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A needs assessment of Filipino World War II veterans in San Jose, California

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A Needs Assessment of Filipino World War II Veterans
in San Jose, California

Presented to the Faculty of the
College of Social Work
San Jose State University

In partial fulfillment of the
Requirements for the Degree of
Master of Social Work

by

Sabino H. Clariza, Jr.

April 26, 1999

Dr. Fred Prochaska, Chairperson

Professor Francis Respicio, Field Faculty Liaison

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Abstract

This is an action project designed to assess the economic, social, environmental, medical and mental health care needs of the veterans. This is a qualitative study that utilized a survey interview design conducted among 40 Filipino veterans and 30 service providers in San Jose, California.

Interviews of the Filipino veterans were conducted at the Northside Community Center and Luther Burbank Nutrition Center, two known community centers in San Jose, where large numbers of Filipino veterans usually attend. On the other hand, interviews of the service providers were administered at their own respective agencies. The interview questions assessed the type of services needed by Filipino veterans, examined whether the current services provided them fully address their needs and determined whether these services are culturally and linguistically appropriate.

1. Introduction

The state of California is home to nearly 8,000 Filipino-American World War II veterans, and of this number, about 600 currently live in the City of San Jose. These are mostly male Filipino veterans whose average age is 70. They immigrated to the United States under the Immigration Act of 1990, the law that offers U.S. citizenship for Filipinos who fought the Japanese under the U.S. flag during the Japanese occupation of the Philippines. The U.S. Veterans Administration Department has reported that there are still 70,000 surviving Filipino veterans in the Philippines and the United States.

Although the law grants U.S. citizenship to Filipino veterans, it does not, however provide the benefits that other U.S. Army veterans enjoy under the G.I. Bill of Rights. They are only eligible to a Supplemental Security Income of \$671, which is not enough to cover for the high cost of living in California. Hence, a large number of Filipino veterans in the City of San Jose are currently experiencing extreme poverty. Many become homeless. A significant number live in homeless shelters, some share sub-standard shelters with fellow veterans in undesirable ghettos, while others are forced to live with relatives or friends.

Extreme poverty, frustration over their difficult living conditions and stress associated with acculturation have affected their physical, emotional and mental stability. Many suffer emotional and mental illnesses, such as depression and alcoholism. In addition, significant numbers experience low morale and self-esteem, and feel that people look down on them for being welfare dependents.

It is questionable whether adequate services that address their social, environmental, physiological, emotional and mental health care needs are being provided. Based on the Ethnic Task Force report of Santa Clara County, Filipinos are one of the most highly underserved populations within the County mental health system. As a group, they have been excluded from

receiving organized, culturally competent services from the County of Santa Clara. This does not mean that culturally competent social workers and psychotherapists do not exist within the County. Rather, there have been few organized efforts to develop specific services to provide appropriate care to this population. The need for these types of services becomes even more pressing as the Filipino population continues to grow due to the influx of elderly Filipino veterans to San Jose.

This special action project is a needs assessment to examine the environmental, social, physiological and mental health care needs of the Filipino veterans in San Jose. This study addresses the following questions:

1. What type of services do the Filipino veterans need?
2. Are there adequate services available to them?
3. Does the type of services currently provided them fully addressing their needs?
4. Are current services being provided them culturally competent and linguistically appropriate?

The purpose of this study is to gather needed data and information that would be useful in advocating for the type of services that specifically target the needs of the Filipino veterans in San Jose.

2. Context of Services

This needs assessment was conducted in coordination with the Northside Community Center, a community-based senior center in San Jose. It was founded in 1978 to provide elderly individuals a place where they can find valuable information, resources, and services to assist them in their daily social and economic life.

The center offers a variety of services that include: a) case management, such as, offering assistance in matters pertaining to Social Security Supplemental Income, medical/Medicare benefits and other complex issues in coordination with a County Social Worker; b) granting monthly transit flash pass to seniors 65 years old and above; c) free legal consultation covering immigration, family law, worker's compensation, personal injury and landlord/tenant relations; d) a brown bag food program, implemented to help seniors alleviate some of the financial burdens of providing food for themselves; e) the Metropolitan adult education program, which offers classes and training on English as a second language, citizenship class for those qualified for U.S. citizenship, low impact body conditioning exercises and history/geography classes; and, f) medical services, such as, free monthly blood pressure checkups, annual flu shot vaccinations and health information services.

The center is a non-profit agency and receives funding from federal and county programs for the elderly. It is a highly lean organization with only fifteen staff. An Executive Director heads it with two social workers reporting directly under him. The National Council of Aging helps absorb some of the cost in the center's operation, such as, payment of salaries of three social workers and expenses incurred in the center's nutrition program. All of the staff, including the Executive Director, are Filipinos and speak Tagalog, the main language of the Filipinos. Presently, the center serves about 600 Filipino/a senior citizens. Nearly 500 of these are Filipino veterans residing in different part of San Jose. This number makes the center a

place where the largest number of Filipino veterans in San Jose receive services. They immigrated without their families or stable support network. As a result, many are experiencing loneliness and feeling of isolation.

To help the veterans overcome these negative feelings, the center invites everyone to participate in various social and recreational activities. Each elderly veteran is encouraged to contribute his talent or skill in planning and execution of important events such as dinners, folk and social dances, bingo, and artistic and cultural programs.

A large number of Filipino veterans continue to expect a policy change in the U.S. Army benefits. However, McBride, Marioka-Douglas and Yeo (1996) believe the probability of success in this area is still uncertain. In the meantime, the Northside Community Center keeps up its commitment to provide them with the basic necessities that include low-income housing, food, legal assistance and medical services. In addition, the Northside Community Center plans to expand its services by implementing educational programs, which will teach the veterans case management, financial planning and investment.

In 1990, statistics showed that there are about 182,663 senior citizens in Santa Clara County. As stated earlier, this number grew significantly with the influx of Filipino veterans to San Jose as a result of the passage of Immigration Act of 1990. This growth in population correspondingly increases the demand for services and living space from the elderly Filipinos. To keep up with this high demand, the Northside Community Center has recommended the expansion of community center to include a medical clinic and a multi-purpose auditorium to cater to the needs of the community for recreation and social activities. Counseling and case management services will increase with the addition of private offices. The goal is to serve and provide space to 800 clients and participants in their recreational, social, educational, and nutritional needs on any given day.

3. Literature Review/Theoretical Framework

To fully comprehend the scope of the problems confronting Filipino veterans, an extensive search was conducted on literature that focuses on various aspects relevant to this study. This includes the history of immigration, the process of acculturation and Filipino culture.

