non-Profit Organization

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This Newsletter is published as a service to the PNIA members. All opinions and statements appearing within the Newsletter are those of the writers and are in no way to be construed as statements by PNIA or its officers. We encourage every member to participate in writing articles. Please write them in WORD document and email them to: rpadaca@msn.com.

Happy New Year!

~EVENTS SCHEDULES~

<u>Click here</u> for schedules of events, meetings and activities.

~REMINDER~

Please continue to bring nonperishable food items for the food bank, and warm jackets and blankets for the homeless whenever you come to the PNIA Center



President's Corner

In less than a day, the year 2013 will come to an end. What a year it has been for PNIA. In this year's review, we can all look back and congratulate each one of us for a job well done. The People Now In Action team has made PNIA the powerful and successful organization it is today. I give my most sincere and unending gratitude to all the officers, members, families, and to our very generous and loyal supporters.

There are numerous activities that PNIA was involved in this year. Here are some of the significant highlights in summary:

- 1. One biggest accomplishment this is the first year that PNIA is mortgage-free.
- 2. Eighteen more Balikbayan boxes were shipped in January. A generator was bought with

donations collected when CDR. Don Biadog, Philippine Missionaries Doyle and Linda Moore came to Center for Mission Night celebration. It was also shipped to the Philippines.

- 3. There were at least three Outreach programs at the *Military* Bases, Chaplain's Disaster Preparedness Training, and Marriage Encounter Seminar that our volunteers assisted in lunch. During serving National Breakfast on February 14, PNIA was recognized for our volunteer work with the Military servicemen and their families.
- 4. The acoustic ceiling tiles in the dining room were finally installed in March.
- 5. The construction of the back yard cooking shed has been completed. Both projects were

done under the direction of Charlie Romine and with the help of hardworking and skilled PNIA members.

6. During the Bataan Park Celebration in April, some of our members assisted the Habitat for Humanity group in sprucing up the park.



Alex Laigo, Rudy Nartea and Bob Meria raking the beauty bark during the Bataan Park celebration and beautification.

7. Another very successful fundraiser was the Fiesta Ilocandia chaired by Dave Allfrey. The Boutique chaired by

Jeanne Raffels was an added bonus. This is one way of showcasing the talents and skills of our members.

8. This year, the Golf Tournament chaired by Bob Meria had the most participation so far.

9. The commitment of four Adopt-A-Highway pickups was accomplished rain or shine.

10. Though PNIA opt not to have a Whaling Days' concession stand, we participated in the parade.

11. The Grab Plants Nursery fundraiser chaired by Tita Nartea also was a great hit. Not only did PNIA earn some money, the members also took advantage of the special discounts on plants and landscaping materials.

12. The PNIA Family and Friends picnic at the Center had the most attendance over the past years. The Korean Women's Association also came over to join us and acquaint us of the services they can offer to the community.

13. The Sewing Forum headed by Jeanne Raffels continues to amaze us with their skills. They have gone on to bigger and more complicated projects — aprons, designer bags, quilts, baby things, etc.

14. The monthly Soup Night managed by Pat Allfrey was restarted. This included the serving of dinners to the homeless kids at the Oasis Teen Shelter. Pat Allfrey and Bob Meria do most of the preparations.

15. The Panera Bread Donation Program was started this year. The Knights of Columbus, PNIA, and GFC (Grace Fellowship Community) share the distribution services to the Marines in Bangor, Salvation Army, St. Vincent de Paul, different shelters, and food banks.

16. Managed a concession stand during the Kenny Chesney concert in June.

17. Got the contract from the new management to work at the concession stand during Seahawks football games in Seattle. Thanks for Roy Padaca's follow-up.



Rudy Nartea sorting Panera bake goods for distribution.

18. The Computer, Hula Dance and Guamanian Classes are ongoing. The TOPS (Take Off Pounds Sensibly) started monthly meetings at the Center. There were several renters of the Center as well which included the BNP group, weddings, and birthday parties.

