



TESTIMONY

Presented by

**Donna M. Corrado, PhD
Commissioner**

on

**Oversight: Serving A Diverse Aging Population-Improving Immigrant Seniors' Access to
New York City's Senior Services**

before the

**New York City Council
Committee on Aging and
Committee on Immigration**

on

**Monday, November 17, 2014
10:00 A.M.**

at

**250 Broadway, 14th Floor Committee Room
New York, NY 10007**

Good morning, Chairpersons Chin and Menchaca. I am Donna Corrado, Commissioner of the New York City Department for Aging. I will provide an overview of immigrant seniors in NYC, and how they can access senior services.

Overview

A recent report by the Center for an Urban Future provides sobering information concerning the challenging circumstances faced by older immigrants in New York City. The report states that in the next two decades, the number of City residents 65 and older is expected to increase by 35 percent, going from approximately 998,000 today to 1.3 million in 2030. While some initial steps have been taken to plan for this profound demographic shift, we must pay heed to an especially vulnerable subset of the city's senior population: those who were born in a foreign country and continue to reside here as documented or undocumented immigrants. The report illuminates the various dimensions of this issue. For example:

With 463,000 older immigrant residents age 65+, New York has by far the largest foreign-born senior population of any city in the U.S.:

- Immigrants currently make up 46 percent of the city's total senior population, and might become the clear majority in as little as five years.
- Nearly two thirds of immigrant residents age 65 and older have limited English proficiency.
- Nearly 130,000 immigrant seniors in the city, or 24 percent of the total, are living in poverty, compared to 69,000 or 15 percent of native-born seniors.
- Older immigrants comprise 46 percent of all seniors in New York, but 65 percent of all seniors living in poverty.
- Immigrants receive far fewer benefits from traditional entitlement programs. For example, 31 percent of immigrant seniors in NYC are not receiving Social Security benefits, compared to only 16 percent of eligible native-born seniors.

- The data does not take into account the number of undocumented seniors that go uncounted each year.

How DFTA Helps Immigrant Seniors Access Senior Services

DFTA understands that New York City's older adult population is ethnically, culturally, and economically diverse, with broad and wide-ranging service needs. DFTA's mission recognizes this diversity and the agency's responsibility to ensure equitable access and service provision to older persons of every ethnic, racial, religious, and cultural demographic.

As part of our mission, in compliance with Executive Order 120 in 2009, DFTA's Language Access Initiative ensures that seniors with Limited English Proficiency receive free language and culturally-appropriate assistance from our direct service units, such as Senior Employment Services, the Alzheimer's and Caregivers Resource Center, the Elder Abuse Resource Center, the Grandparents Resource Center and the Health Insurance Information Counseling & Assistance Program.

The agency also has access to telephonic interpretation through Language Line that provides seniors with the assistance they need in the language they speak. In addition, DFTA brochures, such as The Benefits for Older New Yorkers guide, our Emergency Go Bag checklist, and the Complete Guide to Health Care Coverage for Older New Yorkers, as well as our many nutrition guides, are published in multiple languages, including English, Spanish, Chinese, Russian and Korean. And, as is the case with all New York City agencies, the information that resides on the DFTA website can be translated into a multitude of languages.

In addition, DFTA standards require that Department-funded senior centers employ at least one person fluent in the language(s) spoken by over 30% of its participants. As a result, our centers and NORCs provide services in a culturally competent way, such as staffing appropriately for language needs, offering ethnic-style meals and activities that interest various ethnic groups (examples: Chinese opera, fan dancing, Latin-dancing, cultural music, tai-chi) as well as specific immigrant services such as ESL and citizenship classes and legal services.

As examples, JASA Brookdale, in Queens, hired several Russian speaking staff members, including the assistant director, to meet the needs of the surrounding community. RAIN Boston Road, in the Bronx, provides assistance to immigrant seniors when filling out applications for benefits. Krakus Senior Center, in Brooklyn, has an immigration program with experienced staff and a lawyer for its predominantly Polish consumer base. Manhattan's Vladeck Cares NORC offers Chinese and Spanish computer classes; and Queens' HANAC NORC at Ravenswood Houses offers diabetes and nutrition classes in Spanish.

All of our centers also serve meals that not only meet City and State nutritional standards, but strive to be culturally relevant to participants. Kosher meal programs are available at senior centers in all five boroughs. A number of senior centers in Brooklyn, Manhattan and Queens serve meals that are culturally appropriate to their Chinese constituents. In Flushing, Queens, Korean Community Services of Metropolitan New York, Inc. provides Korean meals at the DFTA senior center they operate. In the Bronx, several senior centers serve Spanish and Latin American fare, as the preference of their constituents. Other senior centers offer Indian, Italian, Southern and Caribbean meals to meet constituents' needs.

To meet the health and well-being of many older, frailer immigrant New Yorkers, home delivered meals (HDML), offered through DFTA funded case management programs, are reviewed in terms of nutritional standards as well as cultural relevance. More than 22 percent of meals delivered citywide are kosher. Clients living in Lower Manhattan and Flushing are offered Chinese meals; clients in Greenpoint, Brooklyn are delivered Polish meals; and clients residing in Bayside, Queens receive Korean meals. The Agency's 2013 HDML client survey findings indicated that an overwhelming majority of seniors – 89 percent – reported their satisfaction with the quality of meals delivered to their homes. Notably, 92 percent of clients stated that their meals related to their cultural or ethnic background.

In addition to food insecurity, DFTA is working to stem the tide of poverty faced by immigrant seniors by helping them sign up for benefits and entitlements. Immigrant seniors are less likely to access existing government services and less likely to be aware of services available to them due to mistrust of government, or

because the information is not available in their language, or because they mistakenly assume they don't qualify. DFTA is making great effort to create awareness of programs such as Supplemental Nutrition Assistance Program, which further assists seniors with food insecurity; the Senior Citizen Rent Increase Exemption (SCRIE) program, which helps limit rent increases for seniors; Access-a-Ride, which provides transportation services for mobility-impaired people; and the Home Energy Assistance Program (HEAP), which helps low-income seniors pay for their utility bills.

Our Community Outreach team can and has attended events that are targeted to Spanish and Chinese speaking audiences, offering presentations on benefits and entitlements for the elderly as well as DFTA's services/programs to groups of immigrants. With assistance from MOIA, where translation services were provided, our Outreach team has been able to offer presentations to immigrant groups who speak Bengali, French Creole, Hindi and Arabic. In addition, DFTA's Health Insurance Information Counseling Assistance Program (HIICAP) provides multi-lingual assistance and information across the city's diverse populations.

When we talk about our immigrant seniors, we must also address undocumented immigrants who feel especially isolated because of the stigma often associated to their status. Mayor de Blasio's Municipal ID program will help thousands of older immigrants access vital services. DFTA has agreed to perform outreach to help provide undocumented immigrants with the Municipal ID card.

Additional resources are also being made available to support victims of elder abuse. The 2011 NYS Elder Abuse Prevalence study found that 9% of all New Yorkers aged 60 and over were the victim of abuse or neglect within the year prior to the study. In many cases, accounts of elder abuse go unreported and a language barrier is one reason why many of these victims fall through the cracks. DFTA's current elder abuse RFP addresses this barrier by requiring contracted providers to establish strong linkages/subcontracts with community-based organizations with special knowledge and experience in working with various ethnic and cultural groups, including immigrants, vis-à-vis elder abuse and other issues.

We have also begun working with seniors of all backgrounds on various mental health needs. For example, under a federally-funded Superstorm Sandy Social Services Block Grant for Sandy Mobilization Assessment, Referral and Treatment for Mental Health, DFTA is assessing both social service and mental health needs of older adults impacted by Hurricane Sandy. Many of those impacted are immigrants and we are poised to be able to address their mental health needs, free of charge with the help of a multi-lingual team (Spanish, Cantonese, Mandarin, Russian, Japanese) that can provide evidence based mental health services.

Understanding that the feeling of isolation could have a harmful affect on the mood of our immigrant senior population, DFTA is working to help this aging demographic become contributing members of the City through its job readiness program. For over three decades, DFTA's Senior Employment has been providing services for employment and training, to the eligible senior immigrant who can show permanent residency card (green card) or a work authorization card for those who are non-citizens. They all need their Social Security Card to work. The participants enrolled in the program receive the following services:

- Career counseling,
- computer skills,
- job readiness,
- job referral and placement,
- paid training in high-demand occupations(Home Health Aide and Security)
- referral to training in community assignments,
- participation in WIA Workforce Centers,
- and other general support needed to enhance the ability to gain employment.

Conclusion

Thank you again for this opportunity to provide testimony on meeting the needs of our immigrant seniors. I applaud the leadership of Chairperson Chin and Chairperson Menchaca in ensuring that New York City continues to care for our diverse aging population. I look forward to continuing the partnership with the New York City Council in these efforts. I am pleased to answer any questions you may have.



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New York City Council Oversight Hearing:

Serving A Diverse Aging Population: Improving Immigrant Seniors' Access to New York City's Senior Services

November 17, 2014 at 10:00am

14th Floor Committee Room at 250 Broadway, New York, NY 10007.

Thank you, Council Member Chin, Council Member Menchaca and the Committees on Aging and Immigration for inviting us to speak today.

My name is Rena Resnick, and I am the Communication Manager at Metropolitan Council on Jewish Poverty.

We applaud the City Council for its expansion of its Age Friendly Initiative, as well as for improving access to senior centers and encouraging the development of more quality, senior housing accommodations.

For more than four decades, Met Council has supported and championed families, seniors and adults living in poverty and near-poverty. Met Council provides immediate assistance to New Yorkers in crisis and creates pathways to self sufficiency through the following programs: America's largest kosher food pantry system, emergency social services, family violence services, home repairs, homecare services, benefits enrollment and outreach, and affordable housing. Our grassroots Jewish Community Council network provides support to families in their neighborhoods—right where they live.

In the fight against poverty, we serve immigrants, seniors living on fixed incomes, the un- and underemployed, and all others in need. As an organization founded on Jewish values, we serve everyone with dignity and empathy, regardless of race, ethnicity or religion.

We leverage government contracts with privately raised funds from individuals and foundations to increase the impact of our services.

Our culturally sensitive professionals provide an array of services to insular and immigrant clients utilizing a nuanced understanding of the clients' community norms to move them from crisis to stability.

Since Met Council's inception, caring for senior immigrants has been core to Met Council's mission. Many of our clients work their entire lives, but when they become too frail to work,

their lack of a deep and wide enough safety net makes it difficult for them to remain safely in the homes that they love.

To address these needs, just this month, Met Council created its first geriatric services manager to coordinate all our services offered to seniors to ensure that they are the most effective, efficient and compassionate.

To ensure that this vulnerable population is served with dignity and is educated on all services they are entitled to, we work diligently in our outreach efforts.

During a time when tailored outreach is increasingly relying on social media and email, we have found that reaching the senior immigrant population requires a different approach.

In order connect with senior immigrants and help inform and enroll them into available benefits, we have utilized a few simple, but critical tools, including: traveling to the neighborhoods where seniors live, creating initial pre-screening questions in clients' native languages, utilizing volunteers and creating comprehensive follow up plans.

Below, I have highlighted three programs we have successfully promoted to the senior immigrant population.

- **Project Metropair – City Council-Funded free home repair services for seniors**
Our free handyman service, Project Metropair, funded through the generosity of the City Council, fixes minor home repairs enabling frail seniors to age safely in place. To reach seniors in Flatbush and in Shorefront, we deployed volunteers to pre-screen seniors. During the fall, Met Council distributes more than 300,000 pounds of kosher food. Unfortunately, the need is so great that in many communities, there are lines of people waiting for food.