The first recorded history of Filipino immigration to the United States began as early as 1763 when a number of Filipino crewmen of the Spanish-Mexican galleon trade escaped enslavement and harsh labor by jumping ship in Mexico and Louisiana and made their way to New Orleans (Seiwart & Revilla, 1977). However, it was not until the beginning of the 20th Century that a large number of Filipinos/as immigrated to the United States. Most of these were young Filipino/a students who were selected by the U.S. government under the Pensionado Act to study at prestigious institutions in the United States. The number of Filipino/a immigrants further increased in 1935 when Filipinos/a were recruited to take over cheap labor jobs that used to be filled up by Chinese and Japanese. These jobs were left unfilled when the U.S. government placed a ban on Chinese and Japanese immigrants under the Chinese Exclusion Act of 1882, and the Gentlemen's Agreement with Japan. The Filipinos/a monopoly of the cheap labor market ended with the passing of the Tydings-McDuffie Act of 1934. This law granted the Philippines a commonwealth status resulting in a restriction of immigration of Filipinos/a to 50 persons a year (Stern, 1989).

The passage of the Hart-Celler Immigration Act in 1965 marked the start of massive Filipino/a migration to the United States. The law opened the door to Filipino/a professionals and family relatives of U.S. citizens. The influx of these highly trained professionals to the United States greatly changed the image of Filipinos/a in the new environment. They were no longer seen as a group of uneducated migrant workers but a respectable group of educated and highly trained professionals.

A relaxation in immigration policies was further seen with the passage of Immigration Act of 1990, the law that granted U.S. citizenship to Filipino World War II veterans. This led to massive migration of Filipino veterans to the U.S. to take their oath of citizenship (McBride, Marioka-Douglas & Yeo, 1996). This was passed 51 years after World War II and at that time, many Filipino veterans were already in their 70's. Despite this, many still left in search of a free, rich and happy life in America (Stern, 1989).

Normally, hardship and adjustment difficulties often accompany immigrants in the receiving society. Kuo and Young-Mei Tsai (1986) treat immigration as a process of uprooting where the difficult resettlement and adaptation to the new environment is so intense that this produces an excessive amount of social stress that eventually lead to a high prevalence of ill health and psychological impairment among immigrants.

The Filipino veterans went through these difficulties. They experienced extreme loneliness from being separated from families and friends, felt abandoned and isolated in the new environment and found difficulties adapting to the mainstream culture. All these events produced a great amount of stress and anxiety to the veterans resulting to high prevalence of mental disorder, such as depression, among many of them (Chin, 1993).

Sluzki (1979, pp. 380-386) identified five stages of the migration process:

1. Preparatory stage, which involves the family's initial concrete moves and commitment to migrate.
2. The Act of Migration, which is the actual movement to the new environment.
3. Period of Overcompensation, the stage where the new immigrants' desire to survive and adapt in the new environment made them highly task oriented resulting to improved financial condition.
4. Period of Decompensation, which is the stormy period in the life of immigrants as they

come to face the reality of the difficult task of adapting to the mainstream culture.

5. Transgenerational Impact, which is the stage where the values and beliefs of the first generation families clash with those of the second generation whose values and beliefs were acquired from the mainstream culture.

One of the preventive implications mentioned by Sluzki (1979) in lessening the conflict and crisis associated with the process of migration is to acquire, during the preparatory stage, prior information about the practicality of immigrating and things to expect in the new environment. Apparently, this is one area where many Filipino veterans failed. Greatly overwhelmed by the excitement over the privilege of being granted U.S. citizenship and the expectation of receiving benefits that are normally granted to U.S. veterans, many failed to spend sufficient time to study the type of environment they would be getting into. Similarly, not enough information was obtained to ascertain whether Filipino veterans were really eligible for the U.S. veterans' benefit package.

Immigrating to a new country entails a multitude of major life changes for the individual. For instance, the immigrant must adjust to new values, norms and patterns of interaction that may conflict with previous pattern of socialization (Agbayani-Siewart & Revilla, 1997). To a large extent, his or her success in the new environment will depend on how fast he or she could adapt to the mainstream culture.

Normally, when an immigrant settles in the host country, he or she brings his or her culture that is different from the mainstream culture. Culture refers to meanings, values, and behavioral norms that are learned and transmitted in the dominant society and within its social groups (Oldham & Riba, 1995). Diaz-Rico and Weed (1995) claim that when cultures meet, they affect one another. This contact can result in assimilation, accommodation or acculturation. As defined, assimilation is the absorption of a member of an ethnic group into the do-

minant culture, leaving their culture in the process. On the other hand, acculturation means adapting effectively to the mainstream culture without necessarily giving up one's first culture. Some researchers emphasized the importance of acculturation for one to succeed in the new environment. Again, Diaz-Rico and Weed (1995) claim that the more acculturated an immigrant is, the easier it is for him or her to learn the language of the host country. Language proficiency is essential to one's success in the new country.

Generally, studies indicate that in most cases migration is accompanied by a great amount of stress and uncertainties. The problem becomes even more intense when the individual immigrated at the later stage of his or her life. Normally, age hinders the ability of the immigrant to adapt immediately to the dominant culture because the older the person, the longer his or her process of acculturation. The experience of the Filipino veterans in America confirms this. Filipino culture has been so deeply rooted in them that it is difficult for them to leave these behind and adapt to the mainstream culture. As indicated in the literature review, this difficulty often places a great amount of stress and anxiety to the immigrant and this, oftentimes, leads to physiological, emotional and mental impairment.

Every human has fundamental basic needs that need to be met for him or her to live happily and contentedly. Maslow (1943) identified these needs in the order of their priority:

1. Physiological needs, such as, food, clothing and shelter
2. Safety
3. Acceptance and love
4. Esteem
5. Self-actualization

Instinctively, individuals strive very hard to meet all these needs. Most often his or her happiness is highly dependent on the attainment of these needs, while non-attainment may lead

to general dissatisfaction with life, which often causes physiological, emotional and mental health problems. Apparently, it was the desire to meet these needs that motivated the Filipino veterans to immigrate to America. Coming from a country where there are limited economic opportunities, many of them became convinced that America could provide them with the basic human needs they never availed from their country of origin. However, the number of Filipino veterans in this country, who are currently experiencing physical disabilities and mental disorders indicate that as of to date, their needs are still unmet.

