



**TESTIMONY**

Presented by

**Donna M. Corrado, PhD  
Commissioner**

on

**FY 2019 Preliminary Budget**

before the

**New York City Council  
Committee on Aging**

on

**Friday, March 23, 2018  
10:00 A.M.**

at

**Council Chambers, City Hall  
New York, NY 10007**

Good morning, Chairperson Chin and members of the Aging Committee. I am Donna Corrado, Commissioner of the New York City Department for the Aging (DFTA). I am joined this morning by Sasha Fishman, Associate Commissioner for Budget and Fiscal Operations, and Fran Winter, Deputy Commissioner for Programs. Thank you for this opportunity to discuss DFTA's Preliminary Budget for Fiscal Year 2019.

## **OVERVIEW**

The FY '19 Preliminary Budget projects \$344 million in funding, which includes allocations of \$147 million to support senior centers, \$38 million for home delivered meals, \$37 million for case management, \$30 million to support home care for homebound seniors who are not Medicaid eligible, \$7 million for NORC programs, and \$8 million for caregiver services.

The Administration has made a major commitment to aging services, including an increase of more than 50% in baselined City Tax Levy funding between the last year of the prior Administration and this fiscal year preliminary budget – an overall increase of \$78 million. This increase benefits most of DFTA's programs, including senior centers, elder abuse programs, caregiver and homecare services.

This year, the Administration increased funding for home sharing by \$1.4 million. This program matches adult guests in need of housing with homeowners or leaseholders with space to spare.

## **FISCAL YEAR 2018 ENHANCEMENTS**

This year's budget builds on the significant increases in FY '18, some of which include the following:

- \$7.3 million was provided to stabilize the staffing in case management programs. We are happy to report that, as a result, retention of case management staff has increased. More competitive salaries have helped reduce high turnover rates, improved service delivery, and ensured continuity and quality of care. The vacancy rate has declined from 8% in January 2017 to about 4% in January 2018. More than one-third of all case management staff (38%) have held their positions for three years or longer. Through an infusion of \$1.5 million, DFTA-funded case management agencies hired 11 new case managers and 6 supervisors to address the case management wait list.

- \$1.5 million was awarded to expand Multi-Disciplinary Teams (MDTs), which are comprised of professionals from diverse disciplines, including representatives from District Attorney's offices, NYPD, Adult Protective Services, medical centers, financial institutions, and a myriad of community based organizations, who jointly provide comprehensive assessments and consultation on abuse cases. This expansion from the program's current two-borough portfolio—Manhattan and Brooklyn—to all five boroughs is vastly strengthening the City's ability to address complex elder abuse matters in a coordinated fashion. This is essential to resolving interrelated social, financial, criminal, and legal challenges found in a majority of cases.
- \$225,000 was allocated for PROTECT, which stands for "Providing Options To Elderly Clients Together." This program, developed by DFTA and Weill Cornell Medical Center, mitigates the impact of depression and anxiety among elder abuse victims. Trained professionals help victims to address their mental health issues and cope with abusive situations. In coordination with the Mayor's Office to Combat Domestic Violence, DFTA will work with our providers to identify and serve victims of elder abuse.
- In recognition of the contributions and challenges of unpaid caregivers, the Administration designated \$4 million to provide respite care and supplemental services. This allocation will augment funding received by DFTA for the federal Title III-E National Family Caregiver Support Program.

I would be remiss not to mention our appreciation for the ongoing support of the City Council. This year, the Council has contributed close to \$30 million to DFTA programs. This level of support makes a significant difference in the quantity and quality of services that we and our community-based partners provide. It is through the Administration's commitment, coupled by the Council's support, that DFTA has been able to meet the demands and needs of the ever-growing population of older New Yorkers.

Over the past year, DFTA has made major investments to become more efficient in contracting and procurement. These improvements include streamlining business processes, and creating additional staff lines to manage the volume of procurement and budget actions that we encounter each year. As

a result of building increased capacity, DFTA has made significant improvements: At this time last year, DFTA had only 11% of discretionary awards registered. Today, 64% of discretionary awards with submitted budgets have had their contracts registered. This represents an approximate 500% improvement from FY '17. We continue to work toward achieving a higher rate.

### **SENIOR CENTER MODEL BUDGET**

I am excited to announce that in line with the Administration's broader vision of promoting fairness and equity, the \$10 million in baselined funds made available in FY '18 – a significant investment in the DFTA senior center network – will increase to \$20 million by FY '21. These funds were designated to help create parity in our senior center budgets and allow for enhanced staffing and programming.

DFTA is distributing the funds in accordance with a model budget developed with input from OMB, our network of providers, and other stakeholders. The key goal of the model budget has been to achieve a more equitable distribution of available funds among centers by creating a “floor,” whereby centers will receive funding to address fixed costs associated with staffing and programming that exist regardless of a center's size. The model budget reflects that a requisite amount of funds are needed to provide threshold levels of quality programming, and to pay competitive wages to attract and retain high-quality staff.

### **HOME SHARING PROGRAM**

As I mentioned earlier, the Administration increased funding for home sharing by \$1.4 million. Plans are already underway to expand the successful Home Sharing Program, thereby increasing the number of affordable housing options in the city, particularly those serving the older adult population. The program matches individuals needing an affordable place to live, or “guests,” with homeowners or leaseholders who have extra space in their home, or “hosts.” One of the two parties involved—either the guest or the host—must be a senior in order to participate. There is also an extensive screening and vetting process done by social workers, which is essential to the success of these matches. In addition to negotiating the terms of the living arrangements, the social workers conduct follow-up to provide ongoing support. With the increased funding, DFTA hopes to ramp up the program with a goal of 4,000 placements over the next five years.

For the remainder of the testimony, I would like to take an opportunity to briefly update the Committee on a number of DFTA's ongoing initiatives.

### **CAREGIVER SURVEY**

Local Law 97 of 2016 required DFTA to conduct a survey of unpaid caregivers. DFTA worked closely with city and state agencies, AARP, and other non-profits assisting caregivers. The survey findings and recommendations were provided to the City Council, as required under the law. These recommendations reflected the top identified needs, which include:

- Leveraging and expanding awareness about existing resources for caregivers;
- Encouraging New Yorkers to identify as caregivers;
- Educating caregivers about best practices and techniques for providing care;
- Helping caregivers access affordable transportation;
- Supporting legislation that benefits unpaid caregivers;
- Continuing a working group focused on caregivers; and
- Communicating affordable housing efforts and opportunities to caregivers.

### **SOCIAL ADULT DAY CARE**

Local Law 9 of 2015 required all Social Adult Day Care programs (SADC) operating within New York City to register with DFTA. As of March 13, 2018, there are 348 active registered programs. Of these, 143 are in Brooklyn, 131 are in Queens, 33 are in Manhattan, 26 are in the Bronx, and 15 are in Staten Island. In addition, I am pleased to share with the Committee that, in partnership with NYSOFA, OMIG, DOHMH, and the New York State Adult Day Services Association, DFTA is launching a training series for the Compliance/Quality Assurance Units of the Managed Long Term Care companies operating in New York City. At the first training taking place this afternoon, DFTA will discuss our role as the designated SADC Ombuds Office, followed by presentations from the other participating agencies.

### **AGE-FRIENDLY NYC**

*Age-friendly NYC*, as you know, brings together the public and private sectors to develop initiatives to ensure New York City is a city for all ages. With our partners at the New York Academy of Medicine, DFTA has coordinated the work of Age-friendly NYC over the past decade. In 2017, the initiative was updated to include nearly 90 programs spanning health and social services, housing,

public spaces and transportation, public safety, and civic and community participation. We have brought copies of the updated Age-Friendly NYC report with us this morning to share with you.

#### **THRIVE NYC: GERIATRIC MENTAL HEALTH INITIATIVES**

As you know, Mayor de Blasio and First Lady McCray released *ThriveNYC: A Mental Health Roadmap for All*. Among its suite of groundbreaking initiatives are two programs focused on geriatric mental health—one endeavored to embed mental health practitioners in 25 senior centers across the City, and the other combats social isolation among the older adults.

This spring, geriatric mental health services are available at all 25 centers as part of ThriveNYC—4 in the Bronx, 6 in Manhattan, 6 in Queens, 8 in Brooklyn, and 1 in Staten Island. Each month, more than 1,500 seniors avail themselves of these services.

The Friendly Visiting Program, which was designed to combat social isolation, matches volunteers with homebound seniors for weekly visits. Since the program's inception, volunteers have made 17,174 visits to seniors in their homes, and have spent a total of 27,200 hours with seniors.

#### **CONCLUSION**

Thank you for this opportunity to testify about DFTA's Preliminary Budget for FY '19. I look forward to continuing the partnership with the City Council in serving older New Yorkers. I am pleased to answer any questions you may have.

# Age-friendly NYC

## New Commitments for a City for All Ages



Bill de Blasio  
NYC Mayor

Richard R. Buery Jr.  
Deputy Mayor for Strategic  
Policy Initiatives

**NYC**  
Department for  
the Aging

Donna M. Corrado, Ph.D.  
Commissioner



AGE  
FRIENDLY  
NYC

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THE CITY OF NEW YORK  
OFFICE OF THE MAYOR  
NEW YORK, NY 10007

Dear Friends:

In less than a quarter century, an estimated one in five New Yorkers will be at least 60 years old. That is a profound change for our city, which will strengthen us, yet presents a challenge. We must ensure those who built this city can remain here in comfort and dignity.

My administration is fighting to make this a better and fairer place for all New Yorkers and that is what our Age-Friendly NYC initiative is all about. We are helping seniors stay in their neighborhoods by building or preserving 200,000 affordable apartments. Through Vision Zero, we are making our streets safer for seniors. We are also addressing isolation and other mental health issues through ThriveNYC. From transportation to cultural options, we have streamlined and improved existing programs to make sure they reach seniors in a more effective way.

History tells us New York City is great because anyone can make it here. My urgent mission is to uphold this legacy by keeping New York a place for all people, regardless of age.

Sincerely,

A handwritten signature in black ink, appearing to read "Bill de Blasio".

Bill de Blasio  
Mayor



Greetings,

As Deputy Mayor for Strategic Policy Initiatives, I work to help Mayor Bill de Blasio achieve his vision: that all New Yorkers can lead happy, healthy and productive lives.

Working with the NYC Department for the Aging, we have made it a priority for this vision to apply equally to older New Yorkers – so that they may be able to thrive as they age, in good health; safe and secure in their homes; and able to enjoy all that New York City has to offer.

Age Friendly NYC was first launched in 2007 to assess the needs of older adults using the World Health Organization's Global Age-Friendly Cities framework. As a result, several programs were developed to respond to those needs. We have made extraordinary progress in making the City work for older New Yorkers.

But, on the 10th anniversary of the Age Friendly initiative, the time has come to renew that commitment and move our work forward.

That is why I am so proud that the de Blasio administration is releasing Age Friendly NYC: New Commitments for a City For All Ages this year. The 2017 report describes our updated vision for an age-friendly city. It includes 86 initiatives spanning health and social services, housing, public spaces and transportation, public safety, communication and information, and community and civic participation.

The wisdom and experience of older adults enrich our communities and anchor our neighborhoods. With more people reaching and living beyond age 60 than ever before, it has become increasingly important to make sure this growing population has the supports and resources they need to thrive in the City they have helped to make great.

When the City becomes fairer and more inclusive, we all benefit.

Sincerely,

Richard R. Buery, Jr.,  
Deputy Mayor for Strategic Policy Initiatives



THE COUNCIL  
OF  
THE CITY OF NEW YORK  
CITY HALL  
NEW YORK, NY 10007

MELISSA MARK-VIVERITO  
SPEAKER

TELEPHONE  
(212) 788-7210

Dear New Yorker:

The New York City Council, together with Mayor Bill De Blasio, the New York Academy of Medicine and the Age-friendly Commission, has made substantial headway toward the creation of an age-friendly New York City. In recent years, the City Council has spearheaded key legislation designed to support older adults and their families, and allow seniors to age in place in their homes and communities.

As New York's senior population continues to increase, it is critical that the necessary resources are available so seniors can remain in the City. By passing the "Year of the Senior Budget" in Fiscal Year 2018, the City made a strong investment in achieving this goal. The Department for the Aging's Fiscal Year 2018 budget includes a base-lined \$23 million increase that will allow the Department to right-size its senior center budgets, eliminate the persistent waitlists for case management and homecare services, launch a new caregiver respite program, and provide weekend meals to seniors. The City Council also included \$21.8 million to extend and enhance the City's senior services, including NORCs, immigrant senior centers and social adult day care centers.

Another key component of an age-friendly New York is ensuring that seniors can age in place in safe and functional homes. To that end, the City Council passed a law requiring the Department for the Aging, in consultation with the Department of Housing Preservation and Development, to create and distribute an aging in place guide for building owners. The guide, published in 2016, offers recommendations for ways building owners can make structural modifications that promote the health and well-being of senior residents and residents of all ages. In addition, the City Council has supported handy person services for seniors again in the Fiscal 2018 Budget.

Vital to allowing older adults to age in place is the role that unpaid caregivers play in their lives. Unpaid caregivers provide critical emotional, physical, and financial support to seniors, often to the detriment of their own needs. These invisible workers act as a lifeline for many seniors in the City. In 2016, the City Council passed legislation to gain a better understanding of who these caregivers are and how the City can best support them. The results of the survey, due later this summer, will be used to create a comprehensive plan to address the needs of unpaid caregivers.

Despite the progress the City Council has made, there is still more work to do. The City Council remains committed to making New York City a city where seniors thrive. With the help of our public and private partners in the City, we intend to ensure that seniors, now and in the years to come, can continue to call New York City home.

Sincerely,

MELISSA MARK-VIVERITO  
Speaker, NYC Council

MARGARET CHIN  
Chair, Committee on Aging



To Our Fellow New Yorkers:

We have been honored to serve as the co-chairs of the Age-friendly NYC Commission, a multi-sector group of esteemed leaders representing government, business, architecture, law, arts and culture, technology, academia, health care, and social services, charged with making the City the best possible place to live and work as we age. Appointed in 2010 and then reelected in 2015 by Mayor Bill de Blasio and City Council Speaker Melissa Mark-Viverito, the Age-friendly NYC Commission has helped New York City become a global leader in the age-friendly cities movement through the development of an array of innovative pilot projects to promote healthy aging and maximize physical, social and economic participation throughout the life course.

With support from the New York Academy of Medicine, the Commission identifies priorities grounded in feedback from older New Yorkers and forms working groups to address these priorities informed by the best available evidence. Past working groups launched the Age-friendly Local Business and Age-friendly Neighborhoods initiatives, which have been replicated around the world and are often cited as best practices, as well as Agefriendly-college.org, a searchable database of educational and cultural opportunities at NYC-area colleges and universities.

The Age-friendly NYC Commission's current priorities include:

- **Housing:** improving access to home modifications to maintain independence and safety;
- **Primary Care:** increasing utilization of preventive services among older people and enhancing the delivery of primary care to address the broader determinants of healthy aging;
- **Financial Wellness:** promoting financial wellness as a core component of healthy aging;
- **Public Safety:** bridging formal and informal support networks to build community and improve perceptions of safety;
- **Media, Arts, and Culture:** catalyzing new opportunities for involvement in arts and culture and challenging ageist assumptions.

As we work to achieve these goals, we strive to:

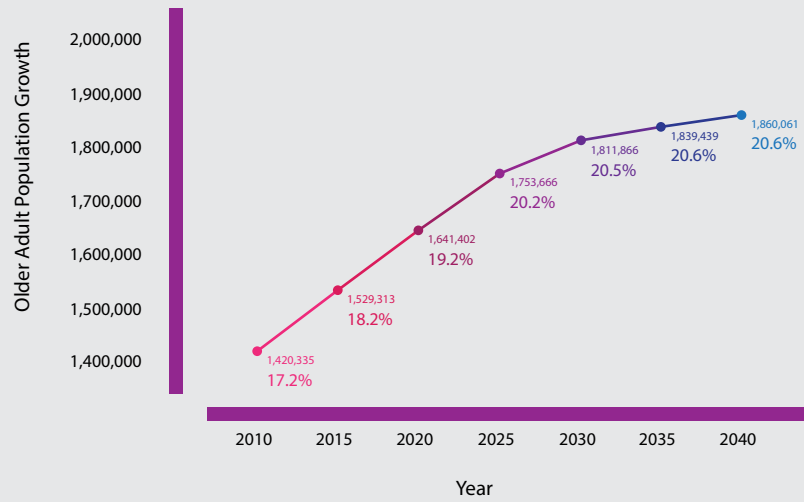
- Maximize intergenerational engagement
- Ensure the equitable deployment of resources
- Include people with dementia and their caregivers
- Leverage emerging technology where appropriate

We look forward to continued success with our City partners and hope to see an age-friendly initiative in every community district in the near future. We invite you to consider how your personal and professional networks and activities might help to advance our efforts to improve the quality of life for all New Yorkers.

Ed Lewis and Audrey Weiner

Handwritten signatures of Ed Lewis and Audrey Weiner in black ink.

## Age-Friendly Projections



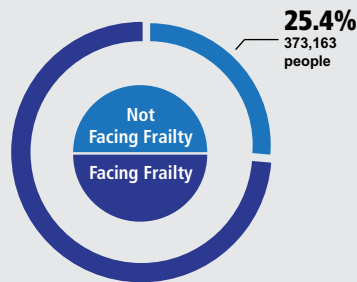
## Gender



**Female**  
58.3%  
856,258 people

**Male**  
41.7%  
613,264 people

## Facing Frailty



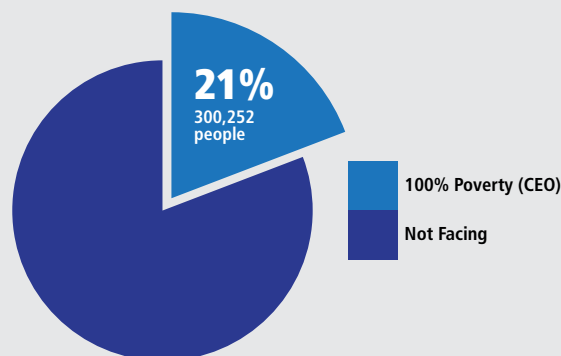
## Living Alone



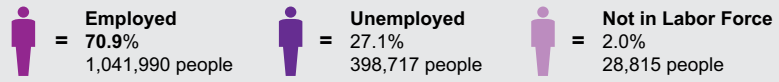
**Living Alone**  
28.9%  
424,327 people

**Not Living Alone**  
71.1%  
1,061,714 people

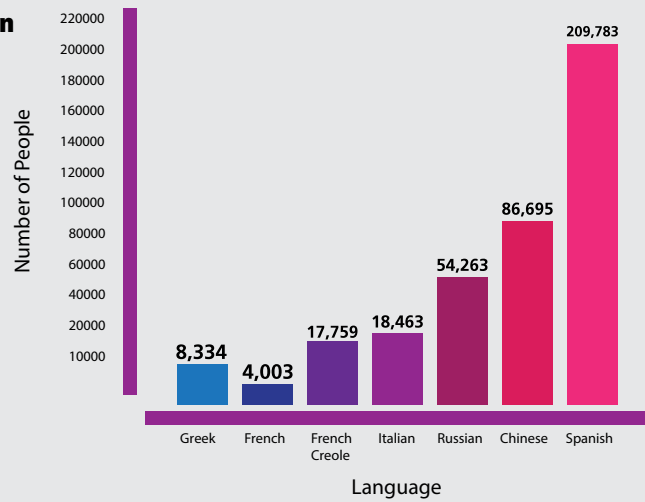
## Facing Poverty



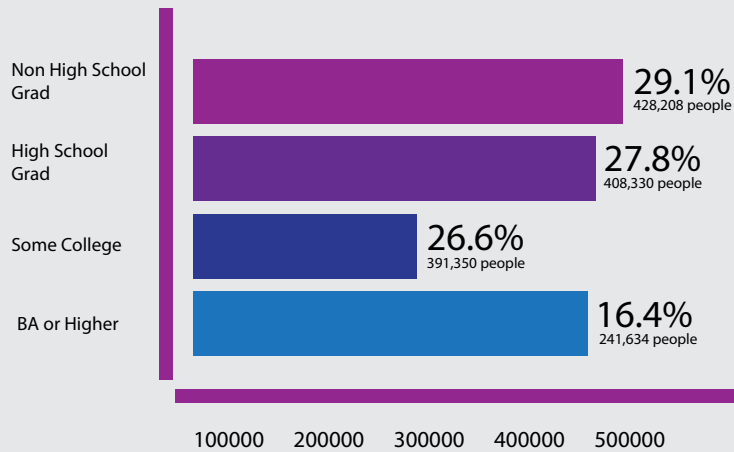
## Employment Status



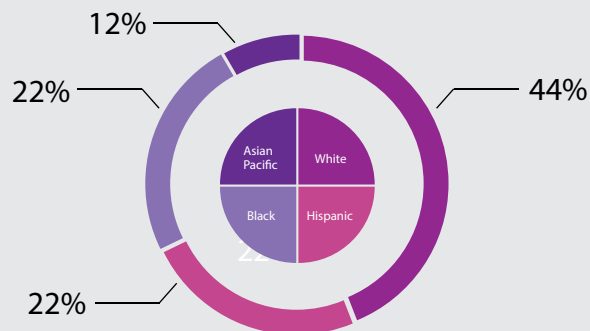
## Top Non-English Languages Spoken



## Education Level



## Race/Ethnicity



# **Introduction & History of Age-friendly NYC**

## INTRODUCTION

Under the leadership of Mayor Bill de Blasio, New York City has invested significantly in innovative programs and supports for older New Yorkers that truly make New York a city for all ages.

As New Yorkers live longer, their hard-won wisdom, experience, skills, knowledge, productivity, energy, and insights are valuable and growing resources that are helping to support our families, improve our workplaces, and strengthen communities in all five boroughs. Ethnically, culturally, and economically diverse, older New Yorkers are a vital part of the mosaic of the City. Ensuring that New Yorkers can thrive as they age benefits everyone.

The de Blasio Administration has increased funding for aging services by more than 58 percent. That is an overall increase in the baseline City Tax Levy funding of more than \$82 million. This increased funding has benefited senior centers, case management services that help homebound seniors, home-delivered meals, Naturally Occurring Retirement Communities (NORCs) that are not age-restricted housing locations that are home to significant concentrations of older adults who have aged in place, elder abuse programs, transportation services, and many other important services.

**These critically important investments will help older residents live healthier and more fulfilling lives as they age in the City they love, continuing to contribute in myriad ways to making New York a better place to grow up and grow old.**

These critically important investments will help older residents live healthier and more fulfilling lives as they age in the City they love, continuing to contribute in myriad ways to making New York a better place to grow up and grow old. By 2040, one in every five New Yorkers will be 60 or older. Supporting needed and cutting edge solutions that promote healthy aging today will enable the City to reap all of the benefits that tomorrow's older residents have to offer.

## HISTORY OF AGE-FRIENDLY NYC

Age-friendly NYC was launched in the fall of 2007 as a collaboration between the Mayor's Office, the New York City Council (Council), and the New York Academy of Medicine (Academy). Age-friendly NYC has made great strides toward assessing the City's responsiveness to the needs of older New Yorkers, developing recommendations, and implementing strategies that allow New York to enhance its status as an age-friendly city.

Age-friendly NYC builds on the work of the World Health Organization's Global Age-friendly Cities initiative, which engages



older adults and other stakeholders in cities around the world to identify the core features of an age-friendly city. Using the Global Age-friendly Cities framework, the City and the Academy conducted a comprehensive assessment of the age-friendliness of New York City. Throughout 2008 and 2009, the City and the Academy engaged older New Yorkers, City agencies, and leaders from the private, non-profit, and academic sectors to learn how the City could improve the quality of life of older residents. In August 2009, in response to their findings, the City announced 59 initiatives to make New York City more age-friendly.

The City joined with the Academy to seat the Age-friendly NYC Commission in 2010. The Commission—comprised of leaders in the business, education, civic, and non-profit sectors, among others—was charged with making recommendations on how the City might partner with these sectors and leverage their resources to enhance our age-friendly efforts. In 2015, Mayor de Blasio announced the seating of 22 new members of the Age-friendly NYC Commission. Through this public-private partnership, Age-friendly NYC builds upon continuing initiatives, such as the City’s CityBench program to increase the amount of public seating on NYC streets and Senior Splash that reserves public pool hours exclusively for older adults and offers water exercise classes geared toward seniors.

Age-friendly NYC has been recognized globally: In July 2010, the World Health Organization named New York City the first Age-friendly City under its new certification process. In 2013, Age-friendly NYC was awarded “Best Existing Age-friendly Initiative in the World” by the International Federation on Ageing.

Our new report, *Age-friendly NYC: New Commitments for a City for All Ages*, encompasses 86 initiatives that update our age-friendly plan. It communicates our ongoing success implementing initiatives launched in the 2009 plan and describes new endeavors to support New York City’s seniors.

# City Initiatives

## HEALTH & SOCIAL SERVICES



The overall increase of more than \$82 million between the last year of the prior Administration and the FY '18 budget represents a 58 percent rise in funding for aging services under the de Blasio Administration.

### 1) INCREASE FUNDING FOR ESSENTIAL AGING SERVICES

Mayor Bill de Blasio has made a strong commitment to aging services, as demonstrated by significant increases in baseline City Tax Levy funding for programs to support older New Yorkers. The overall increase of more than \$82 million between the last year of the prior Administration and the FY '18 budget represents a 58 percent rise in funding for aging services under the de Blasio Administration. This includes an increase of more than \$27 million for the NYC Department for the Aging (DFTA), the City's lead agency supporting older New Yorkers. This funding includes:

- \$10.7 million to address the home-care waitlist, a program that provides services including personal care and housekeeping for functionally impaired older adults;
- \$10 million to adjust rates for senior centers to improve service quality and accountability;
- \$4 million to establish a new program to support caregivers of older adults;
- \$1.2 million to address the case management waitlist, providing seniors who need assistance in developing a care plan and arranging for them to receive supportive DFTA-funded services; and
- \$1.2 million to provide weekend meals to senior center participants or home-delivered meals recipients.

In addition to this increased funding, Mayor de Blasio has made numerous additional investments that will directly benefit older New Yorkers. For example, he has fought to expand the affordable senior housing commitment to 15,000 units and to raise the household income eligibility level for the Senior Citizen Homeowner Exemption (SCHE) from \$37,400 to \$58,400, contingent upon legislative approval. The SCHE program provides a property tax exemption for senior citizens who own one, two, or three family homes, condominiums, or cooperative apartments. This alone would benefit approximately 30,000 households in New York City.

The NYC Council has also allocated more than \$20 million in discretionary funding annually in recent fiscal years to various initiatives to improve the lives of older people, such as enriching senior center programs serving immigrant populations, providing services to older LGBT residents in every borough, increasing arts



opportunities for senior center participants, and expanding Naturally Occurring Retirement Community (NORC) services. NORCs are residential locations—single buildings, housing developments, or clusters of buildings within a neighborhood—that are neither age-restricted nor built specifically for older adults, but have become home to significant concentrations of older adults.

## **2) SUPPORT KINSHIP CAREGIVER FAMILIES WITH HIGH NEEDS**

The Mayor’s Action Plan for Neighborhood Safety (MAP), launched in July 2014, is a coordinated effort between 10 different City agencies to improve public safety for residents at the 15 NYC Housing Authority (NYCHA) developments with some of the highest rates of violent crime in our City, all of which house senior tenants. As part of this effort, DFTA’s Grandparent Resource Center (GRC) provides information, assistance, and supportive services to those older adults who are raising grandchildren and other young relatives in the 15 NYCHA developments. Through this initiative, GRC Community Advocates work with residents and kinship caregivers for children under 18 years old, providing information, education, trainings, and peer support. The program also serves as a resource link for senior NYCHA residents to access services for older adults. The GRC Community Advocates establish support groups, conduct workshops on safety and senior issues, and provide case assistance to NYCHA senior residents. About 760 seniors and caregivers living in the NYCHA developments have already attended workshops on community safety, mental health awareness, senior scams, nutrition, falls prevention, and child/elder abuse.

MAP, led by the Mayor’s Office of Criminal Justice, is based on the premise that while law enforcement and police are a critical first response in reducing violent crime, improving safety is also about improving infrastructure, matching effective programs to individuals and families most in need, and strengthening our neighborhoods. The NYCHA developments included in this initiative are Butler, Castle Hill, and Patterson in the Bronx; Boulevard, Brownsville, Bushwick, Ingersoll, Red Hook, Tompkins, and Van Dyke in Brooklyn; Polo Grounds, St. Nicholas, and Wagner in Manhattan; Queensbridge in Queens; and Stapleton in Staten Island.

## **3) PRESERVE FEDERAL TITLE XX FUNDING FOR CRITICAL SENIOR CENTER PROGRAMS**

The de Blasio Administration joined with elected officials and senior advocates in successfully leading opposition to a proposed reduction



in Federal Title XX funding that would have had devastating consequences for senior center programs that are a lifeline for many older New Yorkers. Federal Title XX funding refers to Title XX of the Social Security Act, also referred to as the Social Services Block Grant, and allows for federal funds to be made available to states to provide community-based care for the elderly, the disabled, and children.

New York State (NYS) receives \$98 million in Federal Title XX funding annually, which is allocated to counties. Of this amount, \$66 million funds Adult Protective and Domestic Violence Services, \$5 million supports training activities for County and State staff, and \$27 million is allocated to all other services, which counties can use at their discretion to fund a variety of allowable programs. The NYS Executive Budget for State FY '18 proposed requiring that the entire \$27 million in Title XX discretionary funding be used to support child care subsidy costs. As a result, DFTA would have lost its Title XX discretionary allocation of \$17 million. In New York City, Title XX funding supports critical senior center programs, including congregate meals, case assistance, information services, health promotion activities, education and recreation programs, and transportation. The reduction of Title XX funding would have had a serious impact on older New Yorkers: 65 neighborhood senior centers across the City – representing 26 percent of the DFTA senior center network – were at risk, and 6,000 seniors per day would have lost vital nutrition, health promotion, and socialization services. As a result of strong opposition, the proposed reduction in Title XX funding did not pass in the final NYS Executive Budget for State FY '18.

**The first bill Mayor de Blasio signed into law in 2014 extended the right to paid sick leave to half a million more New Yorkers.**

#### **4) EXPAND THE RIGHT TO PAID SICK LEAVE**

The first bill Mayor de Blasio signed into law in 2014 extended the right to paid sick leave to half a million more New Yorkers. The law took effect on April 1, 2014 and applies to all workers at businesses with five or more employees, encompassing many excluded under the previous legislation that applied to businesses with 15 or more workers. Under the expanded Paid Sick Leave Law, grandparents, grandchildren, and siblings were added to the definition of family members whom workers can legally care for using paid sick time. Also, the Paid Sick Leave Law eliminated the previous phase-in period, which would have delayed coverage to workers at businesses that employ between 15 and 20 workers. As a result, 140,000 people who would have waited until mid-2015 for coverage had the right to paid sick leave as of April 2014. Approximately 85,000 of those 140,000 workers did not have a single paid sick day prior to the enactment of the expanded legislation. The NYC Department of Consumer Affairs



(DCA) enforces the Paid Sick Leave Law and launched a multi-phased public education and outreach campaign to help employers and employees understand their responsibilities and rights. The Paid Sick Leave Law is a lifeline for New Yorkers caring for an aging relative, or for aging New Yorkers caring for a relative.



## 5) SURVEY THE NEEDS OF UNPAID CAREGIVERS

In New York City, approximately 1.3 million individuals are unpaid caregivers, providing care for family members who are chronically ill, disabled, or aged.<sup>2</sup> This number could be much larger, given that people often do not think of themselves as caregivers when they assist family members by running errands, paying bills, preparing meals, picking up medications, helping with dressing, and more. The average time spent in providing care is more than 24 hours per week: essentially, a second job.<sup>3</sup> Nearly one in four caregivers spends 41 hours or more per week providing care.<sup>4</sup> The economic value of these unpaid caregivers—should these services be provided by paid caregivers—is an estimated \$470 billion per year.

In August 2016, Mayor de Blasio signed legislation requiring DFTA to survey unpaid caregivers and caregiver service providers throughout New York City to help inform a comprehensive plan to address the needs of unpaid caregivers in the City. The legislation, Local Law 97, was introduced by NYC Council Aging Committee Chair Margaret Chin, Council Member Debi Rose, and Speaker Melissa Mark-Viverito. Westat, a research firm, was hired to conduct the survey by collecting information from caregivers of the frail elderly, adults with



disabilities, and dependent young relatives. DFTA, the Mayor's Office of Operations, and Westat have met with providers who represent the specified caregiver populations. DFTA developed the survey with Westat, based on input from the Mayor's Office for People with Disabilities (MOPD), the NYC Administration for Children's Services, and community providers. Surveys were administered this spring and findings and recommendations will be issued this summer. The comprehensive plan will be developed in consultation with the NYC Human Resources Administration (HRA), MOPD, the NYC Department of Health and Mental Hygiene (DOHMH), academic experts, service providers, advocates, and other stakeholders.

## **6) ENSURE QUALITY SOCIAL ADULT DAY CARE PROGRAMMING**

Social adult day care (SADC) is a structured program that offers a protective setting to functionally impaired individuals with either a cognitive or physical frailty. Generally, these programs provide socialization opportunities, structured activities, personal care, meals, supervision, and monitoring. Additional SADC services may include activities designed to maintain and improve daily living skills, transportation, caregiver assistance, and case coordination. The environment for operating SADC programs has changed recently. The authorization of social adult day care as a Medicaid-covered benefit available through Managed Long-Term Care (MLTC) plans has led to many new SADC programs opening throughout the five boroughs. DFTA currently monitors 10 social adult day care programs that are supported by Council discretionary funding. The vast majority of SADC providers, however, are being paid by MLTC plans through the State Medicaid program. Thus, the NYS Department of Health and not DFTA, has oversight over most SADC programs.

Local Law 9 of 2015, introduced by NYC Council Aging Committee Chair Margaret Chin, required all SADC programs operating within New York City to register with DFTA, established civil penalties for violations of NYS Office for the Aging (NYSOFA) social adult day program regulations, and designated DFTA as the SADC Ombuds Office to receive comments and complaints with respect to SADCs. Since July 2015, DFTA began accepting SADC registrations and, as of June 2017, more than 330 sites have registered. In order to implement this law, DFTA has successfully developed relationships with relevant governmental entities. On the City level, these agencies include the Fire Department (FDNY), the Department of Buildings, the Department of Transportation (DOT), DOHMH, and the Human Rights Commission (CCHR). Partners on the State level include NYSOFA, the Office of the Medicaid Inspector General, the



Department of Health, and the Office of the Attorney General. Our intergovernmental partners have worked closely with DFTA's SADC Ombuds Office, as their assistance is key in addressing complaints received outside of DFTA's purview and expertise.

Senior center participants reported improved physical and mental health, increased participation in health programs, frequent exercising, and positive behavior change in monitoring weight and keeping physically active.<sup>7</sup> Participation in a senior center also helped to reduce social isolation.



#### 7) CONDUCT AN IMPACT ANALYSIS OF SENIOR CENTER PARTICIPATION

DFTA commissioned Fordham University to conduct an impact analysis to understand whether and how participation in senior center activities impacts the overall health and well-being of older New Yorkers. The 2016 study followed older adults who were participants in Neighborhood Senior Centers (NCs) and Innovative Senior Centers (ISCs), as well as older adults who had not participated in a senior center for at least one year. The NC is a type of senior center model that provides congregate meals; recreational, cultural, and health promotion activities; social services counseling; and benefits assistance. The ISC model is a more enhanced senior center model that provides robust health and wellness programming, mental health support, educational and socialization activities, and cultural and technology opportunities. In addition, some ISCs are designed to meet the needs of visually impaired older adults and LGBT seniors. Findings indicated that both ISC and NC members are achieving positive outcomes.<sup>6</sup> Senior center participants reported improved physical and mental health, increased participation in health programs, frequent exercising, and positive behavior change in monitoring weight and keeping physically active.<sup>7</sup> Participation in a senior center also helped to reduce social isolation.<sup>8</sup> The study also found that participants often have the lowest incomes, the fewest resources, the poorest health, the greatest social isolation, and the most need for services.<sup>9</sup> These senior center members experience improved physical and mental





health not only in the time period after joining a senior center but even one year later.<sup>10</sup> This is a very important finding, given the decline in health and social activity in this age group, especially among those with low incomes.<sup>11</sup> Participants cited socialization, educational programs, congregate meals, recreational activities, and exercise programs as the most common reasons for attending senior centers.<sup>12</sup>

## 8) RIGHT-SIZE SENIOR CENTERS

We are also working to ensure that all senior centers, which currently operate with varied levels of funding, have the resources they need to provide the kind and quality of programs that lead to these positive impacts. The impact analysis of senior center participation conducted by Fordham University in 2016 is one key dimension of this effort. The agency's objective is to make each of its 246 senior centers and 29 affiliated satellites a center of excellence. To accomplish this goal, DFTA is performing an extensive analysis with the NYC Office of Management of Budget to determine how to achieve greater funding parity among senior centers while promoting uniformly strong programming over time.

