



TESTIMONY

Presented by

Caryn Resnick
Deputy Commissioner, External Affairs

on

Oversight: Serving Immigrant Seniors Through NORCs

before the

New York City Council
Committee on Aging & Committee on Immigration

on

Friday, February 26, 2016
10:00 A.M.

at

Council Chambers, City Hall
New York, NY 10007

Good morning, Chairperson Chin, Chairperson Menchaca and members of the Aging and Immigration Committees. I am Caryn Resnick, Deputy Commissioner for External Affairs at the New York City Department for the Aging (DFTA). I am joined by Karen Taylor, Assistant Commissioner for Community Services. On behalf of Commissioner Donna Corrado, I would like to thank you for this opportunity to discuss serving immigrant seniors through Naturally Occurring Retirement Community (NORC) programs.

OVERVIEW

The term Naturally Occurring Retirement Community describes a demographic phenomenon. It was coined in the 1980s by a professor of architecture at the University of Wisconsin when he observed that certain housing communities had evolved into communities with a large concentration of older people. Definitions vary somewhat throughout the country, but Naturally Occurring Retirement Communities are defined in New York City principally through their geographic boundaries and their populations of seniors. The City has defined NORCs as residential locations – single buildings, housing developments or clusters of buildings within a neighborhood – that are neither age restricted nor built specifically for seniors. Over time, as residents have aged in place, these housing locations have become home to significant concentrations of older adults.

Throughout the last two decades, a number of NORCs have received funding from City and State programs and private foundations to provide supportive services to senior residents. These programs are called NORC Supportive Service Programs (SSPs) or NORC programs. DFTA funded NORC programs are structured to promote shared responsibility and participation in program design and operation through a partnership among senior NORC residents, the NORC housing entity, a social services provider, and a healthcare provider.

NORCs IN NEW YORK CITY

Housing is a primary concern for seniors in New York City. Most older New Yorkers prefer to continue living in their present homes and communities as they grow older. As the population of older New Yorkers continues to increase, homes and communities become more and more important in the aging process as well. Ready access to a range of coordinated support services

and opportunities is essential for successful aging in place. NORC SSPs are among the full range of DFTA funded services that address the preference of seniors to age safely in their own homes and communities and respond to their consequent support needs.

The NORC SSP movement began right here in New York City. Throughout the 1980s and 1990s, the need for services in NORCs became more and more apparent as residents and housing management in a number of New York City housing developments began to realize that the older resident population in their community was growing, and that some senior neighbors needed assistance with daily activities. Some of the early efforts to address this growing concern included on-site volunteer programs that gained a strong foothold in the housing community before public funding was available. Collaborations between forward-thinking housing managers and service providers also emerged, which often received needed support from philanthropic funders, and in 1986, a consortium of UJA-Federation agencies established the first NORC SSP in the nation – the Penn South Program for Seniors. In all cases, however, housing providers as invested partners have been and continue to be fundamental to the success of on-site supportive service programs. These early efforts thrived and grew rapidly, and in FY 2000, the City appropriated funding for a New York City NORC Initiative.

One of the essential hallmarks of the NORC program model is a match requirement, so public dollars leverage private funding and contributions from a number of committed stakeholders, including the housing entity, healthcare providers and the philanthropic community. This support has been critical in allowing NORC SSPs to flourish, enhance services and complement City funding.

DFTA SPONSORED NORCS

There are five primary objectives for DFTA funded NORC programs. All NORC programs should: 1) provide supportive environments that allow seniors independence as they age in place; 2) engage residents and facilitate linkages within the community; 3) assess the needs of senior residents; 4) offer supportive services based on assessments; and 5) build strong and meaningful communities that cultivate new roles for community members.

To strengthen the NORC network in providing supportive services and facilitating community engagement, DFTA issued a request for proposals (RFP) in June 2013 to serve buildings or housing developments with 1) a senior population of 350 or more in which 40 percent or more of the households include a senior, or 2) a housing development with 1,500 or more seniors, regardless of the percentage of households they occupy. DFTA continues to fund the current NORC program model, described earlier in my testimony, which is referred to as a Classic NORC. In addition, under the RFP, DFTA expanded the NORC model to include the option of a Hybrid NORC, in which a Classic NORC establishes a formal relationship with a DFTA funded senior center located within the NORC property. The purpose of formalizing this partnership was to facilitate service coordination between the two programs, and to allow the NORC and the senior center to benefit mutually from resources such as space, staff and programming.

In January 2014, DFTA awarded 28 NORC contracts in the Bronx, Brooklyn, Manhattan, and Queens for a term that began in July 2014; the DFTA budget for these NORC programs is \$6.5 million. These communities are located in public housing, low to moderate-income co-ops and low to moderate-income private rentals. The NORC contract awards included funding to enhance services such as case management for homebound and non-homebound seniors, assistance with accessing public benefits and an increased emphasis on wellness, chronic disease risk assessments and healthcare management.

DEMOGRAPHICS OF OLDER NEW YORKERS

Of the approximately 1.4 million older New Yorkers, more than 750,000 or 55 percent are immigrants. For 45 percent of New York City's ethnically diverse seniors, English is not the primary language. Primary languages spoken by older New Yorkers include Spanish, Chinese, Russian, Italian, French Creole, French, Greek, and Yiddish, among others. Immigrant seniors also comprise 65 percent of all seniors living in poverty, given that they receive far fewer benefits such as Social Security and other entitlement programs. Central to DFTA's mission is to meet the broad and wide-ranging needs of New York City's large and diverse older adult population.

While NORCs in New York City are defined primarily by their geographic boundaries and the significant concentration of older people that has evolved through aging in place, the majority of

DFTA funded NORCs – 23 out of 28 programs – serve communities that have high concentrations of immigrant older New Yorkers. These programs cover census tracts in which 400 or more residents are immigrants who are aged 60 or older. DFTA funded NORC programs serving neighborhoods with the greatest number of immigrant seniors include: JASA Co-op City in the Bronx; JASA Coney Island Active Aging, JASA Trumps United and Spring Creek in Brooklyn; Hamilton Madison House Knickerbocker in Chinatown; Isabella Geriatric Ft. George VISTAS in Washington Heights; Union Settlement Franklin Plaza in East Harlem; Forest Hills Community House and Selfhelp Community Services Fresh Meadows in Queens; Samuel Field Y Clearview Gardens in Whitestone; and Selfhelp Community Services Big Six Towers in Woodside. Maps are appended to my testimony, which show both DFTA funded and discretionary NORC programs and census tract data on the number of immigrant residents aged 60 and older.

DFTA requires culturally sensitive programming and staffing within all of our sponsored programs, including NORCs. NORC programs have appropriate staffing to meet language access needs, organize cultural activities that interest various groups and coordinate programs geared toward immigrant seniors, such as English for Speakers of Other Languages and citizenship classes and legal services. For example, Isabella Geriatric Ft. George VISTAS in Manhattan holds weekly meetings called Café con Leche and Russian Tea Time, which are geared toward Latino and Russian senior residents. From these meetings, participants avail of case assistance and activity and support groups that serve Spanish and Russian speaking older adults. Spring Creek in Brooklyn has a Patient Navigation Program in both Russian and English to assist NORC residents who have difficulty accessing and navigating the health care system. Staff at Spring Creek are fluent in Russian, Ukrainian, Polish, Spanish, Mandarin, and several Chinese dialects. Educational activities at Spring Creek also include English language classes. Selfhelp Community Services Fresh Meadows in Queens offers educational and recreational programs, such as choral group and coffee hour, which are targeted to Korean residents.

COUNCIL INITIATIVES

As a growing number of older adults age in place and in response to broad based community efforts to meet the needs of this population, NORC models continue to develop and evolve. We are pleased that the Council allocated a total of \$3.8 million in the adopted budget for FY 2016 to fund

NORC services. Many NORC programs funded through Council discretionary allocations are also located in areas with high concentrations of immigrant seniors, such as the Shorefront YM-YWHA of Brighton-Manhattan Beach in Brooklyn, Isabella Geriatric River Terrace in Washington Heights, Visiting Nurse Service of New York Chinatown in Manhattan, Grand Street Settlement BEST in the Lower East Side, Selfhelp Community Services Northridge in Jackson Heights, and Rochdale Village in Queens. DFTA looks forward to the continued partnership with the Council to support the overall NORC network and its capacity to enhance the lives of seniors.

CONCLUSION

Thank you again for this opportunity to testify on serving immigrant seniors through NORC programs. I am pleased to answer any questions you may have.

NORC Sites and NYC Foreign Born Aging Population

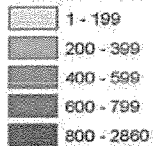
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List of NORCS with Reference Numbers to Maps
Citywide Map of NORCS
Borough Maps of NORCS

Legend

- ▲ DFTA Funded NORC Site
- Discretionary NORC Site

Number of 60+ Foreign Born Residents by Census Tract*



New York City Community District (CD) Guide*

Bronx

- 201 CD1 Mott Haven
- 202 CD2 Hunts Point
- 203 CD3 Melrose
- 204 CD4 Highbridge/Concourse
- 205 CD5 Fordham
- 206 CD6 East Tremont
- 207 CD7 Kingsbridge
- 208 CD8 Riverdale/Marble Hill
- 209 CD9 Soundview/Parkchester
- 210 CD10 Throgs Neck/Pelham Bay
- 211 CD11 Morris Park
- 212 CD12 Eastchester

Brooklyn

- 301 CD1 Williamsburg/Greenpoint
- 302 CD2 Fort Greene
- 303 CD3 Bedford-Stuyvesant
- 304 CD4 Bushwick/Ridgewood
- 305 CD5 East New York
- 306 CD6 Red Hook/Park Slope
- 307 CD7 Sunset Park
- 308 CD8 Crown Heights
- 309 CD9 Prospect/Lefferts Gardens
- 310 CD10 Bay Ridge
- 311 CD11 Bensonhurst
- 312 CD12 Borough Park/Ocean Parkway
- 313 CD13 Coney Island
- 314 CD14 Flatbush
- 315 CD15 Sheepshead Bay
- 316 CD16 Brownsville/Ocean Hill
- 317 CD17 East Flatbush
- 318 CD18 Canarsie

Manhattan

- 101 CD1 Tribeca/Wall Street
- 102 CD2 Greenwich Village/Soho
- 103 CD3 Lower East Side/Chinatown
- 104 CD4 Chelsea
- 105 CD5 Midtown
- 106 CD6 Murray Hill
- 107 CD7 Upper West Side
- 108 CD8 Upper East Side/ Roosevelt Island
- 109 CD9 West Harlem
- 110 CD10 Central Harlem
- 111 CD11 East Harlem
- 112 CD 12 Washington Heights/Inwood

Queens

- 401 CD1 Astoria/Long Island City
- 402 CD2 Sunnyside/Woodside
- 403 CD3 Jackson Heights/East Elmhurst
- 404 CD4 Corona/Elmhurst
- 405 CD5 Ridgewood/Glendale
- 406 CD6 Forest Hills/Rego Park
- 407 CD7 Flushing/Whitestone
- 408 CD8 Fresh Meadows
- 409 CD9 Kew Gardens/Woodside
- 410 CD10 Ozone Park/Howard Beach
- 411 CD11 Bayside/Little Neck
- 412 CD12 Jamaica/Hollis
- 413 CD13 Queens Village
- 414 CD14 The Rockaways

Staten Island

- 501 CD1 North Island
- 502 CD2 Mid-Island
- 503 CD3 South Island

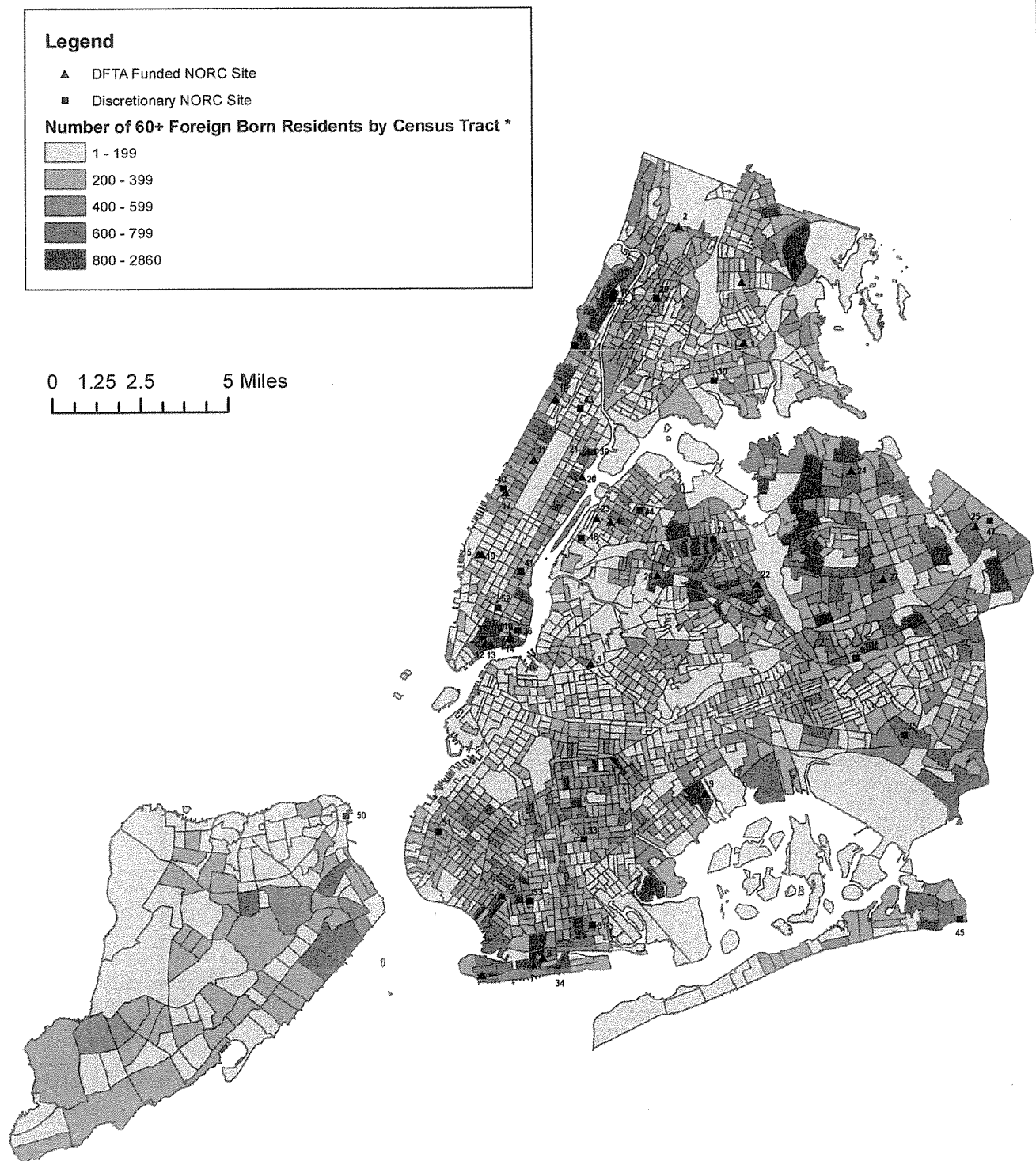
*The geographic areas listed in each community district above are illustrative and do not include all of the neighborhoods within the community district.