While on line, our volunteers asked the seniors the three pre-screening questions. Many of these volunteers did not speak Russian, but because our questions were typed in Russian, we were able to communicate with the seniors. This outreach tool successfully informed seniors of a service and collected important information to follow up with eligible clients to schedule visits from our handymen.

- **SNAP (Supplemental Nutrition Assistance Program)**
Many seniors do not know that they are eligible for SNAP. In Boro Park, one of our clients owned a butcher shop. Every Friday, he saved some meat to provide for the poor so that they too could honor the Sabbath. Ironically, now that he has retired, he found that he could no longer afford kosher protein. His case worker informed him of the benefits of SNAP and immediately enrolled him. But many more senior immigrants do not have the fortitude to meet with social workers and learn about these programs.

To reach the other senior immigrants, Met Council has developed a pre-screening Smartphone application — an App. Our SNAP specialists and volunteers are deployed to Greenmarkets around the City, including: in the Bronx, Boro Park, Union Square and

Downtown Brooklyn We are able to pre-screen on the spot, and we can direct eligible seniors to one of our local councils. Through this aggressive outreach, we have been able to enroll more than 11,000 families, many of which included seniors.

- **SCRIE (Senior Citizen Rent Increase Exemption)**

This summer, when the City Council and Administration increased the income qualification for SCRIE, Met Council held four SCRIE Enroll-a-Thons during the month of August in order to assist clients enroll into the program and avoid future rent increases. Many of these clients were newly eligible for the benefit. We held these events at our senior affordable housing buildings in Manhattan. In coordination with the City's Department of Finance, our housing site staff and volunteers we were able to enroll 70 seniors into the program by bringing the application to them and by creating a document checklist in both English and Russian.

In conclusion, Met Council could not continue providing critical social services to thousands of needy New Yorkers each year without the vital partnership of New York City Council. We deeply value your leadership and partnership and look forward to working together to help the needy throughout the New York area.

Thank you. I would be happy to take any questions you have at this time.

Testimony by New York Legal Assistance Group (NYLAG)
Before the Committee on Aging and the Committee on Immigration
Serving A Diverse Aging Population: Improving Immigrant Seniors'
Access to New York City's Senior Services

November 17, 2014

Good afternoon and thank you for the opportunity to speak to the Committees on Aging and Immigration about the needs of New York City's diverse aging population. I commend the Council for holding this hearing and appreciate all the work you are already doing to increase immigrant seniors' access to City services. My name is Helen Drook, and I am a Supervising Attorney at the New York Legal Assistance Group (NYLAG). NYLAG is a nonprofit law office dedicated to providing free civil legal services to low-income New Yorkers. NYLAG serves immigrants, seniors, veterans, families facing foreclosure, renters facing eviction, those in need of government assistance, children in need of special education, domestic violence victims, persons with disabilities, patients with chronic illnesses, low-wage workers, members of the LGBTQ community, Holocaust survivors, and others in need of free legal services.

Last year, we handled 42,000 cases for New York residents, over half of whom were immigrants, and more than a quarter of whom were people over age 60. Due to the increasing lack of affordable housing, changes in public health care policies, high poverty rates, and the growing number of frail and disabled seniors living alone, seniors need access to City services more than ever to allow them to age safely in their homes and communities. This is especially true for immigrant seniors, who often face even greater barriers, such as undocumented status and a lack of English proficiency. At NYLAG, we work with immigrant seniors on a daily basis who would benefit from

an increase in City assistance and services tailored to their unique needs. Based on our experience, we have several suggestions to improve the City's ability to reach this vulnerable population.

Perhaps the greatest overarching problem is the lack of language appropriate services for immigrant seniors. According to Census data, two thirds of the City's 463,000 immigrant seniors have limited English proficiency, while nearly 200,000 live in linguistically isolated households. Without access to translators or interpreters, the result can be a failure of seniors to access the public services and benefits to which they are entitled – leading to hunger, poor health, homelessness, isolation, and depression. While we applaud City agencies for providing printed materials in the six most common languages, we believe there is an even more critical need for increased spoken language capacity at City agencies, senior centers and help lines. We propose expanding the City's capacity to provide language appropriate services through a program modeled after NYLAG's own Language Access Volunteer (LAV) Program. Under this program, pre-screened multilingual volunteers sign up to provide interpretation on behalf of NYLAG clients at specific dates and times, which are then cataloged in a shared calendar system. NYLAG staff members in turn schedule appointments for their low-English proficient clients during appropriate time slots and are able to access free on-demand interpretation services. In a similar City program, immigrant seniors could have the ability to sign up for appointments with volunteer interpreters either on the phone or in person when they interact with City agencies. These volunteers would be language-tested and trained on the issues about which they would be providing translation to ensure ease of communication. Because City agencies often literally deal with life-or-death issues, it is vital that immigrant seniors and City representatives are able to communicate without confusion. Expanded language capacity would allow the City reach many more immigrant seniors in need and offer assistance before their situations become emergencies.

Increased language appropriate outreach to immigrant enclaves could also help older

immigrants learn about and obtain the public benefits to which they are entitled. The Recession forced many seniors living on fixed incomes to dip into their meager assets in order to meet basic living expenses, resulting in a decrease in their long-term financial stability. Immigrant seniors, in particular, are often unaware of their eligibility for public benefits, such as healthcare and food stamps. A USDA-sponsored study found that over half of eligible non-participant households in New York City believed they were ineligible for SNAP benefits, and almost a quarter of those who are eligible do not receive benefits. The problem is exacerbated for immigrants without legal status, who are likely to be unaware that they are eligible for some benefits even though they are undocumented. Regardless of immigration status, targeted outreach to immigrant seniors about their eligibility for these programs would allow more of them to age in peace, knowing that their food is secure and their medical bills can be paid. City agencies, including HRA, should make sure that this information is posted in multiple languages at all senior centers and across other media channels that cater to elderly immigrants.

Safe and secure housing is an issue that affects all seniors. Rent in New York City remains one of the most expensive basic costs for low-income people, and current data suggests that 54% of renters spend 30% or more of their income on housing. Elderly New Yorkers are particularly likely to fall behind in their rent and face eviction due to factors such as illness, dementia and fixed incomes. Landlords are also more likely to take advantage of their elderly tenants due to these vulnerabilities. The situation is even worse for seniors who are not English proficient, as they may be unable to comprehend landlord correspondence and eviction notices or understand the legal procedures at a hearing. We believe that HRA and HPD should make an increased effort to reach out to those immigrant seniors who are being sued in housing court to ensure that they know their rights and are prepared to represent themselves, if necessary. Because approximately 90% of tenants are currently unrepresented, it is imperative that this information be distributed to them in their native

languages before they get to housing court on the day of their hearings. The City should also take steps to ensure that immigrant seniors are aware of their rights when it comes to SCRIE benefits and affordable housing.

Increased outreach is also needed to educate and protect immigrants from elder abuse and neglect, a growing problem. Nationwide each year, 10% of seniors experience psychological, physical, or financial abuse or neglect by a family member or caregiver. Many cases are never reported, as victims are unable or afraid to report instances of abuse. As with other areas, this problem is exacerbated for the immigrant population. Many undocumented seniors are unwilling to report abuse to City or State agencies, as they are afraid that it will raise a red flag with immigration authorities and lead to removal proceedings. Other immigrant seniors are unable to report abuse to a governmental entity because they cannot communicate in English or do not know how to contact the proper authorities. We believe that DFTA and other agencies could play an important role in ensuring that all seniors are aware of their rights to report abuse, regardless of immigration status or language capacity.

We would be happy to discuss our proposals further and look forward to working together to ensure that immigrant seniors are able to access the City services they need to stabilize their lives. Again, we commend all those who have already worked to address these important issues. Thank you for the opportunity to testify today.

Respectfully submitted,

Helen Drook, Esq., Supervising Attorney



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Since 1973

Testimony :

- Underserved Asian American homebound seniors in Queens
- Recommendation to giving a contract for that population.

I am Kwang Kim, a social worker and president of Korean Community Services of Metropolitan New York (KCS). KCS was founded in 1973 as a multi-social service agency, and currently serves a daily average of 1,100 individuals. Out of 1,100 individuals, seven hundred (700) are seniors. KCS is sponsoring two (2) senior centers, an adult social day care center and SCSEP (Senior Community Services Employment Program). It also participates in Home Delivered Meals Services as a sub-contractor with four different contractors in Queens. This testimony reveals how the existing Home delivered meal program of NYC has negatively impacted the Asian American homebound seniors in Queens.

Under the existing system, any senior in need of home delivered meals has to contact case management agencies that refer him/her to HDML agency, called contractor. If the person needs regular American meals or kosher meals, the contractor will serve them. However, if the person needs Asian ethnic food, the contractor refers them to a sub-contractor for preparation and delivery of the Asian food to the client. KCS is the only sub-contractor for Asian ethnic meal in the entire borough of Queens, and it currently delivers 115 meals per day.

The Borough of Queens is the most favorable county for Asian Americans. Twenty-five percent of the population is Asian. A rough estimate number of Asian seniors eligible for home delivered meals in Queens is about 800* people, but only 115 seniors receive the service. Some Asian seniors may receive regular American meals, but as we all know, seniors have a strong preference for his/her ethnic food.

A few reasons for the large discrepancy between eligible seniors and those actually served: 1. Over 90% of Asian seniors are LEP (Limited English Proficiency), which prevents seniors from knowing about the home delivered meal services that are available and discourages them from accessing case management agencies, and 2. Outreach strategies to the population have rarely been challenged by the current system. Sub-contractors are not allowed to take lead for outreach activities.

KCS has kept its mission of serving the seniors even though it has been suffering from a budget deficit. In order to meet the breakeven point, KCS should serve over 200 meals but currently only serves 115. The breakeven number has increased due to increased meals and gas costs while reimbursement is fixed or decreased with the contractors. Currently KCS has four (4) different segmented subcontracts. Reimbursement rates are different: \$5.43 with Peter Calella, \$5.60 for weekday and \$5.00 for weekend meal with Florence Smith, \$5.80 with Catholic Charities, and \$5.50 with Queens Community House. Meal contributions used to come to the subcontractor, but one of the contractors takes the contributions out of the subcontractor's revenue. Community fundraising and discretionary funding

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Since 1973

from City Council members have supplemented the budget deficit. The vehicles for delivery need to be replaced, but no support is given to the subcontractor under the current system.

In order to solve the underserving issues for Asian homebound seniors, KCS strongly recommends two agenda items:

1. NYC should consider having a contract, not subcontracts with existing contractors, for Asian ethnic seniors for effective and efficient operation of home delivered meal service. This can avoid duplicate administrative costs for both contractors and subcontractor, and will improve better communication with case management agencies, and
2. Mandate the Case Management agencies to provide information flyers in Asian languages and let the subcontractor for Asian meals get involved in outreach and intake process, if there is no proper staff understanding Asian language and culture.

It will not be easy to change the existing system, but I believe that modifying the existing system by adopting recommendations will cause better services to the target population and encourage the service provider to commit to better practices.

On behalf of the hard-working staff of the KCS home delivery program and the seniors who receive and will receive home delivered meal services, I deeply appreciate the NYC council for offering me this opportunity to submit recommendations. Should you have any further questions or inquiries, please call KCS at 718-939-6137, or e-mail me at main@kcsny.org.