## 9) EXPAND THE INNOVATIVE SENIOR CENTER NETWORK

In 2014, the ISC network expanded from 10 to 16 programs citywide, providing a tremendous enhancement to the infrastructure of community-based senior services. The 16 ISCs include the nation's first-ever senior centers with programming specifically for the LGBT and visually impaired communities. Beginning in FY '15, the Administration baselined a \$2.3 million increase in funding for the six additional ISCs. ISCs have demonstrated the capacity of the senior center system to meet the demand for more comprehensive programming within the communities they serve. With additional hours, expansion of programming, use of technology, community partnerships, and shared resources, ISC services have reached a broader, more diverse audience of older New Yorkers, including those on the younger end of the spectrum.

## 10) ADDRESS THE NEEDS OF LGBT OLDER ADULTS

LGBT older adults remain one of the most invisible and at-risk populations in the nation – they are often severely isolated and disconnected from services.<sup>13</sup> Statistics indicate that LGBT older people are twice as likely to live alone as other seniors; half as likely to have life partners or significant others; and more than four times more likely to have no children to help them.<sup>14</sup> LGBT older adults are often isolated from their families since coming out, and are half as

**LGBT older adults are often isolated from their families since coming out, and are half as likely to have close relatives to depend on for help. As a result, about 25 percent of LGBT older people do not have a support system in case of an emergency.**



likely to have close relatives to depend on for help.<sup>15</sup> As a result, about 25 percent of LGBT older people do not have a support system in case of an emergency.<sup>16</sup> Because of their lack of support networks, LGBT older adults are more likely than their heterosexual counterparts to rely on service providers for care and assistance as they age.<sup>17</sup> And they are more likely to face discrimination in relation to their sexual orientation and gender identity when accessing health care and social services.<sup>18</sup>

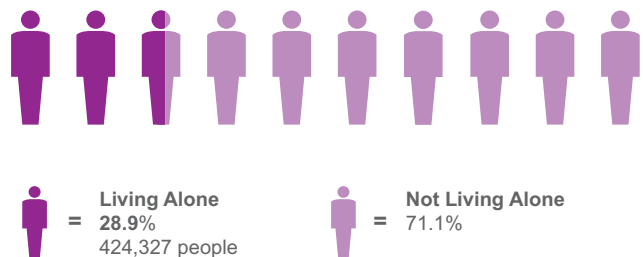
DFTA has done much work to address the needs of LGBT older adults. In addition to sponsoring the first senior center in the nation that provides services specifically for the LGBT population, DFTA conducts trainings for case management, senior center, and NORC program staff on working with LGBT older adults. The NYC Council, spearheaded by Council Member Ritchie Torres, Speaker Melissa Mark-Viverito, and the LGBT Caucus, funded Services and Advocacy for GLBT Elders to expand LGBT senior center programming throughout the five boroughs of New York City. In addition, DFTA funds a citywide program that serves the LGBT caregiving community.

### 11) EMBED MENTAL HEALTH PRACTITIONERS IN SENIOR CENTERS

First Lady Chirlane McCray released ThriveNYC: A Mental Health Roadmap for All, the most comprehensive mental health plan of any city or state in the nation, in November 2015. As part of ThriveNYC, mental health practitioners were embedded in 15 DFTA-sponsored senior centers citywide. Each month, between 1,500 and 2,200 seniors attend engagement activities, such as mindfulness meditation sessions and psychoeducational groups at the 15 senior centers. Geriatric mental health services will expand to 10 more sites starting in July 2017.

**An estimated one in five adults over the age of 50 is affected by social isolation.**

#### Living Alone



### 12) COMBAT SOCIAL ISOLATION THROUGH FRIENDLY VISITING

An estimated one in five adults over the age of 50 is affected by social isolation,<sup>19</sup> and recent research shows that the negative health consequences of chronic isolation and loneliness may be especially harmful for older adults.<sup>20</sup> As part of ThriveNYC, DFTA established



a Friendly Visiting Program within its contracted case management agencies. DFTA oversees 21 case management contracts covering all 59 Community Districts. Through the Friendly Visiting Program, services are available to case management contracts through two paths:

- 1) The launch of new programs, operated directly by case management agencies; and
- 2) The expansion of the existing City meals on Wheels friendly visiting program.

This program aims to reduce social isolation and enhance vital social connections. It also seeks to help identify more intensive physical and mental health needs, in which case, the program will connect clients to higher level intervention. Case management clients who are socially isolated are paired with trained volunteers who visit the clients regularly. Volunteer coordinators at case management programs recruit, train, and supervise volunteers. Additionally, separate guides were developed and distributed to assist both Friendly Visiting Program administrators and volunteers. Currently, more than 450 homebound older adults are receiving friendly visiting services and more than 1,000 visits have occurred.

**Providing Options to Elderly Clients Together (PROTECT) is a program that supports victims of elder abuse and neglect and helps them address their mental health issues, which in turn makes it more likely that the clients are able to deal successfully with abusive situations.**



### **13) ADDRESS THE MENTAL HEALTH NEEDS OF ELDER ABUSE VICTIMS**

Elder abuse victims have among the highest rates of severe depression and anxiety, and these mental health challenges often reduce the ability of victims to take steps necessary to seek help for elder abuse and neglect. Providing Options to Elderly Clients Together (PROTECT) is a program



that supports victims of elder abuse and neglect. Developed by DFTA and Weill Cornell Medical Center, PROTECT helps victims address their mental health issues, which in turn makes it more likely that the clients are able to deal successfully with abusive situations. DFTA, in coordination with the Mayor's Office to Combat Domestic Violence (OCDV), will work with its elder abuse services and other providers to identify people in need, and services will be available in English and Spanish, the languages spoken by the majority of identified elder abuse victims. OCDV and DFTA are also partners on the NYC Domestic Violence Task Force, launched by Mayor de Blasio in November 2016, and PROTECT is included in the recommendations issued by the task force. The FY '18 budget for DFTA includes an additional \$225,000 in baseline funding for PROTECT.

#### **14) INCREASE THE AVAILABILITY OF MENTAL HEALTH SERVICES TO HOMEBOUND OLDER ADULTS**

In an effort to increase the availability of geriatric mental health services, outreach models of care were developed to provide services where older adults reside or spend a significant amount of time, such as the Program to Encourage Active, Rewarding Lives for Seniors (PEARLS), designed by researchers at the University of Washington. In 2016, nine contracts were awarded to New York City organizations to deploy the evidence-based PEARLS model of depression care in the City. PEARLS providers work with people aged 65 and older with a special focus on those who are homebound. The key components of the PEARLS approach are problem solving treatment, social and physical activation, and pleasant activity scheduling. Depression often remains undiagnosed and untreated in older people, leading to a loss of physical, social, and mental functioning and increasing levels of disability. Evidence has shown that PEARLS reduces depressive symptoms and improves quality of life in older adults during six to eight in-home sessions. PEARLS services are free of charge.

#### **15) IMPLEMENT MENTAL HEALTH FIRST AID TRAINING FOR SENIOR SERVICES STAFF AND VOLUNTEERS**

Mental Health First Aid (MHFA) is a groundbreaking public education program designed to equip non-mental health professionals with the knowledge needed to identify, understand, and respond to signs of mental health and substance abuse challenges and crises. Through DOHMH, several DFTA staff have been trained in this technique. In turn, they are providing Mental Health First Aid training to case managers, senior center staff, and volunteers within DFTA's provider network. Participants have attested to the value of the training in improving their ability to spot potentially crippling mental health issues. DFTA will require the staff of its contracted service providers to receive Mental Health First Aid training.





## 16) ENHANCE THE CASE MANAGEMENT SYSTEM

Enhancing the case management system has been a priority for the de Blasio Administration. Case management is the entry point for DFTA-funded, in-home services such as home-delivered meals and home care. All clients receiving an in-home service funded by DFTA receive a comprehensive assessment from a case management agency. Case managers provide assessments to identify the strengths and needs of older persons, and work with clients to plan and coordinate services and resources on their behalf. In FY '16, nearly 33,000 older New Yorkers received 535,000 hours of case management, an increase of 17 percent compared to the previous year. This was the result of an investment in expanded case management staffing in order to meet the high demand for services.

An additional \$2.6 million was baselined in FY '15 to strengthen the case management system and to support the reduction of caseloads. A 2014 Fordham University study, commissioned by DFTA, determined that caseload sizes should average 65 per case manager and this funding has helped bring caseloads down to an average of 65 per case manager from nearly 80 per case manager. Also, the Administration added \$4.8 million in FY '17 and \$7.3 million starting in FY '18 to stabilize staffing for case management programs by significantly raising salaries of case managers and their supervisors. This increased funding has resulted in more competitive salaries, which helps reduce high turnover rates and improves service delivery by hiring and retaining professionally qualified staff to ensure greater continuity of care.



## 17) ASSIST LOW-INCOME OLDER ADULTS WITH BILL PAYMENT TASKS

Many case management clients face eviction, utility shut-offs, or financial exploitation. In response, DFTA instituted a Bill Payer Program to improve the financial security of frail, low-income seniors. Modeled after LiveOn NY's five-year demonstration project, the program screens and trains volunteers to assist low-income older adults with monthly bill payment tasks. The volunteers meet one-on-one with seniors in their own homes to help them organize documents, create and follow a budget, balance their checkbooks, and write checks. The participating seniors sign the checks and make all financial decisions. Seniors served by the Bill Payer Program typically live alone and without regular supports. Some are also visually impaired. The program accepts referrals from DFTA-funded case management agencies as well as other community-based organizations, NORC programs. Bill Payer Program staff also follow up as needed to coordinate services with assigned case managers or social workers and to support the volunteers.

**The home-delivered meals (HDML) program sponsored by DFTA provides approximately 18,000 meals per day to homebound older adults.**

## 18) ASSESS THE HOME-DELIVERED MEALS PROGRAM

The home-delivered meals (HDML) program sponsored by DFTA provides approximately 18,000 meals per day to homebound older adults through 23 contracts with 17 community-based organizations. DFTA is partnering with PricewaterhouseCoopers (PwC) to identify how the City can improve the efficiency and quality of the program. The vision is to build capacity and improve food service delivery across the City by broadening menu options, improving consumer choice, increasing program efficiency, controlling costs, leveraging technology, and meeting the nutritional needs of diverse constituents. PwC engaged HDML stakeholders in New York City and nationally to pinpoint what works well and what needs improvement. After extensive interviews, analysis, and fieldwork, PwC presented its findings to DFTA. DFTA is analyzing these results, which will inform the retooling of the HDML program.

## 19) ADDRESS THE DIETARY NEEDS OF SENIORS

To help senior centers and home-delivered meal programs create nutritious meals that are tailored to meet the diverse needs of older New Yorkers, DFTA developed the Simple Servings online tool. Simple Servings is a database of more than 1,000 recipes – and growing – that meet City and State nutritional standards and are culturally relevant to participants. DFTA is working on enhancements to Simple Servings to allow the creation of menus that address the specialized dietary needs of older adults with health conditions, such as diabetes and hypertension.



According to HRA, nearly 25 percent of the 1.7 million New Yorkers currently receiving SNAP are over 60 years old. Nationally, 42 percent of all older adults participate in the SNAP program. Among older New Yorkers, however, that figure has now climbed to approximately 70 percent.



## 20) IMPROVE OLDER NEW YORKERS' ACCESS TO THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM

Poverty among older adults is a deeply entrenched problem in New York City. Although more than 700,000 New Yorkers over the age of 55 have incomes low enough to qualify for public benefits that help meet their basic needs, these programs are chronically underutilized. As a result, each year vulnerable older adults are leaving millions of dollars on the table that could help them achieve stability. In September 2014, Benefits Data Trust (BDT) launched the NY Benefits Center in partnership with The Robin Hood Foundation and HRA to increase low-income seniors' access to public benefits across all five boroughs. Initially, the campaign focused just on the Supplemental Nutrition Assistance Program (SNAP), and in 2015 it expanded to include multiple benefits, including Medicaid, Home Energy Assistance Program, and the Senior Citizen Rent Increase Exemption. In the nearly three years since its inception, the NY Benefits Center has achieved significant success: To date, BDT has mailed outreach letters to 249,000 individual older adult households and has helped more than 26,500 low-income older New Yorkers apply for one or more benefits, including nearly 20,000 applications for SNAP.



According to HRA, nearly 25 percent of the 1.7 million New Yorkers currently receiving SNAP are over 60 years old. Nationally, 42 percent of all older adults participate in the SNAP program. Among older New Yorkers, however, that figure has now climbed to approximately 70 percent.

Since the start of HRA's SNAP Helps campaign in April 2015 and its companion website FoodHelp.nyc, approximately 117,000 clients have received assistance. The SNAP Helps campaign encourages New Yorkers struggling to afford food to seek help, targeting low-income older adults and immigrants. FoodHelp.nyc redirects potential clients to ACCESS NYC where they are able to determine if they qualify for more than 30 different City, State, and Federal benefits.

## **21) PROVIDE UNIQUE FOOD SERVICE PROGRAMS AVAILABLE TO SENIORS**

The NYC Department of Probation (DOP), in partnership with Food Bank For New York City and the Mayor's Fund to Advance New York City, currently operates Neighborhood Opportunity Network (NeON) Nutrition Kitchens in each of the five boroughs. NeON is a network of community organizations, government agencies, local businesses, and community residents focused on connecting probation clients who live in the target neighborhood to opportunities, resources, and services. The high cost of food, utilities, and rent can be crippling, causing more and more households and individuals, including older New Yorkers, to seek emergency food. For people on probation in need, pride and stigmatization often discourage them from seeking help at community-based soup kitchens and food pantries. Yet, they feel comfortable coming to NeON Nutrition Kitchens. These kitchens provide healthy recipes, nutrition information, and cooking demonstrations. They also distribute food to DOP clients to improve clients' understanding of a healthy lifestyle and connect our communities to a critical service. This response has grown into a community-wide initiative and a sustainable solution to combat food poverty, and many older adults have participated in NeON Nutrition Kitchens.

## **22) AMPLIFY AWARENESS OF FOOD INSECURITY AMONG OLDER ADULTS**

DFTA, together with the NYC Office of the Director of Food Policy, has focused on the pressing issue of food insecurity among older adults. Many older New Yorkers are forced to choose between paying for food, rent, medication, and other necessities. The Aging in New York Fund—the non-profit arm of DFTA—has organized public forums in the Bronx, Brooklyn, Manhattan, and Queens to raise awareness about food insecurity among older New Yorkers and to recommend





solutions. In partnership with other non-profit organizations, each forum features panelists who discuss community programs that address the issue of food insecurity.

**21% of older New Yorkers are facing poverty.**

**Facing Poverty**



 = **Facing Poverty**  
= 21%  
300,252 people

 = **Not Facing Poverty**  
= 79%

### **23) INCREASE EVIDENCE-BASED HEALTH PROGRAMMING IN THE AGING SERVICES NETWORK**

Senior centers and Naturally Occurring Retirement Communities citywide now offer national evidence-based programs that promote health and reduce the prevalence of disease among older adults. These programs are based on research and provide documented health benefits. Such programs include: A Matter of Balance, to prevent falls; Tai Chi for Arthritis, to improve movement, balance, and strength; Stay Active and Independent for Life, to reduce fall risk factors; and the Chronic Disease Self-Management Program, to build self-confidence in participants to maintain their health and manage their chronic health conditions, such as diabetes, heart disease, and hypertension. Additionally, approximately 300 older adults conduct health promotion programming for their peers at senior centers and other venues throughout the City each month. An average of 20,000 individuals per month participate in volunteer-led health programs, such as the STAY WELL exercise program to improve balance, cardiovascular health, and muscle strength; and the Keep on Track blood pressure monitoring program.

### **24) FACILITATE ACCESS TO PRIMARY CARE**

The New York Academy of Medicine is coordinating the Age-friendly NYC Commission’s Primary Care Working Group, which has launched an educational campaign to promote the Annual Wellness Visit – an underutilized Medicare benefit – in partnership with the Medicare Rights Center. For Medicare beneficiaries, the Annual Wellness Visit is a yearly doctor’s visit to create a personalized prevention plan to help older adults stay healthy. This free visit includes vaccinations, screenings, falls risk assessments, and advice and referrals to maintain health and wellness. The working group is also organizing a symposium in partnership with Healthfirst, which will address how



**NYC Health + Hospitals is the largest public health care system in the nation, serving more than 1 million New Yorkers annually, including many older adults, in approximately 70 patient care locations citywide.**

age-friendly primary care and a focus on wellness can help to address the broader determinants of health for older people and improve health outcomes.

## **25) PROVIDE EVIDENCE-BASED GERIATRIC CARE**

NYC Health + Hospitals is the largest public health care system in the nation, serving more than 1 million New Yorkers annually, including many older adults, in approximately 70 patient care locations citywide. It is comprised of a network of 11 hospitals, trauma centers, neighborhood health centers, nursing homes, and post-acute care centers. Each of NYC Health + Hospitals' 11 acute care hospitals has received Nurses Improving Care for Healthsystem Elders (NICHE) designation. NICHE is the leading nurse-driven program designed to address the complex needs of older adults. The program provides the principles, education, and tools to support health care systems in transforming and achieving patient-centered care. Each hospital in the NYC Health + Hospitals network went through an extensive education and training process. Across the system, more than 500 registered nurses have been trained to enhance their geriatric care skills and knowledge. Sites must continue to show how they are advancing the care provided to older adults and other programmatic improvements to sustain designation. There are four NICHE program implementation levels – Early, Progressive, Senior Friendly, and Exemplar – and hospitals under NYC Health + Hospitals range from Early to Exemplar. This exemplifies the City's commitment to improving care to meet the needs of older adults across the care continuum.

## **26) LAUNCH STATE-OF-THE-ART ACUTE CARE FOR THE ELDERLY HOSPITAL UNIT**

In 2017, NYC Health + Hospitals/Harlem will open the Dr. Muriel Petioni Geriatrics Center of Excellence. This state-of-the-art Acute Care for the Elderly unit, designed to meet the special needs of older adults, will provide a coordinated continuum of medical and support services for older adults. The Center will be staffed by specially trained providers and will have eight inpatient beds, a community activity/therapy room, and a rehabilitation gym for physical therapy. The unit has safety features including safety hand rails to prevent falls and color-signed hallways to encourage walking and help people find their way. Patient rooms have special lighting to ease anxiety and reduce glare. Beds will have low-height settings and bathrooms will accommodate walkers and wheelchairs and provide commodes with elevated seating.



The inpatient day room is equipped with comfortable seating to encourage socialization and participation in activity-based therapy sessions such as art, music, and other programs designed to promote cognitive functioning and prevent functional decline. Similarly, the Rehabilitation Medicine gym will be equipped to provide older adult patients with physical therapy to prevent deconditioning and muscle atrophy during their hospital stays. The gym will also be used for activities, classes, and programs designed to increase activity among older adults. The programs and activities include an Alzheimer’s caregiver program, a walking club for older adults, Tai Chi and Qigong workshops, and a dance program.

## 27) REDUCE AVOIDABLE HOSPITAL READMISSIONS

DFTA partnered with NYC Health + Hospitals for its Delivery System Reform Incentive Payment Program (DSRIP) initiative, which is part of the NYS Medicaid Reform effort. The key DSRIP objective is to reduce avoidable hospital readmissions by 25 percent over five years. DFTA’s role is to provide support and monitoring of the two providers for the care transitions program: New York Foundation for Senior Citizens, paired with NYC Health + Hospitals/Elmhurst, and Selfhelp Community Services, paired with NYC Health + Hospitals/Queens. The two providers will follow and support patients at high risk for readmission for 30 days after they are discharged. In spring 2017, both teams started working at their assigned hospitals and visiting patients in the community.

NYC Department of Health and Mental Hygiene Bureau of Vital Statistics death records 2012-2014



## 28) LEAD CITYWIDE FALLS PREVENTION INITIATIVE

Falls are common among older New Yorkers and are a leading cause of hospitalizations.<sup>21</sup> In light of this fact, the NYC Falls Prevention Coalition was established, co-led by DOHMH and DFTA. The coalition aims to promote and implement proven and promising strategies to reduce the incidence and burden of falls among older adults. The coalition regularly convenes multi-sectoral partners to foster collaborations and leverage resources toward achieving shared goals; serves as an information and resource hub for evidence-based falls prevention tools and programs for all New Yorkers, including

Falls are common among older New Yorkers and are a leading cause of hospitalizations



health and wellness professionals, older adults, and the communities where they live and work; and advocates for research, resources, programming, and policy that reduces the incidence or burden of falls. The coalition also spearheads activities and actions in support of National Falls Prevention Awareness Day.

## 29) CONNECT HEALTH CARE PROVIDERS TO AGING SERVICES PROVIDERS

In an effort to forge connections between the health care provider network and the aging provider network, DFTA has completed its blueprint for a program to begin drawing health care funds to expand aging services. The agency's Management Services Organization (MSO) was established in 2016 to offer health care providers more holistic options to better address the needs of patients through programming, such as falls prevention and chronic disease self-management classes. Through the MSO, connections between health care providers and DFTA-funded community services are facilitated with the goal of supporting older adults in living longer, healthier lives.

The MSO is beginning to market falls prevention programming to health care providers. Presently, there are 10 MSO members, all of whom are DFTA-funded aging services providers. The plan is for the MSO members to provide evidence-based falls prevention classes to health care consumers and receive a fee from the health care organizations or health plans for this work, which the aging services organizations can then reinvest in expanded and enriched services. DFTA anticipates the first inflow of health care funds to the 10 MSO members by the end of 2017 and is also determining additional products to market. The plan is to expand MSO membership in 2018 and beyond.

Through the MSO, connections between health care providers and DFTA-funded community services are facilitated with the goal of supporting older adults in living longer, healthier lives.



### **30) ESTABLISH HEALTHY AGING FELLOWS SECTION**

In June 2017, the New York Academy of Medicine launched a Healthy Aging section of the Academy Fellows to improve the health, well-being, and engagement of older people in cities through inter-professional communication and networks; community/public advocacy; leadership development; and education, research, and policy involvement. Academy Fellows are distinguished professionals in medical and health professions and other disciplines affecting health, who embody the highest levels of achievement and leadership in urban health, elected by their peers. Fellows span a wide range of disciplines including medicine, nursing, social work, public health, administration, health policy, pharmacy, dentistry, law, and government, and are academics, practitioners, and policy makers in their fields. This Fellows section brings together physicians, nurses, social workers, dentists, pharmacists, nutritionists, and other professionals working with older people, to collaborate with Age-friendly NYC.

### **31) SUPPORT SENIORS LIVING IN NEIGHBORHOOD DEVELOPMENT AREAS**

The NYC Department of Youth and Community Development administers the Federal Community Services Block Grant program to combat poverty and provide services to low-income people that empower them to become self-sufficient. The program targets funds to low-income communities it designates as Neighborhood Development Areas (NDAs). The NDA Initiative fosters community-level engagement to ensure that services address the most pressing needs of each community.

NDA programs that serve New Yorkers aged 60 and older provide a variety of support services, including social and recreational activities, exercise and nutrition programs, medical assistance and community services. Activities include social, cultural and recreational services. Programs may also offer activities such as family budgeting and consumer education; friendly visiting; health/nutrition instruction; homebound services; individual/family counseling; intergenerational interaction; respite services; and transportation services. Older New Yorkers who participate attain needed benefits and services and demonstrate positive physical, psychological, and social well-being. Participants are required to be NYC residents who meet the definition of low-income in federal income guidelines. At least 80 percent or more of participants must live within the boundaries of each NDA. Using a strength-based approach, programs work in partnership with participants to build upon existing assets to reach goals. NDA programs engage a case manager to meet periodically



with participants and refer participants, as needed. This year, NDA programs for older adults will serve about 3,600 persons in targeted neighborhoods across the City.

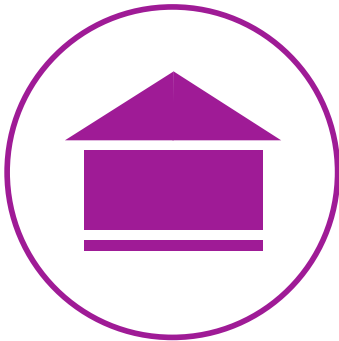
**A NY Connects office is located in each borough. Through NY Connects, from October 2015 through December 2016, more than 16,000 contacts were made citywide.**

### **32) IMPLEMENT NY CONNECTS TO PROVIDE COMPREHENSIVE INFORMATION ON LONG-TERM CARE SERVICES**

NY Connects is a statewide system that provides free, objective, and comprehensive information on long-term care services and supports regardless of age, income, disability, or diagnosis. As the Local Administrative Agency for NY Connects in NYC, which launched in September 2015, DFTA is responsible for its oversight and monitoring. In this role, DFTA works with HRA, MOPD, and other stakeholders. Services provided by NY Connects include connecting clients' families to other City and State agencies, providers, and programs; providing person-centered counseling; screening for Medicaid and assisting with benefits applications such as SNAP, the Senior Citizen Rent Increase Exemption (SCRIE), and Veterans Benefits; translation services; and making home visits if the client is homebound. A NY Connects office is located in each borough. Through NY Connects, from October 2015 through December 2016, more than 16,000 contacts were made citywide. Approximately 10,000 of these contacts were from individuals seeking services, and 4,000 contacts were from either caregivers or professionals seeking assistance for clients. Thirty percent of the contacts were for housing-related issues, such as access to assisted living and to shelters, eviction prevention, application assistance for public and other subsidized housing, and SCRIE, and other inquires related to obtaining food, receiving home care and personal care assistance, health care benefits, and legal assistance.



## HOUSING



The City's senior housing commitment has substantially increased under the de Blasio Administration.



### 33) SUPPORT AFFORDABLE SENIOR HOUSING

Older adults represent the fastest growing segment of the NYC population, and increasing the supply of affordable housing to meet their needs will become ever more important. The City has taken actions to promote a more secure housing future for older New Yorkers through the increased production of senior housing, in addition to enhanced housing supports and services. The Mayor's Housing New York five-borough, 10-year strategy includes a plan to create or preserve 10,000 units of affordable senior housing for New Yorkers. The fixed incomes of both older adults and veterans have made it difficult for these vulnerable populations to keep pace with rising rents. Under the new benchmark announced in the Mayor's 2017 State of the City address, the number of apartments in the Mayor's housing program dedicated to those earning between zero and \$40,000 per year will increase by 10,000, from 40,000 units to 50,000 units. Of the 10,000 additional units, 5,000 will house older New Yorkers and 500 will serve veterans. As a result of the new benchmark, the City's senior housing commitment has increased by 5,000, to 15,000 units of the 200,000 total units in the Housing New York plan. To date, the NYC Department of Housing Preservation and Development (HPD) and the NYC Housing Development Corporation have financed more than 4,000 senior housing units under Housing New York. In addition, the City launched the Senior Affordable Rental Apartments program in 2014 to provide financing for the construction and renovation of affordable housing for low-income older adults. The City is also funding services for older adults



through a forthcoming request for proposals, which will be issued by HRA. HPD and NYCHA are partnering to develop senior housing on NYCHA campuses. At present, three senior housing projects have been awarded through joint HPD-NYCHA procurements.

Two important City initiatives have gone through the public review process and were approved in 2016 through the tireless efforts of the NYC Council, Borough Presidents, and Community Boards: Mandatory Inclusionary Housing (MIH) and Zoning for Quality and Affordability (ZQA). MIH is a pioneering initiative to ensure that affordable housing is mandatory and permanent wherever new housing capacity is approved through land use actions. Together with the Housing New York plan, it will yield tens of thousands of affordable apartments in high-quality neighborhoods, while stabilizing those neighborhoods for years to come. ZQA enables the construction of affordable senior housing that can never be converted to market-rate housing. By modifying requirements that once favored parking lots over affordable housing, ZQA makes buildings for older New Yorkers more financially feasible and allows for improved community and outdoor spaces for tenants.

**Access to free legal services to prevent evictions will be critical for older tenants, given that approximately 40 percent of older New Yorkers are at or below 200 percent of the Federal poverty level.<sup>22</sup>**



### **34) EXPAND ACCESS TO CIVIL JUSTICE AND TENANT LEGAL SERVICES FOR OLDER NEW YORKERS**

In 2017, Mayor de Blasio and NYC Council Speaker Melissa Mark-Viverito announced plans for New York City to become the first city in the United States to implement a universal access to counsel program for all tenants facing eviction in Housing Court. When fully implemented in five years, the City will have the largest tenant legal services program





anywhere in the country. Over the next five years, the program, led by the NYC Department of Social Services, will provide expanded services to stop unlawful evictions and prevent the displacement of individuals and families; serve an estimated 400,000 New Yorkers annually by providing universal access to legal assistance for all tenants facing eviction; and continue to pursue cases in communities throughout the City where tenants are most at risk of harassment and disseminate information about available legal services. Tenants facing eviction with incomes below 200 percent of the Federal poverty level will receive full representation, while those earning more will receive legal advice and assistance. Access to free legal services to prevent evictions will be critical for older tenants, given that approximately 40 percent of older New Yorkers are at or below 200 percent of the Federal poverty level.<sup>22</sup>

**The NYC Rent Freeze Program, otherwise known as the Senior Citizen Rent Increase Exemption and Disability Rent Increase Exemption (DRIE), freezes the rent for approximately 70,000 seniors and people with disabilities.**

### **35) INCREASE OUTREACH FOR THE SENIOR CITIZEN RENT INCREASE EXEMPTION PROGRAM**

The NYC Rent Freeze Program, otherwise known as the Senior Citizen Rent Increase Exemption and Disability Rent Increase Exemption (DRIE), freezes the rent for approximately 70,000 seniors and people with disabilities. In 2014, Mayor de Blasio signed Local Laws 19 and 39, which raised the income eligibility limit for SCRIE/DRIE recipients to \$50,000 from \$29,000, authorized in the State FY '15 budget. As the enabling State legislation was scheduled to sunset, the State FY '17 budget authorized the City to continue offering SCRIE/DRIE benefits to eligible individuals earning up to \$50,000 through 2020. In 2017, the Mayor signed Local Law 24 to extend the current income eligibility limits of \$50,000 for SCRIE and DRIE until 2020.

Several other local laws were enacted to establish ombudspersons for the SCRIE and DRIE programs; provide notice to SCRIE/DRIE tenants regarding legal regulated and preferential rents; and disseminate SCRIE information with other City agency applications to older adults. The NYC Department of Finance (DOF) also worked to pass important State legislation that allows current SCRIE/DRIE recipients to be grandfathered in for renewal applications, and permits household members to take over the benefit of a deceased tenant or a tenant who permanently leaves the household.

DOF has been focused on providing exceptional customer service for these programs, improving the application process, and enrolling as many qualified tenants into the program as possible. DOF has raised awareness of the program by rebranding it as the NYC Rent Freeze Program. In partnership with elected officials, community groups, and faith-based organizations, DOF has promoted these programs



and educated people about program requirements and how to apply. DOF has overhauled all of the department's applications to make them easier to understand and complete. As a result, processing time is down to three to five days for initial applications and six to seven days for renewal applications. Along with increased outreach and the development of simpler application forms, DOF expanded the Manhattan walk-in center and is committed to ensuring all of the agency's applications and worksites are more ADA compliant, including DOF's SCRIE/DRIE walk-in centers in the Bronx and Brooklyn, which are scheduled to open soon.

### **36) REDEVELOP SITES FOR AFFORDABLE SENIOR HOUSING**

The NYC Economic Development Corporation (NYCEDC) works to cultivate dynamic, resilient communities across all five boroughs. As part of its mission is to create shared prosperity throughout NYC by strengthening neighborhoods, NYCEDC is working on redeveloping two sites for senior housing projects. One project, Baychester Senior Living, is located in the Bronx. This 12-acre site, which has been primarily vacant and underutilized for more than a century, will be redeveloped subject to all necessary approvals and will transform into an exciting new development with approximately 180 units of affordable senior housing. These units will be integrated into a pedestrian-oriented, outdoor urban retail complex complemented by more than 2.5 acres of publicly accessible open space, as well as health, fitness, business, and workforce amenities. The other NYCEDC senior housing project is Landmark Colony on Staten Island. The 44-acre site, which provided room and board to economically disadvantaged populations until 1975, is slated to be redeveloped into a 344-unit, senior housing project that includes affordable units, ancillary retail, and community space. Existing historic structures will either be rehabilitated or stabilized as arrested ruins. The project will be designed to connect to the Staten Island Greenbelt, a 2,800-acre network of open spaces. Redevelopment will transform this longtime vacant property into productive use as housing for older adults, the fastest growing segment of Staten Island's population. Construction is anticipated to begin in 2018.

### **37) BROADEN ACCESS TO AFFORDABLE HOUSING FOR LGBT SENIORS**

The City is working to increase LGBT-friendly housing and care options to ensure that LGBT older adults are treated with dignity and respect. There are two LGBT-friendly affordable senior projects in development at HPD, one in the Bronx and another in Brooklyn. Looking ahead, HPD will continue to encourage the development of affordable LGBT-friendly senior housing.

**The City is working to increase LGBT-friendly housing and care options to ensure that LGBT older adults are treated with dignity and respect.**



To promote fair and equal access to housing, CCHR collaborates with HPD on annual fair housing forums, community events, and tenant resource fairs to inform the public, including older adults, about disability access rights, combating tenant harassment, and lawful source of income discrimination.

### **38) EDUCATE OLDER TENANTS ABOUT THEIR RIGHTS TO FAIR HOUSING**

The NYC Commission on Human Rights is charged with the enforcement of the NYC Human Rights Law (NYCHRL), which is one of the most comprehensive civil rights laws in the nation. The NYCHRL provides protections in employment, housing, and public accommodation from discrimination based on an individual’s actual or perceived membership in a protected class, including race, color, age, national origin, disability, sexual orientation, among others. CCHR is also responsible for educating the public on their rights and responsibilities under the law and conducting public outreach to combat discrimination, promote understanding, and encourage positive community relations. The work of CCHR focuses on key areas of the NYC Human Rights Law, including fair and equal access to housing. Under the NYCHRL, discrimination in private and public housing, land, and commercial spaces in New York City is prohibited. Any person selling, renting, or leasing – including landlords, superintendents, building managers, brokers, and realtors – cannot discriminate because of a person’s actual or perceived protected status under the law, which includes protections for individuals from discrimination based on lawful source of income. Lawful source of income includes any Federal, State, or City public or housing assistance toward the payment of rent, such as Supplemental Security Income, Section 8, Veterans’ GI Bill, and others.

To promote fair and equal access to housing, CCHR collaborates with HPD on annual fair housing forums, community events, and tenant resource fairs to inform the public, including older adults, about disability access rights, combating tenant harassment, and lawful source of income discrimination. In addition, as part of its comprehensive public education efforts, CCHR does citywide media outreach, produces multilingual publications and materials, and conducts regular workshops on housing discrimination to landlords, real estate agents, and owners, as well as individuals, housing advocacy organizations, and community groups. CCHR’s Project Equal Access also works with community members to ensure their buildings are accessible for people with disabilities, and partners with other City agencies and local non-profits on various programs to raise awareness and educate residents about their rights.

### **39) EXPAND ACCESS TO THE SENIOR CITIZEN HOME OWNER EXEMPTION**

The Mayor and DOF have done much work to assist seniors, veterans, and people with disabilities who are homeowners through the Senior Citizen Homeowner Exemption (SCHE) and the Disability Homeowner Exemption (DHE). This is the first renewal for these



exemptions in 10 years. In advance of the application renewal deadline of March 15, 2017, DOF sent three reminder notices to all current program participants. As with any renewal process, however, some people may no longer qualify, and income may be a challenge for eligibility. In light of this, DOF is working to mitigate the impact through the passage of State legislation (S4628/A7463) sponsored by State Senator Diane Savino and Assembly Member Brian Kavanaugh, which would increase the income ceiling for SCHE and DHE from \$37,400 to \$58,400. The Mayor announced his support for this legislation and proposed resources for this expansion in the FY '18 budget. As a result, DOF anticipates that more than 32,000 older adult homeowners and homeowners with disabilities would experience an average tax reduction of \$1,752 from the expansion of SCHE and DHE programs.