Schraver (1998) highlighted some aspects of social systems and ecological perspectives to stress the vital role played by the environment in the individual's ability to meet his or her needs. Social systems deal with human beings and their interactions with each other and the world around them. On the other hand, ecological perspectives concerns with human interactions with the environment including physical (non-human) elements. Central to these perspectives, are the notions of the interrelatedness or interconnectedness of the various components constituting individual behavior and the parts of the social environments in which the individuals interact with each other.

Pillari (1998) stresses that because of the strong relationship existing between the individual and the environment, it would be impossible to understand issues and problems, as well as, individual's strengths and potentials, without understanding the background and environment. We see this relationship existing between the Filipino veterans and the social systems within the environment. One of these social systems are government institutions, which play a major role in the Filipino veterans' struggle to claim the war benefits they rightfully deserve. The absence of these benefits has led to major economic, social and health problems that placed a large number of these veterans at high risk whose quality of life is determined by their ability to access public resources (McBride, Marioka-Douglas, & Yeo, 1996).

Both the social systems and ecological perspectives recognize the necessity to alter the environment to meet one's needs. Germain (cited in Pillari, 1998), in her discussion of ecological perspectives, stresses that "living organisms adapt to their environments by actively changing their environments so that it can meet their needs." Similarly, unable to meet their needs due to the government's refusal to grant them the same benefits their comrades in the same war are presently enjoying (Quezada, 1998), the Filipino veterans decided to alter the environment by organizing a coalition group called AFCV. This is an independent coalition of Filipino-American groups and community organizations across the United States (FCN@filipinocenter.com). As envisioned by the founders, it will be composed of Filipino-American veteran groups and mainstream advocacy organizations. The goal is to help secure the early passage of the Filipino Veterans Equity Act. If enacted, it will make the Filipino veterans eligible to full U.S. veterans' benefits under the G.I. Bill of Rights. This legislation, which is also referred to as the Servicemen's Readjustment Act of 1944, was passed by Congress in June of 1944 under the administration of President Franklin Roosevelt. This comprehensive piece of social legislation authorized generous education and training, vouchers, family allowance, up to a year's worth of transitional unemployment payments, and low-interest, federally guaranteed loans for homes, farms and businesses. All of these benefits were made available to millions of soldiers returning from World War II (Skocpol, 1997). Undoubtedly, these are indeed substantial benefits, which if granted to the Filipino veterans would significantly help them meet their needs in the new environment.

The coalition has been successful in getting a number of House Representatives to sponsor the Equity Bill. Among them, are Rep. Benjamin Gillman of New York and Rep. Bob Filner of California. The coalition unceasingly works to win support for the bill. However, strong opposition from the Department of Veterans Affairs has made its passage uncertain.

Meanwhile, the Filipino veterans turn to other social systems within the environment. They avail of services provided by non-profit service providers, which in the City of San Jose, include senior community centers, county hospitals and clinics. Around the country, various programs are also available, among them are: (1) The American Coalition for Filipino Veterans; (2) Veteran Administration Health Care System; (3) Catholic Charities; (4) Equity Bill Center; (5) Social Security Services; (6) Asian Law Alliance; and, (7) Asian Pacific Family Resource Center.

The American Coalition for Filipino Veterans is an independent coalition of Filipino-American Veterans and Community organization across the U.S. It is based in Washington, D.C. where it lobbies for the passage of Equity Bill H.R. 831.

The Veterans Administration Health Care System includes mental health clinics that provide mental health care services to veterans. Services include group therapy, family/couples therapy, individual therapy and health education.

The Equity Bill Center is located in San Francisco, California. It was established to offer Filipino veterans a place where they could get all the services they want without the difficult task of searching for other resources. Services offered are assistance in all matters pertaining to legal issues, citizenship, counseling and employment.

The Asian Law Alliance is a non-profit community law office that provides equal access to the legal system for low-income immigrants. In addition, it conducts community presentation on public benefits to senior citizen group.

The Asian Pacific Family Resource Center offers case management, counseling, workshops and assistance to Filipino veterans in matters pertaining to SSI, medical/Medicare, housing and legal issues.

Catholic Charities provides job training to younger Filipino veterans and assist them in their job search. In addition, the agency offers assistance in all matters pertaining to immigration and naturalization issues.

Undoubtedly, there are services available to Filipino veterans. However, it has to be ascertained whether these services are adequately available, fully addressing their needs, and culturally appropriate.

4. Design of the Action Project

A large number of Filipino veterans in San Jose, California are currently suffering from physical disabilities, emotional disturbance and mental disorder. To be able to identify the causes responsible for these, there is an urgent need to examine the problems and issues confronting them. A survey research design was conducted to assess the social, environmental, physiological and mental health care needs of the Filipino veterans. This study was designed to address the research questions posed in Chapter 1.

The study was a needs assessment that used standardized interview questions which was conducted to two groups of population: 30 service providers of Filipino veterans; and 40 Filipino veterans residing in San Jose, California. The service providers included social workers, mental health workers, directors and staff of agencies, such as, senior centers, Santa Clara County Department of Social Services, law firms and Veterans Administrations office. On the other hand, the Filipino veterans survey was participated by Filipino veterans residing in San Jose and currently receiving services from Northside Community Center and Luther Burbank Nutrition Center in San Jose. These are senior centers, which a large number of Filipino veterans in San Jose usually attend.

The service providers' interview survey consisted of 13 open and closed-ended questions and 30 questions for the Filipino veterans. All questions were clearly worded in a manner that appropriately addressed the issues and needs of the population. For instance, questions one to two of the veterans survey and one to three of the service providers survey are demographic questions. These were asked to provide relevant background information of the respondents, which is essential in analyzing the quality and depth of the subjects' responses.

Questions six to eleven attempt to address major environmental issues. For instance, questions six to eight, which ask about sources of income, monthly income and expenses, are

all related to questions nine to eleven, which ask about veterans' type of housing, satisfaction with present living condition and choice of living arrangement. Responses to these questions provided information on what impact income has on their living situations.

Questions number twelve to sixteen focused on social issues. These ask to identify the type of social life many Filipino veterans have. The type of social activities that they participate impact on their ability to overcome feelings of loneliness and isolation, which many of them are experiencing due to separation from their families and love ones. The follow up questions about alcohol intake provided information on the degree by which they were compelled to drink this substance to overcome these negative feelings. Studies have shown that alcohol is one of the choices among people who wish to overcome the negative feelings of loneliness and isolation.