NORC Program Sites

No.	Type	Program Name	Address	Borough	Zip Code	Community District	Council District	Council Member
1	DFTA	BETH ABRAHAM PARKCHESTER ENHANCE NORC	1525 UNIONPORT RD	BRONX	10462	209	18	Annabel Palma
2	DFTA	BJCC AMALGAMATED PK RESEVOIR NORC	98 VAN CORTLANDT PARK S	BRONX	10463	208	11	Andrew Cohen
3	DFTA	BJCC PELHAM PARKWAY HOUSES NORC	2425 WILLIAMSBRIDGE RD	BRONX	10469	211	13	James Vacca
4	DFTA	JASA CO OP CITY NORC	2049 BARTOW AVE	BRONX	10475	210	12	Andy King
5	DFTA	JASA BUSHWICK HYLAND NORC	50 HUMBOLDT ST	BROOKLYN	11206	301	34	Antonio Reynoso
6	DFTA	JASA CONEY ISLAND ACTIVE AGING NORC	2950 W 35TH ST	BROOKLYN	11224	313	47	Mark Treyger
7	DFTA	JASA TRUMPS UNITED NORC	2915 W 5TH ST	BROOKLYN	11224	313	48	Chaim M. Deutsch
8	DFTA	JASA WARBASE CARES NORC	2844 OCEAN PKWY	BROOKLYN	11235	313	47	Mark Treyger
9	DFTA	SPRING CREEK NORC	160 SCHROEDERS AVE	BROOKLYN	11239	305	42	Inez Barron
10	DFTA	EDUCATIONAL ALLIANCE CO OP VILLAGE NORC	465 GRAND ST	MANHATTAN	10002	103	1	Margaret Chin
11	DFTA	GODDARD RIVERSIDE WEST SIDE NORC	593 COLUMBUS AVE	MANHATTAN	10024	107	6	Helen Rosenthal
12	DFTA	HAMILTON MADISON ALFRED SMITH HOUSESNORC	50 MADISON ST	MANHATTAN	10038	103	1	Margaret Chin
13	DFTA	HAMILTON MADISON KNICKERBOCKER NORC	36 MONROE ST	MANHATTAN	10002	103	1	Margaret Chin
14	DFTA	HENRY STREET VLADECK CARES NORC	265 HENRY ST	MANHATTAN	10002	103	1	Margaret Chin
15	DFTA	HUDSON GUILD ELLIOT CHELSEA NORC	441 W 26TH ST	MANHATTAN	10001	104	3	Corey Johnson
16	DFTA	ISABELLA GERIATRIC FT GEORGE VISTAS NORC	17 FORT GEORGE HILL	MANHATTAN	10040	112	10	Ydanis Rodriguez
17	DFTA	LINCOLN SQUARE NORC	250 W 65TH ST	MANHATTAN	10023	107	6	Helen Rosenthal
18	DFTA	MORNINGSIDE MRHS NORC	100 LA SALLE ST	MANHATTAN	10027	109	7	Mark Levine
19	DFTA	PENN SOUTH NORC	290 9TH AVE	MANHATTAN	10001	104	3	Corey Johnson
20	DFTA	STANLEY M ISAACS NORC	415 E 93RD ST	MANHATTAN	10128	108	5	Ben Kallos
21	DFTA	UNION SETTLEMENT FRANKLIN PLAZA NORC	2090 2ND AVE	MANHATTAN	10029	111	8	Melissa Mark-Viverito
22	DFTA	FOREST HILLS COMMUNITY HOUSE NORC	108-25 62ND DR	QUEENS	11375	406	29	Karen Koslowitz
23	DFTA	HANAC RAVENSWOOD NORC	34-35 12TH ST	QUEENS	11106	401	26	Jimmy Van Bramer
24	DFTA	SAMUEL FIELD Y CLEARVIEW GARDENS NORC	163-59 17TH AVE	QUEENS	11357	407	19	Paul Vallone
25	DFTA	SAMUEL FIELD Y DEEPPDALE GARDENS NORC	57-17 MARATHON PKWY	QUEENS	11362	411	23	Barry Grodenchik
26	DFTA	SELFHELP BIG SIX NORC	59-55 47TH AVE	QUEENS	11377	402	26	Jimmy Van Bramer
27	DFTA	SELFHELP FRESH MEADOWS NORC	67-00 192ND ST	QUEENS	11365	408	23	Barry Grodenchik
49	DFTA	SELFHELP QUEENSVIEW NORC	33-34 CRESCENT ST	QUEENS	11106	401	22	Costa Constantinides

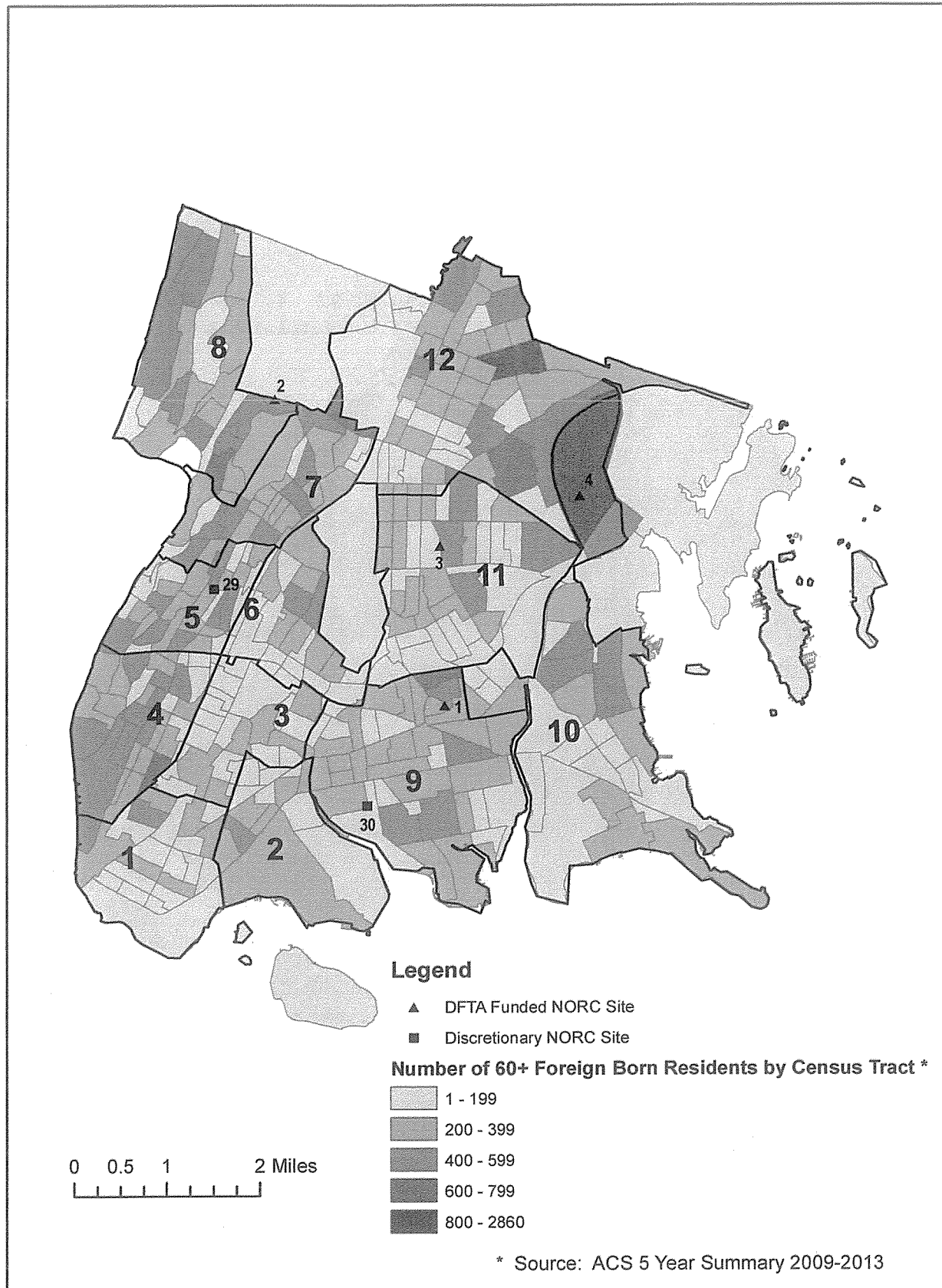
No.	Type	Program Name	Address	Borough	Zip Code	Community District	Council District	Council Member
28	Discretionary	SELFHELP NORTHRIDGE-BRULENE	34-10 94TH ST	QUEENS	11372	403	25	Daniel Dromm
29	Discretionary	BRONXWORKS NORC	80 E 181ST ST	BRONX	10453	205	14	Fernando Cabrera
30	Discretionary	LAFAYETTE ESTATES NORC	825 MORRISON AVE	BRONX	10473	209	17	Vacant
31	Discretionary	CCNS NORC	3677 NOSTRAND AVE	BROOKLYN	11229	315	46	Alan Maisel
32	Discretionary	GOOD NEIGHBORS NORC	7802 BAY PKWY	BROOKLYN	11214	311	44	David G. Greenfield
33	Discretionary	PHILLIP HOWARD NORC	1655 FLATBUSH AVE	BROOKLYN	11210	318	45	Jumaane D. Williams
34	Discretionary	SHOREFRONT YM-YW OF BRIGHTON	3300 CONEY ISLAND AVE	BROOKLYN	11235	313	48	Chaim M. Deutsch
35	Discretionary	ROCHDALE VILLAGE NORC	169-65 137TH AVE	JAMAICA	11434	412	28	Ruben Wills
36	Discretionary	BEST NORC	72 COLUMBIA ST	MANHATTAN	10002	103	2	Rosie Mendez
37	Discretionary	CHINATOWN NORC	2 MOTT ST	MANHATTAN	10013	103	1	Margaret Chin
38	Discretionary	EL CORAZON NORC	515 AUDUBON AVE	MANHATTAN	10040	112	10	Ydanis Rodriguez
39	Discretionary	JASA 1199 PLAZA NORC	2106 1ST AVENUE	MANHATTAN	10029	111	8	Melissa Mark-Viverito
40	Discretionary	LINCOLN HOUSE OUTREACH NORC	303 W 66TH ST	MANHATTAN	10023	107	6	Helen Rosenthal
41	Discretionary	PHIPPS PLAZA WEST NORC	520 2ND AVE	MANHATTAN	10016	106	2	Rosie Mendez
42	Discretionary	RIVER TERRACE NORC	156-20 RIVERSIDE DR W	MANHATTAN	10032	112	7	Mark Levine
43	Discretionary	SAGE HARLEM COMMUNITY CENTER NORC	127 W 127TH ST	MANHATTAN	10027	110	9	Inez E. Dickens
44	Discretionary	CENTRAL ASTORIA DEVELOPMENT NORC	25-69 38TH ST	QUEENS	11103	401	22	Costa Constantinides
45	Discretionary	JASA NNORC-FAR ROCKAWAY (PLANNING)	711 SEAGIRT AVE	QUEENS	11691	414	31	Donovan Richards
46	Discretionary	JSPOA NORC PLANNING GRANT	162-04 JAMAICA AVE	QUEENS	11432	412	27	I. Daneek Miller
47	Discretionary	NORC WITHOUT WALLS	58-20 LITTLE NECK PKWY	QUEENS	11362	411	23	Barry Grodenchik
48	Discretionary	QUEENSBRIDGE NNORC	10-25 41ST AVE	QUEENS	11101	401	26	Jimmy Van Bramer
50	Discretionary	CASC NNORC (PLANNING)	56 BAY ST	STATEN ISLAND	10301	501	49	Deborah Rose
51	Discretionary	BAY RIDGE NNORC (PLANNING)	411 OVINGTON AVENUE	BROOKLYN	11209	310	43	Vincent Gentile
52	Discretionary	COOPER SQUARE NNORC	61 EAST 4TH STREET	MANHATTAN	10003	103	2	Rosie Mendez
53	Discretionary	SEPHARDIC BIKUR HOLIM COMM SVC NTKW NORC	425 KINGS HIGHWAY	BROOKLYN	11223	311	44	David G. Greenfield

NORCs and NYC Foreign Born Aging Population New York City



* Source: ACS 5 Year Summary 2009-2013

NORCs and NYC Foreign Born Aging Population Bronx

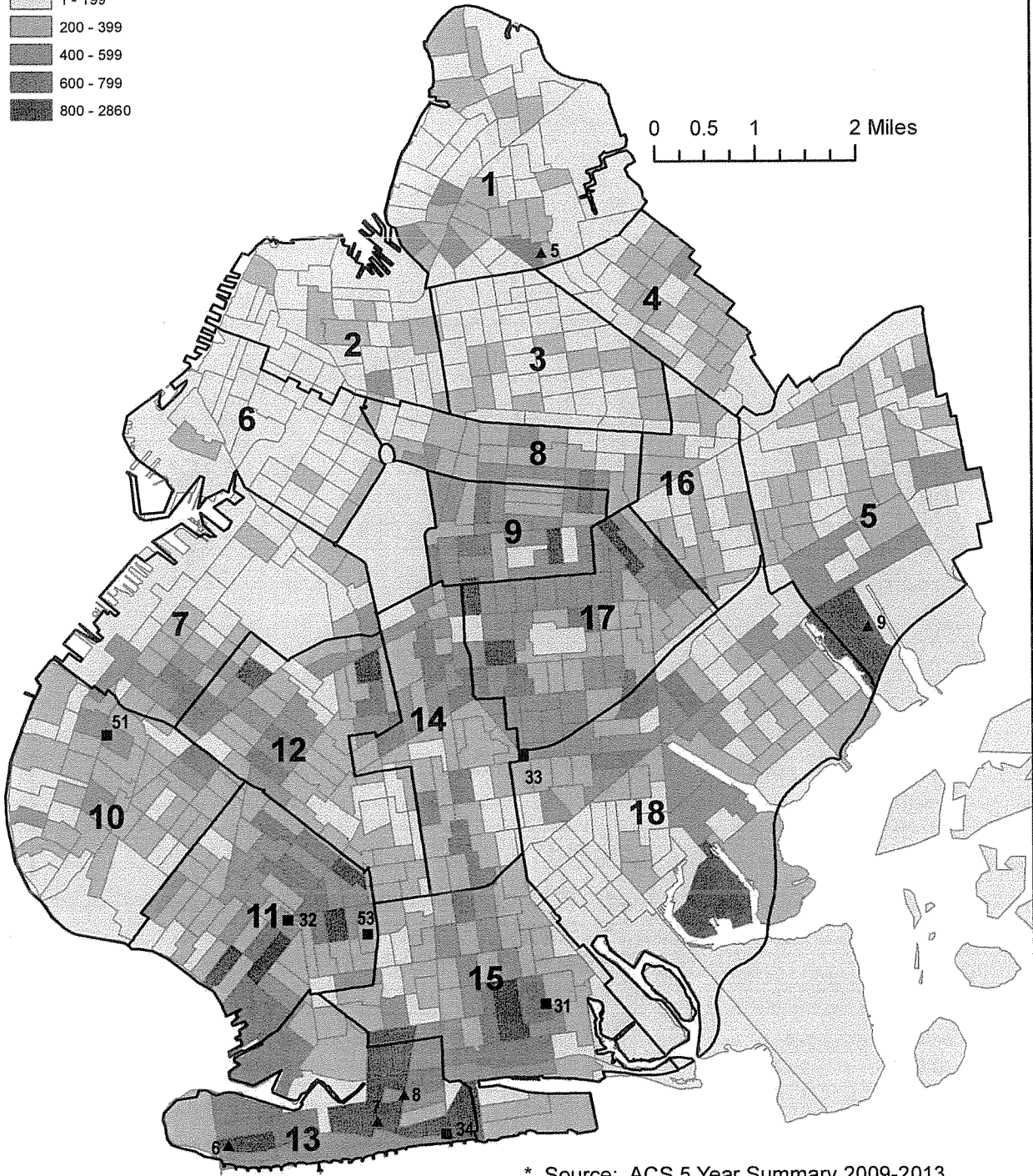
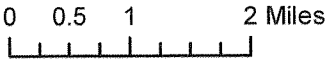
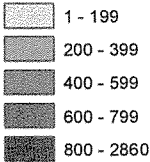