**DFTA-funded NORC programs are structured to promote shared responsibility and participation in program design and operation through a partnership among older NORC residents, the NORC housing entity, a social services provider, and a healthcare provider.**

#### **40) ENRICH NATURALLY OCCURRING RETIREMENT COMMUNITY SUPPORTIVE SERVICE PROGRAMS**

Throughout the past two decades, a number of NORCs have received funding from City and State programs and private foundations to provide supportive services to older residents. These programs are called NORC Supportive Service Programs, or NORC programs. The NORC movement began right here in New York City.

DFTA-funded NORC programs are structured to promote shared responsibility and participation in program design and operation through a partnership among older NORC residents, the NORC housing entity, a social services provider, and a healthcare provider. There are five primary objectives for DFTA-funded NORC programs. All NORC programs should:

- 1) provide supportive environments that allow older adults independence as they age in place;
- 2) engage residents and facilitate connections within the community;
- 3) assess the needs of older residents;
- 4) offer supportive services based on assessments; and
- 5) build strong and meaningful communities that cultivate new roles for community members.

In 2014, DFTA awarded 28 NORC contracts in the Bronx, Brooklyn, Manhattan, and Queens; the DFTA budget for these NORC programs is \$6.7 million. These communities are located in public housing, low- to moderate-income co-ops, and low- to moderate-income



private rentals. The NORC contract awards included funding to enhance services, such as case management for homebound and non-homebound seniors, assistance with accessing public benefits, and an increased emphasis on wellness, chronic disease risk assessments, and healthcare management. In addition, the NYC Council allocated a total of \$3.85 million in FY '18 to fund NORC programs, including \$1.9 million for horizontal Neighborhood NORCs, which are typically found in an age-integrated neighborhood of one- and two-family homes as opposed to the classic NORC model that may be a single age-integrated apartment building, or a housing complex with multiple buildings.

#### 41) DEVELOP THE CITY'S FIRST HEALTH FOCUSED COMMUNITY

The historic Sea View Hospital campus on Staten Island will be the City's first health-focused, mixed-use, master-planned community to prevent or ameliorate chronic disease. The residential portion of the plan will include units set aside for older adults. The City received bids this spring in response to a Request for Expressions of Interest to redevelop the site in keeping with four evidence-based principles of healthy design: 1) providing access to healthy, locally sourced foods, 2) promoting physical activity, 3) encouraging social interaction, and 4) providing easy access to nature. This project follows the legacy of Sea View Hospital as the City's first large-scale, full-service tuberculosis hospital, regarded both for the boldness of its scale and for the significant clinical contributions it made to the ultimate widespread cure of the disease.

**"Aging in place" describes individuals who continue to live in their homes as they age rather than relocating.**

#### 42) PUBLISH AN AGING IN PLACE GUIDE TO RECOMMEND AGE-FRIENDLY RESIDENTIAL BUILDING UPGRADES

Local Law 51 of 2015 – introduced by NYC Council Speaker Melissa Mark-Viverto and Council Aging Committee Chair Margaret Chin – required the development of a guide for building owners regarding aging in place. "Aging in place" describes individuals who continue to live in their homes as they age rather than relocating. Research suggests that a majority of older people prefer to age in place<sup>23</sup> and in New York City, 96 percent of older adults are currently aging in place in non-institutional settings.<sup>24</sup> As people age, they become predisposed to multiple chronic conditions that can lead to diminished functional capacity. For older people to remain independent, their housing must accommodate their changes in ability.

DFTA issued the "Aging in Place Guide for Building Owners: Recommended Age-friendly Residential Building Upgrades" in 2016



through a collaboration with the American Institute of Architects New York Design for Aging Committee. The guide recommends residential building modifications to accommodate older tenants. By making these improvements, building owners can help residents remain in their homes as they age – safely, comfortably, and independently. While the recommendations are made with older adults in mind, many of the suggested improvements would make buildings and apartments more livable for residents of all ages. As provided in Local Law 51, the guide was developed in consultation with the NYC Department of Buildings, HPD, MOPD, and relevant housing experts from the private and non-profit sector. In addition, the Age-friendly NYC Commission’s Housing Working Group, coordinated by the New York Academy of Medicine, is assessing how older adults can access a number of the improvements identified in the “Aging in Place Guide for Building Owners.”

#### **43) REDUCE HOUSING RELATED FALL HAZARDS FOR OLDER ADULTS**

By 2030, all City contracts for providing home-based services for older adults will require an assessment for fall hazards, as per the recommendation of DOHMH. For new construction, the City will promote the adoption of universal design elements, such as grab bars, hand rails, slip-resistant floors, and lighting that reduces the risks of falls. Similarly, for existing buildings, the City will provide incentives for in-place retrofits for measures aimed at promoting safe home environments and preventing falls among older adults.

#### **44) TRAIN PROVIDERS ON HOME-BASED HEALTH AND SAFETY TOPICS FOR OLDER ADULTS**

DOHMH will offer a Healthy Homes for Older Adults training program on older adult-specific risk factors for injury and illness, and best practices for prevention. Topics include fire, falls, pests, heat illness, and medication safety. The training will be offered to health and social services providers who work with older adults in the home in order to improve their understanding of the burden of home environmental risks.

#### **45) INSTITUTE THE HOME WATER ASSISTANCE PROGRAM TO ASSIST LOW-INCOME OLDER NEW YORKERS**

The NYC Department of Environmental Protection (DEP) implemented the Home Water Assistance Program, which is an initiative to make water and sewer bills more affordable for low-income homeowners, including older adults. DEP worked with HRA to select 12,500 qualified one- to four-family homeowners who received the Home Energy Assistance Program Regular Heating



Benefit for the heating season. DEP later expanded the program to include recipients of a Regular Heating Benefit or a Senior Citizens Homeowners Exemption or a Disabled Homeowners Exemption. DEP partnered with HRA and DOF to identify more than 51,700 qualified one- to four-family homeowners who received a \$115 credit.

#### **46) ASSIST SENIOR HOMEOWNERS THROUGH THE BUILD IT BACK PROGRAM**

Build It Back was launched in 2013 to assist homeowners whose properties were damaged by Hurricane Sandy. Build It Back is funded by Federal Community Development Block Grant – Disaster Recovery funding, administered by the U.S. Department of Housing and Urban Development, and is intended to serve homeowners with recovery needs that have not been met by other disaster assistance resources. Adults aged 65 and older comprise approximately 12 percent of the Build It Back applicant pool. However, older adults accounted for 20 percent of residents in three of the most affected areas.

Build It Back launched a series of targeted campaigns to encourage homeowners with property damaged by Sandy to apply for the program and remain engaged. Older adult, low-income, and special needs households were the key target groups. In collaboration with DFTA and its non-profit partners, Build it Back went door- to-door to re-engage older applicants who dropped out of the program. A Disaster Case Manager was assigned to help applicants complete the necessary paperwork and remove any obstacles to participation. Working with the Center for NYC Neighborhoods, Build It Back stationed counselors in its offices to help homeowners with a range of legal and housing financial challenges related to their housing recovery. The counselors helped applicants with financial planning, avoiding accruing debt burdens, cancelling loans received after the storm that were never used, reconciling recovery benefits, and addressing mortgage payment delinquency to prevent foreclosure. Nearly 4,500 applicants have received counseling, and more than 60 percent of applicants counseled were over 55 years of age. Build It Back offers a range of services to help homeowners obtain temporary housing while their homes are being elevated or rebuilt. Many of Build It Back's older applicants require specialized support offered by the program, which includes apartment leasing, direct rent payments, and assistance moving back in. In addition, Build It Back worked with the New York Disaster Interfaith Service Unmet Needs Roundtable



to help fill gaps in federal disaster recovery funding for older adults on fixed incomes and other under-resourced households. Overall, the Unmet Needs Roundtable provided funding to more than 2,000 residents affected by Sandy.

#### **47) ENGAGE HOME IMPROVEMENT CONTRACTORS IN BEST PRACTICES**

The NYC Department of Consumer Affairs (DCA) distributes a tip sheet that provides recommendations for home improvement contractors to consider the special needs and circumstances of older adults when making repairs, and how they can help older New Yorkers live more safely at home. It is available online in English and Spanish. DCA also distributes the tip sheet as part of the Home Improvement Contractor license application packet at the DCA Licensing Center and NYC Small Business Support Center.





## PUBLIC SPACES & TRANSPORTATION

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### 48) PROMOTE USER-FRIENDLY AND SAFE ENVIRONMENTS FOR ALL THROUGH UNIVERSAL DESIGN

The Mayor’s Office for People with Disabilities released the Inclusive Design Guidelines, New York City, Second Edition (IDG) in 2017, in collaboration with the International Code Council. The aim of the IDG is to create more user-friendly and safe buildings and landscapes that improve the quality of life for everyone – including children, older adults, and individuals with disabilities. The IDG offers technical guidance to help designers produce multisensory enhanced environments that accommodate the diverse range of physical and mental abilities of people of all ages. Recommendations in the IDG can be applied for all use and occupancy classifications, particularly residential and commercial buildings. The second edition of the IDG is an expansion and refinement of the first edition published in 2010. Recommendations in the second edition of the IDG include an emphasis on automation, accessible pedestrian systems, scooter usage, and active design.



### 49) EXPAND TRANSPORTATION OPTIONS FOR SENIORS

Working with DOT, DFTA and MOPD have received a grant of \$1.8 million over three years from the Federal Transportation Administration to test an innovative program for older people and adults with disabilities. This pilot program will provide easily accessible door-to-door transportation to meet participants’ wide range of transportation needs while helping them to avoid social isolation. Eligible riders in three target areas of the Bronx, Brooklyn, and Queens will be able to use a transportation app to access a car



service 24/7 to travel anywhere in the City. Each rider is eligible for up to \$1,000 in rides spread over a year. Riders can also access the service through a dispatcher if they prefer. DFTA is testing whether a customer-sensitive travel option can be offered cost-effectively while expanding the riders' access to the type of transportation that they need, when they need it. DFTA will conduct the three-year pilot between 2018 and 2021.

**In 2014, TLC created a proposal to introduce wheelchair accessible green and yellow taxis into the City's fleet over time.**

#### **50) ENSURE NEW YORKERS WHO USE WHEELCHAIRS CAN EASILY ACCESS FOR-HIRE VEHICLE SERVICE**

Increasing access to the NYC Taxi and Limousine Commission's (TLC's) fleet of more than 110,000 licensed vehicles is an important step to make New York City truly accessible to all of our residents and visitors, including those who use wheelchairs. In 2014, TLC created a proposal to introduce wheelchair accessible green and yellow taxis into the City's fleet over time. To reach the for-hire vehicle (FHV) sector (liveries, car services, and luxury limousines)—which today transports at least 400,000 passengers each day—TLC has proposed a new accessible service requirement. Over the course of several years, FHV companies, which include popular ride-hailing apps, would be required to dispatch a gradually increasing share of trips to wheelchair accessible vehicles until they reach at least 25% of trips. This program would help ensure accessible vehicles are regularly on the road and available to pick up passengers who use wheelchairs in a reliable and timely manner. Following a public comment period and hearing, the TLC Board of Commissioners will vote on the new service requirement.

#### **51) ENABLE NEW YORKERS WHO USE WHEELCHAIRS ANYWHERE IN THE FIVE BOROUGHS TO HAVE A TAXI DISPATCHED TO THEIR DOORSTEP**

TLC launched Accessible Dispatch as a 24/7 accessibility program to connect New Yorkers who use wheelchairs and other mobility aids with accessible taxis. The program allows passengers to book a taxi for on-demand or reservation-based service by either calling the dispatcher directly, calling the City's 311 system, or by using a web booker, text messaging, or a smartphone app. Passengers pay the metered fare for the trip with no extra costs. The Accessible Dispatch program accounts for more than 6,000 trips every month and continues to grow.

Currently the program dispatches taxis to passengers for trips that begin in Manhattan. Later this year, TLC will expand service by launching the Citywide Accessible Dispatch program, which would enable passengers who use wheelchairs and other mobility aids to



request trips in yellow and green taxis originating anywhere in the five boroughs. With this expanded coverage area and additional accessible vehicles, New Yorkers and visitors who use mobility aids will be able to access the City like never before.

**Parks Without Borders will create more welcoming entrances, make park boundaries greener and more comfortable, and enhance sight lines to improve safety and accessibility for all, including older adults.**

## **52) IMPROVE OLDER ADULT ACCESS TO PARKS**

The NYC Department of Parks and Recreation (NYC Parks) is the steward of nearly 30,000 acres of land – 14 percent of New York City – including more than 5,000 individual properties ranging from beaches and parks to community gardens and Greenstreets. Parks Without Borders is a new vision to better connect parks and public spaces to their communities. This approach redesigns the areas where parks meet streets and sidewalks. Parks Without Borders will create more welcoming entrances, make park boundaries greener and more comfortable, and enhance sight lines to improve safety and accessibility for all, including older adults. Rethinking and redesigning these spaces will create new centers of community activity out of the underused areas next to parks. With input from thousands of New Yorkers, NYC Parks selected eight showcase projects in May 2016. These eight sites will share \$40 million in capital funds to fulfill the Parks Without Borders vision. An additional \$10 million will be used to incorporate these designs into ongoing projects. In the coming years, NYC Parks will incorporate the Parks Without Borders into the design process for all new and renovated sites.



## PUBLIC SAFETY



**The Vision Zero action plan is the City's blueprint for preventing traffic related injuries and deaths on our streets. While older adults aged 60 and older comprise 18 percent of the City's population, they account for almost half of pedestrian fatalities.**

### **53) EXPAND MULTI-DISCIPLINARY TEAMS TO RESPOND TO COMPLEX ELDER ABUSE CASES**

Multi-Disciplinary Teams, or MDTs, include groups of professionals from diverse disciplines who together provide comprehensive assessments and consultation on elder abuse cases. Currently, Weill Cornell Medical Center, which has been a leader in the development of the MDT model, operates teams in Manhattan and Brooklyn. The teams have shown great success in addressing particularly complex elder abuse cases that involve coordination among multiple organizations, including District Attorneys, the NYC Police Department (NYPD), DFTA, OCDV, HRA's Adult Protective Services (APS), medical centers, financial institutions, and a myriad of community-based organizations that include legal providers and elder abuse programs. The teams meet regularly and develop solutions to individual cases using a coordinated, community-based approach to handling elder abuse. Beginning in FY '17, \$1.5 million was baselined in the DFTA budget to expand MDTs from the current two boroughs to all five boroughs by FY '19. This expansion will vastly strengthen the City's ability to address complex cases in a coordinated fashion, which is essential to resolving the interrelated social, financial, criminal, and legal challenges found in these most complicated of elder abuse cases.

### **54) IMPLEMENT VISION ZERO INITIATIVES THAT FOCUS ON OLDER NEW YORKERS**

The Vision Zero action plan is the City's blueprint for preventing traffic related injuries and deaths on our streets. While older adults aged 60 and older comprise 18 percent of the City's population,<sup>25</sup> they account for almost half of pedestrian fatalities.<sup>26</sup> The disproportionate burden of pedestrian fatalities among older adults contributed to an increase in education and enforcement efforts focused on older adult safety. Vision Zero initiatives include partnering with senior centers to obtain specific feedback from older adults about street safety improvements, and launching a senior outreach and enforcement campaign.

### **55) INCREASE EDUCATION AND OUTREACH TO COMBAT ELDER ABUSE**

Elder abuse is an issue that presents particular challenges, given that it involves the violation of a trusted relationship. Like domestic violence, elder abuse is difficult to combat because it often remains hidden. To address these challenges, the NYPD has designated precinct-based Domestic Violence Units to be the community liaisons in response to elder abuse. The Domestic Violence Unit within each

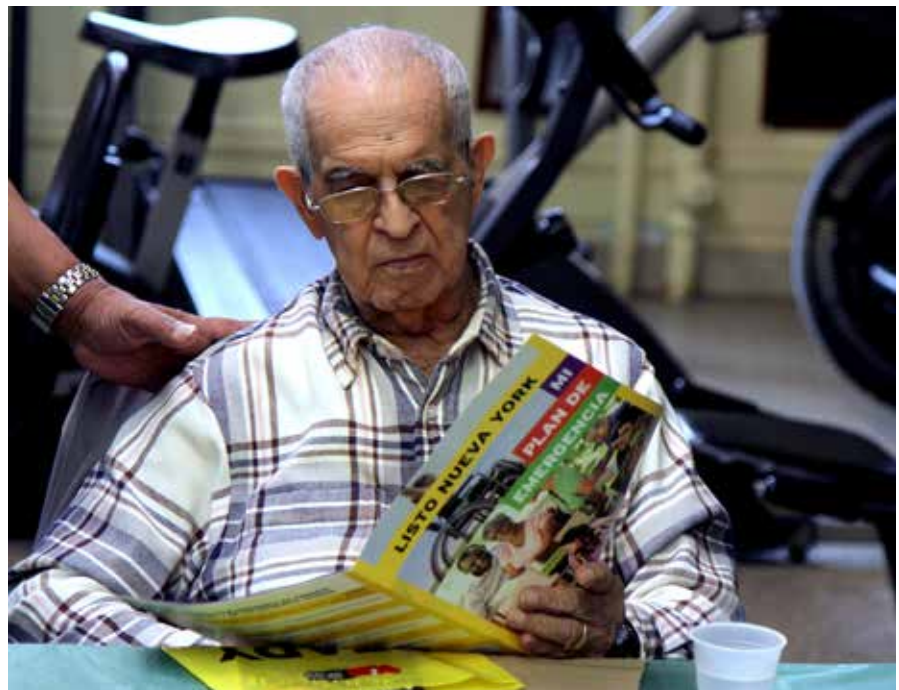


precinct serves as the precinct-based point of contact for APS, DFTA, elder abuse services providers, and the public.

The NYPD has informed police officers about the roles and resources of APS and DFTA as partners of law enforcement. Additionally, the NYPD is working with elder abuse prevention advocates to create a roll call training video to assist police officers in identifying the common signs of elder abuse.

#### **56) ENHANCE PROCESS OF LOCATING SENIORS WHO ARE REPORTED MISSING**

Silver Alert, borne out of an age-friendly collaboration between DFTA, the NYPD, NYC Emergency Management (NYCEM), and the NYC Council, is a public notification system for missing older adults with certain cognitive impairments. When a person aged 65 and older with a cognitive impairment such as Alzheimer’s disease is reported missing and deemed to be in imminent danger of physical injury or death, the NYPD initiates a protocol through which a wide audience, including media outlets, senior services providers, medical facilities, and community organizations, is notified so the public may assist police in searching for the missing older adult. Notifications are also sent to subscribers of the City’s Notify NYC emergency notification system. Additionally, the NYPD is exploring the use of GPS and other technology to enhance the process of locating older adults who are reported missing.



## **57) FOCUS ON OLDER ADULTS DURING EMERGENCY PLANNING**

NYCEM plans and prepares for emergencies, educates the public about preparedness, coordinates emergency response and recovery, and collects and disseminates emergency information. Every year, NYCEM organizes a symposium that focuses on emergency planning for people with access and functional needs, including older adults and people with disabilities. The symposium brings together service providers, consumers, advocates, and community stakeholders to specifically address planning for people who require a higher level of support during emergencies. In addition, NYCEM hosts quarterly Access and Functional Needs Working Group meetings, which cover updates specific to this population, fostering a mindful and inclusive approach to emergency planning for all.

## **58) PROMOTE FIRE SAFETY EDUCATION AMONG OLDER ADULTS**

The NYC Fire Department is the largest fire department in the United States, responding to more than a million emergencies every year. Since its inception, the FDNY has helped lead efforts to make NYC the safest big city in the nation. The FDNY also works to continually educate the public in fire safety, life safety, and disaster preparedness. In 2016, the FDNY recorded 48 fire deaths – the lowest number in NYC history. Of those deaths, 21 – or more than 40 percent – were older New Yorkers aged 65 or older. Older adults are disproportionately likely to suffer as a result of a household fire in comparison to the overall population. The FDNY is committed to disseminating life-saving knowledge to communities, and particularly older adults, about fire prevention and emergency preparedness through the Fire Safety Education program. In 2016, the FDNY provided more than 260 older adult-focused Fire Safety Education events, seminars, and workshops, reaching more than 40,000 individuals aged 65 and older. The Fire Safety Education presentations cover various topics, including smoke alarm installation and maintenance, emergency preparedness, and cooking safety. More information about the FDNY's fire and life safety education program is available at <http://www.fdnysmart.org>.

## **59) PROTECT OLDER ADULTS FROM EXTREME HEAT**

Heat adaptation is a key priority for the de Blasio Administration, and the Mayor's Office of Recovery and Resiliency (ORR) continues to develop strategies to mitigate the effects of rising temperatures in our communities. More Americans die from heat waves every year than from all other natural disasters combined.<sup>27</sup> Each summer, NYC experiences



an average of 450 heat-related emergency department visits, 150 heat-related hospital admissions, 13 heat-stroke deaths, and about 115 excess deaths from natural causes exacerbated by heat.<sup>28</sup> Variation in our densely built environment results in disparate local-level heat risks, which are disproportionately borne by our most vulnerable New Yorkers, including older adults, those with poor health, and those who do not have access to air conditioning. DOHMH developed a Heat Vulnerability Index and the resulting map has given the Mayor a charge to mitigate heat citywide, with a thoughtful targeting of those most at-risk.



In 2017, NYCEM launched the Community Emergency Planning Toolkit. The toolkit has been introduced to local community organizations, including aging services providers, throughout the five boroughs and outreach about the toolkit is ongoing. The toolkit addresses various hazards, including extreme heat, and provides guidance on ways communities can mitigate the negative effects of these hazards at the local level. In addition, NYCEM is working with DOHMH as well as DFTA to launch an extreme heat awareness campaign. The campaign, through local outreach and print ads, will feature older adults and will highlight heat safety tips, and is targeted to launch in summer 2017.

**Home Health Aides (HHAs) play a critical role in protecting our City's most vulnerable residents by providing critical health services inside their homes and are important partners in the City's efforts to protect at-risk New Yorkers.**

### **60) LAUNCH CLIMATE RISK TRAINING FOR HOME HEALTH AIDES**

Hot and humid summer weather can cause heat illness and even death. In New York City, DOHMH examined death records from 2008-2011 and found that about 85 percent of NYC heat-stroke deaths happened after exposure to heat inside the home. Many victims were exposed to heat inside homes that lacked access to or did not use air conditioning. Older adults, those with chronic medical conditions or mental health conditions, and certain other groups are most vulnerable. Those who are socially isolated or homebound are also at risk. Cooling centers are open across the City during serious heat waves. However, published studies and City data suggest that many New Yorkers, including those most vulnerable to heat illness, prefer to stay at home during hot weather even if they cannot stay cool there, instead of visiting a cool place like a library, a friend's home with air conditioning, or a City cooling center. Due to current and future risks in light of our changing climate, the City needs strategies to reach heat-vulnerable populations inside their homes. Studies show that indoor home temperatures can be 20°F higher than outdoor temperatures in the absence of air conditioning, and that indoor exposures to heat exceed the comfort range among older adult occupants.

Home Health Aides (HHAs) play a critical role in protecting our City's most vulnerable residents by providing critical health services inside their homes and are important partners in the City's efforts to protect at-risk New Yorkers. Due to established relationships between aides and clients, HHAs can be trusted messengers in communicating health risks and promoting protective measures inside the home. Starting in 2017, the City is partnering with home care agencies to promote heat-health messages to New Yorkers and engage HHAs as key players in building climate resiliency. To this end, the City developed a heat-health module for continuing education trainers that will be offered as part of the standard curriculum by three key home care employers.





Through these employers, the City’s continuing education curriculum aims to reach nearly 8,000 HHAs, who will be trained to identify clients that are at highest risk, understand that medicines can affect the body’s ability to respond to heat, and understand ways to prevent heat-related illness and death. Most importantly, HHAs will learn to identify barriers that prevent their clients from staying cool and can connect the most vulnerable New Yorkers to the array of City services.

#### **61) ENCOURAGE NEW YORKERS TO CHECK ON OLDER ADULTS AND OTHER AT-RISK NEIGHBORS THROUGH BE A BUDDY NYC**

Be a Buddy NYC is a community-led preparedness model that promotes social cohesion. The City is investing \$930,000 to launch this health-based initiative, which is a two-year pilot that will promote community resiliency during extreme heat and other weather emergencies in key heat-vulnerable communities. South Bronx neighborhoods have among the highest rates of heat illness and death in New York City.<sup>29</sup> Central Brooklyn and Central and East Harlem are also highly vulnerable to heat impacts.<sup>30</sup> Be a Buddy NYC is an interagency partnership between DOHMH, ORR, and NYCEM to address heat-related health impacts by enhancing the response capacity, climate preparedness, and communication tools of local community-based organizations, while increasing neighborhood volunteerism through the creation of buddy systems. The City will work with each neighborhood to foster buddy systems between social service and community organizations, volunteers, and vulnerable New Yorkers, to be deployed during emergencies to conduct telephone and, if necessary, door-to-door and building level checks on vulnerable individuals.

Over the next two years, Be a Buddy NYC will implement protective measures against heat-related illnesses by:

- 1) Training community organizations and volunteers on emergency protective measures and ways to assist vulnerable adults; and
- 2) Engaging communities to identify alternative neighborhood resources for staying cool and to communicate protective health messages to hard-to-reach populations via trusted messengers.

#### **62) PROMOTE FINANCIAL HEALTH AND WELL-BEING**

The Age-friendly NYC Commission’s Financial Health and Wellbeing Working Group, coordinated by the New York Academy of Medicine, is organizing a symposium in early 2018 in partnership with the Global Coalition on Aging and AARP. The symposium will focus on the role of business, government, and the community in ensuring financial security and promoting financial literacy and wellness in later life.



### **63) ESTABLISH A RETIREMENT SAVINGS PROGRAM FOR PRIVATE SECTOR EMPLOYEES**

Mayor de Blasio, in partnership with NYC Council Speaker Melissa Mark-Viverito and Public Advocate Letitia James, announced that New York City is working to become the first city in the country to create a retirement savings program for private sector employees. Fewer than half of all working New Yorkers have access to a retirement savings plan, and individuals who are low-income earners, immigrants, people of color, and women are disproportionately affected by this gap.<sup>31</sup> Even those who have started to save do not have much: 40 percent of New Yorkers between the ages of 50 and 64 have less than \$10,000 saved for retirement.<sup>32</sup> To simply live at poverty level for a 15-year retirement, a New Yorker would need approximately \$215,000 in savings.<sup>33</sup>

Mayor de Blasio, Speaker Mark-Viverito, and Public Advocate James have partnered on legislation that would enable any New Yorker working at a business with 10 or more employees to enroll in an employee-funded retirement plan. Contributions would be exclusively from employees and made through payroll based on a default rate. Employees would have the ability to change their rate or opt out of the program. Also, employees would be able to transfer the savings account from job to job. Council Member Ben Kallos and Public Advocate James introduced legislation to implement the retirement savings program for public sector employees, as well as establish a retirement savings board to oversee this program.

### **64) EDUCATE OLDER NEW YORKERS ABOUT FRAUD**

The NYC Department of Consumer Affairs protects and enhances the daily economic lives of New Yorkers. Given the unique consumer challenges older adults face, DCA has worked to educate older New Yorkers about common frauds and financial issues and where they can turn for help. In partnership with DFTA, DCA distributes a “Be a Savvy Senior” guide. This guide offers tips to help protect older adults from identity theft, frauds, scams, and deceptive advertising practices. Topics include reverse mortgages, home improvement scams, and sales schemes. It is available online in English at <https://www1.nyc.gov/assets/dca/downloads/pdf/consumers/Senior-Savvy-Tips.pdf>. In addition, DCA distributed the guide to more than 800 attendees at events geared to older adults in 2016.

Local Law 100 of 2016, introduced by NYC Council Member Chaim Deutsch, required DCA to provide older adults with outreach and education regarding consumer protection issues. As provided in the legislation, DCA collaborated with DFTA to create “Consumer

**Given the unique consumer challenges older adults face, DCA has worked to educate older New Yorkers about common frauds and financial issues and where they can turn for help.**



Protection Tips for Older Adults,” which is available online in English, Arabic, Bengali, Chinese, Haitian Creole, Korean, Russian, and Spanish at <https://www1.nyc.gov/site/dca/consumers/older-adults.page>. DCA also distributed this educational material to more than 700 older adults at outreach events in 2017.

#### **65) TARGET EQUITABLE AND LOCALIZED DEPLOYMENT OF RESOURCES FOR OLDER ADULTS**

The Age-friendly NYC Commission’s Public Safety Working Group is overseeing a new collaboration between the New York Academy of Medicine and the City University of New York Center for Urban Research to create IMAGE-NYC, an open-source interactive map of the current and projected aging population in NYC. Funded by the Fan Fox and Leslie R. Samuels Foundation, this map will facilitate more informed planning and more equitable and localized deployment of resources for older people by government agencies, elected officials, health care and supportive service providers, researchers, and funders in New York City. In addition, by providing location-specific, relevant information, this map will help to catalyze connections within and between sectors, institutions, and individuals leading to increased social cohesion, which supports aging in place and community resilience.

**While the Vision Zero action plan seeks to prevent traffic-related injuries and deaths across all age groups, the fact that people aged 60 or older account for almost half of pedestrian fatalities contributed to increased education and enforcement efforts in senior centers, NORCs, and other places that serve older New Yorkers.**

#### **66) CONDUCT OUTREACH TO OLDER ADULTS ABOUT TRAFFIC SAFETY**

While the Vision Zero action plan seeks to prevent traffic-related injuries and deaths across all age groups, the fact that people aged 60 or older account for almost half of pedestrian fatalities contributed to increased education and enforcement efforts in senior centers, NORCs, and other places that serve older New Yorkers. According to data, older adults are not more likely to be struck while walking than other pedestrians. However, if an older pedestrian is struck by a vehicle, the individual is more likely to be severely injured or killed.<sup>34</sup> Also, older New Yorkers walk much more than older adults living elsewhere in the nation, and their pedestrian fatality rate is four times that of younger New Yorkers.<sup>35</sup> In light of this data, older adults are key in highlighting areas where real engineering changes are needed. The DOT Safety Education team works with approximately 100 locations each year to do outreach to older New Yorkers and gather information about street safety improvements. DOT also issues a safety magazine geared toward older adults.

Under Vision Zero, priority locations are identified based on data regarding the number of pedestrians killed or seriously injured at those locations. In areas with high crash histories and high concentrations



of pedestrians and drivers, a two-pronged effort is implemented. Members of DOT's Street Team target people using all modes of transportation in specific geographic locations, distributing flyers and engaging the public about the initiative. The NYPD is involved in providing foot patrol during the education effort. This is followed by a period of enforcement by the NYPD, which targets the most common driving and cycling violations. NYPD and DOT Street Teams visited more than 350 priority locations since the launch of Vision Zero and distributed 1.7 million educational flyers. In the third year of the Vision Zero Street Teams effort in 2016, DOT and NYPD focused on areas with high concentrations of older New Yorkers and along truck routes. DOT Safety Education also visited nearly 200 senior centers at priority locations as part of Vision Zero outreach. Additionally, DOT and DFTA collaborated and developed "Streetwise," an educational program featuring older adults in their communities, which includes a discussion of how to prevent dangerous driving within their neighborhoods.

#### **67) FOCUS ENFORCEMENT AGAINST DANGEROUS DRIVING BEHAVIOR IN AREAS WITH HIGH POPULATIONS OF OLDER ADULTS**

NYPD officers target enforcement against motorists observed committing Vision Zero hazardous offenses, and in particular, failure to yield. This enforcement is concentrated within areas with high populations of older residents, based on data provided by DFTA. These efforts are preceded by outreach to participants at local senior centers to identify locations where high rates of violations are observed. The NYPD's focus on consistent and predictable enforcement deters reckless driving, prevents crashes, and saves lives. In 2016, 60 percent of all traffic violations that NYPD issued were for Vision Zero hazardous violations.<sup>36</sup> More than 42,000 summonses were issued to motorists who failed to yield to pedestrians in the crosswalk, a marked increase from the time prior to Vision Zero. NYPD officers issued approximately 137,000 speeding summonses in 2016. They also issued 1,900 summonses and made nearly 40 arrests of drivers who struck a pedestrian or cyclist in violation of the Right of Way law.

#### **68) REDESIGN SAFER STREETS FOR OLDER NEW YORKERS**

The comprehensive Vision Zero strategy is intended to address the safety of older adults. For instance, the Left Turn Study DOT issued in 2016 found that half of those who are killed by a left-turning vehicle are aged 67 or older. DOT launched the Left Turn Traffic Calming pilot at more than 100 locations across the City in 2016. The Left Turn Traffic Calming treatments have proven effective at slowing vehicle turns, which improves safety for all pedestrians, especially older





pedestrians who are more likely to be severely injured or killed if struck by a vehicle. In addition, DOT began testing raised crosswalks at two intersections in the Bronx and Brooklyn. Raised crosswalks increase the profile and visibility of all pedestrians at intersections, providing a particular benefit to older New Yorkers, children, and people who use wheelchairs. Also, raised crosswalks force motorists to slow down before entering intersections, providing a safety benefit to everyone. DOT is monitoring the effectiveness of this treatment to determine whether it would be effective at other City locations.

Completing more than 240 safety engineering projects since January 2014, DOT has achieved unprecedented progress under Vision Zero. These redesigns make streets safer by simplifying complex intersections, narrowing lanes, making pedestrians and cyclists more visible, and shortening pedestrian crossing distances. In 2016, DOT implemented more than 100 of these safety engineering projects – more than ever before. DOT also installed approximately 770 leading pedestrian intervals in 2016, resulting in a total of nearly 1,250 intersections made safer under Vision Zero, allowing pedestrians extra dedicated time to cross the street before traffic is released.

#### **69) ANALYZE PATTERNS OF TRAFFIC-RELATED RISK AND INJURY AMONG OLDER NEW YORKERS**

DOHMH produces and publishes Epi Data Briefs, short publications that highlight data findings from varying agency programs and topics. In March 2017, DOHMH issued three NYC traffic safety-related Epi Data Briefs. The topics were motor vehicle occupant fatalities,



pedestrian fatalities, and driving and self-reported dangerous driving behaviors. According to the Epi Data Brief on pedestrian fatalities in NYC between 2012 and 2014, older adults aged 65 and older had the highest pedestrian fatality rate (5.7 per 100,000 population) compared with children and adults aged 18 to 64.<sup>37</sup> Among older adults, the fatality rate was higher among males than among females.<sup>38</sup> Asian/Pacific Islander older adults had the highest fatality rate among all race and ethnicity groups.<sup>39</sup> By borough, the fatality rate was highest among older adults living in Brooklyn.<sup>40</sup> More than half (57 percent) of older adult pedestrian fatalities resulted from a crash that occurred within 10 blocks of home.<sup>41</sup> DOHMH will continue to analyze patterns of traffic-related risk and injury among older New Yorkers.



## COMMUNICATION & INFORMATION



### 70) PROTECT EMPLOYEES WITH CAREGIVING RESPONSIBILITIES FROM WORKPLACE DISCRIMINATION

Local Law 1 of 2016, introduced by Manhattan Borough President Gale Brewer and NYC Council Member Debi Rose, prohibits in New York City employment discrimination based on an individual's actual or perceived status as a caregiver. The law provides protections against discrimination in the workplace for:

- 1) People providing direct and ongoing care to children under the age of 18;
- 2) People caring for parents, siblings, spouses, grandparents, or grandchildren, among other relatives, with a disability who rely on them for medical care or to meet their needs of daily living; or
- 3) People caring for people with disabilities who live with them and rely on them for medical care or to meet their needs of daily living.

The law applies to employers with four or more employees and protects job applicants with caregiving responsibilities as well as current employees. For New Yorkers caring for the 1.8 million children under the age of 18, 1 million people aged 65 and older, and approximately 900,000 people with disabilities,<sup>42</sup> the law makes it easier to file workplace discrimination claims under the NYC Human Rights Law. Previously, employees who were discriminated against for having caregiving responsibilities had to file a claim of gender discrimination, based on unlawful stereotypes regarding the caregiving responsibilities of members of a particular gender. Now, those employees are directly protected under one of the strongest human rights laws in the country. Charged with enforcing the NYC Human Rights Law and educating the public about protections under the law, the NYC Commission on Human Rights (CCHR) created educational materials for both employers ([http://www1.nyc.gov/assets/cchr/downloads/pdf/materials/Caregiver\\_FactSheet-Employer.pdf](http://www1.nyc.gov/assets/cchr/downloads/pdf/materials/Caregiver_FactSheet-Employer.pdf)) and employees ([http://www1.nyc.gov/assets/cchr/downloads/pdf/materials/Caregiver\\_FactSheet-Employee.pdf](http://www1.nyc.gov/assets/cchr/downloads/pdf/materials/Caregiver_FactSheet-Employee.pdf)) to raise awareness about the new caregiver protections.

