

Building Connections with Local and Global Communities

featuring Dr. Frankie Wong

Journeys in Research, Season 2, Episode 2

Published September 5, 2022

Frankie Wong: I had a very unique career trajectory and pathway. I did my Ph.D. in social psychology, but even when I was a graduate student, my experience was different from my peers. Instead of working in a psych department, for some reason my major professor placed me in an interdisciplinary laboratory. So, I worked mostly with political scientists doing polling, like the Texas poll. I would poll on issues such as the importance of voting rights. It was a whole range of things like, “What kinds of health issues are important for Texans?” So, my exposure was beyond just psychology. It was about other things.

I ended up taking an academic job when I first got out in a traditional psychology department. I generally liked what I was doing. I had a great graduate student, but it felt a little bit confining because my training was much more interdisciplinary than just psychology. So, I took a leave of absence and tried to explore other opportunities.

I went to Boston, not really knowing exactly what I was doing. I just went up there. I started working for the Health Department. After that, I decided I wanted to get my hands dirty doing health programing, working in a community-based agency. [This] completely had nothing to do with my training. So, I was developing health care programs and social service programs for Asian immigrant refugees. So [asking questions] like, “How do you get people to come in for health screening?”, especially those that are undocumented, don’t have health insurance, stuff like that.

Meanwhile, I continued to maintain my research because I had a relationship with Boston University. So, I was able to continue to do my research on the side, as well as learning about other things. Those experiences were invaluable, because as I was moving up in the community environment, I had to learn how to write program implementation grants, which are not scientific grants. So I learned a lot about how to write grants. I learned about budgets, all kinds of stuff I never learned when I was a grad student.

Then in 2000 ... I went back to New York for personal reasons, because one of my friends was dying from HIV. I was his primary caretaker. I was still working in the community at that time, even when I went to New York. After [my friend] passed away, I just decided, well, maybe I should go back to academia. It was about the time I met my partner, who is now my husband. So, I moved to Washington, D.C. That was the transition back into academia full time. From there on, it was completely academic types of work. But those years in the community gave me a very different perspective on what does it mean to research? We researchers can talk about research, but sometimes it is so devoid of reality, of people living in the community.

Evangeline Coker: What would you suggest to other researchers who might be thinking, “I need to branch out and do more community service?”

Frankie Wong: I think it's important to have an open mind. These days, research becomes so specialized, especially in our doctoral training. It is so specialized. We start to forget there are other perspectives to look at in research. My other interest is actually in history. I enjoy reading history, and physics, what have you. And I read a lot of books like biography, nonfiction types of work.

You think about HIV. Everyone is talking about HIV these days from the perspective [that it is] a chronic disease—cytokine, Cd4 count, viral load, or what have you. But HIV is more than just a biological disease. HIV is about a lot of social issues. Susan Sontag: illness as a metaphor. So that gives you a different perspective. I think if you are willing to open up your mind and listen to other people, it makes you a better researcher.

Evangeline Coker: Was that something you were just drawn to, that interest in other disciplines or topics, like history and physics?

Frankie Wong: This has always been part of my thing. I was debating whether I would go into history or philosophy. I started actually in philosophy. I started in philosophy, but my father was really, really upset, coming from an Asian family. He said, "What are you going to do with a degree in philosophy?" But my mother was very supportive. So, I thought, "well, maybe I'll pick psychology as kind of a middle ground." But I always had an interest in other things.

Evangeline Coker: Could you talk a bit about the research problem you're trying to solve with HIV research?

Frankie Wong: Well, HIV has been with us for four decades now. So, it's no longer a new disease. These days HIV is a chronic disease. My best friend has been living with HIV since 1987. You're talking about 30-something years. Once you have HIV, there are all kinds of other health consequences. Someone living with HIV has a much higher chance of getting hypertension, cardiovascular disease, and all kinds of other ailments. The key is that we still do not know enough about how HIV affects all these other health conditions. So, my goal these days is focusing on HIV and hypertension. And of course, as you grow old, you are likely to develop hypertension. The types of food you eat also affects hypertension, for example, a lot of sodium intake and things like that. We cannot change somebody from HIV positive to HIV negative. But we probably can modify behavior that lowers the risk of developing hypertension and cardiovascular disease. Independent of HIV, what are some of the factors that also contribute to hypertension? Can we modify those factors so that we can minimize hypertension?

Evangeline Coker: You do a lot of international research. You have grants going on in Vietnam and Tajikistan?

Frankie Wong: Yes. I started out doing some domestic work, but I started doing international work probably in early 2000s. The reason being that, at that time Former President Bush started the PEPFAR program. So, a lot of money was going to other countries. In some strange, convoluted way, many of us are chasing the money, right? You follow where the funding is.

I got into international work by accident. I had an NIH domestic study, but at the time, the National Institutes of Drug Abuse had this initiative called a Southern Africa initiative. So, my colleagues asked, “Would you be interested to work in South Africa?” I said, “Sure.” I knew nothing about South Africa, so I got the study. I got a supplement to do work in South Africa, and then I got a supplement to do work in China. That’s how I started my international career.

Evangeline Coker: So, compared to domestic research, do you feel like you had to go through a learning curve to work internationally?