NORCs and NYC Foreign Born Aging Population Brooklyn

Legend

- ▲ DFTA Funded NORC Site
- Discretionary NORC Site

Number of 60+ Foreign Born Residents by Census Tract*



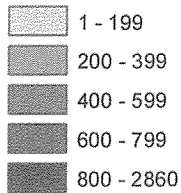
* Source: ACS 5 Year Summary 2009-2013

NORCs and NYC Foreign Born Aging Population Manhattan

Legend

- ▲ DFTA Funded NORC Site
- Discretionary NORC Site

Number of 60+ Foreign Born Residents by Census Tract*

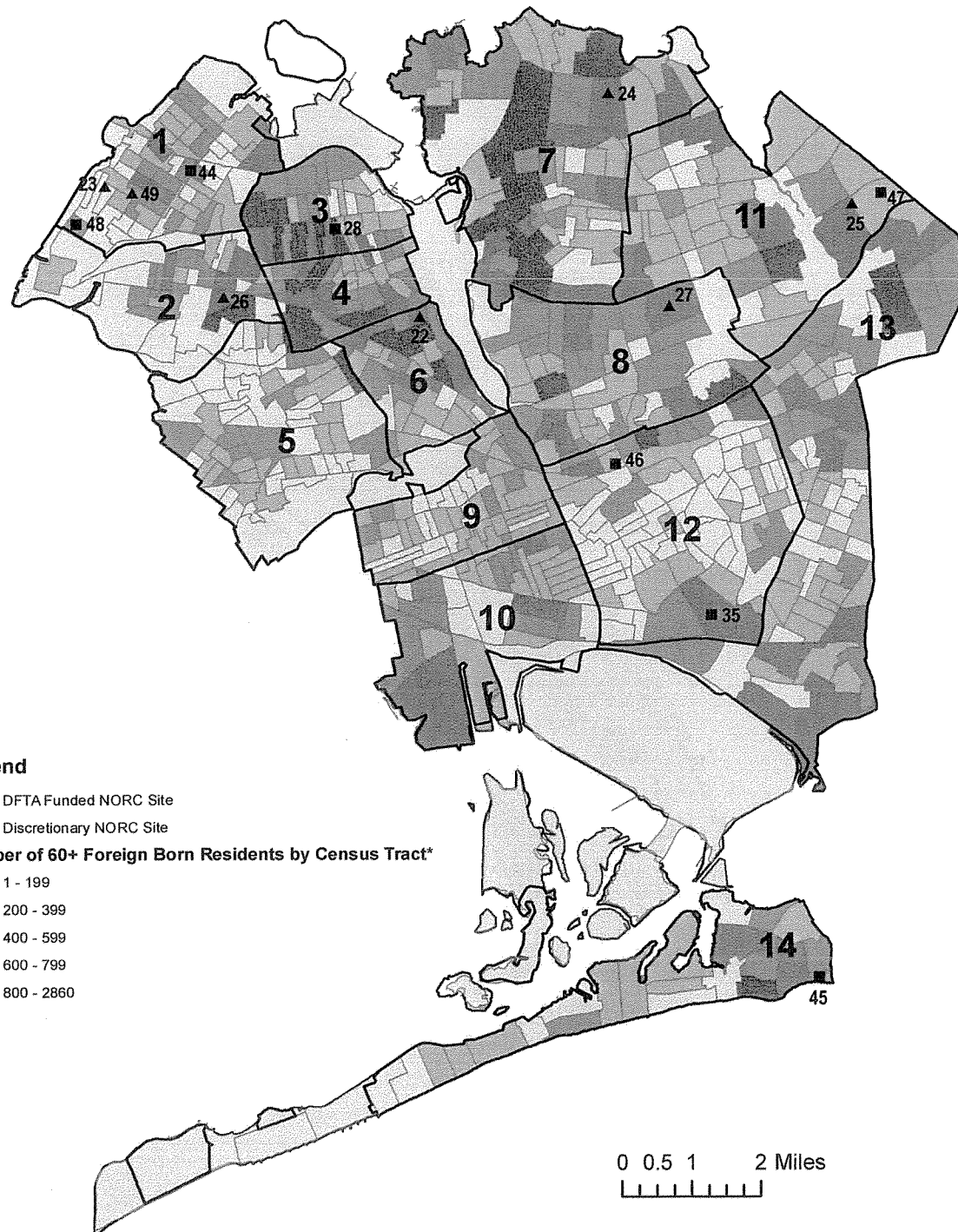


0 0.5 1 2 Miles



* Source: ACS 5 Year Summary 2009-2013

NORCs and NYC Foreign Born Aging Population Queens



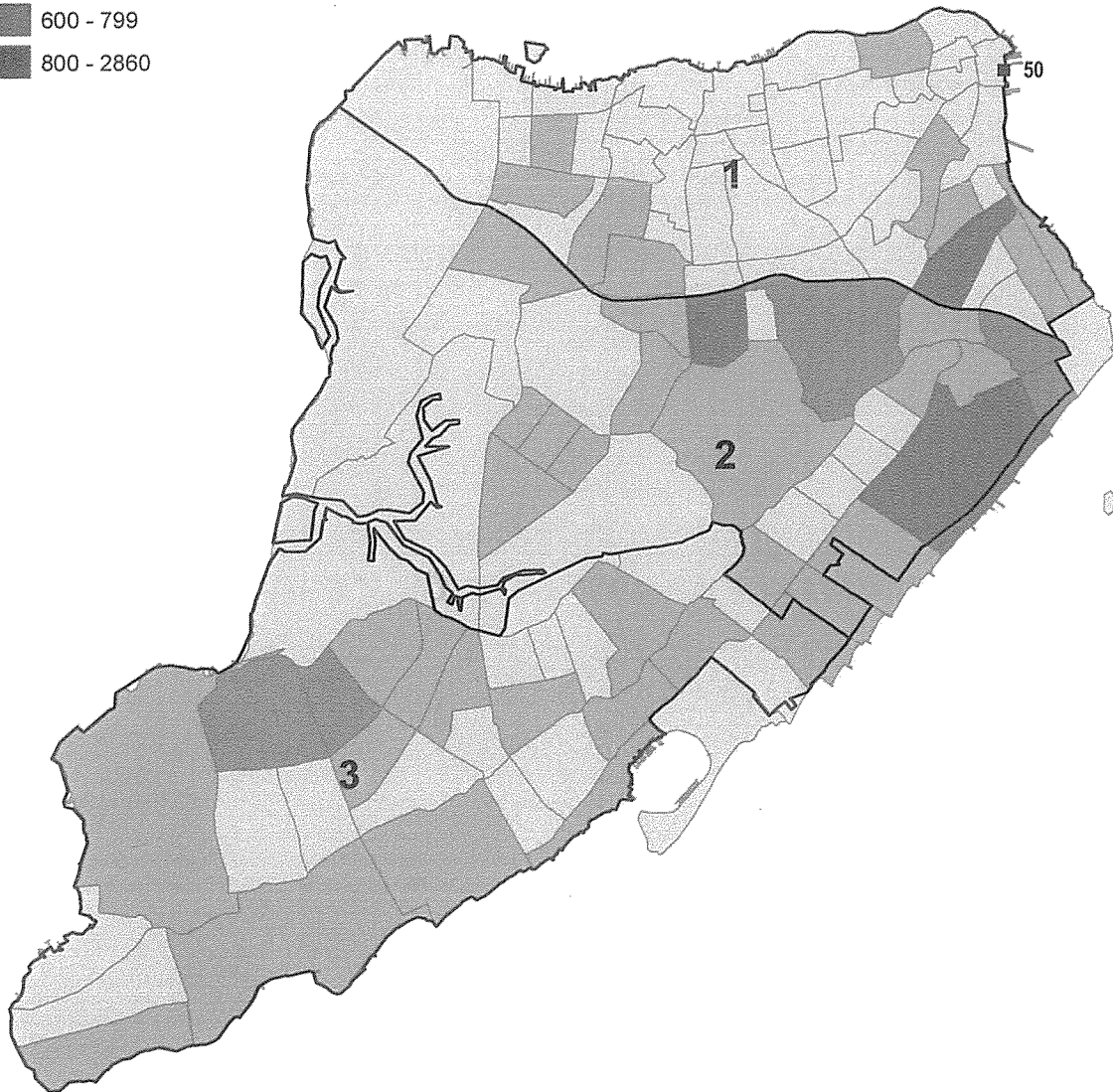
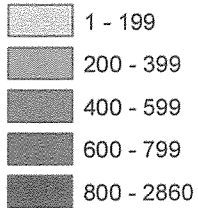
* Source: ACS 5 Year Summary 2009-2013

NORCs and NYC Foreign Born Aging Population Staten Island

Legend

- ▲ DFTA Funded NORC Site
- Discretionary NORC Site

Number of 60+ Foreign Born Residents by Census Tract*



0 0.75 1.5 3 Miles

* Source: ACS 5 Year Summary 2009-2013

Testimony of Anita Altman, UJA-Federation, Consultant
at
Joint Hearing of NYC Council Aging and Immigration Committees
February 25, 2016

Good morning Chairs Chin and Menchaca, and the members of the Council's Aging and Immigration committees. My name is Anita Altman, and I am appearing before you as a consultant to UJA-Federation of New York, although for over twenty years as a UJA-Federation staff member I testified numerous times on NORC supportive service programs before the City Council. I want to express our great appreciation for the opportunity presented by this joint hearing to shine a light on the needs of the large and rapidly growing numbers of New York City's foreign born seniors and the potential for NORC-SSPs, particularly Neighborhood NORC programs to help address their needs.

But first a little history, New York City has a robust NORC-SSP (naturally occurring retirement communities-supportive service programs) because of the leadership provided in 1999 by the Speaker of the City Council, Peter Vallone, who with the support of his council members and the mayor, included the \$4 million in the city budget that established what is now known as the Classic NORC program. The city's Classic NORC program currently provides \$6.5 million of funding for supportive services programs where housing has common ownership, typically those under the auspice of the NYC Housing Authority, moderate-income limited equity co-ops, and in a few instances large privately owned rental properties like Starrett City and Parkchester.

The Neighborhood or NNORC program model was developed in response to the profound aging in of communities where there is no common ownership of housing, namely communities of privately owned homes and low-rise apartment buildings. Communities with this housing stock are often more challenging to organize since there are no formal boundaries defining the community nor a central authority with which to work. More than 10 years ago, the New York State Legislature established and funded an NNORC program. Today, there are 7 state funded NNORC programs here in NYC, the majority of which serve significant foreign born elder communities, a number of which you will hear from today. Drawing from their success in effectively engaging, organizing and providing critically necessary services to these communities, we are urging that the NYC Council, working with the administration, establish and fund a NYC Neighborhood NORC program of at least \$4 million, comparable to what it did almost 2 decades ago.

We believe that if a NYC NNORC program was established, that it has the potential to serve many more aged-in communities of foreign born seniors. We know that these seniors, who in short time will be the majority of NYC seniors, are living in even more challenging circumstances than many of our native born, as reflected in these startling facts published by the Center for the Urban Future in their July 2013 report, *The New Face of New York's Seniors*:

"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. 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...Because of language and cultural barriers, foreign-born seniors have a harder time finding out about existing support services, including both tax and entitlement programs...immigrant seniors may be reluctant to participate in programs not just because they don't know the services exist but because they aren't linguistically accessible or culturally appropriate. "

In our years of work helping to foster the concept of NORC supportive service programs, we commissioned the mapping of census data to help identify areas where seniors live in significant concentrations, which we can provide you for all 5 boroughs. Moreover, we thought it could be revealing to overlay these maps with data on locations of high concentrations of foreign born, and we believe they are.

What the state-funded NNORC programs have been able to organize on-site in communities of densely aged foreign born elders are programs that are both linguistically accessible and culturally appropriate. Community organizing and building partnerships are central to the NORC program model-professional service agencies working in partnership with the seniors, and their communities' cultural, service and religious institutions to identify needs as well as the community's aspiration for living a better life. We believe that the existing state funded programs have much that they can share with other communities wanting to organize their own programs.

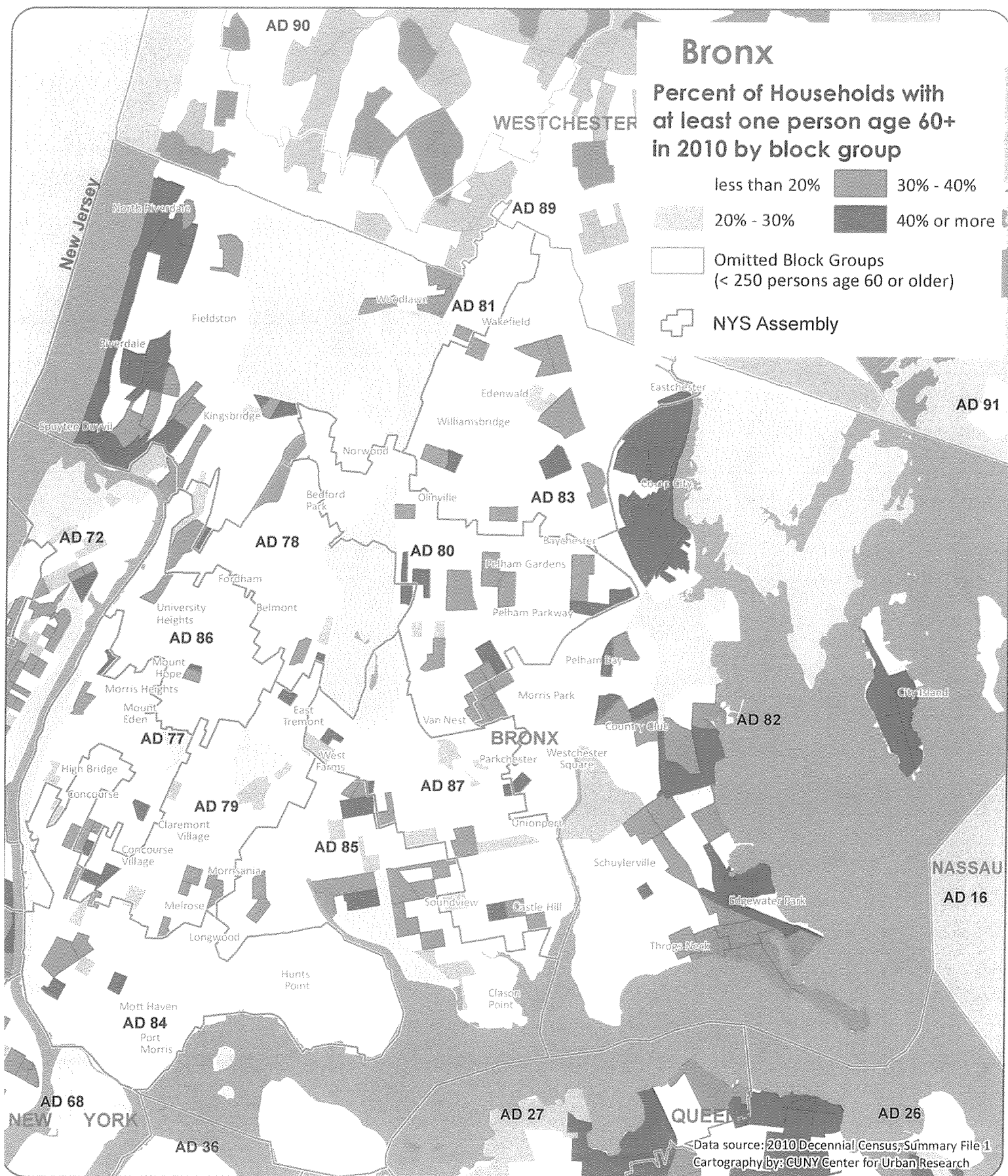
The Council heard us two years ago when we began discussing the potential of this program model to help address the needs and aspirations of NYC's foreign born elders. You provided discretionary funding for some planning studies, and operating support for neighborhood programs, which had been ineligible to participate in DFTA's RFP which was limited to the Classic NORC programs. I know that last year additional funds were provided to help support critically needed nursing services at NNORCs. We are very grateful for this much needed support, but hope you will recognize that there are real limitations with annually appropriated discretionary funding. Without knowing if funds will be available from one year to the next, agencies are hindered in their ability to commit resources and build programs. We believe that it is important for the integrity of the program that NNORC-SSPs become a formal program of DFTA, which then would be responsible for formulating criteria and standards, issuing an RFP so that funding is awarded on a competitive basis, and that agency oversight and program support is provided.

While NORC-SSPs are not the solution for all aging communities, we do know from the state's program that the NNORC has proven to be a remarkably appropriate approach to helping address the many issues and challenges that foreign born seniors in the city are confronting. We do hope that you will be able to help us secure committed funding for this NNORC-SSPs in the 2017 City Budget, so that many more of NYC's foreign born seniors can live with greater security and support as a result of this program.

Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

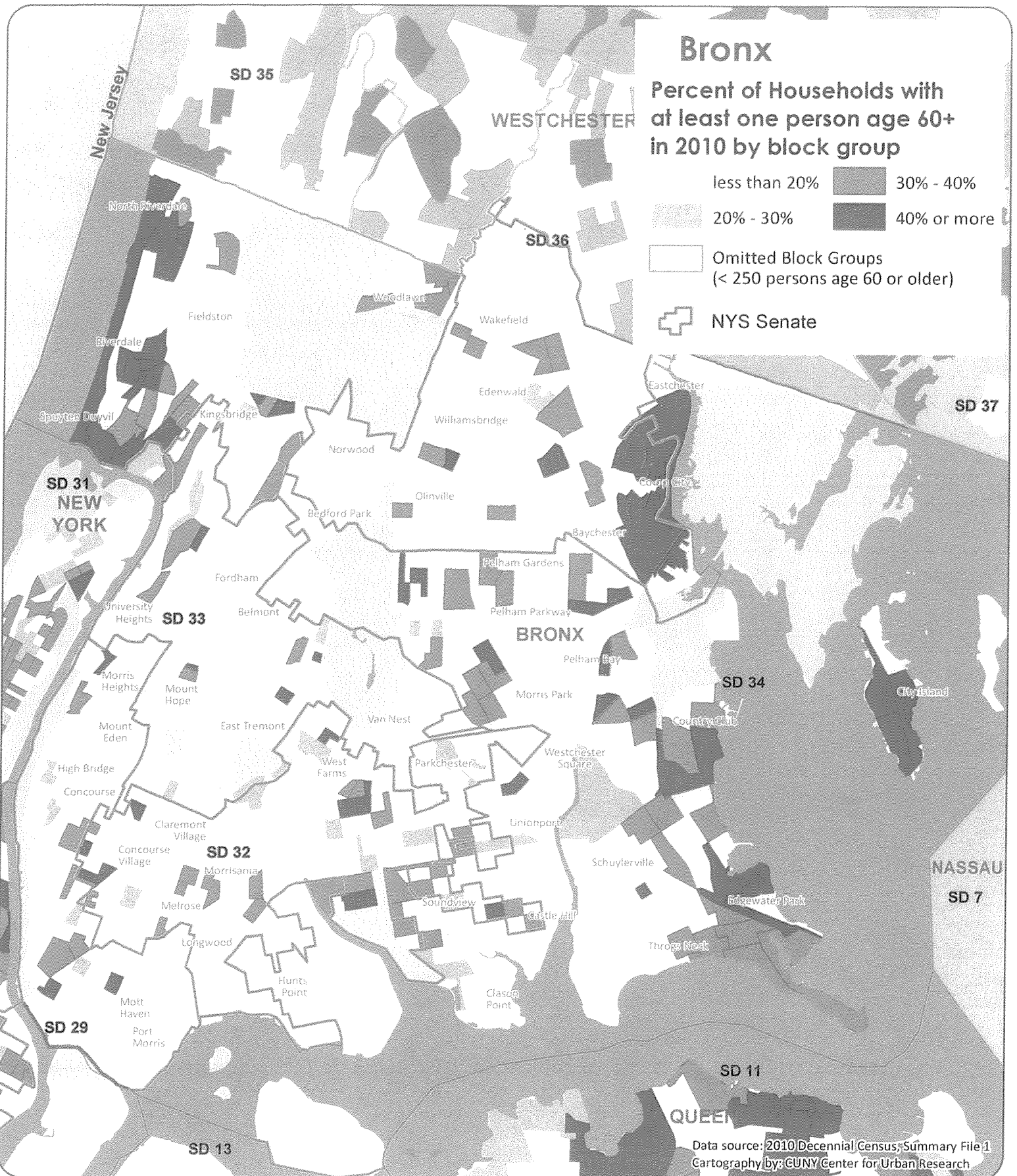
Households with at least one person 60+ by Census Block Group



Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

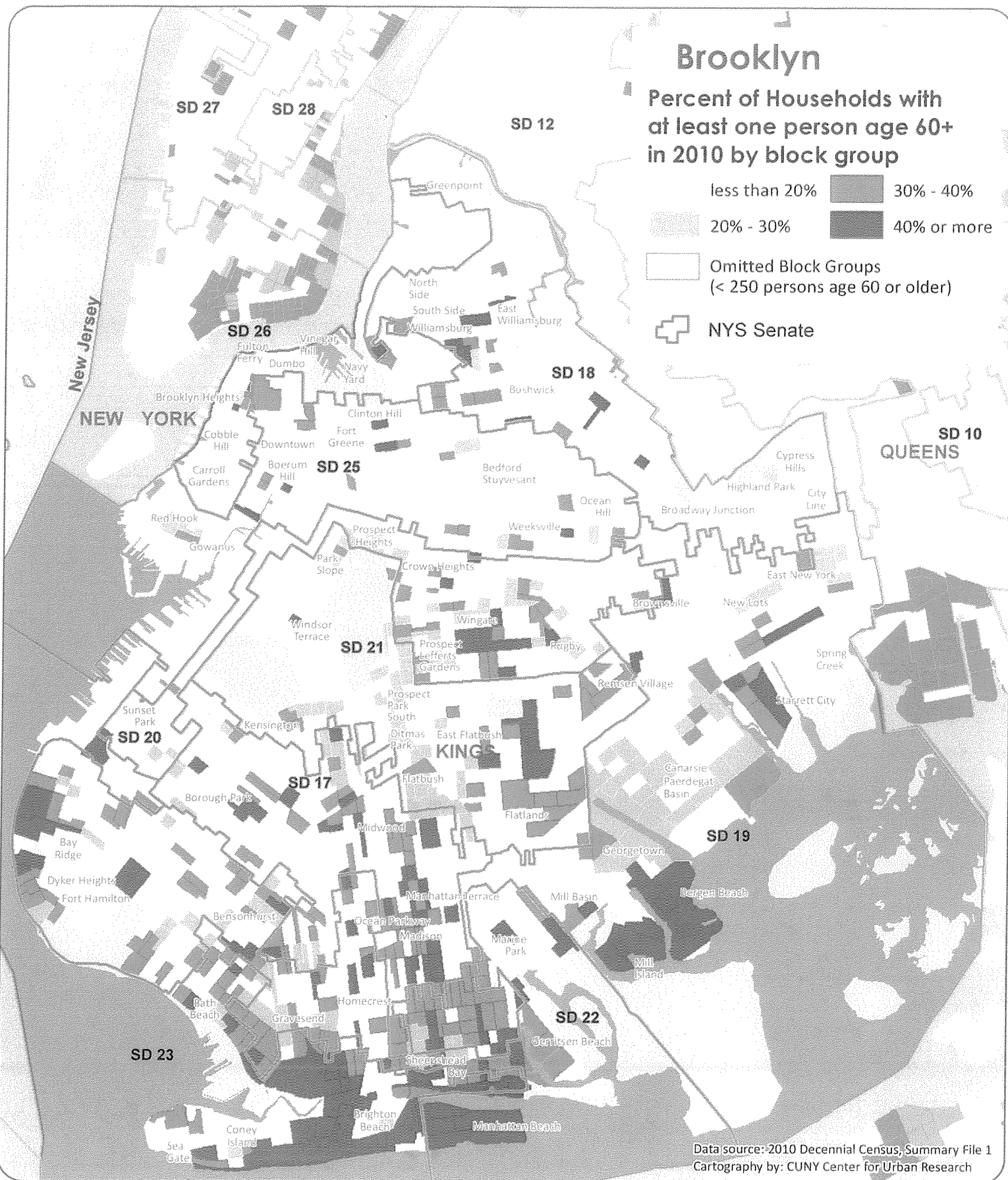
Households with at least one person 60+ by Census Block Group



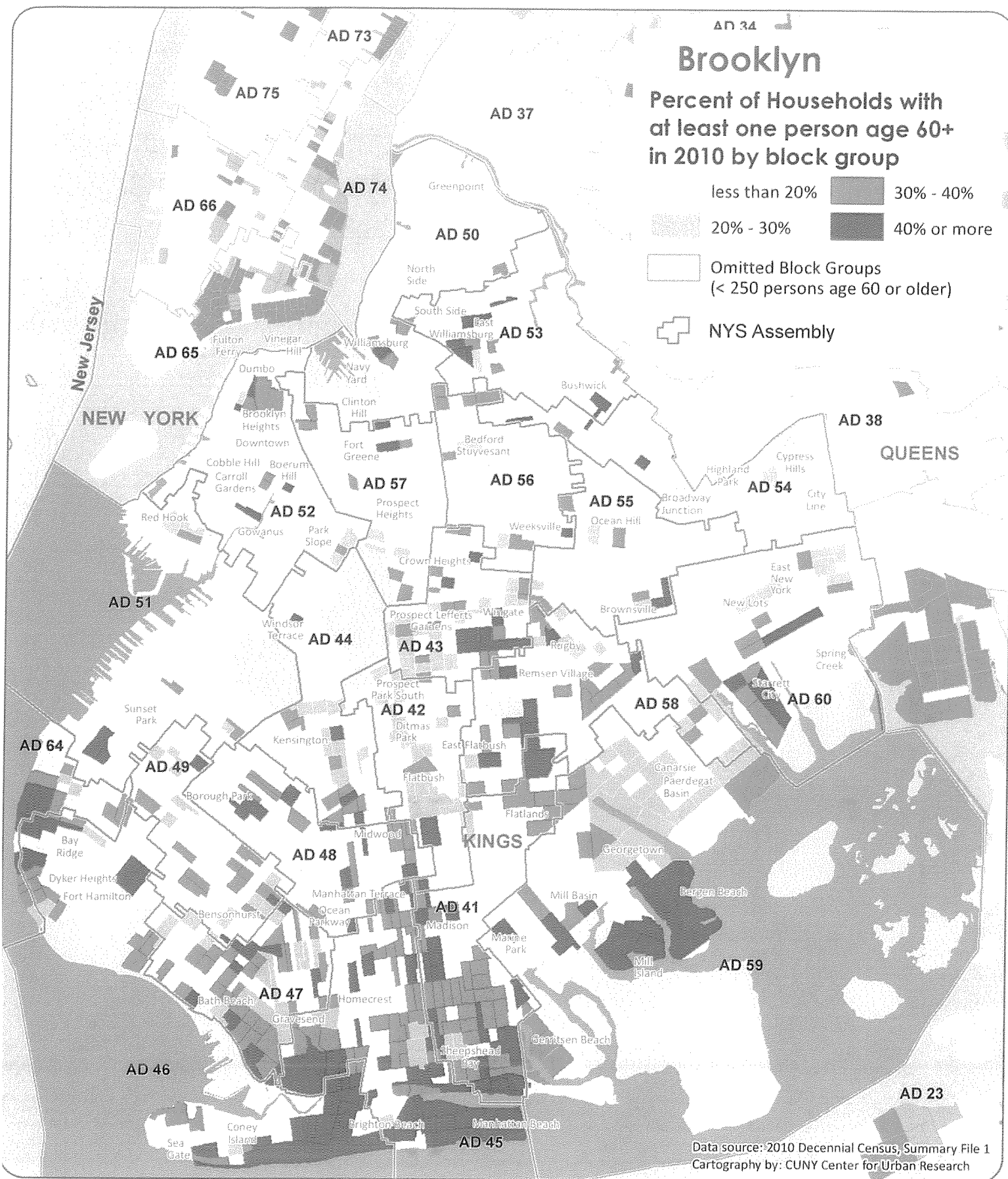
Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

Households with at least one person 60+ by Census Block Group



Households with at least one person 60+ by Census Block Group



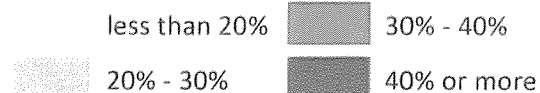
Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

Households with at least one person 60+ by Census Block Group

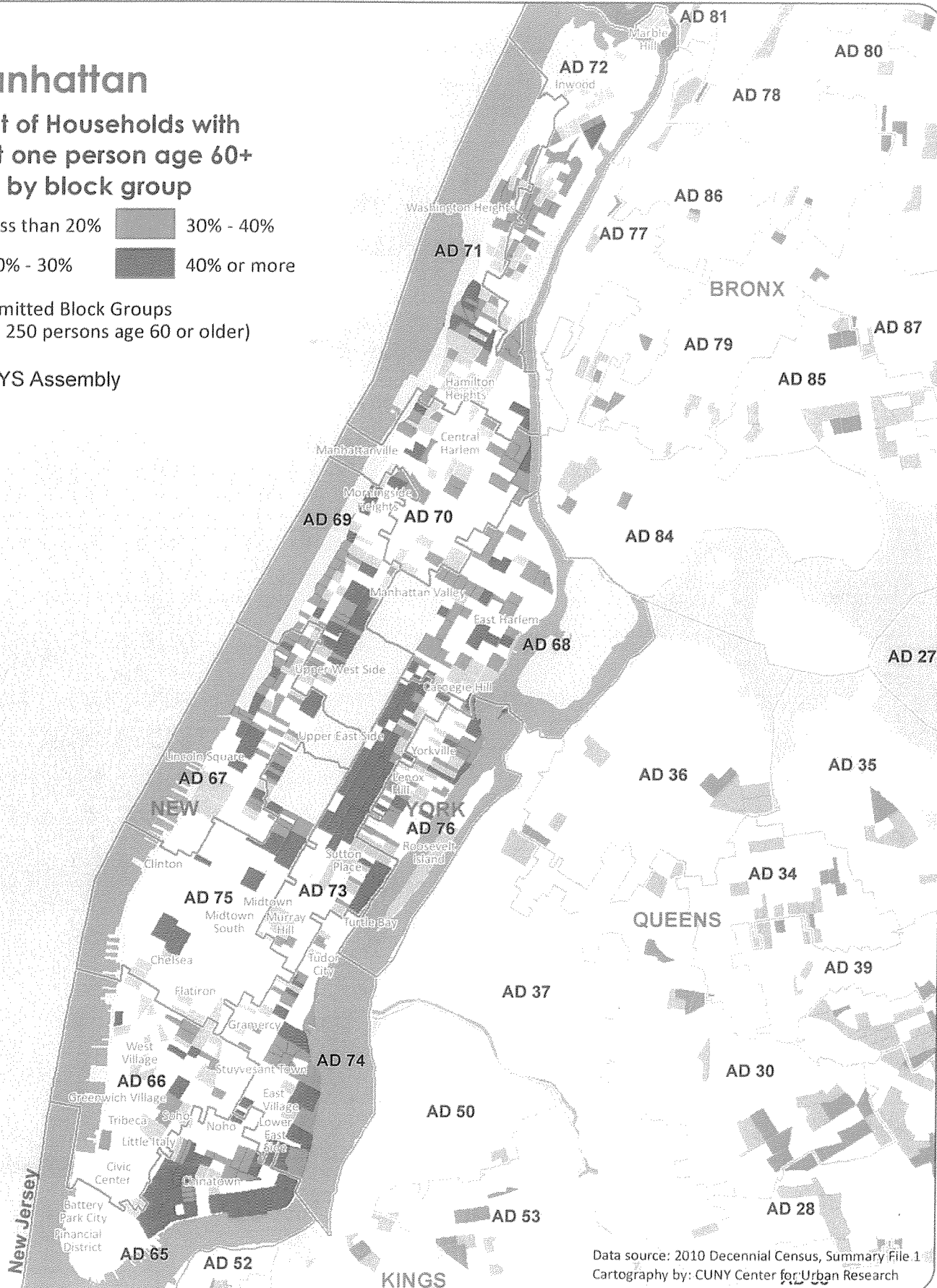
Manhattan

Percent of Households with
at least one person age 60+
in 2010 by block group



Omitted Block Groups
(< 250 persons age 60 or older)

NYS Assembly



Data source: 2010 Decennial Census, Summary File 1
Cartography by: CUNY Center for Urban Research

Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

Households with at least one person 60+ by Census Block Group

Manhattan

Percent of Households with
at least one person age 60+
in 2010 by block group

less than 20% 30% - 40%

20% - 30% 40% or more

Omitted Block Groups
(< 250 persons age 60 or older)

NYS Senate



Data source: 2010 Decennial Census, Summary File 1
Cartography by: CUNY Center for Urban Research