### 71) ENSURE ACCESS TO AGING SERVICES FOR ALL OLDER NEW YORKERS

The Mayor's Office of Immigrant Affairs (MOIA) and DFTA issued a joint open letter, available at <http://www.nyc.gov/html/dfta/html/>



[about/open\\_letter.shtml](#), reiterating the de Blasio Administration’s commitment to ensuring all New Yorkers, regardless of immigration status, continue to have access to DFTA and City services. The Administration has strong policies to protect the participants’ privacy in programs sponsored by the City and DFTA. Aging services providers may not ask about immigration status except to assess eligibility for benefits, and responses are completely voluntary. Also, providers can still assist with obtaining services for which immigration status is not applicable.

**IDNYC is the largest municipal identification program in the country, and it serves a critical need given that approximately half of NYC residents aged 16 and older do not have a NYS Driver License.**



## **72) OUTREACH TO OLDER ADULTS FOR IDNYC ENROLLMENT**

IDNYC is the largest municipal identification program in the country, and it serves a critical need given that approximately half of NYC residents aged 16 and older do not have a NYS Driver License.<sup>43</sup> MOIA is committed to making IDNYC as effective and inclusive as possible, so that every New Yorker has access to the opportunities and security that come with having government-issued photo identification. IDNYC benefits every NYC community, including the most vulnerable communities, such as older adults. The IDNYC card is widely accepted across the City and provides eligibility for City services, entry to City buildings and schools, recognition by City agencies, such as the NYPD, and opportunity to open bank accounts at certain financial institutions. To supplement the value of the IDNYC card as a form of identification, the City has developed a set of key partnerships with libraries, cultural institutions, and other organizations.

MOIA’s team of multilingual organizers has been actively engaging older immigrant New Yorkers to facilitate access to IDNYC enrollments and to spread information regarding City services and programs. To this end, MOIA’s staff members have conducted mobile IDNYC enrollments for older adults at more than nine different





locations. Organizers have conducted presentations at schools, parent association meetings, community boards, and other venues serving immigrants and older adults, delivering information about IDNYC and City services. MOIA is actively seeking to expand access to IDNYC by bringing temporary enrollment sites to more locations, such as the Sherpa Temple in Jackson Heights serving Himalayan older adults, and a number of other sites that older New Yorkers attend. Organizers have also engaged NORCs and are planning upcoming additional bulk enrollments, presentations, and forums.



### 73) INCREASE OLDER ADULT ACCESS TO TECHNOLOGY

An internet connection is a vital tool to pursue a career after retirement, trim a household budget, access City services, and engage in your community. When connected to the internet, older adults can maintain close personal connections with loved ones no matter where they live. The inability to go online can compound health problems or social isolation given that medical information and personal communication are increasingly digital.

The City has set a goal that every NYC resident and business will have affordable, reliable, high-speed broadband service by 2025. Currently, 30 percent of New Yorkers over the age of 60 do not have internet service at home, compared to a citywide rate of 20 percent. And close to half of New Yorkers over 60 years old who live in poverty have no home internet connection. The cost of service and a lack of



digital skills can present major challenges for older New Yorkers. In 2016, the City successfully advocated for modernization of the Federal Lifeline subsidy program to apply to internet service, making internet access more affordable for many older adults. The City is defending this program from the new policy reversals and budget cutbacks coming out of Washington, while working on other ways to make internet service affordable for all New Yorkers.

Through DFTA and its contracted community service partners, the City supports 120 computer labs in senior centers across the five boroughs. These labs provide computer workstations, broadband connectivity, digital literacy training, and a supportive environment tailored to the needs and interests of older adults. Together, these computer centers serve approximately 17,000 older New Yorkers annually. The City has also established a first-of-its-kind technology education center for older adults, via DFTA and its non-profit partner organization, Older Adults Technology Services (OATS). The Senior Planet Exploration Center offers older New Yorkers free classes on a broad range of technology subjects, as well as workshops, talks, and social events — all aimed at supporting older adults in expanding their access to the digital world. Also, through the NYC Connected Communities program, which expands the availability and capacity of public computer centers in the highest poverty areas in the City, OATS is implementing a technology initiative at the NYCHA Queensbridge development, funded by DFTA. As part of this program, seniors take courses in computer literacy, finance management, social media, and health and fitness.

**The DFTA website, together with those of other City agencies, are being redesigned in collaboration with the NYC Department of Information Technology and Telecommunications (DOITT) to improve access for screen reading software for the visually impaired, as well as for general accessibility.**

#### **74) REDESIGN THE DFTA WEBSITE TO IMPROVE ACCESS**

The DFTA website, together with those of other City agencies, are being redesigned in collaboration with the NYC Department of Information Technology and Telecommunications (DOITT) to improve access for screen reading software for the visually impaired, as well as for general accessibility. Enhancements include improving the mobile viewing experience and providing on-screen translations in multiple languages. The redesign also focuses on content, assisting City agencies in publicizing valuable information in an accessible manner. Older adults are increasingly obtaining information online, and the City is working to remove technological barriers that prevent access.

#### **75) LEVERAGE TECHNOLOGY TO ADDRESS CHALLENGES OLDER ADULTS FACE**

NYC BigApps is an annual competition sponsored by the NYC Economic Development Corporation that leverages the City's tech, creative, and civic communities to develop technologies that address civic



and urban challenges. This year, NYCEDC partnered with Civic Hall Labs to produce the BigApps 2017 competition with a special focus on addressing pressing challenges faced by NYC youth (ages 13-18), older adults (aged 65+), and immigrants, including transportation, access to information, and community resiliency. DFTA was a co-sponsor of the BigApps 2017 competition and helped mentor competitors. The winners received cash awards, marketing and promotion, acceptance into Civic Hall Labs' civic accelerator program, and their solutions are eligible for a pilot on the LinkNYC communication network citywide, which provides free public Wi-Fi and phone service, among other amenities.

In 2017, OATH established the Court's Education for Seniors program or CourtESy. The CourtESy program brings information about OATH and the hearing process directly to older adults. CourtESy forums focus on OATH's remote hearing methods, which give recipients of summonses the ability to contest summonses without having to attend OATH hearings in person.



## 76) EDUCATE OLDER ADULTS ABOUT SUMMONSES AND REMOTE HEARING PROCESSES

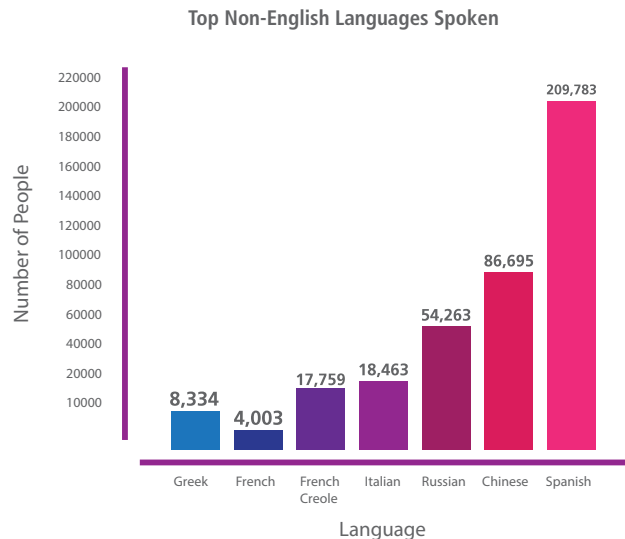
The Office of Administrative Trials and Hearings (OATH) is an independent administrative law court that conducts nearly 300,000 hearings on a diverse range of issues each year. Under the de Blasio Administration, OATH has instituted changes to rules and procedures in an effort to make the administrative justice process more equal and fair for New Yorkers who receive summonses. By consolidating the previously separate divisions that oversaw Environmental Control Board hearings, Taxi and Vehicle for Hire hearings, and Health hearings into one Hearings Division, the City is making the hearing process easier to navigate. All summonses are now subject to the same hearing procedures, rules, and deadlines, regardless of which City enforcement agency issues the summons.



In 2017, OATH established the Court’s Education for Seniors program or CourtESy. The CourtESy program brings information about OATH and the hearing process directly to older adults. CourtESy forums focus on OATH’s remote hearing methods, which give recipients of summonses the ability to contest summonses without having to attend OATH hearings in person. In addition, OATH’s Administrative Law Court’s Community Education Services (ACCES) program seeks to connect residents, including older adults, with information from OATH about how to respond to a summons issued by a NYC enforcement agency. To promote the CourtESy and ACCES programs in 2017, OATH has held events with NYC Council Aging Committee Chair Margaret Chin, Council Member Ben Kallos, and Manhattan Borough President Gale Brewer.

**77) PARTNER WITH THE INTERNATIONAL COMMUNITY ON AGING SERVICES OUTREACH AND EDUCATION**

The Mayor’s Office for International Affairs (International Affairs) works to foster positive relations and encourage collaboration between the international community and NYC agencies and local neighborhoods. International Affairs focuses on sharing the City’s policies and best practices globally, as well as responding to requests from foreign governments, the United Nations, and the U.S. Department of State. International Affairs advises City agencies on diplomatic and consular matters, and provides guidance to the diplomatic and consular community on City-related issues. International Affairs has worked with DFTA to coordinate visits from many foreign governments interested in learning about aging services in New York City. DFTA has met with government officials from New Zealand, Spain, Australia, Hong Kong, Brazil, and Mexico, among others.



## COMMUNITY & CIVIC PARTICIPATION



A landmark study showed that older adults who are actively engaged in creative activities suffered less from depression, required fewer doctor visits, and took less medication.



### 78) RECRUIT ARTISTS TO CONDUCT PROGRAMS IN SENIOR CENTERS

SU-CASA is a community arts engagement program sponsored by the NYC Council, the NYC Department of Cultural Affairs (DCLA), and DFTA. The SU-CASA program builds upon study findings that correlate creative expression with healthy aging. A landmark study conducted in New York City and other cities by Dr. Gene Cohen, an American psychiatrist who pioneered research in geriatric mental health, showed that older adults who are actively engaged in creative activities suffered less from depression, required fewer doctor visits, and took less medication than control group participants. The work of Dr. Cohen supported the capability of seniors functioning at high levels of creativity and intellectual rigor, and that involvement in the arts late in life leads to a lower incidence of illness and injury.

Through the SU-CASA initiative, artists and non-profit arts organizations are placed in residence at senior centers across the five boroughs to provide arts programming for older adults. Artistic partners work in a wide variety of disciplines, including music, theater, dance, poetry, ceramics, photography, writing, and many more. Each SU-CASA program engages participating older adults in an art project or a series of cultural programs throughout the course of a six-month residency. Each residency culminates with a program at the senior center, which is open to the public, such as exhibits, readings, performances, open houses, and other cultural interactions. Continuing in the tradition of the highly successful Seniors Partnering with Artists Citywide program, SU-CASA greatly expanded arts opportunities for older adults. As a result of a more than \$2 million allocation from the NYC Council in FY '17, 153 artists and arts organizations were placed in senior centers, which is the highest number of placements in the history of the program. In FY '18, the Council increased funding for SU-CASA to more than \$2.5 million.



## 79) FOCUS ON OLDER ADULTS IN THE CREATE NYC CULTURAL PLAN

Mayor de Blasio signed Local Law 46 of 2015, introduced by NYC Council Member Stephen Levin, requiring the City to produce a cultural plan to serve as a guide for the future of arts and culture in New York City. Starting in 2016, DCLA worked with artists, cultural organizations, NYC agencies, arts and culture experts, and community residents to collect data and public input to inform the plan, known as CreateNYC. The agency made a particular effort to solicit the feedback of organizations working in the field of creative aging as well as older adults who are artists, cultural workers, consumers of culture, and residents of New York City.

**By building on existing strengths while acknowledging gaps in services and strategies for improvement, CreateNYC lays out a path toward a cultural community that is more inclusive of older New Yorkers.**

In one of the public sessions hosted for CreateNYC, older artists were invited to share their recommendations and challenges related to affordability, remaining in their own neighborhoods, and retirement after a career as an artist or cultural worker. Public input also demonstrated a need for greater engagement with older immigrant New Yorkers to increase their inclusion in the City's cultural life, and a need to better understand their value as repositories of cultural heritage in many communities. DCLA convened a CreateNYC focus group of professionals working in organizations that serve older adults where participants discussed professional training, funding for creative aging programs, and capacity-building for arts organizations and social service partners.

As a result of this open process, several goals in the CreateNYC cultural plan directly address the needs of older New Yorkers. Recommendations include:

- Building on DCLA's creative aging programs by working with partner agencies and organizations;
- Supporting these programs citywide in both age-neutral and senior focused spaces; and
- Encouraging arts organizations to provide accessible accommodations for older adults.

The cultural plan, which will be released in summer 2017, also notes existing support for programs providing services to older artists and cultural workers. By building on existing strengths while acknowledging gaps in services and strategies for improvement, CreateNYC lays out a path toward a cultural community that is more inclusive of older New Yorkers – both as artists and audiences – and acknowledges the incredible source of talent, innovation, and experience within older New Yorkers.



## 80) INSPIRE OPPORTUNITIES FOR SOCIAL AND CULTURAL PARTICIPATION

The Age-friendly NYC Commission’s Media, Arts, and Culture Working Group is developing a digital and printed toolkit to inspire new opportunities for arts and cultural participation, foster social engagement, build community, and reduce isolation. The toolkit provides evidence to support the value of older people in communities and the value of arts and culture as we age; socio-demographic data; no and low-cost strategies to attract and cater to a multigenerational audience; examples of arts and cultural organizations welcoming older people; aging services organizations bringing in arts and culture; and organizations using public space to create community-based arts programs inclusive of people of all ages.



## 81) INCREASE RECRUITMENT OF OLDER ADULTS TO THE MUNICIPAL WORKFORCE

The de Blasio Administration strives to recruit multicultural and multi-generational populations that historically have not been well-represented in our workforce. The NYC Department of Citywide Administrative Services (DCAS) has attended several events in recent years specifically targeting older adults, including the DFTA Senior Community Services Employment Program Job Fair and the Annual Military Retiree Appreciation Day Resources Fair. From FY ‘13 to FY ‘15, the number of new hires aged 60 and older more than doubled, to more than 500. The City agencies that employ the highest number of employees aged 60 and older vary in their scope and mission, including NYC Health + Hospitals (18 percent), HRA (17.5 percent), and DOHMH (17 percent).



In addition, DCAS offers trainings that focus on intergenerational issues, age discrimination, reasonable accommodations for employment candidates and employees, and the impact of unconscious bias in the selection process. More than 60,000 municipal employees across many agencies have participated since 2014. DCAS employees represent a full spectrum of diverse backgrounds (i.e., cultural, ethnic, generational, religious, etc.) that mirror the community at large. The City is committed to creating an innovative and inclusive environment. Training objectives include developing inclusive behaviors and leadership skills that will create an environment where all employees feel valued, included, and engaged; utilizing unique skill sets to better serve the vast diversity in all NYC communities; and drawing upon personal experiences to gain insight about inclusion.

### **82) PROVIDE NEW VOLUNTEER OPPORTUNITIES FOR OLDER NEW YORKERS**

In partnership with NYC Service, the DFTA Volunteer Resource Center (VRC) promotes volunteerism by recruiting volunteers for programs that serve older adults. Since its launch in January 2015, more than 500 volunteers have come to the VRC to provide service to older New Yorkers. Hailing from diverse backgrounds and ranging in age from college students to older adults, they have helped older New Yorkers pay their bills, counsel older adults about Medicare options, lead health and wellness programming, and more. According to VRC surveys of the DFTA provider network, these contract agencies are using large numbers of volunteers to help them meet their goals and provide services to older New Yorkers. DFTA contract agencies provided an estimated 1.1 million hours of service to older adults in New York City, and more than half of that total was provided by older adult volunteers. Now in its third year, the VRC continues its work to recruit and refer volunteers, and leads a Senior Support Coalition of contract providers to collaborate on strategies to increase volunteerism for and by older New Yorkers.

### **83) CULTIVATE AGE-FRIENDLY NEIGHBORHOODS**

First introduced by the Age-friendly NYC Commission as “Aging Improvement Districts,” the “Age-friendly Neighborhoods” model leverages the City’s organizational infrastructure, specifically the 51 NYC Council Districts and 70 Business Improvement Districts, to advance neighborhood-level, age-friendly priorities through community and economic development efforts. In partnership with the Council, Age-friendly NYC has connected with more than 3,000 older New Yorkers across 19 neighborhoods citywide through community consultations, focus groups, interviews, and surveys. The data was collected in four languages (English, Spanish,





Chinese, and Russian). In response to the consultation findings, Neighborhood Action Plans were created, leading to innovation at the neighborhood level. One example is the Age-friendly Ambassadors Program in Bedford-Stuyvesant, where older people focus on making improvements to local retail, connecting residents to benefits and entitlements, planning social events, and volunteering to help youth. Another is the Myrtle Avenue Business Improvement District, which works to incorporate the needs of older consumers into its business attraction and retention strategies. Age-friendly NYC is now working to scale this initiative to the borough level beginning with Brooklyn in partnership with Brooklyn Borough President Eric Adams.

The NYC Parks Stewardship Program offers opportunities for older New Yorkers to stay engaged in their communities and care for our local natural resources.

#### 84) OFFER ENVIRONMENTAL STEWARDSHIP OPPORTUNITIES FOR OLDER NEW YORKERS

NYC Parks is responsible for 600,000 street trees and 2 million more in parks. The NYC Parks Stewardship Program offers opportunities for older New Yorkers to stay engaged in their communities and care for our local natural resources. Older New Yorkers can join public volunteer events or coordinate their own local event via the NYC Parks Request a Project page at <https://www.nycgovparks.org/opportunities/volunteer/stewardship/request-a-project>. Events can include planting, invasive species removal, aerating and mulching street tree beds, and wetland clean-up projects. In addition, the Super Stewards Program offers the opportunity for older adults to gain hands-on training in the care of natural areas and street trees. These independent Stewards can work on their own, lead other volunteers, host projects, apply for mini-grants, network with other volunteers, and get a sneak peek at the inner workings of NYC Parks. Through the agency's place-based Green Neighborhoods program, NYC Parks interacts with local senior centers as part of its community assessment process and is actively working to engage older adults as a vital part of the Green Neighborhoods effort.





### 85) SUPPORT AGING IN PLACE VILLAGES

Aging in Place villages represent an emerging consumer-driven, social support model that aims to enhance the social engagement, independence, and well-being of community-dwelling older adults through a combination of social activities, volunteer opportunities, service referral, and direct assistance. In December 2016, the Age-friendly NYC Commission's Public Safety Working Group, with support from AARP, convened for the first time representatives currently implementing or considering an aging in place initiative in New York City. The purpose was to share experiences, promising practices, and new thinking on how to expand and scale the model to help older New Yorkers age in their community. The challenges of these aging in place efforts include lack of space, lack of administrative capacity, and in some cases, sustainability, since they are primarily voluntary. All of the representatives expressed a need for more formal connection to resources. A LISTSERV was created to help them share information and to provide them with information and resources. For example, there has been targeted outreach using NYCEM's new toolkit for Community Emergency Planning to address emergency preparedness. In addition, one group was connected with a pro bono attorney and received information about fiscal sponsorship. Collectively, these groups engage approximately 2,000 seniors, many of whom have mobilized around age-friendly businesses and outreach to promote the Senior Citizen Rent Increase Exemption. Age-friendly NYC is continuing to explore how to leverage these efforts to spread age-friendly activity and how to promote the creation of more self-directed groups in other parts of the City.



Functioning as centers of learning and civic engagement, the City's three library systems spanning all five boroughs offer free, quality services to older adults, students, families, job seekers, and anyone in need of information or assistance.

## 86) MAXIMIZE LIBRARIES FOR OLDER ADULT PROGRAMMING

Functioning as centers of learning and civic engagement, the City's three library systems spanning all five boroughs offer free, quality services to older adults, students, families, job seekers, and anyone in need of information or assistance. In addition to their important traditional services of circulating millions of books and supporting research, libraries are expanding their roles and working in increasingly close partnership with the City to support the changing needs of NYC neighborhoods and residents.

All three library systems provide robust programming for older adults. The New York Public Library (NYPL) organizes a regular arts series, Art for a Lifetime, which offers workshops in painting, drawing, collage, and other art forms. These are available in many locations across the library network. NYPL provides free technology courses and programs for older adults in 80 locations through TechConnect. TechConnect classes assist older adults with sharpening Microsoft Office skills, mastering online shopping and banking, communicating online with family and friends around the world, and learning advanced skills, such as coding and Photoshop editing. In addition, NYPL offers workshops for older adults on fitness, pedestrian safety, and consumer fraud scams.

The Brooklyn Public Library's (BPL) Services for Older Adults offers inclusive programming and services tailored to patrons aged 50 and older, including lectures, films, performances, and educational courses that reflect the broad interests of older adults. The Creative Aging program at BPL offers multi-session art workshops for older adults, led by a professional teaching artist. Through Library Lane at BPL, older adults learn how to bowl virtually and compete during monthly tournaments. Classes at every BPL branch connect older adults to technology. BPL also has an ongoing oral history project, Our Streets, Our Stories, which explores Brooklyn through the words of older adult residents. In addition, BPL offers teleconference and online courses for those who are homebound and hosts cultural events and presentations at programs for older adults.

Queens Library has a wealth of free programs and resources for older adults, such as book discussion groups, live performances and readings, talks and panel discussions, film screenings, drama clubs, chess clubs, arts and crafts workshops, and health and wellness programs. A range of technology classes for older adult learners is offered at the Cyber Center at Queens Central Library and other select locations. The Adult Learner Program at Queens Library provides



services and lifelong learning opportunities, including English language classes, through Adult Learning Centers in the network. HealthLink and ConnectCare offer educational programs and health screenings at Queens Library locations. Queens Library also offers lectures, classes, book discussions, music, theater, debates, and chats by teleconference, video, and Livestream. Additionally, each of the library systems provide books and other collection materials by mail to the homebound.



# **Age-friendly NYC Commission**



**AGE-FRIENDLY NEW YORK CITY COMMISSION MEMBERSHIP ROSTER  
2015-2017**

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## ENDNOTES

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2017





**Testimony of  
Chris Widelo, AARP New York**

**New York City Council  
Committee on Aging**

**FY 2019 Preliminary Budget Hearing  
March 22, 2018**

**City Hall  
New York, New York**

Contact: Chris Widelo (212) 407-3737 | [cwidelo@aarp.org](mailto:cwidelo@aarp.org)

Good Morning Chairwoman Chin and members of the Aging Committee, my name is Chris Widelo and I am the Associate State Director for AARP New York. On behalf of our 800,000 members age 50 and older in New York City, I want to thank you for the opportunity to talk about some important provisions in the Mayor's FY19 preliminary budget.

New York City's population is aging. Nearly one-third of residents in the five boroughs are over the age of 50 and that group is expected to grow by nearly 20 percent by 2040. The growth for the 65-plus age group is projected to be even more dramatic, with a whopping 40% increase.

And, our city is not just aging, we are becoming more diverse. African Americans, Blacks, Hispanics, Latinos, Asian Americans and Pacific Islanders account for 62 percent of New York City residents 50-plus and half of all those 65-plus living here were born in a foreign country.

We know from our recent report, *Disrupting Racial and Ethnic Disparities: Solutions for New Yorkers Age 50+*, developed in partnership with New York Urban League, NAACP, Hispanic Federation and Asian American Federation, that people of color over the age of 50 experience stark disparities in the areas of health, economic security, and the ability to live and remain in their communities.

All this means we must make meeting the needs of older New Yorkers a bigger priority. We are grateful to the increased and baselined funding increases made to the DFTA budget last year, but there is still work to be done.

Meeting the needs of aging residents and helping them to stay in their neighborhoods is critical to retaining their tremendous economic, social, cultural and family contributions. And, it is also the right thing to do.

### **Model Senior Center Budget**

AARP appreciates the effort by DFTA, OMB and the Administration to create a model budget for NYC senior centers. As proposed, the city will allocate \$10 million in FY18 for senior center direct staffing and programming, and an additional \$10 million by 2021. While this is a positive first step, we need to be mindful of the other costs that were not included in the model budget process such as meals, rent, OTPS and other related costs.

AARP is asking that the City Council expedite the timeline for the 3-year model budget rollout and move up the date for the additional \$10 million in funding to FY20. In addition we must make sure that our senior centers are adequately funded beyond personnel and programs so that our providers are fully reimbursed for the services they provide.

### **NORCs**

In a rapidly aging city, the NORC program is a proven model of successful aging-in-place through the coordination of health and other social services that keep our older adults thriving in their community. AARP believes that investments in the NORC model are a sound investment for the City and we would like the City Council to increase their \$3.8 million dollar allocation in FY18 to \$6 million in FY19. These additional funds will help meet the increased demand in NYC and support the current unfunded mandate for nursing hours.



## **Homecare and Case Management**

Working together, Case Management and Home Care ensure that our city's non-Medicaid eligible homebound seniors receive the care necessary to age in place. The care they receive in their homes is far less costly when compared to care in a nursing home. Across the city there are over 1,000 seniors on a waitlist for a case manager and over 200 are on a waitlist for home care.

AARP thanks the Mayor and City Council for baselining and increasing funding for these programs in FY18. However, the need continues to grow as the population ages and we must keep pace so those in need don't languish on a waitlist. In FY19, AARP is requesting \$1 million in baselined funding for the Home Care Program and \$2 million for Case Management.

## **Congregate and Home Delivered Meals**

Without congregate and home delivered meals, thousands of NYC residents would go hungry every day. It is crucial that the city keeps pace with the increased costs associated with providing this essential service. Additionally, we need to make sure that that the meals we are serving are culturally appropriate.

AARP requests \$12.1 million in new, baselined funding to increase the reimbursement rate for congregate and home-delivered meals. This increased reimbursement is particularly important for DFTA mandated culturally appropriate

meals that exceed the current reimbursement rate and put a further strain on the non-profits providing this service.

### **Social Adult Day Care**

Family caregivers provide an invaluable resource in caring for their loved ones at home – many on call 24 hours a day, seven days a week. This labor of love is worth more than \$30 billion in unpaid care each year statewide. Thanks to family caregivers' commitment, millions of older people are able to live at home rather than in costly institutions, like nursing homes. While family caregivers wouldn't have it any other way, it's a big job – and once in a while, they need a break. That's why respite care programs are so important.

Social adult day care is one such program that provides a supportive environment for older adults with Alzheimer's/dementia or physical disabilities. It gives that much needed break to family caregivers. Many of these family caregivers are working and raising families of their own.

Last year this program was funded at \$950,000. This funding was not baselined. AARP is requesting \$2 million of baselined funding for Social Adult Day Services in the FY 2019 City Budget to stabilize funding for this program and expand support for SADCs that serve as model programs in NYC.

## **CONCLUSION**

Chairwoman Chin and members of the Aging Committee, thank you for the opportunity to highlight a few of the many needs for NYC residents as they age.

We strongly urge the Mayor and the City Council to continue their commitment to older NYC residents through increased funding for aging related programs and services.

## Testimony of Stanley M. Isaacs Neighborhood Center

### FY '19 DFTA Preliminary Budget Hearing

March 23, 2018

Thank you Council Member Chin and Members of the Committee on Aging, for the opportunity to present testimony today on key components of the FY '19 Preliminary Budget for the Department for the Aging (DFTA). My name is Pakhi Kane and I am the Deputy Executive Director of the Stanley M. Isaacs Neighborhood Center. We are embedded within the Isaacs/Holmes NYCHA development. This development has been designated by both New York City and New York State as a Naturally Occurring Retirement Community (NORC) because it is home to a high concentration of older adults. Our Senior Center offers congregate meals, a multitude of wellness activities, fitness programs, media and technology classes, and arts and cultural enrichment. Further, our comprehensive case management program provides seniors with the supports and services they need to comfortably and safely age in their homes and community. As the lead home delivered meals provider for the entire upper east side of Manhattan from 59th Street to 142nd Street, we deliver over 1,000 meals to vulnerable, homebound seniors on a daily basis.

I'd like to begin by acknowledging the work of the Members of the Committee, as well as Commissioner Corrado and her team, for their much needed recent attention to the budgets of senior centers. As we know, the "model budget" process has added \$10 million for senior centers across the system for the current fiscal year. For the Isaacs Center, this translates to approximately \$36,000 for FY '18 and FY '19. It is important to note that this allocation is restricted to personnel costs and programming (instructors and consultants). Other than personnel costs like rent, utilities, supplies, and even meal costs are not included in the model budget. We appreciate the Commissioner's commitment to negotiate additional allocations for organizations such as ours on a case-by-case basis, but the expanding needs of the rapidly growing aging population in NYC require a more substantial commitment now and over the long term. This is especially true of older adults living in NYCHA housing who require intensive supports because they are likely to have a combination of unique and age-based challenges like chronic illness, disabilities, and limited familial relationships.

Council Member Chin, your work with the Speaker and the Council's Budget Negotiating Team to ensure continued critical funding for NORCs and other citywide initiatives including *Support Our Seniors* and *Senior Centers, Programs and Enhancement*. These investments allow the Isaacs Center to provide hundreds of older adults per year with access to services that improve their financial security, support their health and wellness, and ensure the stability of their housing. These efforts provided by inter-disciplinary teams of social workers, nurses, psychotherapists, and program specialists maximize the potential of older adults to "age in place" safely and comfortably. We respectfully request both the restoration and expansion of each of these three citywide initiatives which heavily support our work.

**Right now, there are nearly 1.5 million older adults living in NYC. This number is expected to grow to over 1.8 million by 2030.** Comprehensive aging services programs like ours that are physically located where older adults are concentrated and combine access to social-emotional supports, health and wellness-focused initiatives and interventions, as well as, home delivered meals allow older adults to age with dignity, while saving the City millions in costs for hospitalizations.

The Council's commitment to older adults is greatly appreciated, and the Stanley M. Isaacs Neighborhood Center is committed to working with you in this year's budget process and future ones to ensure that our City is prepared for the challenges of an aging population, and that our seniors' golden years are *truly golden*. I'm happy to answer any questions that the Committee may have.

**Testimony by Dr. Cynthia Maurer, Executive Director  
Visiting Neighbors, Inc.  
to New York City Council Hearings on Aging  
March 23, 2018**

My name is Dr. Cynthia Maurer. I am Executive Director of Visiting Neighbors.

Thank you for this opportunity to give voice to the needs of our City's forgotten seniors...the oldest old, the homebound and frail elderly, the seniors who spend their days alone, hidden behind the locked doors of their apartments, unable to attend senior centers, so isolated that they have no incentive to eat their meals or to see their doctors. Many have outlived their friends and families. They may be alone, but we must not forget them!

For the past 46 years, Visiting Neighbors has earned an outstanding reputation as a trusted lifeline for seniors and caregivers. We serve more than 1,000 seniors each year in lower Manhattan and parts of Queens. We provide vital support services to seniors and their caregivers who have nowhere else to turn. The average age of the seniors we serve is 89, and we now have a dozen seniors who are age 100+. Our oldest client is 106 and with our help, he is still able to enjoy the comfort of living in his own cherished apartment. Yes, our seniors are frightened and vulnerable, but they are proud and resolutely determined to remain independent. They often do not know that help is available, or they are afraid to ask for help because they fear that asking for help may be the first step towards a nursing home. We reassure seniors, helping them keep their fears and anxieties in perspective.

Most of the seniors we serve are unable to leave their apartments without someone to help them. Too often, their radios and televisions are their only companions. It becomes too easy for society to forget about them because we do not see them on a daily basis. The seniors look forward to visits and calls from their Visiting Neighbors' volunteers as the only respite in their lonely lives. As 93-year old Rose recently told us, "Visiting Neighbors is the only family I've got."

Our seniors are struggling to survive on limited fixed incomes, and often have to choose between paying for food or medication. They are slightly above eligibility levels for Medicaid-funded services, but cannot afford to pay privately for care on a regular basis. Without someone to help them with errands and shopping, or to escort them to medical appointments, they may be forced prematurely into nursing homes, or they may neglect vital care. Their lives may end in tragedy that could have been prevented.

Visiting Neighbors reaches out to keep these seniors safe, connected with their community, providing companionship and encouragement, health advocacy, helping them with shopping and errands and escorting them to medical and other important appointments so they can safely navigate our City's treacherous streets. The hazards they face when they leave their apartments are familiar to all of us, but can be life-threatening to a frail senior whose vision may be impaired or who may be unsteady on their feet – traffic that comes barreling down on pedestrians the second the light changes, potholes, cracks in the sidewalk, bicycles and oblivious pedestrians engulfed in their cell phones. Volunteers provide an arm to hold onto and the confidence that

enables seniors cross our City's streets more safely. As the number of our oldest old grows dramatically, we are concerned that the City has turned its back on their needs. Over the past decade, there has been nearly a 26 percent increase in our City's oldest population, yet DFTA seems to be more focused on providing services that are valuable to younger seniors who can go to senior centers, for example, but which virtually exclude our City's most isolated, lonely and vulnerable. We must not overlook the oldest old!

Cost-effective supportive services for seniors living at home help reduce the number of seniors who are forced into nursing homes. The current cost of a nursing home in New York City is estimated to be \$131,484 for one senior for one year, according to The New York State Partnership for Long-Term Care. As you know, most of this cost is paid for by Medicaid and other government programs. The government can significantly reduce costs by funding cost-effective preventive supportive services like Visiting Neighbors to help maintain seniors in their own cherished homes. It just makes sense!

Our volunteer visitors also serve as extra eyes and ears for our professional staff, alerting us immediately of any change in a senior's mental, physical or emotional condition so they can get the attention they need promptly, before irreversible damage is done. Prevention is key, as well as addressing problems as they arise, before they have disastrous consequences.

We have found that many of our seniors avoid going to the doctor when they are sick because they are afraid that they will be sent to the hospital and that once they are hospitalized, they will never return home. Our Health Advocate encourages the seniors to see their doctors regularly, to follow their doctors' advice, to eat right, to not ignore symptoms, and to ask for help when they need it. He checks their apartments to remove safety hazards and helps them prepare an Emergency Readiness magnet with their doctors' names, prescriptions and other drugs they take, a list of their medical conditions and emergency contact names. If they are hospitalized, he visits them so the hospital staff knows that someone is watching. When it is time for them to be discharged, he makes sure that proper supports are in place. Every senior needs an advocate, and unfortunately, many seniors have no family or friends who can fill that role.

We also focus on increasing seniors' and caregivers' confidence by providing assistance with the common problems that many elderly face. Few seniors are prepared to understand the choices they must make, whether it involves choosing a Medicare plan, a service provider, or executing advanced directives. They know they can ask a question, and Visiting Neighbors will point them in the right direction to answer their concerns.

Based on Visiting Neighbors' 46 years of serving this population, we look forward to helping you meet their growing needs. There is much we can do, but we need the Council and DFTA to commit the resources it takes. Programs like Visiting Neighbors are compassionate, extremely cost-effective, and they work! I hope that you will include these seniors and organizations like Visiting Neighbors in your plans and commit the needed resources.

We are dependent on the support of the Council. Discretionary funds have helped us keep our doors open so we can keep our seniors safe and at home. It is inhumane to turn your backs on

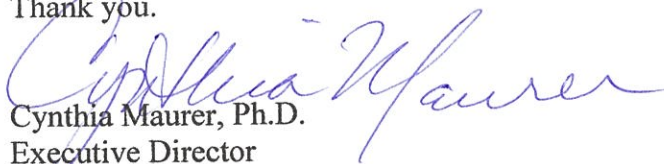
the needs of our vulnerable seniors who have done so much for our City. I am here today to urge you to remember the needs of our City's oldest old. They must not be forgotten!

We urge you to continue to provide funding and support for programs like Visiting Neighbors. Agencies like us must receive the support we need so we can help our City's elderly remain safe, healthy and confident with the knowledge that they have not been cast aside by society.

Our programs are smart and a sound investment. They are humane, kind, caring and cost-effective. As more of us live longer, they will enable us to remain connected with the communities and individuals we value. We will all benefit from knowing that seniors can get the care they need and deserve.

We are appreciative of the support of the Council. We are counting on you so we can continue to help our City's seniors who have nowhere else to turn.

Thank you.

A handwritten signature in blue ink that reads "Cynthia Maurer". The signature is fluid and cursive, with the first name being more prominent.

Cynthia Maurer, Ph.D.