Frankie Wong: I think yes and no, just like anything else. When you have to work with a different government agency, they have their own regulations. In both China and South Africa, even though your study is funded by the United States, from their perspective, you are collecting data in their own country, [so] you don’t own the data. They own the data. In China, if you collect any types of biological specimen, you cannot ship it out to the United States. You have to find a way to analyze those specimens in China. So, each country has its own little system. And obviously China is a communist country. Not being from there ... I know quite a bit about the society and culture. Eventually after I got to know my friend and collaborator, he told me something, and I was shocked. He said, “During the first few years when you were working with us, every time when you visit us, I have to file a security report.” So I know they probably have everything about me.

Evangeline Coker: What kind of research were you doing there?

Frankie Wong: In China, the HIV situation start out with blood donor and injection drug use, and somehow in the mid-2000s it becomes sexually transmitted. One group that are at the highest risk is men having sex with men. They may not identify themselves as gay or bisexual, but they have sex with other men. It becomes such a big issue, in particular among a small subsample of this MSM. They are known [as] “moneyboys.” Initially I thought there must be some American who came up with this term, but no. Turns out it was a local, homegrown term because this day you have exposure to all kinds of international media. So these are men who sell sex to other men for money. They are male commercial sex workers. But the convoluted nature in China is that prostitution is defined by a woman selling sex to a man. So, there was actually a case. A man selling sex to a man was arrested. The judge let him go because “prostitution is defined by a woman selling sex to a man. In your case there’s nothing on the books.”

Evangeline Coker: Yeah. And so that’s how they got the term moneyboy?

Frankie Wong: Yes. Moneyboy is a major issue, and MSM is still the highest risk group in China. So, my initial work in China is looking at the social pattern. What are the social factors, risk factors, that put this individual at risk? Homosexuality is actually legal in China, but there is still a lot of stigma associated with it. If you are a man, the expectation is you eventually marry and you have a family. Ideally, you should produce a male child because males are so important. So, you have all these extra pieces. So many individuals live double lives.

Evangeline Coker: Was it difficult to get volunteers for your studies, given the stigma going around?

Frankie Wong: Oh, no. What is really interesting is that the Chinese government took a practical approach to this. They said this is a public health issue. Some people might not agree with their lifestyle, but we have a public health issue at hand. So, they were very proactive in terms of working with the community to promote safer behavior.

I started out working with a community partner who had a lot of access to the local bars. In big cities like Shanghai and Beijing, there are all kinds of bars, and some of these bars are fairly westernized. Actually, there's one particular bar in Shanghai. When I was first doing my outreach work there, I was completely stunned. It was actually modeled after the bar Tunnel in New York City. It is stunning. So, you have this really convoluted hybrid type of situation. Obviously, it's not the same when you go to a local, second tier city. Shanghai and Beijing are first world cities these days. China was very different when I first started out. China today is very different from when I first started working from there.

Evangeline Coker: Do you still do research in China?

Frankie Wong: No, I haven't been back in almost five years now. It's quite difficult these days to have a study funded by the U.S. government to do work in China. I still work with my colleagues, mostly on paper, on publications and stuff like that, but I do not have any active ongoing study funded by us to do work in China.

Evangeline Coker: So, how do you find the right kind of collaborators for your projects?

Frankie Wong: I think those years in the community were helpful because I'm not only working with people in the community, but because of my background in research, I always ended up talking to my research colleagues who may not be in the community. So, I maintain that contact. So that was helpful. I tend to gravitate [toward] people that share my philosophy and my thinking and vision. I don't want to work with people that are so narrow. I want to work with people that have an interest in other things.

Evangeline Coker: I feel like interdisciplinary research opportunities as far as grant opportunities that are out there, it seems to be growing. NIH and NSF want more interdisciplinary collaborations. Do you find that, and do you feel like it's getting easier now?

Frankie Wong: I think definitely NIH. I don't have much experience with NSF, so I cannot speak to that. But I do think NIH is much more interdisciplinary. I think the other reason I was able to work with different people from different types of disciplines was because when I transition back in 2000 to academia, I went into public health instead of into psychology. So in public health, you end up working with people that are in medicine, physicians, all kinds of people from different backgrounds.

Evangeline Coker: That keeps you involved in the community as well. You're not stuck in the department so much.

Frankie Wong: It helps. When I first went in, I went to G.W., George Washington, and then from there I went to Georgetown. I stayed in Georgetown for about five years or so, and that was

an interesting period, because I was fortunate to be in the Department for International Health. My chair, who is a friend now, he was at the World Bank. At the bank, when you turn 62 you have to retire. That was at least way back then. He's a German national, so he said, "No, I'm too young to retire." So, he went to Georgetown. But then, of course, the bank turned around and continued to employ him as a consultant. So then I got to absorb. I asked, "how do people in the bank do health care research?" Because this last position of the bank, he was the VP in charge of health care service research for the continent of Africa. He is a consumer of research, so it helped me by talking to him to get advice about how I can hone my research questions.

Evangeline Coker: Oh, that's fascinating. He was your end user.

Frankie Wong: He was an end user. So, because he's originally from Germany, trained as a surgeon So he has a very different perspective, because German medicine is very different from the United States. But since he worked in the World Bank, he had a lot of experience working with different types of people across the world and living in United States. So, I was very fortunate to run into or have an encounter with all these individuals.

Evangeline Coker: What advice would you give to a researcher who's felt siloed, stuck in their department, and has decided, "I need to branch out and make a connection with someone in a completely different field, but I don't know how."

Frankie Wong: Well, there's no question, a stupid question. Just ask. If you don't ask, you would never know. As my late mother always said, "Try everything once. If you don't like it, you don't have to do it again." So be adventurous. Just do it.