The physiological, emotional and mental health issues were addressed by questions seventeen to twenty-six. The questions ask if the subject has present medical condition, and if he is lonely and depress. Response to these questions will determine the extent to which acculturation stress, separation from families and poor living condition affect his physiological, emotional and mental condition. In addition, these questions provided information as to the probable causes of these physical and mental impairments among Filipino veterans. Questions 27 and 28 ask if the subject seeks help from agencies when feeling depressed and whether he has problem seeking help from agencies. These address the type of services this population needs. At the same time, these also examine whether there were adequate service providers available to them. These were critical questions that need to be asked since maintaining a sound and healthy physical and mental health condition is highly dependent on the individual's ability to avail of adequate health care services. Finally, questions nine to ten of the Service Provider Survey, which ask whether the agency provides services in Filipino language and whether trai-

ning on cultural issues is provided to their staff, addressed the issues on whether they were culturally and linguistically competent to work with the Filipino veterans.

The interview was conducted in English since a large percentage of Filipino veterans understand and speak the language. The questions were worded in a manner that suited the level of knowledge and understanding of Filipino veterans who are in their 60's and 70's. It was actually because of their advanced age that a survey interview design was chosen for this study. This type of design enabled the researcher to make immediate clarification and, at the same time, provide explanation on things that the respondent did not understand. As indicated in several studies, the ability of an individual to comprehend things declines as he or she grows older.

A pilot test was conducted with four Filipino veterans at Northside Community Center. These respondents were randomly selected and requested to stay for the interview. The purpose was to determine the amount of time needed to accomplish the interview and to get feedback from them concerning the content of the survey interview questions.

The needs assessment interview survey was administered in two groups. The first group involved the participation of 40 Filipino veterans seen at Northside Community Center and Luther Burbank Nutrition Center in San Jose. About 500 Filipino veterans in San Jose are served by these two facilities. This was definitely a good spread and made all Filipino veterans in the city fully represented.

The interviews were held at the center's facility during lunch hour. This is the time where large numbers of Filipino veterans usually come to the centers. The Executive Director of Northside Community Center introduced the researcher to his lead social worker during the initial interview activities. The social worker, in turn, introduced the researcher to the Filipino veterans whom she had strongly encouraged to participate in the study.

The interview survey involved calling the participants one at a time before and after mealtime. Before the start of every interview, the researcher would spell out to the participant the purpose of the interview and, at the same time, explained the procedures on how the interview was to be administered. The participant was encouraged to respond clearly and honestly to the interviewer's questions. As in many interview processes, participants tend to give fast answers, which made the researcher write as fast and accurately as he could. Each interview took approximately thirty minutes. This length of time made it difficult to interview 40 participants in one sitting. Hence, the process was conducted regularly on a weekly basis until it was completed after two months.

The second group of participants involved 30 service providers of the Filipino veterans. The participants were not necessarily all social workers and mental health therapists. Individuals who deal directly or indirectly with the Filipino veterans were selected for the study. Those who participated include directors and staff of private and public agencies, such as, senior centers, the Veterans Administration Office, the Santa Clara County, Social Services Agency, the Human Rights agency, Psychiatric clinics and City officials.

Each participant was contacted through the telephone to request for the interview. The date, time and place of the interview were immediately decided upon once the prospective participant agreed to be seen.

The interview survey started in January, 1999 and completed the following month.

Participation in this study was purely voluntary and presented no potential risk to the subjects. To ensure confidentiality, participants were identified only by code numbers. All data were kept in a locked cabinet and only the researcher has access to the data collected. As required by the University, this study was submitted for review and was approved by the San Jose State University Human Subject Review Committee.

5. Result

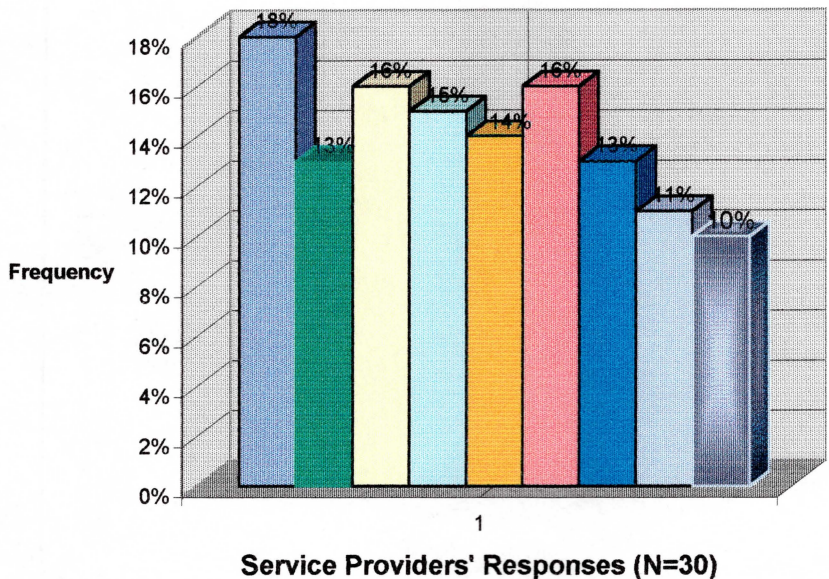
Results of the survey confirmed the difficulties that Filipino veterans are experiencing in their process of adaptation to the host country. As much as possible, they make every attempt to take advantage of whatever services are available to them. For instance, Figure 1 lists the major areas that service providers deal with when working with them. Among these are: the need for low-priced meals and groceries; affordable housing; mental health care; and, assistance in all matters pertaining to Social Security Supplemental Income, Immigration and legal issues.

Figure 2 summarizes the specific reasons that prevent Filipino veterans from getting services. These include communication problems and lack of transportation. Apparently, the fear of not being able to express themselves effectively and at the same time, inability to understand the service provider, compel Filipino veterans to either go to agencies that employ Filipino-speaking staff or decide not to visit any agencies at all. As indicated in Table 1, senior centers are the places most visited. This table identifies the agencies that employ Filipinos/a or Filipino-Americans in their staff and, at the same time, indicate whether services are provided in Filipino language.

