

CITY COUNCIL  
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

of the

COMMITTEE ON AGING

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Friday, April 10, 2026

Start: 10:07 A.M.

Recess: 1:01 P.M.

HELD AT: 250 Broadway - 8th Floor -  
Hearing Room 1

B E F O R E: Hon. Susan Zhuang, Chair

COUNCIL MEMBERS:

Shirley Aldebol

Gale A. Brewer

Eric Dinowitz

Crystal Hudson

Christopher Marte

Darlene Mealy

Other Council Members Attending: Encarnación

A P P E A R A N C E S

Dr. Lisa Scott-McKenzie,  
Commissioner of the New York City Department for  
the Aging (NYC Aging)

Eileen Mullarkey,  
Associate Commissioner for Supportive Services within  
the Bureau of Social Services at the New York City  
Department for the Aging (NYC Aging)

Gayle Horowitz,  
CEO of JASA

Mark L. Meridy,  
Executive Director, DOROT

Teresa Lin,  
Vice President of Cultural Market Development at VNS  
Health

Fritz Valme,  
Representing: One Community and The Sharing  
Network

Erin Reddan,  
EmblemHealth- Regional Leader at Neighborhood  
Care

Geordana Weber,  
Chief Program Officer at Service Program for  
Older People (SPA)

Bill Gross,  
Chief Services Officer at SAGE

A P P E A R A N C E S (CONTINUED)

Emma Lentz-Bessire,  
Senior Associate, Policy and Advocacy at  
Citymeals on Wheels

Bridget Lee,  
Weinberg Center for Elder Justice

Anita Kwok,  
Policy Analyst at United Neighborhood Houses  
(UNH)

Linda Hoffman,  
President of the New York Foundation for Senior  
Citizens

Kit Pang Ng,  
Member at Homecrest OAC

Mohammad Razvi,  
Founder and CEO of the Council of People's  
Organization (CPO)

Kalman Bokow,  
Development Manager at India Home

Terry Campuzano,  
TA President at Meltzer Tower

Marcus Jackson,  
Director of Advocacy and Government Relations at  
Encore Community Services

William McDonald,  
State President of AARP New York

A P P E A R A N C E S (CONTINUED)

Joanne Edey-Rhodes,  
SNAP Brookville

Cathy Cahn,  
Director of SNAP Brookville Older Adult Center

Helen Ahn,  
Managing Director of Korean Community Services of  
Metropolitan New York

1  
2 SERGEANT PAYTUVI: This is a microphone  
3 check for the Committee on Aging, recorded on  
4 April 10, 2026, located in Hearing Room 1,  
5 recorded by Nazly Paytuvi.

6 SERGEANT AT ARMS: Good morning, and  
7 welcome to today's hearing for the New York City  
8 Council's Committee on Aging.

9 At this time, if you would like to  
10 testify, you must fill out a witness slip with one of  
11 the Sergeant at Arms in the back of the room.

12 You may submit testimony at  
13 testimony@council.nyc.gov.

14 At this time, please silence all  
15 electronic devices, please silence all electronic  
16 devices.

17 No one may approach the dais.

18 Chair, we are ready to begin.

19 CHAIRPERSON ZHUANG: Good morning, and  
20 welcome to our Commissioner. I want to thank you for  
21 visiting a lot of senior centers, especially the ones  
in my district.

I'm Council Member Susan Zhuang, Chair  
of the New York City Council's Committee on Aging. I  
want to thank all of you for being here today for

1  
2 this important oversight hearing on addressing social  
3 isolation among older New Yorkers.

4 As we know, New York City's older adult  
5 population has grown rapidly over the last 20 years,  
6 with the largest growth in the older adult population  
7 coming from immigrant older New Yorkers.

8 More must be done to ensure older adults  
9 in our city receive the support and resources they  
10 need, regardless of their background. Unfortunately,  
11 according to the NYC Aging's 2025 service needs  
12 assessment, approximately 22% of older adults feel  
13 that they are not socialized as often as they would  
14 like, and a further 17% report feeling a high level  
15 of loneliness. These numbers are a sign that we are  
16 falling short.

17 Social isolation occurs when an  
18 individual has little or no meaningful contact with  
19 others, resulting in limited engagement with family,  
20 friends, or community. Loneliness, which often occurs  
21 alongside or as a result of social isolation, is a  
subjective, distressing feeling that one's social  
relationships are inadequate or lack desired  
closeness. Both are linked to serious physical and  
mental health conditions. Those who feel isolated and

1  
2 alone are more likely to suffer from anxiety and  
3 depression, cognitive decline, and even physical  
4 conditions like heart disease. Loneliness literally  
5 hurts the heart.

6 We are holding this hearing today to  
7 discuss with the administration how NYC Aging is  
8 working to identify older adults who are socially  
9 isolated. We will learn what programs are in place to  
10 help these individuals and those at risk, whether  
11 there is sufficient outreach, and the ways New York  
12 City can innovate and adapt as NYC becomes older and  
13 more device-oriented.

14 Living alone significantly increases  
15 vulnerability to social isolation, and about 30% of  
16 older adults in NYC alone now live by themselves, a  
17 share that rises to 40% among New Yorkers aged 85 and  
18 older. Older adults in the City often also face  
19 functional limitations, with 36.7% reporting at least  
20 one disability, and with that proportion climbing to  
21 nearly 50% in the Bronx. We also know that older  
adults of color are more likely to live alone,  
lacking family support (INAUDIBLE) face higher rates  
of poverty, linguistic barriers, and unequal access  
to health and social services, all factors associated

1  
2 with isolation. These are some of the community  
3 members most at risk. It is these people we need to  
4 think about today.

5 I look forward to hearing from the  
6 administration about what's being done to help other  
7 New Yorkers not just leave, but thrive in this city.

8 We will also be hearing three pieces of  
9 legislation today:

10 First, a Preconsidered Introduction by  
11 Council Member Lee, which could require NYC Aging to  
12 make any application form, benefit information,  
13 resources, or service that is available online  
14 accessible through non-digital means. Many older  
15 adults don't have reliable access to the Internet or  
16 may not have the technical skills necessary to easily  
17 access this virtual information. These New Yorkers  
18 would not be left behind.

19 Second, we are hearing a Preconsidered  
20 Introduction by a Council Member Encarnación. This  
21 bill would require the Commissioner of the New York  
City (NYC) Department for the Aging (DFTA) to develop  
a protocol in collaboration with NYC Emergency  
Management (NYCEM) and relevant agencies to conduct

1  
2 in-person and phone-based wellness checks during  
3 extreme weather events.

4 Older adults are often more at risk for  
5 severe weather events, including extremely cold and  
6 hot weather. It's critical that NYC Aging and NYC  
7 Emergency Management prioritize these New Yorkers,  
8 ensure their safety, and their well-being.

9 Finally, we will be hearing a  
10 Preconsidered Resolution by Council Member Mealy,  
11 calling on the New York State Legislature to pass,  
12 and the Governor to sign, S.8689/A.10055, authorizing  
13 the New York State Office for the Aging to establish,  
14 operate, and maintain programs for transportation  
15 services. This is the time for an agency dedicated to  
16 older adults to take a leading role in innovating and  
17 implementing programs aimed at the population under  
18 its purview. Transportation is a major tool in  
19 combating loneliness, and it's often one of the most  
20 common concerns for older adults. It is time for the  
21 State Department for Aging to be given the power to  
face this issue directly.

Thank you to my colleagues who have  
joined today, and to my staff member, Jennifer

1  
2 Thorpe-Moscon, and committee staff, Christopher Pepe,  
3 Joshua Newman, and Saiyemul Hamid.

4 Before we continue, I want to recognize  
5 my colleagues who are here with us today: Council  
6 Member Crystal Hudson and Council Member Aldebol.

7 Now I will turn it over to committee  
8 counsel to administer the oath to the representatives  
9 from the Administration.

10 COMMITTEE COUNSEL: Thank you, Chair.

11 Good morning, if you could both please  
12 raise your right hand.

13 Now, in accordance with the rules of the  
14 Council, I will administer the affirmation to the  
15 witnesses from the mayoral administration.

16 Do you affirm to tell the truth, the  
17 whole truth, and nothing but the truth in your  
18 testimony before this committee, and to respond  
19 honestly to Council Member questions?

20 (PANEL AFFIRMS)

21 COMMITTEE COUNSEL: You may proceed with  
your testimony.

COMMISSIONER SCOTT-MCKENZIE: (INAUDIBLE)

COMMITTEE COUNSEL: Can you turn your  
microphone on, Commissioner?

(PAUSE)

COMMISSIONER SCOTT-MCKENZIE: Thank you.

Sorry for the technical issue.

Good morning, Chair Zhuang, and Members of the Committee on Aging. My name is Dr. Lisa Scott-McKenzie, and I am the Commissioner of the New York City Department for the Aging, NYC Aging. Today, I am joined by Eileen Mullarkey, Associate Commissioner for Supportive Services within the Bureau of Social Services at NYC Aging. I am very grateful for the opportunity to speak with you today about our agency's commitment to fighting social isolation among older adults.

Combatting social isolation is a key reason the Older Americans Act established Area Agencies on Aging (AAAs), of which NYC Aging is the largest in the US, to create the necessary programs and structures that provide older adults with the tools needed to stay socially, physically, and emotionally connected as they age.

NYC Aging programs, such as older adult centers (OACs), naturally occurring retirement communities (NORCs), the Friendly Visiting Program, Case Management (CMA), caregiving, Geriatric Mental

1  
2 Health, Home Delivered Meals (HDM), and caregiving  
3 programs, integrate combating social isolation into  
4 their program standards as a key component of their  
5 overall service. To say the least, we take social  
6 isolation incredibly seriously, and it is a  
7 motivating factor behind our programs and services.  
8 As we learned during the pandemic, social isolation  
9 can have a large impact on everyone's health and  
10 well-being. Yet, in older adults, this has a major  
11 impact on their health, which is linked to increased  
12 levels of heart disease, exacerbation of chronic  
13 issues, and limitations on their mobility.

14  
15 As we have said many times before, we  
16 expect the number of older adults in New York City to  
17 increase significantly in the next decade. As the  
18 population of the city ages, so does the need for  
19 expanded services to help older adults remain in  
20 their homes and communities with dignity. This  
21 includes a growing demand for caregiving support and  
resources to address the epidemic of social  
isolation. Older adults are particularly vulnerable  
to challenges like loneliness and financial  
insecurity, which are further complicated by  
concomitant problems like food or housing insecurity.

1  
2 We recognize that these are the kind of "meat and  
3 potatoes" issues that older adults may face every  
4 day, and this combination of issues can worsen  
5 conditions such as depression and anxiety. In  
6 response, NYC Aging has been working to meet these  
7 needs with a particular focus on innovative solutions  
8 that foster connection.

9 NYC Aging's work is designed to provide  
10 comprehensive support where older adults already  
11 live. Through our robust network of community  
12 partners, we aim to expand our services to better  
13 serve more of these vibrant communities. We want to  
14 ensure older New Yorkers have access to the resources  
15 they need to thrive. This includes mental health  
16 services and social engagement opportunities. Our  
17 goal is to empower older adults by providing the  
18 tools and connections necessary to maintain their  
19 health and independence. We are constantly looking to  
20 better calibrate and improve programs and services to  
21 meet the needs of this growing population and ensure  
they find the social and emotional connections needed  
to age in place and thrive in New York City. NYC  
Aging has been done through a broad interconnected  
network of community-based non-profits.

1  
2 It is clear to us that older adults want  
3 to remain in their homes and the communities they  
4 helped to build as they grow older.

5 (PAUSE)

6 SERGEANT AT ARMS: Test, test.

7 COMMISSIONER SCOTT-MCKENZIE: Our network  
8 of more than 300 Older Adult Centers—which I am  
9 currently working my way to visit all these  
10 centers—is fundamental to achieving this goal. I  
11 would also like to thank the Chair and our other  
12 elected officials who have joined me on visits to our  
13 centers. And I welcome council members and other  
14 electeds throughout the city to continue to join us  
15 as we further engage with our older New Yorkers.

16 These centers serve as true community  
17 hubs where older New Yorkers can congregate, learn,  
18 and socialize. Our approach is to meet older adults  
19 in their communities by ensuring the services they  
20 need are accessible and integrated into their  
21 neighborhood OACs as well. This aligns with our  
broader Community Care Plan, which aims to promote  
independence and well-being of the aging population  
by connecting networks of services throughout the  
city.

1  
2           These centers are the frontline of our  
3 defense against social isolation. Through diverse  
4 programming, we offer much more than just a place to  
5 sit or grab a meal. Our centers provide art classes  
6 and technology education, as well as recreational  
7 activities. We also provide communal lunches that  
8 offer culturally aligned, nutritious meals with the  
9 goal of ensuring inclusion to make everyone feel  
10 welcome and respected at the table.

11           These programs provide the social  
12 infrastructure necessary for mental and emotional  
13 health. They are essential engagement opportunities  
14 that prevent older adults from withdrawing from  
15 society. By providing these services, they can live  
16 healthier and more connected lives. We are building a  
17 city that truly embraces longevity as well as aging  
18 with dignity.

19           We also recognize the need to provide  
20 services that are culturally and linguistically  
21 appropriate for older adults in various communities  
throughout the network—a goal that this committee and  
our agency have shared for years. Our programs are  
required to know and understand the communities they  
serve and provide programming in appropriate

1  
2 languages, but equally important, with an appropriate  
3 social-cultural focus. We see this in the diversity  
4 of centers which serve Spanish-speaking communities,  
5 LGBTQIA+ specific centers, and centers serving  
6 Muslim, Asian, Caribbean, West African, and a range  
of other ethnicities and communities.

7 The same applies to NORC services, where  
8 older adults are further supported in their homes and  
9 buildings where they may have lived for decades.

10 NORCs are set up to address and combat social  
11 isolation because of their unique position, where  
12 they already exist in a place where other older  
13 adults have found and set up communities. These  
14 include healthcare management through nursing  
15 services, civic engagement through interactions with  
16 case assistance staff, and working with housing  
17 management to address long-term housing issues  
18 experienced by older adults. These are key services  
19 that help prevent older adults from moving into  
20 institutional care and keep them in their homes and  
21 the communities they have built. When older adults  
remain in their homes and communities and receive the  
services they need to assist in activities of daily

1  
2 living, we are succeeding in our goals of combating  
3 social isolation.

4 For those who cannot physically travel to  
5 a center, the risk of isolation is even more acute.  
6 NYC Aging addresses this through a multi-layered  
7 approach that brings the community to the doorstep.  
8 Our HDM program...

9 (PAUSE)

10 SERGEANT AT ARMS: Testing.

11 COMMISSIONER SCOTT-MCKENZIE: Are we good?

12 (APPLAUSE)

13 COMMISSIONER SCOTT-MCKENZIE: (LAUGHS)

14 Thank you for being so responsive.

15 Just to remind everyone, we are speaking  
16 about Case Management and Home Delivered Meals and  
17 how they combat social isolation. So for those who  
18 cannot physically travel to a center, the risk of  
19 isolation is even more acute. NYC Aging addresses  
20 this through a multi-layered approach that brings the  
21 community to the doorstep.

Our HDM program is a vital component in  
this network of services. Not only do these meals  
provide sustenance to homebound older adults across  
the five boroughs, but interaction with the delivery

1 person is crucial. Many clients may have limited  
2 direct human interaction because of health  
3 challenges, mobility issues, or other impediments  
4 that affect their daily lives. The Case Management  
5 program evaluates and understands older adults' needs  
6 so we can better find the supports that alleviate  
7 social isolation.

8 Case managers do much more than just  
9 handle paperwork or coordinate benefits. They perform  
10 vital check-ins that serve as a lifeline for  
11 homebound clients. These assessments allow us to  
12 monitor not just physical needs but social and  
13 emotional health as well. When a case manager checks  
14 in, they are often the first to notice if an older  
15 adult is feeling lonely or disconnected. This allows  
16 us to intervene early. We want to ensure that no  
17 older adult remains invisible just because they  
18 cannot leave their home. Meals are still part of this  
19 equation, and we continue to hit milestones in meal  
20 delivery, with a current record of more than 10  
21 million meals served to older New Yorkers throughout  
the five boroughs. This includes 6.1 million meals  
served at the 300-plus OACs in the network and 4.2  
million meals delivered by our HDM providers. These

1  
2 are 10 million interactions with older adults over a  
3 meal, and everyone represents an opportunity this  
4 agency has taken to address and alleviate social  
5 isolation.

6           Because we recognize the vulnerability of  
7 older adults to become socially isolated, NYC Aging  
8 operates the Friendly Visiting program, which is  
9 available to homebound clients through our Case  
10 Management Agencies. Through the nine providers  
11 across all five boroughs, case managers can identify  
12 a client who is lonely and then refer them for an  
13 assessment where they are matched with a volunteer  
14 who fits their specific needs. These volunteers  
15 undergo background checks and training and commit to  
16 the program for at least six months. A coordinator  
17 monitors these matches to ensure the older adult is  
18 happy and safe. Volunteers visit and speak with  
19 homebound older adults in the program, where they  
20 share interests and build friendships, which  
21 ultimately limits social isolation. We are always  
recruiting new volunteers, especially in areas with  
shortages like the South Bronx, and encourage anyone  
who is interested to call Aging Connect at

1  
2 212-AGING-NYC or 212-244-6469 to begin the process of  
3 joining this incredible program.