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## **Asian American Federation**

**Testimony for New York City Council Budget and Oversight Hearings on The Fiscal Year 2019 Preliminary Budget, The Preliminary Capital Plan for Fiscal Years 2019-2022 and The Fiscal 2018 Preliminary Mayor's Management Report Submitted to the New York City Council Committee on Aging**  
March 23, 2018

Thank you to Chair Margaret Chin and the rest of the Committee on Aging for convening this hearing and for the opportunity to share this testimony. I am Jo-Ann Yoo, Executive Director of the Asian American Federation (AAF). AAF's mission is to raise the influence and well-being of the pan-Asian American community through research, policy advocacy, public awareness, and organizational development. We also come to you today representing our network of over 60 member organizations supporting our community with their work in health & human services, education, economic development, civic participation, and social justice.

We are here today to highlight the needs of our Asian seniors, who are the fastest growing part of the senior population in New York City and in the state. From 2000 to 2016, the Asian senior population in the City more than doubled, increasing faster than all other major race and ethnic groups. There are now more than 150,000 Asians age 65 and older living in New York City.

### **Immigrants are driving the growth in the senior population.**

The Department of City Planning's most recent Newest New Yorkers report tracks the changing demographics of the senior population in New York City. Immigrants are becoming bigger share of the senior population in the City due to two demographic trends. First, the large wave of immigrants who arrived after the immigration reforms of 1965 are now aging into the senior population. Second, some seniors are also immigrating later in life, with about 10% of the City's immigrant seniors arriving since 2000.

### **While Chinese are still the majority of Asian seniors, immigration and settlement trends are increasingly diversifying and dispersing the Asian senior population.**

- The South Asian and Southeast Asian senior populations both more than double in size since 2000, while the Chinese senior population grew by more than 80% and the Korean senior population grew by more than 75%.
- The Asian senior population has more than doubled in all boroughs with the exception of Manhattan, where growth was still a healthy 70% from 2000 to 2016. There are more than

Manhattan:  
120 Wall Street, 9th Floor  
New York, NY 10005

Flushing:  
37-17 Union Street, 2<sup>nd</sup> Floor  
Flushing, NY 11354



6,000 Asian seniors in each of Bronx and Staten Island Boroughs, nearly 27,000 in Manhattan, 34,000 in Brooklyn, and 76,000 in Queens.

- Geographically, each of the major Asian groups in the city has settled in several distinct patterns. Chinese seniors are nearly equally split between the Chinatowns of Brooklyn, Manhattan and Queens. Indian and Korean seniors were largely in neighborhoods in Queens. Bangladeshi and Pakistani seniors are found in neighborhoods in Queens, Brooklyn and the Bronx. Japanese seniors are concentrated within neighborhoods of Manhattan.

### **Asian seniors are burdened by linguistic and economic challenges.**

The needs of Asian seniors are great. Overall 1 in 4 Asian seniors live in poverty, with poverty rates reaching as high as 35% for Bangladeshi seniors and 30% for Chinese seniors. Additionally, language barriers remain high among Asian seniors and present an added complication in poverty alleviation efforts. More than 90% of Chinese and Korean speaking seniors had limited English proficiency (LEP). Among Bengali speakers, 88% were LEP. More than 75% Urdu speakers and half of Hindi speakers were also LEP. Even among Filipinos who have a reputation of high English proficiency, 44% of Tagalog speakers identified themselves as LEP.

Poverty and immigration status also hurt Asian seniors' ability to access to affordable health insurance. Overall 5% of Asian seniors did not have health insurance coverage, compared to 2% of all seniors. And only 24% of Asian seniors had additional private coverage, compared to 43% of all seniors.

### **Culturally competency increases utilization and effectiveness of senior services.**

Asian seniors are more likely to utilize services that reflect their traditional values and ethnic identities. Thus, community-based organizations with roots in their neighborhoods are best placed to getting Asian seniors the help they need. Asian seniors, particularly more recently arrived ones, are less likely to know what services and programs are available to help them acclimate to life in New York City and to address life events as they occur. Having the language expertise and connections to the community allows our member agencies to reach those seniors. Culturally competent programs will also understand the cultural and generational barriers that stop seniors from seeking help, particularly mental health services.

### **Recommendations**

On behalf of our member agencies that serve Asian seniors, we request resources for following priorities:

- Increase funding to expand senior services for the growing and diversifying Asian senior population. Immigration and settlement trends are diversifying and dispersing the Asian senior population. To keep up with these trends, our member agencies need funding to expand existing senior centers, create new senior services in emerging communities and neighborhoods, and provide opportunities to improve the cultural and linguistic competency of senior programming across the city, not just in traditionally Asian neighborhoods.

- Ensure that DFTA receives the funding they need to fully implement the new citywide languages covered in the new Local Law 30.
- Address the growing need for in-language and culturally competent health care and mental health services for Asian seniors. In particular, overcoming cultural stigma surrounding mental health services requires a multipronged approach to incorporating mental health services into existing services such as homebound meal delivery or adult social day care to reach Asian seniors where they are. This approach would gradually introduce mental health concepts into their lives to avoid socially stigmatizing terms and concepts.
- In a city where more than one in ten seniors is Asian, no Asian-led homebound meal provider has a direct contract with the city. Our member agencies who are sub-contractors for homebound meals often find that their programs are cut first when the city's budget axe falls on the contracting agency. We request that either protections for subcontractors be put in place or for restructuring of contracts to enable Asian senior centers to contract directly with the City for homebound meals.
- Amend the contracting process in order to acknowledge that Asian-led agencies providing services directly to Asian seniors are in the best position to use additional dollars cost effectively.



**Asian American Federation**

# **Asian American Seniors in New York City: *An Updated Snapshot***



***August 26, 2016***

Dedicated to the memory of  
Midori Shimanouchi Lederer and Ida Shimanouchi

Cover Photo Credits: India Home (top left, bottom right); Daniel Lee, see his work at [danleephoto.com](http://danleephoto.com) (top right); and JASSI (bottom left)

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# About the Asian American Federation

## **Mission Statement**

To raise the influence and well-being of the pan-Asian American community through research, policy advocacy, public awareness, and organizational development.

## **What We Do**

As a nonprofit leadership organization, AAF strengthens the capacity of community-based social services by supporting over 60 member agencies and other grassroots organizations in the fields of health & human services, education, economic development, civic participation, and social justice. Our expertise includes:

- *Research & Policy Advocacy:* We produce comprehensive socioeconomic research publications to highlight community needs and advocate for policy changes to improve access to essential services.
- *Organizational Development:* We identify newcomer communities that need social services and incubate new nonprofit groups to meet those needs. We also provide technical assistance and leadership development to help agencies build their capacity.
- *Special Initiatives:* We respond to emerging community needs, such as natural disasters, senior services, and mental health issues. We focus our efforts to raise awareness of and address issues affecting the community.

# Welcome

In New York City, Asians have the fastest-growing senior population, with a significant portion of those seniors being some of the poorest New Yorkers. While our community has a number of strong nonprofit organizations to help our seniors adjust to their lives in the U.S., these organizations are operating beyond full capacity, as advocates have to help seniors with a gamut of services, from finding affordable housing, to combating food insecurity, to accessing medical and mental health services, and much more. The biggest challenge they face is the limited public and private funding available to adequately support the growing demand for services.

Rather than simply present the demographic information about our city's Asian American seniors, we thought it was important to give the seniors and frontline leaders a voice in outlining what they felt were the unmet needs, as well as the policy changes necessary to ensure that seniors are given the resources to live full lives.

Many thanks to our member agencies who helped us collect extensive data for the senior survey and gave thoughtful feedback on our report: Chinese-American Planning Council Open Door, Council of Peoples Organization, Hamilton-Madison House, Homecrest Community Services, India Home, Japanese American Association of New York, Japanese American Social Services, Inc., Korean Community Services of Metropolitan New York, South Asian Council for Social Services, and United Chinese Association of Brooklyn. We also thank Dr. Duy Nguyen of Temple University for his help in planning our report.

This report would not have been possible without the generous support of our funders: AARP, Long Mountain Road Foundation, and the Office of the Queens Borough President, Melinda Katz. Finally, we thank New York City Councilmember Margaret Chin, Chair of the Aging Committee, who remains one of the biggest champions for senior services.

Sincerely,



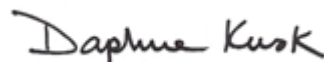
Jo-Ann Yoo  
Executive Director  
Asian American Federation

AARP is honored to support Asian American Federation's and all of its coalition members' commitment to the Asian American & Pacific Islander (AAPI) community in New York City. "Asian American Seniors in New York City: An Updated Snapshot" demonstrates the rapid growth of the Asian American seniors of New York City.

Now at 16 percent of the overall New York City 50-plus population, the Asian 50-plus population faces language barriers, educational attainment, income, housing, social isolation and health challenges and barriers. With the AAPI community, useful meaningful data to get to the true needs of each separate ethnic group means disaggregated data. This report delves deeper by providing the rich disaggregated data that reveals the stark needs of each AAPI ethnic group reported.

Thank you, Asian American Federation, for preparing this vital report adding invaluable information and insights for this rapidly growing AAPI 50-plus segment. As AARP is committed to raising the issues and needs of the AAPI 50-plus communities, we hope this report will be used by individuals, community-based organizations, non-profit groups, the media, funders, and policy makers to build the cases for funding, policies, legislation, and advocacy to improve the lives of Asian Americans & Pacific Islanders 50-plus.

Sincerely,



Daphne Kwok  
AARP Vice President of Multicultural Leadership  
Asian American and Pacific Islander Audience  
Strategy

# Executive Summary

Asian Americans are the fastest growing segment of the senior population in New York City, now representing 16 percent of all seniors ages 50 years and older. Yet programs and resources available to Asian seniors have failed to keep pace with this growth. When it comes to New York City's social service funding for seniors, only 2.7 percent went to senior programs focused on Asians.<sup>1</sup> The funding gap can be traced to two major factors. The consolidation of many social service grants into fewer, larger grant opportunities has led to the exclusion of Asian-led social service providers from the competitive process. Asian-led organizations are often smaller and have less capacity to take on larger grants, despite being in the best position to serve Asian seniors because of the trust and deep roots they have developed in their communities. Secondly, the model minority myth disguises the fact that Asian seniors in New York City are among the poorest seniors in the country. The goal of this report is to dispel these myths and to highlight the great need among Asian seniors.

Key findings of this report include:

- Growth in the Asian senior population in New York City is driven by Asian seniors immigrating late in life and by Asian immigrants aging into senior status,
- Major shifts in demographics are changing the ethnic mix of the Asian senior population in New York City. South Asian and Other Asian groups have senior populations that more than tripled in size from 2000 to 2014,
- Asian seniors are more likely to live in multigenerational households than other seniors,
- Asian seniors are less likely to live in large housing complexes, making Neighborhood Naturally Occurring Retirement Communities (NORC), based in neighborhoods with less dense housing, a better policy fit for Asian seniors,
- The high rates of limited English ability among Asian seniors increase social isolation,
- The diversity of languages spoken in the Asian community makes outreach and provision of services a challenge,
- Asian seniors in New York City are less well-educated than Asian seniors nationally and other seniors in NYC,
- As a consequence, Asian seniors are more likely to be poor and low income than Asian seniors nationally and other seniors in NYC,
- Asian seniors are less likely to have health insurance coverage and to receive Social Security benefits than other seniors.
- Asian seniors in our survey relied on social service organizations to meet social, nutritional and informational needs.

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<sup>1</sup>Asian American Federation (2015). Analysis of City Government Funding to Social Service Organizations Serving the Asian American Community in New York City. New York, NY. Available online at [http://www.aafederation.org/doc/City\\_Social\\_Services\\_Report\\_FINAL.pdf](http://www.aafederation.org/doc/City_Social_Services_Report_FINAL.pdf)



# Executive Summary

In order to address the increasing needs among Asian seniors, the Federation recommends that the City:

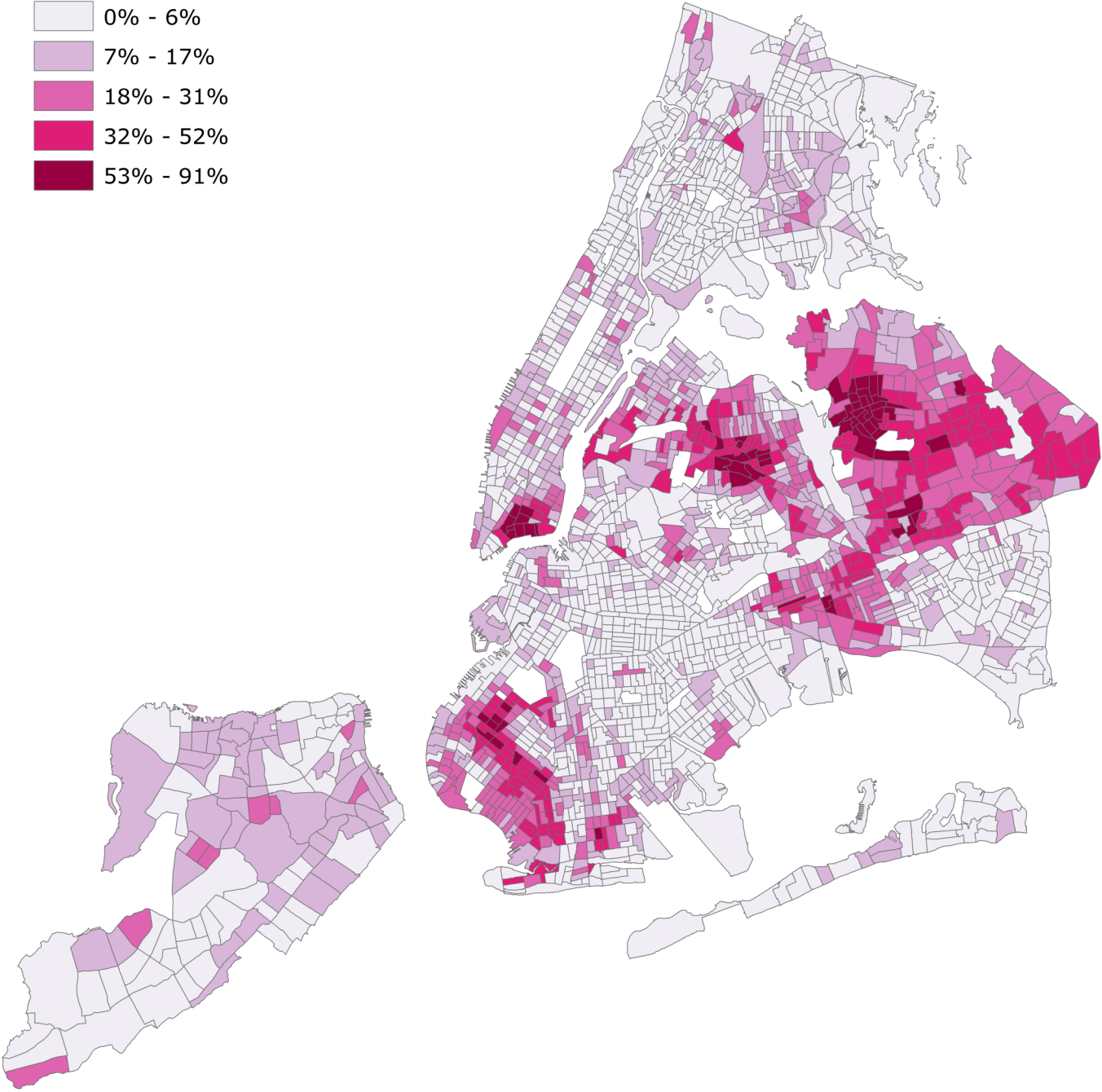
- Increase the resources available for programs addressing Asian seniors,
- Create smaller grant opportunities so that smaller social service providers can compete for City funding,
- Find opportunities to expand the NORC and Neighborhood-NORC programs to include areas with growing populations of Asian seniors,
- Build capacity in Asian-led senior programs which are more likely to provide the culturally and linguistically appropriate services for Asians seniors,
- Ensure outreach to Asian seniors is done in language and through trusted information sources for each community, including ethnic media and social service organizations,
- Improve and expand transportation options for seniors, especially immigrant seniors with limited English ability,
- Alleviate poverty by increasing access to social safety nets to include more recent arrivals,
- Increase access to adult literacy and job skills for low-income Asian seniors who are still active in the labor force,
- Offer employment and volunteer opportunities for Asian seniors to increase income and decrease social isolation,
- Create more affordable senior housing, including culturally appropriate assisted living facilities.

# Asian Senior Population in New York City, 2014

## Legend

### Asian Senior Population Percent of Seniors Who Are Asian

- 0% - 6%
- 7% - 17%
- 18% - 31%
- 32% - 52%
- 53% - 91%



Data Source: 2014 5-year American Community Survey

# Introduction

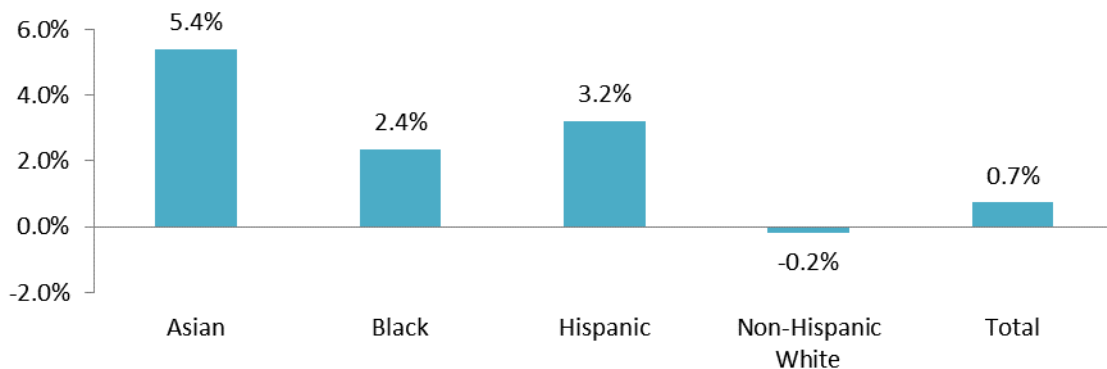
In 2003, Asian American Federation released a ground-breaking report, *Asian American Elders in New York City: A Study of Health, Social Needs, Quality of Life, and Quality of Care*, filling a gap in data on Asian seniors and their needs. The report's detailed findings, including high poverty rates, risk of social isolation, and health and mental health challenges, spurred advocates and policy makers to begin addressing the needs of Asian seniors. Since then, the Asian senior population has more than doubled, continuing the rapid growth in population seen in the original report. Demographic shifts in the ensuing years have made an updated report an urgent necessity.

Our objective for this report is to quantify the changes occurring in the Asian senior population in the city and to present a clearer picture of the needs and challenges faced by our seniors. This report builds on the foundation laid by the first report. With newly available data sources such as the American Community Survey, this report will cover a variety of social, economic and demographic measures to gauge the current state and needs of Asian seniors in New York City. Our report used the 2014 American Community Survey 5-year Public Use Microdata as the primary data source. We also conducted a short survey of 136 Asian seniors who attended senior centers to gain a sense of the issues not covered by the American Community Survey. Our survey covered food security, need for services, transportation, and news sources.

The report is divided into four main sections: demographics, social factors, economic status, and recommendations. Demographics cover the growth and changing ethnicities of Asian seniors in New York City. Social factors examine senior living arrangements, language abilities, and educational attainment. Economic status presents the statistics on poverty, Social Security benefits, housing, and health insurance coverage for Asian seniors. The final section on recommendations highlights some of the policy changes necessary to help support the community organizations providing services to Asian seniors and to address the needs of Asian seniors.

# Demographics

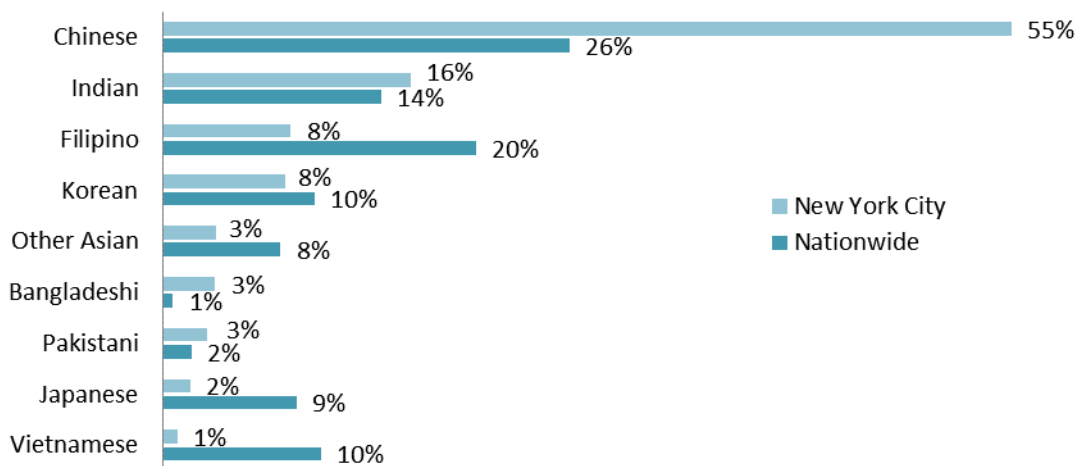
**Annual Population Growth Rates, 2000 to 2014**



**Asians were the fastest growing segment of the senior population in New York City.**

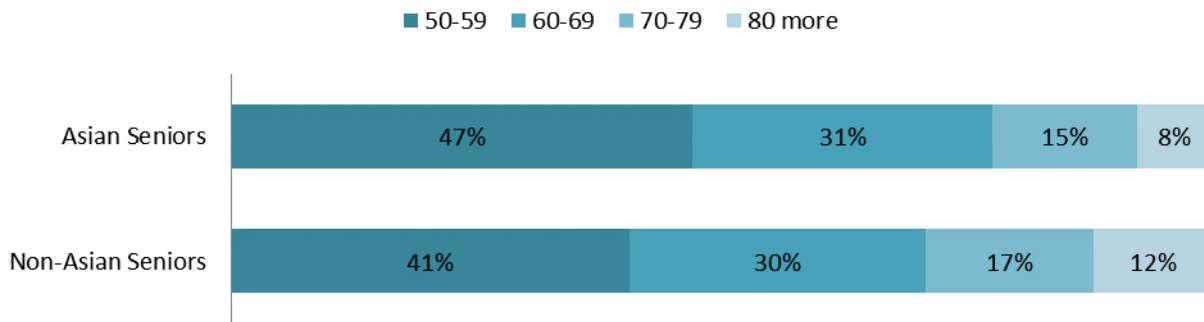
- Asian seniors represented 16 percent of all residents age 50 years and older.
- Asian seniors grew from just over 178,000 residents in 2000 to almost 372,000 residents in 2014.
- The mix of ethnicities for Asian seniors in New York City differs from Asian seniors nationally.
  - Chinese seniors make up more than half of Asian seniors in New York City.
  - South Asian seniors were a larger portion of New York City’s Asian senior population compared to nationally.
- Major shifts in ethnic mix are underway.
  - Bangladeshi were the fastest growing senior group, up more than 600% from 2000 to 2014. Pakistani and Other Asian seniors more than tripled over the same time period.

**Ethnicities of Asian Seniors**



<sup>2</sup> In New York City, the predominant ethnic groups included in the Other Asian category include Burmese, Cambodian, Indonesian, Malaysian, Nepalese, Sri Lankan, Thai, and Vietnamese. Of these groups, Vietnamese and Thai have the largest senior populations as of the 2010 Census when more detailed data was last available.

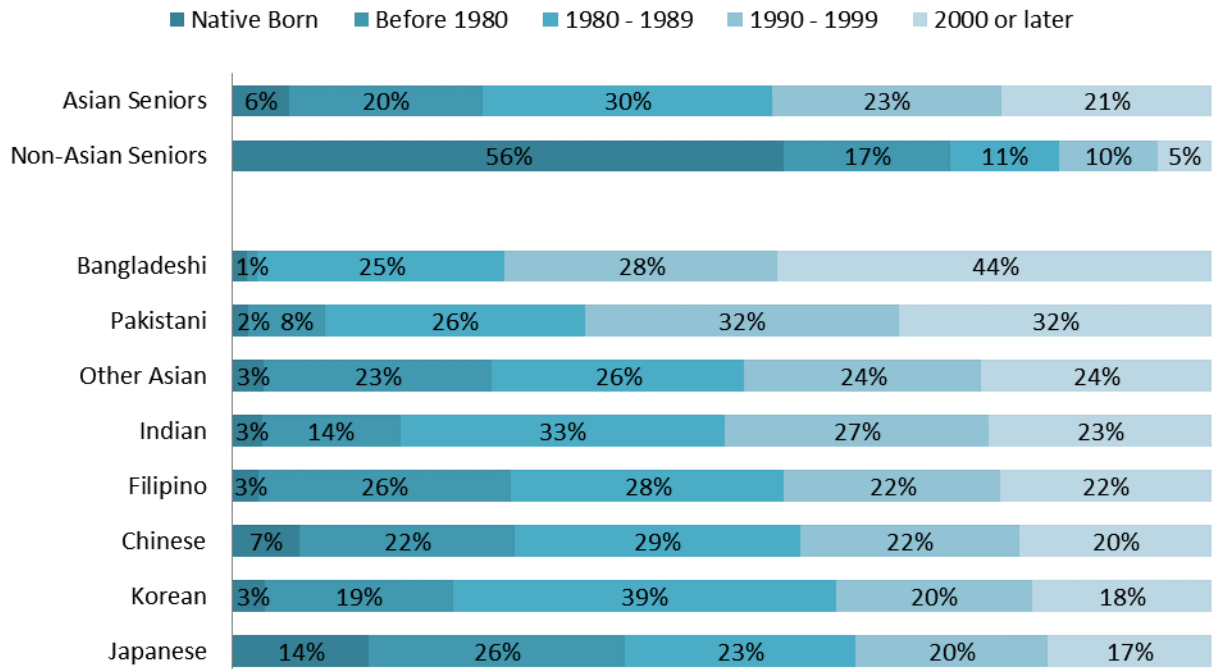
## Seniors in New York City by Age Group



- In New York City, Asian seniors as a group were much younger than non-Asian seniors.
- The immigration reforms of the 1960's resulted in a wave of immigration from Asia during the latter half of the 20<sup>th</sup> Century. More than 50 years later, these immigrants are now entering their retirement years.
- In addition to Asians aging into the senior population, immigration continues to add directly to the Asian senior population, with more than 1 in 5 Asian seniors arriving in 2000 or later.
- Bangladeshi and Pakistani seniors were even more likely to be recent arrivals than seniors from the other Asian groups.

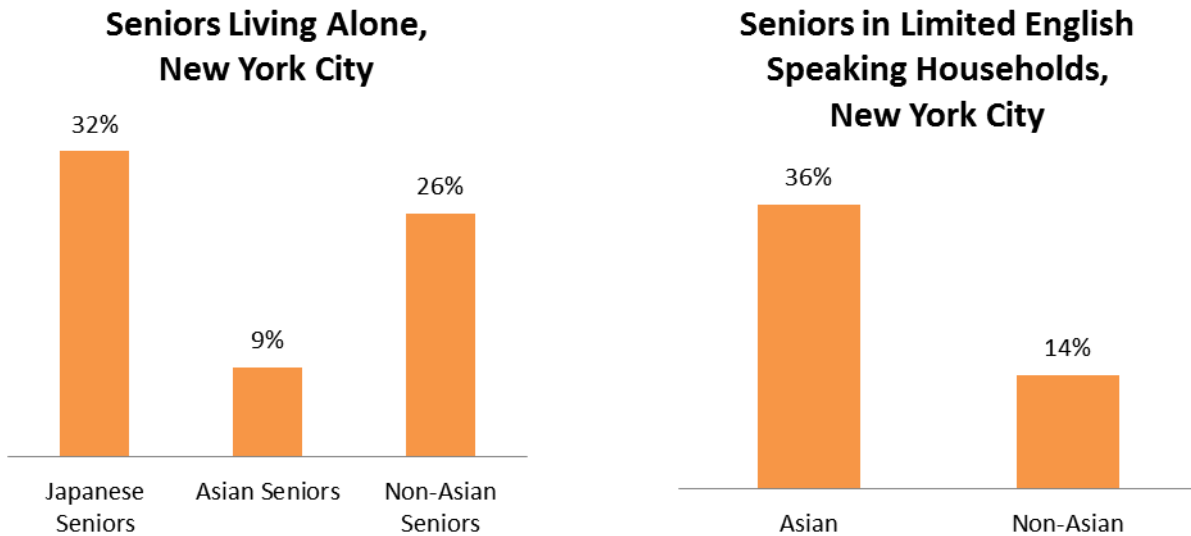
**About half of Asian seniors were less than 60 years old.**

## Nativity and Decade of Entry, New York City



## Social Factors

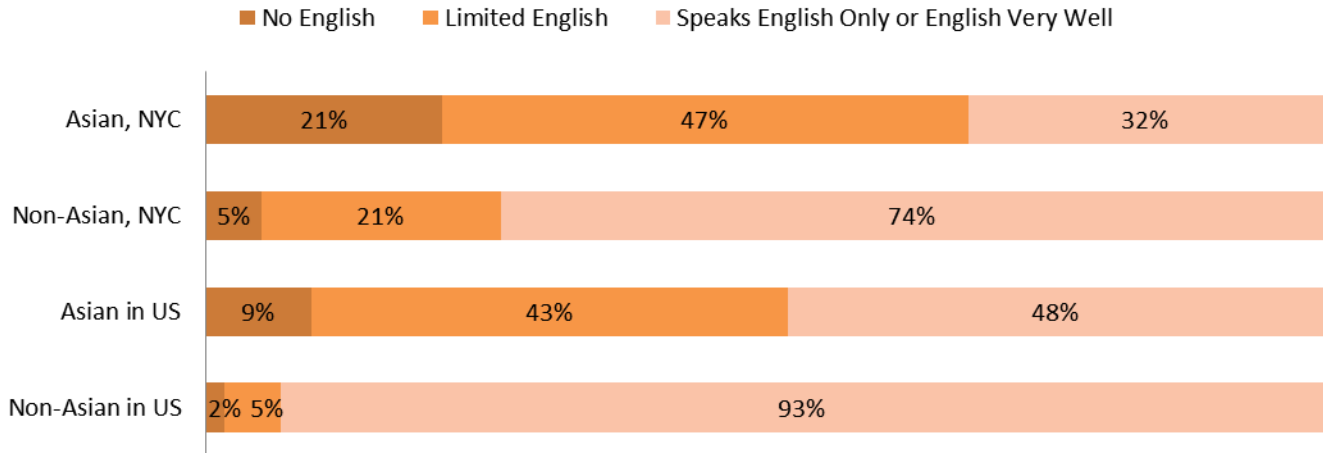
- Japanese seniors stand out as much more likely to live alone than even non-Asian seniors, putting them at risk for social isolation.
- Even though many Asian seniors do not live alone, Asian seniors can still be isolated by language. More than 1 in 3 Asian seniors live in a limited English speaking household, where no one in the household ages 14 years or older speaks English very well. These households often rely on younger children to translate when interacting with the mainstream.



- Our survey of Asian seniors also found additional risk factors for social isolation among those surveyed.
  - The majority (76%) had a small circle of friends (1-5 close friends).
  - Among those living alone or in senior housing, only 3 in 5 had family living close by.
  - 55 percent expressed some symptoms of loneliness or depression.
- Almost 60% of the seniors surveyed cited social activities as one of the services they used most at senior centers.
- Ethnic media was the most cited source of information for seniors surveyed.
  - Senior center staff also were cited as important sources of information for seniors in the Chinese, Korean and Pakistani communities, largely due to the establishment of stable, physical senior centers in those communities.
  - Family remained an important source of information for Indian, Japanese, and Pakistani communities.
  - Places of worship were an important source of information for Indian seniors, filling a void in a community left without a permanent physical senior center.

**Risk factors for social isolation were high among Asian seniors.**

## English Proficiency Among Seniors, Age 50 and Older



- More than 2 in 3 Asian seniors in New York City were limited English proficient (LEP).
- The more than 231,000 Asian seniors who were LEP in New York City represent 29% of the senior LEP population in the entire city.

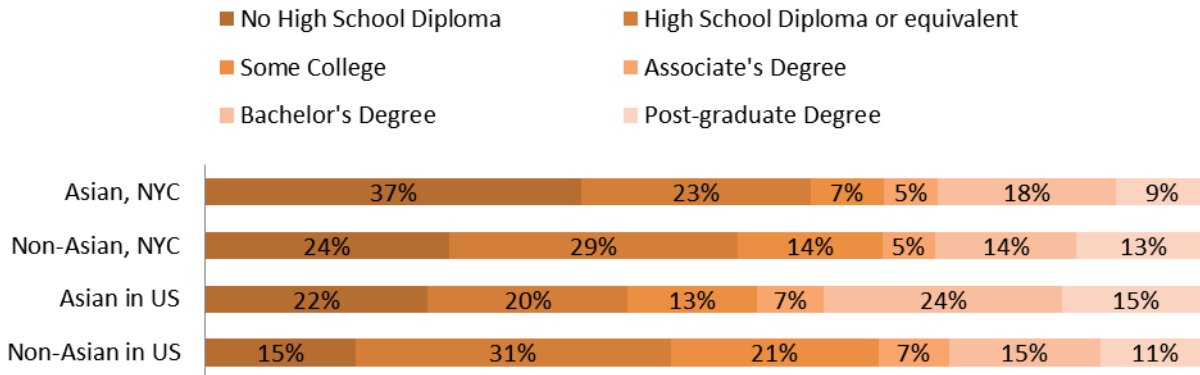
**One in five Asian seniors in NYC spoke no English.**

- For almost all the languages spoken at home by Asian seniors, half or more of those seniors were limited English proficient.
  - The only exceptions were Hindi speakers, who were just under half at a 49% LEP rate, Tagalog speakers with a 35% LEP rate, and Tamil speakers with a 25% LEP rate.
  - LEP rates for Asian seniors were around 9 in 10 for Chinese (including Cantonese, Mandarin, Taiwanese), Korean, Vietnamese, Burmese and Cambodian speakers.

Language Spoken	Speakers	LEP Rate
Chinese	167,071	90%
English Only	47,403	N/A
Korean	24,471	91%
Tagalog	23,680	35%
Bengali	17,365	77%
Urdu	9,751	66%
Hindi	8,195	49%
Punjabi	7,891	75%
Japanese	4,300	63%
Spanish	3,119	50%
Malayalam	2,934	52%
Gujarati	2,882	57%
Vietnamese	2,735	91%
Thai	2,001	77%
Tamil	1,128	25%
Burmese	1,052	90%
Arabic	1,015	77%
Mon-Khmer, Cambodian	842	93%
Persian	765	71%
Indonesian	763	67%
Sinhalese	659	54%
Nepali	645	74%
Other Asian Languages	5,073	62%
Other Languages	3,235	52%

# Social Factors

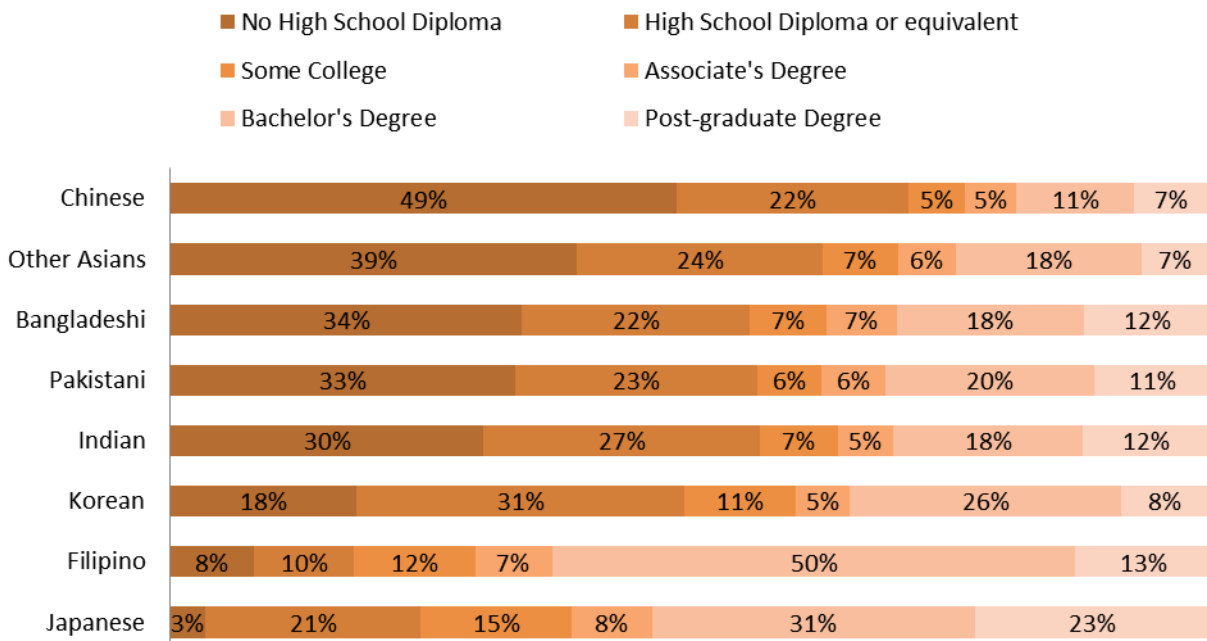
## Educational Attainment of Seniors, Age 50 and Older



**Asian seniors in NYC were much more likely to never have completed high school.**

- Asian seniors in New York City were also less educated than Asian seniors nationally and non-Asian seniors in New York City.
  - More than 1 in 3 Asian seniors in New York City never completed high school.
  - Asian seniors in New York City were less likely to complete college than Asian seniors nationally.
- Almost half of Chinese seniors never completed high school. By contrast, more than half of Filipino and Japanese seniors had completed a post-secondary degree.

