CASE OF WOMAN IN TRAILER SHOWS CULTURAL GAP FEAR, SHAME KEEP IMMIGRANTS FROM SEEKING HELP, EXPERTS SAY

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Body

Desperate for <u>help</u> and consumed by <u>fear</u>, San Jose mother Maria Isabel Eugenio thought she had no place to turn in caring for her 40-year-old mentally disabled daughter, whose immigration status remains in limbo.

Eugenio's decision to lock her daughter inside a small wooden <u>trailer</u> while she went to work rather than <u>seek</u> outside <u>help</u> from the many available services reflects an all-too-common <u>fear</u> among <u>immigrants</u> unfamiliar with California's healthcare system, local and state health <u>experts said</u> Friday.

In a state known for its anti-<u>immigrant</u> initiatives, one of the biggest challenges is bridging the <u>cultural</u>, financial and language divide that prevents many <u>immigrants</u> like Eugenio from getting the <u>help</u> they need.

FZ,1,0 "It's an uphill battle," <u>said</u> Stan Rosenstein, assistant deputy director for medical services for the California Department of Health Services.

Californians who suffer from developmental disabilities like Eugenio's daughter typically qualify for Medi-Cal, the state's insurance program for low-income residents, regardless of immigration status, Rosenstein <u>said</u>. With that insurance, Eugenio would have been able to <u>seek</u> out healthcare services from a variety of county programs that offer everything from home visits to off-site day care.

About 250,000 undocumented <u>immigrants</u> now are enrolled in Medi-Cal, Rosenstein <u>said</u>. But millions of **immigrants** remain uninsured.

"Clinics and immigration attorneys are aware of the laws," he <u>said</u>, "but many <u>immigrants</u> are not. It's a very major concern."

A three-year study by the Latino Coalition for a Healthy California last year concluded that Latinas are the largest uninsured group among <u>women</u> in the state. Only one-third of them, or just more than 1 million, have health insurance.

At the Gardner Health Center near downtown San Jose, employees receive at least 30 new referrals a week from low-income <u>immigrants</u> <u>seeking</u> any number of healthcare services. Program Supervisor Ana Lilia DeLeon-Gonzalez <u>said</u> she sees the <u>fear</u> in reluctant patients every day.

"Even cancer patients don't want to get services because they think they'll get deported," she said.

Eugenio faces charges of abusing a dependent adult and false imprisonment, both felonies. Her daughter is in a residential care facility. Although Eugenio <u>said</u> she became a U.S. citizen three years ago, her daughter's petition for citizenship is still pending.

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For single working mothers like Eugenio, DeLeon-Gonzalez <u>said</u> the clinic would try to ensure they know how to care for their developmentally disabled children and deal with the stresses that come with balancing a full-time job with that high-maintenance care.

San Jose mother Ofelia Martinez knows those stresses all too well. She sat for an hour in the waiting room at the Gardner clinic Friday afternoon while her 26-year-old son, a diagnosed schizophrenic, chatted in a nearby room with a support group of peers.

For three years, Martinez has driven her son, Oscar, to the center at least four times a month for medical checkups and counseling services. The 65-year-old retired office assistant <u>said</u> she doesn't know how she or her husband, a retired janitor, could manage if they were working full time.

Martinez <u>said</u> prosecutors should consider Eugenio's circumstances before deciding her punishment.

"I know what her problems are like. Having to take care of a sick child is a lot of work," Martinez <u>said</u>. "I don't blame her because she didn't know what to do."

Refusing medical care is common among many <u>immigrant</u> groups, not just Latinos. <u>Immigrants</u> often come from countries where similar services don't exist. Caring for family members is not something they're accustomed to turning to a doctor for, <u>said</u> Tessie Guillermo, executive director of the Asian and Pacific Islander American Health Forum in San Francisco.

In the Asian community, Guillermo said, there's the added feeling of shame.

"Asian-Americans are particularly low users of mental health services because of <u>cultural</u> attitudes that shun mental disabilities," she <u>said</u>. "Many still live in their ethnic enclaves, and it becomes well known if they go to a neighborhood health clinic."

At Oakland's La Clinica de la Raza, administrators try to instill a belief in their patients that healthcare comes first, before concerns about <u>cultural</u> appropriateness or immigration status. The medical records of all patients, including undocumented **immigrants**, are confidential, **said** Victoria Samper, associate director of the clinic.

"The <u>fear</u> of 187 hasn't gone away," she <u>said</u>, referring to the 1994 initiative approved by California voters, but later repealed, that denied health-care access to undocumented *immigrants*.

Notes

WHOM TO CALL

Need mental-health services or know someone who does? Some helpful numbers:

or mental-health services for a family member or friend, call the Santa Clara County office of the San Andreas Regional Center, whose staff of physicians, nurses and psychologists completes assessments, determines eligibility and refers clients to service providers: (408) 374-9960.

To report suspicions that a mentally disabled person is being mistreated, neglected or abandoned, call Santa Clara County's Adult Protective Services: (800) 414-2002.

For community-based services, call San Jose's Gardner Health Center: (408) 998-2264; Oakland's La Clinica de la Raza: (510) 535-4000; or San Francisco's Asian and Pacific Islander American Health Forum: (415) 954-9988.

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Maria Isabel Eugenio

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