4           These interactions are not just service  
5 calls. They often blossom into lasting friendships  
6 that bridge generational gaps. It significantly  
7 reduces feelings of loneliness for people who might  
8 otherwise go for days without a conversation. We have  
9 seen firsthand how a simple weekly visit can  
10 completely change the outlook of an older adult. It  
11 gives them something to look forward to and reminds  
12 them that they are a valued part of our city.

13           Additionally, an innovative approach to  
14 reduce social isolation has been through our  
15 partnership with the New York State Office for the  
16 Aging (NYSOFA) and their lifelike animatronic pets  
17 project. While not always appropriate for every older  
18 adult, these robotic pets have had proven results as  
19 part of the 2018 pilot study, which showed that 70%  
20 of older adults who received the robotic pet  
21 experienced a decrease in loneliness. We are always  
looking for potential avenues to reduce the impacts  
of social isolation and loneliness, and these  
animatronic pets are just one of many options within  
our programs and services.

1  
2 This focus on connection extends to our  
3 mental health programming as well. Placing licensed  
4 clinicians in our centers makes it easier for older  
5 adults to get help without the stigma often  
6 associated with seeking therapy. By coming into an  
7 OAC, an older adult will be able to access a hub of  
8 services—all of which are part of our efforts to  
9 reduce social isolation. If they don't want to come  
10 into an OAC, they can schedule mental health  
11 counseling over the phone or by calling Aging  
12 Connect, which will then connect them to other  
13 programs. By treating mental health as a normal part  
14 of aging services, we can better address the  
15 depression and anxiety that often stem from  
16 isolation. We are giving older adults the tools to  
17 process their feelings and reconnect with the world  
18 around them. The goal is to be connected and ensure  
19 we limit isolation in every program or service.

20  
21 As part of today's hearing, there are  
also two pre-considered introductions which we are  
here to discuss:

Introduction 1634 from Council Member  
Encarnación establishes a system of completing

1  
2 wellness checks for older adults during extreme  
3 weather events.

4 Introduction 1630 would require that NYC  
5 Aging make non-digital applications—paper  
6 applications—available to older adults.

7 We are aligned with the Council on the  
8 spirit of these two pieces of legislation. We are  
9 very concerned about the impacts older adults feel  
10 during periods of extreme weather and want to ensure  
11 that our programs that serve the most vulnerable  
12 older New Yorkers maintain that connection and  
13 lifeline of assistance during emergency periods  
14 across the City.

15 Similarly, we want to make it easier for  
16 older New Yorkers to access the benefits and services  
17 that will best help them. In many instances, our  
18 programs like OACs, case management, New York  
19 Connects, and others will assist older adults when  
20 filling out forms to access benefits and services.  
21 While sometimes a paper form may not exist, or we may  
need to be specific in how we identify vulnerable  
adults, we believe and support the Council's intent  
on these bills and look forward to discussing these  
further as they become law. We are always grateful to

1  
2 have a relationship with the Council where we can  
3 find solutions that work for our agency, providers,  
4 clients, and our shared goals.

5 I am immensely proud of the work our  
6 staff and provider network at NYC Aging accomplish  
7 every day. We are consistently working to be more  
8 innovative and efficient in meeting the diverse and  
9 growing needs of New York City's older adults.

10 Like you, we are concerned about social  
11 isolation in our communities and the ways in which  
12 older adults may be cut off from the bonds that have  
13 strengthened and enriched their lives. With your  
14 continued partnership, we can ensure that older New  
15 Yorkers are not only cared for but are also  
16 celebrated and respected.

17 We all must advocate for the same  
18 statewide, especially as we await a finalized state  
19 budget. We all must become the activists needed to  
20 ensure we achieve this goal.

21 I thank you for your steadfast commitment  
to New York City older adults and your unflinching  
partnerships with this agency.

CHAIRPERSON ZHUANG: Thank you,  
Commissioner. And as we stated last time, we have a

1  
2 new tradition for our hearings. These are the  
3 pictures from three senior centers. They don't want  
4 me to name who they are, but even in the senior  
5 center, they're afraid—look at the condition there.  
6 These pictures are from three boroughs: Queens,  
7 Brooklyn, and the Bronx. Those are senior centers in  
8 terrible condition.

9 To motivate our seniors to go to our  
10 senior centers to fight against senior isolation  
11 issues, we need to provide really good conditions in  
12 all the senior centers. I believe you agree with me.

13 COMMISSIONER SCOTT-MCKENZIE: Mm-hmm. I  
14 absolutely agree with you. And as we have noted, even  
15 in the centers that we saw in your area, we can  
16 always find room for improvement at any one of the  
17 sites. And obviously, you know, wherever these sites  
18 are, first of all, I don't want any site to ever feel  
19 that they can't come to us for assistance if they  
20 need it. We have an open door, and obviously I've  
21 been going out along with many of you to every one of  
22 these sites. So even if they don't self identify, we  
23 will find them.

24 All for our visits, but I also want to  
25 just mention that we really have a focus on looking

1  
2 at issues that require immediate addressing. So as  
3 we've gone to the sites, we're tracking the  
4 completion rate for any items that I've identified,  
5 and many of these items we consider just do it. And  
6 if there are things that can be taken care of within  
7 two weeks, we make sure they're done within two  
8 weeks. We want to make sure that all of our sites,  
9 Nitro sites, and private landlords provide safe,  
functional, attractive environments for older New  
Yorkers.

10 CHAIRPERSON ZHUANG: Thank you. I want to  
11 acknowledge that we are also joined by Council Member  
12 Dinowitz on Zoom.

13 Council Member Hudson has to leave soon,  
14 so let's start with her questions.

15 COUNCIL MEMBER HUDSON: Thank you so much,  
16 Chair, good morning, Commissioner.

17 Just a couple of questions on the  
18 specific demographics of older adults.

19 How is NYC Aging measuring whether LGBTQ+  
20 older adults, who are more likely to live alone and  
21 lack family support, are being effectively reached by  
existing programs? I know a lot of the demographic  
information is, you know, folks have to

1  
2 self-identify, but I'm curious to know if there are  
3 any specific ways in which you're measuring LGBTQ+  
4 folks. And how are they being reached by existing  
5 programs?

6 COMMISSIONER SCOTT-MCKENZIE: And thank  
7 you so much for that. We are so excited about our  
8 recent work to better serve our LGBTQIA plus older  
9 adults.

10 As you know, we've been speaking about  
11 our efforts to form the LGBTQIA+ Commission on Older  
12 Adults, which was mandated as part of Local Law 173.  
13 We've held two meetings, one in November of 2025 and  
14 one in February of 2026. Our third meeting for the  
15 Commission is currently scheduled for May.

16 We brought together nearly a complete  
17 Commission, and you should know that during our first  
18 meeting, the agenda topic was about social isolation.

19 One of these areas we focused on was the  
20 impact of long term marginalization within this  
21 community, which can then lead to social isolation in  
older adults.

Part of the work of this Commission will  
be to look at social isolation and loneliness, and to

1  
2 provide programs that can better serve LGBTQIA+ older  
3 adults.

4 We've also made efforts to ensure that we  
5 don't just simply pigeonhole them into programs, but  
6 we include all centers in programming centered around  
7 more inclusive services. Just last December, on World  
8 AIDS Day, New York City Aging hosted a panel  
9 discussion examining the history of the AIDS  
10 generation and its impact on older adults today.

11 (TIMER) This panel discussion wasn't simply for our  
12 LGBTQ centers, but included the wider network and  
13 contributed to the overall LGBTQIA+ curricula in all  
14 of our centers.

15 COUNCIL MEMBER HUDSON: Great. Thank you  
16 so much. And Chair, can I just ask one more question?

17 What culturally specific outreach  
18 strategies is NYC Aging using to reduce isolation  
19 among Black, Latino, and Asian older adults who face  
20 higher rates of poverty and linguistic barriers?

21 COMMISSIONER SCOTT-MCKENZIE: I'd say that  
we do know from nationwide data that we do have  
challenges, specifically in our non-white older  
adults. And they're more at risk in certain areas.  
One of the things that we've done is to take a look

1  
2 at issues like digital literacy and access to the  
3 Internet. And we've made sure that we are working  
4 with our OACs to provide programs that include  
5 requirements in all contracts that perform outreach  
6 and are more inclusive, so that if we do have  
7 communities that are underrepresented, they do have a  
8 place at the table, and that we are serving them as  
9 best we can.

10  
11 COUNCIL MEMBER HUDSON: Thank you.

12  
13 And I'll just say, I think in the years  
14 immediately following the pandemic, we were paying,  
15 uh, we were trying to do our best and paying very  
16 close attention to social isolation, but obviously we  
17 were dealing with a lot. And so now that we're a  
18 little bit more removed from the pandemic, I think  
19 it's that much more important that we focus on social  
20 isolation and the impacts that it has. So thank you.

21  
22 COMMISSIONER SCOTT-MCKENZIE: Absolutely.

23  
24 COUNCIL MEMBER HUDSON: Thank you, Chair.

25  
26 COMMISSIONER SCOTT-MCKENZIE: Thank you.

27  
28 CHAIRPERSON ZHUANG: Thank you.

29  
30 And, just to follow up with the service  
31 for the LGBTQIA+ community, I recently spoke to a  
32 senior center in Brooklyn. They have members travel

1  
2 one-and-a-half hours from the Bronx to Brooklyn,  
3 because, very often, those LGBTQ seniors don't have  
4 a senior center in their own neighborhood. They have  
5 to travel very far. So, is there any plan for NYC  
6 Aging to identify more locations to serve this type  
7 of community?

8  
9 COMMISSIONER SCOTT-MCKENZIE: Absolutely.  
10 And we will have an RFP that will be coming out in  
11 the near future, later this year, and it is one of  
12 the elements that will be included in that RFP to be  
13 more inclusive, and where there are specific  
14 community needs to address those.

15  
16 CHAIRPERSON ZHUANG: They told me that  
17 they don't feel safe when they go to another center.  
18 That's one of the issues. They only go to a specific  
19 one because most of the members are from the same  
20 community, and they feel more confident and  
21 comfortable in that space. So if we can identify  
every borough that has this type of facility, we will  
help this group of people more. This is what I think.

COMMISSIONER SCOTT-MCKENZIE: Thank you  
so much.

CHAIRPERSON ZHUANG: Also, we have Council  
Member Aldebol who has questions.

1  
2 COUNCIL MEMBER ALDEBOL: Good morning,  
3 Commissioner. Nice to see you again.

4 COMMISSIONER SCOTT-MCKENZIE: Nice to see  
5 you.

6 COUNCIL MEMBER ALDEBOL: So, how does the  
7 Department for the Aging assess mobility limitations  
8 in communities, you know, ambulatory disability, lack  
9 of safe sidewalks? I think that's particularly true  
10 in NYCHA housing, where people are isolated because  
11 they can't traverse the broken sidewalks. And it is  
12 preventing older adults from participating in adult  
13 centers and community programs.

14 ASSOCIATE COMMISSIONER MULLARKEY: I can  
15 answer part of that. We have a case management  
16 program that serves the frail and disabled. And part  
17 of their assessment is to assess their needs and then  
18 connect them either with services, or it could be  
19 like devices, but that's one way that's addressed  
20 through our case management program.

21 COMMISSIONER SCOTT-MCKENZIE: And we've  
also, we've also partnered with the Department of  
Transportation for walkability tours, and they've  
actually gone out to senior centers and walked around

1  
2 the surrounding area just to be sure that our older  
3 adults are safe as they come to the centers.

4 In addition to that, every one of our  
5 sites has an environmental assessment checklist that  
6 will identify fall risk, and if there are issues that  
7 may cause someone with mobility issues--that may  
8 serve as a barrier to persons with mobility issues,  
9 and of course, we work on addressing those.

10 COUNCIL MEMBER ALDEBOL: Mm-hmm. Do you  
11 have a program that has mobile senior centers?

12 COMMISSIONER SCOTT-MCKENZIE: It's  
13 something... (CROSS-TALK)

14 COUNCIL MEMBER ALDEBOL: Have you thought  
15 about--have you thought about that?

16 COUNCIL MEMBER STEVENS: Yeah, I thought  
17 about that. We always welcome the Council's  
18 partnership, thoughts, and new ideas. Absolutely, if  
19 it is something that we find will better address the  
20 needs of older adults, we look forward to working  
21 with you all to have some mobile centers. Why not?

COUNCIL MEMBER ALDEBOL: And do you track  
how many older adults stop attending programs due to  
mobility decline?

1  
2           COMMISSIONER SCOTT-MCKENZIE: We don't  
3 directly track if the older adult is not attending  
4 due to mobility issues. However, we do have wellness  
5 checks. If an older adult does not come into the  
6 center, there are folks from the center who will  
7 reach out to them to find out what the issues are, or  
8 if there is something that we can do to further  
9 assist them so that they can make it to the center,  
10 or if they may need to transfer to homebound services  
11 instead of having to come out to the center. So, we  
12 do work on it from that part of the issue. And we  
13 also have our Service Needs Assessment, and we found  
14 from that Service Needs Assessment, which was  
15 conducted in 2024, but the findings came out in 2025,  
16 that older adults have indicated that they have--  
17 some of them have issues, and they are afraid to be  
18 able to leave their home due to-- 20% cited physical  
19 limitations, 15% cited a fear of falling, and 5%  
20 cited a lack of accessible transportation.

17           COUNCIL MEMBER ALDEBOL: And on the  
18 animatronic pets, I'm not quite sure (LAUGHS). I have  
19 pets, I love pets, and I know many seniors who have  
20 had to give up their pets because they can no longer  
21 care for them, but I'm wondering if there's a way to

1  
2 provide some kind of service, uh, some kind of  
3 connection to, you know, the many organizations that  
4 can provide, you know, a service can visit seniors  
5 with service animals. They do it in hospitals and  
6 nursing homes. So I'm wondering if that's something  
7 that you've thought about doing?

8  
9 COMMISSIONER SCOTT-MCKENZIE: We have  
10 thought about it. I know my associate wants to bring  
11 out some additional information, but I'll tell you,  
12 it was really one of the most attractive features of  
13 the animatronic pets. Because you're right, many of  
14 our older adults would love to have a pet, but  
15 probably can't maintain a pet the way they would have  
16 in their younger years—just waste disposal and being  
17 able to feed these pets. So the animatronic pets are  
18 really, really lifelike. We've actually tried some of  
19 them in our office over the last week or so. (LAUGHS)  
20 And I'd say, you know, I was a little skeptical too,  
21 but I tell you, when you really interact with it, you  
can see the benefit. And again, it may not be  
suitable for every older adult, but for those who  
would like to have one, we would certainly encourage  
them to get one. And we're working through some of  
our programs to introduce them as well.

1  
2 ASSOCIATE COMMISSIONER MULLARKEY: I think  
3 you covered it right, and your clients can always go  
4 through Aging Connect and then get connected to the  
5 right program. And we recently, through the State  
6 Office for the Aging, will have access to more of a  
7 supply. So this is a good time to bring that up and  
8 for them to reach out.

9 COUNCIL MEMBER ALDEBOL: Okay, thank you.

10 CHAIRPERSON ZHUANG: Thank you. I have a  
11 followup question. In your testimony, there is talk  
12 about robot pets. Can you give more information?  
13 Robotic pets?

14 COMMISSIONER SCOTT-MCKENZIE: Yes, yes,  
15 these are the animatronic pets that we're talking  
16 about now. And perhaps you all may benefit from us  
17 sharing a few with you (LAUGHS) for you to get an  
18 idea of what we're talking about. But yes, they're  
19 very lifelike. They're robotic, but they don't look  
20 like robots. They actually look like different pets.  
21 They have dogs, they have cats, they have birds. So  
some of them are really interactive, for me to tell  
you, and for you to see it. I think you may benefit  
from actually seeing it.

1  
2 CHAIRPERSON ZHUANG: In the pilot program,  
3 how many seniors-- like the database?

4 COMMISSIONER SCOTT-MCKENZIE: Well, it  
5 hasn't been offered by us. It's been offered by  
6 NYSOFA. So they've had the benefit of this, and I  
7 know that they published some of their results on  
8 this. We can bring you additional information, but  
9 right now, they are the source of this project.

10 CHAIRPERSON ZHUANG: Okay, thank you.

11 How does NYC Aging identify homebound  
12 older adults who are not connected to City-funded  
13 services?

14 ASSOCIATE COMMISSIONER MULLARKEY: So our  
15 case management agencies do outreach in the community  
16 so they can help identify frail, disabled clients,  
17 and then they also look to community partners,  
18 healthcare partners, social service providers, and  
19 faith-based organizations to know about the service  
20 so that they can actually refer to the programs. Once  
21 referred to case management, there's an assessment,  
and then there are connections with some very vital  
programs. For clients who need home-delivered meals,  
home-delivered meals are talking about social  
isolation and loneliness. We have a Friendly Visiting

1  
2 program that they can be connected to, and then,  
3 depending on their needs, helped with benefits,  
4 assistance, and connections to other programs.

5 CHAIRPERSON ZHUANG: Do you have detailed  
6 data?

7 ASSOCIATE COMMISSIONER MULLARKEY: We  
8 don't track how many clients come to our programs  
9 because of this outreach. But we do rely on our  
10 programs to have robust outreach so that they're  
11 reaching the maximum number of clients.

12 CHAIRPERSON ZHUANG: So, between the  
13 people you did outreach with, how many-- what's the  
14 percentage of people who speak other languages than  
15 English?