Households with at least one person 60+ by Census Block Group



Households with at least one person 60+ by Census Block Group

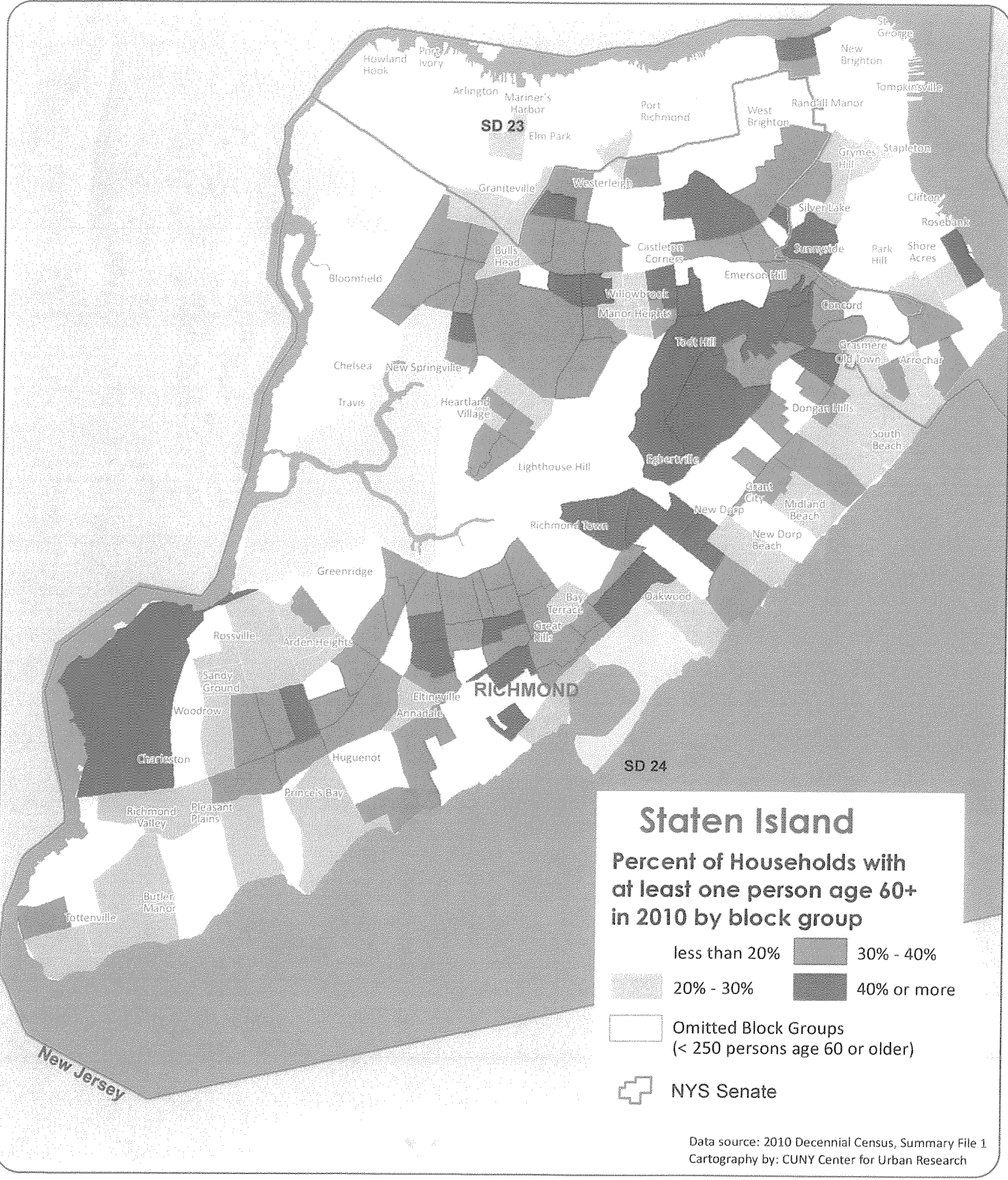


Households with at least one person 60+ by Census Block Group



Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -
Households with at least one person 60+ by Census Block Group



Data source: 2010 Decennial Census, Summary File 1
Cartography by: CUNY Center for Urban Research

Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

Households with at least one person 60+ by Census Block Group

NEW YORK CITY

Percent of Households with
at least one person
age 60 and over in 2010
by block group

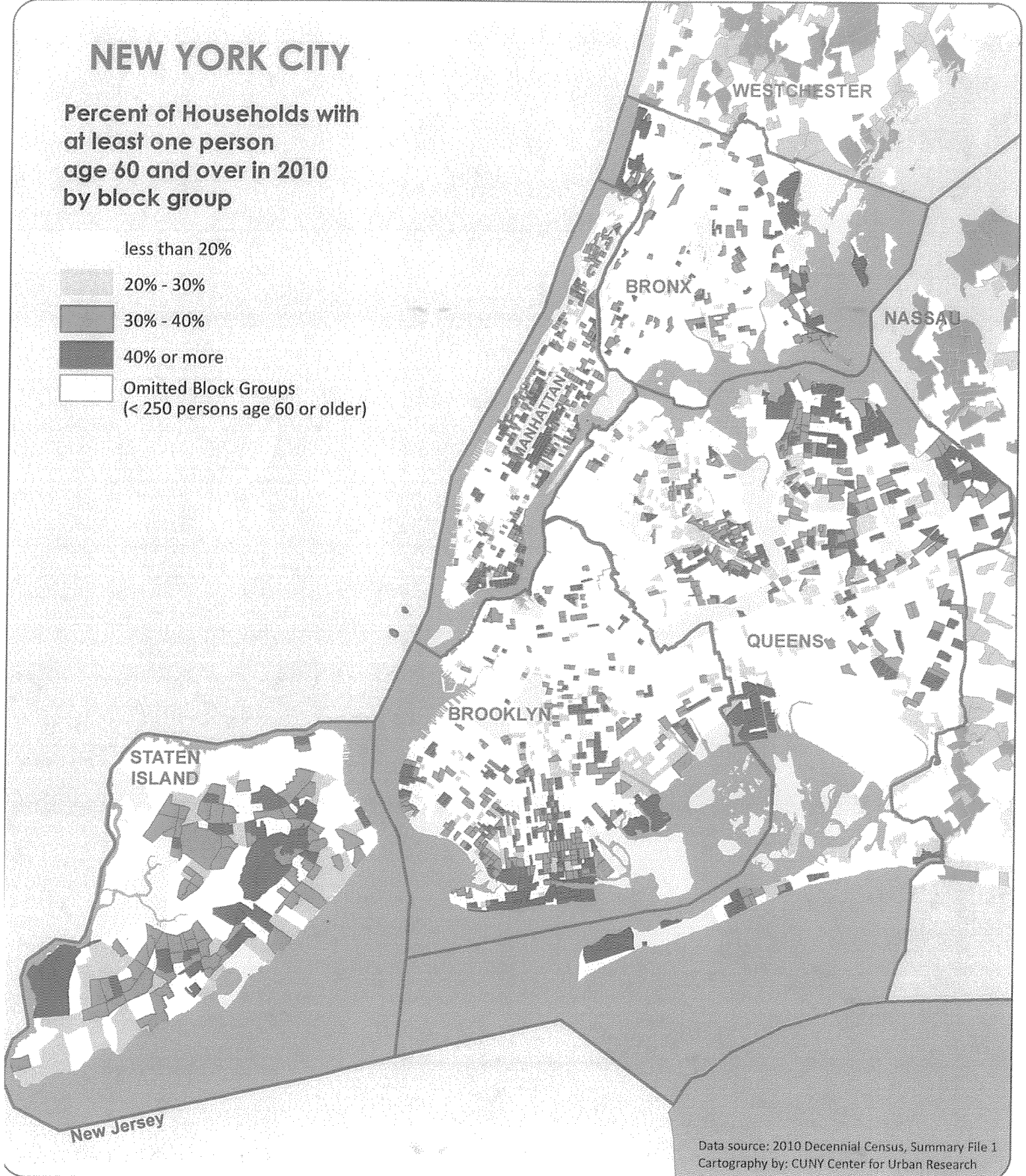
less than 20%

20% - 30%

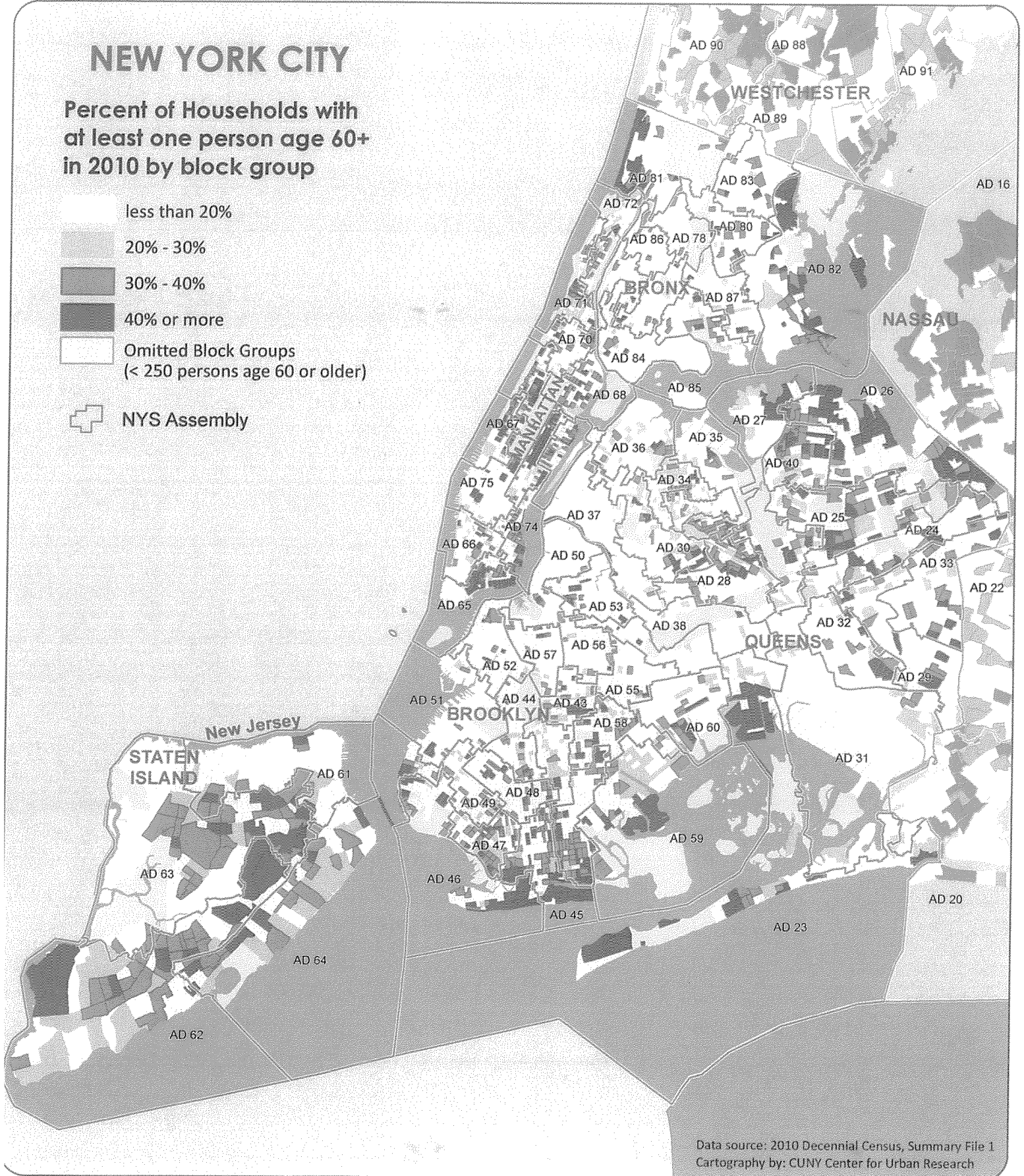
30% - 40%

40% or more

Omitted Block Groups
(< 250 persons age 60 or older)



Households with at least one person 60+ by Census Block Group



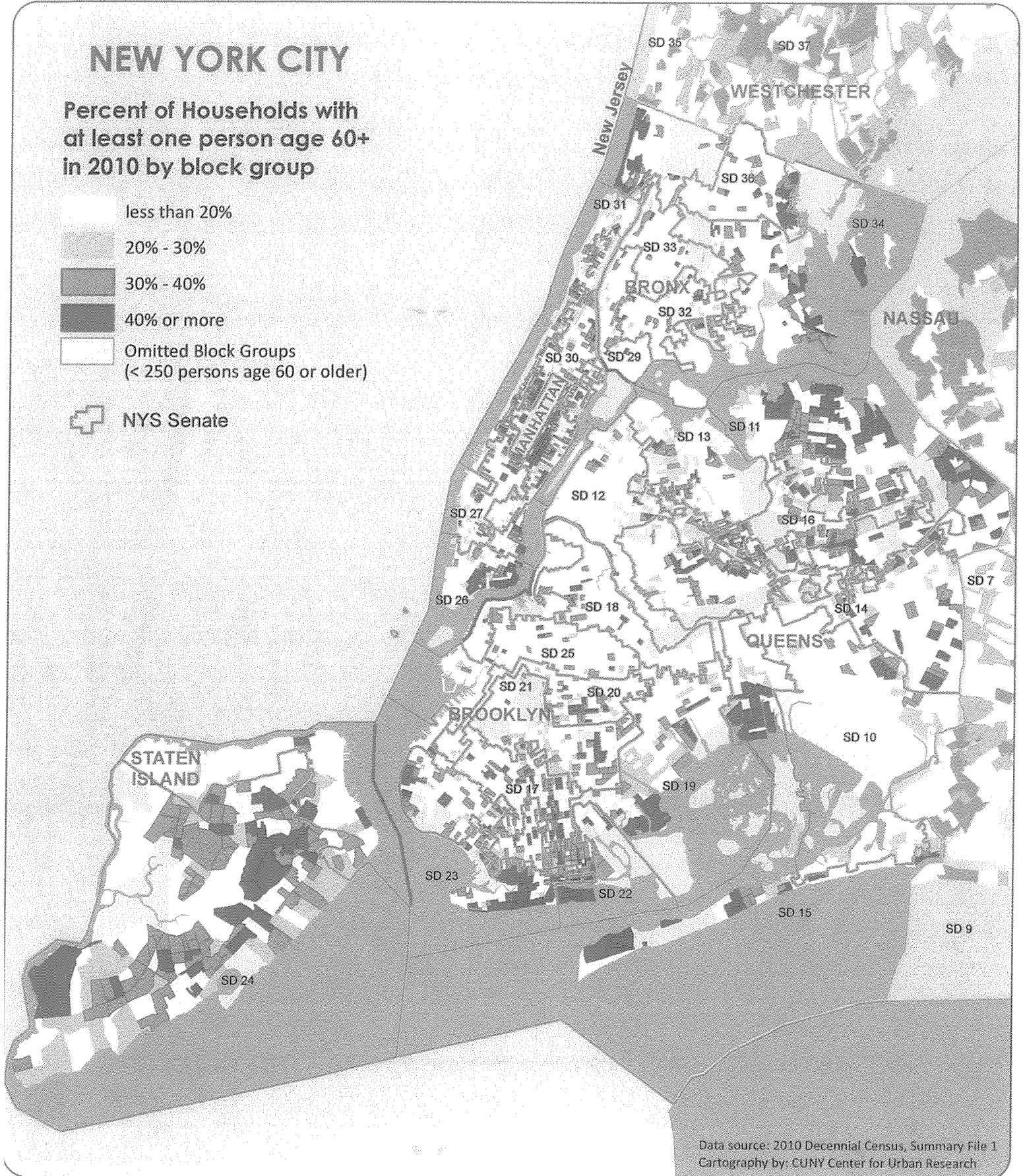
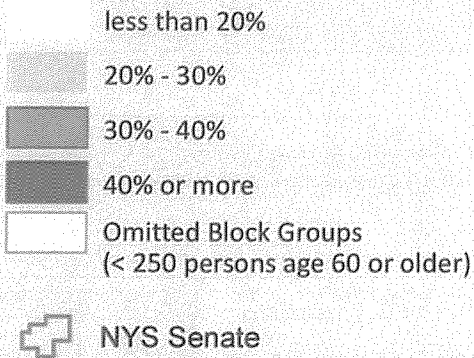
Households With At Least One Senior (2010 Census)

Areas of Potential NORC Interest -

Households with at least one person 60+ by Census Block Group

NEW YORK CITY

Percent of Households with
at least one person age 60+
in 2010 by block group





**Testimony of UJA-Federation of New York
Before the New York City Council**

**Joint Hearing of Committee on Aging & Committee on Immigration
Honorable Margaret Chin, Chair of Aging
Honorable Carlos Menchaca, Chair of Immigration**

**Oversight Hearing—Serving Immigrant Seniors through NORCs
Submitted by Sasha Kesler, Government Relations Associate
January 28th, 2016**

Good morning Council Member Chin, Council Member Menchaca, and members of the Aging and Immigration Committees. My name is Sasha Kesler, Government Relations Associate at UJA-Federation of New York. Thank you for the opportunity to testify this morning and for bringing attention to the unique and essential role that Classic NORCs and Neighborhood NORCs can play in serving immigration seniors in NYC.