19. Every Monday, Bible Study led by Pastor Bart also began this year. Everyone is always welcome to join the class.

20. The Christmas Party chaired by Pat Allfrey and Cindy Angeles was very well attended. Everybody had a good time. An added attraction was the dance performance of the Hawaiian Dance group of Marie Luke.

This year, let us remember fondly, our very dear friend, Sal Quitevis who has left us for a better place. He and Olive are very staunch and generous members of PNIA. We are all missing him a lot. Let us also say a prayer for our former members Manong Fel Erfe, Frank Bautista, and Manong Lino Floresca.

One important thing I would like to note. On November 8, Haiyan, categorized as the strongest tropical cyclone on record at the Weather Bureau, landed in Levte. Philippines. It had winds at 195 MPH. We all know what happened. The devastation caused by Haiyan was staggering. A lot of us wanted to help, but don't exactly know how we would consolidate all our efforts and decide where we should channel the help that can be mustered. This dilemma was answered when CDR Biadog, on leave from overseas to visit his son who had a surgical procedure done at St. Anthony Hospital in Tacoma. He had contacted the Kitsap Sun Newspaper and suggested to them to get in touch with PNIA. They did and we identify were able to organization as a contact point to receive and channel the donations to a deserving contact that we had been dealing with in our efforts to help the needy in the Philippines. The resulting newspaper write-up helped kick off our fund raising effort. Our first donation was received at the center on Nov 13 from Alice H. Durrie of Tahuya, WA. Added to the PNIA's donation are contributions from Dave & Pat Allfrey, Manny & Michelle Abutin, Mel & Cindy Angeles, Roger & Lita Elpedes, Jim & Lita Guray, W.C. & T.L. Looney, Bob & Susie Meria, Leo & Aida Monis, Tita Nartea, John & Judy Seay, Larry & Joy

Silverthorn, Ed & Denia Tacardon, and CDR Ronald Waddell. The money collected was sent to the BMA Missions, in care of Pastor Doyle Moore in the Philippines. All contributors will receive a personal thank you from me. A copy of the letter of acknowledgement and the disposition of funds from the recipient will also be sent to you as soon as I get it. God bless your kindness and generous hearts.

I hope every one of you had a very MERRY CHRISTMAS. Let us all welcome the New Year with the wish and a prayer that 2014 will be filled with the very best of everything for all of us. See you all at the Center for the New Year's Eve celebration.

HAPPY NEW YEAR!!!

R. Karten

Congratulations

Congratulations and best wishes to **Mel** and **Cindy Angeles** on becoming grandparents for the first time. Their granddaughter, Juliette Rose Angeles was born on December 16 to proud parents Marc and Tiffany.



Julliete Rose Angeles with Mom, Tiffany

Getting Ready for a Newborn Baby



By Jeanne Quindag-Raffels

While everyone else was getting ready for the holidays, the PNIA Sewing Group (Tita Nartea, Necie Quilpa, and Cindy Angeles) was preparing for the arrival of the first grandchild of one of our members. The class on November 30 focused on the construction of newborn bibs and burp cloths. After carefully

selecting colorful cotton and flannel fabrics, seven beautiful sets were produced.

In addition, five cute newborn hats with fruit or vegetable themes (strawberry, raspberry, lemon, blueberry, and pumpkin) were donated by one of my nurse colleagues for any newborn arrivals. Proceeds were contributed to PNIA; the blueberry hat is still available. Meanwhile, the Knitting Corner continued with Zaldy Quilpa and Mel Angeles, making colorful scarves for friends and family. It was definitely a creative day for all!



Bib and Burp Cloth Sets; Lemon Hat; Blueberry Hat



Jeanne Quindag-Raffels, Tita Nartea, Necie Quilpa, Cindy Angeles



Panera Day-End Dough-Nation

By Robert Meria

The Day-End Dough-Nation program is important to Panera Bread and the communities. It has been the company's practice to donate leftover bakery products (breads, bagels and pastries only) at the end of each day to local 501(C) organizations. Panera Bread specifically created this program for the purpose of caring for those in need. Leftovers are picked up every week on a continuous basis throughout the year by assigned organizations.