16 ASSOCIATE COMMISSIONER MULLARKEY: We will  
17 have to get back to you on that.

18 CHAIRPERSON ZHUANG: Okay, because we are  
19 talking about a lot of minority groups, a lot of them  
20 don't speak English at all. If they are in the  
21 program, they have no one who speaks their language,  
and they have no way to do the outreach.

ASSOCIATE COMMISSIONER MULLARKEY: We do  
rely on our programs and expect our programs to serve  
the community. So that does mean that, depending on

1  
2 which community, there are workers who are bilingual,  
3 bicultural, and we found that that's a good way to  
4 serve the community. But we can get back to you on  
5 the data in terms of breakdowns.

6 And I would like to circle back for one  
7 moment to the NYSOFA project that we just mentioned.

8 CHAIRPERSON ZHUANG: Mm-hmm?

9 COMMISSIONER SCOTT-MCKENZIE: There were  
10 4,500 older adults in that pilot. So, it is a pretty  
11 good representation.

12 CHAIRPERSON ZHUANG: According to your  
13 2025 Service Need Assessment, NYC Aging and its  
14 providers served just 12% of the (INAUDIBLE) city's  
15 older adult population in FY 2024. The same report  
16 states that approximately 22% of older adults are not  
17 socializing with others as often as they would like  
18 to—70%, uh, reported a high level of loneliness.

19 Has NYC Aging conducted any recent  
20 assessments of how many socially isolated or  
21 homebound older adults in New York City remain  
uncounted on unserved? And do you have that by  
language spoken?

COMMISSIONER SCOTT-MCKENZIE: So I want to  
start out by saying that we certainly understand and

1  
2 agree that there are critical needs in reaching  
3 underserved populations throughout New York City. And  
4 we are reaching clients and completing the work of  
5 our programs with the staff hours that are available.  
6 We are exploring, at this time, a repeat of the  
7 Service Needs Assessment. As we develop the timeline,  
8 we'd like to roll this out. We will further advise  
9 you in the future. But as we all know, New York City  
10 has changed significantly since 2020, excuse me,  
11 since 2024. And so we want to be sure that we are  
12 working towards addressing the current needs of our  
13 older New Yorkers. So it is something that we're  
14 considering.

15  
16 CHAIRPERSON ZHUANG: Thank you. And how is  
17 NYC Aging coordinating outreach with the hospital,  
18 EMS, NYCHA property management, and Medicare/Medicaid  
19 Management care plan to identify isolated or at-risk  
20 older adults?

21  
22 COMMISSIONER SCOTT-MCKENZIE: Well, one  
23 area of focus for us is interagency coordination and  
24 being able to work across the various New York City  
25 agencies to identify vulnerable or more vulnerable  
26 clients. So just yesterday, I had the opportunity to  
27 talk with our new DOHMH Commissioner, as well as

1  
2 representatives from New York City Health +  
3 Hospitals, Dr. Ted Long. And we're working on a  
4 partnership program where we can identify some of  
5 these socially isolated older New Yorkers. An  
6 additional enhancement at New York City Aging is that  
7 we are including flags in our system that will be  
8 able to flag for us any critical and at-risk older  
9 New Yorkers so that we can prioritize their needs in  
10 a more efficient manner.

11  
12 CHAIRPERSON ZHUANG: Do we already have a  
13 senior agency task force with members from different  
14 agencies? I saw we...

15 COMMISSIONER SCOTT-MCKENZIE: Yes...

16 CHAIRPERSON ZHUANG: already have that  
17 one. But I don't know what the activity has been so  
18 far.

19 COMMISSIONER SCOTT-MCKENZIE: Right. It's  
20 the Cabinet for Older New Yorkers. And it is  
21 something that we feel has been very effectively  
coordinated, some of the services. But there are  
targeted needs, too, where you may need to have a  
subcommittee, or a sub ad hoc group, looking at  
specific issues.

1  
2           So, absolutely, the Cabinet for Older New  
3 Yorkers will continue. And that's something that we  
4 hope to have back up and running in the next few  
5 weeks. So you will have more information at that  
6 time.

7           CHAIRPERSON ZHUANG: So, there's no  
8 meeting, any meeting scheduled currently?

9           COMMISSIONER SCOTT-MCKENZIE: There are  
10 meetings scheduled, but I don't have the date now.  
11 Perhaps one of my associates will hand me the date.  
12 But we do have meetings scheduled, and we are  
13 continuing the Cabinet for Older New Yorkers.

14           CHAIRPERSON ZHUANG: I see the bill,  
15 Preconsidered--I feel like if the Cabinet is already  
16 working on those issues, we would not need this bill  
17 in New York City. But because I feel there's a lack  
18 of communication, maybe internally, between the  
19 agencies, that's the reason our City Council Members  
20 have to introduce a bill to make sure different  
21 agencies work together to make sure the isolated  
adults get to be taken care of during extreme  
weather.

          COMMISSIONER SCOTT-MCKENZIE: Well, this  
may be, you know, and obviously, you have the right

1  
2 to your opinion on that, but I can tell you that I am  
3 aware that we have strong interagency collaboration.  
4 The Cabinet of Older New Yorkers just reinforces  
5 what's already happening at most of our agencies  
6 across the city. You can never have too much  
7 attention to an issue or concern for our older New  
8 Yorkers. So if we feel that, in addition to that, we  
9 need to stand up other bodies to look at these  
10 issues, we will certainly do that so that we have a  
11 real targeted approach to being able to address the  
12 needs of our older New Yorkers.

13 And I just want to also circle back and  
14 say the Cabinet for older New Yorkers does meet  
15 quarterly, so we will be meeting shortly.

16 CHAIRPERSON ZHUANG: Do you think we can  
17 make that monthly instead of quarterly? We have a lot  
18 of issues about seniors, about housing, food, and  
19 isolation. It's not only just one agency's work, but  
20 it's multi-agency work to help our seniors.

21 COMMISSIONER SCOTT-MCKENZIE: It is.

22 CHAIRPERSON ZHUANG: If it meets  
23 quarterly, I don't think it's frequent enough to  
24 address those issues.

1  
2           COMMISSIONER SCOTT-MCKENZIE: Well, that  
3 would be true if we weren't working on our own. You  
4 know, none of those agencies stopped working and  
5 waited for the quarter. So you know they are working  
6 independently, and usually at those meetings, they  
7 will come and provide updates as to what they're  
8 handling. So I absolutely agree. If it were quarterly  
9 only, you are right, that would not be frequent  
10 enough. So we do encourage them to continue to work,  
11 and as they come to those meetings, they bring very  
12 robust updates, which really let us know that they've  
13 continued working when those meetings are not being  
14 held.

15           CHAIRPERSON ZHUANG: Maybe this question  
16 should not be for the Commissioner of Aging, but for  
17 other commissioners.

18           Will they have particular liaisons signed  
19 to senior-related issues?

20           COMMISSIONER SCOTT-MCKENZIE: Yes, they  
21 do, and I will say to you, and of course, you know,  
the other commissioners are just as focused as I am  
on New York City as a whole. Obviously, New York City  
Aging is more targeted to senior issues, but our

1  
2 seniors are not forgotten in any of our New York City  
3 agencies.

4 CHAIRPERSON ZHUANG: Are we able to have a  
5 contact list so we can share it with council members,  
6 so when they have issues, they can go directly to  
7 those people?

8 COMMISSIONER SCOTT-MCKENZIE: Yeah, that  
9 would be a great idea.

10 CHAIRPERSON ZHUANG: Thank you. We're  
11 looking forward to having the list.

12 Also, to follow up with Council Member  
13 Aldebol's question about the winter social isolation,  
14 she talked about the NYCHA building; this winter and  
15 last winter, we have experienced extremely cold  
16 weather. A lot of seniors came to testify in the  
17 other hearing, not in this one, to talk about how it  
18 is very hard for them to get out of their homes. And  
19 then at the same time, does the NYC Aging coordinate  
20 with, like, winter awareness or get set up with an  
21 initiative so that social isolation among older  
adults-- they are able to have any virtual social  
engagement programs?

ASSOCIATE COMMISSIONER MULLARKEY: So  
between January 22nd and February 6th, our case

1  
2 management and caregiver providers made approximately  
3 16,400 wellness calls to ensure that some of our most  
4 vulnerable individuals were prepared for the storm.  
5 And 36 of those clients who were contacted received  
6 some direct support, such as additional food or  
7 meals, heating assistance, or over the counter  
8 medicine. New York City Aging amplified the cold  
9 weather alerts, and they use Notify NYC messages and  
10 Advanced Warning System notifications to the agency's  
11 service provider network, including all our  
12 contracted congregate, social, and direct care  
13 organizations.

14 COMMISSIONER SCOTT-MCKENZIE: Thank you,  
15 and I just want to also mention that, extreme  
16 weather, extreme heat, whatever may impact our older  
17 New Yorkers, we have a very robust and dynamic  
18 emergency preparedness program at New York City  
19 Aging. And I would also like to point to my previous  
20 work in Emergency Management, and I am a certified  
21 emergency manager. So it's always a focal point for  
us at the agency, making sure that we proactively  
prepare our older New Yorkers because we don't want  
to wait for something to happen, we want to make sure  
that they're always prepared, and if something does

1  
2 happen, as a surprise, that at least we have the  
3 resources to roll out to assist them.

4 CHAIRPERSON ZHUANG: Thank you,  
5 Commissioner. I think your experience in emergency  
6 management will probably bring a lot of benefits this  
7 summer. If we have the same hot weather, you can help  
8 a lot of seniors in our city.

9 Also, I would like to acknowledge that we  
10 have been joined by Chair Mealy. Chair Mealy, do you  
11 have some questions?

12 COUNCIL MEMBER MEALY: Yes, it's gonna be  
13 very brief. Sorry for being late. I have two meetings  
14 at the same time in the community. All the leaders  
15 are in the district. But I felt this was much more  
16 important.

17 And I want to thank you, Dr.  
18 Scott-McKenzie, for the meeting. I'm looking forward  
19 to working with you so much more. And I want to just  
20 highlight, from the last hearing, I was able to put  
21 in my budget about \$10,000 to give to (INAUDIBLE) Kcs  
Corona Older Adult Center to see how we could  
coordinate together, with transportation to bring in  
the seniors from there to Brooklyn. And I don't know  
how I'm going to do it to Brooklyn to Queens yet, but

1  
2 I'm still looking to make sure that the isolation is  
3 not so intense that seniors withdraw and they almost  
4 give up. So I just want to tell you that.

5 I have two questions, but I have to tell  
6 you something else. We just had the first Spades  
7 tournament in Brevard Houses, and it went to 9:00  
8 P.M. I'm not going to tell you the organization  
9 because I got to work with them a little bit more,  
10 but how can we keep the senior centers open a little  
11 later? That was phenomenal. I brought my Spades  
12 partner. There were at least about 40 people in  
13 there, and that's how we keep our seniors--I'm not  
14 calling them seniors, my young seniors (LAUGHS) from  
15 isolation. But what was so good was that they gave us  
16 lunch--well, dinner. We stopped at 7:30, ate for 15  
17 minutes, and started the tournament again. I only  
18 lost one game. But it still-- I'm going take it over  
19 soon.

20 (LAUGHTER)

21 COUNCIL MEMBER MEALY: Don't forget I do  
it every Friday, like today, at Mount Ararat, we have  
the Senior Center. Friday is usually my day off. I go  
there and play every Friday. (TIMER) Oh, can I? I

1  
2 didn't even ask my question. Sorry. But please, we  
3 have to do more about the transportation.

4           But thank you, we got to talk more on  
5 that to make sure that Staten Island, Queens, and  
6 Manhattan, we should be inter-agency and inter-senior  
7 centers networking with each other, because I found  
8 out, Urban Upbound, we were telling our seniors about  
9 the \$790-- no \$198.00 with your taxes. Seniors could  
10 automatically get that off the back. And that's been  
11 going on in my office for the last three months. You  
12 could be 99 years old,--A lot of seniors leave that  
13 money on the table, so. The Director, Bishop Taylor,  
14 said that he plays Spades, so I want to pop up with  
15 him to go to the senior centers.

16           And one thing I want to note is that it  
17 makes our seniors dress up a little more. They look  
18 forward to coming out, even at night. Everyone is  
19 not, you know, privy to coming out, but it's  
20 important for the ones that can. Let's get them out.

21           What is NYC Aging doing to increase older  
adult access to transportation? Because if we had a  
bus to take people home or at least close by, we  
could have everyone out at night. And what  
coordination exists between the NYC Aging, DOT, and

1  
2 MTA regarding Access-A-Ride to address  
3 transportation-related isolations? And what  
4 coordination exists between NYC Aging, DOT, and MTA  
5 Access-A-Ride to address transportation-related  
6 isolation (sic)?

6 And I have to give it to Access-A-Ride,  
7 I've been talking to the seniors, we used to call it  
8 stress-a-ride. So now it's getting kind of light.  
9 They said, "No, I'm okay." I guess the new cars are  
10 coming in, also, and not just the truck. So that's a  
11 plus. So how can we do that with transportation? Have  
12 y'all had any communication or collaboration?

11 COMMISSIONER SCOTT-MCKENZIE: So

12 (LAUGHS)...

13 COUNCIL MEMBER MEALY: (LAUGHS) Sorry.

14 COMMISSIONER SCOTT-MCKENZIE: Thank you so  
15 much for your robust support and advocacy.

16 COUNCIL MEMBER MEALY: No, thank you.

17 COMMISSIONER SCOTT-MCKENZIE: CM Mealy.  
18 Thank you for our conversations regarding the sites  
19 that are within your district as well.

19 And I just want to mention a few things.  
20 First off, we have been looking at whether or not  
21 there would be a way for us to keep some of the

1  
2 centers open a little more in the summertime. In  
3 relation to our cooling centers as well. So that we  
4 pretty much kill two birds with one stone. So it is  
5 something that we are looking at right now.

6 I'll also say that we do have an RFP  
7 coming out for both the OACs, as you know, to  
8 increase access, but also for transportation later on  
9 in the year. So there will be some opportunities to  
10 review the network.

11 COUNCIL MEMBER MEALY: Could you explain  
12 what kind of transportation? That we could be kind of  
13 clear, will it be taking seniors home or just to  
14 their Senior Center? Please, kind of-- could you  
15 kind of be direct? I wanna see where I could fit in  
16 if we don't have access for them to go directly back  
17 home or...

18 COMMISSIONER SCOTT-MCKENZIE: I'm not  
19 going to get into the weeds on that only because we  
20 know the RFP process is a competitive process and  
21 there'll be a lot... (CROSS-TALK)

COUNCIL MEMBER MEALEY: But, it's in  
there?

COMMISSIONER SCOTT-MCKENZIE: There are  
things that are in there that, once the RFP comes

1  
2 out, it would be better to review them and then see  
3 where you fit in. So, I really don't want to  
4 intervene too much in that process, so that it  
5 remains fair and equitable to all.

6 Access-A-Ride is a state-run program, so  
7 there's not much that we can say about that right  
8 now. But I will say that we have written three  
9 letters to MTA advocating for Access-A-Ride for older  
10 adults. So that should be helpful.

11 And as you know, there is a citywide  
12 focus--you know, our mayor has been very vocal about  
13 fast and free bus service and other things that would  
14 assist not just all New Yorkers, but definitely our  
15 older New Yorkers who oftentimes prefer to use bus  
16 service as opposed to subway service. So there are  
17 some opportunities there.

18 And then lastly. I'll say on the issue of  
19 playing Spades. (LAUGHS)

20 (LAUGHTER)

21 COMMISSIONER SCOTT-MCKENZIE: I might have  
to join you one day. I haven't played for a while.

COUNCIL MEMBER MEALY: We have a place for  
Mahjong from 2:00 to 5:00.

1  
2 COMMISSIONER SCOTT-MCKENZIE: Oh,  
3 wonderful.

4 COUNCIL MEMBER MEALY: It's at a community  
5 restaurant. So, anybody who plays Mahjong, please  
6 call my office. I need more... So, thank you so much.

7 COMMISSIONER SCOTT-MCKENZIE: (LAUGHS)

8 COUNCIL MEMBER MEALY: So, thank you so  
9 much.

10 COMMISSIONER SCOTT-MCKENZIE: Thank you.

11 CHAIRPERSON ZHUANG: Thank you.

12 I also want to ask questions about  
13 digital-related and technical topics.

14 How many older adult centers have  
15 implemented the digital literacy program required  
16 under Local Law 82 of 2023, and what metrics does NYC  
17 Aging use to evaluate whether it's reducing other  
18 forms of isolation?

19 COMMISSIONER SCOTT-MCKENZIE: Well, as you  
20 know, it is a focus area for us to try to increase  
21 the use of technology where possible, because it does  
help to connect older New Yorkers with the rest of  
the world and really helps to combat social isolation  
and loneliness.

1  
2 But we do have some data on that, too. We  
3 know that technology access varies across the  
4 boroughs. For computer ownership with internet, our  
5 residents ranked highest to lowest, Manhattan at  
6 73.1%, Staten Island at 71.9%, Brooklyn at 67.7%, the  
7 Bronx at 67.3%, and Queens at 61.3%.

8 And there are also variations in home  
9 internet availability by age. But overall, New York  
10 City Aging's OACs and other services are able to  
11 stand in where there's a lack of internet access.

