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They Keep Us Alive — But Who's Caring for Them? Filipina/x/o Immigrant Nurses in San Francisco's Northern Peninsula

Author

Hemedez Avenido, Sabrina Ashley

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They Keep Us Alive — But Who's Caring for Them?

Filipina/x/o Immigrant Nurses in San Francisco's Northern Peninsula

Written by Sabrina Ashley Hemedez Avenido, 2025 Cal-in-Sacramento Fellow

Image from *California Nurses Association/National Nurses United*

To protect the identities of the interviewees, all names presented in this Op-Ed are pseudonyms

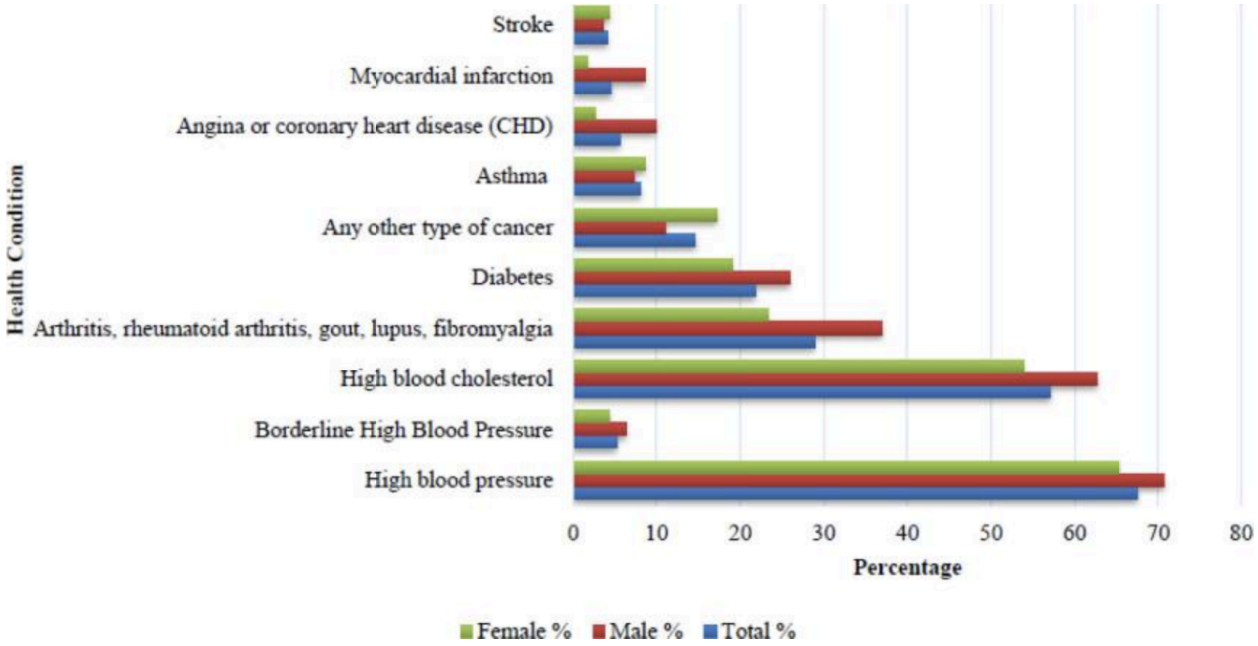
Eating banana cue for lunch and watching over her kids, Vivian, a hospice care nurse based in South San Francisco mentioned that her days are filled with seeing 3-4 patients each day ranging from South San Francisco all the way to Menlo Park. With only 6 nurses on call, she juggles visiting patients around the peninsula, charting, squeezing her lunch break in between her 10-45 minute commute, picking up her kids from school, and ensuring food is on the table while her husband is on the night shift.

> There's a painful irony in how Filipino immigrant nurses, who hold up our healthcare system, often struggle to take care of themselves.

While Filipinos make up 4% of the nursing workforce, the mortality rate of Filipino nurses was astoundingly disproportionate by 24% during the Covid-19 pandemic. Why is it that the healthcare systems which they have dedicated to uphold are no longer taking care of them? The experiences of five Filipino immigrant nurses in the Peninsula (Daly City, South San Francisco, San Bruno, Pacifica, and San Mateo) illustrate the nuances behind how working conditions have impacted their ability to take care of themselves while they devote 40+ hours of their week to take care of others.

The Physical Impacts on the Body

For Mark, a night shift response nurse from San Bruno, five hours of sleep a night is the norm. Whereas, Esther, a day shift outpatient nurse from Pacifica, easily gets 8-12 hours of sleep each night. Throughout interviews, night shift nurses tended to have 3-7 less hours of sleep in comparison to day shift nurses. According to the Institute of Medicine, lack of sleep can lead to increased anxiousness, moods of depression, cardiovascular disease and hypertension, diabetes, and obesity. Cardiovascular disease, hypertension, and diabetes are among the top five health issues in Filipino Americans today.



Journal of Community Health — illustrating the percentage of reported health conditions in the Filipino community by total (2018).