Panera Bread franchise opened a new bakery in Silverdale on December 2013. At the end of each day, unsold bread and baked goods are picked up and distributed to local non-profit organizations that provide food to the needy. As of December 2013, Pacific Northwest Ilocandia Association has been one of the local 501-C(3) non-profit organizations involved with this program. Our one day a week pick up when we started in January is now four times a week. We pick up at 10:00PM when the store closes and make our rounds to distribute the following morning. Recipients of our efforts are The Salvation Army, St. Vincent de Paul, Bremerton Food Line, South Kitsap Helpline, Central Kitsap Food Bank,

North Kitsap Fishline, NBK Bangor Base Marine Security Forces, Georgia Mattson Memorial Shelter, (commonly known Georgia House). Benedict House, and Oasis We Teen Center. have also distributed to Silverdale Methodist Church, Grace Community Church Trinity Community and Holy Volunteers.

Our Panera Bread commitment will end this month. All applications must be renewed annually and we are planning to apply again by filling out the Day-End Donation Request Form and mailing to the head office for review and approval. We hope we will be lucky to get selected for another year of the program.

I would like to thank Rudy Nartea, Tita Nartea, Mel Angeles, Cindy Angeles, Leo Monis, Aida Monis, Susie Meria and Pastor Bart Baril of Grace Community Church and members of his congregation who have given so much of their time and effort in this very worthy cause. As members of PNIA, we are so honored to have been given the opportunity to help the less fortunate in our community. This is what our organization stands for... always willing to lend a helping hand.



PNIA Seahawks Fundraiser: An Inside View

By Quintin Mugas

This is our fourth year doing the Seahawks Fundraiser. It has been fun and exciting while at the same time increased our fundraising income.

This year the Seahawks are having one of their best seasons and have a real chance to win the West Division of the National Football Conference and proceed through to the playoffs and ultimately to the Superbowl in New York. And we are at CenturyLink Stadium at all of their home games...working.



L-R: Pat Allfrey, Catherine Ibita, Manny Abutin, Vicky Olala, Rudy Nartea, Mary Ann Mugas, Aida Monis, Emy Quitevis, Robert Lundberg, Cindy Angeles, Zaldy Quilpa, Quintin Mugas and Tita Nartea

Delaware North Corporation Seattle Sportservice assigned to PNIA Stand 105, *The Best of Pike Place and The International District*. Twelve to fourteen members are needed to operate the stand, 8 associates for cashiers and 4 to 6 associates to support the Starbucks coffee and hot chocolate station and as runners, restockers and to assist where needed. We are allowed breaks and get to have our lunch, which we have our

choice of hot dog, pretzel, nachos or pizza.

Typically we arrive 4 hours before game time to check in, locate empty lockers, put on our uniforms and then make our way to the stand on the main level of the stadium. Duties are pre-assigned: Pat Allfrey and Quintin Mugas for cash pick up and distribution to each register; Tita Nartea, Robert Lundberg, Maura Esperanza, Cindy Angeles, Aida Monis and Susie Meria for inventory; Mary Ann Mugas, Emy Quitevis and others for sanitizing the counters; Rudy Nartea, Manny Abutin, Nap Esperanza, Francis Cabaluna and Roy Padaca for condiment set up; Mel Angeles and Zaldy Quilpa for preparing the coffee station.



Emy Quitevis preparing the forks & napkins, while Tita Nartea looks on.

Our menu is a variety of foods, Italian, American, Chinese and Thai. And beer, what's a football game without beer? Again we offer a selection, Chinese, Japanese and 2 domestics in bottles as well as two premium beers on tap, all at a special CenturyLink price.

Our fun begins when the gates open 2 hours prior to kickoff and the fans start to enter the stadium. Some fans arrive dressed in Seattle Team colored costumes and hair, chanting "SEA...HAWKS, GO...HAWKS." Die-hard fans of the visiting team are just as devotedly outfitted. Excitement is growing in the stadium. Folks preparing for the contest, picking up snacks and drinks to enjoy during the contest of the "Hawks" against their visiting rivals.