Kwang S. Kim, LMSW
President, KCS

*Based on 2010 census, 2013 estimate of seniors over 65 in Queens is 305,257. 2008-2012 ACS PUMS indicates seven Asian ethnics groups (Chinese, Indian, Korean Filipino, Pakistani, Bangladeshi and Japanese) have 48,040 seniors over 65 in Queens. 16% of seniors over 65 are Asians in Queens. I do not have exact number of home delivered meals delivered in Queens, but estimate over 5,000 meals. 16% of 5,000 are at least 800.

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Good morning
Good morning Committee Chair Chin and *Henchara and* Committee Members,

As a one half month shy of 80 years old New York City born senior, I, Suki Terada Ports, am honored to speak before you about the needs of Japanese and Japanese American seniors, some of whom were immigrants many years ago as were my Mother and grandparents. We are an ethnicity within the context of the multi ethnic Asian community here in NYC with the same needs you will hear of and some of the same solutions but we each have arrived on different paths and reasons for choosing NYC.

People of Japanese ancestry have been for the most part a silent, invisible ethnicity, in part centuries of a culture including a reluctance to bring a problem outside of the family or to admit the need for help, fostered a we will take care of it ourselves tradition. The shadow of racism so visible on the West coast was less known here on the East Coast. For example, our bilingual Japanese community family doctor was not allowed to deliver babies south of 125th street. So from 1930 to 1960, we were all born in Harlem, at Sydenham now closed, Knickerbocker, now closed, Mother Cabrini, now closed, Lutheran where I was born, now closed, and Jewish Memorial also closed. Starting on the day of Pearl Harbor, Dr. Iwamoto and about 20 other men were rounded up at police precincts in NYC, processed and sent to Ellis Island. Soon about 200 others were shipped to Ellis Island, others were put under house arrest by the FBI for the duration of the war, as was my Mother. The Japanese corporate community, most with US headquarters in NYC was immediately sent back to Japan. Japanese serving organizations were closed including the Buddhist and a Christian Church. There was never any proof or sabotage by the enemy, the closest being the German U boat off of Amagansett, but no Germans or Italians were rounded up nor their organizations closed. When the war was over, the 120,000 mostly American citizens incarcerated on the West coast were relocated. Mayor F. LaGuardia wrote to the War Relocation Authority and said do not send any of those Japs to NYC we don't want them and they are not welcome here. Suddenly New Jersey towns, Long Island, Westchester and North began having Japanese Americans settling there. Now, some members of returning Japanese Corporations and their families, rotated on a three year schedule live in NYC but most live outside of the city. In part due to cost, some of those corporations are now moving South or elsewhere.

I am a Vice President of the Japanese American Association of NY, Inc. We are proudly celebrating our service to the Japanese American and Japanese communities in the greater New York areas for 107 years. Our program started by meeting the need for burial places for Japanese who died in NY alone. A plot was purchased at Mt. Olivet Cemetery. A coalition of JAA and other community organizations hold an annual memorial service there to insure they are remembered. A series of small organizations merged and in 1952 the Japanese Association of NY merged with the Japanese American Welfare Society and became the Japanese American Association of NY, Inc. fondly known as JAA. After the War, New Yorkers, under the umbrella of the American Friends Service Committee which

has helped Japanese Americans thru out the country sent food and clothes to Japan, much of it to Hiroshima. Some of you may know the huge Buddha on Riverside Drive outside the Buddhist Church, sent by appreciative Japanese. He stood on a hill above Hiroshima, still showing burn marks from the bomb, he was a symbol of watching over the Japanese and so they wanted to send their most precious possible gift to NY.

Our mission of service to the community has not changed since its inception, but the actual programs have constantly changed to meet emerging needs. We have the Apple Kids, a toddler and their parents program to teach parents about NYC schools, health and other services while teaching the children songs and games in English as well as Japanese. The seniors have a lunch program twice a month prepared and served by volunteers. These meals are sent to the homebound also. We also have a volunteer program to provide health, mental health, tax and legal/ immigration status information. Our senior and health weeks provide widely diverse programs attended by over 2,000. An exercise program has a loyal following. A Baseball Tournament for the Ambassador's Cup is a popular summer event as are the golf tournaments. To our dismay when ACA was rolled out last year NY State did not have one Navigator who spoke Japanese and so JAA asked for help from the Korean Community Services Organization and their Navigators spoke in English and tirelessly provided orientation education and enrolled clients who had the English translated into Japanese with help from the Japanese Consulate and JASSI. When other organizations found out they offered help - Charles B Wong Clinic and SACCS. We have culture classes and programs -a chorus, flower arranging and cooking as well as a language curriculum development class for teachers of Japanese in area schools. Annual art exhibits by local artists are held and a scholarship program for collegebound high school students and a graduate school program.

With cherry tree seeds from Japan starting the program in 1992, JAA has held an annual Sakura Matsuri (Cherry Blossom Festival) and we have donated over 200 Cherry Trees all planted in Flushing Meadows Corona Park. Look for them in April.

We see the need for a major contract for meals for seniors so that outreach and administration by bilingual (multi) Asian culture aware staff can help people who are virtually left out by the existing lunch contractors. Affordable housing is needed so that people speaking many languages can get help to obtain housing, some of the worst overcrowding housing exists among Asians. Better access to health and mental health is needed. At present the Health and Hospitals Corp is aware of the need for more bilingual signage and staff. Perhaps because seniors are often alone and do not ask for help or cannot make themselves understood when children move away or have their own families, the suicide rate among Asians is disproportionate to the populations. Parents need better communication paths with schools.

We look to you at the City Council to help develop a more Asian aware equity in funding distribution and program development- we have grown to 14% of NYC and yet receive approximately 1% of funding both from City and foundation funds.

Thank you for this hearing and we stand ready to help in any way to provide information and ways to better use our people power to enable our multi language, multi culture communities.

**OVERSIGHT HEARING: SERVING A DIVERSE AGING POPULATION-
IMPROVING IMMIGRANT SENIORS' ACCESS TO NEW YORK CITY'S
SENIOR SERVICES**

MONDAY, NOVEMBER 17, 2014

PRESENTED BY:

ALICIA FRY, LMSW

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AND IMMIGRATION COMMITTEES. I AM ALICIA FRY,
CLINICAL DIRECTOR OF CASE MANAGEMENT SERVICES AT
SERVICES NOW FOR ADULT PERSONS, INC. A.K.A SNAP.
FOUNDED IN 1980, SNAP IS A MULTI-SERVICE, SOCIAL
SERVICES ORGANIZATION SERVING PERSONS 60 YEARS OF
AGE AND OLDER AND THEIR CARGIVERS IN QUEENS. WE
OPERATE ONE INNOVATIVE SENIOR CENTER IN QUEENS
VILLAGE AND ONE NEIGHBORHOOD CENTER IN ROSEDALE,
SERVE OVER 300 HOMEDELIVERED MEALS A DAY, PROVIDE
CAREGIVER SUPPORT SERVICES, TRANSPORTATION AND
ESCORT SERVICES, VOLUNTEER AND FRIENDLY VISITING
PROGRAMS AND OUR CASE MANAGEMENT PROGRAM
SERVES MORE THAN 1000 ELDERLY, AT-RISK CLIENTS.

ACCORDING TO THE GUINNESS BOOK OF WORLD RECORDS, THE BOROUGH OF QUEENS IS THE MOST DIVERSE PLACE IN THE WORLD!

WHILE THIS DIVERSITY ENRICHES COMMUNITIES IN MANY WAYS IT ALSO PRESENTS MANY CHALLENGES. THOSE OF US WHO WORK WITH THE OLDER ADULT POPULATION RECOGNIZE THAT SENIOR IMMIGRANTS ARE AT GREATER RISK OF COMPROMISED HEALTH, POOR NUTRITION, SOCIAL ISOLATION, AND POVERTY. MANY OLDER ADULT IMMIGRANTS FIND THEMSELVES IN A SOCIETY THEY ARE UNFAMILIAR WITH AND FEEL UNCOMFORTABLE IN. CULTURAL COMPETENCY IS CRITICAL TO IMPROVING ACCESS TO SERVICES FOR THESE OLDER IMMIGRANTS AND INVOLVES A NUMBER OF THINGS. THESE INCLUDE GREATER EDUCATION FOR PROFESSIONALS REGARDING LANGUAGE, CUSTOMS, BELIEFS AND VALUES. CULTURAL AWARENESS TRAINING FOR PROFESSIONALS ALSO INVOLVES GREATER UNDERSTANDING OF ETHNIC, RACIAL, RELIGIOUS, GEOGRAPHIC AND SOCIAL NORMS. COMPETENT WORK BY PROFESSIONALS MUST REFLECT APPROPRIATE APPLICATION OF KNOWLEDGE AND A GREATER AWARENESS OF ATTITUDES THAT ENGAGE IMMIGRANT SENIOR POPULATIONS THROUGH SUPPORTIVE INTERACTIONS. BEST PRACTICES BY PROFESSIONALS NEED TO BE OUTLINED SO THAT THEY CREATE AN INVITING ATMOSPHERE AND ENCOURAGE OLDER IMMIGRANT ADULTS TO UTILIZE THE SERVICES THAT ARE AVAILABLE IN THE COMMUNITY.

CREATING AN ENVIRONMENT OF SAFETY AND RESPECT REQUIRES EDUCATION NOT ONLY FOR PROFESSIONALS BUT FOR OLDER ADULTS WHO HAVE BEEN IN THE COMMUNITY FOR YEARS AND ARE OFTEN GUARDED AND FEARFUL OF GROUPS THAT ARE DIFFERENT FROM THEMSELVES. NEIGHBORHOODS HAVE CHANGED DRASTICALLY AS ADULTS HAVE AGED IN THEIR COMMUNITIES. A LACK OF KNOWLEDGE ABOUT OTHER CULTURES ALONG WITH MEDIA THAT PERPETUATES FEAR REGARDING CERTAIN SPECIFIC GROUPS HELP TO CREATE A SENSE OF MISTRUST AMONGST OLDER ADULTS.

CAREGIVERS OF OLDER IMMIGRANTS ARE ALSO IMPORTANT RESOURCES IN TERMS OF REACHING AND UNDERSTANDING THEIR OLDER GENERATION FAMILY MEMBERS. OFTEN ADULT CHILDREN OF IMMIGRANTS FIND THEMSELVES CAUGHT IN A CULTURAL DIVIDE. THESE CHILDREN ARE LIVING AND ADAPTING TO AN AMERICAN WAY OF LIFE AND ARE OFTEN CONFRONTED WITH OLDER FAMILY MEMBERS WHO FEEL ISOLATED AND ABANDONED BY THE YOUNGER GENERATION. THESE ADULT CHILDREN CAN INFORM PROFESSIONALS AS TO WHAT WOULD BE THE MOST EFFECTIVE WAYS TO CONNECT WITH THEIR OLDER FAMILY MEMBERS. THEY CAN ALSO BENEFIT FROM LEARNING MORE ABOUT COMMUNITY RESOURCES SO THAT THEY CAN HELP BRIDGE THE GAP BY ENCOURAGING OLDER FAMILY MEMBERS TO PARTICIPATE IN COMMUNITY GROUPS.