12 As always, we know that those who are  
13 marginalized and underserved communities,  
14 historically disadvantaged groups may have less  
15 access, so this is an area of concern that I think  
16 the Council's partnership and citywide partnership  
17 will be needed.

18 CHAIRPERSON ZHUANG: Why is Queens only  
19 61%? Do you know what the reason is that they are  
20 much lower?

21 COMMISSIONER SCOTT-MCKENZIE: No, I don't  
22 know what the reason is that they're much lower, but  
23 it could be something that we should look into. I  
24 would imagine that it does have something to do with  
25 what we've mentioned earlier, that some of these

1  
2 communities are more marginalized and experience  
3 higher rates of poverty, and may not have internet  
4 access based on that.

5 CHAIRPERSON ZHUANG: There's a joke I  
6 always make with my Asian colleagues: I said Queens  
7 has the largest Asian population, but Brooklyn has  
8 the largest Chinese population. That means, I  
9 believe Queens has more language access needs.  
10 Probably that's one of the reasons. I don't have the  
11 data, but this is what I feel. Maybe that's one of  
12 the reasons, because there's very limited language  
13 access. Even in Brooklyn, we have a large Asian  
14 population, but the majority is Chinese; Queens is  
15 very different. Queens has Korean, Thai, Filipino,  
16 like everyone from Asia, but in Brooklyn, there are  
17 more concentrated Chinese-speaking communities.

18 Do you guys know any plans for  
19 language-related advertising online? I recently saw a  
20 lot of advertising about immigration in Chinese, but  
21 on Facebook. Chinese people, in general, especially  
those who only read Chinese, don't go to Facebook.  
Usually, they go to WeChat, but there's no  
advertising on WeChat, the platform.

1  
2 That is one example of minority groups.  
3 Even though they have access to the internet for  
4 internet literacy, they still don't get the  
5 information because its advertising is on the wrong  
6 platform. This is the issue, there I see.

7 I haven't seen any advertising for senior  
8 literacy on Facebook in different languages because I  
9 read Chinese, too. But I do not see that in  
10 Chinese-speaking seniors, the platform they usually  
11 use is a WeChat group. I would like to have the  
12 Administration do more research about different  
13 platforms. I know Koreans use a different platform,  
14 and Latinos use a different platform. Every  
15 culturally (INAUDIBLE) group uses different  
16 platforms. But for our city, everything is on  
17 Facebook or Instagram, which doesn't really serve the  
18 purpose there.

19 COMMISSIONER SCOTT-MCKENZIE: It's a great  
20 point, and we would welcome additional partnership  
21 with the Council on this issue because obviously, if  
we could increase the use of technology to assist or  
facilitate some of these language barriers, it would  
help our older adults as well. So definitely this is

1  
2 an area that I think that we can join forces on to be  
3 sure that we are representing all and including all.

4 CHAIRPERSON ZHUANG: Yeah, I see a lot of  
5 senior centers, especially in my districts, that have  
6 language access that helps seniors and also serves  
7 the seniors. Even my Jewish senior center has people  
8 who speak Chinese to serve the Chinese community, and  
9 also speak Russian and Spanish. They serve everyone.  
10 I'm very proud of the service they provide, and I  
11 appreciate the work NYC Aging does in our community.

12 But I just feel that the literacy in  
13 different languages is not published on their  
14 platform, say for like Russian-speaking seniors, the  
15 radio station they always hear--they told me 620  
16 radio station, and the Chinese they don't hear, they  
17 don't go to Facebook, but the advertising is on  
18 Facebook. So, even (INAUDIBLE) language has language  
19 access, but it's not really putting the platform for  
20 that group of people. I think there's more work to be  
21 done over there.

22 And what steps is NYC Aging taking to  
23 support immigrant older adults who report that the  
24 programs are not linguistically accessible and  
25 culturally appropriate?

1  
2           COMMISSIONER SCOTT-MCKENZIE: Well, at  
3 every one of our centers, first of all, there is no  
4 focus on any one group. We welcome all. Anyone who's  
5 60 and over can report to our centers, and we do  
6 provide culturally sensitive programming at every one  
of the sites.

7           So if an older New Yorker does present  
8 and does not speak English, we can communicate with  
9 them at the center in their local community.

10           CHAIRPERSON ZHUANG: Thank you. Is there  
11 any research you guys are doing related to the  
12 community, what language they speak, what senior  
13 center they attend, and what languages they are able  
14 to provide? Like, say, my neighborhood, the majority  
15 speak Russian, Chinese, and Spanish. My neighborhood  
16 did a pretty good job, but how about the other  
neighborhoods? Do we have data to show any  
requirement for those senior centers?

17           ASSOCIATE COMMISSIONER MULLARKEY: I can't  
18 comment on senior centers, but I can say that  
19 generally when we have our RFPs, we do share  
20 information in terms of language and culture for  
21 particular areas so that the providers that are

1  
2 applying are aware and can demonstrate how they'll  
3 serve those populations.

4 COMMISSIONER SCOTT-MCKENZIE: And I'd like  
5 to bring you back. I know that we do have  
6 information, because it has been included in our  
7 previous RFPs, uh, which languages in the particular  
8 communities that we have OACs. So we'll bring you  
9 some additional information on that, because it is a  
10 focus area for us, and always a concern that we are  
11 being very sensitive to the cultures that are  
12 represented in every community we serve.

13 CHAIRPERSON ZHUANG: Thank you.

14 We are joined by Council Member  
15 Encarnación. She has a statement to make.

16 COUNCIL MEMBER ENCARNACIÓN: Hello,  
17 everyone. Thank you, Chair, for recognizing me. And  
18 I know you were kind of going down a road, which I  
19 actually approve of.

20 As many of you know, I'm introducing a  
21 piece of legislation today. I'm also part of the  
Public Housing Committee, which is right next door,  
so I had to run over.

I'll make this brief, but I did want to  
take the moment to talk about this piece of

1  
2 legislation around extreme weather emergencies,  
3 especially since we've experienced so many this past  
4 winter. And knowing that they pose a clear and urgent  
5 threat to some of our most vulnerable members of the  
6 community, our older adults.

7 For many of our seniors, these conditions  
8 are not merely uncomfortable; they're  
9 life-threatening. Seniors, particularly those who  
10 live alone or have limited mobility, are more likely  
11 to experience chronic health conditions, social  
12 isolation, and barriers to accessing timely  
13 assistance. So during these emergencies, these  
14 challenges are compounded, leaving too many without  
15 the ability to seek relief, access critical  
16 resources, or respond quickly to rapidly changing  
17 conditions. This is precisely why it's necessary that  
18 we introduce this legislation now. And this  
19 legislation represents a proactive, compassionate  
20 approach to safeguarding the health and dignity of  
21 those who would otherwise slip through the cracks in  
our city services.

By establishing regular wellness checks  
for seniors living alone or exclusively with other  
seniors, we empower city agencies to prevent tragedy

1  
2 before it occurs. These check-ins help older adults  
3 maintain their independence while ensuring that they  
4 remain connected to essential services and support  
5 systems. At the same time, the initiative equips NYC  
6 Aging, I hope, with the tools to better identify and  
7 monitor individuals at risk of social isolation,  
8 declining mental health, or deteriorating physical  
9 health.

10  
11 With improved data collection and  
12 coordination, NYC Aging will be better positioned to  
13 deliver targeted, timely services to those who need  
14 them the most.

15  
16 Again, I want to thank the Chair for  
17 allowing me to introduce this today and to thank the  
18 Speaker also for entrusting me with getting this  
19 across the finish line. And for everyone who will  
20 hopefully sign on to this piece of legislation and  
21 get us there, thank you.

CHAIRPERSON ZHUANG: Thank you. We have  
some questions following the statement.

Does NYC Aging support this legislation?

COMMISSIONER SCOTT-MCKENZIE: As mentioned  
in my earlier testimony, we do align with the spirit  
of this introduction.

1  
2 CHAIRPERSON ZHUANG: Do providers maintain  
3 standard operating procedures for outreach to older  
4 adults during code red and blue alerts? If so, what  
5 are they?

6 COMMISSIONER SCOTT-MCKENZIE: Absolutely.  
7 We have many different areas in which we interact  
8 with our older New Yorkers to make sure that they're  
9 in good condition during these types of events. And  
10 as mentioned earlier, we did perform 16,400 wellness  
11 checks during that critical period, where we did have  
12 the extreme cold last year.

13 So, in addition to that, we do have our  
14 case management services, and we have our case  
15 managers who check on their clients. We have our  
16 home-delivered meals program, where you have that  
17 interaction on a daily basis during emergency events.  
18 And this is an area that we are also looking to  
19 expand, because one of the things that we noticed  
20 during the extreme cold was that you have our  
21 homebound older New Yorkers who are served through  
the delivery process. But then some of the sites  
weren't accessible because of the fact that it was so  
cold and that, you know, the snow was piled high and,

1  
2 you know, folks were concerned about ambulating or  
3 being out walking around in that.

4 So we also want to include a provision  
5 where we can look at where we have these types of  
6 issues. And I want to commend you, Chair, at one of  
7 your sites, they also mentioned that the providers  
8 there actually got into their private vehicles and  
9 made sure they went out and checked on the seniors  
10 who were not able to get to the OAC.

11 But we want to have more of a structured  
12 approach from New York City Aging, so that we too can  
13 get to those older adults who maybe cannot access  
14 during cold weather. So in addition to that, we have  
15 the Friendly Visiting Program, our caregiving  
16 program, and I'm sure most of you have seen our  
17 really great caregiver campaign that has rolled out  
18 across the city, as well as Aging Connect. In Aging  
19 Connect, we will also have messaging proactively to  
20 advise older adults of where we have warming centers  
21 or other supports that they can access.

CHAIRPERSON ZHUANG: Thank you.

Also, from experience, I believe you  
worked well.

1  
2 What coordination currently exists  
3 between DFTA and New York City Emergency Management  
4 during extreme weather events?

5 COMMISSIONER SCOTT-MCKENZIE: We are very,  
6 very strong partners, as you know, we did partner not  
7 only with NYCEM, but also with all of the other city  
8 agencies to ensure that older adults have everything  
9 that they need to be able to navigate through any  
10 extreme weather event or any impacts that may be due  
11 to an emergency management situation in New York  
12 City.

13 CHAIRPERSON ZHUANG: Is there any  
14 particular person who will sign on to these types of  
15 events, in, I mean, in DFTA, probably yes, but in the  
16 City Emergency Management, especially for seniors?

17 COMMISSIONER SCOTT-MCKENZIE: Absolutely,  
18 because you would activate a citywide command center  
19 if we did have an event like that. And every one of  
20 our agencies has a liaison who would address  
21 Emergency Management for all New Yorkers, and  
specifically also for older adults.

CHAIRPERSON ZHUANG: What changes has DFTA  
made to protocol following the recent heat waves, the  
recent cold snap, or snowstorms?

1  
2                   COMMISSIONER SCOTT-MCKENZIE: Well, I've  
3 had the opportunity to review our programs, and as I  
4 mentioned, one change is that we do want to have a  
5 more robust approach to making sure that we can get  
6 meals to older adults who attend the OACS, not just  
7 the home-delivered meals program, but also, if there  
8 are any supports that are needed for that program to  
9 do that.

10                   And also, we are proactively preparing  
11 right now for the heating season. So one thing we've  
12 done already is we've activated a pre-season  
13 checklist where we're looking at each one of our  
14 sites, and we've had our provider network report to  
15 us on where they are with preparedness for heat in  
16 the summertime. We have a 96% response rate right  
17 now. And over the next week or so, we'll be focusing  
18 on that 4%, because I suspect that they may need some  
19 additional support, and those will be the focal areas  
20 for us at this time.

21                   CHAIRPERSON ZHUANG: Thank you. In my  
22 district, we had a nonprofit donate 200 meals right  
23 before the storm. Extremely cold. We had close to 250  
24 people show up who wanted a meal, and we didn't have

1  
2 enough. That shows the city has a strong need,  
3 especially before those storms.

4 Do you have any plans for the summer when  
5 it's so hot, but people have to wait outside to get  
6 their meal?

7 COMMISSIONER SCOTT-MCKENZIE: We're  
8 operating cooling centers throughout the city. So,  
9 this hopefully will not impact our older adults in  
10 New York City because we expect them to be inside at  
11 the cooling center. But, certainly, we are always  
12 partnering with the Council in relation to food  
13 insecurity, and we certainly want to make sure that  
14 anyone who needs a meal, who qualifies, 60 or older,  
15 that NYC Aging is responding to that need.

16 CHAIRPERSON ZHUANG: Because the issue I  
17 see is, like say for a food pantry in my district, no  
18 matter how hot or how cold it is, it always has at  
19 least 200 people waiting in line, no matter what food  
20 they give, the food insecurity is definitely the big  
21 issue. If they don't have enough food, no matter how  
cold or how hot the weather is, they always wait  
outside and wait in line.

1  
2 We did the food pantry last year, and  
3 close to 100°, I was outside for three hours with my  
4 volunteers, and still, people waited.

5 The food pantry starts at 11:00, and  
6 people start lining up at 7:00. And if the weather is  
7 extremely hot, I really worry about the majority  
8 being seniors, uh, people at risk.

9 The city (INAUDIBLE), and how do we help?  
10 Are we able to provide food directly inside the  
11 cooling center? Probably, this is something we should  
12 consider together.

13 COMMISSIONER SCOTT-MCKENZIE: Definitely,  
14 we should work on this together. But I will give you  
15 my opinion as an emergency manager, there really is  
16 no reason for us to wait for the hottest period of  
17 the day to distribute meals. It could be done at a  
18 cooler period of the day. So you could potentially  
19 hand out the meals a little earlier than noon. You  
20 know, when we know that it's going to be sweltering,  
21 and you know, folks are standing out there, there  
could be a way to do that. So that would be my  
opinion as an emergency manager. But definitely, we  
welcome the partnership.

1  
2 CHAIRPERSON ZHUANG: I think that's good  
3 advice. We'll talk to the nonprofits, see if they can  
4 actually do that, and it will be helpful. Thank you.

5 Chair Mealy has more questions.

6 COUNCIL MEMBER MEALY: Yes, thank you. I  
7 just have one really-- Oh, and to piggyback on food  
8 insecurity, I think that something must be done to  
9 give more CBOs, more money to make sure that-- I have  
10 in my district, they come at 6:00-7:00 a.m. from  
11 Queens. Because (INAUDIBLE) rescue mission gives  
12 chicken, turkeys, meatloaf, everything, and they have  
13 it down to a science, a different program. So, I am  
14 going to learn their program and see if we can do it  
15 at every center. But they should not be waiting that  
16 long in line.

17 One other thing I've got to ask is, food  
18 insecurity, why do seniors still have to pay to get  
19 lunch, even breakfast, \$2.00 or \$3.00, still have  
20 issues, a senior center just went to an event, and I  
21 know I gave about \$50,000, and they had to pay  
\$125.00 to go on this event--bus ride, for the senior  
center. Something has to change with that.

But my question is, does NYC-- Oh, and I  
was doing an interview, and one of the seniors

1  
2 brought it up. That kicked me under the bus. But I  
3 asked them why they had to pay \$125.00 to go to Ace  
4 in the Hole or something like that. I never heard of  
it, but I want to attend one day.

5 Does NYC Aging track how many older  
6 adults stop attending programs due to mobility  
7 decline, fear of falling, or lack of access to  
8 accessible transportation? If not, what would be the  
barrier to tracking such information? (TIMER)

9 COMMISSIONER SCOTT-MCKENZIE: Well, thank  
10 you again for your questions, Council Member Mealy.

11 We did address the issues of mobility a  
12 little earlier in our testimony and also in our  
13 interaction here. And again, it's not something that  
14 we directly track, but we did share the information  
that we have on that.

15 There's no barrier to following up with  
16 our older adults, the ones that are known to us,  
17 regarding their mobility issues, and certainly, it's  
18 something that we would welcome a partnership with  
you on. So, thank you for bringing that up again.

19 I also want to talk about the issue of  
20 the wait time because, again, I just want to clarify  
21 that folks are not waiting that long for New York

1  
2 City Aging meals. These are food pantries that you  
3 are referring to, which fall outside of our ages. But  
4 again, we welcome a partnership with you. If any of  
5 our older adults are being impacted by this,  
6 certainly it's something that we want to ensure that  
7 they don't have to experience. So we welcome that.

8 And lastly, on the issue of the suggested  
9 donation, and I know we spoke about this privately,  
10 we've spoken about this at the last hearing, and  
11 certainly glad to hear that, you know, it's something  
12 that you hold close to your heart, and you will  
13 continue to work on.

14 On our part, though, we're at the point  
15 where that suggested donation, certainly, no older  
16 adult in the city is required to pay anything for any  
17 of the meals that are offered by NYC Aging. However,  
18 there is a rule for a suggested donation.

19 Now, what we've looked at, obviously, you  
20 know, we've been out in the community, and we're  
21 visiting all of the older adult centers. And what  
we've noticed is perhaps sometimes the placement of  
that sign that speaks to the suggested donation may  
be in a place that's too conspicuous, because we  
don't want any older adult to be discouraged from

1 attending or thinking that others will notice if they  
2 donate or they don't donate. So that's what we're  
3 looking at right now, just to ensure that folks  
4 understand that this is a welcoming environment, that  
5 they're able to get a meal without giving anything.  
6 However, there is a suggested donation, and if  
7 they're willing to give something, they can.