"Welcome to CenturyLink. How can I help you?" Our work, selling, begins to get into full swing. Teamwork and coordination are crucial especially as the number of fans start to fill the arena to its 67,000-fan sell out capacity.

As the stadium fills the tempo of work increases... Cindy Angeles, "I need two Salumi's." Francis Cabaluna, "Give me a Firehouse". Nap Esperanza, "2 hot chocolates". Then at half-time as the customer momentum reaches a chaotic level, the registers are all requesting orders, all at the same time while checking

I.D.'s and serving beer. Everyone is very busy, some gathering their requests and Roy Padaca and Mel Angeles helping the cooks in the back prepare food while Maura Esperanza and Pat Allfrey assist at the Starbucks station.

At the end of the day all were tired but satisfied with a job well done. We have done our best and earned funds to support PNIA to continue its mission..."providing community service to all."

Prediabetes

Definition

Prediabetes means that your blood sugar level is higher than normal, but it's not yet high enough to be classified as type 2 diabetes. Still, without intervention, prediabetes is likely to become type 2 diabetes in 10 years or less. And, if you have prediabetes, the long-term damage of diabetes - especially to your heart and circulatory system - may already be starting.

There's good news, however. Prediabetes can be an opportunity for you to improve your health, because progression from prediabetes to type 2 diabetes isn't inevitable. With healthy lifestyle changes - such as eating healthy foods, including physical activity in your daily routine and maintaining a healthy weight - you may be able to bring your blood sugar level back to normal.

Symptoms

Often, prediabetes has no signs or symptoms. Darkened areas of skin, a condition called acanthosis nigricans, is one of the few signs suggesting you are at risk for diabetes. Common areas that may be affected include the neck, armpits, elbows, knees and knuckles.

Classic red flags of type 2 diabetes to watch for include:

- · Increased thirst
- Frequent urination
- Fatigue

• Blurred vision

Consult your doctor if you're concerned about diabetes or if you notice any type 2 diabetes signs or symptoms - increased thirst and frequent urination, fatigue, and blurred vision.

Ask your doctor about blood glucose screening if you have any risk factors for prediabetes, such as:

- You're overweight, with a body mass index above 25.
- You're inactive.
- You're age 45 or older.
- You have a family history of type 2 diabetes.
- You're African-American, Hispanic, American Indian, Asian-American or a Pacific Islander.
- You developed gestational diabetes when you were pregnant or gave birth to a baby who weighed more than 9 pounds (4.1 kilograms).
- You have polycystic ovary syndrome, a common condition characterized by irregular menstrual periods, excess hair growth and obesity.
- You have high blood pressure.
- Your high-density lipoprotein (HDL) cholesterol (the "good" cholesterol) is below 35 milligrams per deciliter (mg/dL) 0.9 millimoles per liter or mmol/L or your triglyceride level is above 250 mg/dL (2.83 mmol/L).

• You regularly sleep fewer than six hours or more than nine hours a night.

Causes

- The exact cause of prediabetes is unknown, although researchers have discovered some genes that are related to insulin resistance. Excess fat - especially abdominal fat - and inactivity also seem to be important factors in the development of prediabetes.
- What is clear is that people who have prediabetes aren't quite processing sugar (glucose) properly anymore. This causes sugar to build up in the bloodstream instead of doing its normal job of fueling the cells that make up muscles and other tissues
- Most of the glucose in your body comes from the foods you eat, specifically foods that contain carbohydrates. Any food that contains carbohydrates can affect your blood sugar levels, not just sweet foods.
- During digestion, sugar enters your bloodstream and with the help of insulin is then absorbed into the body's cells to give them energy.
- Insulin is a hormone that comes from the pancreas, a gland located just behind the stomach.

When you eat, your pancreas secretes insulin into your bloodstream. As insulin circulates, it acts like a key that unlocks microscopic doors that allow sugar to enter your cells. Insulin lowers the amount of sugar in your bloodstream. As your blood sugar level drops, so does the secretion of insulin from your pancreas.