EDUCATION FOR PROFESSIONALS, CLIENTS AND FAMILY CAREGIVERS IS CRUCIAL IF COMMUNITY AGENCIES ARE TO MAKE A DIFFERENCE IN REACHING AND SERVING IMMIGRANT SENIORS. CREATIVE PROGRAMMING WHICH COULD INCLUDE FOOD FROM DIFFERENT BACKGROUNDS, CULTURAL-SPECIFIC DANCE, DISCUSSION GROUPS, USE OF THEATER, MUSIC, AND MOVIES THAT STIMULATE CONVERSATION CAN ALL BE INTEGRATED INTO SENIOR CENTER SETTINGS, LIBRAIRES, COMMUNITY ORGANIZATIONS AND EVEN LOCAL COFFEE SHOPS WHERE NATURALLY OCCURRING IMMIGRANT POPULATIONS GATHER.

CULTURAL COMPETENCE INVOLVES AN UNDERSTANDING OF ONE'S OWN BIASES, THE OBTAINING OF INFORMATION ABOUT DIFFERENT CULTURES, EXPERIENCE AND ENCOUNTERS WITH INDIVIDUALS FROM DIFFERENT CULTURES ALONG WITH A DESEIRE FOR CULTURAL COMPETENCE. EDUCATION IN THIS REGARD IS NO SMALL TASK AND TAKES TIME ALONG WITH BUDGETS THAT SUPPORT STAFF AND PROGRAMS OF QUALITY.

PROVIDING FOOD THAT MEETS THE NEEDS OF VARIOUS CULTURES IS ALSO AN IMPORTANT PART OF CONNECTING WITH IMMIGRANT POPULATIONS. FOOD PREPARATION AS WELL AS DIVERSITY WITHIN CULTURES REGARDING FOOD CAN BE CHALLENGING BUT IS NECESSARY WHEN CREATING SENIOR CENTERS. COLLABORATION BETWEEN AND

AMONGST SERVICE AGENCIES PROVIDES FOR AN EFFECTIVE METHOD OF MEETING DIVERSE NUTRITIONAL NEEDS. IN LIGHT OF FISCAL CONSTRAINTS, DEVELOPING AND NUTURING EXISTING RELATIONSHIPS WITHIN THE AGING NETWORK ALLOWS AGENCIES TO UTILIZE A POOL OF AVAILABLE RESOURCES IN BOTH A COST EFFECTIVE AND EFFICIENT WAY.

FACING A RAPIDLY AGING CITY WITH COMPLEX DIVERSITY, SNAP LOOKS FORWARD TO CONTINUING THIS DIALOGUE WITH THE CITY COUNCIL AND THE DEPARTMENT FOR THE AGING. IN WORKING TOGETHER THERE IS MUCH PROMISE FOR GREATER CULTURAL COMPETENCY WITHIN THE AGING NETWORK.

THANK YOU.



Testimony on Aging and Immigrant LGBT Seniors in New York City

Thank you so much for taking the time to consider the experiences and needs of this vulnerable segment of our community. I'm Kira Garcia, representing SAGE, Services & Advocacy for GLBT Elders. SAGE is the nation's oldest and largest organization dedicated to improving the lives of LGBT older adults.

Every day, more than 100,000 lesbian, gay, bisexual and transgender (LGBT) older people throughout New York City navigate the challenges of aging. Many have meager incomes, reduced economic security, small support systems and a host of health and isolation-related barriers. Roughly one third of these seniors live in poverty, and more than 15% of LGBT seniors contemplate suicide.

When we take these statistics together with the well-documented challenges faced by immigrants, the deck is quite clearly stacked against the City's older immigrants who are LGBT. These members of our community face threefold obstacles to health and happiness: the challenges of aging, the language barriers and legal complications of immigration, and the demoralizing and destabilizing effects of a lifetime of anti-LGBT discrimination, both subtle and overt.

At SAGE, we help constituents access basic necessities like housing, medical care and food. This can be particularly challenging for our immigrant community members. As an example, we've found a consistent need for multilingual services, and assistance with challenges resulting from legal complications that combine immigration issues, and the longstanding absence of LGBT relationship recognition, which has been alleviated too late to help many of our community members. We fully expect to encounter an ever-greater demand for these services as we expand our outreach into the outer boroughs, and as we see an increasing number of older adults who are out as LGBT.

Any conversation about our city's older immigrants should consider the particular experiences, needs, and challenges of those who are LGBT. Thanks so much for your consideration.



**Testimony of New York Asian Women's Center (NYAWC)
Before the New York City Council
Committee on Aging and Committee on Immigration**

**ASIAN SENIORS AND IMMIGRATION
November 17, 2014**

Thank you Chairs Chin and Menchaca for convening and committee members and the assemblage for attending this important meeting. My name is Larry Lee and I am the executive director of the New York Asian Women's Center. We are the largest Not-For-Profit agency in the county serving Asian American survivors of domestic violence, sexual assault and human trafficking. We are thankful to be a recipient of a City Council grant to provide elder abuse services to Asians.

Asian immigrants and Asian seniors have a lot in common – both have high levels of poverty, poorer housing, great need for language assistance and a great need for help from government to meet their needs. For many Asian immigrant seniors their situation is even worse. They face more significant poverty, cultural and language barriers.

The ranks of Asian seniors are increasing the fastest. From 2000 to 2007 nationally, the percentage of Asians aged 65 and older rose 52 percent. In contrast, the overall increase of seniors in America was 6 percent.

Across the country, Asian seniors are more likely to be immigrants than seniors in the general population. In a 2009 report, 81 percent of Asian seniors were immigrants while 12 percent of seniors in general were foreign-born.

In New York City, Asians 65 years and older, grew far faster than the other major race and ethnic groups - up 64 percent, far outpacing Hispanic seniors at 42 percent. There are well over one hundred thousand Asian seniors in NYC.

In 2007 the 26 percent poverty rate of Asian seniors was significantly higher than the 19 percent poverty rate for all elderly New Yorkers. Asians were less likely to receive Social Security benefits than the other major race and ethnic groups. Overall, as of 2012, with a poverty rate of 30% Asians are now the poorest group in New York City.

Asian seniors are more than twice as likely not to have health insurance coverage and have a lower rate of public health coverage as the other major race and ethnic groups.

Three of 4 elderly Asians have English limitations, compared with 1/3 of all city elderly adults. More than 30 different Asian languages or dialects are spoken in Queens alone.

Recommendations

To assist Asian immigrants, especially seniors who are more likely to lack English language skills, government agencies should be culturally-sensitive, hire culturally-appropriate workers and train their staff to be culturally aware. Government offices should have better language access. Staff should be linguistically-appropriate and Information and forms should be translated into major Asian languages.

Government agencies should require agencies to be culturally-based and linguistically-appropriate. City agencies should emulate Federal agencies who create funding avenues exclusively for culturally-specific programs.

For senior Asian immigrants, prevention services need to be extensively conducted widely. By and large the Asian communities do not believe that its elders are victimized. Emotional, sexual, and financial abuse are disregarded. Only physical violence is considered abuse and that is minimized. For example, substantial numbers of some Asian ethnicities think that it is okay to take money from parents and not pay them back.

We need funding to provide wide-ranging community education. Elder abuse among Asians hasn't been extensively researched but we assume it mirrors patterns of responses to domestic violence. With DV, Asians are 3 times more likely to be silent about being assaulted than other races and ethnicities. Often Asians don't consider what is happening to them to be abusive. In one study, not one Asian reported violence to the police. Like many others, Asians don't want their relatives to be arrested.

With so many Asian seniors experiencing language and cultural barriers, programs have to assist seniors in navigating the system to gain access to government benefits, health insurance programs, as well as other needed services. Because Asian Not-for-Profit agencies must escort and translate for survivors they must work at least 1/3 harder than those agencies that work with English-speakers or immigrants familiar with the social service system. Asian agencies are not compensated for this extra work.

The majority of Asian seniors are married and live together. Many live with extended family. Often, elder abuse service providers have to take into account that Asian couples may have lived together for decades and that in-law abuse is common.

Services provided to seniors should be culturally specific. NYAWC offers culturally-based counseling and Asian-wellness services. This includes acupuncture, meditation, tai chi and trauma-sensitive yoga. We believe our services are more appropriate than mainstream professional counseling techniques suggested by government agencies to assist survivors.

Senior Asian immigrants have many needs that are not being filled. NYAWC urges the City Council to champion culturally and language-specific assistance programs. Please ensure that government agencies are also culturally and linguistically-based.

Thank you.

Larry Lee: (212) 732-0054, ext. 114. LLee@NYAWC.org



Asian American Federation

STATEMENT SUBMITTED TO THE COMMITTEE ON AGING AND THE COMMITTEE ON IMMIGRATION OF THE NEW YORK CITY COUNCIL November 17, 2014

TOPIC

Oversight: Serving A Diverse Aging Population-Improving Immigrant Seniors' Access to New York City's Senior Services

Thank you to the Committee on Aging and the Committee on Immigration for convening this hearing. I am Howard Shih, Director of Research and Policy at the Asian American Federation. The Federation's mission is to raise the influence and well-being of the pan-Asian American community through research, policy advocacy, public awareness and organizational development.

Established in 1989, the Federation is a pan-Asian non-profit organization representing a network of community service agencies in the Northeast. These agencies work in the fields of health & human services, education, economic development, civic participation, and social justice.

We are here today to lend our support to the tireless efforts of our member agencies who serve Asian seniors. The growth of the Asian senior population continues unabated. In the last three years, the Asian senior population grew at nearly three times the rate of seniors overall, with nearly 117,000 Asian seniors residing throughout the five boroughs.

If we look at the growth rates of the senior population among the different Asian groups we will see increasing diversity. The fastest growing Asian groups were Bangladeshi seniors who more than double in size between 2010 and 2013 and Pakistani seniors who nearly double in size over the same time period. Outpacing the "mere" double digit growth rates among the other Asian groups results in the increasing diversity in our senior population.

Geographically, each of the major Asian groups in the city has settled in several distinct patterns. Chinese seniors are nearly equally split between the Chinatowns of Brooklyn, Manhattan and Queens. Indian and Korean seniors were largely in Queens. Bangladeshi and Pakistani seniors are found in Queens, Brooklyn and the Bronx. Japanese seniors are concentrated within Manhattan. As the Asian senior population disperses, our member agencies will require increasing the number of sites that provide services that match their language and cultural needs.

And the needs of Asian seniors are great. Overall 1 in 4 Asian seniors live in poverty, with poverty rates reaching as high as 35% for Bangladeshi seniors and 30% for Chinese seniors.

Language barriers remain high among Asian seniors. More than 90% of Chinese and Korean speaking seniors had limited English proficiency (LEP). Among Bengali speakers, 88% were LEP. More than 3 in 4 Urdu speakers and half of Hindi speakers were also LEP. Even among Filipinos who have a reputation of high English proficiency, 44% of Tagalog speakers identified themselves as LEP.

Access to affordable health insurance is also a concern for Asian seniors. Overall 5% of Asian seniors have not health insurance coverage, compared to 2 percent of all seniors. And only 24% of Asian seniors had additional private coverage, compared to 43% of all seniors. Particularly alarming is that nearly one in three Bangladeshi seniors did not have any health insurance coverage.