8 COUNCIL MEMBER MEALY: Thank you. Thank  
9 you, Chair.

10 CHAIRPERSON ZHUANG: Thank you.

11 And let's go to mental health issues. How  
12 many older adults were referred to mental health  
13 services through the older adult centers, case  
14 management agencies, or NYC Wellness in the last  
15 fiscal year, compared to the last three fiscal years?

16 ASSOCIATE COMMISSIONER MULLARKEY: So we  
17 generally don't track where older adults are referred  
18 from. And overall, in FY25, the Geriatric Mental  
19 Health program served 6,594 older adults, with 1,419  
20 receiving clinical services.

21 CHAIRPERSON ZHUANG: So there's no way to  
know which seniors-- because I went to a couple of  
senior centers. The provider worked there-- and the  
senior actually told me, they did not know they

1  
2 needed mental health services, and if the service is  
3 on-site, seniors feel more comfortable going to those  
4 services.

5 I also talked to one of my colleagues  
6 about the homeless issue, especially for older  
7 adults. The homeless issue, a lot of us are out on  
8 the streets, and we talk to people who are homeless.  
9 A lot of the time, they have a home. They have a  
10 family. Actually, their family brings the meal to  
11 where they choose to be homeless. And a lot of the  
12 time, those people are affected by mental health  
13 issues. And then we try to help get those people back  
14 home. They don't want to. But the mental health  
15 issue, if not addressed in their senior center, or  
16 where they often may go, they will never choose the  
17 service. Because no one wants to tell people, "I have  
18 a mental health issue." If I need help with mental  
19 health issues, I probably don't want to tell people,  
20 either. They feel embarrassed.

21 If we have those mental health services  
in the centers or wherever the seniors go to hang  
out, it will probably serve them better.

One of the senior center mental service  
program people told me, "We go where they go. We

1  
2 serve them where they are, not so they have to come  
3 to find us." That will be more effective. I would  
4 like to see how many senior centers have this type of  
5 service.

6 COMMISSIONER SCOTT-MCKENZIE: And we can  
7 give you the numbers on that because we do have  
8 licensed clinicians that are placed in our centers  
9 just for that reason. We don't want any older adult  
10 to be stigmatized or to feel as if they have--  
11 they're embarrassed to seek services.

12 CHAIRPERSON ZHUANG: Yeah.

13 COMMISSIONER SCOTT-MCKENZIE: So we come  
14 to where they are, we meet them where they are, to be  
15 sure that we can offer the services to our older  
16 adults.

17 CHAIRPERSON ZHUANG: Yeah. We just like to  
18 know what percentage of senior centers offer this  
19 type of service.

20 COMMISSIONER SCOTT-MCKENZIE: Absolutely,  
21 and we will provide that for you.

CHAIRPERSON ZHUANG: Okay, thank you.

How is NYC Aging integrating social  
isolation screening into case management assessment?

1  
2 (INAUDIBLE) go back to senior centers again, friendly  
3 visits or wellness checks?

4 ASSOCIATE COMMISSIONER MULLARKEY: So as  
5 part of the case management assessment, they assess  
6 for loneliness and social isolation. And if a client  
7 is lonely, socially isolated, one of the resources  
8 they can refer to is our Friendly Visiting program.  
9 Our Friendly Visiting program also assesses for  
10 loneliness and social isolation, and when a client is  
11 matched with a volunteer, they repeat that assessment  
12 again six months later to see where there's  
13 improvement.

14 CHAIRPERSON ZHUANG: And how many older  
15 adults are comfortable using a hotline or digital  
16 platforms? How is NYC Aging investing in literacy  
17 access, mental health services in adult senior  
18 centers, NORCS, or home-based programs?

19 COMMISSIONER SCOTT-MCKENZIE: So, a few  
20 things—I just want to go back one moment and just  
21 mention again that we are always seeking additional  
volunteers for our Friendly Visiting Program. And as  
I noted before, folks who would like to assist in  
this process can call us at Aging Connect 212-Aging  
NYC or 212-244-6469.

1  
2 We have shortages in areas, particularly  
3 in the South Bronx, where we could use additional  
4 assistance. So I want to talk about... (CROSS-TALK)

5 COUNCIL MEMBER MEALY: Say that number  
6 again?

7 COMMISSIONER SCOTT-MCKENZIE: 212-Aging-  
8 NYC or 212-244-6469.

9 CHAIRPERSON ZHUANG: How many phone calls  
10 do you guys receive?

11 COMMISSIONER SCOTT-MCKENZIE: Well, we  
12 received approximately 800 or so calls to our Aging  
13 Connect program every day, excuse me, over the month.

14 So we do have folks that are calling in  
15 to seek additional supports, and we provide those  
16 supports to the folks who have called in for  
17 assistance.

18 There's always more work to be done on  
19 really getting more data as to how many of our older  
20 New Yorkers actually require these services. So it is  
21 a focal area for us, and we would like to present  
more data in the future on that as well.

CHAIRPERSON ZHUANG: How many people work  
to receive those 800 phone calls every month?

1  
2 COMMISSIONER SCOTT-MCKENZIE: Excuse me, I  
3 have to go back-- it's 800 a week... (CROSS-TALK)

4 CHAIRPERSON ZHUANG: Eight hundred a week

5 COMMISSIONER SCOTT-MCKENZIE: for those  
6 calls. Uh...

7 CHAIRPERSON ZHUANG: How many people work  
8 there do we have...

9 COMMISSIONER SCOTT-MCKENZIE: We have  
10 seven... Seven fulltime workers are there right now.  
11 And we are looking at those seven fulltime, because  
12 we actually want to expand the hours for Aging  
13 Connect. So that is something that we will bring you  
14 more information on as well. Because we really feel  
15 as if we would like to have more service hours  
16 available--live persons, as opposed to providing an  
17 answer service, which we do have later on, along with  
18 messaging after hours and on weekends.

19 CHAIRPERSON ZHUANG: So if there's a  
20 person who needs language support, are they still  
21 able to call this phone number?

COMMISSIONER SCOTT-MCKENZIE: They can  
call that number 24/7. Our preference would be to  
have live persons as much as possible. So that's  
where we're putting the emphasis at this point. But

1  
2 they can call 24/7. They will get information on how  
3 they can move forward with whatever needs they have.

4 CHAIRPERSON ZHUANG: Okay. Thank you. And,  
5 for language access, can they be in any language?

6 COMMISSIONER SCOTT-MCKENZIE: Well, there  
7 are many languages that are known to us, and we do  
8 have a language bank as well. So far, we haven't  
9 identified any languages that we haven't been able to  
10 meet. So I would say it's multilingual at this point.  
11 And if there's a need to add additional languages,  
12 then we can do that as well.

13 CHAIRPERSON ZHUANG: Thank you.

14 And how does NYC Aging evaluate whether  
15 Friendly Visits, home-delivered meals, and case  
16 management are efficiently reducing isolation rather  
17 than simply providing a service touchpoint?

18 ASSOCIATE COMMISSIONER MULLARKEY: As I  
19 mentioned, there's an assessment that the case  
20 management agency does to assess for loneliness and  
21 isolation, and then based on the needs of the client,  
they could be referred to our Friendly Visiting  
Program. Again, there's another assessment that's  
done there. And they'll reassess after six months of

1  
2 a continuous match with a volunteer to see where  
3 there is improvement.

4 CHAIRPERSON ZHUANG: Are adult centers  
5 required to conduct wellness checks? And then what do  
6 they do during holidays?

7 COMMISSIONER SCOTT-MCKENZIE: Yes, they  
8 do. They are required to conduct wellness checks.  
9 During holidays, they do make sure that they have  
10 proactively assessed any of our older adults who may  
11 have needs, and those needs are referred back to New  
12 York City Aging, and we make sure that they're met.

13 CHAIRPERSON ZHUANG: What gaps have been  
14 identified by NYC Aging providers regarding isolation  
15 during winter months, and how is NYC Aging addressing  
16 them?

17 COMMISSIONER SCOTT-MCKENZIE: Well, as we  
18 mentioned earlier, there are some gaps. And one of  
19 the gaps that we are trying to work on now has to do  
20 with the delivery of the meals, as I mentioned during  
21 inclement weather, and some of the barriers that were  
faced across the entire city, but also a more  
pronounced issue in our older New Yorkers.

So we're working to enhance that network  
to be sure that we're able to get to our older New

1  
2 Yorkers when there is an issue, and also again,  
3 proactively preparing them when we have advanced  
4 notice of an event so that they are prepared to  
5 continue their daily living.

6 CHAIRPERSON ZHUANG: Of the more than  
7 200,000 older adults served by NYC Aging and its  
8 providers in FY 2024, how many received no ongoing  
9 relationship-based services, such as Friendly Visit  
10 support groups, and instead have only transactional  
11 or one-time intentions-- one-time interaction?

12 ASSOCIATE COMMISSIONER MULLARKEY: So I  
13 can comment on Friendly Visiting. Approximately 1,200  
14 unduplicated clients were served as part of that  
15 program, and these are clients who are also part of  
16 the case management program. Some of your other  
17 questions, I feel like we have to get back to.

18 CHAIRPERSON ZHUANG: So, how many received  
19 no ongoing relationship-based services, and they  
20 instead have only one-time interaction? Some people  
21 just have one-time interactions. Sometimes people  
22 have ongoing, every single day, someone goes there to  
23 deliver a meal.

24 COMMISSIONER SCOTT-MCKENZIE: Well, we  
25 aren't tracking how many come just for one meal. But

1  
2 I would say we would rather focus on having that one  
3 meal when they need it. So, ensuring that we have  
4 access, open access to anyone who qualifies for a  
5 meal, I think, for New York City Aging is more of a  
6 focal point. And then our older adults have the right  
7 to choose. You know, perhaps, they may come in for  
8 one meal, and they may decide that they want to go to  
9 another site, or they may decide that they would  
prefer to have their meals at home. So it's difficult  
to track those who are moving because of preference.

10 CHAIRPERSON ZHUANG: Do we have a  
11 percentage number, like what is the percentage of  
12 people who have ongoing service, and what's the  
percentage of people who only have one-time service?

13 COMMISSIONER SCOTT-MCKENZIE: As my  
14 associate mentioned, we will have to try to dig into  
15 the numbers and bring them back, if that's available.

16 CHAIRPERSON ZHUANG: Okay. Let's go to a  
17 Council Member Lee's bill. Does NYC Aging support  
18 this legislation-- uh, Council Member Lee's  
19 legislation, requiring the Department of Aging to  
maintain non-digital access to forms and services?

20 COMMISSIONER SCOTT-MCKENZIE: As mentioned  
21 earlier, yes, we do support the intent of this

1  
2 introduction. Any bill that would make it easier for  
3 our older adults to access services, we will actively  
4 support.

5 CHAIRPERSON ZHUANG: Can you describe the  
6 current extent to which NYC Aging services and forms  
7 are only accessible online? Do you have anything only  
8 accessible online, not on paper?

9 COMMISSIONER SCOTT-MCKENZIE: Not to my  
10 knowledge. Again, we will perform another assessment,  
11 but we typically try to make forms available in as  
12 many modalities as possible. And as you know, we have  
13 a very robust network of navigators and folks who  
14 will assist older New Yorkers to be able to prepare  
15 and complete forms. So oftentimes that's also on  
16 paper. So, I would say at this point that we're  
17 making every effort to make sure that, whether it's  
18 online or in paper, our older adults are able to  
19 access services.

20 CHAIRPERSON ZHUANG: What outreach  
21 strategy does NYC Aging and its partners use to  
22 ensure older adults know they can access services  
23 without using the internet?

24 COMMISSIONER SCOTT-MCKENZIE: While at our  
25 OACS, we do emphasize the fact that our older adults

1  
2 can be assisted without internet service to be able  
3 to complete and access any forms or services. So it  
4 is something that we actively, as I mentioned  
5 earlier, support, and we'll continue to do so.

6 CHAIRPERSON ZHUANG: Thank you,  
7 Commissioner.

8 Do you have more questions? Okay, I've  
9 asked all the questions I wanted to ask. Thank you so  
10 much.

11 COMMISSIONER SCOTT-MCKENZIE: Thank you.

12 COUNCIL MEMBER MEALY: Looking forward to  
13 playing Spades.

14 (LAUGHTER)

15 (PAUSE)

16 CHAIRPERSON ZHUANG: I now open the  
17 hearing for public testimony. I remind members of the  
18 public that this is a formal government proceeding  
19 and that decorum shall be observed at all times. As  
20 such, members of the public shall remain silent at  
21 all times.

The witness table is reserved for people  
who wish to testify. No video recording or  
photography is allowed from the witness table.

1  
2 Further, members of the public may not  
3 present audio or video recordings as testimony, but  
4 may submit transcripts of such recordings to the  
5 Sergeant at Arms for inclusion in the hearing record.

6 If you wish to speak at today's hearing,  
7 please fill out an appearance card with the Sergeant  
8 at Arms and wait to be recognized. When recognized,  
9 you will have two minutes to speak on today's hearing  
10 topic: *Oversight - Addressing Social Isolation Among  
11 Older New Yorkers.*

12 If you have a written statement or  
13 additional testimony you wish to submit for the  
14 record, please provide a copy of that testimony to  
15 the Sergeant at Arms. You may also email written  
16 testimony to [Testimony@council.nyc.gov](mailto:Testimony@council.nyc.gov) within 72  
17 hours after the close of this hearing. Audio and  
18 video recordings will not be accepted.

19 Our first panel will be Gayle Horwitz,  
20 Fritz Valme, Teresa Lin, and Mark Meridy.

21 GAYLE HORWITZ: Thank you for the  
22 opportunity to testify today. My name is Gayle  
23 Horowitz, and I'm the CEO of JASA.

24 Addressing social isolation requires  
25 strengthening the infrastructure of connection across

1  
2 the entire aging services system. OACs, NORC  
3 programs, and affordable senior housing are among the  
4 City's most effective tools to combat isolation. They  
5 provide routine, accessible opportunities for  
6 connection, engagement, and support, and they work  
7 because they are place-based, consistent, and  
8 trusted, but they require greater flexibility and  
9 investment to serve a diverse and growing older adult  
10 population.

11           Affordable senior housing in particular  
12 plays a dual role, addressing the housing crisis  
13 while combating isolation.

14           At our sites, we foster vibrant,  
15 connected communities that support successful aging  
16 in place. Through our residential services programs,  
17 1,089 residents received benefits last year--  
18 benefits assistance, 577 received home visits, and  
19 533 people received housing stability assistance.

20           Initiatives like New York City Aging's  
21 Pop-up Cafe show that combining meals, programming,  
and social engagement within senior housing can  
significantly reduce isolation, especially for those  
with mobility challenges. And investing in affordable

1  
2 housing is cost effective, reducing the need for  
3 premature and costly nursing home placement. (TIMER)

4 I just have a little bit more.

5 At the same time, many of the most  
6 isolated older adults never walk through the doors of  
7 an OAC or NORCS, nor live in affordable housing. To  
8 reach them, JASA launched JASACHat, pairing  
9 volunteers with clients for weekly calls—98% of  
10 participants reported improved well-being. We've also  
11 launched JASACakes, because too many older adults  
12 spend their birthdays alone. Every home-delivered  
13 client, nearly 2,700 people, will receive a birthday  
14 celebration this year. Outreach must be funded as  
15 essential infrastructure, not an add-on.

16 And my last topic—Social isolation is  
17 closely linked to depression, anxiety, and cognitive  
18 decline. At JASA, meaningful engagement is often the  
19 first step toward improved mental health. Our  
20 geriatric mental health clinic provided 5,000 hours  
21 of services last year, but we could reach so many  
more. Programs that embed mental health services  
within OACs and community settings are particularly  
effective because they reduce stigma and meet people  
where they are.

1  
2 The City should expand investment in  
3 these integrated models. Social isolation is  
4 preventable, but only with intentional investment and  
5 outreach, flexible community-based models, and  
6 integrated mental health services. Thank you.

7 COUNCIL MEMBER MEALY: Chair, can I...

8 GAYLE HORWITZ: Yes, I have a full, really  
9 detailed...

10 MARK MERIDY: Chairperson Zhuang and  
11 Members of the Committee: Thank you for the  
12 opportunity to speak to you today. My name is Mark  
13 Meridy, and I'm the Executive Director of DOROT in  
14 Manhattan.

15 DOROT was founded 50 years ago with the  
16 mission of alleviating social isolation and  
17 loneliness among older adults. We're unique among  
18 nonprofits in that building meaningful social  
19 connections, thereby easing social isolation and  
20 loneliness, is not simply part of what we do—it's  
21 built into everything we do. Every program we offer  
is designed to help older adults build social  
connections with others and to feel a sense of  
purpose and belonging.

1  
2 The challenge is that social connection  
3 is an underappreciated factor in one's overall health  
4 and well-being, and that's despite the fact that  
5 feeling socially connected, regardless of one's age,  
6 helps us thrive even when faced with other physical  
and emotional challenges.

7 What we've learned at DOROT is that there  
8 are many effective ways to build meaningful social  
9 connections. This includes programming that is in  
10 person or conducted virtually or over the telephone.  
11 Regardless of the modality, the unifying factor in  
12 all of our programming is that we are highly  
13 intentional and focused on building meaningful  
connections, and we know that we are making a  
profound difference.

14 However, there is simply not enough  
15 attention paid at the city, state, or federal levels  
16 to the importance of an individual's social health  
and well-being.