Table 1

<u>Agencies visited by Filipino veterans</u>	<u>% of Fil. veterans who visit agencies</u>	<u>Does agency employ Filipino staff?</u>	<u>Does agency provide services in Filipino language?</u>
Senior centers	78	yes	yes
Hospitals/clinics	15	yes	yes
Counseling centers	5	yes	yes

Figure 1. Areas Service Providers deal with when working with Filipino Veterans



- Housing assistance
- Mental health counseling
- Meals/food distribution
- Immigration/naturalization and legal assistance
- Transportation
- SSI assistance
- Social/recreational activities
- Medical health needs
- Others

Figure 2. Factors Affecting Filipino Veterans from Getting Services

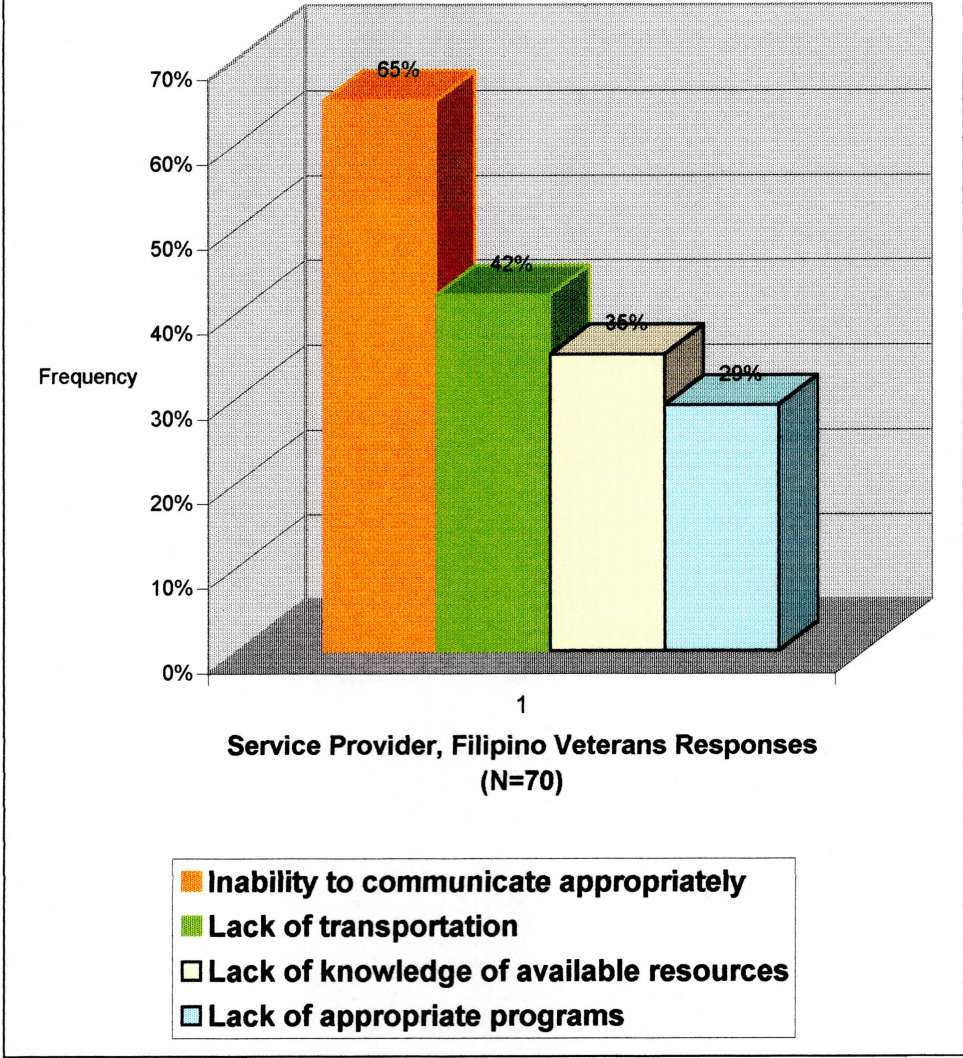


Table 2

Language spoken by Filipino veterans

Languages	Filipino veterans who speak languages Percentage
Tagalog	100
Ilocano	37
Visayan	30
Pangasinense	13
Bicolano	7

As highlighted in Table 2, all Filipino veterans interviewed speak Tagalog, which is the Philippine's main language, while significant numbers also speak Ilocano and Visayan, two widely spoken dialects in the country.

Most of the service providers interviewed also indicated that their agencies include diversity training and workshops in their regular programs. As shown in Table 3, a large number of agencies conduct this type of programs twice or thrice a year, while a significant number conduct this on a random bases or never at all.

Table 3 Diversity programs offered

No. of Times	Percent of agency that offer diversity training
Once a year	24
Twice a year	28
Thrice a year	14
Random	14
None	21

As identified earlier, affordable housing is one of the areas that service providers deal with when working with Filipino veterans. Table 4 reveals that a large percentage of Filipino veterans rent a room with fellow veterans or their wives. A large number disclosed that they were not satisfied with their living arrangement.

Table 4 Type of housing and living arrangement

<u>Type of housing</u>	<u>Preference of Filipino veterans Percentage</u>
Rented room	81
Apartment	13
Residential house	6

<u>Housing arrangement</u>	<u>Veterans' companions Percentage</u>
With fellow veterans	46
Wife	36
Relative	7
Siblings	7

Figure 3 shows service providers' estimates indicating that more than 50 percent of Filipino veterans in San Jose suffer from some form of mental illness. On the other hand, Table 5 indicates that depression and extreme loneliness are the major type of mental conditions that large number of them are affected with.