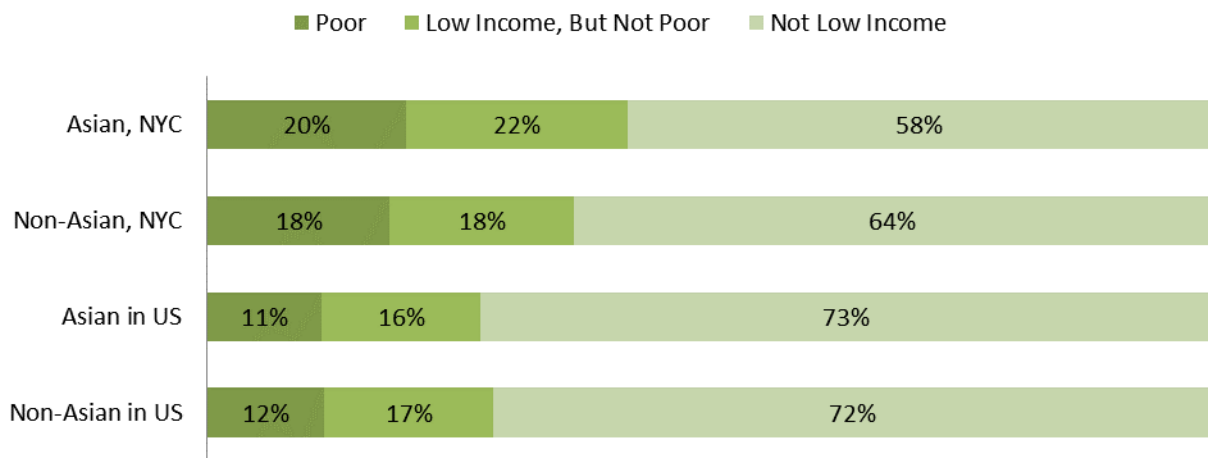
## Educational Attainment of Asian Seniors by Ethnicity





# Economic Status

## Poverty Status for Seniors, Age 50 and Over



- Asian seniors in New York City were more likely to be low-income or poor than Asian seniors nationally.
- In New York City, Bangladeshi, Chinese, and Pakistani seniors had the highest poverty and low-income rates, with about 1 in 4 seniors living in poverty.
- As a consequence, almost half of seniors in our survey expressed some form of food insecurity. Most cited a reliance on food banks, senior center or homebound meal delivery services to meet their food needs. Almost half of seniors surveyed (45%) cited congregate meals as a reason for going to senior centers.
- Almost half of seniors surveyed (48%) went to senior centers for social services, including help to apply for benefits, access health and mental hygiene services, and dealing with housing issues.

**Asian seniors were among the poorest groups in NYC.**

Ethnicity	Seniors in Poverty	Senior Poverty Rate	Share of Seniors Who Are Low Income, But Not Poor
<b>Chinese</b>	39,374	22%	25%
<b>Indian</b>	7,586	15%	18%
<b>Korean</b>	4,383	17%	22%
<b>Bangladeshi</b>	3,001	27%	31%
<b>Filipino</b>	2,718	10%	10%
<b>Other Asians</b>	2,486	18%	21%
<b>Pakistani</b>	2,318	25%	22%
<b>Japanese</b>	535	9%	16%

# Economic Status

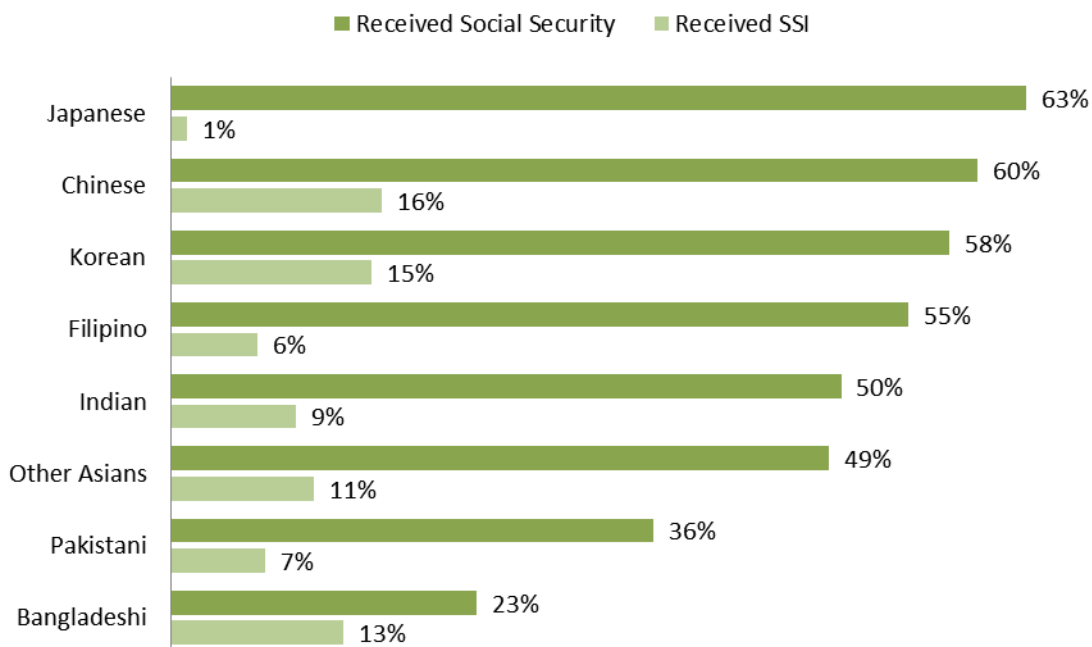
## Social Security and SSI for Seniors Age 62 and Older



- While Asian seniors in New York City were less likely to receive Social Security benefits compared to non-Asian seniors in the City, they were more likely to receive Supplemental Security Income (SSI).
- Bangladeshi and Pakistani seniors were much less likely to receive Social Security benefits largely due to a higher likelihood of being recent arrivals.

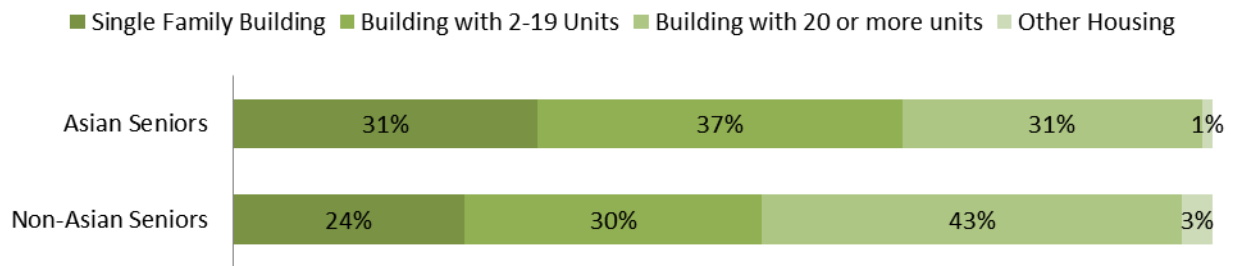
**Asian seniors were more likely to receive SSI benefits.**

## Social Security and SSI Receipts by Ethnicity



# Economic Status

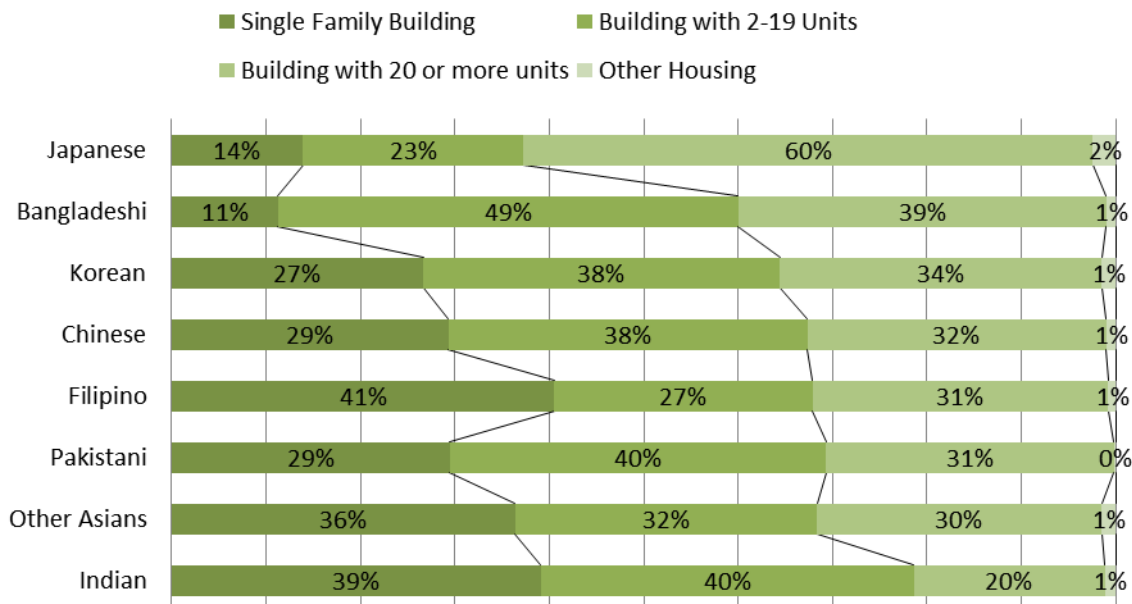
## Housing Type, New York City



**The Neighborhood NORC model may be a better fit for Asian seniors.**

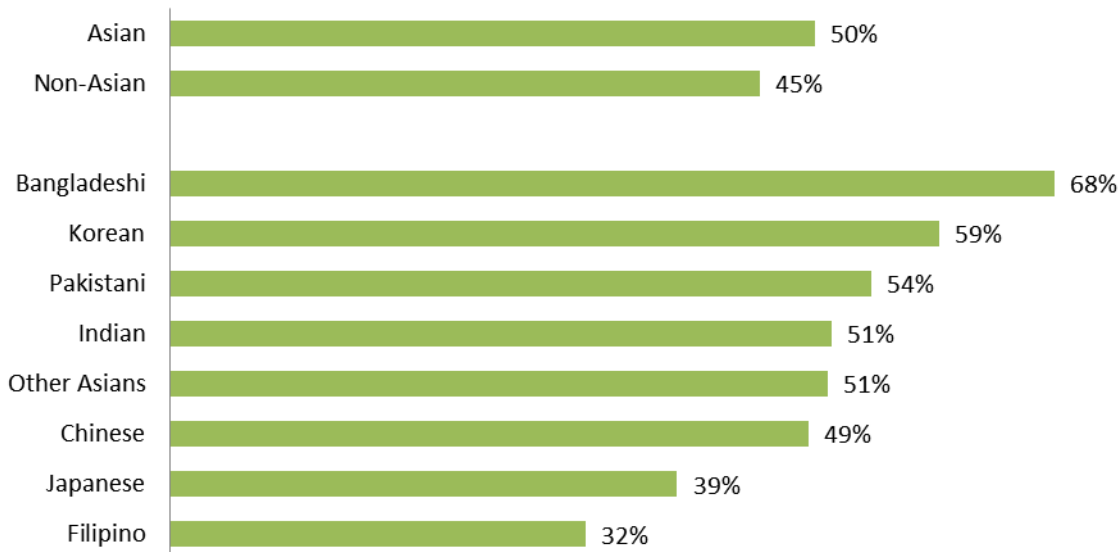
- With Asian seniors more likely to live in smaller buildings, the Neighborhood Naturally Occurring Retirement Community (NNORC) model would cover more Asian seniors than the traditional NORC model. Traditional NORCs are based in large apartment buildings or development projects, while NNORCs encompass less densely built neighborhoods.
- Japanese seniors were more likely to live in larger housing complexes. However, the Japanese population is more spread out across the city than almost all other Asian seniors, making a Japanese-focused NORC difficult to create.
- Nearly half of Bangladeshi seniors were living in 2-19 unit buildings, the largest share for that type of housing among all Asian senior groups.

## Housing Type, Asian Ethnicities, New York City



# Economic Status

## Percent of Seniors Living in Housing Burdened Households

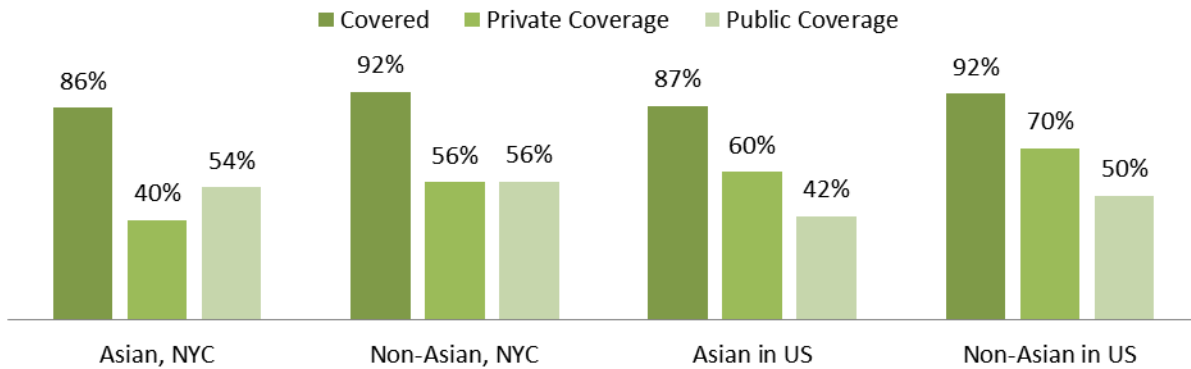


**Finding affordable housing is a challenge for Asian seniors.**

- Half of Asian seniors lived in households where housing costs were 30% or more of household income.
- More than half of Bangladeshi, Indian, Korean, Pakistani, and Vietnamese seniors lived in housing burdened households.
- Filipino and Japanese seniors were less likely to live in housing burdened households than non-Asian seniors.
- Not surprisingly, the lack of affordable housing for Asian seniors has led to overcrowding in households with Asian seniors. While 17% of Asian seniors were living in overcrowded households (households with more than 1 person per room), only 7% of non-Asian seniors were living under those conditions.
- Bangladeshi and Pakistani seniors were more than twice as likely to live in overcrowded housing than Asian seniors in general.
- Japanese and Korean seniors were more like non-Asian seniors, with only 3% of Japanese and 7% of Korean seniors living in overcrowded housing.
- Transportation to senior centers was a challenge for the seniors in our survey. Over 4 in 10 surveyed had to travel a half hour or more to reach the senior center. Almost 3 in 4 seniors using buses and subways to reach the senior center had to travel for 30 minutes or more.

# Economic Status

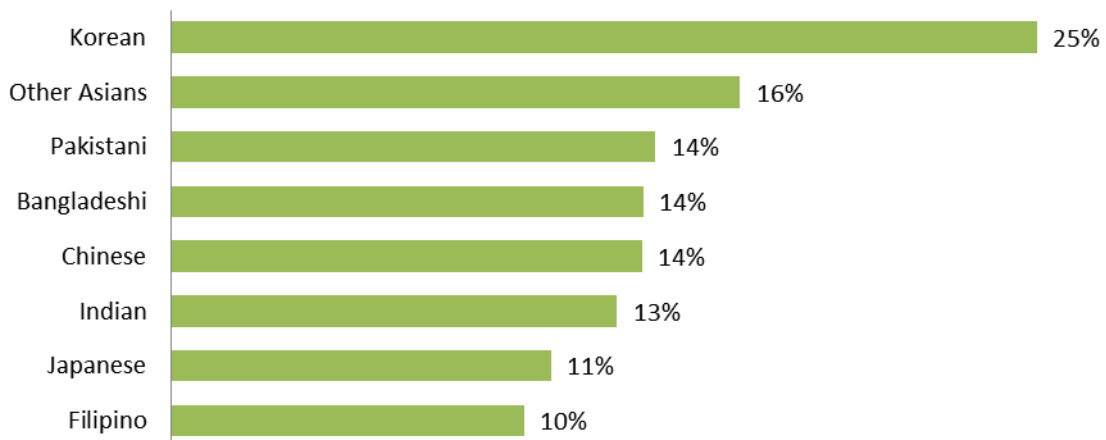
## Health Insurance Coverage for Seniors Age 50 and Older



- Asian seniors in New York City were far less likely to have private coverage than non-Asian seniors and Asian seniors nationally.
- Korean seniors in New York City were the most likely to not have health insurance coverage, followed by the “Other Asians” category.
- There are over 47,000 uninsured Asian seniors in New York City.

**Asian seniors in NYC were less likely to have health insurance than non-Asian seniors.**

## Percent of Seniors Uninsured by Ethnicity



# Recommendations

## **Address the growth and diversity in the Asian senior population.**

- Increase funding for programs that serve Asian seniors in order to match the rapid growth in the population. From FY 2002 to FY 2011, only 2.4% of Department for the Aging contract dollars went to Asian-led or Asian-focused social service organizations. This percentage has not substantially changed since the Federation's first analysis of city social service contracts covering FY 1991 to FY 2000. In the meantime, Asians grew to 16% of all seniors in New York City.
- Create opportunities for smaller Asian-servicing community-based organizations (CBOs) who target emerging Asian ethnic populations or neighborhoods through smaller grant opportunities, streamlining contracting requirements, and allowing for more funding protections for sub-contractors when they are part of larger coalitions. As the Asian senior population diversifies, smaller CBOs with roots in communities are more able to nimbly react to the changing needs of their communities. The City should seek to leverage their resources by investing in these smaller CBOs that are already doing innovative work addressing this emerging demand.

## **Enhance social services available to Asian seniors to alleviate social isolation and to connect immigrant seniors to a broader community.**

- Find opportunities to expand the NORC and Neighborhood-NORC programs to include areas with growing populations of Asian seniors. In particular, given that Asian seniors were more likely to live in lower density housing, Neighborhood-NORCs would be the preferred model to use when expanding to new Asian neighborhoods.
- Expand Asian-led senior programs which are more likely to provide the culturally and linguistically appropriate services for Asians seniors. By building community infrastructure, the City also benefits from their outreach capabilities. Investing in a wide range of Asian-led organizations will help create a lasting infrastructure to meet the growing diversity in the Asian community.
- Ensure outreach to Asian seniors is done in language and through trusted information sources for each community, including ethnic media and Asian-led social service organizations. Asian seniors are less aware of the benefits and services available to them largely due to language barriers and the lack of outreach by government and mainstream senior serving agencies.
- Improve and expand transportation options for seniors. New York City's public transit system is a critical resource for Asian seniors. However, Asian seniors are more likely to be found in the outer boroughs where access to public transit is more limited. Access-a-Ride, a program for residents with disabilities and used by many seniors, is hard to use for seniors in general, much less Asian seniors who were more likely to have language barriers as well. Access-A-Ride needs to be revamped, streamlined, and expanded to help all disabled seniors and especially Asian ones.

# Recommendations

## Improving economic conditions for Asian seniors

- Alleviate poverty by increasing social safety nets to include more recent arrivals. Targeted outreach efforts to increase low-income Asian seniors' awareness of assistance programs such as Senior Citizen Rent Increase Exemption (SCRIE), Home Energy Assistance Program (HEAP), Social Security, Medicaid, and Supplemental Security Income (SSI).
- Increase access to adult literacy and job skills for low-income Asian seniors who are still active in the labor force. As the new Workforce Innovation and Opportunity Act is being implemented, an opportunity exists for city and state agencies to create provisions for trainings focused on low-income immigrant seniors during the creation of the new workforce training programs.
- Offer employment and volunteer opportunities for Asian seniors to increase income and decrease social isolation. Programs such as the Senior Community Service Employment Program (SCSEP), offered to all seniors, provides recently arriving Asian immigrant seniors the chance to build work history and job skills in their new homeland with part-time, minimum wage jobs at community organizations or government agencies. These programs will need increased funding to address growing demand.
- Create affordable senior housing, including culturally appropriate assisted living. The City's affordable housing plan when implemented should include measures to encourage multi-generational housing. With many Asian seniors living in multigenerational households, accommodating the needs of Asian seniors and their families is essential to maintain existing informal support systems for those seniors.
- Help Asian seniors stay in their homes and neighborhoods. Programs such as SCRIE need to create in-language outreach plans that build awareness of the assistance that is available for Asian seniors. In addition, SCRIE is only available to seniors in rent-regulated apartments. New programs need to be developed to address growing numbers of Asian seniors living in non-rent-regulated housing. Many Asian seniors are relatively recent arrivals to New York City and are not able to access rent-regulated apartments. Others are aging in place and facing challenges in meeting rent with their fixed incomes with interest rates at historic lows.



## **Asian American Federation**

### **MEMBER AGENCIES**

Asian American Legal Defense and Education Fund

Asian Americans for Equality

Asian & Pacific Islander Coalition on HIV/AIDS

Asian Professional Extension

Asian Women's Christian Association

Asian Youth Center of New York

Brooklyn Chinese-American Association

Charles B. Wang Community Health Center

Chhaya Community Development Corporation

China Institute in America

Chinatown Manpower Project

Chinatown YMCA

Chinese-American Planning Council

Chinese Methodist Center Corporation

Chinese Progressive Association

Coalition for Asian American Children and Families

Damayan Migrant Workers Association, Inc.

Filipino American Human Services, Inc.

Flushing YMCA Korean Program

Garden of Hope

Greater Chinatown Community Association

Hamilton-Madison House

Homecrest Community Services

Immigrant Social Services, Inc.

Indochina Sino-American Community Center

Japanese American Social Services, Inc.

Korean American Community Center of New York

Korean American Family Service Center

Korean American League for Civic Action

Korean American Senior Citizens Society of Greater NY

Korean American Voters' Council

Korean American Youth Foundation

Korean Community Services of Metropolitan New York

Korean Family Counseling and Research Center

Lower East Side Family Union

MinKwon Center for Community Action

New York Asian Women's Center

Sakhi for South Asian Women

The Sikh Coalition

South Asian Council for Social Services

South Asian Youth Action

YWCA of Queens

### **PARTNER AGENCIES**

Adhikaar

A Place for Kids

Arab American Association of New York

Asian American Arts Alliance

BACDYS

Council of People's Organization

CAAAY Organizing Asian Communities

DRUM – South Asian Organizing Center

General Human Outreach

India Home

Indo-Caribbean Alliance

Japanese Association of New York

Mekong

OCA-NY

Sapna NYC

United Chinese Association of Brooklyn

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South Asian Council for Social Services  
United Chinese Association of Brooklyn



**Asian American Federation**

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Councilmember Chin and Members of the Committee on Aging,

My name is Miranda Hoffner, and I am the Assistant Director of Accessibility at Lincoln Center for the Performing Arts, a member of the Cultural Institutions Group. On behalf of Lincoln Center and the Cultural Institutions Group, I want to express our continuing gratitude for the Council's longstanding leadership and support.

In FY18, Lincoln Center for the Performing Arts was fortunate to receive \$51,500 from the Council's Geriatric Mental Health Initiative. We are here to request that the Council continue this funding in FY19. Please also support the CIG's request that you baseline the \$10 million received in FY18, and that an additional \$20 million be allocated for all cultural organizations, providing a means of implementing the City's cultural plan.

One particularly vulnerable and isolated group within the senior population in New York City is individuals with dementia. It is estimated that over 5 million Americans are living with dementia, and that number is expected to triple by 2050. At Lincoln Center for the Performing Arts, we seek to combat the isolation and the caregiver stress that the disease causes through Lincoln Center Moments, an arts program that focuses on community and self-expression.

In FY18, we will welcome up to 900 New Yorkers for performance-based programs, followed by music, movement and art-making workshops. Bringing the outstanding talent of Lincoln Center's stages to an intimate and supported setting, individuals with dementia and their caregivers can access world-class performances and workshops that foster discussion, self-expression and socialization. For many participants, the arts are a central reason why they make New York their home, and this program aims to return that vital part of their lives. In the words of some of our participants, "my mom does have Alzheimer's...but while she was at Lincoln Center she came alive. I greatly enjoyed the experience as well" and "the strength of this program is it cultivates the patient's imagination, helps them to socially interact with others."

This project also has a unique cross-disciplinary approach, blending the arts and social services. We are partnering with CaringKind, the former Alzheimer's Association's New York Chapter to train our staff, consult on supporting both individuals and caregivers, and reach out to underserved New Yorkers. Through a study conducted by the Louis Armstrong Center for Music and Medicine last spring, this program has proven significant positive impacts on participants in terms of elevated mood and connection to loved ones. The development of the project and program findings will be made into training modules and shared with performing arts centers throughout the country to encourage more access to the arts for people with dementia.

Lincoln Center for the Performing Arts is grateful to the Council for generously granting \$51,500 from the Council's Geriatric Mental Health Initiative. We request continued support as we expand our work to reach more New Yorkers impacted by dementia in FY19.

On behalf of Lincoln Center, thank you for your support and consideration.



## “Making History”

Mohammad Razvi CEO of COPO

1077 Coney Island Ave Brooklyn NY 11230 917-416-2664 - mrazvi@copo.org  
Date March 23, 2018

Good afternoon.

My name is Mohammad Razvi I am the CEO of Council Of Peoples Organization-known as COPO. I thank the Chair of the Committee on Aging, Council Member Margaret Chin, and Council Members that are here today for holding this historic important hearing for the New Yorkers who worked hard all their lives to make this a - great city and for me also I am a **grandfather. I will be needing senior services soon.** COPO is the largest Muslim Arab South Asian servicing community based organization in Brooklyn, with an office space over 20,000 sqft. And 45 staff and volunteers we serve over 15,000 community members annually. From Universal PreK programs, Afterschool Youth Programs, Adult Literacy programs, Voter registration, Immigration services, SNAP, Health insurance and we are the first Halal senior center in Brooklyn and possibly the City. We are a one stop shop. There are over 1 million Muslims in the city and growing. Some are seniors and like all seniors they have worked hard in the city, they have provided for their families and they have paid taxes, yet they receive no services. There are no senior centers to provide them with a culturally sensitive and dietary appropriate meals for them except one, our center COPO Halal Senior Center. COPO is the first Halal Senior Center in Brooklyn and possibly the City to provide such services to them. And we are very, very, very, very, very under funded program. Our life line is discretionary resources that is the only way we are able to run our program, we need the support to provide the services to our aging community. The needs are many, from time to time seniors share their hardships with us, after all the years of providing for their children they could not save money for themselves now in their time of need the children are not able to support them. In the years it has become expensive to live in the city, even in my neighborhood in Brooklyn. The seniors have to make a decision whether to pay for food or pay for rent, medicine or other expenses. Hear their hardships, just when I thought it can't get any worse, we started receiving phone calls from seniors who are home bound, and not able to come to our center to receive meals and services. OMG. So I contacted DFTA Team and meet with Commissioner Carrado and -- Ladies and Gentleman it gives me great pleasure and honor to present to you the first ever Halal Meals On Wheels Program! This would not have been possible without the help of Commissioner Carrado and her wonderful team DFTA to help us Make History in NYC.

I request you to allocate more resources to DFTA and support our program and likeminded community programs. I know that there are many LARGE SENIOR CENTERS and programs. They serve everyone, God Bless them for their efforts. Let me and other small community senior centers service our own community. This is not rocket science, we are not putting a man on the moon, we are not performing heart surgery let us serve our community with culturally sensitive and dietary appropriate services.

God Bless,  
Mohammad Razvi

**COUNCIL OF PEOPLES ORGANIZATION**



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**City Council Committee on Aging**

**FY19 Budget Hearing**

**March 23, 2018**

Remarks by Molly Krakowski, Director of Legislative Affairs

Jewish Association for Services for the Aging (JASA)

Good morning. Thank you Councilmember Chin for chairing today's Fiscal 2019 budget hearing on aging. My name is Molly Krakowski and I am Director of Legislative Affairs at JASA.

JASA is a not-for-profit agency serving the needs of older adults in the greater New York area. Its mission is to sustain and enrich the lives of the aging in the New York metropolitan area so that they can remain in the community with dignity and autonomy. JASA has developed a comprehensive, integrated network of services that provides a continuum of community care. Programming promotes independence, safety, wellness, community participation, and an enhanced quality of life for New York City's older adults. These programs reach over 40,000 clients and include home care, case management services, senior centers, NORC supportive services, home delivered meals, caregiver support, continuing education, licensed mental health, housing, advocacy, legal services, adult protective services, and guardianship services. We welcome today's hearing as an opportunity to share our priorities for FY19 and beyond.

We are very appreciative to the Council, and Council Member Chin, for pushing for significant funding increases for the Department for the Aging in FY18, and for supporting the needs of the human services sector. There are still significant continuing inequities in salary parity (specifically for staff in caregiver programs, NORC programs and senior centers). Also, there is an ongoing delay in agencies receiving the funds already allocated for salary increases in HRA Adult Protective Services contracts.

JASA's budget requests and priorities for FY19 and beyond are inextricably tied to fair funding of social services contracts in New York City. We are looking to the City to fully fund NYC contracts, and ensure that the workers in NYC contracted non profit organizations are paid a decent, livable wage.

In FY19, JASA is calling for the following:

➤ **Salary Equity**

As the City continues to rightsize budgets, JASA is looking to a targeted focus on implementing increases in salaries for all DFTA funded contracts. With the minimum wage at DFTA increasing to \$13.50/hour, there must be greater recognition of the professional staff at DFTA contracted programs reflected in salary increases for supervisors, social workers and other program staff. Through the Senior Center Model Budget (and an influx of \$20 million) we hope to resolve the issue for Senior Center staff, however, the salaries at NORC programs, Caregiver programs, and other DFTA contracts remain significantly underfunded. Competitive salaries are needed in order to retain qualified staff, avoid turnover, and provide uninterrupted service to clients. With the aging population increasing at an accelerated rate, the City should recognize the ever growing need to attract skilled individuals, interested in the geriatric field.

➤ **Funding for Culturally Appropriate Home Delivered & Congregate Meals**

For over 30 years, JASA has provided homebound older adults with a daily nutritious and culturally appropriate home delivered meal. Meals are prepared by caterers with very clear nutrition guidelines, and delivered to clients' homes. As with other City funded contracts, the Home Delivered Meal program is significantly underfunded, and to provide a culturally appropriate meals is nearly unsustainable at the current rate of reimbursement. Last year, JASA served 702,089 home delivered meals, 57% were kosher meals. Providing kosher meals cost JASA an additional \$1.35 - \$1.45 per meal; as a result, JASA projects a deficit of \$157,000 for FY18. The last rate increase for home delivered meals was in FY15. Despite this increase, DFTA funding remains well below the national average of providing a meal (\$11.06).

The congregate meals provided at senior centers are also underfunded and reimbursement rates are not uniform across contracts and providers. JASA operates neighborhood senior centers throughout the Bronx, Brooklyn, Manhattan, and Queens. Senior centers provide seniors a hot and nutritious meal, as well as physical fitness and health and wellness activities, classes, lectures, trips, meaningful volunteer opportunities, and intergenerational activities. Physical fitness activities are mandated by DFTA and are very popular. They are a vital component of each center's programming, providing the participants with activities that promote strength, balance, flexibility, and endurance. Despite the wonderful programming offered at these community centers, limited funding for meals directly correlates to reduced participation in a host of other programs, putting older adults and providers at risk.

Unfortunately, food costs were not addressed in the Senior Center Model Budget process, and therefore we are turning to the City Council to ensure that food rates are brought up as the City negotiates the final FY19 budget.

As the aging community grows in numbers and diversity, City contracts must pay for the full cost of service delivery. We ask the City to invest in funding for culturally appropriate congregate and home delivered meals. JASA, along with our colleagues in the aging services community, are asking for an increase of \$1 per meal - approximately \$7.6 million for congregate and \$4.5 million for home delivered meals.

➤ **New York City Council Initiatives**

JASA, like others in the not for profit sector, relies heavily on Council discretionary funding to fill in the gaps, in many cases, for the a lack of adequate government funding. For some programs, Council initiatives are the vital bridge that enables them to continue, for others, it offers opportunities to deliver necessary services that are otherwise unavailable because of inadequate funding. JASA benefits from the following initiatives: Support Our Senior; Healthy Aging; Naturally Occurring Retirement Communities (NORC); Senior Center Enhancements; Domestic Violence and Empowerment; Geriatric Mental Health; Digital Literacy, and others.

We are looking to the City to restore the funding at FY18 levels for most initiatives, and increase funding for the NORC Initiative to \$5 million. This increase would assist existing providers to pay for the unfunded nursing mandate, and open the door to new pilot programs.

➤ **Assigned Counsel Project**

JASA applauds the Mayor and City Council for enacting Universal Legal Access in Housing Court. However, there are many seniors who are just over 200% of poverty, and therefore remain ineligible for an attorney under the new legislation. These individuals are living on a fiscal cliff due to a high rent burden and often fixed incomes. Two thirds of seniors in rent regulated apartments use more than 50% of their income for rent, and less than 50% of those eligible for SCRIE utilize the benefit. Many seniors only receive SCRIE after they are already paying more than 50% of their income in rent and are frozen at that level, leaving them financially insecure.

The Assigned Counsel Project, funded through DFTA, provides seniors a free lawyer and social worker to assist them as they navigate the court system and keep them in the community with support. ACP reaches the older adults who are in need of social services and are not eligible for Universal Access. However, due to a lack of funding, JASA is only able to assist approximately 10% of the older adults coming through the Queens' Court. We ask for expanded funding for ACP, or for the Administration to amend the Universal Access legislation available in Housing Court to include more older adults.



➤ **Affordable Senior Housing**

We are pleased with the City's focus on preserving and expanding affordable housing options for New Yorkers. JASA operates eight senior houses in Brooklyn, Manhattan, and Queens. The average wait list for JASA housing is over 10 years, and there is currently no new federal funding available. Most new housing developments in New York remain unaffordable for seniors on fixed incomes. The growing needs of seniors must be a part of any affordable housing plan set forward by the City, and we look forward to working with the City when opportunities become available.

Thank you for the opportunity to offer this testimony on issues relevant to supporting New York City's aging population. JASA looks forward to working with the City Council, the Mayor, and the Department for the Aging in implementing a FY19 senior-friendly budget.



**CITYMEALS**  
ON WHEELS

**Preliminary budget and oversight hearing for the Department for the  
Aging  
Aging Committee  
March 23, 2018**

**Testimony submitted by: Rachel Sherrow  
Associate Executive Director  
Citymeals on Wheels  
355 Lexington Avenue, NYC 10017  
(212) 687-1234  
Rachel@citymeals.org**

**My name is Rachel Sherrow and I am the Associate Executive  
Director at Citymeals on Wheels. I would like to begin by thanking  
the Council for their continued support of aging services and  
Citymeals on Wheels which will help to deliver over 2 million meals to  
nearly 18,400 homebound elderly citywide this year. I also want to  
thank the Council and most especially Council woman Margaret  
Chin for taking the lead with the Year of the Senior last year helping  
to support core services which had been under funded for years.**

**As most of you know, Citymeals on Wheels is a not-for-profit agency  
working in a public/private partnership with the New York City  
Department for the Aging. The Department funds the meals that  
homebound elderly receive Mondays through Fridays, and  
Citymeals on Wheels funds the same network of providers to deliver  
weekend and holiday meals. On the days the city does not provide  
a meal, Citymeals steps in to prevent our aging neighbors from**

being without food or human company. In fact, Citymeals, as an added benefit generates revenue for New York City through the federal government's cash in lieu of commodities program which reimburses DFTA approximately 67 cents for every meal funded by Citymeals. All of this money goes toward the city-funded weekday meals program, bringing in over \$1.4 million last fiscal year and an additional 180,000 home delivered meals for those who need it. In-home services like meals on wheels are incredibly vital to those who are frail and vulnerable and often hidden behind their doors.