17 Therefore, it is imperative that the City  
18 create an effective strategy to build and support a  
19 stronger social infrastructure. The key to easing  
20 social isolation and loneliness is putting meaningful  
connections at the heart of as many programs as

1  
2 possible and providing the resources and flexibility  
3 to reach people in a multitude of ways.

4 I am grateful that the Committee on Aging  
5 is focused on easing social isolation among New  
6 York's older adults. We at DOROT are happy to assist  
7 in any way that we can. Thank you very much for the  
8 opportunity.

9 TERESA LIN: Chair Zhuang and Members of  
10 the Committee on Aging, thank you for the opportunity  
11 to testify today. My name is Teresa Lin, and I am the  
12 Vice President of Cultural Market Development at VNS  
13 Health.

14 We applaud the Council for promoting  
15 legislation that addresses social isolation among  
16 older New Yorkers, and for its continued commitment  
17 to strengthening the supports that allow older adults  
18 to remain connected to their communities.

19 For more than 130 years, VNS Health has  
20 supported New Yorkers in living and aging at home.  
21 Today, we serve more than 117,000 patients and  
individuals annually across New York. The average age  
of those we serve is 72, and in 2024 alone, we cared  
for more than 1,150 New Yorkers over the age of 100.

1  
2 Our mission is to ensure older adults can age safely,  
3 independently, and with dignity.

4 For many older adults, we're the first  
5 place they turn for help and often the only place  
6 they know to turn. We help them navigate complex  
7 systems, assess benefits, and stay connected to care  
8 and community. We do this through several key  
9 programs. In Brooklyn, our personal care services  
10 provide hands-on support that allows older adults to  
11 remain safely at home. We're proud to serve as the  
12 City's partner delivering the program in Brooklyn.  
13 Through the naturally occurring retirement community  
14 nursing program (NORCS), we bring clinical care  
15 directly into residential buildings and  
16 neighborhoods. We are grateful to the Council for its  
17 continued support of this program, which allows our  
18 nurses to help older adults manage chronic conditions  
19 and age in place.

20 Our community centers are often where  
21 trust begins. One woman who came to our Sunset  
Community Center immigrated from China and works as a  
home health aide. She came to the center looking for  
help applying for SNAP and understanding how to  
complete the application. (TIMER)

1  
2 Can I continue? Okay, thank you.

3 Because our staff spoke her language,  
4 they were able to walk through the process step by  
5 step and help her understand important documents. She  
6 ensured that this made her feel respected and  
7 supported, and this ultimately inspired her to come  
8 back and volunteer to help others.

9 And through our older adult mental health  
10 initiative, we provide in-home and community-based  
11 mental health services for older adults who are  
12 homebound and would otherwise go without care.

13 We're grateful for the Council's support  
14 in helping expand access to these critical services.  
15 Together, these programs ensure that aging in place  
16 does not mean aging alone.

17 Thank you for your continued partnership  
18 and commitment to older New Yorkers.

19 FRITZ VALME: Good morning, Council  
20 Members. My name is Fritz Valme, and I am here to  
21 represent The Sharing Network.

The Sharing Network was founded during  
the pandemic, and we realized that there were a lot  
of seniors in isolation, so we started providing  
meals and services to those seniors. And we also

1 realized that a lot of those seniors were shut in.  
2 And we developed programming to assist those seniors.  
3 Part of those programming services is in the form of  
4 podcasting, where we put on shows for seniors, and  
5 it's all auditory, so they don't necessarily have to  
6 have a computer. All they need is a telephone,  
7 whether it is wired or mobile. The programs are  
8 approximately an hour each, where we do everything  
9 from church services, bible study, to programming  
10 when it comes to media-- or just speaking, where  
11 older adults can get together and just have  
12 conversations.

13 One of the programs that we offer  
14 is--(TIMER) we make programs for seniors about  
15 African American history, about African American  
16 politics, where we discuss the politics of the day,  
17 where we discuss our history and heritage, and we  
18 discuss the political climate and how we can get more  
19 involved with what's going on. We have found that it  
20 is extremely helpful in helping people come out of  
21 isolation. A lot of people are not ambulatory enough  
to come out of their homes, but they are able to pick  
up the telephone and have a conversation and build  
community through that.

1  
2 We are very thankful to the Council for  
3 its assistance, and we are hoping that we can branch  
4 out to support more people in the Brooklyn community,  
and hopefully Queens and elsewhere.

5 CHAIRPERSON ZHUANG: Thank you.

6 Thank you. I want to thank everyone who  
7 has come out to testify. I do have some questions.  
Don't go yet.

8 I want to thank JASA (INAUDIBLE). I  
9 personally saw you in my office. You guys help the  
10 seniors in my district--one senior. Almost every  
11 single senior who comes through my door asks for  
12 senior housing. Recently, one of our constituents got  
senior housing through JASA.

13 For building more senior housing, we see  
14 in New York City that everyone wants to build other  
15 types of housing, but very few want to build senior  
housing. What is the biggest barrier there?

16 GAYLE HORWITZ: One of the barriers to  
17 additional senior housing is obviously that we need,  
18 "Yes, and...", we need housing for everybody. So, the  
19 funding streams to build senior housing are as  
20 challenging as the funding streams to build  
21 multi-generational housing.

1  
2 One of the things that has been  
3 successful over the last couple of years is the  
4 Senior Affordable Rental Apartments (SARA) funding.  
5 And the SARA funding has allowed us to take formerly  
6 homeless seniors and place them in senior housing.  
7 And we have partnered with developers to be able to  
8 build that housing.

9 We have found that, because of those  
10 services in the building, it's not just the formerly  
11 homeless seniors who need help; everybody in the  
12 building needs help. And just by our presence, being  
13 there, has really helped to enable more people to  
14 have services.

15 The other issue that is going to be a  
16 challenge, as I understand it, is Section 8 funding.  
17 A lot of our projects are Section 8, and funding is  
18 drying up. So that is going to continue to make it a  
19 challenging problem to build more senior housing.

20 CHAIRPERSON ZHUANG: I know the Senior  
21 SARA program. How long is the wait for the SARA  
program?

22 GAYLE HORWITZ: So the SARA program, I  
mean, when we do our lotteries, other buildings, or  
some of these SARA buildings, we could have waiting

1  
2 lists of 25,000 people that sign up; the waiting list  
3 is incredibly long. So, it is a huge challenge. And I  
4 think that homeless seniors are not well recognized  
5 necessarily, and there are a lot more in the city  
6 than anybody realizes—limited, fixed incomes, mental  
7 health issues, have led to a lot of people ending up  
8 homeless.

9 CHAIRPERSON ZHUANG: Also, for the SARA  
10 program, if you say just start today, apply to the  
11 SARA program, how long does it take you to get  
12 approved?

13 GAYLE HORWITZ: Well, actually, we are  
14 currently right now in several projects where we will  
15 be the SARA provider. And I started at JASA last  
16 July, so I've only been around about eight months,  
17 and there are several applications that went in for  
18 projects eight months ago. We're still waiting to  
19 hear.

20 CHAIRPERSON ZHUANG: Still waiting? Well,  
21 it's an average wait time.

22 GAYLE HORWITZ: You know what? I'd have to  
23 get back to you on that. I'm not 100% sure. But I can  
24 just anecdotally tell you.

25 CHAIRPERSON ZHUANG: Okay, thank you.

1  
2 And also, I appreciate everyone  
3 providing--I think your programs can help not only  
4 seniors, but everyone. I want to learn African  
5 American history and politics, also.

6 FRITZ VALME: We'd love to invite you to  
7 one of our programs.

8 CHAIRPERSON ZHUANG: Thank you. Also, I  
9 know VNS has been doing tremendous work in my  
10 district. And I want to thank everyone for coming to  
11 testify. Thank you.

12 CHAIRPERSON ZHUANG: Thank you.

13 PANEL: Thank you.

14 COUNCIL MEMBER MEALY: Can I ask a  
15 question?

16 CHAIRPERSON ZHUANG: Oh, yes, yes, sorry,  
17 Chair.

18 COUNCIL MEMBER MEALY: Thank you,  
19 everyone. Is it BMS?

20 CHAIRPERSON ZHUANG: VNS

21 TERESA LIN: VNS. It used to be called the  
22 Visiting Nurse Service of New York as VNS Health,  
23 yes.

24 COUNCIL MEMBER MEALY: Okay, thank you,  
25 Health, thank you.

1  
2 And Caring is Sharing? What's your  
3 program? I couldn't really hear you, sir.

4 FRITZ VALME: Oh, it's The Sharing  
5 Network, I'm sorry (INAUDIBLE)... (CROSS-TALK)

6 COUNCIL MEMBER MEALY: The Sharing  
7 Network? I would love to start something with current  
8 events. I put funding into just having someone read  
9 to our seniors—the newspapers, to keep them abreast  
10 of what's going on all over the world. So, please  
11 invite me, too. I would love to come when you go.

12 FRITZ VALME: Oh, absolutely.

13 COUNCIL MEMBER MEALY: And, thank you for  
14 all that you do. Thank you.

15 PANEL: Thank you.

16 COUNCIL MEMBER MEALY: And, JASA, could  
17 you explain a little more about your network? Because  
18 I love it. We should do it with every senior center.  
19 Do you have a telephone conversation...

20 GAYLE HORWITZ: Oh, JASACHat, you mean?

21 COUNCIL MEMBER MEALY: Say it again?

GAYLE HORWITZ: It's called JASACHat. So  
we actually take volunteers, and we pair them with  
seniors across our network. And we serve about 40,000  
seniors. There are not 40,000 people in JASACHat;

1  
2 there are about 600. And we have been doing it for  
3 six years. And we pair an individual with a senior,  
4 and they have weekly phone calls. And it changes both  
lives, not just the seniors'.

5 COUNCIL MEMBER MEALY: Okay, that's good.  
6 And, during inclement weather, they could call each  
7 other to make sure... (INAUDIBLE)

8 GAYLE HORWITZ: No matter what, it  
happens.

9 COUNCIL MEMBER MEALY: So, thank you. I am  
10 going to expand a little bit more on that.

11 GAYLE HORWITZ: Thank you.

12 COUNCIL MEMBER MEALY: Thank you.

13 CHAIRPERSON ZHUANG: Thank you.

14 COUNCIL MEMBER MEALY: Thank you, Chair.

15 CHAIRPERSON ZHUANG: The next panel is  
16 Erin Reddan, Geordana Weber, Bill Gross, and Emma  
Lentz-Bessire.

17 ERIN REDDAN: Good afternoon, my name is  
18 Erin Reddan, and I am the Regional Leader at one of  
19 our Neighborhood Care sites. I would like to thank  
20 Chair Zhuang and all of the Members of the Committee  
21 on Aging for holding this hearing.

1  
2 EmblemHealth is a nonprofit health plan  
3 serving more than two million New Yorkers. We operate  
4 15 neighborhood care centers where we provide free  
5 support, connection to resources, and programming to  
6 all community members.

7 EmblemHealth supports this legislation  
8 under consideration today and has implemented several  
9 programs to improve access to resources and support  
10 for older adults.

11 We recently launched a weather resilience  
12 program that uses New York City's heat vulnerability  
13 index and our clinical data to provide personalized  
14 messages to at-risk members during heat waves.

15 Interactions are triaged and escalated to our care  
16 management team. This program is actually expanding  
17 to address poor air quality, extreme cold, and flu  
18 vaccine alerts as well.

19 At Neighborhood Care, over 23% of the  
20 individuals we serve are older adults, 45% of whom  
21 are repeat visitors to our sites. We know the  
22 importance of building trust and fostering safe  
23 social spaces.

24 We recently began hosting lunch socials  
25 that combine health, education, activities, and

1  
2 connection. These lunches complement our other  
3 popular classes, such as chair yoga, art therapy, and  
4 cell phone literacy. The relationships we build are  
5 really unique, and we see folks coming in for help,  
6 going through their mail, looking at bills, things  
7 like that, finding medical appointments, or even just  
8 stopping by to say hello. One class participant said  
9 recently, "I had been heading down a path of  
isolation, but now I'm beginning to feel like my old  
self; I have a new lease on life."

10 And really, at our neighborhood care  
11 sites, we have implemented grant programs tailored to  
12 the needs of older adults at four of our sites,  
13 thanks to Deputy Speaker Williams and Council Members  
14 Hudson, Salaam, and Feliz. We also recently hosted a  
15 webinar on *Rethinking Aging*, bringing expert guidance  
directly to the community.

16 We know firsthand how tailored  
17 programming can create opportunities for older adults  
18 to thrive and live more independently. And we really  
19 look forward to continuing to work with the City  
20 Council on improving the health and well-being of New  
21 Yorkers. So thank you for having us here today.

1  
2 GEORDANA WEBER: Good morning. I am  
3 Geordana Weber, Chief Program Officer at Service  
4 Program for Older People, or SPOP. Thank you, Chair  
5 Zhuang, for holding this oversight hearing on the  
6 social isolation of older New Yorkers. I am grateful  
7 for this opportunity to address the Committee on  
8 Aging today.

9 SPOP plays a unique role in supporting  
10 the health, emotional well-being, and independence of  
11 older adults, and we've done so for more than 45  
12 years. We are the only agency in the city that is  
13 exclusively dedicated to community-based mental  
14 health care for older adults. We provide outpatient  
15 treatment to over 1,000 people each year through  
16 individual and group therapy, assessments, medication  
17 management, and psychiatric rehabilitation.

18 Older adults with mental health  
19 conditions are among the most susceptible to  
20 isolative living and isolative dying. Social health  
21 and human connection are essential in order for older  
adults to recover from illnesses, cope with systemic  
inequities, and restore mental health. Social contact  
is critical for stress management, and without it,  
older adults suffer.

1  
2 Social isolation can almost inevitably  
3 occur as run-off from mental health disorders,  
4 including anxiety and depressive disorders,  
5 post-trauma response, or chronic serious mental  
6 illness like bipolar disorder and schizoaffective  
7 disorder. For those older adults who have cognitive  
8 decline and memory loss, isolation can be especially  
9 dire.

10 One way to address the rampant social  
11 isolation that affects nearly half a million older  
12 New Yorkers is to foster a strong, unwavering  
13 partnership between NYC Aging Services and the NYC  
14 Department of Health and Mental Hygiene to provide  
15 social healthcare. Drawing on the resources of these  
16 two agencies, we can identify those most at risk of  
17 isolation, connect them to medical and mental  
18 healthcare services, and encourage participation in  
19 congregate activities at Older Adult Centers. DFTA  
20 and DOHMH are well-suited to address the gaps in  
21 care, and they can lead the City's response with  
22 data, empathy, and innovation. (TIMER)

I'll wrap up.

Social healthcare brings together mental  
healthcare and community care, and leads to

1  
2 documented improvements in health and longevity. When  
3 you add in support for housing, meals, and  
4 transportation, you create a truly livable city for  
5 older adults.

6 We urge the New York City Council Aging  
7 Committee to join forces with the Mental Health and  
8 Substance Use Committee through joint committee  
9 hearings and joint advocacy for robust funding that  
10 supports geriatric mental health programming.

11 Thank you for your work on behalf of all  
12 older New Yorkers and for this opportunity to  
13 testify.

14 BILL GROSS: Good afternoon. My name is  
15 Bill Gross. I am the Chief Services Officer at SAGE,  
16 which is the nation's largest and oldest organization  
17 dedicated to improving the lives of LGBTQ+ older  
18 adults. We are happy to be here, and a special thank  
19 you to Chair Zhuang and Council Member Hudson for  
20 their questions about the LGBTQ+ elder community  
21 earlier.

22 Founded in New York in 1978, SAGE has  
23 been serving LGBTQ+ elders and older New Yorkers  
24 living with HIV for almost five decades now,  
25 providing comprehensive social services and

1  
2 community-building programs through our network of  
3 LGBTQ+ welcoming older adult centers across New York  
4 City, called SAGE centers—which I think, Chair  
5 Zhuang, you've referenced one of them earlier.

6 For LGBTQ+ elders and older adults living  
7 with HIV, due to their lifetimes of stigma and  
8 discrimination, these communities are often  
9 disconnected from services and often severely  
10 isolated as well. Roughly 60% of LGBTQ+ older adults  
11 report feeling a lack of companionship, with  
12 transgender older adults reporting even higher  
13 levels.

14 In a recent AARP survey of LGBTQ+ older  
15 adults, nearly four in five respondents were at least  
16 “somewhat concerned” about having social support as  
17 they age. Additionally, LGBTQ+ elders and people  
18 living with HIV have fewer familial supports to  
19 support them in the general aging process. They are  
20 less likely to have spouses, children, or other  
21 relatives to depend on and are more likely to live  
alone, which can impact caregiving.

This is crazy—nearly a quarter of LGBTQ+  
older adults report they have no one to call in case

1  
2 of an emergency, and I can testify to that  
3 anecdotally at SAGE.

4 City Council's steadfast support has  
5 helped SAGE to mitigate these challenges. And I  
6 really appreciate the opportunity to testify today.

7 EMMA LENTZ-BESSIRE: Hello, and thank you  
8 for the opportunity to testify today on the topic of  
9 *Social Isolation Among Older Adults*, and for bringing  
10 this topic to the City Council.