According to the Center for an Urban Future's July 2013 report *The New Face of New York's Seniors*, the population of seniors, particularly immigrant seniors is growing rapidly and exponentially. "The number of NYC residents age 65 and over is set to increase 35%, from approximately 998,000 today to 1.3 million by 2030. There are 463,000 older immigrant residents, which constitutes 46% of the city's total senior population and the growth rates indicate that immigrant seniors will be the majority of the population 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."

While poverty and isolation is prevalent amongst all seniors, immigrant seniors face unique challenges including limited retirement savings, ineligibility for entitlement services, and limited English language access. "The median income for immigrant seniors in New York is \$8,000 lower per year than for native-born seniors (\$9,900 compared to \$18,300). And for those living in households of two or more people, this disparity grows to nearly \$40,000 per year (\$52,185 compared to \$90,800). 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. Furthermore, In NYC, 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."

Classic NORCs and Neighborhood NORCs have a vital role to play in ensuring that seniors are able to age in place. NYC is considered one of the best places to age-in-place due to the easy access to public transportation, basic necessities, and nearby community resources. While NORCs in Manhattan are able to effectively serve both native-born and immigrant seniors, there are significant concentrations of foreign-born seniors that are not serviced by NORCs or NNORCs and often lack the services to effectively age-in-place.

While we are grateful for the city's investment of \$4 million in 1999 to build a city-funded Classic NORCs, it is essential that the city equally invest in building a NNORCs program to ensure that all seniors—whether foreign-born or native-born—are able to be served by the NORCs model and successfully age-in-place.

Thank you for the opportunity to testify today. UJA-Federation looks forward to working on partnership to expand Classic NORCs in NYC and build a NNORCs programs.

**Testimony from the Shorefront YM-YWHA of Brighton-Manhattan Beach Inc.
Presented to the NYC Council Committee on Aging and
the Committee on Immigration**

February 26th, 2015

Good morning. My name is Susanna Levit, I am a Director of Immigrant and Family Services at Shorefront Y. Today, I would like to briefly discuss the importance of NORC programs in addressing the needs of the elderly immigrant population throughout New York City. I would like to thank Chair Carlos Menchaca and the members of the committees for the opportunity to testify today and for all the commendable efforts they have made toward encouraging supportive services for the senior population.

It has been thirty years since the founding of the first NORC program. It won't be an exaggeration to say that over this period, the program has changed hearts and minds of thousands of individuals living in this country. It is hard to overestimate the importance of NORC programs; they have successfully fostered health and safety of older adults, helped them create and sustain a sense of place, structure social relations.

I am sure that you know that an increasing number of New York City's older adults live in poverty. In addition, we are facing the challenge of the aging of the city's immigrant population. At present, in NYC, the majority of immigrant seniors have lower incomes, much less in retirement savings, and far fewer benefits from traditional entitlement programs. They also typically reside in culturally and linguistically isolated households.

I strongly believe that many of you will agree with the argument that the city's NORC programs are key to addressing these complex public issues by bringing together service delivery, assistance with healthcare management, and community building efforts.

Shorefront Y serves a predominantly immigrant community that has diverse cultures, ethnicities, and religions. Surrounding Shorefront is our Neighborhood Naturally Occurring Retirement Community (NNORC) "Bright-On the Ocean." The majority of older adults residing in the NNORC designated area are low-income immigrant renters. Many of them are Russian speaking immigrants from the Former Soviet Union – the second poorest immigrant population in NYC. For the most part, they have insufficient English language skills, live alone, and provide care for grandchildren.

SH★REFRONT

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Our NNORC program offers numerous initiatives to support the members, enhance their quality of life, promote aging in place, and ensure that elders stay independent in their homes and achieve maximum potential. We focus our efforts on minimizing their social isolation and promoting education and community building. We also work proactively to identify major health concerns in the community and to improve the health status of older adults residing in the Brighton Beach area.

As part of our NNORC program, we have provided services to almost 1,100 individuals. For quite a number of them, the Shorefront Y has become a home, a place that encourages the bonds of community and service. On a daily basis, our staff works on providing assistance to individuals who depend on us, including those who are unable to leave their homes. Among other things, we help them to apply for and maintain government benefits; address vital health, safety, and medical care issues; provide socialization and wellness opportunities. Our commitment to the work we do is strong and our goals are defined. We truly believe that we will be able to continue our operations for the benefit of those in need. We greatly appreciate your continuous support.



Chinatown Neighborhood NORC
7 Mott Street
New York, NY 10013

Testimony for the City Council Committee on Aging & the Committee on Immigration
Re: Oversight: Serving Immigrant Seniors Through NORCs
February 26, 2016
Presented by Rhonda Soberman
Manager of Program Development
Visiting Nurse Service of New York

We would like to thank the members of the NYC City Council and Margaret Chin, Committee Chair on Aging and Carlos Menchaca, Committee Chair, of the Immigration Committee for giving us an opportunity to speak on behalf of funding for Neighborhood Naturally Occurring Retirement Community Supportive Service Programs (NNORC-SSP).

The Visiting Nurse Service of New York, the lead agency for the Chinatown NNORC since 2006, has been especially grateful that the City Council allocated discretionary funds this past year to our program as well as other NNORC-SSPs. These funds were essential in supporting our efforts to serve those low income immigrant seniors residing within our Chinatown service area. Our NNORC program faces tremendous challenges in the funding arena and despite those challenges, we make a difference in the everyday lives of the seniors we serve.

Our NNORC covers a discreet territory in the Chinatown area that houses almost 2000 low income immigrant seniors. Our funding consists of a 2006 grant from the New York State Office for the Aging, which has been extended but in reduced amounts over the years due to State budget cuts. We also receive some City Council Discretionary funds as well as random and short term foundation funds. Many foundation grants are not accessible to us due to our inability to substantiate sustainability without their continued funding. The residents in this community are unable to financially contribute to the program. Needless to say, the costs of providing services have increased and the need for services has also increased as the program gained the trust of the community residents.

NNORCs provide social work case management, case assistance and recreational services aimed at promoting successful aging in place. Pursuant to NYSOFA's staffing requirements, NNORCs provide nursing services as well. Although such staffing requirements have caused enormous budgetary strains, we view NNORC nursing as a critical service, especially for this community with poor language skills and low literacy. The NNORC nurse is a bridge for seniors to understand how the complicated health care system works, provide access to needed care, promote healthy aging and wellness and educate seniors on the appropriate use of health care services to reduce the necessity for emergency room care. The interdisciplinary approach, a tenet of the NNORC model, where social workers and nurses work collaboratively on resident health and wellness, is



critical to successful community living. The inclusion of community residents as volunteers and members of numerous advisory committees, provides residents with a voice and keeps them engaged in this important community program that is focused on their needs and aspirations.

We believe that NNORCs are an effective strategy toward stabilizing the health and well-being of residents in immigrant communities and urge you to consider and advocate for the following:

- Inclusion of NNORC-SSP funding as part of the regular NYC NORC-SSP funding to ensure its continuance for years to come.
- Increasing the base of this funding to allow for adequate funds to pay for the health, social services and educational/recreational services and community development provided by the programs to the ever increasing numbers of residents they serve.
- Expansion of the funding to allow for the development of new NNORC-SSPs, particularly in immigrant, low income, and high risk communities.

We hope that the Council recognizes that by making Neighborhood NORC funding a permanent part of the City NORC-SSP funding, it will provide the necessary assurance that will allow for the development of partnerships, programs and services to continue to thrive.

More about our program:

The Visiting Nurse Service of New York's Chinatown NNORC serves the senior residents living in the 24 blocks in NYC's Chinatown, home to approximately 2000 seniors, of which the program has reached over 1100. This community, considered extremely low income by HUD standards, has "aged in" over the last 50 years: 62% of our members are over 75 and 25% over 85 years of age. Of those members surveyed in 2014, 71% have a grade school or less education and 12% have no education at all; 75% do not speak English and of those who do, 22% do not speak it well. Most speak only Cantonese. 84% cannot read or write English and 14% cannot read or write Chinese. Navigating the health and social service world is a major challenge for our members who come to the Chinatown NNORC to receive social services, non-reimbursable health care, education, recreational activities and participate in support groups.

Services and activities are provided at our Center in the heart of Chinatown as well as in the homes of our homebound members. Many are unable to come out because they live in walk-up apartments. Living in buildings without elevators makes the trip to the senior center, shopping or the visit to doctor impossible due to the inability to navigate the stairs safely. Our staff and volunteers go to them, bringing services and support and even join them together in telephone support groups so they continue to have contact with their peers in the community.



The Chinatown NNORC program has certainly proven that “It takes a Village” to care for our elders. Not one agency, nor one discipline, nor one modality of care can adequately address the complex needs of seniors “aging-in-place”. NORC and NNORC-SSP were designed with that in mind. The Chinatown NNORC has been most successful in organizing the Chinatown health and social service providers and the residents themselves. Partnering with VNSNY are University Settlement, Chinese American Planning Council, Chinese Consolidated Benevolent Association, NY Presbyterian Downtown Hospital, NYU Nursing and Social Work Schools, Mount Sinai Beth Israel Hospital, The Alzheimer’s Association, Confucius-Manning Pharmacy, Charles B Wang Health Center, NY Legal Assistance Group, and NY Foundation for Senior Citizens, among others.

The NNORC’s vibrant Advisory Board, made up of these partners and senior members of the community, has utilized data from the VNSNY’s Research Center’s Advantage Survey the Health Indicator surveys to guide the work of the program. Our goal is to continue to identify and address, through working task forces, the outstanding needs of the community with culturally and linguistically sensitive programs.

Several task forces were formed to address community needs: The Advanced Directives Task Force has completed hundreds of health care proxies; the Colon Health Task Force has worked with the NYC Dept. of Health and our community health partners to increase colonoscopies; seniors and younger residents of the community have become active volunteers helping neighbors. Intergenerational programs have formed to break down stereotypes. Most importantly, the community knows where to turn for help. Originally when the program began the residents turned to neighbors and friends for information, now they come to the Chinatown NNORC. It is no surprise that when Super Storm Sandy devastated lower Manhattan, VNSNY, the Chinatown NNORC and its partners quickly mobilized to provide assistance and support to the greater Chinese community.

NNORC-SSPs need a commitment for financial stability and ongoing support. VNSNY’s Chinatown NNORC has been fortunate to have been supported by great partners that offer their staff time as part of our joint mission to help the seniors of Chinatown. Our State dollars have leveraged some time-limited foundation grants and donations. Most of our foundation money has run out. We do not have the dollars to support the growing numbers of people needing and wanting our assistance. Our program is not alone; there are many communities throughout NYC that need NNORC-SSPs. As our health and social service system moves toward a model of population health and care management, the NNORC-SSPs are positioned to assist the community to organize and provide the necessary support and assistance to help seniors successfully age in place. We are delighted that DFTA has invested in the Rockaways, Bay Ridge and Staten Island to explore the viability of NNORCs there. You, our elected officials, can invest in our communities by providing the necessary dollars to develop new NNORCs programs while helping to sustain the viability of those in existence.

Thank you for providing us with this opportunity to share our experiences with you.



COUNCIL OF PEOPLES ORGANIZATION

1081 Coney Island Ave. Brooklyn New York 11230.

Phone 718-434-3266 Fax 718-859-2266

www.copousa.org

February 26 , 2016

Good Morning,

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

COPPO'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. COPPO 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 Brooklyn.

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.

We request to support new immigrant groups with resources and not rubber stamp contracts anymore.

Large contracts should have polices not to cut subcontracts when there are budget cuts.

The diversity of the city can not be under 1-2-3-4 major groups.

We request that we have fair share of the resources for our communities we serve.

Thank you,

Mohammad Razvi

Visiting Nurse Service of New York

Chinatown Neighborhood NORC

7 Mott Street

New York, NY 10013

Testimony for the City Council Committee February 26, 2016

My name is Lai Ha Hor. My husband and I both agree that Chinatown NNORC program is very important for us. They helped us a lot, such as resolving a problem we had with a benefit program. They read the letters we get in English, apply for Medicaid and SNAP. Without Chinatown NNORC, I would not know where to go for getting help because we both don't understand English.

Also being part of the classes, activities and educational health workshops they make my health better day by day. It makes me feel young again. Chinatown NNORC is a warm and happy family. We tell our friends about this family. We need this family. Please continue to support this program. Thank you!

Lai Ha Hor

Visiting Nurse Service of New York

Chinatown Neighborhood NORC

7 Mott Street

New York, NY 10013

Testimony for the City Council Committee February 26, 2016

My name is Mee Han Ng, my husband told me that the Chinatown NNORC program is a very good social service program for elderly, so when the first day of my retirement came a few years ago, my husband accompanied my to join into this big family.

At the beginning, I thought is only a senior center, but after few visits to their office and participated the activities, it changed my opinion completely. It is an awesome social service and health program. Their services are comprehensive. I worked with the nurse and the NYU Carelink nursing students for many months to help me on my health needs and help me understand what my doctor was telling me. Social workers helped us a lot as well. They read the government letters we got in English and helped us apply for entitlements and benefits. After participating in the classes, educational workshops and support groups, it really makes my retirement full of life and joy.

Please continue to support this program and make our retirement life full of wellness. We cannot live in Chinatown without this program. Thank you!

Mee Han Ng



FOR THE RECORD

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

Oversight: Serving Immigrant Seniors Through NORCS

Testimony: Molly Krakowski, Director of Legislative Affairs

Friday, February 26, 2016

Good morning. I am Molly Krakowski, Director of Legislative Affairs at JASA. I would like to thank Council Members Chin, and Menchaca for Chairing today's important hearing on serving immigrant seniors through Naturally Occurring Retirement Communities (NORCs).

JASA's mission is to sustain and enrich the lives of the aging in the New York metropolitan area so that they can remain in the community with dignity and autonomy. JASA has a long history of providing services in a culturally competent manner, responsive to the needs and interests of community residents. Every year, JASA enriches the lives of more than 43,000 older adults through a continuum of programs and services that support adults as they grow older.

JASA, in partnership with housing management, health care providers, and local communities, sponsors five (5) NORC-SSPs, and is involved in an additional four (4) as a subcontractor throughout the City.

As you are well aware, NORC-SSP programs reflect the diversity of New York City, and ideally represent each community's unique multi-cultural identity. NORC programs have a singular capacity to help residents meet their daily living needs as well as provide programs that meaningfully affirm cultural affinity.

Immigrant populations, particularly the elderly cohort, face challenges related to language barriers and cultural expectations. A strong NORC program utilizes all community resources for effective support, service delivery and community building.

In addition to enhancing our service delivery capacity with bi-lingual staff who help immigrant seniors secure benefits/entitlements and negotiate their sometimes new neighborhoods, I would like to highlight several programs that JASA has implemented in our NORC-SSPs.

JASA sponsors several NORC programs in South Brooklyn (Coney Island and Brighton Beach), where there is a higher concentration of immigrants from Russia and other countries of the former Soviet Union, as well as Caribbean and African Americans. One of the larger celebrations

is Victory Day, a major commemorative day for the Russian community. JASA has used this opportunity to salute veterans, acknowledge sacrifice and service and provide participants with opportunities to share their experiences during WWII from American and Russian perspectives. Another significant program celebrates Women's Day, reflecting on the diversity and achievements of women immigrants.

The Coney Island Active Aging NORC Program serves a diverse local population that includes both Russian-speaking and Spanish speaking seniors. Cross-cultural appreciation is often achieved through arts programs that showcase different cultures. JASA has secured grants from philanthropic sources to support targeted inter-generational and multicultural programs. A recent program stemming from this grant is, "Wearing Art," which promotes cultural understanding and highlights items that reflect the art and design of countries of origin. Older adults model clothing representing their cultural identity - it offers a fun and educational exchange among neighbors.