When you have prediabetes, this
process begins to work
improperly. Instead of fueling
your cells, sugar builds up in your
bloodstream. This occurs when
your pancreas doesn't make
enough insulin or your cells
become resistant to the action of
insulin or both.

Risk factors

The same factors that increase the risk of developing type 2 diabetes increase the risk of developing prediabetes, including:

- Extra weight. Being overweight is a primary risk factor for prediabetes. The more fatty tissue you have especially inside and between the muscle and skin around your abdomen the more resistant your cells become to insulin.
- Inactivity. The less active you are, the greater your risk of prediabetes. Physical activity helps you control your weight, uses up glucose as energy and makes your cells more sensitive to insulin.
- Advancing age. The risk of prediabetes increases as you get older, especially after age 45.
 This may be because people tend

to exercise less, lose muscle mass and gain weight as they age. However, older people aren't the only ones at risk of prediabetes and type 2 diabetes. The incidence of these disorders is also rising in younger age groups.

- **Family history.** The risk of prediabetes increases if a parent or sibling has type 2 diabetes.
- Race. Although it's unclear why, people of certain races - including African-Americans, Hispanics, American Indians, Asian-Americans and Pacific Islanders are more likely to develop prediabetes.
- Gestational diabetes. If you developed gestational diabetes when you were pregnant, your risk of later developing diabetes increases. If you gave birth to a baby who weighed more than 9 pounds (4.1 kilograms), you're also at increased risk of diabetes.
- Polycystic ovary syndrome. For women, having polycystic ovary syndrome — a common condition characterized by irregular menstrual periods, excess hair growth and obesity - increases the risk of diabetes.
- Sleep. Several recent studies have linked a lack of sleep or too much sleep to an increased risk of insulin resistance. Research suggests that regularly sleeping fewer than six hours or more than nine hours a night might up your risk of prediabetes or type 2 diabetes.

Other conditions associated with diabetes include:

High blood pressure

- Low levels of HDL, or the "good" cholesterol
- High levels of triglycerides a type of fat in your blood

When these conditions — high blood pressure, high blood sugar, and abnormal blood fats and cholesterol — occur together along with obesity, they are associated with resistance to insulin. This is often referred to as metabolic syndrome.

Complications

Progression into type 2 diabetes is the most serious consequence of untreated prediabetes.

Type 2 diabetes complications include:

- High blood pressure
- High cholesterol
- Heart disease
- Stroke
- Kidney disease
- Blindness
- Amputations

Tests and diagnosis

Who should be tested The American Diabetes Association recommends blood glucose screening if you have any risk factors for prediabetes. This includes if you:

- Are overweight, with a body mass index above 25
- Are inactive
- Are age 45 or older
- Have a family history of type 2 diabetes
- Are African-American, Hispanic, American Indian, Asian-American or a Pacific Islander
- Have a history of gestational diabetes or have given birth to a

- baby who weighed more than 9 pounds (4.1 kilograms)
- Have a history of polycystic ovary syndrome
- Have high blood pressure
- Have abnormal cholesterol levels, including a high-density lipoprotein (HDL) cholesterol below 35 mg/dL (0.9 mmol/L) or triglyceride level above 250 mg/dL (2.83 mmol/L)

Tests used to diagnose prediabetes

In June 2009, an international committee composed of experts from the American Diabetes Association, the European Association for the Study of Diabetes and the International Diabetes Federation recommended that prediabetes testing include the:

Glycated hemoglobin (A1C) test. This blood test indicates your average blood sugar level for the past two to three months. works by measuring percentage of blood sugar attached to hemoglobin, the oxygen-carrying protein in red blood cells. The higher your blood sugar levels, the more hemoglobin you'll have with sugar attached. An A1C level between 6 and 6.5 percent is considered prediabetes. A level of 6.5 percent or higher on two separate tests indicates you have diabetes.