11 My name is Emma Lentz-Bessire, and I'm  
12 here testifying on behalf of City Meals on Wheels. We  
13 are an emergency food provider working to end elder  
14 hunger across all five boroughs through the funding  
15 of home-delivered meals on weekends, emergency food  
16 response, and supplemental food programs to the  
17 city's hungriest older adults.

18 Social connection is of particular  
19 importance to City Meals due to the heightened rates  
20 of isolation among homebound older adults. Over a  
21 quarter of older New Yorkers live alone, according to  
the Center for Urban Future, and nearly 20% are  
living in poverty. Furthermore, 58% of home-delivered  
meal recipients reported living alone in FY25, and  
City Meals' own research found that 38% of

1  
2 participants reported loneliness as a problem for  
3 them, while 25% reported not knowing about the  
4 services available.

5           So over the years, City Meals has  
6 expanded our work to include social connection  
7 programs as well as bringing social elements into our  
8 food programming. However, there's more to be done.  
9 Investment in existing services and expansion of  
10 others is vital in addressing this issue. The Older  
11 Adults Mental Health Initiative, previously called  
12 the Geriatric Mental Health Initiative, should be  
13 fully funded at \$3.45 million in FY27 to  
14 de-stigmatize services and provide immediate  
15 interventions for older adults who are in need of  
16 mental health services.

17           Additionally, the City must invest \$10  
18 million in naturally occurring retirement communities  
19 or NORCS— we were glad to hear them mentioned  
20 earlier today in the hearing—to bring them to  
21 neighborhoods without one, so that more older adults  
are able to access the on-site nursing, health, and  
social services, and civic engagement opportunities,  
which can all prevent social isolation.

1  
2           There must also be opportunities for  
3 those who are unable to access programs outside of  
4 their homes or online. City Meals' 2024 research on  
5 older adult hunger found that a quarter of  
6 respondents did not have internet, and even among  
7 those who did, 20% preferred to go online as little  
8 as possible. As such, we support Intro 1630 to ensure  
9 that information on services is available in  
10 non-digital formats, such as by phone or on paper.

(TIMER)

10           As an emergency responder as well, we're  
11 supportive of any program that supports older adults  
12 during emergencies and increased funding to match  
13 that need. Our emergency programs are proactive and  
14 reactive. We pre-supply homebound older adults with  
15 meals before winter and summer begin, and also  
16 directly respond during emergencies, including  
17 weather-related and other emergencies.

16           We thank the Council for the opportunity  
17 to testify today and for their efforts to support  
18 older adults through this hearing. So, thank you,  
19 Council Member Zhuang. We urge you to adequately fund  
20 the programs that older New Yorkers so desperately  
21 need.

1  
2 CHAIRPERSON ZHUANG: We need to ask the  
3 Mayor to fund that.

4 We have some questions here. How do  
5 Medicaid work requirements (INAUDIBLE) demand  
6 services?

7 ERIN REDDAN: I'm sorry, for Medicaid  
8 members?

9 CHAIRPERSON ZHUANG: Yes, for Medicaid,  
10 yes.

11 ERIN REDDAN: So the nice thing about  
12 Neighborhood Care is that anyone can come in,  
13 whatever health insurance you have. But we're also  
14 uniquely aligned in that we have social workers and  
15 navigators who help navigate the whole host of things  
16 that go awry for any New Yorker. So whether it's  
17 housing, whether it's food, we have a lot of food  
18 programming, whether it's food trucks, farmers  
19 markets, things like that. So, Medicaid in  
20 particular, we're kind of uniquely positioned to help  
21 with that, in that we have obviously the actual  
health insurance program through EmblemHealth, and  
then we also have a whole clinical team that can kind  
of resolve any issues or help them get healthcare.

1  
2 CHAIRPERSON ZHUANG: So it doesn't matter  
3 what type of insurance...

4 ERIN REDDAN: No, anyone can come into  
5 Neighborhood Care, yes. We can obviously help members  
6 a little more, especially when it comes to finding  
7 providers, resolving claims issues, or benefits  
8 questions, but we can help any New Yorker who comes  
9 into one of our 15 sites.

10 CHAIRPERSON ZHUANG: And I have questions  
11 for SAGE. From the numbers we see, there's something  
12 special, I think, higher demand and the needs for  
13 LGBTQ seniors. How many Senior Centers actually serve  
14 the LGBTQ community in New York City? Is that  
15 (INAUDIBLE)

16 BILL GROSS: Yeah, it's the four senior  
17 centers that SAGE operates, which are in Harlem, in  
18 the Bronx, in Brooklyn, and in Chelsea; those are our  
19 four senior centers that are specialized for the  
20 LGBTQ+ aging community.

21 CHAIRPERSON ZHUANG: How much time does  
each senior spend traveling to your senior centers?

BILL GROSS: Well, to what you anecdotally  
mentioned, yes, earlier in the day, I mean, we're  
lucky in that we have senior centers in three out of

1  
2 the five boroughs. And we have strong partnerships in  
3 our other boroughs in Queens and Staten Island to  
4 make sure that seniors there who are LGBT are being  
5 served. But that being said, we do find that, again,  
6 you had mentioned someone in the Bronx who was coming  
7 to Brooklyn for our Stonewall Senior Center.  
8 Sometimes they come to multiple centers in the day.  
9 Sometimes they come-- our Chelsea center serves  
10 dinner while the other ones serve lunch. So sometimes  
11 there is a bit of a rotation around there to get  
12 multiple meals within a day.

13 CHAIRPERSON ZHUANG: Any transportation  
14 service that guys can help with those seniors?

15 BILL GROSS: We're not at this time able  
16 to offer transportation assistance. I appreciate the  
17 fact that in NYC Aging's new OAC RFP, they put a  
18 greater emphasis on transportation and the  
19 possibility of support there. But we don't currently  
20 have transportation support except through-- one of  
21 our programs for our trans population, who experience  
greater rates of discrimination on the MTA, for  
instance, we do have additional opportunities for  
them in terms of transportation through that program.

1  
2 CHAIRPERSON ZHUANG: I want to thank you  
3 for all the services you provide for our LGBTQ+  
4 community.

5 BILL GROSS: Thank you.

6 CHAIRPERSON ZHUANG: I think they actually  
7 need more assistance than the other communities.  
8 Thank you. Thank you, everyone.

9 For the next panel, we have Bridget Lee,  
10 Linda Hoffman, Anita Kwok, and Kit Pang Ng.

11 BRIDGET LEE: Good afternoon. My name is  
12 Bridget Lee, and I am here on behalf of the Weinberg  
13 Center for Elder Justice, an advocacy and resource  
14 center made up of a leading multidisciplinary team of  
15 elder justice experts.

16 I'm here today to urge the City Council  
17 to act on what we have learned from our work. Social  
18 isolation is not only a health issue, but an elder  
19 justice issue. According to the CDC, social isolation  
20 is one of the most significant risk factors for elder  
21 mistreatment. Older adults who lack consistent,  
meaningful connections are far less likely to report  
abuse when it happens. In fact, a New York State  
study revealed that only one in 24 incidents of elder

1  
2 abuse is actually reported. We see this pattern  
3 repeatedly in our work.

4 Through "SPEACH" (Service Provider Elder  
5 Abuse Consultation Helpline), our consultation  
6 helpline, now operating across all five boroughs in  
7 partnership with the New York City Mayor's Office to  
8 End Domestic and Gender-based Violence. We provide  
9 real-time expert consultations and action plans to  
10 service providers working with older adults  
11 experiencing mistreatment.

12 Through this work, we witness firsthand  
13 that the longer and older an adult has been isolated,  
14 the longer it takes for them to seek help. To address  
15 this on every call, we connect that older adult with  
16 community-based organizations that can provide the  
17 ongoing social connection they are missing.

18 Research from the National Institute of  
19 Health has found that social isolation increases an  
20 older adult's vulnerability to financial exploitation  
21 and more than doubles the risk of older adults  
falling for scams.

According to FINRA (Financial Industry  
Regulatory Authority ), as isolation increases, older  
adults increasingly turn to the internet for social

1  
2 interaction, making them more susceptible to  
3 relational manipulation factors scammers rely on.

4 We urge the Council to support programs  
5 that build lasting social connections for older  
6 adults, particularly those who are medically fragile,  
7 have mobility impairments, or face other barriers.

8 We encourage investment and  
9 community-based outreach, Friendly Visitor programs,  
10 and intergenerational programming that can reach  
11 older adults who have already fallen outside existing  
12 social networks.

13 We also urge Council to take the role of  
14 technology seriously, both as a threat and as an  
15 opportunity. Older adults aged 60 and over reported  
16 almost \$2.5 billion dollars in fraud losses in 2024,  
17 a fourfold increase from 2020.

18 The same technology (TIMER) that puts  
19 older adults at risk, when properly supported and  
20 taught, can also be what keeps them connected.  
21 Combating elder mistreatment requires more than  
responsive services. It requires a city in which  
older adults are seen, known, and connected to others  
who will notice when something is wrong.

1  
2 Older adults are present in every  
3 community in New York, and they deserve to be fully  
4 seen and protected. Thank you again for the  
5 opportunity to testify.

6 ANITA KWOK: Thank you, Council Member  
7 Zhuang, for convening this oversight hearing on  
8 *Social Isolation Among Older Adults*.

9 My name is Anita Kwok, a policy analyst  
10 at United Neighborhood Houses. Today, I'll be  
11 commenting on the Preconsidered bills as well as some  
12 of our budget priorities.

13 We support the concept of Council Member  
14 Encarnación's bill requiring wellness checks on older  
15 adults during emergencies, which members already do--  
16 they do wellness checks on their clients in any real  
17 weather-related emergency. During the last two  
18 snowstorms, one of our members had six staff members  
19 calling over 1,500 members, and even with that, there  
20 is a disproportionate division of labor because  
21 different members have different language needs. And  
these calls are made on top of their regular work  
duties, as well as duties that form as a result of a  
weather emergency. This is not an anomaly, but it is  
the reality of community-based organizations and what

1  
2 emergencies look like under current staffing and  
3 funding levels.

4 Codifying wellness checks without  
5 addressing this will only further strain the  
6 workforce. The Council must take into account the  
7 reality of the operations and compensation of the  
8 contracts across the aging service networks to add to  
9 emergency response.

10 We also support Council Member Linda  
11 Lee's bill. In early 2025, when the federal  
12 administration attempted to end over-the-phone  
13 identity verification for Social Security and instead  
14 require older adults to verify either online or in  
15 person, our aging service providers raised serious  
16 concerns because many of their older adults lack  
17 digital literacy and reliable access to the Internet.  
18 And with the rapid development of the digital world,  
19 the City must provide multiple pathways to access.

20 We have also been longtime champions of  
21 the Council's Older Adult Mental Health Initiative.  
This initiative funds mental health in community  
spaces where older adults gather, like senior  
centers, NORCS, and food pantries. And some of our  
members get really creative with this funding and

1  
2 create their own programs and special initiatives  
3 that are uniquely tailored to the needs of the older  
4 adults in the communities they serve.

5 We're asking for \$3.5 million in FY27.

6 I also have more in my written testimony.  
7 Thank you for this opportunity.

8 LINDA HOFFMAN: Hi, I'm Linda Hoffman,  
9 President of New York Foundation for Senior Citizens.

10 I feel as though I'm speaking to the  
11 choir because I was back here in December. But when I  
12 saw that you were talking about loneliness, I knew  
13 that our home sharing and respite care program fit  
14 the bill. And I just want to renew what I've already  
15 said, which is that our home sharing program is  
16 implemented by social workers whose skills  
17 successfully match older adult hosts with space in  
18 their apartments and houses to share with guests in  
19 need of affordable housing. It's like a win-win. Does  
20 that provide a loneliness solution? I think so.

21 Same with respite care. Respite care also  
has our Master of Social Work staff who vet home care  
workers and match them with frail elderly who were  
struggling to live on their own, and who are taken  
care of by relatives and others who may need some

1  
2 time off. And these are people on the Medicare level  
3 who at least receive respite, who are living on fixed  
4 incomes and really can't afford to pay \$40.00 an  
5 hour, which is being charged now, I understand, by  
6 the private agencies.

7           So this funding really pays for the staff  
8 to do this type of work. And, honestly, they relieve  
9 feelings of loneliness, depression, and at the same  
10 time, provide affordable housing and help seniors  
11 maintain their homes, and others to avoid  
12 institutionalization, both in homeless shelters and  
13 in nursing homes. So it's a win-win for everyone. And  
14 we're hoping that we're funded again this year, so  
15 that you'll be able to recognize (TIMER) that this  
16 program not only provides the housing that we've been  
17 talking about-- And we've been told-- because we're  
18 going to try to build a building in Manhattan, and  
19 we've been told that the pipeline is now about four  
20 to five years in order to get the funding to move  
21 forward with it. So we're hoping that, at least for a  
while, this can provide the services that are needed  
to help relieve feelings of loneliness, depression,  
and isolation at the cost of \$3,900 per person as a

1  
2 one-time cost, as opposed to building an apartment  
3 for five or \$600,000. Thank you very much.

4 KIT PANG NG: Good morning, Chair Zhuang  
5 and Committee Members. My name is Kit Ng. Thank you  
6 for giving me the chance to speak today.

7 Before I joined the senior center, I  
8 stayed home most of the time. I felt very lonely.  
9 Some days, I had nobody to talk to. It was very hard  
10 and very quiet.

11 Homecrest OAC changed my life. Now I have  
12 friends. I can talk, laugh, and join activities. I  
13 can play ping pong, exercise, and stay healthy. I  
14 also volunteer at community events. This makes me  
15 feel proud because I can still help others.

16 The center is not just a place for  
17 activities. It is a place where we feel we belong.  
18 The staff cares about us. We care about each other.  
19 This is like a second home to me.

20 Please continue to support older adult  
21 centers. Many seniors like me need a place to go, a  
place to make friends, and a place to feel we are not  
forgotten.

1  
2 Although we are old, we still want to  
3 live with dignity, purpose, and connection. Please do  
4 not let seniors be invisible. Thank you.

5 CHAIRPERSON ZHUANG: Thank you. Very well  
6 said. I have actually been to Homecrest many times,  
7 so I know what a great job they are doing there.

8 I really appreciate Ms. Linda Hoffman. I  
9 just wish your program could be implemented  
10 everywhere. It would reduce the number of housing  
11 issues as well as the loneliness issue. That is one  
12 stone, two birds.

13 I have questions for the Weinberg Center  
14 for Elder Justice. So, here the data shows that older  
15 adults, age 60 and over, reported \$2.5 billion in  
16 fraud in 2024.

17 Can you give me more details? What type  
18 of fraud? Is it online or over the phone?

19 BRIDGET LEE: It's a multitude of ways. I  
20 would say scams over the phone and romance scams on  
21 the internet are very prevalent. And caregivers,  
either family members or just someone in the home,  
most often are, you know, embezzling money or  
stealing money from the older adult.

1  
2 CHAIRPERSON ZHUANG: Is the NYPD doing  
3 anything about it or the DA offices?

4 BRIDGET LEE: Yes, and we are advocates.  
5 We go to court to fight on behalf of older adults to  
6 try to recover some money or just provide a sense of  
7 justice. But it is very, very difficult to get funds  
8 back.

9 CHAIRPERSON ZHUANG: What is the  
10 percentage of people who are able to get their money  
11 back?

12 BRIDGET LEE: I do not know the  
13 percentage, but I am sure it is very, very low.

14 CHAIRPERSON ZHUANG: Is this fraud that  
15 happens nationwide or internal only? Is it  
16 international? Because I see some fraud, people wire  
17 money outside of the country.

18 BRIDGET LEE: Mm-hmm.

19 CHAIRPERSON ZHUANG: Does this include  
20 deed theft, or what kind of....

21 BRIDGET LEE: It's internationally.

CHAIRPERSON ZHUANG: Nationally?

BRIDGET LEE: Yes.

CHAIRPERSON ZHUANG: Okay, thank you. We  
definitely should address this issue.

1 BRIDGET LEE: Yes.

2 CHAIRPERSON ZHUANG: Thank you. Thank you  
3 for the information. Thank you, everyone.

4 For the last panel, we have Mohammad  
5 Razvi, Marcus Jackson, Terry Campuzano, and Kalman  
6 Bokow.

7 MOHAMMAD RAZVI: Thank you again, Chair.  
8 Susan.

9 The most important thing is that I'm so  
10 glad that you were able to join us at the (INAUDIBLE)  
11 event with our senior center.

12 Secondly, as we were hearing earlier  
13 about the OAC centers being a vital resource during  
14 the winter or during the summer, we actually provide  
15 our seniors with food pantry bags at the center. And  
16 I would love for you, and perhaps the commissioner,  
17 to come by and see how it's done. So we have the food  
18 pantry, and then we're bringing the bags to our  
19 center for our seniors, so they don't have to wait in  
20 line.

21 Secondly, we were the second awarded in  
the competition for having the best food for our  
seniors, which was a knock on wood. We were very  
happy about that. And we are the only, possibly only,

1  
2 Halal senior center that's funded by the city of New  
3 York.

4           There are over one million Muslims in New  
5 York City, and many of them are becoming seniors. And  
6 we would like to see how we can get other resources  
7 to expand on that model that we have. Because we only  
8 have one truck for Halal Meals on Wheels, which goes  
9 to multiple community districts. And many people are  
10 calling us from the Bronx, from Queens, from Staten  
11 Island, saying that they really need those services.