At Trumps United NORC-SSP, the Russian Social Club created a project called, "Story Behind the Door." The group conducted interviews with immigrants living in the NORC community, offering opportunities to tell their 'stories,' situations of struggle and fulfillment. These experiences were written, translated, and presented to the greater community. Again, these opportunities offer immigrant seniors a chance to validate their life experiences and elevate their lives beyond coping with daily living tasks.

At JASA's newest NORC program, Bushwick/Hylan Family Friendly NORC, nearly 51% of the members are Spanish speaking, hailing from Puerto Rico. The remaining 49% are predominantly African Americans. A particular focus is strengthening access to health care service delivery, an issue of concern to both cohorts. JASA has successfully instituted a diabetes self care management series in this community and recently secured a grant to enhance the program with peer health navigators, culturally and linguistically competent community residents.

In general, NORC programs offer flexible opportunities to engage older immigrants who are residents of the communities. With appropriate, linguistic capacity and an ongoing understanding of cultural interests and preferences, NORC programs are key to helping a potentially vulnerable group age safely in the community.

Thank you for the opportunity to testify. You are always welcome to join us at any of our NORC-SSP programs if you would like to see them in action.



EDITH AND CARL MARKS

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WEINBERG BUILDING

Testimony Presented at the New York City Council Joint Public Hearing
Committee on Aging and Committee on Immigration, February 26, 2016

Oversight: Serving Immigrant Seniors Through NORCs

My name is Faye Levine, Director of Social Services at the Edith and Carl Marks Jewish Community House of Bensonhurst (also known as the Marks JCH). I would like to thank the Chair of the Aging Committee, Margaret Chin, and Chair of the Immigration Committee, Carlos Menchaca, as well as all of the committee members, for the opportunity to testify today regarding serving immigrant seniors through NORCs.

I also want to take this opportunity to thank the City Council for your leadership in creating the NORC and Neighborhood NORC Discretionary funding Initiatives, which fund essential services to support seniors living in areas with high concentrations of senior adults, to age in place with an enhanced quality of life.

The Marks JCH has been providing Neighborhood NORC services since 2007, through NY State funding. The NYC City Council Neighborhood NORC funding has enabled us to significantly expand our services. Our "Good Neighbors" NNORC serves seniors living in a 19-block area, between 77 – 86 Streets, between 21 – 23 Avenues, in Bensonhurst. This is an area with single family homes, small multi-family buildings, and apartment buildings up to 6 stories high.

We are in Brooklyn Community District 11, which was reported as having over 40,000 residents 60 years and older, in DFTA's Profile of Older New Yorkers, (11/7/2013). In addition, Bensonhurst has been called the "second largest immigrant neighborhood in the city" (NYC Dept. of City Planning, "Newest New Yorkers, 2013 Edition").

The Marks JCH "Good Neighbors" NNORC program provides very vital and important services to seniors in the NNORC area and has a great impact on immigrant seniors in the area, and on the community as a whole. Of our over 700 NNORC members, 74% are immigrants. Our members speak Russian, Chinese, English and Spanish. Immigrant seniors comprise a vulnerable population that needs support. They face a language barrier, not knowing English, they frequently are unfamiliar with or do not understand American laws, they don't know their rights and choices, and do not know what services are available for them or how to access them. The NNORC program provides services to help them with their needs. Any official letter can bring anxiety to a non-English speaker. We explain, assist and work to do enrollments, keep benefits active, and advocate when there are problems.

We provide case management, community nursing and health promotion, social activities, volunteer opportunities, in home services (handyman, housekeeper, personal care worker, in home haircuts, etc.), community advocacy, and more... We strive to combat social isolation, and make monthly phone calls to check in to see if there have been any changes or new concerns. Our staff members are culturally sensitive and speak multiple languages, to serve our diverse population. Currently our staff speak Russian, Cantonese and Mandarin, and English.

UJA Federation
of New York

JCC
ASSOCIATION

7802 BAY PARKWAY, BROOKLYN, NY 11214 · TEL. 718.331.6800 FAX 718.232.8461 · www.jchb.org

We also recruit volunteers who are bi-lingual to help with service provision. Our brochures, flyers and newsletters are prepared in various languages. The newsletters inform our residents about public benefits and changes, health topics, community issues, such as scams against seniors and emergency preparedness, and program services and activities. We provide group activities and health and other informational workshops in English, Russian and Chinese, to tailor programs to clients' interests, cultural backgrounds, and needs. For Example, we do "Tea Talks" for Chinese members, created a "Learning English through Singing Group" and our Spanish speaking worker last year led a Beginning Spanish group that had Chinese, Russian and English speakers participating. We survey and do evaluations with our members, to engage them in making the program work for them.

Our Senior Advisory consists of 15-16 people on average in attendance. The group is representative of the community – people who speak English and people with Russian, Chinese and Spanish backgrounds.

We reach out in the local neighborhood, in apartment buildings, community partners, health providers, businesses, elected officials, public libraries, local ethnic media, etc. to identify potential NNORC members.

Our goal is to promote independence and healthy aging in their own homes. We engage seniors before a crisis occurs, and are there to respond to their needs as they change over time. Because our services are flexible, we can be creative and respond to the concerns and interests on an individual basis. We are an integral part of the network of agencies that serve older adults, and utilize all available resources to meet clients' needs.

There are some examples how we help immigrant seniors living in the NNORC area.

A Russian speaking couple in their 80's had received case management services for many years, re: public benefit recertifications, and dealing with bedbugs some years ago. The member came in and explained that his bathroom has been under construction for more than a month (to repair a major ceiling problem) and his wife who uses a walker could not use it. She was using a commode instead and feeling terrible. The family could not take shower, etc. The social worker repeatedly advocated for the clients with the building management. Construction was finished very quickly after that, bringing great relief to the clients.

A 70 year old Russian immigrant woman is a survivor of lung cancer. She receives Social Security and a State Supplemental Program (SSP) (State SSI) benefit of \$73. In August 2014, the client was in the hospital for a little longer than a month. She had lung surgery and then rehabilitation after that. Several months later, out of the blue, she received a letter that her Medicaid was being closed. Staff did research and learned that because she had been in institutional settings for more than one month, she lost her State SSI. Her SNAP benefit case available through the mail-in office for SSI recipients, was also going to be closed. She was taken out of the computer as an SSI recipient Living Alone. She needed to reapply for both at the local offices. She was so stressed and upset about this fact that she did not even know what to do. She would not be able to handle this without knowledgeable support of NNORC staff who speak English and can navigate these complex systems. She was assisted in reapplying for SNAP and Medicaid, and filed for a separate Fair Hearing about SNAP, while we still were working on reinstating the SSP portion. The member successfully received all her benefits from SSP back, Medicaid is active, and her SNAP is again being handled by the Food Stamp office for SSI recipients.

Thirdly, our Chinese speaking NNORC outreach worker met a 65 year old Chinese woman, in the local library, who was seeking help. She lives in the NNORC area, but had not come to the JCH to seek assistance. She shared that she lost all her documents 20 years ago and lived without them until now. She

now had become very sick and needed medical attention. She could not access public benefits due to having no documents. The worker, under the supervision of the NNORC director, worked on reinstating her documents, advocating and providing emotional support for her. She was finally able to get Medicaid. She later became involved in the NNORC, and has participated in all of our services and programs, including trips. We also referred her to the on-site senior center lunch program. She and her family were very appreciative to the NNORC for involving their family member in community life.

In summary, we strongly urge the City Council to continue to fund Neighborhood NORCs. It is a flexible program model that works and that can be modified to meet emerging needs and changing populations. It makes sense to build on and expand them. NNORCs effectively respond to individual and community needs, especially immigrant seniors, and enhancing the quality of life of seniors in the neighborhoods where they want to live.



EDITH AND CARL MARKS

JEWISH COMMUNITY HOUSE OF BENSONHURST

Testimony Presented at the New York City Council Joint Public Hearing
Committee on Aging and Committee on Immigration, February 26, 2016

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HARRY AND JEANETTE

WEINBERG BUILDING

Oversight: Serving Immigrant Seniors Through NNORCs

My name is Yevgenia Galperin. I am a member as well as an active volunteer for the "Good Neighbors" Neighborhood NNORC program, at the Marks JCH of Bensonhurst. I have been a volunteer for over 5 years. I am happy to help other NNORC seniors. I make telephone reassurance calls every week, and monthly friendly phone calls to other members, to be sure they are all right and to tell them about the NNORC programs. I also help with all the NNORC events.

I am a Russian speaking immigrant. I came to the United States many years ago to find a better life. I worked and now get Social Security. I want to say how important it is to have a NNORC program for many seniors living in the community. I volunteered thinking that I don't need help, that I will be helping others, until a bad thing happened to me. In September 2015, I got hit by car and had a lot of injuries.

Because of the NNORC program, I was able to get help at home when I tried to recover. I was very weak, and couldn't do anything at home. The Good Neighbors NNORC staff sent me a home care worker that helped me with shopping and housekeeping. After that the NNORC nurse helped me get skilled care from Metropolitan Jewish Health System. I had help, including physical therapy, and an aide for few weeks, and the nurse was checking on me. I slowly recovered until the short term care finished. I was not left alone after that. Good Neighbors provided some housekeeping at home once every week for 4 hours. It is enough for me, I don't need very much care. This is what I need, and it is great that the program can adjust to my needs. Also, because of my recovery, I have been able to return back to my volunteer responsibilities, which I couldn't do after the accident.

Also, I want to say that NNORC is so important. The seniors have not only health and social service support. They have real support in home services including the handyman, hair dresser, and the housekeeper, and personal care worker. We have warm home activities in our members' apartments in the neighborhood, where we can meet together with other seniors and speak about our life and sing songs.

I am very proud to be part of such an important program for people and the community. Thank you very much.

Yevgenia Galperin



Commitment to Improve
the Quality of Life

Re: Testimony of for Immigrant NORCs from India Home on 2/26/2016

To: NYC Council Sub-committee on Aging & Sub-committee on Immigration

India Home is a non-profit organization founded by community members to serve the South Asian elderly. Incorporated in 2007, the organization started running senior center programs from April 2008. The mission of India Home is to improve the quality of life for seniors by providing quality care in a culturally sensitive environment. We believe that social isolation is a major cause of mental and physical morbidities among seniors; therefore, we aim to build lasting relationships between the seniors we serve and their communities. In the last six years, we have touched the lives over 2,000 South Asian seniors across New York City. We have served over 30,000 congregate meals since our inception in several locations across Queens. We seek to expand our programming to serve immigrant South Asians in Naturally Occurring Retirement Communities (NORCs).

There is a large rise in South Asian elderly living in communities without any culturally appropriate supportive services for seniors. In neighborhoods such as Flushing, Bellerose, Jackson Heights Queens Village, Richmond Hill, Jamaica, and more, significant numbers of first generation South Asians are aging in the neighborhoods they first moved into. It is possible to see them congregate in parks and other public spaces around mid-day.

To address this, India Home will provide culturally appropriate services through Neighbor NORCs. These services include: case management, medical services, nutrition education, pharmacy lectures, physical therapy services, socialization, trips, intergenerational activities, and exercise classes. We have partners ready to provide all of these services in collaboration with India Home. India Home envisions these services provided anywhere in the local community such as places of worship, community centers, public libraries and well. As such, we call the concept NORCs Without Walls (NORCs WOW) This would help immigrant communities stay in the neighborhoods where they made their lives and improve their quality of life by keeping them engaged and active in their own neighborhoods as they age.

We thank Councilmember Margaret Chin and the Sub-committee on Aging for helping India Home provide better senior center services through the Senior Centers for Immigrant Populations initiative. As a next step, we are requesting \$100,000 from the NORC budget to provide culturally appropriate services in the growing South Asian NORCs. This budget would cover the cost of a social worker, consultants we bring in to provide the culturally appropriate services, and supporting programmatic costs. This funding would go a long in helping immigrant South Asians age in place.

Sincerely,

Vasundhara Kalasapudi, M.D.
Executive Director

P.O.Box 40263, Glen Oaks, NY 11004 ■ Phone: (917) 288 7600 ■ Fax: (718) 425 0891
Website: www.indiahome.org ■ Tax Id: 20-8747291

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Asian American Federation

STATEMENT SUBMITTED TO THE COMMITTEE ON AGING AND THE COMMITTEE ON IMMIGRATION OF THE NEW YORK CITY COUNCIL

February 26, 2016

Serving Immigrant Seniors Through NORCs

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 work with over 60 groups that serve the growing Asian American community in New York City.

We are here today to lend our support to the tireless efforts of our member agencies that serve Asian seniors. The growth of the Asian senior population continues unabated. From 2010 to 2014, the Asian senior population grew at an annual average rate of 6.6%, compared to 2.5% of the overall senior population. Over 134,000 Asian seniors reside in the five boroughs.

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 for various socio-economic reasons, our member agencies 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. Yet, these organizations are facing an increasing wave of service requests in the face of decreasing support from the public and private sources. For instance, our May 2015 Analysis of City Government Funding to Social Service Organizations Serving the Asian American Community in New York City report shows that between FY 2002 to 2014, of the over 5,000 DFTA contracts totaling \$2.9 billion, the social service organizations serving the Asian American community received 189 contracts totaling \$81 million. In short, the Asian American share was 2.7% of total contract dollars and 3.7% of the total number of contracts.

One way to address some of the service gaps is the NORC and Neighborhood NORC models that are potentially innovative ways to deliver services to Asian seniors. We recommend that the City keep these considerations in mind when they choose to renew or expand the programs.

- 1) We advocate for the opportunity to create more Neighborhood NORCs. Asian seniors were more likely to live in smaller buildings that fit under the NNORC requirements. 60% of Asian seniors lived in buildings with less than 10 apartments, while only 49% of non-Asian seniors lived in those buildings.
- 2) As part of the 9/11 recovery, many Asian-led agencies encouraged their clients who qualified to apply for public housing. The wait lists at the time were roughly 10 years long. As a result, there is a wave of qualified Asian New Yorkers who are now finally able to move into public housing. We urge that NORCs located in public housing to plan for a wave of Asian seniors seeking services.
- 3) We encourage the City to anticipate the need for senior services in new affordable housing developments. We urge the City to require a set-aside of community spaces within new housing developments to accommodate the development of NORCs or other community services.
- 4) We request increased funding to Asian organizations to meet the needs of the growing population. In examining the immigration trends, we are anticipating that our senior population will continue to grow. We ask that our leaders commit resources to ensure that our member agencies build capacity in anticipation of this growth.



SAMUEL FIELD Y

"The Everybody Place"

Testimony from Samuel Field YM&YWH
Presented to the Committee on Aging and Committee on Immigration
February 25, 2016

Good afternoon. I am Karen Schwab Director of the Older Adult Department of the Samuel Field Y and thank you for the opportunity to make this presentation in support of the Y's NORC Supportive Service Programs which I believe represent one of the most revolutionary and effective models of providing service to our senior adults that has ever been developed. Many of the elders involved in our NORC programs moved into their homes after the Second World War where they raised their families and helped build the community. Over the years they have "aged in place." The neighbors they moved in with are no longer there. They have become more frail, more vulnerable, more isolated and more dependent. At the same time many of their adult children have moved to different cities, started their own families and pursued their own careers. The goal of the NORC SSP model is to help these individuals stay in their own homes in the community that they love maintaining their sense of independence and dignity.

NORC Supportive services are unique partnerships between social service agencies, health care providers, community groups, civic associations, houses of worship and senior residents with the goal of creating an "age friendly" community.

In our classic NORC models, Deepdale CARES and CAP (Clearview Assistance Program) there is an additional partner, the housing entity that contributes physical office space, financial support and other amenities. Two of the Y's programs are classic NORCs. The third program, NORC WOW, a Neighborhood NORC, is an innovative model that focused on sections of Floral Park, New Hyde Park and Bellerose communities composed of single and two family homes that do not have a unified housing management company or community identity. The NORC WOW program has no readily available source of local funding other than the residents themselves many of whom are house rich but cash poor. In addition, elders living in private home have many challenges due to the two story structure of their homes as well as the upkeep of an aging housing stock without financial resources and support systems. NORC WOW was the first program of this type in the country and has received national recognition.

