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Her dad battled illness as an immigrant. She created an app to link Latinos to health care

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Story Summary

- Jenny Di Capua, of Armonk, saw health disparities for Latinos in New Rochelle and created Salud por Todos, an app and website, to connect them to health care providers.
- Latinos are overrepresented in the uninsured U.S. population.
- New Rochelle, New York, was one of the first U.S. epicenters for coronavirus in 2020.

chorizo and blood sausage at her family's asados, Argentinian barbecues. Family and friends would bustle every which way, children running between them.

Up the narrow staircase into the kitchen, she'd enjoy her grandmother's empanadas.

The 17-year-old high school senior's childhood memories at her grandmother's home differ starkly from her family's experience there when they arrived from Argentina in 1970.

Inside their small apartment, her father John spent nearly three months isolated with whooping cough. It's a familiar story for many in the working-class Latino neighborhood who lack access to health care.



Jenny Di Capua, a senior at Sacred Heart Greenwich and her dad, John Di Capua, M.D., are pictured in the backyard of the home he grew up in in New Rochelle, Dec. 3, 2022.

Decades later, the COVID-19 pandemic showed that still rang true when <u>New</u> Rochelle became one of the first U.S. epicenters.

In response, Jenny developed an app and website, launched this year, to connect Latino communities to medical providers regardless of immigration status, English proficiency, or whether or not they had insurance.

<u>Salud por Todos</u> — "Health for All" in Spanish — now has thousands of providers listed in the New York metropolitan area. It highlights persistent barriers Latinos face accessing adequate health care.

"It really is not about science research," Jenny said. "It's really about looking back on my past."

Help from abroad Haiti mobile clinic up and running with boost from Rockland groups, international agency

NY Health commissioner departs <u>NY Health Commissioner Dr. Mary Bassett</u> to resign, return to Harvard. What to know

Fleeing Argentina to New Rochelle

In 1970, Jenny's grandparents Carmela and Federico Di Capua, with Jenny's father John Di Capua and his brother in tow, fled Argentina's dictatorship. At 6 years old, John arrived in shorts to a snowy John F. Kennedy International Airport in December from his native Buenos Aires, where it was summer. The family brought one suitcase, John said.

Moving to New Rochelle, Carmela was a seamstress in a sweatshop, while Federico worked in a plating factory, jobs they had in Argentina. Federico's work putting metals on objects caused him to contract pulmonary illnesses that later proved fatal, John said.

The family bought a condemned, narrow two-story house with money they saved. They had four apartments, three of which they rented. A one-bedroom unit, with John and his brother on the living room pullout couch, became theirs.

he had strep throat.



John Di Capua, M.D., is pictured in what was his family's old living room where he and his brother slept growing up in New Rochelle, Dec. 3, 2022. The apartment is now rented to another tenant. **Show less** MARK VERGARI/THE JOURNAL NEWS

"All day long, you feel like you're choking," he said. "You're coughing because you can't breathe."

A recommendation from a friend's family connected him to a local doctor, an immigrant from Italy. Upon coughing in his office, John said, the doctor diagnosed him with whooping cough, or pertussis, a highly contagious respiratory virus known for the high-pitched noise people make as they struggle for air.

John spent almost three months in the living room, which they converted into another bedroom for him to isolate. He poured over an encyclopedia collection his father bought. When he returned to school, he showed his newfound knowledge in algebra. His teacher moved him out of a low-tract class, and in with advanced students, he said.

John attended New York City College, and later Mt. Sinai Medical School, in a program to train doctors. Federico died before he saw John graduate and become an anesthesiologist. Carmela lived in the family's apartment until she died in 2016.

John and his wife, Christine, also of New Rochelle, recounted those experiences to their four children, including their youngest Jenny, who grew up in Armonk.

'Foundational things in the health care system are lacking'

When Jenny's science research program at her Catholic girls school in Connecticut assigned a project her freshman year, she thought about her grandmother's neighborhood. It was February 2020, days before cities, states and the federal government issued COVID-19 lockdowns.

In the Di Capuas' New Rochelle, many couldn't afford to stay home because of their jobs in essential services. New Rochelle became one of the nation's first community outbreaks. Working-class, immigrant Latino communities were often hit the hardest.