12           So we're looking at what the next step  
13 is? And we would love for you to advocate for us. And  
14 we'll advocate wherever we have to, because many of  
15 these seniors, they don't go to other centers only  
16 because they're not able to eat the food or they're  
17 not able to have their culturally appropriate games,  
18 all the activities that they want. But I look  
19 forward-- and anywhere we can get some assistance,  
20 that'll be great. Thank you.

21           KALMAN BOKOW: Good afternoon. My name is  
22 Kalman Bokow, and I am the Development Manager at  
23 India Home. Thank you very much for holding this  
24 hearing and for the opportunity to testify.

1  
2 India Home is a leading nonprofit  
3 organization dedicated to serving the unique needs of  
4 older adults from South Asian and other immigrant  
5 communities across New York City. We run senior  
6 centers at five locations in Queens: Jamaica,  
7 Elmhurst, Flushing, Ozone Park, and Jamaica Estates  
8 since our founding in 2007.

9 Our work ensures that immigrant seniors,  
10 often underserved and isolated, have access to the  
11 critical resources they need to age with dignity in  
12 their communities.

13 Asian American and Pacific Islander New  
14 Yorkers represent 18% of the city's population, and  
15 their communities need access to health insurance,  
16 linguistic accessibility across institutions and  
17 agencies, childcare, domestic violence support,  
18 housing, and so much more. The need for these  
19 resources often falls on the shoulders of  
20 community-based organizations and other nonprofits to  
21 fill the gap created by the city government, which we  
believe is an equity issue in the budget.

So City initiative funding is so  
important to us at India Home because it helps us  
provide crucial support for New York's older adults

1  
2 through our programs. As an organization dedicated to  
3 serving immigrant older adults, we send our work  
4 around the commitment to provide culturally relevant,  
5 linguistically appropriate care.

6 Initiative funding specifically through  
7 the AAPI Community Support, Communities of Color  
8 Nonprofit Stabilization Fund, and older adults'  
9 mental health initiatives are critically important  
10 for our most vulnerable clients, such as our older  
11 adults with low to moderate dementia. Which we serve  
12 through our Desi Dementia Daycare program. We offer  
13 those three days a week in Jamaica. This is a unique  
14 program. No other senior care center in New York  
15 offers culturally competent dementia care at no cost.  
16 We serve 30 unique individuals. We estimate that with  
17 transportation funding, we could double our  
18 attendance.

19 Despite India Home having an older adult  
20 center contract, the contract covers a mere 67% of  
21 the actual cost of just one of our five centers. And  
we ask the Council to support and increase  
discretionary funding to meet the expanding need for  
services in Queens. (TIMER)

I'll wrap up.

1  
2 As a proud member of the 18% and Growing  
3 Coalition Campaign, we urge the City Council to  
4 uplift the collective priorities of that campaign,  
5 which include expanding API community support to \$7.5  
6 million, the Communities of Color Nonprofit  
7 Stabilization Fund to \$10 million, and Access Health  
8 initiatives to \$4.5 million.

9 Thank you so much for your time and for  
10 the opportunity to testify.

11 TERRY CAMPUZANO: Hello, my name is Terry  
12 Campuzano, and I am the TA President of Meltzer Tower  
13 in the East Village, 94 East 1st Street.

14 My issue is that we are a standalone  
15 20-story building in the East Village. We have a  
16 senior population. I have been online for the last  
17 year, between NYCHA and DFTA, complaining that our  
18 services from University Street Settlement were not  
19 adequate for our seniors. And there was a Zoom  
20 meeting, and I think Christopher Banks was on that--  
21 Representative Banks. They were talking about how  
they visit all of the seniors' buildings and have met  
with the staff, and have met with the senior tenant  
associations to find out if everything was fine with  
the services. And I had told them at the time that,

1  
2 no, nobody has met with us. I have been involved with  
3 Marlene Shallow (phonetic) from DFTA, and I explained  
4 to her the problem. So when a Zoom meeting happened  
5 with NYCHA and DFTA, along with people from  
6 University Street Settlement, we just hit a  
7 roadblock.

8 I have a senior population that is 70%  
9 Asian, and we have Russian and Spanish. So, a lot of  
10 the people don't speak English. And I was looking for  
11 more help from them as far as translation. Because at  
12 our TA meetings, it is extremely hard to communicate,  
13 unless we have live translation. So I am also going  
14 to reach out to Council Member Epstein about that.

15 The problem is also that University is in  
16 charge of their senior center at 189 Allen Street,  
17 which is Hernandez Houses, it's across Houston  
18 Street, which is a really busy street. A lot of our  
19 seniors are in wheelchairs and walkers, and it's  
20 hard, it's difficult for them to get across the  
21 street over there.

22 At Hernandez, they have a cooking  
23 facility, where they make lunch for the seniors. I am  
24 not trying to work with EVLovesNYC, who make food for  
25 the seniors and for people just in the community.

1  
2 They are located-- right now, they don't have a  
3 permanent kitchen. But they have done a wonderful  
4 job. I am going to a nice lunch for our seniors  
again.

5 So, there is a problem with University,  
6 and I have spoken to DFTA, that being that University  
7 has two places in the vicinity of us, and their  
8 overflow usually comes into Meltzer Tower. And our  
9 people do not do Pilates, and they can not do  
10 ballroom dancing. They're on walkers. And I have  
11 complained to University about this. But, being that  
12 they have both centers, there is not much we can do  
13 about it. So, this is a problem for us. And now we  
14 are basically, because of security reasons, and the  
15 damage to our building, we are basically, almost  
16 being like we have no choice but to go the route  
(INAUDIBLE). So hopefully, when we do that, we will  
17 have a lot more services. But, right now, this is the  
18 problem.

19 CHAIRPERSON ZHUANG: (UN-MIC'D) Thank you

20 (INAUDIBLE)

21 MARCUS JACKSON: Good afternoon,  
Committee. My name is Marcus Jackson, and I'm the  
Director of Advocacy and Government Relations at

1  
2 Encore Community Services, one of the largest  
3 providers of services for older adults in New York  
4 City. Thank you for the opportunity to give testimony  
5 today.

6 At Encore, we see firsthand the impact  
7 that social isolation has on older adults. Too many  
8 older New Yorkers are disconnected from their  
9 communities and support systems due to limited  
10 mobility, chronic health conditions, and barriers to  
11 transportation and technology. For many, days can  
12 pass without meaningful human interaction. This kind  
13 of isolation has deadly consequences, contributes to  
14 declining mental and physical health, increases  
15 vulnerability, and can lead to death if their needs  
16 go unanswered.

17 Addressing these issues of isolation will  
18 require consistent and reliable points of connection.  
19 As such, our home-delivered meals are one of the most  
20 effective points of connection we have to reach older  
21 adults who are isolated. Encore provides hundreds of  
thousands of meals each year to older New Yorkers on  
Manhattan's West Side, including those who are  
homebound. With every delivery, we create a moment of  
human connection. Each time we ring a doorbell or

1  
2 knock on the door to deliver a meal, we create a  
3 brief interaction, offer a familiar face, and take an  
4 opportunity to ensure someone is safe and supported.  
5 For many of the individuals we serve, this is their  
6 most consistent point of contact.

7 Most delivery programs already function  
8 as essential informal wellness check systems, as we  
9 heard from many testimonies today, for many older  
10 adults across the city. They allow providers to  
11 identify needs early in response to concerns with  
12 individuals who may otherwise be unreachable.

13 Encore supports Intro 0280, which would  
14 expand homebound meal access from five meals per week  
15 to every day of the calendar year. It's a critical  
16 step towards addressing both food insecurity and  
17 social isolation. Increasing the number of meals  
18 delivered each week increases the number of  
19 consistent touch points with older adults. More  
20 frequent deliveries mean more opportunities to check  
21 in and identify emerging needs and reduce the risk of  
associated prolonged isolation.

In conclusion, we urge the Council to  
support Intro 0280 and continue to strengthen  
programs that ensure older New Yorkers remain

1  
2 connected, supported, and able to age in place with  
3 dignity. I'm happy to answer any questions or  
4 concerns you guys may have.

5 CHAIRPERSON ZHUANG: Thank you. I want to  
6 thank everyone for coming to testify. I appreciate  
7 all of the work that you guys are doing in all of the  
8 community centers. There should be more. I can  
9 testify to the good work that you do. In my district,  
10 we are also calling you for Halal food. I want to  
11 thank everyone for testifying.

12 We will now be moving to virtual  
13 testimony. Please wait for your name to be called.  
14 Please select unmute when you are prompted.

15 The first Zoom panelist we will hear from  
16 is William McDonald.

17 BILL MCDONALD: Good morning, Chair Zhuang  
18 and members of the Committee on Aging. My name is  
19 Bill McDonald, and I am a volunteer and State  
20 President of AARP New York. I am here on behalf of  
21 our approximately 750,000 members in New York City  
and the 2.5 million New Yorkers age 50 and older  
across the five boroughs. Thank you for holding this  
important hearing on social isolation among older New  
Yorkers.

1  
2 Social isolation is one of the most  
3 serious and growing challenges facing older adults,  
4 and it is being exacerbated by the chronic  
5 underfunding of the very services designed to prevent  
6 it.

7 For many older New Yorkers, staying  
8 connected is about more than social engagement. It is  
9 about whether they have access to the services and  
10 supports that allow them to remain healthy,  
11 independent, and in their communities.

12 But right now, those supports are not  
13 keeping pace with the need. Over the past decade, the  
14 number of New Yorkers age 65 and older has increased  
15 by 35%, and the number living in poverty has risen by  
16 nearly 50%. At the same time, older adults make up  
17 about 20% of the city's population, yet the  
18 Department for the Aging receives just one-half of  
19 one percent of the City budget. That gap has real  
20 consequences, and it is unacceptable.

21 There are many vibrant Older Adult  
Centers across the five boroughs, but too many others  
have been left to deteriorate. And when centers are  
not warm, welcoming, and well-maintained, older  
adults simply stop coming.

1  
2 We should be investing in centers so that  
3 they are inviting, offer good, nutritious food, and  
4 provide meaningful programming. In short, every Older  
5 Adult Center should be a place where older New  
6 Yorkers want to spend time. Because when we get that  
7 right, we do more than serve a meal. We create  
8 community. We reduce isolation. And we help people  
9 stay healthy and independent.

10 The same is true for meal programs. When  
11 congregate meals are underfunded, older adults miss  
12 not just nutrition, but daily interaction. When  
13 home-delivered meals are limited, homebound older  
14 adults can go days without seeing another person.

15 SERGEANT AT ARMS: Your time has expired.

16 BILL MCDONALD: Thank you.

17 CHAIRPERSON ZHUANG: Next, we have Joanne  
18 Edey-Rhodes.

19 SERGEANT AT ARMS: You may begin.

20 JOANNE EDEY-RHODES: My name is Joanne  
21 Edey-Rhodes. I want to thank you for giving me the  
opportunity to speak on behalf of the center that I  
attend, SNAP Brookville.

SNAP Brookville was a lifeline for me  
four years ago when I started attending. I had just

1  
2 lost my husband after being married for 44 years, and  
3 I had also just retired after teaching at Hunter  
4 College for 46 years.

5           The center gave me the opportunity to  
6 talk to numerous people who were completely new to  
7 me. There was one woman in particular who took me  
8 under her wing and introduced me to a number of  
9 people as well as to the way the center worked, you  
10 know, socially. I also had the opportunity to meet up  
11 with somebody that I hadn't seen since we were  
12 children. And she asked me, "Are you an Edey?" I  
13 said, "Yes," and asked her why she asked me that. And  
14 she said, "Because you look like them." And I hadn't  
15 seen her since I was about five or six years old. Our  
16 older siblings were involved with the Mickey Mouse  
17 Club, and because of that, I guess we became involved  
18 with the Mickey Mouse Club at that young age. They  
19 were older. Our siblings were older.

20           In any case, the center has been very,  
21 very important to me. And it was because of my  
daughter, actually one of my daughters, that I went  
to the center. She heard me say that I was feeling  
lonely, and she immediately called the center, and  
because they had transportation, I was able to

1  
2 attend. I needed the transportation terribly because  
3 of problems that I have with balance.

4 SERGEANT AT ARMS: Time has expired.

5 CHAIRPERSON ZHUANG: Please wrap up.

6 JOANNE EDEY-RHODES: (NO RESPONSE)

7 CHAIRPERSON ZHUANG: Joanne?

8 Okay, next we have Cathy Cahn.

9 SERGEANT AT ARMS: You may begin.

10 CHAIRPERSON ZHUANG: Cathy? Are you still  
11 here?

12 SERGEANT AT ARMS: Caller?

13 CATHY CAHN: Hi, sorry about that. I  
14 wasn't expecting to speak. I'm Cathy Cahn, and I'm  
15 the Director of SNAP Brookville Older Adult Center,  
16 and Joanne Edey-Rhodes is one of our participants.

17 Her story of coming to the center after  
18 being socially isolated is a story I hear all the  
19 time, that the center becomes their way of life, that  
20 they come here for socialization and a nutritious  
21 meal, exercise, and all the programs that we have  
here. It's such an important place for them. And they  
miss it when they're not here. And they don't  
necessarily have anything to do otherwise. So it's

1 really a blessing that we have senior centers and  
2 older adult centers that they can come to.

3 We also have social workers and  
4 caseworkers who can come and get assistance where,  
5 you know, they might not know what to do with their  
6 mail or a form to fill out or something else. So  
7 we're blessed to have a caseworker here at our center  
8 who assists our seniors. We're also blessed in our  
9 agency; we have a caregiver program, which is  
10 fabulous, and I happen to be a part of it myself.

11 We have the Friendly Visiting that keeps  
12 those seniors who are at home from being socially  
13 isolated. Our case management services are fabulous.  
14 So I'm giving you a little commercial for services  
15 now for adult persons.

16 There's such value to what we do here at  
17 our centers. I couldn't imagine life without them,  
18 and for me, I'm looking forward to retiring one day  
19 and being a participant here.

20 CHAIRPERSON ZHUANG: Thank you.

21 CATHY CAHN: Thank you.

CHAIRPERSON ZHUANG: Next, we have Nina  
Bhola-Cruz.

SERGEANT AT ARMS: You may begin.

1  
2 NINA BHOLA-CRUZ: (NO RESPONSE)

3 CHAIRPERSON ZHUANG: Next, we have Oliver  
4 Hsiung. Oliver Hsiung? Martha Kamber? Martha Kamber?  
5 Katie Foley? Katie Foley? Athena Efter? Athena Efter?  
6 Solomon Smart? Solomon Smart?

7 Thank you to everyone who has testified.  
8 If there is anyone present in the room, or on Zoom,  
9 who has not had the opportunity to testify, please  
10 raise your hand.

11 Seeing no one else, I would like to...  
12 Oh, yes, you can go ahead.

13 HELEN AHN: Thank you for the opportunity  
14 to testify. My name is Helen Ahn, and I am the  
15 Managing Director of Korean Community Services of  
16 Metropolitan New York.

17 In our Flushing Older Adult Center, we  
18 see every day that social isolation and food  
19 insecurity are not a separate issues. They are deeply  
20 connected, and many of the older adults we serve are  
21 not only alone but also struggling to access regular,  
culturally appropriate meals.

Social isolation is not just about being  
alone; it is about being unseen, unheard, and  
disconnected. For immigrant seniors, this is even

1  
2 more severe due to a language barrier, limited  
3 mobility, and a lack of access to services.

4 I would like to share the story of Ms.  
5 Lee, who is 83 years old, a Korean immigrant, who  
6 lives alone. After losing her husband, she became  
7 deeply isolated; she rarely left her home, and often  
8 skipped meals. When she first came to our center, she  
9 sat quietly, unsure if she belonged. But through a  
10 warm meal, a familiar language, and a welcoming  
11 community, she slowly began to reconnect. Today, she  
12 attends regularly and participates in activities and  
13 even welcomes new participants. She told us, "This  
14 place gave me my life back."

15 Her story reflects hundreds of seniors at  
16 our FOAC who depend on us not just for food, but for  
17 connection and dignity. But we are at capacity. Our  
18 centers serve hundreds of older adults daily, an  
19 average of 400 participants every day. Our space is  
20 overcrowded, and our staff is stretched thin trying  
21 to meet the growing needs from meals, to case  
assistance, and emotional support for friendly  
visiting as well.

If we are serious about addressing social  
isolation and food insecurity, we must invest in the

1  
2 infrastructure behind these services. We need more  
3 space, so seniors are not turned away. We need more  
4 staff to provide the care and connection they  
5 deserve. Without this support, we are leaving our  
6 most vulnerable seniors behind. I urge you to invest  
7 in expanding older adult centers like FOAC, because  
8 behind every number is someone like Ms. Lee who is  
9 simply looking for connection, nourishment, and  
10 dignity. Thank you.

11  
12 CHAIRPERSON ZHUANG: Thank you, Helen. I  
13 want to thank KCS for the wonderful work that you  
14 guys are doing. Thank you.

15  
16 Thank you to everyone who has testified.  
17 If there is anyone present in the room or on Zoom who  
18 has not had the opportunity to testify, please raise  
19 your hand.

20  
21 Seeing no one else, I would like to note  
that written testimony, which will be reviewed in  
full by committee staff, may be submitted to the  
record for up to 72 hours after the close of this  
hearing by emailing it to: [testimony@council.nyc.gov](mailto:testimony@council.nyc.gov)

[GAVEL]

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C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is no interest in the outcome of this matter.



Date May 27, 2026