Figure 3. Estimated Percentage of Filipino Veterans with Mental Illness

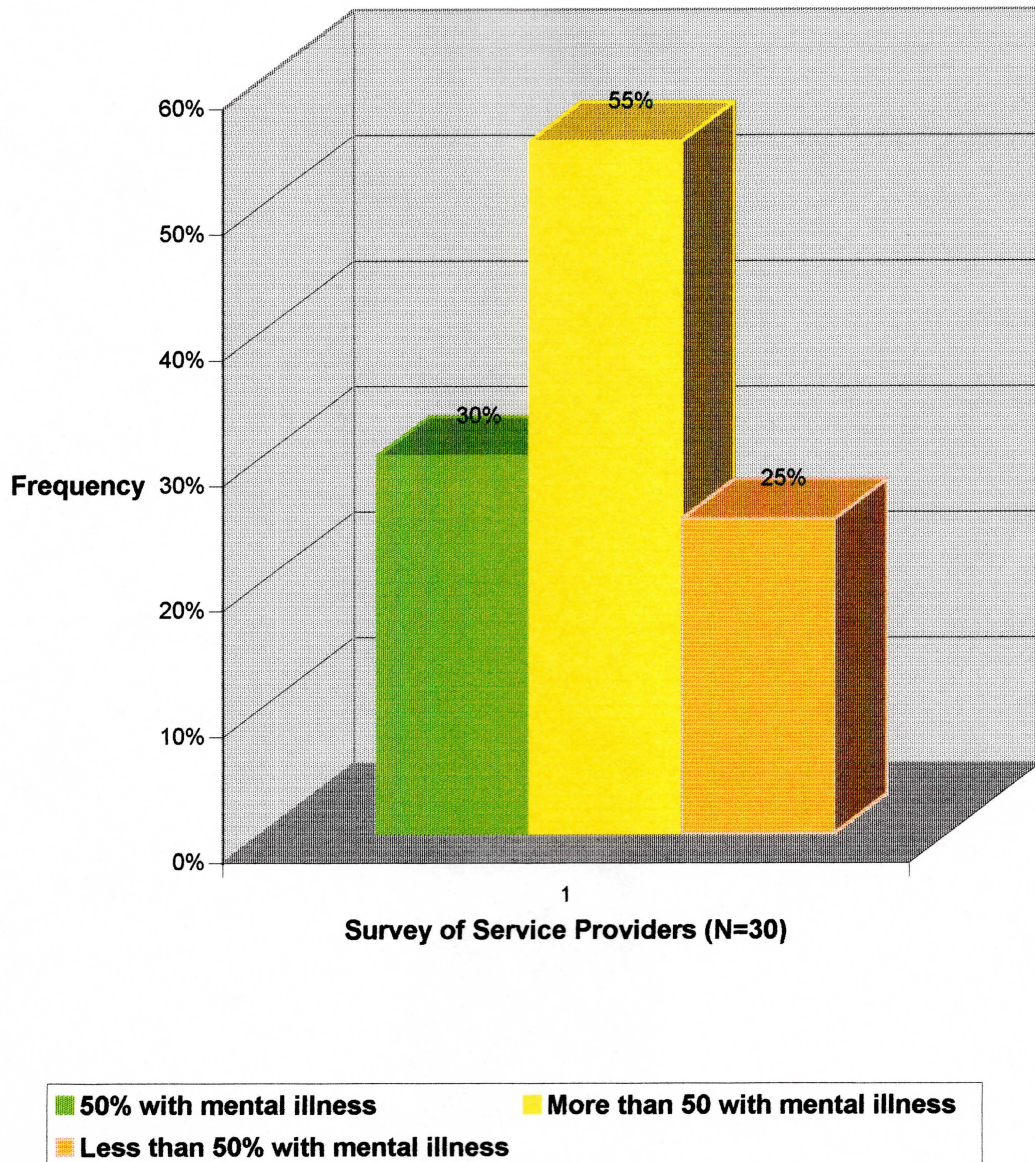


Table 5 - Mental illness affecting Filipino veterans

	Percent of Filipino veterans experiencing	
	<u>Depression</u>	<u>Loneliness</u>
Yes	65	69
No	35	31

The various reasons for experiencing these mental conditions are summarized in Table 6. Among the major causes include separation from family and poor living condition.

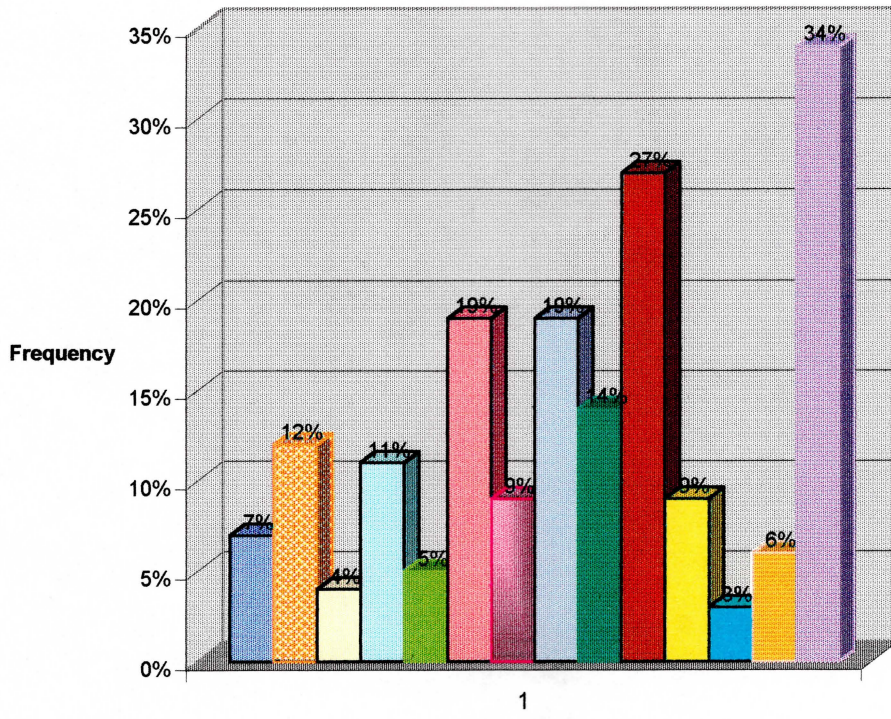
Table 6 - Reasons for experiencing depression and loneliness

	<u>Percent of Veterans</u>
1. Separation from family	48
2. Poor living condition	40
3. Failure to get veterans' benefits	12
4. Being on welfare	10

Interestingly, alcoholism did not appear to be an issue for most of them. 69 percent claimed they do not drink alcohol. Among the reasons given were health and financial considerations.

Figure 4 identifies the type of services needed by Filipino veterans. A high percentage indicates the need for affordable housing, transportation, low-priced groceries and mental health counseling. Surprisingly, despite advanced age, significant numbers of Filipino veterans state a need for employment.

Figure 4. Type of Services Needed by Filipino Veterans



**Service Providers' & Filipino Veterans' Responses
(N=70)**

- Information about available resources
- Social Security supplemental income assistance
- Others
- Immigration/naturalization assistance
- Medical assistance
- Low-priced food and groceries
- Employment
- Transportation
- Mental health counseling
- Support for approval of Equity Bill
- Social and recreational programs
- Burial Services
- Legal assistance
- Affordable housing

6. Discussion

This study confirmed the various reports and articles written about the plight of Filipino veterans in America. For instance trying to survive with only their low Supplemental Security Income as their only source of income is a constant struggle for them. Service providers spend a great amount of time addressing their urgent need for low-priced meals and groceries, as well as, affordable housing. As indicated in the survey, these two are among the major areas they deal with when working with Filipino veterans. Their financial problem is compounded by the fact that they still send a significant portion of their money to their families in the Philippines. Filipino culture places prime importance to the family (Cimmarusti, 1996). This includes making it the sole responsibility of the male head of the household to see that the family is well provided with all the basic necessities in life. In the survey, a large number included employment among the list of services they want to be provided. Apparently, they want to augment their income to enable them comply with this responsibility. This appears also to be the reasons for the increased number of Filipino veterans who seek immigration and naturalization assistance. They want help in accomplishing all the requirements needed to make their family members be able to immigrate to America. Sluzki (1979) describes migration as an act loaded either with negative motivations and connotations, such as, "to escape political oppression", or with positive connotations, such as, "to make a better living". Apparently, many Filipino veterans believe that making their families be able to immigrate have positive connotations. Despite their present difficulties in America, they still see this place as a "land of milk and honey", where opportunities abound compare to where they came from. Hence, for the Filipino veteran, he sees this as one great opportunity where he can really help improve the lives of his family members. He must therefore play the role of the elder, which is strongly emphasized in Filipino culture. As the patriarch, he will pave the way for the rest of the family (Chin,

1993). In addition, migration also makes a strong positive impact on the Filipino veteran himself. This gives him the opportunity to be reunited with his family. As shown in the survey, a large percentage of the veterans experience loneliness for being separated from their families.