One of the reasons why the Asian seniors are attracted to New York City while other seniors move away lies in the excellent services our member agencies provide to the community. However, they face an increasing wave of seniors to serve in the face of level and sometime decreasing support from the government. As a Federation of these agencies we are presenting our support for the following priorities for Asian seniors:

- 1) In a city where more than one in ten seniors are Asian, no Asian-led home bound meal provider has a direct contract with the city. Our member agencies who are sub-contractors for homebound meals often find that their programs are cut first when the city's budget axe falls on the contracting agency.
- 2) No major senior housing has been built in the city in many years. Few, if not none, of the existing senior housing serves the diverse language, cultural and dietary needs of Asian seniors, in particular South Asian seniors.
- 3) Both Queens and Brooklyn do not have a senior center with regular hours serving South Asian seniors.
- 4) Increasing need for in-language and culturally competent health and, in particular, mental health services for Asian seniors.
- 5) Ask that a portion of the additional New York State Community Services for the Elderly Program (CSE) funding coming to the city be spent to help agencies directly serving Asian seniors build their capacity.
- 6) Amend the contracting process in order to acknowledge that Asian-led agencies providing services directly to Asian seniors are in the best position to use additional dollars cost effectively.
- 7) Please provide support to conduct research to study the most effective programs, best practice models and demographics changes of the senior population so we can work together to fill service gaps.



**The Visiting Nurse Service of New York
Testimony for the City Council Committees on Aging and Immigration
Hearing on Immigrant Seniors' Access to Services
November 17, 2014**

My name is Hing Lin Sit and I am here to discuss the Visiting Nurse Service of New York's perspective on how our city can best serve elder immigrants so they can be active members of their community and successfully age in place.

VNSNY is the lead agency for the Chinatown Neighborhood NORC, a program that covers a 24 block territory of Manhattan's Chinatown, home to 2000 immigrant seniors. Despite the fact that many of these seniors have lived in Chinatown for more than 50 years, the language barrier and access to services remains a challenge for senior Chinatown residents. Our NNORC is at the Epi-center of this vibrant immigrant community. Each week we provide a wide range of services to Chinatown NNORC members that include entitlement services, health screenings, counseling services, advocacy and more, all in their own language. We arrange a variety of activities and support groups aimed at empowering seniors to better connect and interact with their community, and of course, take care of their health.

When we started our NNORC in 2006, VNSNY's Center for Home Care Policy and Research conducted several surveys of this community to better understand the needs of Chinatown seniors. Here are some of our findings:

- 66% of residents surveyed said they got their information/assistance from family and friends; few went to health professionals or formal agencies for assistance. Since the inception of our program, this statistic has changed. Now more than 70% view the NNORC as a place to get information and support.
- Less than a third surveyed knew how to access available services. Now they know to come to the NNORC for assistance which may be as simple as reading a letter or navigating a crisis situation.
- 18% leave home less than once a week or never. Now our community programs attract those who are able to come out of their home and others who are unable to physically leave their home due to environmental or health related reasons have access to friendly visits and other recreational services in their home.
- 63% rated their health to be Fair/Poor. Now we have regular "health talks" and seminars and act as a "health navigator", linking residents to the care they need.
- 41 % said their mental health is "fair" or "poor". In response, our program has worked with our community partners to sponsor support groups and one to one mental health

counseling services. More importantly we have been able begin to address the cultural taboos associated with mental health issues

Our experience has proved that NNORCS are a viable solution toward addressing the many social, health and recreational needs of an aging immigrant population. We know just how critical these linkages are to successful aging. The story of Mr. Y and Mrs. U exemplifies the work we do.

Mr. Y, a 61 year-old mono-lingual Chinese speaker, was referred to the NNORC by his neighbor who is a NNORC member. Mr. Y was unable to afford his rent because he had spent all of his savings after becoming unable to work due to multiple health problems. At first, Mr. Y was not aware of the government entitlements (medical, financial, food stamps, etc.) that were available to him. Even though he suffered from multiple health problems, he did not seek medical help because he did not have any health insurance. He has no family in US. Because of these hardships, he was scared and felt no hope. The NNORC SW worked with University Settlement to help to solve the rent issue. We applied for funding to temporarily relieve the rent arrears until he would be entitled to Social Security. At the same time, the team assisted him in applying for Food Stamps and Medicaid. He was linked to the local senior center so that he can participate in their nutritional meal program at a very low cost. In addition, he was referred to NYP Lower Manhattan Hospital to take care of his health issues. Our nurse continued to monitor his health and his connections to his health care. Now, his anxiety is reduced, his health status has been stabilized and he can finally start to enjoy his retirement life.

Mrs. U is a 76 years old mono-lingual Chinese widow. When her spouse suddenly died, she was thrown into a crisis. She had never managed any of her affairs and in addition to feeling so helpless, she was grieving for this horrible loss. The NNORC SW assisted her with entitlement issues and our RN provided health monitoring. She has also attended group activities and a bereavement support group. She has transitioned well to her current life situation, making new friends from her support group and volunteering at the NNORC center.

As you can see, the NNORC acts as a “small village”, helping those in need, sustaining familiar traditions, while acting as a bridge to the new ways of thinking and addressing life on a day to day basis. The NNORC is a partnership program, collaborating with a wide range of community organizations, including Chinese Consolidated Benevolent Association, University Settlement, NYP Lower Manhattan Hospital, CPC, and over 40 community agencies. As partners, we closely collaborate to identify community needs, and respond in a culturally sensitive way.

As you explore the spectrum of services available to senior immigrants, please consider the value of NNORCs in immigrant communities. The NNORCs have traditionally been funded by the NYSOFA and philanthropic organizations. Most recently, the City Council has recognized the importance of the work we do by allocating almost one million dollars in additional funding to NNORCs. The need is great but these and any additional available funds can provide NNORCs with resources to assist elder immigrants in their homes and communities. We again thank the City Council for their support, assistance and proactive approach to addressing this important issue.

THE CENTER

Introduction

My name is Migdalia Santiago. I am a Licensed Social Worker. I've worked at the Lesbian, Gay, Bisexual, & Transgender Community Center for 8 years and am the Co-Founder of PFLAG Families of Color and Allies chapter in New York.

Current Situation and Challenges

According to the Task Force - lesbian, gay, bisexual and transgender (LGBT) elders represent between 1.5 to 3 million, or 3.8% to 7.6% of seniors in the U.S. A report from August 2014 by the New York State Comptroller's Office said - New York City has the largest immigrant population of any city in the nation. NYC's immigrant population more than doubled over the past four decades.

Immigrants often come to New York to escape death, imprisonment, and violence for identifying as lesbian, gay, bisexual, and/or transgender in their country of origin. Many LGBT immigrants were professionals with full careers before they came here. When they arrived, they faced multiple hardships such as difficulty applying job skills, lack of opportunities, and language barriers. These obstacles can remain for decades. Often the only jobs undocumented immigrants can find require physical labor, and many seniors can't work these jobs or don't stand a chance of being hired.

I'm working with a client from Mexico who is a senior, gay man, who is a monolingual Spanish speaker, HIV+ and has been here over 10 years. When he was first diagnosed with HIV he returned back to Mexico, but wasn't able to access HIV medication. Even if he moved he was gravely concerned that due to homophobia, he wouldn't be given medication. Not wanting to die, he returned back to New York. With no chance of unemployment and few supports, he is giving up hope more and more each day.

As we work to provide services, resources, equality, and safety for transgender and gender non-conforming individuals, particularly immigrants, we've seen an increasing number of transgender Latina women over the age of 50 in our programs.

Undocumented LGBT immigrant seniors have few real opportunities to resolve their immigration status other than seeking political asylum, which has its own barriers and risks. For many, in the age of OKCupid, Grinder, and Twitter, meeting a partner has become much harder. Even if they do and try to marry, if they entered illegally they will be sent back to their country of origin to await a judge's decision. While their partner, at any age, must prove financial stability enough to support them both and provide health insurance.

For LGBT immigrant seniors, not being able to return to travel freely means never getting to say good-bye, or attend funerals of their friends, siblings, parents, and even their own children in the country of origin. For most seniors in heteronormative relationships, their care givers often become their children or their spouse. Many LGBT immigrant seniors will grow old with no primary care giver at all.

We must create safe spaces for our LGBT immigrant elders, where they feel supported, can make friends, and have access to equitable resources. If there were fewer barriers to the city's senior services, I believe that many LGBT immigrant seniors would certainly use them.

Suggestions for the City Council

Include the specialized needs of LGBT immigrant seniors when deciding on measures to improve access to New York City's Senior Services.

Migdalia Santiago, LMSW

**THE LESBIAN, GAY, BISEXUAL &
TRANSGENDER COMMUNITY CENTER
208 W 13 ST NEW YORK, NY 10011**

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F. 212.924.2657
gaycenter.org

Hello, my name is Vasundhara Kalasapudi. I am the executive director of India Home, a senior services nonprofit for South Asians in Queens. I am here today to emphasize the importance and urgency of providing culturally competent services to all immigrant and people of color seniors. From our seven years of experience working in the South Asian community, we have learned about several problems facing our seniors.

Growing old in New York City is doubly difficult for South Asians: as the first generation of immigrants is ageing, there have been little to none infrastructure to adequately support them. Existing senior services oftentimes could not provide the right food, activities, support/counseling, and languages. As a result, many elderly do not get the care they deserve or there is an extremely high burden on family caregivers.

Since 2000, the South Asian population in New York City has skyrocketed to over 300,000 people. South Asians come in all walks of life, and in New York City, 14% of South Asians live in poverty. In addition, racism and discrimination in post-9/11 America has exacerbated problems faced by South Asian elderly. South Asians from all nationalities increased: especially Bangladeshi immigrants, however, Pakistani, Indian, Nepali, and Bhutanese immigration have also increased substantially.

Culturally competent services need to come in all forms: language access, congregate meals, programming and activities, and much more. It means outreaching to South Asians in their languages to let seniors know what services they can avail themselves to. It means hiring South Asian program staff at senior centers and nursing home: not just in administrative and operational capacities. It means incorporating and making available translation services. It means recognizing and understanding the vast diversity of ethnic groups, cultures, languages, religions, and backgrounds of South Asians.

India Home has started to work at these efforts. We have touched the lives of over 1,000 seniors since our inception and our regular programs draw attendance in the hundreds. Our programs have since inspired other groups to conduct similar programs. However, many activities and services for South Asian seniors are still in the informal stage. This is why it is important for city government and local officials to continue nurturing the specific and diverse needs of immigrant and people of color seniors.

Thank you for your time. I look forward to working with all of you in serving our seniors.

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Council of Senior Centers & Services of NYC, Inc.

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**Serving A Diverse Aging Population-Improving Immigrant Seniors' Access to
New York City's Senior Services
Joint Hearing: Committee on Aging with the Committee on Immigration**

November 17, 2014

Council of Senior Centers and Service thanks Aging Committee Chair, Councilmember Margaret Chin, Immigration Chair, Carlos Menchaca and members of the Aging and Immigration Committees for having the foresight to bring together two committees that impact the lives of elderly immigrants. CSCS

Council of Senior Centers and Services (CSCS) is the leading organization in NYC representing community-based aging services and the growing number of older New Yorkers. CSCS is a citywide not-for-profit organization representing senior services and aging issues, advocating for needed community based services which allow older adults to age with independence and dignity. With over 100 member organizations providing community based services through more than 600 programs, CSCS' members range from individual community-based centers to large multi-service, citywide organizations and serve over 300,000 older adults annually. CSCS' work ranges from economic justice, combating hunger and supportive housing to healthy aging, and community engagement. Through its network and initiatives, CSCS serves older New Yorkers from every community district and from virtually every socioeconomic background that comprise the population of NYC.

The FY15-16 Department for the Aging Annual Plan Summary, ACS data from 2000 to 2012, reports significant demographic changes in the age 65+ population in New York City. White older adults decreased by a little over 10%, while Black increased by 33%, Hispanic by 55%, and Asians by 89%. In 2012, 59% of older New Yorkers, age 65+, were members of minority groups compared to 43% in 2000 and 35% in 1990. Importantly, nearly 50% of New Yorkers speak another language at home. Obviously, elderly immigrants frequently have limited English proficiency and speak a language other than English at home.