Our population is aging throughout our country and right here in NYC, with 17% of our citizens currently over the age of 60 and by 2050 that number will double. Like many Americans, older adults are struggling more over costs like housing, medication and food, because of fixed incomes. According to the NYC Center for Economic Opportunity, 1 in 3 New Yorkers over the age of 65 live in poverty and a Hunger Study conducted by LiveOn NY shows that 35% of older adults in NYC are living with food insecurity, or hunger. In addition, an inability to resist disease as people age may be related to hunger and malnutrition which can exacerbate cardiovascular disease, hypertension, osteoporosis, cancer, diverticulitis, and diabetes. Therefore it is unsurprising that up to 55% of seniors admitted to hospitals are suffering from malnutrition <sup>1</sup> and according to New York City Coalition Against Hunger's most recent

hunger survey, there has been a 25% increase in food insecurity in the senior population.<sup>2</sup>

Evidence does support the fact that in-home services and programs like meals on wheels which allow older adults to age in place, may help save costs for families, government and our health systems.<sup>3</sup> This is a savings in Medicaid costs that the city would bear if these economically disadvantaged and elderly neighbors of ours were institutionalized instead. Meals on wheels is also a benefit to the growing population of caregivers whose emotional, physical and financial efforts can be unburdened by knowing a meal is being delivered to their loved ones allowing for respite and relief on so many levels. It is therefore imperative to ensure older adults can age in their communities where they have lived for so long.

Thus Citymeals on Wheels is supporting both the restoration of aging discretionary funding to continue the investment in all senior service council initiatives as well as fairly funding costs for core services in senior centers and those that keep them in their communities like meals on wheels. With a request to increase the reimbursement rate by a dollar, for both home delivered and congregate meals, (an funding request of \$12,100,000) providers will be more adequately able to support their programs and ensure the need is being met. This will not get them to a fully funded contract but on the way to right sizing them. The last increase for meals was nearly four years

ago and therefore did not take into account the rise of food costs since then and wages that the state has mandated go up over the course of a few years beginning last year. In fact, DFTA's budget for last fiscal year which reflects an increase of 25 percent since the Mayor deBlasio took office, however, the recent increases only bring DFTA's budget back to 2008 levels. Thus, the agency's budget is up only 5 percent since 2008, while the aging population has increased 9 percent during the same time <sup>4</sup>.

In addition, Citymeals also supports the advocates and DFTA to improve capacity by funding costs for operations within aging services such as working to improve the aging infrastructure at NYCHA facilities where older adults go to eat, get resources on benefits and entitlements and to socialize.

Citymeals on Wheels fundraises for private dollars which is never easy and now more competitive in the new landscape for not-for-profits navigating the federal budget and the new tax laws, and the city's budget for Aging services has not kept up with the increasing need, rising costs in food and salaries, and the growth in population. We must adequately fund core services like meals on wheels and senior centers as it is crucial to be able to have a safety net for these most vulnerable New Yorkers.

Citymeals on Wheels together with the Department for the Aging, and The New York City Council, are determined to keep older adults living safely in their own communities and at least 18,400 elderly New Yorkers who receive meals on wheels, fed 365 days a year plus some extra. We hope you, our partner in city government, will help us to continue to advocate on behalf of those who are often forgotten and marginalized and support solvency for senior services.

As we move through our 36<sup>th</sup> year, we thank you for consistently working with us and I hope we can count on all of your support once again this year.

<sup>1</sup> 2000 to 2010 Census, as reported in NYC Department for the Aging's "Census 2000: Changes in the elderly population of NYC 2000-2010. <sup>2</sup> NYCCAH 2015 Hunger Report. <sup>3</sup> Measuring the costs and savings of aging in place. 2013. (Accessed December 3, 2014, at [http://www.huduser.org/portal/periodicals/em/em\\_archive.html](http://www.huduser.org/portal/periodicals/em/em_archive.html).) <sup>4</sup> Christian González-Rivera (May 2017) Center for an Urban Future, THE AGING APPLE: OLDER IMMIGRANTS A RISING SHARE OF NEW YORK'S SENIORS.



Selfhelp Community Services, Inc.  
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Testimony from Selfhelp Community Services, Inc.  
New York City Council Aging Committee  
FY19 Preliminary Budget Hearing  
March 23, 2018

My name is Katie Foley and I am the Director of Public Affairs at Selfhelp Community Services. Thank you to Aging Committee Chair Margaret Chin and the members of the committee for the opportunity to testify today on the FY19 Preliminary Budget.

Selfhelp was founded in 1936 to help those fleeing Nazi Germany maintain their independence and dignity as they struggled to forge new lives in America. Today, Selfhelp has grown into one of the largest and most respected not-for-profit human service agencies in the New York metropolitan area, with 26 sites throughout Manhattan, Brooklyn, Queens, the Bronx, and Nassau County. We provides a broad set of services to more than 20,000 elderly, frail, and vulnerable New Yorkers each year, while remaining the largest provider of comprehensive services to Holocaust survivors in North America. Selfhelp offers a complete network of community-based home care, social service, and senior housing programs with the overarching goal of helping clients to live with dignity and independence and avoid institutional care.

Our services are extensive and include: specialized programs for Holocaust Survivors; ten affordable senior housing complexes; four Naturally Occurring Retirement Community (NORC) programs; three intensive case management programs; five senior centers including one of New York City's first Innovative Senior Centers; home health care; client centered technology programs including the Virtual Senior Center; court-appointed guardianship; the Selfhelp Alzheimer's Resource Program (SHARP); and New York Connects, which provides seniors and people with disabilities with the information and support they need to remain living independently in their own homes.

We are grateful for the Council's ongoing support for so many important senior programs and for always emphasizing the needs of older adults in policy decisions and budget allocations. With strong community based programs, we are confident that older New Yorkers will be able to access the care and support they deserve and need to be able to age in their own homes and communities.

Today I will focus on a few of Selfhelp's priorities that we hope that Council will highlight over the next few months and in budget negotiations.

## Senior Centers

We commend the Department for the Aging (DFTA) and the City Council for the ongoing commitment to senior centers since the beginning of the model budget process. We look forward to the allocation of the first phase of the investments made in FY18. Funding for the City's senior centers is a critical step to stabilizing one of the core programs that supports older New Yorkers, including many immigrant seniors. Further, the investment in the model budget for staff helps address an ongoing issue related to salary parity that has been a concern for Selfhelp since the case management salaries were raised. We have now seen the impact of increased salaries in the aging network, and are grateful for this important step. Additional investments in the next two years will help support additional needs that are more specific to each center, including rent and food costs.

While we are appreciative of the model budget process, we hope that additional investments in the next few years will move us toward the goal of 'right-sizing' staffing resources and expanding programming to meet client needs. Our five senior centers serve over 10,000 people and continue to be under staffed given the significant need from the community, and the high-quality programming our centers offer. Additional investment in senior center options will allow centers to be staffed to meet the capacity of each community and to expand programming to meet the diverse needs within each center.

## Resident Advisor Service Coordinator

Selfhelp appreciates the strong support of Mayor deBlasio and the City Council for senior affordable housing in New York City. However, when it comes to housing for older New Yorkers, it's not just the bricks and mortar that helps us achieve our joint goals. Selfhelp believes that housing plus services is the right model to ensure that seniors are able to thrive as they age in their communities, and the best outcomes for older adults are achieved when social services support client health.

Selfhelp's ten affordable residences offer seniors the opportunity to lead independent lives in their homes and communities with the additional support of the unique Selfhelp Active Services for the Aging Model (SHASAM), which makes available social work services, education, and recreation, as well as access to skilled nursing and home care, if and when requested by the resident. This model results in a savings to the Medicaid program by keeping low-income seniors out of more costly levels of care such as assisted living or nursing homes.

With the support of JPMorgan Chase, we recently conducted a study of the residents in our senior affordable housing program. We compared Medicaid data for residents in our housing in two zip codes and compared it to other seniors living in the same zip codes over two years. We found the following:

- 68% lower odds of Selfhelp residents being hospitalized
- \$1,778 average Medicaid payment per person, per hospitalization for Selfhelp residents, versus \$5,715 for the comparison group
- 53% lower odds of a Selfhelp resident visiting an emergency room compared to a non-Selfhelp resident



The study of Selfhelp's housing-plus-services model helps to demonstrate that affordable housing for seniors, complemented by an array of services available as requested, can make a strong impact on how residents manage chronic disease and the effects of aging -- and in the process, reduce spending on health care.

We urge the City Council to advocate for the creation of a senior housing resident coordinator program, which invests in social workers within new and existing senior affordable housing. Resident assistance includes an array of services that promote healthy living by extending independence and improving quality of life. An investment by the City for service coordinators outside of the SARA program would provide support for all older New Yorkers to age with the independence and dignity they deserve.

### **Holocaust Survivor Initiative:**

For the past few years, the City Council, with the leadership and advocacy of Council Member Espinal, along with the Jewish Caucus started and expanded the Elie Wiesel Holocaust Survivor Initiative. We are urging the City Council to renew this initiative, with continued support for Selfhelp and our Holocaust Survivor Program. In FY19, Selfhelp is seeking \$350,000 to fund direct social services to frail, isolated, and financially needy Holocaust survivors. More than 50% of the survivors served by Selfhelp are living at or below the poverty line, while 80% of survivors from the former Soviet Union are living in poverty. As the largest provider of comprehensive services to survivors, Selfhelp is uniquely positioned to assist this last generation of survivors, especially as their needs grow more intense and more costly.

We have over 230 survivors on a waitlist in Brooklyn that we are working to address with the FY18 City Council initiative grant. Additional funds in FY19 will help not only continue to address this population of survivors in Brooklyn, but also will support direct social services to frail, isolated and financially needy Holocaust survivors. Services include case management to assist in assessing and developing a mutual agreed upon care plan that will be implemented to keep the client safe in the community with dignity and independence.

### **Virtual Senior Center**

As the aging population grows, so too does the number of homebound elders who are at a high risk of social isolation and depression. Social isolation is one of the most serious issues affecting the elders of our community. Selfhelp's Virtual Senior Center is one program which has been proven to effectively and profoundly impact this problem. A recent study conducted by the AARP Public Policy Institute and Stanford University found that a lack of social contacts among older adults is associated with an estimated \$6.7 billion in additional federal Medicare spending annually. As DFTA's recent annual summary noted, loneliness and social isolation are associated with increased mortality among older adults.

The VSC has been able to expand due to the support of members of the City Council. However, in order to address the needs of this population across the City, we strongly encourage DFTA and City Council to consider creating new investments in technology services, such as the Virtual Senior Center,

that can help reduce social isolation amongst homebound older adults. As we've done in the past, we're requesting support from various Councilmembers to provide access in various districts, and we are also seeking \$25,000 from the Queens Delegation to expand the Virtual Senior Center to homebound older adults throughout the borough. Last year, the Queens delegation awarded us \$15,000 to offer the VSC, and we hope to be able to continue and grow this program with that funding. Additional investments in technology services will result in reduced social isolation and overall better health for older adults in New York City.

The Virtual Senior Center (VSC) engages homebound seniors, who are no longer able to get to their local senior centers, into the larger community by using technology to connect them with other participants in a range of activities. A cornerstone activity of the program is its interactive, real-time classes where participants can hear, see and talk with each other in an interactive session. Over 40 classes are typically offered each week ranging from art history to current events to museum tours to weight training and other exercise programming. This groundbreaking program effectively reduces social isolation by creating social networks for otherwise homebound seniors, connecting them to each other and to the outside world.

In addition, the program has been shown to break down barriers of digital literacy, reduce social isolation by up to 85% and improve participants' quality of life by 97%. As one of our participants said, *"The program is truly extraordinary. We're homebound. It's a gift. I live alone but I don't feel alone."*

Through independent research, Selfhelp assessed the impact of the Virtual Senior Center on the health of participants, and we found:

- 85% reduction in social isolation as a result of participation in the VSC
- 51% increase in self-reported health status because of VSC participation
- 97% of participants reported that the VSC improved their quality of life

Launched in 2010 with 6 participants, today the program has become a lifeline for over 400 participants throughout New York City, Long Island, Baltimore, Chicago, Pittsburgh, and San Diego. Participants enjoy taking part in engaging live classes facilitated by dozens of instructors, chatting with friends, enjoying yoga, learning wellness tips and discussing politics, surfing the Internet and playing games all from the comfort of their own homes. To serve a broader community, the VSC is now available in multiple languages including Mandarin, English, Korean, Russian, and Spanish.

### Senior Transportation Program

With support from Council Member Paul Vallone and the Queens Delegation, Selfhelp has been piloting a senior transportation program to provide free transportation to and from medical appointments. Due to the success of the program and high demand from individuals, we are seeking to expand access to this program. With funding provided by the Queens Delegation in FY18, Selfhelp provided 194 rides to 125 older adults in 12 City Council districts within Queens. As a result of the demand for accessible transportation and popularity of this program, the funding was utilized quickly, and we believe that with additional funding, Selfhelp will be able to establish a program that can serve

additional individuals. In FY19, Selfhelp has requested \$25,000 from the Queens Delegation to continue and expand the borough-wide program.

Based on feedback received by individuals who benefitted from the program, as well as the demand for services, we know that the program improves quality of life for older New Yorkers, as it eliminates concerns about transportation costs, traveling alone, and navigating public transit. Further, in transportation deserts in parts of NYC and Queens in particular, this program removed a significant barrier for older adults in caring for their health.

### Discretionary Funding For Core Senior Services

In order to create a robust aging services network to meet the needs of today's seniors and those turning 60 each day, Selfhelp supports the priorities of our partner organizations, including continued investment in all the Council initiatives that support aging programs, found in Schedule C. A few examples include:

- NORCs which bring needed social services and supports to areas of dense senior populations
- Support our Seniors provides diverse services across the City
- SU-CASA programs are creative aging art programs at senior centers
- Senior Centers for Immigrant Populations support New York City's diverse older adults with culturally competent services
- Healthy Aging Initiative provides support for various health-promotion programs
- Social Adult Day offers additional support for seniors with high levels of need, including for Selfhelp's Alzheimer's Resource Program

We appreciate the City Council for consistent support of these program and all senior services.

### Prompt Contracting

As a result of the model budget process, and the Council's significant support for our programs, we are pleased to see a significant investment in programs serving older adults, especially in recent years. However, as a result of this investment, we have experienced significant delays in contracting and accessing the funding. These delays make it difficult for our programs to provide high quality, consistent services. The ability to execute contracts promptly is critical for providers and we support the City's ongoing work to look at the contracting process for nonprofits.

### Conclusion

Thank you for the opportunity to testify today. On behalf of the 20,000 clients we serve, I am grateful for the Council's support on so many important programs.

Testimony of The New York Academy of Medicine to the Council of the City of New York before the Committee on Aging concerning the Fiscal Year 2019 Preliminary Budget

Ahsia Badi, OTR/L, MPH  
Senior Policy Associate, Healthy Aging

March 23, 2018

Good morning, Council Member Chin and members of the Committee on Aging. Thank you for the opportunity to testify before you today. My name is Ahsia Badi, and I am a Senior Policy Associate in healthy aging at the New York Academy of Medicine (the Academy).

Established in 1847, the Academy continues to address the health challenges facing New York City and the world's rapidly growing urban populations. Our current priorities include healthy aging, preventing chronic disease, and eliminating health disparities.

The Academy applauds the City Council's commitment to supporting older adults through the Department for the Aging, which provides critical supportive services to approximately 17 percent of the City's population age 60 and older.

The Academy encourages the City Council to provide sufficient support to the Commission and Secretariat for Age-friendly NYC. As the older adult population in the city continues to grow in size and diversity of demands, a strong network of public private partnerships is more important than ever before to meet their growing needs. Age-friendly NYC offers that point of connection, collaboration, and oversight between public and private sector initiatives, and advocates single-mindedly for age-inclusive policies and amenities across all aspects of life. As the vanguard of the worldwide age-friendly cities movement, Age-friendly NYC is uniquely positioned and admired for its effective collaborative work across all sectors – transportation, arts and culture, public space, and housing – in its quest to improve health and quality of life for all 1.5 million older New York residents.

A critical focus of Age-friendly NYC is its work to prevent social isolation and increase inclusion of older adults through increasing walkability and access to public transportation; leveraging public space and programming; and maximizing economic participation. Older people in New York City may be at greater risk of social isolation due to higher rates of living alone (50%), poverty (19%), mobility impairment (27%), and lack of English proficiency (34%).<sup>1</sup> Social connection is not only good for health, but is also a priority for older people. According to a 2013 national survey of people aged 60 and over, 40% rated "staying connected with friends and family" as the most essential component of a high quality later life.<sup>2</sup> Senior centers, which offer free social programs, as well as congregate meals, are an important part of the solution; however, the majority of older adults (approximately 90%) wish to participate in multigenerational environments and experiences as well as continue the activities they have done all their lives. Age-friendly NYC supports inclusion of older adults by hearing from older people about their needs and wishes, and then working with local leaders and stakeholders to eliminate barriers to engagement with services and amenities, including local businesses, arts and cultural institutions, parks, and libraries.

Many of these solutions are low or no-cost and work to optimize existing, age-neutral assets and facilitate connections between the generations. Inadequate intergenerational contact has been shown to perpetuate stereotyping and exclusion that contributes to the social isolation of older people.<sup>3</sup>

There is a continued need to spread, scale, and sustain the City's Age-friendly policies. By taking the following steps, New York City can continue to serve the needs of its growing population of older adults:

- Increase support to the Department for the Aging in order to coordinate and implement the *Age-friendly NYC Commitments for a City for All Ages*, including identifying best and innovative policies and practices; tapping into nonprofit and private sector networks; and greater monitoring and reporting on City and private sector progress;
- Support, develop and implement a strategy between the City Council and the Administration to assure neighborhood-level improvements;
- Continue the work of the Age-friendly NYC Commission and its innovative Working Groups strategies including: [www.imagenycmap.org](http://www.imagenycmap.org); *Building Community through Arts and Culture Toolkit*; *Age-friendly Local Business Resource Guide*, *Creating an Age-friendly NYC One Neighborhood at a Time*; and [www.agefriendlycollege.org](http://www.agefriendlycollege.org)
- Build capacity of public, private, faith, and community-based organizations to promote health across all ages and improvements in order to age-in-place.

As the Council considers how we should support all older adults in New York City, the Academy respectfully recommends baselining and adequate support of Age-friendly NYC including the Secretariat and the activities of the Commission. Baselining will ensure the continuation and enhancement of the work already underway. The Academy is pleased to serve as a resource, and we look forward to working with the Council to make all of our neighborhoods healthier and age-friendly for all New Yorkers.

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<sup>1</sup> U.S. Census Bureau. American Community Survey 2014 1-year estimates. 2014. [http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_1YR\\_S0103&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_1YR_S0103&prodType=table). Accessed February 1, 2016.

<sup>2</sup> National Council on Aging (NCOA). *The United States of Aging Survey 2013*. Washington, D.C.; 2013. <http://www.ncoa.org/improve-health/community-education/united-states-of-aging/usa-survey-2013.html>. Accessed September 24, 2013.

<sup>3</sup> Hagestad GO, Uhlenberg P. The Social Separation of Old and Young: A Root of Ageism. *J Soc Issues*. 2005;61(2):343-360. doi:10.1111/j.1540-4560.2005.00409.x.



**New York City Council**  
**Committee on Aging, Chair, Council Member Chin**  
**March 23, 2018**  
**Preliminary Budget and Oversight Hearing**

LiveOn NY thanks Chair Chin and the Aging Committee for the opportunity to testify on the ways the city can make New York a better place to age. LiveOn NY also thanks Mayor de Blasio, Speaker Johnson, DFTA Commissioner Donna Corrado and the entire City Council for their consideration of needs of older adults in the FY19 budget. Council Member Chin, we especially want to acknowledge your leadership, and Commissioner Corrado, as we worked together to make FY18 the Year of the Senior, with an historic \$22.8 million addition in new baselined funding to DFTA's budget.

With a base of more than 100 community-based organizations that serve over 300,000 older New Yorkers annually, LiveOn NY's members provide core services that allow older adults to thrive in their communities, including senior centers, congregate and home-delivered meals, affordable senior housing, elder abuse prevention services, caregiver supports, transportation, NORCs and case management.

Aging creates momentum. Older New Yorkers continue to strengthen our city and contribute using the momentum they've built over a lifetime. Specifically, older New Yorkers power up local economies, engage in civic activism, contribute countless hours of volunteerism, and act as caregivers to both peers and younger generations. In effect, the *inability* for government to enable seniors to age in their communities would not only have a negative impact on each individual's lives, but would tear at the fabric that makes New York's neighborhoods so vibrant and cohesive. This momentum is evident by the seniors who are here today at this, and when we hold our Annual Senior Advocacy Day when over 350 seniors come to City Hall to meet with their Council Members.

Aging also creates challenges. A lack of fair funding for aging services puts the entire system at risk. Even with the historic gains last year, the most in decades, we know that senior services still experience waiting lists, staff turnover, and lack of a safety net for seniors. While LiveOn NY recognizes and greatly appreciates the recent investments in senior centers and the human services sector increases related to indirect rates and COLAs, we know that this is only a starting point for investments in a dynamic system that needs a continued support to meet the needs of older New Yorkers.

We are all aging. When LiveOn NY talks about the future of aging services, we include every person in every Council District. These services offer opportunities for all of us, whether we are seniors, caregivers, or our future selves. When the city invests in community based organizations that serve older adults, it offers opportunities for a 75-year-old in Manhattan to take a weekly sculpture class; one of the over 30,000 seniors who visit senior centers daily. You are investing in an 88-year-old homebound senior in Queens with a case manager working to ensure they have benefits and supports they need. And the 42-year-old in Staten Island who is caring for an aging parent, and who will someday have access to the aging services of tomorrow. It even supports the 12-year-old in Brooklyn being raised by a grandparent, and the 90-year-old in the Bronx who receives a home delivered meal by a trusted agency. These services give us all the opportunities whether it be today or tomorrow, to live like we've always lived- as New Yorkers.



Making New York a better place to age

With that in mind, we ask you to envision the system you see for today and for the future. To make this vision a reality New York City needs sound investments and fair funding to ensure it can be culturally competent, innovative, flexible and sustainable to serve New York today and for years to come.

LiveOn NY's priorities are attached to our testimony, and we want to briefly highlight them here.

### *Administrative Baselined Funding*

#### **Senior Centers**

##### **Expedite "Model Senior Center Budget" Funding by FY20**

LiveOn NY thanks DFTA, OMB and the Administration for their efforts through the "model budget" process. Through this process currently rolling out, the city allocated \$10 million in FY18 for senior center direct staffing and programming, and has promised an additional \$10 million by 2021. We recognize these important investments as a positive first step. We must continue to work together to ensure that senior centers receive full funding for the complete contracts for costs that were not allocated in the "model budget" process for things such as meals, rent, OTPS and other associated costs.

LiveOn NY requests that City Council prioritize expediting the funding promised to senior centers in its March Response to the Mayor's Financial plan. Expediting the \$10 million in funding by FY20 as opposed to the proposed 3-year rollout will have a hugely positive impact on the operations of these programs. As the "model budget" funding applies only to personnel and programs, we will continue to monitor this funding and advocate for other funding as needed to ensure senior center providers are adequately reimbursed for the full cost of providing services. Allocating these funds is extremely important with the projected next RFP for senior centers to be released in calendar year 2020. In addition, we encourage the city to continue to build the infrastructure and staff within DFTA so that the city is able to expeditiously and efficiently work with providers with the shared goal of high quality service delivery.

#### **NYCHA Senior Center Improvements and Supports**

LiveOn NY advocates for \$5 million in new baselined funding to ensure the nearly 100 DFTA controlled NYCHA Senior Centers have proper facilities & supports, that are in dire need of support and stability to serve older adults. These programs have unique needs for facility improvements given the long-standing federal disinvestment in Public Housing that has now created a capital backlog which in turn negatively impacts the stability of these life-sustaining programs.

#### **Add \$12.1 Million for Congregate and Home Delivered Meals**

LiveOn NY requests that \$12.1 million in new funding be baselined to increase the reimbursement rate for congregate and home-delivered meals. This funding is particularly important to increase the reimbursement rate for culturally-competent meals, such as kosher or halal, both of which currently result in a deficit to nonprofits upon each meal provided, despite cultural competency being mandated by DFTA.

### **EISEP Case Management and Homecare**

There are over 1,100 seniors on case management waitlists citywide and over 200 on waitlists for homecare. LiveOn NY greatly appreciates the investments in FY18 which are beginning to address waitlists, but the need continues to grow. We must continually build this system to serve today's need and the needs of the future. Additional funding is needed to ensure that caseloads don't go higher than 65. Funding is also needed to serve frail, homebound seniors on waiting lists so that a social worker is available to visit them at home, assess their needs and provide ongoing services. MSW compensation, as well as multilingual staff needs to be funded to ensure there is a professionally trained social worker who can work with immigrant and diverse populations and complex situations. Funding growing need and agency infrastructure are cornerstones to strengthening the case management system citywide. EISEP Homecare also offers vital supports for seniors, including help with bathing and dressing and light housekeeping that allow seniors to remain at home with the care they need to remain independent. EISEP is also a key program that services seniors that are not Medicaid eligible but still need these services, and it is vital to sustain this program.

We recommend \$2 million for Case Management and \$1 million for Homecare.

### **Additional Continued Investments in Vital Senior Services**

LiveOn NY recommends the following continued investments that allow seniors to age in their communities:

- \$1 million increased Transportation services for aging services organizations. Vans bring seniors to programs, take them food shopping and other chores, to medical appointments, on cultural/recreational trips and other purposes. Transportation is the cornerstone of remaining independent.
- \$500,000 to increase outreach and awareness for Elder Abuse Prevention services. DFTA's Elder Abuse Services are a critical resource to address this crisis, in which only one out of every 24 cases is reported.
- \$500,000 for Caregiver Supports to continue outreach & expand services, including support groups and respite. Access to affordable elder care and support for caregivers are the workforce issues of the 21<sup>st</sup> century. Caregivers statewide provide \$32 billion of free care to loved ones. Workplace flexibility and caregiver supports go hand in hand.

### **Council Restorations and Investments in Senior Services Through Schedule C**

City Council has long been a staunch supporter of city and district wide senior services programs through allocations in Schedule C. We thank you for your investments and advocate for full restoration for all Senior Service Programs funded in Schedule C. These include NORCs, Support our Seniors, SuCasa, Senior Centers for Immigrant Populations, Health Aging Initiative, Social Adult Day, and others.

To reach the potential of New York's older adults and adequately serve this diverse cohort, city government must continue to invest in the services provided by the Department for the Aging. Benefiting over 55,000 seniors each day, including thousands of immigrants, through safe and culturally competent programming both in-home and in-community, DFTA is worth both our support and our steadfast advocacy.



### **Continued Investments in Human Services Sector**

Finally, LiveOn NY strongly supports the agency-wide investments in FY19 in the human services sector. Last year saw an important investment in human services provider organizations that hold City contracts. With your help, we secured \$300m of our \$500m ask to help nonprofit provider organizations cover the cost of delivering essential services to New Yorkers.

There are two areas of human service nonprofit operations that need special attention in FY19 - costs associated with indirect rates and fringe and escalating occupancy and insurance costs. We are suggesting funding parameters that set a floor of 15% for indirect in all human services contracts and are requesting a 10% increase in the portions of human services contracts covering occupancy and casualty and liability insurance to cover escalating costs in these areas. Additionally, the City uses an outdated formula for calculating employee fringe benefits. We are also asking for consideration of a 37% fringe rate in all human service contracts to reflect a generally accepted industry standard and that, coincidentally mirrors the fringe rate used by the City for its own employees.

As a member of the Human Services Advancement Strategy Group (HSASG), LiveOn NY, respectfully requests that the New York City Council include in its March Response a \$200m ask for FY19 to address these critical funding shortfalls.

HSASG, a group of nine membership organizations representing 2000 human service provider organizations across the City, works in collaboration to secure the programmatic, financial and operational resources needed to fully cover costs and meet the contractual obligations of provider organizations holding City HHS contracts.

LiveOn NY looks forward to working with City Council, the Department for the Aging, all city agencies and the Administration to make New York a better place to age through a strong network of community based services.

*LiveOn NY's members provide the core, community-based services that allow older adults to thrive in their communities. With a base of more than 100 community-based organizations serving at least 300,000 older New Yorkers annually. Our members provide services ranging from senior centers, congregate and home-delivered meals, affordable senior housing with services, elder abuse prevention services, caregiver supports, case management, transportation, and NORCs. LiveOn NY advocates for increased funding for these vital services to improve both the solvency of the system and the overall capacity of community-based service providers.*

*LiveOn NY administers a citywide outreach program that supports seniors in communities where benefits are most underutilized. This program educates thousands of older adults, including those who are homebound, about food assistance options, as well as screens and enrolls those who are eligible for SNAP and SCRIE/DRIE.*

*LiveOn NY is also proud to administer the Senior Medicare Patrol (SMP) program for the entire state, which works to prevent Medicare fraud and its associated healthcare expenses. SMP is modeled around recruiting and actively engaging senior volunteers to promote peer counseling, education and assistance on how to protect, detect, and report Medicare fraud. SMPs empower beneficiaries to reduce healthcare costs caused by errors, abuse, and fraud.*

# Solvency for Senior Services

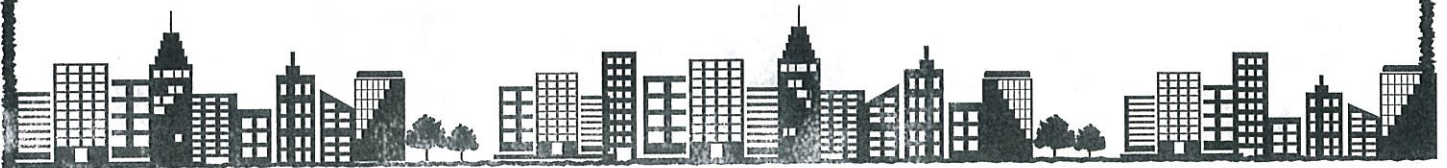
## Fair Funding for Senior Centers

FY19  
New Needs

NYCHA Senior Center Improvements	\$5,000,000	Ensure the nearly 100 DFTA controlled NYCHA Senior Centers have proper facilities & supports
Congregate Meals	\$7,600,000	Increase reimbursement rate by need & ensure cultural competency flexibility

**We request that the \$10,000,000 in funding promised through the "model budget process" be expedited to be fully allocated by FY20**, as opposed to the proposed 3 year rollout. The "model budget" funding applies to personnel and programs.

As such, we will continue to monitor this funding and advocate for increased funding as needed to ensure senior center providers are adequately reimbursed for the full cost of providing services.



## Keeping Seniors in their Communities

FY19  
New Needs

Home-Delivered Meals	\$4,500,000	Increase reimbursement rate by need & ensure cultural competency flexibility
Case Management	\$2,000,000	Address waitlist & growing demand associated with a rising senior population
Homecare	\$1,000,000	Address waitlist & growing demand associated with a rising senior population
Transportation	\$1,000,000	Increase transportation support
Elder Abuse Prevention	\$500,000	Increase prevention & awareness of supports
Caregiver Supports	\$500,000	Continue outreach & expand services

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### Follow Us



# Restore Aging Discretionary Funding

We ask for continued investment in all Senior Services Council Initiatives, found in Schedule C, in FY19

Here are just a few examples of Senior Service initiatives funded by City Council:

LiveOn NY  
supports  
raising NORC  
funding to  
\$5 million

NORCs  
\$3,850,000



Fosters aging in place among areas of dense senior populations

Support Our Seniors  
\$3,060,000



Supporting Senior Services across the City

SU-CASA  
\$2,550,000



Creative Aging art programs at senior centers throughout NYC

Senior Centers for Immigrant Populations  
\$1,500,000



Supports NYC's diverse older adults in a culturally competent manner

Healthy Aging Initiative  
\$1,810,000



Support for various health-promotion programming

Social Adult Day Enhancement  
\$1,055,556



Additional support for seniors with higher levels of need

Thank you to the New York City Council for your consistent support of these programs and all senior services

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## Follow Us



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## New York Caring Majority: Who We Are

The New York Caring Majority is a movement of seniors, people with disabilities, family caregivers, and domestic and home care workers from all across the state. We advocate for a more sustainable and just caring economy that will help all New Yorkers who give and who receive care live fuller and healthier lives.

Our goals are:

- To make long-term care services and supports affordable and accessible to all New Yorkers who require additional support to live independently;
- To improve the quality of long-term care jobs and create the caregiving jobs we will need to meet growing demand; and
- To protect essential programs such as Medicaid, Medicare, the Older Americans Act, and the Affordable Care Act.

New York's long-term care system was straining to support our families long before the 2016 election. Now, as we face devastating cuts to our social safety net from the federal level, our local and state elected officials must step up and lead by improving and expanding the programs that our families need.

## Our Principles

### **No cuts to care for New Yorkers**

In this time when we are facing disastrous attacks to our social safety net, we must work together to protect our most vulnerable neighbors from losing the supports that allow them to stay healthy and live with dignity. We must stop the attacks on Medicaid, Medicare, the Older Americans Act, and the Affordable Care Act, and ensure essential medical benefits and services continue for all New Yorkers.

### **Ensure universal long-term care coverage for all New Yorkers, including older adults and people with disabilities**

All New Yorkers should have access to affordable and high-quality long-term care options, regardless of income. Our state government has an important role to play



in covering New Yorkers who are not eligible for Medicaid and struggle to pay for the long-term care services and supports they need out of pocket.

New York already has several excellent programs that provide services to seniors and people with disabilities (e.g., the Expanded In-home Services for the Elderly Program, or EISEP). These programs provide a foundation upon which New York can build in order to expand access to affordable home care for all New Yorkers. But inadequate funding and growing waiting lists for those whose incomes are above the Medicaid threshold have left New York's seniors languishing. Developing EISEP into a statewide universal program with a dedicated revenue stream would not only improve the lives of millions of people in New York, it would also relieve the budgetary pressure from our state's Medicaid program, while also protecting against devastating cuts from the Trump administration.

### **Support New York's family caregivers and invest in our direct care workforce**

We must support the home care workers and family caregivers who enable New Yorkers to live at home with dignity. Expanding long-term care coverage is an opportunity to create new quality jobs in the home care and direct care sector. New York can lead the nation by investing in this fast-growing and vital workforce and by providing dedicated state revenue for workforce development and worker cooperative incubation, along with continued support for high minimum standards for wages and benefits. In many underserved areas of the state, the care workforce shortage is already at crisis levels. Supporting and expanding the workforce is a key strategy in making sure that New York can fulfill its promise for all aging residents.

## **Our Members**

A Better Balance, Consumer Directed Personal Assistance Association of New York State, Hand in Hand: The Domestic Employers Network, Jews for Racial and Economic Justice, LiveOn NY, National Domestic Workers Alliance, National Employment Law Project, New York Statewide Senior Action Council, PHI.

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**New York City Council FY2019 Preliminary Budget Hearing  
New York City Council Committee on Aging  
Honorable Margaret Chin, Chair**

**Testimony of United Neighborhood Houses  
Presented by Liza Schwartzwald, J.D., Policy Intern  
March 23, 2018**

Thank you for convening today's hearing. My name is Liza Schwartzwald and I am here representing United Neighborhood Houses of New York (UNH). UNH is the association of New York City's 39 settlement houses and community centers that collectively benefit over 750,000 New Yorkers annually – from pre-natal care through older adult services – with programs at over 650 sites throughout the city. Our network's older adult service alone reach 70,000 individuals each year, via programs including senior centers, Naturally Occurring Retirement Communities (NORCs), home delivered meals, case management, social adult day care, caregiver supports, friendly visiting, behavioral health, transportation, and homecare.

We would first like to thank the City Council, and in particular, Chair Chin, for all of the leadership you have provided on older adult issues over the years, including last year's "Year of the Senior." We appreciate that today's hearing provides an opportunity to revisit the progress the City has made on older adult programs, as well as to examine how the Department for the Aging (DFTA) and the City Council can best continue supporting older adults in New York City. This testimony will focus primarily on the senior center "model budget" process, NYCHA-based DFTA senior centers, home delivered meals, and the restoration or expansion of several Council initiatives including NORCs, Geriatric Mental Health, Support Our Seniors, and Healthy Aging.

**Senior Center "Model Budget"**

UNH appreciates that last year the Administration began to address the chronic underfunding of senior center contracts by investing \$10 million in a "model budget" process, with the goal of more closely funding the true cost of administering senior centers. However, it is clear that with nearly 250 DFTA-funded senior centers across the City, \$10 million only represents a down payment on this process. Further, we are disappointed that there was not greater transparency from the City as to the methodology and rationale for how the model budget process was to be pursued, and for the delay—it was just this week that instructions from DFTA were sent to providers about how they could access additional dollars for their FY2018 contracts slated to end in just a few months.