This factor, combined with poor living condition, are also the major reasons mentioned by Filipino veterans for experiencing depression. Service providers have indicated in the survey that more than 50 percent of Filipino veterans in the City of San Jose suffer from some form of mental illness. Interviews of the Filipino veterans reveal that depression is the major type of mental illness that a large percentage of them suffer. However, a large number of veterans with this condition appear reluctant to go for treatment.

The stigma attached to mental illness may be a contributory factor. To Filipinos in general, a person seeking mental health services for whatever reasons is immediately labeled as "crazy." Having a "crazy" member in the family is a great source of family shame (Ethnic Populations Task Force Report, Santa Clara County 1992). Because of this stigma, a person in the early stage of mental illness will adamantly refuse the idea of seeking mental health services. It is only in the chronic stage of a member's mental illness that a family is forced to deal with the illness and seek help. Filipino veterans did not consider this factor when asked about this during the interview. Instead, they considered communication problems and lack of transportation to be among the major obstacles in getting needed services. These problems compel emotionally depressed veterans to either seek help from agencies having Filipino-speaking staff or forego treatment entirely.

The survey identified senior centers among the agencies mostly visited by the Filipino veterans. While it is true that these facilities normally employ Filipino-speaking staff, many of these however, provide limited services. For instance, many do not provide counseling servi-

ces. Normally, services are only confined to a limited number of the veterans' basic needs, such as: the need for low-priced meals, free groceries; and, social activities. Only a few offer case management. One of these is Northside Community Center, which as mentioned earlier, provides assistance in matters pertaining to Social Security Supplemental Income, medical/Medicare benefits, affordable housing and other complex issues.

Besides mental health counseling, the need for affordable housing, lack of transportation, and the need for appropriate social and recreational programs have likewise been identified in the list of services that the veterans need. Unexpectedly, of these services, a large percentage of Filipino veterans listed the need for affordable housing in their top priority list. California has been identified as one of the places where the sale and rental of housing are unreasonably high. This has greatly affected almost everyone, particularly the low-income group such as, the Filipino veterans, who have no other sources of income except the check coming from their Supplemental Security Income benefit. As indicated in the survey, a large number of them share a rented room with fellow veterans. Obviously, they found this as the best way to cope up with the problem while waiting for the approval of the Equity Bill. Many of them look at the passage of this bill as their only hope to buy a decent home and improve their conditions of life.

This study carries several limitations. For instance, most of the agencies surveyed are those normally visited by the Filipino veterans. As discussed earlier, these are mostly senior centers that employ Filipino-speaking staff. This creates certain limitations in gaining a wider scope of information especially in regards to the type of services that other agencies provide.

Similarly, the geographic location where the interview survey was conducted posed certain limitations. For instance, confining the interview only among Filipino veterans in the City of San Jose may not fully represent the entire population of Filipino veterans in California

or the nation. Another limitation comes from the use of several open-ended questions. In a number of instances, participants tend to give numerous answers. The interviewer had to write fast, while trying to be as accurate as possible. Often times, the respondent had to be requested to slow down or repeat his answers.

This study confirmed the many struggles and difficulties in which Filipino veterans in San Jose, California are currently experiencing. As indicated in the survey, extreme poverty and frustration over their difficult living conditions, as well as, stress associated with acculturation significantly affected their physical, emotional and mental stability. A large number experience depression and extreme loneliness. In contrast, alcoholism did not become a common issue to many of them due to health consideration and financial difficulties.

This study identified the type of services that Filipino veterans currently need. Results of the survey strongly indicated that most of these have not been fully provided. This study therefore reflects the need to provide them with the appropriate services that are both language sensitive and culturally competent.

The increased number of Filipino veterans who prefer to go to agencies with Filipino-speaking staff, even if these facilities offer limited services, indicate that they will seek help provided by the Filipino-American community or by providers sensitive to Filipino culture. Hence, to successfully work with Filipino veterans, social workers should take advantage of aspects of the Filipino culture to facilitate change. For example, social workers are encouraged to develop a helping relationship with Filipino/a clients because a Filipino/a places value on any act of benevolence he or she receives from somebody. This benevolent act will instill in him or her a sense of indebtedness that will obligate him or her to reciprocate when given the opportunity.

The results of this study should guide social workers on the specific areas that they need to focus. Having gained knowledge of the veterans' needs and concerns, social workers should identify societal barriers, assist them overcome these barriers and strongly advocate for their cause. Admittedly, there is not much research conducted on the Filipino veterans. Hence, more studies should be conducted to look deeper into the roots of the problems and issues confronting this group.

Hopefully, this research project will help increase understanding of these problems and issues and consequently, serves as a guide in gaining support for more culturally and linguistically appropriate services that fully address their needs.

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Appendix A

SUBJECTS: SERVICE PROVIDERS OF FILIPINO WORLD WAR II VETERANS

Interview Questions:

1. How old are you?
2. What Filipino dialects do you speak?
3. What is your educational background?
4. In what areas do you deal with Filipino veterans?
5. What do you think are the reasons that prevent Filipino veterans from getting services they need?
6. What type of problems does Filipino veterans commonly encountered?
7. What type of medical condition do Filipino veterans have?
8. In your opinion, what percentage of Filipino veterans in San Jose has mental illness?
9. What type of services do Filipino veterans need?
10. Do you have Filipinos or Filipino-Americans in your staff?
11. Does your agency provide services in Filipino language?
12. Does your agency provide staff training or workshops addressing issues around working with clients from diverse backgrounds?
13. How often are these workshops or training offered to staff members?

SABINO CLARIZA, JR.

Title: Needs assessment of Filipino World War II Veterans

Interview Questions.