DFTA's annual plan also reports levels of poverty among NYC's older adults. Overall, one out of five older New Yorkers lives in poverty. The 2012 federal poverty level for a single person was \$11,011 and \$13,892 for a couple. Average Social Security benefit is \$1230/month or \$14,760/year. The average benefit is above the poverty level and Medicaid eligibility, but clearly not enough to cover the high cost of living in New York City. The level of poverty among racial groups is 13% for White older adults, 20% for Blacks, 26% for Asians, and 29% for Hispanics.

The face of NYC's older adult population has, indeed, changed and will continue to change. A well kept secret is that the community-based aging services network has been on the frontlines of providing services and a place to be part of a community for many years. Those organizations providing services for older adults are committed to providing culturally competent services and within budget constraints, hiring bilingual staff. Current resources do not allow senior center staff to connect with the broad array and ever changing immigrant groups.

Immigrant families often view assistance through the lens that they "take care of their own". This could further isolate elderly family members. Thousands of immigrant older adults flock to senior centers across the city. Attending the senior center transforms their life as they find a peer community, activities they enjoy and other supportive services. Social engagement is key to better physical and mental health.

An enormous amount of work has evolved over the years to support the rapidly growing influx of elderly immigrants. Senior centers, NORCs, home-delivered meals, and other services funded through the Department for the Aging, do not ask for legal status. Voluntary donations are requested for meals and some other programs, but not required. There are no income eligibility requirements. One only has to be age 60+. ***Investing in the aging services network is an investment in supporting elderly immigrants.***

As you each know all too well, DFTA funded services were severely reduced under the prior administration – about \$57 million. CSCS is pleased that both City Council and the administration – both sides of City Hall – added new funding for DFTA programs this year. We've turned a corner to rebuild back what's been lost. However, the number and diversity of seniors continued to grow while service dollars were dramatically reduced.

Older adults are anchors in their community and family. Economic resources through Social Security (for those eligible), pensions, SNAP and other benefits bring billions of dollars into NYC neighborhoods. Older adults spend much of their money locally. Older immigrants are raising their grandchildren part time or full time. They play a central role in keeping their family together while adult children go to work. Over time, their grandchildren learn English and become acclimated to their new home and their adult children go to work. ***Many older adults***

find themselves isolated, unable to learn English and become a citizen or navigate the new city and society they now live in. This is where it is up to all of us to step in and provide assistance.

Additionally, according to the report, *The Changing Face of New York's Seniors*, 31%, about one out of three older immigrants face their old age without the benefit of Social Security or Medicare as they weren't here long enough to participate in those programs. *Immigrants have to wait five years to be eligible for benefits. Undocumented immigrants cannot receive any entitlements except for emergency Medicaid.*

RECOMMENDATIONS:

What on the ground supports can the city invest in to assist elderly immigrants and their families? CSCS recommends (not in any priority order):

Re-establish city funding for ESL/Citizenship classes for elderly immigrants – Funding for ESL/Citizenship classes at senior centers was eliminated in 2003. At its peak it was \$750,000. Given the rapid increase in the elderly immigrant population since then and increased costs, CSCS recommends \$1 million for ESL/Citizenship classes.

Strengthen budgets of senior center and home-delivered meals – Senior centers are peer communities, where staff and senior center members literally speak your language and understand your culture. The \$3.3 million increase for meals baselined in this year's budget was key to senior centers and home-delivered meals providers after years of not keeping pace with inflation. This allowed for better quality food and diversity of menus. The additional \$500,000 for the sixth congregate meal program will also serve thousands of elderly immigrants citywide providing them with one meal for the weekend from their senior center.

According to the Department for the Aging, an additional \$1.15 per meal is needed just to meet the city's nutritional requirements. The additional \$3.3 million added 25 cents per meal for congregate meals and non-kosher home-delivered meals. It added 50 cents per meal for kosher home-delivered meals due to catering costs. That means we still have 90 cents per meal to go for congregate and non-kosher home-delivered meals and 65 cents to go for kosher home-delivered meals. The gap in funding is obvious. The need to provide nutritional, diverse meals is compelling. Food is medicine. Food is central to one's culture. It is comforting and attracts elderly immigrants to attend senior centers.

Fund social workers at senior centers - Elderly immigrants, as well as other older adults, often face formidable challenges as they age. This includes social isolation, economic and housing

challenges and problems faced by the need to acculturate without adequate supports. Professionally trained MSW social workers can help with counseling, access to benefits, connections to other services, and other supports.

CSCS has advocated for MSW social workers in senior centers for over 15 years. In 2001, \$3.5 million was allocated to DFTA for one social worker in every five senior centers. Right after 9/11, the funds disappeared. Given the substantial increase in diversity since then, we would like to work out a plan to provide social workers in senior centers to meet the needs of NYC today. Compensation for MSW trained social workers must meet the level of their training. CSCS recommends a \$70,000 per position package for salary, fringe benefits and administrative costs. This is especially needed to attract MSW trained social workers into the aging services field.

Elder abuse – CSCS is appreciative of City Council's allocation an additional \$1 million for elder abuse and targeting \$200,000 of it to nonprofits working with survivors of domestic violence in immigrant communities. Elder abuse plays out differently in each culture based on what is acceptable behavior, reporting elder abuse, knowledge of and access to services, cultural and linguistic norms, feelings of safety and other challenges. These pilots will likely lead the way to developing programs that reach elder abuse victims in diverse communities. DFTA has added in \$2 million through its elder abuse rfp which is out now. That brings baselined city funding to \$2.8 million. This is a total of \$3.8 million, including the City Council funds, going towards elder abuse – three times the amount of money made available this past year from the original \$800,000.

Case management – DFTA case management is funded by the city and state, the Expanded In-Home Services for the Elderly Program (EISEP). As you are familiar with, caseloads can average 80, and last spring, about 1800 frail elders were on waiting lists just for a social worker to come to their home to assess their needs. Additional city funding of \$2.6 million has helped bring down caseloads of about 65. However, there are still large waiting lists and concern that the caseloads will increase once again as demand rapidly grows. Those elderly immigrants whose income is somewhat above the Medicaid level, averaging \$12,000-\$20,000, would benefit from this program. It is one program offered to the non-Medicaid eligible population, but is severely oversubscribed.

Imagine the difficulties faced by adult children or spouses caring for their elderly parents, spouse or other loved one if the care recipient isn't eligible for benefits. CSCS recommends that the city add funds to the Department for the Aging budget for supportive services for all family caregivers with attention paid to caregivers who may also be immigrants caring for their

immigrant parents. Currently, the only funding through the Department for the Aging for caregivers comes from the federal Older Americans Act, which has remained stagnant for years. The funding is contracted out to service providers that support family caregivers from immigrant communities as well as the LGBT, disabled and other communities. Investing in caregivers is an investment in helping older adults age in place in their communities. It is also a workplace issue for thousands of caregivers, mostly women, who need to juggle their caregiving responsibilities with work. ***Access to affordable elder care and caregiver support are the workforce issues for women of the 21st century.***

7. Building and preserving affordable senior housing –The CSCS Housing Committee’s membership is comprised of the leaders of nonprofit affordable senior housing in NYC. Together, they operate over 20,000 units of senior housing in neighborhoods across the city. Thousands of elderly immigrants reside in affordable senior housing, such as Section 202 buildings, with many more thousands on waiting lists.

According to NYC’s 2011 Housing Vacancy Survey, of the 98,000 single elderly renter households in rent stabilized units, a shocking 65% paid more than half their incomes in rent, while 62% of such households in rent unregulated apartments paid over 50% of their income in rent. According to the Department of Finance, 75% of those seniors on SCRIE still pay 40+% of their income in rent and 59% pay 50+% of their income in rent. Even being in a rent regulated apartment on SCRIE leaves thousands of seniors on the fiscal cliff.

CSCS is pleased that City Council and Mayor de Blasio enacted legislation to increase the SCRIE eligibility income to \$50,000. ***However, CSCS would like to work with City Council and the administration to fund and put in place an aggressive outreach and enrollment campaign to ensure that eligible seniors are aware of the SCRIE program, especially with the increased income level. We recommend a task force be formed to institute such a plan and campaign.*** Getting seniors on to SCRIE as early as possible is critical to their economic security and ability to remain in the home. This also protects rent stabilized units.

As the city moves forward with its affordable housing plan, CSCS would like to work with City Council to ensure that seniors are central to any plans such as inclusionary zoning. There is also a dire need for additional buildings with services for older adults. ***City Council can use its land use authority to ensure that older adults are integral to any affordable housing programs in communities across the city.***

8. Service providers and advocates in the immigrant community – It is time for the aging services and immigrant communities to work together with and on behalf of elderly immigrants. Older immigrants may need to access services. Importantly, older women can be a

good pathway to influencing how services are delivered in communities across the city. Importantly, some older immigrants could still work, but need ESL, job training and support.

As you can see, many of the recommendations here are services we have advocated for and collaborated on for many years. That is because the aging services network has been on the frontline services assisting elderly immigrants without much fanfare. It is time to make the clarion call. Invest in older immigrants. Invest in community-based services.

When issues of immigrants in NYC are addressed, elderly immigrants must be central to that discussion. Government policy makers, private funders, immigrant advocacy and social services organizations need to incorporate the needs of elderly immigrants into their work. Solutions may be different than for younger people, but again, elderly immigrants are central members of their communities and families. Against many odds, they still step up to the plate to support their families. CSCS appreciates that today's hearing is a joint hearing between the Aging and Immigration Committees. We look forward to working with you regarding challenges faced by elderly immigrants.

It is incumbent upon all of us to make NYC a good place to grow old. After all, it is our future, also. Elderly immigrants also have dreams.

Center *for an* Urban Future

A project of City Futures, Inc.

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**TESTIMONY OF CHRISTIAN GONZÁLEZ-RIVERA, CENTER FOR AN URBAN FUTURE
BEFORE THE
NEW YORK CITY COUNCIL COMMITTEES ON IMMIGRATION AND AGING**

JOINT OVERSIGHT HEARING

**"SERVING A DIVERSE AGING POPULATION: IMPROVING IMMIGRANT SENIORS' ACCESS TO NEW YORK CITY'S
SENIOR SERVICES."**

NOVEMBER 17, 2014

I'm christian gonzález-rivera, research associate at the Center for an Urban Future, a non-partisan public policy think-tank based here in Manhattan that publishes studies about the key challenges and opportunities facing New York, from studies about the important role of public libraries to the need to improve the city's youth workforce development system. We have written a number of studies about the immigrant New Yorkers, from a report about the powerful impact of immigrant entrepreneurs to the need for more ESOL programs. Thank you for the opportunity to testify.

Last year, the Center for an Urban Future published the first comprehensive study documenting the rapid growth of New York City's older immigrant population. Our report, titled *The New Face of New York's Seniors*, revealed that foreign-born individuals now make up 46 percent of New York City's seniors, and account for virtually all of the growth in the city's older adult population. For instance, we showed that while the number of native born older adults fell by 9 percent between 2000 and 2010, the foreign born over 65 population grew by 30 percent.