The Samuel Field Y has been fortunate to partner with two premier health providers, Parker Jewish Institute for Health Care and Rehabilitation and Visiting Nurse Service of New York that are critical components of a successful NORC Supportive Service Program. . The common goal of all three programs is to identify and then either

provide or facilitate a unique set of life enhancing and sustaining services, which assist seniors to age in place, living safely and well in their own community.

From our experience the most successful elements of this type of service are:

- Home based and site based support services
- Entitlement information, counseling and access
- Nursing and health related services
- Opportunities for group recreation and socialization
- Transportation to shopping, doctor's appointments and other off site services

The Samuel Field YM & YWHA has been the lead agency of three highly successful NORC Programs in Northeastern Queens serving more than 2,100 seniors. Each of our established NORC Supportive Service Programs has become part of the fabric of the service delivery system.

In conclusion, I would like to present statements written by two of our participants:

"Deedale CARES social workers took over when I really needed them and got me temporary meals on wheels, telephoned daily, made friendly home visits, arranged for assistance with chores, and sent the nurse over to monitor my blood pressure. They were there for me every step of the way. I will be 94 years old in June 2016. I live alone. My daughter lives 50 miles from here and is a working woman. She doesn't have time for me. After being so sick I was so scared and was not sure I could survive on my own. Deepdale CARES is my lifeline."

"Last year I had surgery, radiation and chemotherapy. The Clearview Assistance staff provided counseling and weekly home visits and had a volunteer call me for over a year until I felt better. When I felt stronger I was able to serve on the advisory board and a few committees. It was wonderful to make some new friends at this time in my life. As a cancer survivor the staff at CAP has encouraged me to help others who are struggling with cancer. I know that CAP staff is always there for me."

Each year the number of seniors who need the services that the NORC's provide increase dramatically. We are aware of the changing ethnic composition of elders served by our NORCs especially the large influx of immigrant elders in the NORC WOW community. We continue to identify the unique needs of each of the populations and modify the services to sensitively address the emerging issues.

Although it is our goal to respond to all seniors who request services, our resources and ability to accommodate new clients is limited. We ask for your continued support for the NORC Supportive Service Programs so that we may continue to serve our community elders in a respectful and dignified way. With your help all seniors in our NORC communities will be provided with the vital services that they need.

Testimony Submitted to the New York City Council Committees on Immigration and Aging

**Re: Oversight - Serving Immigrant Seniors Through NORCs
Friday, February 26, 2016, 10:00 a.m.**



My name is M. Audrey Carr. I am the Director of Immigration at Legal Services NYC (LS-NYC). Legal Services NYC is the largest provider of free civil legal services in the nation with offices in all five boroughs where we serve over 60,000 New Yorkers annually. Given that many of our clients are immigrant seniors, we thank the Committee and the Council for this opportunity to submit testimony regarding the provision of assistance to seniors through NORCs.

LS-NYC works with immigrant seniors in NORC developments, communities, and senior centers throughout the city. Our work includes the Manhattan neighborhoods of Harlem, Chinatown and the Lower East Side, as well as work in various neighborhoods in the Bronx, Queens, and Staten Island.

As the Committee is well aware, seniors are a vulnerable population. Many are homebound or have mobility issues, making it vitally important to provide them services close to their homes and communities. Immigrant seniors are an even more vulnerable population for a variety of reasons. Many suffer from negative ramifications due to their immigration status, and many more are Limited English Proficient (LEP), making it difficult for them to navigate the often complex area of immigration law. For example, immigrant seniors who became lawful permanent residents after 1996 and have not been able to become U.S. citizens may be prohibited from accessing federal benefits such as Supplemental Security Income (SSI) or the Supplemental Nutrition Assistance Program (SNAP), leading to income and food insecurity. Similarly, elderly lawful permanent residents cannot easily petition for family members to join them in the U.S. because of the quota system that currently exists in the law that gives U.S. citizens priority in bringing their family members to this country. As a result, elderly immigrant residents are separated from their spouses or adult children who can provide them with caregiving and companion services.

Part of LS-NYC's mission is to ensure that immigrant seniors who can become U.S. citizens do so in order that they may become eligible for the many federal and immigration-related benefits that are available. This in turn helps stabilize their economic situations and enhance their sense of well-being. Working with these seniors in the safe and comfortable environments of their communities and senior centers helps us to help them.

The following are three examples of immigrant seniors who were represented by LS-NYC attorneys, and who ultimately prevailed in their cases:

- LS-NYC represented Ms. L, an 80 year-old immigrant from the Dominican Republic, who lives in a NORC on the Lower East Side of Manhattan, in becoming a U.S. citizen. Ms. L had previously twice applied for citizenship but had failed the requisite English and U.S. history and

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40 Worth Street, Suite 606, New York, NY 10013
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Raun J. Rasmussen, Executive Director
Joseph Steven Genova, Board Chair



civics tests. Upon accepting the case, our attorney realized that because of medical problems Ms. L qualified for a disability exception so that she did not have to take the citizenship test. Additionally, because of her many years of lawful permanent residence, Ms. L could take the citizenship tests in her native language. However, Ms. L, a very proud woman, wanted to be able to say that she took and passed the citizenship test, so with the help of an LS-NYC attorney, Ms. L studied hard and she passed the citizenship test in Spanish. Ms. L was elated. The naturalization process also gave Ms. L the opportunity to legally change her name, a process that can be done at naturalization free of charge. Also, because Ms. L had limited income, our attorney applied for and received a waiver of the \$680 naturalization application fee for her.

- Ms. W., a senior from Chinatown, was abandoned by her husband and left with almost no way to support herself. Consequently, Ms. W desperately needed SSI and SNAP benefits, but was ineligible for these benefits due to her immigration status. Ms. W was not exempt from the English language requirement of the citizenship process, but due to her limited knowledge she could not have passed the English and civics naturalization exam. Ms. W, was however, eligible for a disability waiver and with the assistance of an LS-NYC attorney, Ms. W obtained the required waiver and became a U.S. citizen. She is now eligible for the benefits she needed to stabilize her financial situation.
- Mr. M is an 81 year-old lawful permanent resident from the Bronx who wanted to petition for his wife, who was living in the Dominican Republic. Mr. M could not become a citizen because he was not able to learn English, and was not eligible for an exemption to that requirement. This meant he could not visit his wife for extended periods of time without endangering his permanent resident status. An LS-NYC attorney assisted Mr. M with the process of petitioning for his wife, and once that application was approved, continued to represent him through the long complex consular processing procedure, which took over a year and a half. After six years, Mr. M's wife visa was approved and she entered the U.S. Mr. M and his wife are now together, and since she is in better health, she is able to assist him with daily tasks that were previously difficult for him to complete.

These individuals would likely have encountered insurmountable obstacles without the legal representation we provided and it is certain that they would not have prevailed in their cases without our assistance. However, more importantly, knowing that our services were available in their communities likely made the difference to our clients.

The need for legal services for seniors in the area of immigration law is both great and unmet. Despite our organization's desire to represent as many individuals as possible, our resources are limited and our offices cannot represent every client who needs assistance. Accordingly, we support both existing and expanded allocation of funding to legal service organizations to provide assistance and representation to immigrant seniors in their own backyards through NORCs. The result would be the prevention of needless suffering for many New Yorkers seniors, and a more just city for all of us.

We thank the Committees for scheduling this hearing and for affording our organization the opportunity to submit this testimony.

Audrey Carr, Esq.
Director of Immigration
Legal Services NYC

Testimony from *Ana Rosario Cepin*
Residing at 555 West 170th Street apt. 42 New York, NY 10032
El Corazon Neighborhood NORC
March 4, 2016

The Heart NNORC has been a great asset to the elderly of this community.

I can personally say it is one of the best programs that have been established in this community. It offers nurse services and a social worker who plays an important role being that we are a low-income community she advocates to help us obtain the benefits we're eligible for. She also helps us [the seniors] translating the letters received in English into Spanish. This program is a place that offers more than just services, it's a place that feels like home. It provides the opportunity to be part of a support group, which I really enjoy, educate us throughout the lectures and workshops. Finally this is a very comprehensive program which fills in the gaps left by seniors' centers in the community.

Thank you

COMMITTEE ON AGING AND COMMITTEE ON IMMIGRATION JOINT HEARING

From: Isabella El Corazon Neighborhood NORC

February 26, 2016

On behalf of Isabella Geriatric Center and the El Corazon Neighborhood NORC, we want to thank Councilmember Margaret Chin and Councilmember Carlos Menchaca, in addition to the other members of the Committees for the opportunity to make this statement in support of the creation of city funded Neighborhood NORC Supportive Service Programs under the oversight of the NYC Department for the Aging. We also want to express our appreciation to the Council for recognizing the desperate need for additional funding, and allocating discretionary dollars to existing NNORCs.

For the past nine years, Isabella has received SOFA funding to support the El Corazon (The Heart) Neighborhood NORC in the heart of Washington Heights. The SOFA funding, supplemented by additional funding from Isabella, and as of last year, NYC Council discretionary funding, has enabled us to serve a small catchment area in Washington Heights, comprised of 40 low rise tenement buildings, within six contiguous blocks and with no common ownership. The NY SOFA funding alone does not begin to put a dent in the growing need or services for the immigrant older adults in the Washington Heights community.

As we know, New York City is now home to a quickly expanding low income immigrant senior community. No where else is this more evident than in the Washington Heights community. Washington Heights in Northern Manhattan is home to a very large Spanish speaking older adult immigrant community; at last count, the Isabella El Corazon NNORC counted over 23 countries represented in our membership. All too often these immigrant elders strive to survive on incomes well below the poverty line. The majority has not completed elementary education and faces literacy challenges in both English and Spanish. Seniors live in poorly maintained six story tenement walk up buildings in need of repairs, in single rooms, or with large extended families in crowded conditions and face daunting challenges by unscrupulous landlords seeking to evict them for higher rental tenants. High walk-up apartments can easily become a barrier to an elder who faces health challenges, leading to reclusiveness, depression, and ultimately self neglect.

Likewise profound challenges in accessing quality health care, along with other barriers have led to high rates of diabetes, hypertension, and obesity, as compared to other aging communities. Maintaining economic security through the maze of government benefits and navigating the healthcare system require professional assistance. Many do not have access to a primary care physician and, by necessity, use the emergency room when symptomatic. The complexity of tasks involved in managing one's multiple chronic health conditions, from filling prescriptions, to taking medications properly, to being able to contact a primary care physician and knowing when a specialist is required, requires a helping hand that is provided by the NNORC team of trusted nurses and social workers, who guide seniors in managing their health on an ongoing basis. These services are critically needed to ensure that older people stay healthy and medically stable in the community.

All of the above and more have led us to confirm that immigrant seniors face challenges beyond those faced by the United States born aging population. NNORC programs seek to mitigate these challenges through relationship building, trust, and cultural familiarity, which are the cornerstone of the NNORC model. To this end, we have carefully selected our staff to reflect the cultural

COMMITTEE ON AGING AND COMMITTEE ON IMMIGRATION JOINT HEARING

From: Isabella El Corazon Neighborhood NORC

February 26, 2016

diversity observed in the NNORC and have committed to establishing familial like relationships that have made the NNORC the first line of defense for many of members facing crisis situations or other challenges. Comprehensive case management and intensive case management for those seniors at highest risk have become *essential* services to ensure the health and safety of our growing elder population and to prevent the increased homelessness, wandering, and unnecessary injury or worse that we are bound to see among our growing population of cognitively impaired and isolated seniors, if there are insufficient services to support and bolster them.

As people live longer, the “older-old” population is growing in our NNORC program. Many of those frail seniors in need of in-home services may be ineligible for Medicaid due to their immigrant status and as a result go without, at the expense of their safety, mental and physical well-being. The NNORC fills these service gaps with alternative lifelines, which might include weekly home visits or a friendly visitor from the Henry Street Senior Companion Program. By virtue of being on site within their community, the NNORC has a unique opportunity not only to keep those potentially “living in the shadows” engaged with others, but also to encourage mutual assistance through facilitating friendships amongst members/neighbors. Similarly, with dementia more prevalent than ever, the NNORC regularly engages and educates family members, while keeping a watchful eye on the senior.

We are painfully aware that census information fails to take into account the growing number of under-reported seniors living within our community, raising concern that more and more immigrant older adults are living in shadows and without the necessary supports that will enable them to age safely. An integral aspect of the NNORC program has been to carry out ongoing and varied outreach initiatives, by both staff and members, aimed at identifying isolated seniors living in the NNORC designated buildings.

While our NNORC has benefitted greatly from the recent additional funding, the uncertain future inherent to discretionary funding makes it difficult to plan programs in a timely manner or to ensure stability of staff who are by necessity hired on a “temporary” basis. For these reasons and more, we respectfully urge the Aging and Immigration Committees to support critically needed ongoing funding of New York City Neighborhood NORCs which will help assure continuity of staffing and services for vulnerable older adults. .

Thank you,
Carol Ban, LCSW
Director of Aging in Place Programs
Isabella Geriatric Center
515 Audubon Avenue
New York, New York 10040

Miriam Colon, MSW
NORC Programs Manager
Isabella Geriatric Center
515 Audubon Avenue
New York, New York 10040

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 02/26/2014

(PLEASE PRINT)

Name: Lakshman Kalasapudi

Address: 69-55 260th Place Glen Oaks, NY 11004

I represent: India Home, Inc.

Address: 100-15 Queens Blvd #203 Forest Hills NY 11375

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2-26-2014

(PLEASE PRINT)

Name: Mohammad Razi

Address: 1081 Corey Island Ave

I represent: COPO

Address: 1081 Corey Island Ave.

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Sasha Kester

Address: 130 E 59th

I represent: UJA Federation

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Susanna Levit

Address: _____

I represent: Shorefront 4

Address: 3300 Coney Island Ave

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Bella Akhmetch (translated by

Address: Boris Bruk)

I represent: Shorefront 4

Address: 3300 Coney Island Ave.

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2.26.16

(PLEASE PRINT)

Name: Karen Taylor

Address: Assistant Commissioner, Community

I represent: Services

Address: DFTA

Please complete this card and return to the Sergeant-at-Arms

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THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2.26.16

(PLEASE PRINT)

Name: Caryn Pecunick

Address: Deputy Commissioner, External Affairs

I represent: 87A

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Sasha Kester

Address: 130 E 59th St

I represent: UJA-Federation

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Molly Krakowski

Address: _____

I represent: JASA

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. 11 Res. No. 11

☐ in favor ☐ in opposition

Date: 2/26/16

(PLEASE PRINT)

Name: Howard Shih

Address: _____

I represent: Asian American Federation

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

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Anita Altman

Address: 41 W 96th St

I represent: NYA - Federation

Address: 130 E 59th St NY 10025

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2/26/16

(PLEASE PRINT)

Name: Yehui Zhao

Address: _____

I represent: Knickerbocker Senior Center

Address: 36 Monroe St.

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)
Name: YEVGENIA GALPERIN
Address: TRANSLATE: INNA ZASLAVSKAYA
I represent: JEWISH COMMUNITY HOUSE NYC
Address: 7802 BAY PARKWAY, B'KLYN
11214

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2/26/16

(PLEASE PRINT)
Name: FAYE LEVINE
Address: JEWISH COMMUNITY HOUSE OF
I represent: 7802 BAY PARKWAY
Address: BROOKLYN 11214
BENSONHURST

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2/26/16

(PLEASE PRINT)
Name: KAREN Schwab
Address: 58-20 Little Neck
I represent: Samuel Field Y
Address: 58-20 Little Neck Parkway
Little Neck 11362

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Lai Ha Hor

Address: _____

I represent: Chinatown NNOKC

Address: 7 Mott Street

◆ Please complete this card and return to the Sergeant-at-Arms ◆

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Mei Hain Ng

Address: 125

I represent: Chinatown NNOKC

Address: 7 Mott Street

◆ Please complete this card and return to the Sergeant-at-Arms ◆

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

Name: Charles Leung (PLEASE PRINT) / translating for
Asian seniors

Address: _____

I represent: Chinatown NNOK

Address: 7 Mott Street

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 2/2

Name: Rhonda Soberman (PLEASE PRINT) UNSNY

Address: 1250 Broadway

I represent: Chinatown NNORC

Address: 7 Mott

Please complete this card and return to the Sergeant-at-Arms