Certain conditions can make the A1C test inaccurate - such as if you are pregnant or have an uncommon form of hemoglobin (known as a hemoglobin variant).

Following are other tests that your doctor may use to diagnose prediabetes:

- Fasting blood sugar test. A blood sample will be taken after you fast for at least eight hours or overnight. With this test, a blood sugar level lower than 100 milligrams per deciliter (mg/dL) -5.6 millimoles per liter (mmol/L) - is normal. A blood sugar level from 100 to 125 mg/dL (5.6 to 6.9 mmol/L) is considered prediabetes. This is sometimes referred to as impaired fasting glucose (IFG). A blood sugar level of 126 mg/dL (7.0 mmol/L) or higher may indicate diabetes mellitus.
- Oral glucose tolerance test. A blood sample will be taken after you fast for at least eight hours or overnight. Then you'll drink a sugary solution, and your blood sugar level will be measured again after two hours. A blood sugar level less than 140 mg/dL (7.8 mmol/L) is normal. A blood sugar level from 140 to 199 mg/dL (7.8 to 11.0 mmol/L) is considered prediabetes. This is sometimes referred to as impaired glucose tolerance (IGT). A blood sugar level of 200 mg/dL (11.1 mmol/L) or higher may indicate diabetes mellitus.

If your blood sugar level is normal, your doctor may recommend a screening test every three years. If you have prediabetes, further testing may be needed. For example, your doctor should check your fasting blood sugar, A1C, total cholesterol, HDL cholesterol, low-density lipoprotein (LDL) cholesterol and triglycerides at least once a year,

possibly more frequently if you have additional risk factors for diabetes. Your doctor may also recommend an annual microalbuminuria test, which checks for protein in your urine - an early sign of damage to the kidneys.

Treatments and drugs

If you have prediabetes, healthy lifestyle choices can help you bring your blood sugar level back to normal or at least keep it from rising toward the levels seen in type 2 diabetes. Guidelines from the American College of Endocrinology suggest the following to treat prediabetes:

- Eat healthy foods. Choose foods low in fat and calories and high in fiber. Focus on fruits, vegetables and whole grains. Strive for variety to help you achieve your goals without compromising taste or nutrition.
- Get more physical activity. Aim for 30 to 60 minutes of moderate physical activity at least five days a week. Take a brisk daily walk. Ride your bike. Swim laps. If you can't fit in a long workout, break it up into smaller sessions spread throughout the day.
- Lose excess pounds. If you're overweight, losing just 5 to 10 percent of your body weight only 10 to 20 pounds (4.5 to 9 kilograms) if you weigh 200 pounds (91 kilograms) can reduce the risk of developing type 2 diabetes. To keep your weight in a healthy range, focus on permanent changes to your eating and exercise habits. Motivate yourself by remembering the benefits of losing weight, such as

a healthier heart, more energy and improved self-esteem.

Take medications as needed. Sometimes medications - such as the oral diabetes drugs metformin (Glucophage) and acarbose (Precose) - also are an option if you're at high risk of diabetes. This includes if your prediabetes worsening or you have cardiovascular disease, fatty liver polycystic ovary disease or syndrome. Some studies have indicated pioglitazone that (Actos) and similar drugs, which improve insulin sensitivity, might

help reduce the risk of converting from prediabetes to diabetes, but were associated with weight gain and water retention (edema).

In other cases, medications to control cholesterol - statins, in particular - and medications to control high blood pressure are needed. Healthy lifestyle choices remain essential, however.

Because the findings from several recent studies suggest that regularly getting a good night of sleep may reduce insulin resistance, try to get at least six hours or more of sleep each night.

Prevention

Healthy lifestyle choices can help you prevent prediabetes and its progression to type 2 diabetes - even if diabetes runs in your family.

- Eat healthy foods.
- Get more physical activity.
- Lose excess pounds.

The same lifestyle changes that can treat or even reverse prediabetes help prevent the condition, too.

Source: Mayo Clinic, http://www.mayoclinic.com/health/prediabetes/DS00624