Today there are about 1 million New Yorkers who are 65 and older, and that number will grow by 35 percent by the year 2030. Given the tremendous growth in the immigrant senior population, immigrants will comprise the majority of New York's seniors within five to ten years. In fact, immigrants are already the majority of the senior population in 21 of the 55 Census-designated Public Use Microdata Areas (PUMAs) in the city, including ten out of the 14 PUMAs in Queens.

Older immigrants are clearly not a niche population; in fact we cannot talk about older people in New York City without talking about immigrants.

As we know well, our large population of older immigrants is a legacy of our city's historical and continuing role as America's largest gateway for migrants from around the world. Many immigrant seniors arrived in the U.S. when they were much younger, while many others arrived more recently, often to take care of the children of their children. As it is, one out of every ten older immigrants in the country live in New York City, and 68 percent of those live in Queens and Brooklyn.

Older Immigrants are Poorer and Face More Challenges than Native-Born Older Adults

Unfortunately, older immigrants on average face a particularly compelling set of challenges. Our analysis shows that 24 percent of older immigrants live in households below the poverty level, compared to 15 percent of native-born older adults. The median income of a foreign-born senior in New York is only \$9,900 compared to \$18,300 for native-born seniors. Nearly 130,000 immigrant seniors in the city, or 24 percent are living in poverty, compared to 69,000 or 15 percent of native-born seniors. In fact, despite comprising 46 percent of the senior population in the city, immigrants comprise 65 percent of all seniors living in poverty. Part of the reason for this discrepancy is that a whopping 31 percent of older immigrants in the city do not receive Social Security benefits, compared to only 16 percent of native-born seniors.

The important indicators that tell the story of how immigrant seniors in New York City are doing—indicators like poverty rates, English proficiency, access to services and others vary significantly by country or region of origin. For example, seniors born in Caribbean countries—who comprise the largest group of seniors from a single region of origin in the city—have a median annual income of \$9,400. Chinese seniors, who also have a large population in the city, earn only \$7,000, the lowest median income of all the groups we studied. Mexican-born seniors, a new and fast-growing population, are not far behind at \$7,370. In contrast, Japanese-born seniors have a much higher median income than even native-born seniors, earning \$29,600 annually.

This discrepancy is likely to grow in the years ahead, as the immigrant groups with the fastest growing populations of seniors are also among the poorest. The number of seniors from European countries with lower levels of poverty has actually fallen 10 percent since the beginning of the decade, while the four fastest growing groups—Chinese, Indian, Caribbean and Korean immigrants—all have poverty rates of at least 25 percent. Among Mexican immigrants, another fast-growing group, 47 percent are below the federal poverty line.

Unfamiliarity with the English language is another huge challenge; 60 percent of immigrant seniors in New York have limited English proficiency (LEP), with even larger percentages among fast-growing groups from Asia and Latin America. An astounding 94 percent of Korean seniors, 92 percent of Chinese seniors and 91 percent of Russian seniors speak English less than very well. Worse still, 37 percent of immigrant seniors (about 200,000 in total) live in linguistically-isolated households, meaning that nobody over the age of 14 speaks English.

Specifically, we found that Russians have the highest rates of linguistic isolation in the city, with 82 percent of them living in linguistically-isolated households. Partly because of this, the Russian senior population is the second most concentrated in the city, with half of all seniors living in just three neighborhoods in the city; Coney Island, Bensonhurst, and Sheepshead Bay. Koreans have the second highest rate of linguistic isolation, at 58 percent, and are the most concentrated in the city, with 60 percent of seniors living in Flushing, Bayside, and Elmhurst, Queens.

Poverty rates, English language proficiency and the extent to which immigrant seniors can interact in the world outside their families and communities is largely correlated with how long they have been in the United States. By this measure, seniors from different countries or regions of origin vary tremendously. For example, the average Russian who is 65 years or older only arrived in the U.S. at the age of 53, and the average Korean or Indian senior arrived at the age of 49. They are less likely to speak English; less likely to have earned the 10 years of covered earnings required to have access to Social Security, Medicare and other federal benefits; and are more likely to have their worlds limited to their families and communities. The average older adult from Italy, in contrast, arrived at the age of 27, so they are likely to have worked and lived all their lives here, and have greater access to benefits.

Indeed, while many older immigrants have worked here for all or part of their lives and aged in their communities, many others came to the U.S. later in life to take care of their grandchildren. Among all households in New York City where a grandparent is living with their own grandchildren, 72 percent contain an older immigrant. Contrary to popular belief, however most immigrants do not live with their families in multigenerational households. Our report finds that 62 percent of immigrant seniors live alone or with a spouse, as do 83 percent of native-born seniors. At the same time, 16 percent of immigrant seniors in the city live in a household with four or more people, compared to only 4 percent of native-born seniors.

While all seniors face challenges like a decline in mobility, increased isolation, the challenge of living on a fixed income and the vulnerability to elder abuse, many older immigrants face the additional challenges of the language and cultural barrier and a greater need for services due to greater poverty levels. At the same time, there is less capacity in government and nonprofit services to provide for their needs, largely because many of the organizations that offer linguistically and culturally appropriate services to immigrant seniors tend to have less capacity and funding than those that serve seniors in general.

The challenge in serving the older immigrant population is its diversity, and it is impossible to generalize about older immigrants as a group. Every region or country of origin group has its own challenges that can be very different from those of other region or country of origin groups, so service providers not only have to address culture and language differences, but also differences in the kinds of challenges the groups face.

And the challenges are diverse indeed. In our research we uncovered stories from most of the major ethnic communities in the city. For example, from Brooklyn we heard about women from more traditional Muslim families who lose their husbands and are very isolated because it is difficult for them to find gathering places that are gender-segregated, and where they can feel they can take off their *hijab*. Russian seniors have the highest average level of education among all the groups of seniors we studied—many have advanced degrees and had distinguished careers back home, often in technical fields like math, science, and engineering—but because few of them speak English they find few opportunities to use their abilities in this country. Koreans have an astronomically high suicide rate, particularly among women. Yet, mental health is an issue that few Korean seniors are willing to discuss outside the family, and is a subject that must be approached with careful attention to cultural sensitivities.

There is also diversity in where service providers must go to outreach to various groups of immigrant seniors. For example, while you are likely to find many Chinese seniors congregating at our senior centers, South Asian seniors are more likely to congregate at houses of worship. And we certainly cannot forget the stories in the

New York Times several months ago about the Korean seniors who were at the center of a dispute with the management of a McDonalds restaurant in Flushing because they would sit there nursing their coffees and enjoying each other's company.

At a time when the city is growing older, and the senior population is becoming more diverse all city agencies need to focus on the needs of an aging population. Just as the city needs to be an age-in-everything focus when it comes to transportation, housing, open space or other services, DFTA must take care to include an immigrant-in-everything focus when it comes to services. Providers must not just speak the language of the seniors they are serving, but possess the cultural soft skills that make all the difference in reaching these populations. This would allow them to broach sensitive subjects like mental health in many East Asian families, or sharing the role of caregiving among Muslim women and their families. It would also allow service providers to reach immigrant seniors where they are and to provide them with the services they need, not just offer the services that agencies have available.

DFTA took an important step in this direction by adding language in the recently released Elder Abuse Prevention and Intervention Services RFP. The Center for an Urban Future commends the Department for this very important addition to the RFP, and stresses that the most effective actions the Department can take to serve the increasingly diverse immigrant population at a time of limited resources is to ensure that linguistically and culturally competent service is required through loud and clear language in future RFPs, to follow up with providers to ensure that their services are actually reaching immigrant seniors and to provide technical assistance to organizations that are based in the ethnic communities we are trying to serve.

But to do this right, DFTA needs to create a pipeline to city contracts for those community-based organizations that often they have the cultural and linguistic competence and the credibility in the community, but that may not have capacity or funding to be effective subcontractors. This pipeline starts with capacity building, provides the technical assistance needed to become effective subcontractors and eventually leads to creating partnerships between existing contract-holders and community-based subcontractors. Such a pipeline would allow more community-based organizations to become more effective subcontractors to some of the larger agencies, and eventually perhaps DFTA contractors in their own right. Without a clear pipeline it will be difficult to engage community-based organizations in the city's system.

At the end of the day, New York City can potentially be a great place for immigrants to live, thrive, contribute to the economy and grow older. We have diverse neighborhoods, the largest network of senior centers of any city in the country, a comprehensive network of medical facilities, extensive public transportation and an Age-Friendly Initiative spearheaded by the New York Academy of Medicine that the World Health Organization has called the most comprehensive of any city in the world. The challenge is to ensure that all these great assets are accessible to immigrant seniors.

Just as the Age Friendly Initiative advocates for an "age in everything" focus, we need to re-conceptualize the services we have available for older people to have an "immigrant in everything" focus. After all, immigrants make up almost half of older New Yorkers and are growing in number and as a share of the population, so you can't talk about older New Yorkers without talking about immigrants.

463,000

older immigrants
live in NYC

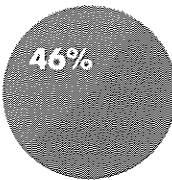
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1 out of 10

older immigrants in the
U.S. live in NYC

Immigrants
currently make up



of the city's
older adult population

The New Face of New York's Seniors

New Yorkers are getting older and almost half of the city's older adults are immigrants. While the city has taken initial steps to plan for this rapidly diversifying population, not nearly enough attention has been paid to this particularly vulnerable subset of the city's seniors.

Funded by
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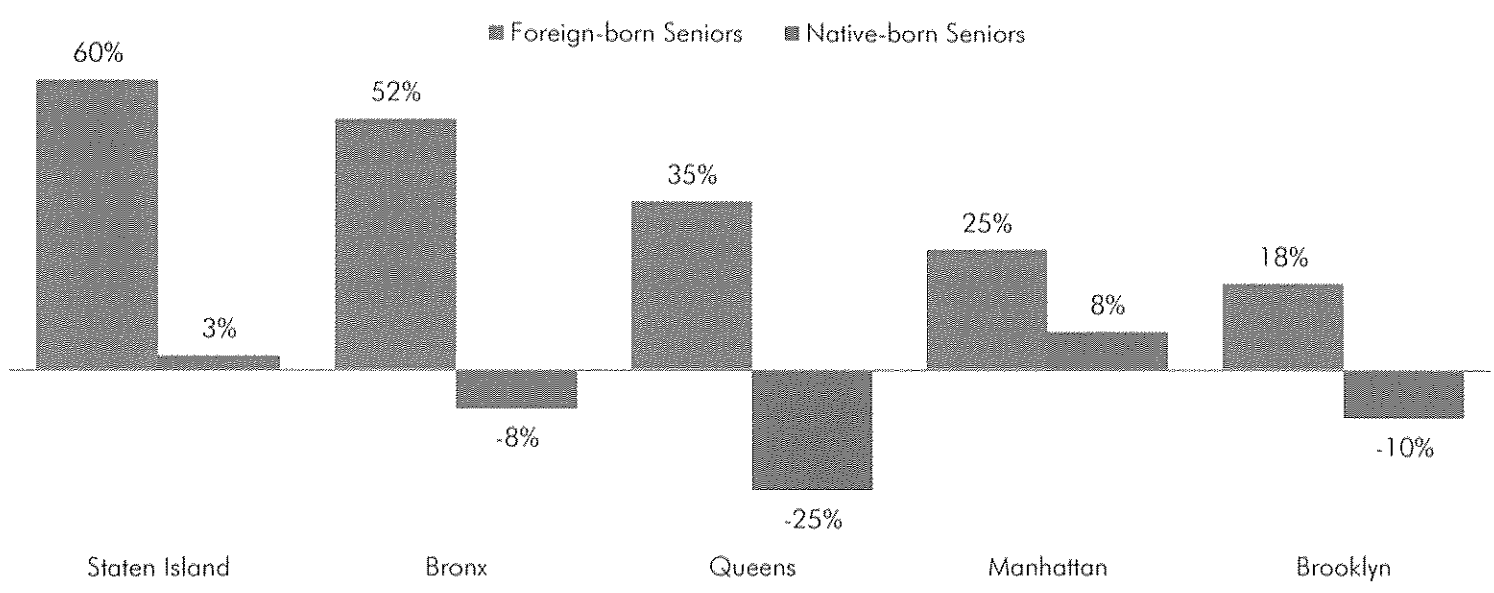
Queens and Brooklyn
are home to

68%

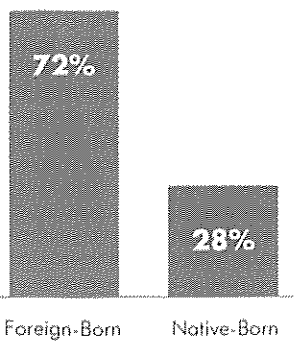
of the city's
older immigrants

The Older Immigrant Population is Increasing All Over New York City

While the population of older immigrants has grown in every borough over the past decade, the native-born senior population has declined in three of the five boroughs.