"But the main cafeteria, where they cater to everyone, the staff and families, it's pretty healthy, actually, but they're quite expensive," insists Mark. A standard meal at the hospital can cost up to $20. Multiply that by 3 for the work day, and Mark has to pay close to $60. That's roughly $180 in a week. Jonathan built on this concept of nutrition as he "just wants to go to sleep, so it's kind of hard to prioritize [his] diet." Known as the Filipino American Health Paradox, Filipino registered nurses shoulder as frontline workers, while also suffering from these aforementioned comorbidities. Working long intensive hours makes it even more difficult for Filipino nurses to prepare healthier foods to eat throughout the work day. In addition, they must choose between opening their wallet or skimping out on sleep just to have themselves a nutritious meal.

Emotional Impact on the Mind

Tending to the Bay Area's marginalized communities, these Filipino nurses are also called to take care of low-income, undocumented, and unhoused patients. Esther, an outpatient nurse in the adult urgent care unit, works in San Francisco and emphasized that "the emotional [demand] is the hard part" due to seeing "a lot of patients in pain." For those without shelter, all she can do

is refer them to a social worker and point them to where they can go for the night. Jonathan works at a city hospital where most patients that walk-in don't have insurance and are undocumented.

Previously working in the ICU, Mark is now a rapid response nurse, treating patients with gunshot wounds to code blues that require immediate medical intervention. When asked about how he manages constant emotional distress, he sighs in relief. "I have the best coworkers around. If one person takes a call, then the other one takes another call. They're not just my coworkers. They're my friends."

As a hospice care nurse, Vivian is also tasked with the emotional responsibility of comforting grieving families. Having the maximum number of patient visits a day be four is crucial to protecting the mental health of the hospice care nurse.

Mental health also continues to be an area of concern for Filipino communities as another study at Frontiers in Public Health revealed how hospital working conditions during the Covid-19 pandemic negatively impacted the nurses' emotional health. Moreover, Filipino nurses have to battle with cultural sentiments such as *hiya* (shame) and *amor propio* (saving face to main social acceptance) when accessing mental health resources.

Variable	%						
	Overall sample (N = 2,609)	Chinese (n = 640)	Asian Indian (n = 574)	Korean (n = 471)	Vietnamese (n = 513)	Filipino (n = 265)	Other Asian (n = 146)
Predisposing variable							
Age							
18–39	48.3	47.0	68.6***	38.9***	39.0***	42.2***	47.9**
40–59	31.2	27.7	14.3***	40.2***	38.4***	41.4***	39.7**
60+	20.5	25.3	17.1***	20.9***	22.4***	16.3***	12.3**
Female	55.2	57.0	39.9***	60.5	57.5	70.0***	54.8
Not married	33.4	36.3	25.2***	25.7***	41.7	40.3	36.6
< high school graduation	18.6	14.2	7.6***	20.3**	36.3***	16.2	20.0
Foreign-born	90.8	90.1	96.7	93.2	89.1	83.0	83.6
Limited English proficiency	62.4	71.7	44.8***	79.2**	72.9	35.0***	49.3***
Mental health need							
Mental distress (K6 ≥ 6)	44.2	38.9	41.0	43.8	54.6***	41.6	48.9*
Self-rated mental health (fair or poor)	8.6	13.7	5.1***	9.2*	7.2***	6.5**	7.5*
Enabling variable							
Prior use of mental health counseling	9.7	12.5	6.4***	10.0	9.0	11.9	7.5
Outcome variable							
Willingness to use mental health counseling	67.1	77.8	57.8***	59.2***	74.7	65.1***	59.3***

Note. χ^2 analyses were conducted by comparing each ethnic group with Chinese

* $p < .05$

** $p < .01$

*** $p < .001$

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PLOS One — illustrating rates of mental health, prior use, and willingness to use mental healing counseling across Asian American communities, including Filipino (2024).

Being at Odds with Time While Taking Care of Themselves

As they are usually scheduled to either work three 12-hour shifts or five 8-hour shifts each week, exercise has grounded all five nurses whenever they get the chance. Vivian enjoys walking on trails with her husband, Esther goes to yoga 3 times a week, and Mark makes it a point to go to the gym before his night shift. He even insists that he feels worse if he was unable to exercise before going into work.

However, prioritizing taking care of themselves is not always an easy choice. Contrastingly to the other four nurses interviewed, Bella was previously juggling another job in addition to being a nurse. It was not until she quit her second job and sacrificed an extra source of income where she was able to make time for herself.

Labor Exploitation and Its Impacts on Health

With cuts to Medicare and Medicaid, those that uphold healthcare systems will be forced to combat medical crises with significantly less resources. When asked, "What changes would you like to see in your workplace to better support your health?" Both Vivian and Bella wish for upper management to step in to increase staffing. As an in-patient nurse, Bella is pressured to treat each patient on the floor with only 6 other nurses. "Sometimes recognition is missing. We don't have enough support from management." Less staff calls for more physical and emotional distress which then contributes to their overall well-being at jeopardy in the long run.

Vivian's union continues to fight for basic financial work benefits such as retirement plans. Without appropriate staffing and financial resources, Filipino nurses continue to be exploited. As a result, their own health suffers from the very systems they help uphold. Who then will take care of us?

> Taking care of those that take care of us goes beyond the physical day-to-day. It's also the lasting impact of being the backbone of the U.S. healthcare system.

I urge California legislators and Bay Area peninsula local officials to stand in solidarity with the 63,000+ Filipina/x/o nurses and 19,000+ caregivers—many of whom are their own constituents. Now more than ever, healthcare workers, administrators, and policymakers must work together to not only protect the well-being of patients, but also the well-being of those that keep our hospitals and health services running.