"It's taught me a lot about how very foundational things in the health care system are lacking," Jenny said. "I used to assume that this type of information was publicly available, and that the gaps aren't as large as they are."

Latinos are nearly twice as likely to be hospitalized and die from COVID-19 compared to non-Hispanic white people, U.S. Centers for Disease Control and Prevention <u>data</u> shows. Latinos and other communities of color also faced difficulties getting vaccinated early in the pandemic, as <u>The Journal</u> <u>News/lohud.com reported</u>.



Pamela Quintero, Outreach Enrollment Specialist for the Open Door Medical Center in Ossining, hands Covid-19 home tests and an informational flyer to Jorge Belloso of Ossining Feb. 1, 2022. The Open Door Medical Center is handing out Covid tests and encouraging residents to get vaccinated in several communities of color with low vaccination rates. Along with the outreach event in Ossining, they will be holding similar events in Sleepy Hollow and Port Chester. **Show less** SETH HARRISON/THE JOURNAL NEWS

These communities already have less access to health care services, often due to language barriers, income and immigration status, research indicates. Latinos had the second highest uninsured rate of any racial or ethnic group in the U.S., just behind Native Americans and Alaska Natives, the Census Bureau reported in a November <u>brief</u> of 2021 American Community Survey data.

Even with insurance, Hispanic adults with limited English proficiency spend less on health care than non-Hispanic adults with English proficiency, according to a 2021

"It's showing us that language barriers really have impacted and curtailed access to care for many Latino communities," said Dr. Jessica Himmelstein, the lead author of the study and a former Cambridge Health fellow.

Before medicine, Himmelstein immigrated as a child with her family from Costa Rica to South Carolina. She remembered translating for her mother at the doctor's office — an experience shared by many children of immigrants.

Adequate communication between patient and medical provider is key, said Himmelstein, now a primary care physician at New Horizon Family Health Services in South Carolina.

"If we can't do that," she said, "then we're not giving them access to the medical care that they need."

Building a community's medical safety net

As the pandemic wore on, Jenny created an Excel spreadsheet. She called providers to make sure they fit criteria she set out in surveys of over 70 Latino and non-Hispanic white people when asked to find a doctor in Stamford, Connecticut, as she detailed in her final class report.

Based on results, Jenny checked whether doctors spoke Spanish, whether they accepted uninsured people or accepted cash, and if they required people to show ID, which can be a barrier for people who are undocumented.

She manually entered more than 6,300 providers, ranging from internal medicine specialists to obstetricians.

This included Open Door Family Medical Center, a nonprofit federally-qualified health center, or FQHC, which has clinics in Westchester and Putnam counties. FQHCs are unique in providing health care services to underserved communities even if people don't have insurance or lawful immigration status.

Notably, the centers use a sliding fee scale that adjusts costs depending on a person's income and family size.



Andrea Ruggiero, 37, right, vice president of community health at Open Door Family Medical Center and her sister, Grace Battaglia, 34, the director of marketing at Open Door outside the center in Ossining Nov. 5, 2019. In the early 90s, the sisters arrived as young kids with their parents from Ecuador and were first introduced to Open Door in Ossining for their checkups and sick visits. **Show less** ^ TANIA SAVAYAN/THE JOURNAL NEWS

Open Door relies on trust in the community, said Andrea Ruggiero, executive vice president of community health, in an interview at the health center's administrative office in Ossining, a predominantly Latino village.

Many of its staff started as patients. Ruggiero and her sister, children of immigrants from Ecuador, grew up going for checkups at Open Door <u>before they became</u> <u>executives</u>.

"It's that comfort level that you can't advertise," Ruggiero said. "That's really having someone who is trusted in the community tell you that their experience was so positive that someone else will obviously benefit from that level of care."

Family ties

Jenny said she'd like to make sure information is available to prospective patients in their search for care.

Ultimately, she believes clear information around language, insurance and cost should be available to any patient. That requires policy change, she added.

Jenny is now applying for universities next year. She aims to pursue a business degree and continue work around access to health care.



A photo of Carmela Di Capua from New Rochelle, mother of John Di Capua, M.D. and grandmother of Jenny Di Capua. COURTESY OF JOHN DI CAPUA

bedroom by the family living there. A picture of Jenny's grandmother Carmela, holding a neighbor's baby in her kitchen, remains on the wall.

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