Immigrant grandparents
are more likely to live
with their grandchildren
than their native-born
counterparts



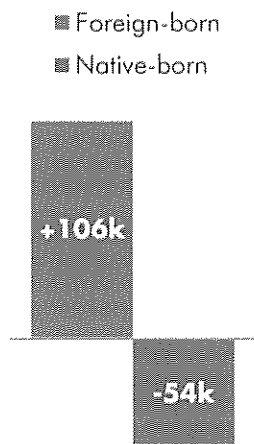
The median income
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Net change in NYC's
older adult population,
2000-2010



31%

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seniors

THE NEW FACE OF NEW YORK'S SENIORS

LIKE MUCH OF THE REST OF THE COUNTRY, NEW YORK CITY IS GRAYING rapidly. In the next two decades, demographers expect the number of city residents 65 and older to increase by 35 percent, going from approximately 998,000 today to 1.3 million in 2030.¹ And while some initial steps have been taken to plan for this profound demographic shift, not nearly enough attention has been paid to a crucial—and especially vulnerable—subset of the city's senior population: those who were born in a foreign country and continue to reside here as either documented or undocumented immigrants.

With 463,000 older immigrant residents, New York has by far the largest foreign-born senior population of any city in the U.S. In fact, one out of every ten older immigrants in the country calls New York City home. Immigrants currently make up 46 percent of the city's total senior population, and if current growth rates continue, they will become the clear majority in as little as five years. In 21 out of the city's 55 Census-defined neighborhoods, immigrants already account for a majority of the senior population; in Queens, this is true for ten out of 14 neighborhoods.

The aging of the city's immigrant population has huge implications for New York. As a group, immigrant seniors have lower incomes than their native-born counterparts and much less in retirement savings. They receive far fewer benefits from traditional entitlement programs like Social Security and Medicare. Compounding these challenges, nearly two thirds of immigrant residents age 65 and older have limited English proficiency, while nearly 200,000, or 37 percent, live in linguistically isolated households. As a result of these language and cultural barriers, many older immigrants have trouble finding out about existing support services and are much more likely than their native-born counterparts to suffer from isolation, loneliness and depression.

With so many immigrant neighborhoods, one of the most comprehensive health systems in the U.S. and excellent public transportation, New York has the potential to be a great place for immigrants to grow old. But it is far from clear that the city has the infrastructure or programs to handle all the challenges that are likely to arise as this population increases. City funding for senior services has actually fallen significantly since 2009. And although the Bloomberg administration recently unveiled the widely heralded Age-Friendly NYC, an initiative created with the New York Academy of Medicine to assess how the city's existing services affect seniors, many immigrant groups and community-based organizations say that initiative doesn't address the particular needs of older immigrants, a major oversight in a city where they are not only one of the fastest growing demographic groups but also one of the most vulnerable.



COUNCIL OF PEOPLES ORGANIZATION

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November 17, 2014

Good Morning,

My Name is Mohammad Razvi , Executive Director of Council Of Peoples Organization.

COPO's mission is to assist low income immigrant families, particularly South Asians and Muslims, to reach their full potential as residents of New York City. COPO empowers marginalized communities to advocate for their rights and understand their responsibilities as Americans. It helps to build community relations amongst Muslim and non-Muslim community groups. It works to establish connections between the communities and various government agencies.

We provide multiple services to the community. We are the only Halal Senior Center in NYC. We provide essential services to the Seniors , such as food , transportation, socialization and benefit enrolment . We serve 200 meals a week due to limited resources. Attached is the New York Times Article "Poverty Looms Large for City's Aging Immigrant Population Study Says" The increase in the immigrant senior of South Asians population is great and according to the 2010 census is currently 46% increased and project to go to 86% in coming years. We need the support and put programs for theses hard working members of society.

Thank you,
Mohammad Razvi

The New York Times N.Y. / Region

Poverty Looms Large for City's Aging Immigrant Population, Study Says



Hiroko Masuike/The New York Times

Wahid Ali, center, and his wife, Sabira Khatoon, received medical exams in Brooklyn, N.Y.

By KIRK SEMPLE

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After retiring from his job as a security guard in 2011, Wahid Ali's days became a struggle against tedium. Speaking only limited English and with few friends, he had little to do, and mainly stayed at his home, a small rented room in an illegal basement apartment in Coney Island.

But the tougher fight was financial. Mr. Ali, 78, had meager savings, and his wife had not worked since they immigrated to the United States from Pakistan in 2006. So the couple depended on his monthly Social Security check of less than \$600.

"It was extremely difficult," he said, especially putting enough food on the table.

These are increasingly familiar concerns within New York City's surging immigrant population.

As is the case in the rest of the country, the city's residents are skewing older. Yet a new study, to be released Thursday, reveals that immigrants are the driving force behind this trend, posing enormous challenges to local government agencies and social service organizations.

From 2000 to 2010, the number of immigrants in the city aged 65 and older increased by about 30 percent while the corresponding native-born population dropped by 9 percent, according to the study by the Center for an Urban Future, an independent research organization in New York.

The foreign-born now represent 46 percent of the city's population aged 65 and older, a proportion far higher than their share of the city's overall population (37 percent).

"I think it's the biggest demographic trend that nobody is talking about," said Jonathan Bowles, the center's executive director.

Besides being one of the fastest-growing demographic groups, older immigrants are also among the most vulnerable.

"Many in this group are not only poised to strain the social safety net but fall through it entirely," the study said.

On average, older immigrants have far lower incomes and far smaller retirement savings than older native-born residents, and they receive fewer benefits from entitlement programs like Medicare and Social Security. Nearly 24 percent of all older immigrants in the city live in poverty, compared with 15 percent of their native-born counterparts, the study said.

In addition, language obstacles conspire with a lack of education and cultural barriers to keep many older immigrants from finding out about, and seeking help from, government agencies and community-based advocacy groups.

Last year, Mr. Ali found some relief from his struggles at the Council of Peoples Organization, a community group focused on South Asian Muslims that had opened a senior center at its office in Coney Island. He now spends his

days there, eating free meals, making friends, watching Pakistani satellite television programs and “hanging out,” he said through a translator. The center has also helped him and his wife apply for additional government assistance and get medical help.

The organization’s executive director, Mohammad Razvi, said the center opened last year after clients began asking if they could take some of the canned food that had been donated for disaster relief in Pakistan. That desperation and level of poverty within his own community caught Mr. Razvi off guard.

“I was in shock,” he said.

The senior center, he added, was the first in the city specifically intended for Muslims. The organization is now expanding the building to accommodate the demand for senior services.

With its extensive public transportation networks, concentration of health care centers, array of immigrant enclaves and proliferation of immigrants’ services groups, New York City may be one of the better cities in the country to grow old in.

Yet in interviews, advocates for older immigrants said that the needs of the growing population were far from being met and that more financing, from both public and private sources, was needed to meet current, and especially future, demand.

This is a concern underscored in the Center for an Urban Future’s report, which noted that government financing for senior housing and services had declined significantly in recent years, including a 20 percent drop in city financing for senior services since 2009.

There are now at least 463,000 immigrants aged 65 and older living in New York City, the largest population of its kind in any city in the United States, according to the report, which was based in part on census data.

The growth is largely attributable to the aging of the people that arrived in the United States during the 1980s and 1990s, decades that saw a sharp increase in immigration, Mr. Bowles said.

Among the array of challenges that these immigrants now face, poverty arguably looms largest; about two out of every three elderly people in New York living below the poverty line are immigrants, the study said.

An array of factors puts older immigrants at a greater risk for poverty than older native-born people. Immigrants tend to earn significantly less over the course of their working lives than native-born people and therefore receive less in benefits from Social Security, and many do not qualify at all for the program or have not enrolled, the study said. As a result, 31 percent of older immigrants do not receive Social Security benefits, compared with only 18 percent of older native-born people, according to the study.

Kit Fong Lee, who volunteers at a senior center in Lower Manhattan run by the Hamilton-Madison House, said the center’s clients, most of whom are Chinese immigrants, received Social Security benefits of, on average, about \$600 a month, around half the national average. Some clients scrape by collecting soda cans on the street, she said, or by relying on relatives.

“The life is not easy,” said Ms. Lee, 74, a retired information technology specialist for IBM.

The most significant barrier preventing older immigrants from taking advantage of social services in the city is their inability to communicate with service providers in a language they know well, the study asserted: About 60 percent of older immigrants have limited English proficiency, and more than a third live in households in which no one over 14 years old can speak English fluently.

“When I go to Manhattan, I can sometimes get lost,” Soon Kim, 88, said through an interpreter. “When I get sick I can’t describe how sick I am.” Ms. Kim visits a senior center in Corona, Queens, run by Korean Community Services of Metropolitan New York.

Language barriers can lead to social isolation, advocates said, which in turn can lead to mental illness and suicide. The problem is compounded in some immigrant communities where there is little conversation surrounding mental health issues.

“Even if it is recognized, they won’t be ready to go for treatment because there’s a stigma attached to it,” said Sudha Acharya, executive director of the South Asian Council for Social Services in Flushing, Queens. “They won’t think it’s something serious.”

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I represent: Visiting Nurse Service of NY

Address: Chinatown, NYC

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Address: 1736 A Dahill Road Brooklyn N.Y. 11223

I represent: Lesbian, gay, bisexual and Transgender Community

Address: 208 West 13 Street Center

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Address: 184-19 57th Ave, Apt. 1, Fresh Meadows, N.Y. 11365

I represent: Services Now for Adult Persons (SNAP)

Address: 80-45 Winchester Blvd, Queens Village, N.Y. 11427 - Bldg. 4

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Name: Donna Corrado

Address: 2 Lafayette Street N.Y., NY 10007

I represent: Department for the Aging

Address: 2 Lafayette

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I represent: NYC Department for the Aging

Address: 2 Lafayette Street N.Y., NY 10007

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Address: Council of Sr. Centers & Services
I represent: _____
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I represent: SAGE
Address: 305 7th Ave 15 FL NY, NY 10001

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I represent: NY Asian Women's Center

Address: 32 Bounding 10004

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Name: Howard Shih

Address: 120 Wall St., 9th Fl., New York, NY 10005

I represent: Asian American Federation

Address: 120 Wall St. 9th Fl., NY, NY 10005

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