Subjects: Filipino World War II Veterans

1. How old are you?
2. Are you married?
3. Do you have children? How many? Are they all now in the U.S.?
4. What is your educational background?
5. What Filipino dialects do you speak?
6. What is your source of income?
7. What is your monthly income?
8. Is your income enough to cover your monthly expenses?
9. What type of housing do you have? Do you live alone or with someone else?
10. Are you satisfied with your present living arrangement?
11. If you had a choice, what type of living arrangement would you like?
12. What are your hobbies? What do you do for recreation?
13. Do you drink alcohol?
14. What are your reasons for drinking alcohol?
15. What type of alcohol do you drink?

16. How much alcohol do you drink?
17. Do you presently have medical condition? Are you under some type of medication?
18. What type of medical condition do you have? Where do you go for treatment?
19. Are all your medical needs being met?
20. Do you have medical insurance? What type? Does this cover mental health?
21. Do you ever get lonely? What makes you feel lonely? What do you do when you feel lonely?
22. Do you have someone to talk to when you feel lonely?
23. What do you think will help you get out of your loneliness?
24. Do you ever feel depressed?
25. What makes you feel depressed?
26. Do you have someone to talk to when you feel depressed?
27. Do you seek help from agencies when feeling depressed? Which agencies do you go to?
Do these agencies employ Filipinos? Do they provide services in Filipino languages?
28. Do you have problem seeking help from agencies? What type of problems?
29. Are you satisfied with the services that you are getting from these agencies?

30. In general, what types of services do Filipino veterans need?

Appendix B




San José State
UNIVERSITY

**Office of the Academic
Vice President**

**Associate Vice President
Graduate Studies and Research**

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TO: Sabino Clariza, Jr.
38623 Cherry Lane, #149
Fremont, CA 94536

FROM: Nabil Ibrahim, 
Acting AVP, Graduate Studies & Research

DATE: November 16, 1998

The Human Subjects-Institutional Review Board has approved your request to use human subjects in the study entitled:

"A Needs Assessment of Filipino World War II
Veterans in San Jose, California"

This approval is contingent upon the subjects participating in your research project being appropriately protected from risk. This includes the protection of the anonymity of the subjects' identity when they participate in your research project, and with regard to any and all data that may be collected from the subjects. The Board's approval includes continued monitoring of your research by the Board to assure that the subjects are being adequately and properly protected from such risks. If at any time a subject becomes injured or complains of injury, you must notify Nabil Ibrahim, Ph.D., immediately. Injury includes but is not limited to bodily harm, psychological trauma and release of potentially damaging personal information.

Please also be advised that all subjects need to be fully informed and aware that their participation in your research project is voluntary, and that he or she may withdraw from the project at any time. Further, a subject's participation, refusal to participate, or withdrawal will not affect any services the subject is receiving or will receive at the institution in which the research is being conducted.

If you have any questions, please contact me at
(408) 924-2480.

The California State University:
Chancellor's Office
Bakersfield, Chico, Dominguez Hills,
Fresno, Fullerton, Hayward, Humboldt,
Long Beach, Los Angeles, Maritime Academy,
Merced, Poly, Northridge, Pomona,
Sacramento, San Bernardino, San Diego,
San Francisco, San Jose, San Luis Obispo,
San Marcos, Sonoma, Stanislaus

Appendix C

San José State University
College of Social Work

Field Agency's Approval of Research Project Prospectus

Instructions: This form must be completed by all students participating in university related research projects, including S.W. 298 projects. The form should be completed and submitted to the student's S.W. 298 instructor or faculty sponsor. All students are expected to advise their agencies of the content of their research projects as well as plans related to their proposed methodology, data collection, and data analysis activities. Completion of this form does not remove the obligations of students to complete other college, university, or agency research review and approval procedures/policies.

If significant changes are made in the project a new form must be completed and submitted. All S.W. 298 students must complete and submit this form prior to commencing their actual research work with data collection or clients; and in any event before the end of their first semester of study.

The field instructor's or other agency representative's signature certifies that the student has discussed and shared their plans with the agency, and that the agency is not in opposition to the project. The S.W. 298 instructor and/or other college officials should be contacted if there are any concerns, questions, or objections.

Name of Student Gabino Clariza Name of Agency Children's Shelter

Field Instructor's Name MARETTA JUAREZ F.I.'s Telephone # (408) 558-5465

SJSU Instructor's Name Fred Prochaska Semester(s) Fall 1998
Ph.D.

Proposed Topic:

A needs assessment of Filipino World War II veterans

Brief Description of Project - Timelines, Sample/Subjects, and Methodology:

The proposed project involves utilizing standard interview comprising of 30 to 40 opened and closed ended questions. This will be administered between January and February, 1999 to 40 Filipino veterans and 30 service providers.

Signature of Student [Signature] Date 11-5-98

Signature of Field Inst./Agency Rep. [Signature] Date 11-5-98

Signature of 298 Instructor/College Rep. _____ Date _____

Appendix D



San José State
UNIVERSITY

College of Social Work

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Agreement to Participate in Research

Responsible investigator: Sabino Clariza, Jr
Title of Protocol: A needs of assessment of Filipino World War II veterans

I have been asked to participate in a research study assessing the physical, emotional and mental health needs of the Filipino veterans to determine whether these needs are fully met by the current services available to them. I will be asked to respond to interview questions during our free time either at the dining hall or recreation room of the Northside Community Center in San Jose, California between January and February of 1998.

There are neither anticipated nor foreseeable risks or discomfort to me.

There is no compensation and no discernible benefits other than awareness on the part of service providers of the gap, if any, in the services provided to the Filipino veterans.

I understand that the results of the study may be published but that no information that could identify me will be included - all information obtained from me will remain confidential and anonymous.

Questions about the research may be addressed to Sabino Clariza, Jr, at (510) 795-6692. Complaints about the research may be addressed to Dr. Fred Prochaska at (408)741-2095, Chairperson of this project. Questions about research, subjects' rights, or research-related injury may be presented to Nabil Ibrahim, Ph.D., Acting Associate President for Graduate Studies and Research, at (408) 924-2480.

No service of any kind, to which I am otherwise entitled, will be lost or jeopardized if I choose not to participate in this study.

My consent is given voluntarily. I understand that I may refuse to participate in this study or any part of the study. If I decide to participate in this study, I may withdraw at any time without prejudice to my relations with San Jose State University or any other participating institutions.

I have received a signed and dated copy of the consent form.

*The signature of a subject on this document indicates agreement to participate in the study.

*The signature of a researcher on this document indicates agreement to include the above named subject in the research and attestation that the subject has been fully informed of his or her rights.

Signature _____ Date _____

Investigator's Signature _____ Date _____