What has been communicated to senior center providers at this point is that this additional funding for the "model budget" will only begin to address programming and personnel costs, with key cost drivers such as rent, food, and OTPS costs excluded. In addition to this significant problem, UNH is concerned that given the scope of the contract amendment process before DFTA, its limited infrastructure, and how much time has already elapsed in this fiscal year, that funds will not be disbursed quickly enough for providers to make use of them before June 30<sup>th</sup>. Further, while the City has indicated that by FY2021 they will invest an additional \$10m in the "model budget process," it is not clear on what timeline that will happen and whether those funds will be sufficient to address the cost factors explicitly excluded at this point.

In order to achieve the best possible outcome from this “model budget” process that has been started, UNH recommends:

- That the City ensure that DFTA has the infrastructure and mechanisms in place needed to execute the \$10m in contract amendments immediately,
- That the City invest an additional \$4.5m in FY2019 (a \$1.00 per meal increase) to address the exclusion of congregate meals from the senior center “model budget,”
- That the City include the second \$10m promised for DFTA’s “model budget” process as soon as possible and no later than FY2020, and
- That DFTA more closely work with providers and advocates on the planning and implementation of the remainder of the “model budget” process in the months and years ahead.

### **Senior Centers Located in NYCHA Facilities**

Outside of the aforementioned issues with senior center budgets, unmet maintenance needs are one of the most challenging issues for providers specifically operating DFTA-funded senior centers within NYCHA community spaces. The City has historically failed to consistently provide the funding (or cut the red tape) necessary to appropriately maintain senior center programming spaces in public housing. As such, providers wait for unreasonably long times for even the smallest fixes to these properties. These unmet needs create unfavorable conditions for older adults, even where such fixes are fairly inexpensive. UNH recommends a \$5 million investment in DFTA’s FY2019 budget, with which providers could accelerate the maintenance and facilities issues that negatively impact on the operating environment of DFTA-funded senior centers.

### **Home Delivered Meals**

Home delivered meals are an essential support that provides a daily, nutritious meal to older adults who may be homebound or otherwise unable to participate in senior center congregate meals. These meals are delivered daily, affording older adults the opportunity to benefit not just from the meal, but also from the regular interaction with staff. These staff exist as an important wellness check for older adults at risk of social isolation.

However, these programs are struggling with rising costs, including purchasing raw foods, as well as providing competitive wages for delivery and service staff. On average, DFTA’s reimbursement rate for a Home Delivered Meal is significantly less than the average real cost of providing a meal. The average national cost of providing a home-delivered meal is \$11.06 per meal. Within the UNH network, the average reimbursement is roughly \$8.12 per meal, and across DFTA programs at large, closer to \$8.50. The gap between cost and reimbursement grows even larger when taking into account the need for culturally appropriate meals, such as kosher meals, which can cost more to source and prepare.

DFTA reimbursement rates must reflect the true cost of providing meals, including an accounting for the higher cost of culturally appropriate and therapeutic meals, as well as regular cost escalators to account for rising food costs over time. To that end, UNH recommends the City invest \$7.6 million in home delivered meals in FY2019, an increase of \$1 per meal. Though this will not cover the total cost of meals, and additional investments will be needed over time, this funding enhancement now will help close the gap between the actual costs of food services and contracted reimbursement rates.

### **Council Aging Initiatives**

The City Council has historically played a critical role in funding services to older adults through Council Initiatives. We appreciate your ongoing leadership and for the FY 2019 budget we recommend the renewal and/or expansion of the Naturally Occurring Retirement Community- Supportive Service Program (NORC-

SSP), the Geriatric Mental Health Initiative (GMHI), the Healthy Aging Initiative, and the Support Our Seniors Initiative.

**The Naturally Occurring Retirement Community (NORC) supportive service program** provides on-site supportive services, such as case management, nursing services, and health and wellness programming, to apartment buildings and complexes with high concentrations of older adults. Both community members and providers appreciate this model because it recognizes the strength of older adults and provides for their needs simultaneously. In addition to renewing the Council's \$3.85m investment, UNH recommends an additional \$1.15 million, for a total of \$5m in FY201. This investment could be used to increase existing NORC budgets in order to address nursing costs, and/or to launch NORC services in new communities.

**The Geriatric Mental Health Initiative** funds mental health services in community spaces where older adults gather, as well as in their homes, and is an important part of improving access to, and removing the stigma associated with mental health care. UNH encourages the City Council to restore this initiative at its FY2018 level of \$1.9 million with an additional investment of \$600K, for a total of \$2.5 million, in order to expand these critical services.

**The Healthy Aging Initiative** provides funding for health promotion services to prevent chronic disease, prevent falls, and promote good nutrition and exercise at senior centers and other sites, and the **Support Our Seniors Initiative** provides funding for any organization funded through a city agency that administers senior services and programming. Providers of older adult services cite these initiatives as key to their ability to provide nursing support within their senior center and NORC programs. We encourage the city to renew these two valuable initiatives at their FY2018 levels of \$1.81 million and \$3.06 million respectively.

#### **Human Services Sector General Support**

In addition to our requests on behalf of older adults and the settlement houses that serve them, it is essential that the City recognize and address the larger-scale underfunding of city contracts across the nonprofit human services sector as a whole, which is calling into question the solvency of nonprofits and their ability to provide services in their communities. In support of this sector and the nonprofit workforce serving their communities, we strongly encourage that the City establish contracting principles that 1) bring all human services contracts up to a 15% indirect rate, and 2) bring fringe rates up to 37% (including 15% for health insurance). In addition, immediate investments are needed to 1) provide a 10% increase on occupancy costs (a critical omission in the "model senior center" budget), and 2) provide a 10% increase on casualty and liability insurance budget lines. The sector estimates these contract fixes will cost upwards of \$200 million, and calls on the Administration to conduct the necessary analysis, and take the appropriate steps to implement these recommendations in FY2019.

Settlement houses recognize older adults as key resources in strengthening the fabric of communities in New York City. Our City's aging population is uniquely situated to give back to their communities, but the extent to which they can do so is dependent on the support they receive from the City. New York must continue to focus on supporting this growing population as they move into new phases of life so that they can keep contributing and participating in their communities. Funding the programs that support these older residents is an integral part of supporting the community at large, and empowering older adults to be full and valued members of their community should be a top priority for this Administration and City Council.

Thank you for your time and consideration.





FOR THE RECORD

**GOD'S LOVE WE DELIVER  
TESTIMONY FOR NEW YORK CITY COUNCIL'S COMMITTEE ON AGING  
MARGARET S. CHIN, CHAIR  
MARCH 23, 2018**

**God's Love We Deliver is New York City's leading not-for-profit provider of medically tailored home-delivered meals and nutritional counseling for people living with life-threatening illnesses.** Over 30 years ago God's Love began with one person's simple, compassionate response to hunger. God's Love provides services to the most underserved and isolated populations in our City: those who are sick and unable to take care of their most basic need – the need for food and nutrition. God's Love is an integral part of the City's safety net. As a key service agency within the local care continuum, we maintain relationships with 200 community organizations to reach those in need. God's Love has a network, a reach and a program that greatly benefits coordination of care for the elderly.

**We believe that being sick and hungry is a crisis that demands an urgent response.** When someone calls us for help, we deliver their first meal on the next delivery day, we never charge clients for their meals and we have never had a waiting list. Each year, God's Love continues to grow to meet the demand, last year alone, we delivered over 1.7 million meals to 7,000 men, women and children living with severe illness throughout the NYC metropolitan area. As NYC's population ages, senior New Yorkers are increasingly relying on God's Love We Deliver for meals to meet their specific medical needs. **For seniors in New York City who are living with complex illnesses, God's Love is the only service that stands between them and hunger. People living with serious illnesses that require very specific diets (like Renal Failure) are unable to be served by DFTA-contracted meal providers and due to their lack of mobility, are unable to use SNAP benefits. As a result, these clients are regularly referred to God's Love from DFTA-contracted meal providers who cannot address the clients' complicated nutritional needs. These factors have contributed to an enormous increase in demand for our services for seniors. Over the last 5 years, we have seen a 50% growth in our senior clients (60+) and currently, 65% of the people we serve are seniors (60+).**

**At God's Love, nutrition is our signature difference.** Although some seniors are able to tolerate regular food, aging and illness can lead to a variety of complications that require a specialized diet. We are able to meet this need as part of our commitment to food as medicine. God's Love clients receive services from our 7 Registered Dietitian Nutritionists (RDNs) who tailor each meal to meet each client's specific medical needs. All of our meals are well-balanced: low in sodium, free of highly allergenic foods such as nuts and shellfish, and immune supporting. Our menu allows for individualization of meals according to dietary needs, including texture restrictions such as minced and pureed diets, and renal diets. Based on a client's nutrition assessment with an RDN, additional restrictions may be added to the client's diet for medical, nutritional, or cultural reasons. Our goal is to provide clients with the least restrictive meals possible that meet their medical needs and nutritional requirements.

**God's Love does not have a contractual relationship with DFTA and does not receive funding support from the Administration for its services. To date, the New York City Council and Borough President's offices have been responsible for any City funding to support our work.** While we greatly appreciate their support, the cost of meeting the need for our services for seniors far exceeds discretionary funding available from these resources. In addition, in this current political climate, the resources that are currently available to fund our services are being threatened. Last year, 4,329 New York City seniors received over 1 million meals from God's Love. Over 70% of these services were supported with private funding, which gets harder and harder to raise each year. For certain populations, this percent is higher. For seniors with end stage renal disease, which disqualifies individuals from eating meals from DFTA-funded agencies, over 93% of the meals we deliver to this population (over 90,000 meals last year) are funded through private donations.

**Research has shown that food and nutrition services are key to accomplishing better health outcomes, lower cost of care and improved patient satisfaction, especially for the elderly.** When people get access to medically-tailored meals like those provided by God's Love We Deliver, they are more likely to stay in care, manage their medications successfully and remain in their homes and out of institutions, resulting in significant cost savings to the healthcare system.

There is a service gap in the DFTA model for severely ill seniors who need customized nutrition. **Chronic illness is on the rise for older adults: 92% of seniors in the United States are living with at least one chronic illness, 72% are living with more than one chronic illness<sup>i</sup>.** Individuals with chronic health conditions count for approximately 86% of all health care spending.<sup>ii</sup> Combined with the fact that 75% of seniors were unable to shop for food on their own and 58% were unable to prepare their own food, means risk factors align for malnutrition.<sup>iii</sup> In addition, half of seniors recently discharged from the hospital are malnourished, and hospitalization within the previous six months is a risk factor for malnutrition in some seniors. A recent study suggests significant food insecurity in patients with high rates of inpatient hospitalization. According the study, “[u]sing the USDA definition of food insecurity, 30% (95% CI, 17% to 47%) were food insecure and 25% (95% CI, 13% to 41%) were marginally food secure. Forty percent responded that, in the past 30 days, they worried that their food would run out; 35% that their food would not last; 17.5% that they did not eat for a full day; and 10% that they were hungry but did not eat some or all of the time. More than half reported using food pantries or other community food resources.”

Furthermore, providing medically-tailored meals makes good fiscal sense. Meals are a relatively inexpensive way to address the risk factors of costly interventions. By saving one night in a hospital, you can feed a person a medically-tailored diet for half a year. We also maintain a key link in the safety net for people over the age of 60 by providing meals for the senior caregivers of our clients.

**Because of all of these benefits for the senior population, we urge DFTA to issue an RFP for the provision of medically-tailored, specialty meals for the senior population most at risk for malnutrition, hospitalization and institutionalization. God's Love We Deliver is also eager to hear what topic area the consultants hired by DFTA have in their purview, and is interested in working together to address the needs of severely ill seniors.**

Thank you for your time and consideration.

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<sup>i</sup> According to the National Council on Aging. Available at <https://www.ncoa.org/news/resources-for-reporters/get-the-facts/healthy-aging-facts/>. Accessed July 24, 2017).

<sup>ii</sup> According to 2010 data. *Chronic Disease Overview*, CTRS. FOR DISEASE CONTROL & PREVENTION. Available at <https://www.cdc.gov/chronicdisease/overview/>. Accessed Mar. 28, 2017.

<sup>iii</sup> Ibid. Phipps et al.



**GOD'S LOVE  
WE DELIVER®**

# FOOD IS MEDICINE

We are dedicated to cooking and delivering the specific, nutritious meals a client's severe illness and treatment so urgently require. **Serving the greater New York City metropolitan area since 1985.**

## Mission in Action



**1,700,000**

Meals per year

**6,800**

Meals per day



**10,000**

Volunteers adding \$2M in service

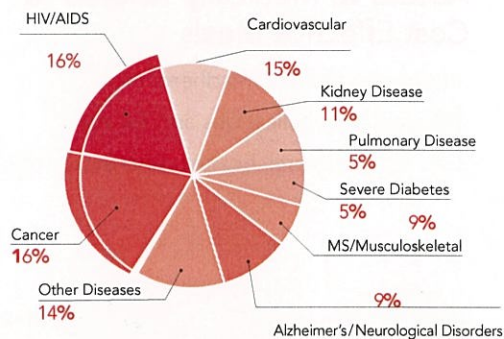


**100%+**

Growth in meals in 9 years

## People Served

### DIAGNOSIS



**7,000 People**

91% are clients 5% are caregivers 4% are children

## Home-Delivered Meals

We provide medically-tailored meals by addressing a combination of restrictions, resulting in almost infinite meal variety.

- ✓ Some restrictions include:
- ✗ Pork, Beef, Fish, Vegetarian,
- ✗ Sugar, Fat, Dairy, Renal,
- ✗ Minced, Pureed, Acid/Bland and Fiber/Gas

**RDNs** 7 Registered Dietitian Nutritionists Prepare Client Meals



All meals are low in sodium



No starters, fillers or preservatives

### SPECIAL TOUCHES

Support families by feeding the children

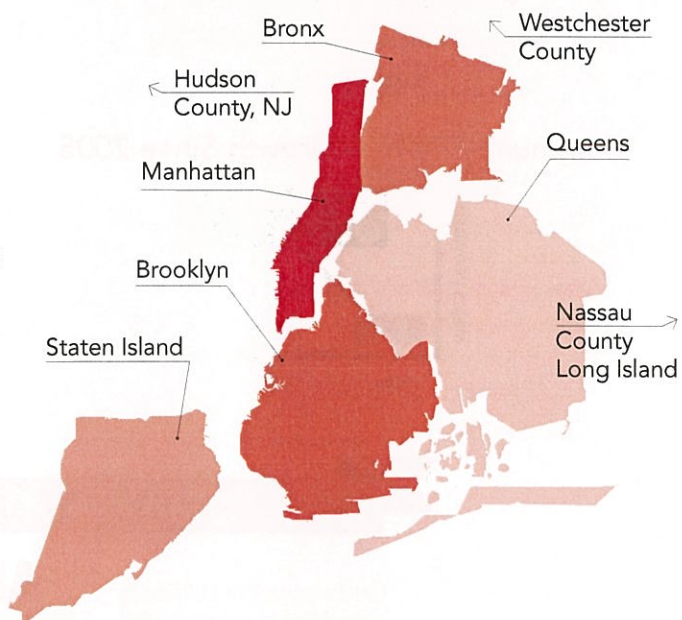
♥ and senior caregivers of clients

♥ Special holiday meals and gifts

♥ Personalized birthday cakes and cards

♥ Emergency meal kits for blizzards and blackouts

## Geography



godslowedeliver



godslovenyc



godslovenyc



godslowedeliver



godslowedeliver



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## Research

### The Need

 **3X**

Higher healthcare costs for malnourished patients compared to nourished patients<sup>1</sup>

 **2X**

The initial hospitalizations for malnourished patients compared to nourished patients<sup>2</sup>

 **3X**

Longer hospital stay for malnourished patients compared to nourished patients<sup>1</sup>

 **2X**

More likely malnourished patients will be discharged to a facility rather than their home<sup>1</sup>



### Access To Medically Tailored & Cost Effective Meals

- Improves medication adherence<sup>3</sup>
- Reduces hospitalizations and ER visits<sup>4</sup>
- Can reduce overall healthcare costs up to 62%<sup>5</sup>



### Research in Progress

- ♥ Health outcomes for clients with metastatic cancer with a hospital in NYC
- ♥ Cost savings in a mainstream Medicaid population with an NYC managed care organization



Live more independently



Manage medical treatment better



Learn to eat nutritionally



Decrease stress

## Partners with New York State in Healthcare Innovation

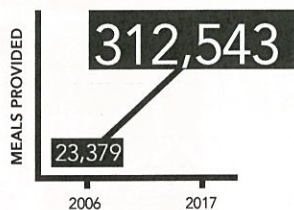
### Medicaid: Community Partners Program

- ♥ Medicaid 1115 Waiver (MLTC)
- ♥ Duals Demonstration Project (FIDA)
- ♥ 34 Contracts

### Balancing Incentives Program

- ♥ Expansion of Community Partners to Westchester and Nassau Counties
- ♥ Creation of a Referral Tool for Care Coordinators

### Community Partner Growth Since 2005



### Delivery System Reform Incentive Payment (DSRIP)

Goal: **25%**  
Reduction in hospitalizations

**12**  
Partnerships with hospitals

## Ending the HIV Epidemic

God's Love We Deliver is a leadership partner with



Footnotes: <sup>1</sup>Corkins MR et al., J. Parenteral and Enteral Nutrition (2013); <sup>2</sup>Su Li Lim et al., 31 Clinical Nutr. 345-250 (2012); <sup>3</sup>Singer, A et al. AIDS Behav (2015) 19:1510-1526; <sup>4</sup>Adaila A et al., New York State Department of Health: Resources for Ending the Epidemic, 2014; <sup>5</sup>Gurvey J, Rand K, Daugherty S, Dinger C, Schmeling J, and Laverty N. 4(4):311-7 (June 3, 2013)

**Testimony before the NYC City Council  
Committee on Aging**

**Preliminary Budget Hearing**

**March 23, 2018**

Tanya Krupat, Director  
Center for Justice Across Generations  
The Osborne Association

Thank you for the opportunity to speak with you today. My name is Tanya Krupat, and I am the Director of the Center for Justice Across Generations at the Osborne Association. For those of you not familiar with the Osborne Association, in addition to a wide range of diversion and reentry programs at sites in the Bronx, Brooklyn, Harlem and Newburgh, we offer services at twenty-seven (27) New York State prisons and seven (7) New York City Jails.

Within the policy arm of the Osborne Association, we focus much of our energy on addressing the needs of the fastest growing population in New York State prisons: older adults. Older adults in prison (often defined as those over age 50 or 55, due to a phenomenon known as “accelerated aging” that can result from long-term incarceration) are the fastest growing demographic in corrections, challenged only by the growing number of women in New York State prisons (both populations are growing nationally as well).

We want to thank the City Council, the Committee on Aging, and in particular Councilmember Danny Dromm, for recently passing the CARE Act, which establishes a temporary task force examining the needs of older adults post-incarceration. This is a very significant step in the right direction, recognizing the growing crisis that New York City faces if we do not proactively work together to smooth the way for the elders who are coming home. With the CARE Act, New York City has a unique opportunity to set the standard for successful reintegration for seniors by bringing together relevant government agencies, community-based providers, and diverse perspectives. Elders coming home face specific challenges related to both long-term incarceration and aging, and pose little to no public safety risk. Before speaking about the unique elder reentry program that Osborne implements and is seeking City Council funding for, I would like to present a few little known facts:

- Today, there are nearly 300,000 people in their 50s, 60s, 70s, and even 80s incarcerated in state and federal prisons throughout the United States, with more than 10,337 people over age 50 in New York State prisons. This means that more than 20% of the state’s total prison population is age 50 and older.
- While the number of people in prison under the age of 30 has constantly declined since the mid 1990s, the number of people in prison aged 50 and over has been on a consistent and troubling rise. This is due to our internationally unique lengthy sentences (no other country metes out such lengthy sentences) and narrow parole practices.
- Each year, more than one thousand (1,000) men and women age 50 and over leave state prison and return to New York City. In 2016:

- 147 elders returned to Bronx County
- 199 returned to Kings County (Brooklyn)
- 598 returned to New York County (Manhattan)
- 170 returned to Queens County;
- and 20 returned to Richmond County (Staten Island).

Elders released to New York City have distinct and complex circumstances upon reentry, including homelessness, unemployment, increased anxiety, fragmented community and family ties, and chronic medical conditions; and unfortunately, programs serving elders in the community, such as senior centers, geriatric clinics and nursing homes are currently ill-equipped to recognize or meet the complex needs that result from a combination of aging and the trauma of long term incarceration.

To address these needs, the Osborne Association launched the Elder Reentry Initiative (ERI) several years ago, initially with private funding from the Florence V. Burden Foundation, and now with blended funding from the City Council and private foundations. However, our current funding only allows us to serve a small fraction of those in need. ERI starts inside of prison working with those aged 50 and older to help prepare them for their parole hearing or pursue medical parole or compassionate release, and prepare them for their reentry into NYC. For those without a support system, we literally meet people at the prison gate and help them navigate this new world bravely.

**The community component of the Elder Reentry Initiative, for which we are seeking City Council support in the amount of \$150,000, provides case management and discharge planning to the most high-need returning seniors, while also working to build partnerships and build capacity among service providers including senior centers, medical providers, nursing homes and others. Currently, there are no specialized services to meet the geriatric needs of this population, who also face employment discrimination, trauma, stigma, and isolation of a unique nature and magnitude. Elder Reentry Initiative staff are equipped to assist with these numerous challenges.**

Osborne's Elder Reentry Initiative staff work to put together a plan that addresses each individual's constellation of needs. Services for returning elders include case management, housing assistance, medical referrals and navigation, escort and transportation services, and more. Our program works with NYC Senior Centers, nursing homes, assisted living providers, doctors and geriatric specialists to improve receptivity to serving returning elders and provide training and technical

assistance to build their capacity to understand and meet the needs of this population.

This past year, Osborne expanded its ERI work to Rikers (through funding from the Fan Fox and Leslie R. Samuels Foundation) to address the needs of a very specific and underserved population: older adults who are cycling in and out of New York City jails and homelessness, their conflicts with the law often driven by poverty, mental illness, substance abuse, and alcohol abuse. Detailed transition plans help secure the essential, practical elements of a life post-release – housing, food, health care, and so on. However, we cannot overstate the significance of the personal relationships that develop between Osborne staff and ERI participants, and how participants rely on that social connection at the time of release.

The experience of one participant in our program, Larry, demonstrates how crucial it is that isolated older people living in poverty, especially those with chronic incarceration, mental health challenges, and a long history of substance abuse, receive comprehensive, patient, client-centered, and unwavering assistance from a trauma-informed organization such as Osborne.

Larry spent much of the last 39 years cycling in and out of prison and jails. ERI staff picked him up on his release date in November 2017, and he has been involved at Osborne ever since. He is a daily fixture in our ERI classes and El Rio, our substance abuse treatment program, and he's working with our housing specialist to secure his own apartment. "I'm a regular around here," he'd say.

Larry knew when he was released that he needed to start over: "From scratch, from the bottom. This time I gotta do it the right way, the entire way. Even when it seems impossible." Larry had been offered drugs while he was incarcerated, and, for the first time, he was able to say no. He was released as a sober man, feeling confident, and he'd tackled some chronic issues with this last incarceration. He took his Hepatitis C (HCV) medication regularly for the first time, and, as a result, his HCV was cured. His overall transformation was clear to those who encountered him. But his transformation would be tested.

For those returning home from prison or jail, navigating bureaucracies is a full-time job. Most of our participants spend weeks standing in line during their first month home. Sometimes, they stand for hours only to find out they aren't at the right place, or the staff person they needed to see is on vacation, or they need a court report before they can apply. Then they have to come back and spend another day waiting to get a form signed, which they'll then take to the next bureaucracy to



start the process all over again--and that's if they aren't simply turned away because the form shows a conviction history. Barriers and frustrations abound.

Larry had no friends or family left after cycling in and out of jail and prison for decades, so his housing options were limited. He wanted long-term, sustainable housing, and he wanted to get there a particular way: by sleeping at a shelter long enough to be granted a housing voucher, which he could use to rent a room while he worked and saved enough money to get his own apartment. With Osborne's help, he had been patiently navigating the bureaucratic hoops, but just as he was ready to sign a lease on a room with his hard-earned voucher, a housing specialist made an error and put the wrong room number on the lease. This simple, careless error cascaded into a cataclysmic couple of hours for Larry.

When the error was made, Larry believed he'd have to start the process all over again, a process that had been several months long already. The night before, police had raided the shelter to arrest people, and it triggered traumatizing feelings for Larry. The thought of having to spend another 4 months in the shelter terrified him. His frustration at the error was exacerbated by how close he'd come to obtaining housing. Angry, he stormed into Osborne's Bronx office, where he walked right into the middle of a meeting that his ERI care manager was attending. He was sweating, pacing, rambling. He was obviously shaken, and he was repeatedly uttering, "I'm going to do something. I want to do something." To those in the room who knew him, it was clear that Larry was thinking of harming someone or getting high.

Larry could have gone directly upstairs to confront the housing specialist. Instead, his connection with his care manager provided an anchor of accountability and a safe place for him to fume. After an hour of talking and listening, Larry was himself again; the connection with his care manager kept him from spiraling out of control and landing back in jail. Larry expressed his gratitude to his care manager, saying, "You've always got my back, don't you! I've never had that." We are happy to report that 5 days later, Larry moved in to his own room, and he is now working on the next step of his plan: saving for an apartment of his own.

Thank you for your consideration and support of those like Larry who need assistance and deserve a chance to live out the remainder of their lives in the community, as healthy and happily as possible. With the Council's support, we hope to be able to take the Elder Reentry Initiative to scale and to see New York City build a nationally replicable model for addressing this growing crisis.

# The Osborne Association

Transforming Lives, Communities,  
and the Criminal Justice System

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## Osborne's Elder Reentry Initiative

**FY 2019 City Council Funding Request: \$150,000**

### The Need

Since 2011, the percentage of older adults (50 and above) in New York's prisons has steadily risen from less than 15% to nearly 21%, even as the overall incarcerated population has decreased. They represent more than 80% of incarcerated men and women held in prison Medical Units. There are now 10,337 elders in New York State prisons who are part of a national trend and an impending crisis in both human and economic terms. More than 2,300 of these men and women are 60 and older, and most have served lengthy sentences and are at very low risk of recidivism. And at least 1,500 of these men and women will be coming home to New York City. In addition, an increasing number of older adults are held on Rikers Island.

As of February 2018, more than 1,500 men and women between 50 and 89 were held in City jails. Nearly 200 have been held for at least 365 days; 119 have been on Rikers for more than 500 days. The average length of stay for these 1,500 men and women is 172 days. Of the older adults in NYC custody, 95 were 65 and older and 30 are over 70. Over 150 are housed at NIC, indicating serious illness or disability. The vast majority are detainees, with slightly fewer than 200 serving city sentences, but the number of older adults also includes parole violators and state-ready sentenced individuals. Clearly any serious attempt to close Rikers Island will require coming to terms with the crisis of aging in the criminal justice system.

While the numbers are large and growing, older adults are at comparatively low risk of recidivism, but at very high risk of falling through the cracks in our social safety net. Elders released to NYC have distinct and complex circumstances upon reentry, including homelessness, unemployment, increased anxiety, fragmented community and family ties, and chronic medical conditions. Their needs are not currently met adequately by either geriatric or criminal justice service providers.

Men and women returning after long prison stays may not know how to access available benefits and often face long delays in obtaining them. People on parole are not eligible for Medicare. Securing appropriate housing, including long-term geriatric-appropriate housing, is of critical importance and extremely challenging. Even those released from City jails after a shorter stay with criminal records are often discriminated against or stigmatized by agencies, social service organizations, and nursing homes and assisted living centers, leaving them with few options and critical unmet needs.

In recognition of the needs of older people returning from incarceration, Councilmember Danny Dromm sponsored and the Mayor recently signed into law the CARE (Compassion and Assistance for Returning Elders) Act, which creates an interagency Task Force to examine and make recommendations for addressing the needs of older formerly incarcerated New Yorkers. The lessons learned from Osborne's Elder Reentry Initiative were key to demonstrating the need for a multi-agency Task Force.

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Bronx	809 Westchester Avenue, Bronx, NY 10455	718-707-2600	Fax: 718-707-3102
Brooklyn	175 Remsen Street, Suite 800, Brooklyn, NY 11201	718-637-6560	Fax: 718-237-0686
Newburgh	388 Ann Street, Newburgh, NY 12550	845-345-9845	Fax: 845-849-0621

## **The Program**

The Osborne Association seeks funding for the NYC Elder Reentry Initiative for FY 2019 to help address the needs of this distinctive, growing, and poorly-served population.

The Elder Reentry Initiative was seeded in FY 16 with Foundation support, and was supplemented by some of our FY17 and FY18 City Council ATI/Reentry allocation. With this funding, we were able to serve 133 older adults with transition planning, referrals, and a wide range of supports, while maintaining a recidivism rate for those released from prison of < 2%. By our conservative estimates, a minimum of 20 additional older people were released from state incarceration due to ERI's intervention, saving taxpayers at least \$2 million dollars during the additional two years they would otherwise have been incarcerated.

ERI's successes in the community have been equally striking. Last year, ERI provided vital, tailored services to older adults with acute reentry need that otherwise would have gone either unnoticed or unaddressed, with expensive and potentially harmful consequences. As one example: A Bronx Parole Officer recognized the need for a cognitive health screening for her client on parole, and reached out for ERI's help. This client angered easily and was habitually unable to find his Parole office. Because of ERI's outreach, the officer recognized the signs of early dementia, and, instead of violating him, sought assistance from ERI, where he received care management and had his health and social care needs assessed and supported. This prevented needless detention at Rikers Island.

A grant of \$150,000 from the Council would support critically needed program expansion to serve an additional 60+ NYC elders age 50+, both at Rikers Island where our intervention could result in release from detention on reduced or no bail, as well as in the community, providing ongoing care management upon release. *With additional funding of \$10-15K from individual Council Members through Support our Seniors (SOS) allocations, we could also expand our ongoing outreach and training for NYC providers who serve seniors as outlined below. (Allocations from CM Gibson enabled us to focus efforts on senior services in District 16, including virtually all senior centers, and other districts would similarly benefit.)*

The Elder Reentry Initiative typically starts working with older adults returning to NYC while they are still incarcerated, laying the groundwork for a successful transition back to the community. After release, ERI consists of two community components:

1. **Integrated community care management** including connecting elders to appropriate housing, medical and behavioral health care, benefits and work opportunities and other needed services such as those available through the City's senior centers;
2. **Improving community receptivity and access to responsive geriatric services:**
  - **Developing partnerships with senior centers to increase referrals;**
  - **Conducting outreach to nursing homes, assisted living providers, and geriatricians to increase sensitivity and reverse the stigmatization of formerly incarcerated elders;**
  - **Identifying and advocating for the availability of nursing home, assisted living, supportive housing, and other housing resources.**
  - **Cross-training for service providers in the fields of Gerontology/Healthy Aging and Criminal Justice/Corrections to insure providers are better able to address the co-occurring challenges.**

**About Osborne**

As one of the largest NYC reentry organizations, with headquarters in the Bronx and program sites in Brooklyn, Manhattan, Orange County and 27 state prisons and 8 City jails/Rikers Island, the Osborne Association is well positioned to lead the way in addressing this timely issue. In 2018, Osborne will issue an update of its 2014 report, "The High Costs of Low Risk," a White Paper on the aging prison population (cited in *The Atlantic*, *The Nation*, and the *New York Times*). In 2014, Osborne, in collaboration with the NYC Department for the Aging (DFTA) and others concerned with the issue of aging in prison, co-chaired the NY Aging Reentry Task Force, an interdisciplinary body of stakeholders from the fields of health, aging, and corrections/criminal justice, including directly affected advocates and leaders, that developed a geriatric assessment and discharge planning and case management model specifically for elders returning home from jail and prison. This model was approved by the NYC Department for the Aging and both city and state corrections departments, and is the basis of Osborne's Elder Reentry Initiative.

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**TESTIMONY BEFORE  
NEW YORK CITY COUNCIL  
COMMITTEE ON AGING**

**FISCAL YEAR 2019 PRELIMINARY BUDGET HEARING  
FRIDAY, MARCH 23, 2018**

*Good afternoon Chair Chin. My name is Barbara Brown and I am a NYRR Strider, a senior citizen from Brooklyn, NY, and a proud runner. Thank you for this opportunity to testify today.*

Whoever said you can't teach an old dog new tricks is incorrect. I am a prime example of how with support at any age, you can do anything you set your mind and heart to. I am 65 years old and proud, and I try to live life to the fullest potential every day. However, one day when I was recently retired, I went to the doctor and was surprised when he gave me a list of chronic illnesses I suffered from and an even longer list of medications I needed to take, some of which he told me I would have to take for the rest of my life. At that moment I knew I would have to make changes in my life if I was going to be around for my children and grandchildren and see them experience the special milestones in their lives.

I joined a local NYC Parks recreation center and learned how to swim. This was a lifelong goal for a Caribbean girl who grew up surrounded by water but was never taught how to swim. Then I joined a local senior center. With a fixed income I needed free activities to be social and get me out of the house. The Albany Neighborhood Senior Center in Crown Heights, Brooklyn provided a number of opportunities to chat and be creative but at the time did not offer physical activities. That changed when Coach Maria from the New York Road Runners' Striders program came to our senior center and didn't want to hear excuses. She told me we were all athletes and wherever we are we must first get up and walk. And walk I did with her support and those in our Striders group. Now I walk all the time. What makes Striders different is as seniors we are doing this together. We meet every week, same time, same place and are instructed by a coach, an expert, who is also of similar age.

Since joining the group I have met lots of other seniors from around New York City. I've walked in NYRR races - yes real races and got medals! I've competed at Icahn Stadium and the Armory. I saw those places on television. Usain Bolt ran there! I've been to Freshkills Park and learned about a swamp in Brooklyn - Marine Park's wetlands. I've defied expectations of what seniors can do and what we look like. We have a new face - one that is not elderly but independent, having fun and staying fit. I have found the fountain of youth - it's exercising daily and doing it with a group called Striders.

In the past 3 years with help from New York Road Runners' Striders program:

- I became an athlete! I'm a runner.

- I've purchased a Fitbit and beat most people in weekly challenges. I love a challenge, it adds spice to life.
- I participate in another free community program from Road Runners called Open Run at Canarsie Park. It's never intimidating with neighbors and friends and we all have a common goal.
- I've recruited friends and people in my senior center to join Striders.
- I've volunteered at the New York City Marathon and other race and fitness events.
- I got my family walking and together we live a healthy active lifestyle. My grandson is a member of Road Runners' youth programs and we go together to a Jamboree for all ages and run in relays!
- I received the Strider of the Year award in 2016 at NYRR's Club Night in front of all of my running peers.

*The Striders program from New York Road Runners changed my life for the better. My health has improved greatly in the three years I've been participating, and I know that it has added years to my life. I humbly ask you to support the work of New York Road Runners so that more seniors across New York City just like me can be touched by their free health programs. Thank you for allowing me to testify today.*



**TESTIMONY  
of  
FPWA**

**Before the  
New York City Council Committee on Aging**

**Preliminary Budget Hearing**

**March 23, 2018**

**Prepared By:**

**Jeanette Estima – Senior Policy Analyst**

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## Introduction

My name is Jeanette Estima and I am a Senior Policy Analyst at FPWA, an anti-poverty policy and advocacy nonprofit with a membership network of about 170 human services and faith-based organizations. Thank you, Chairperson Chin and members of the committee for the opportunity to testify here today.

FPWA has been a prominent force in New York City's social services system for more than 94 years, advocating for fair public policies, collaborating with partner agencies, and growing its community-based membership network to meet the needs of New Yorkers. Each year, through its network of member agencies, FPWA reaches close to 1.5 million New Yorkers of all ages, ethnicities, and denominations. FPWA strives to build a city of equal opportunity that reduces poverty, promotes upward mobility, and creates shared prosperity for all New Yorkers.

## Background and Need

FPWA envisions New York City as a place where we can all safely remain in our communities and continue to contribute to the City's diverse social and economic fabric as we age. But to do so, many of us will need a solid network of community-based services such as senior centers, transportation, home-delivered meals, homecare, and respite for caregivers.

The Department for the Aging (DFTA) provides all these services, but the impact of decades of underfunding reverberates throughout communities. There are mounting waitlists for services, senior centers are in disrepair, elder abuse goes unnoticed and is underreported, and many people must stop working or reduce their hours (and incomes) in order to care for their loved ones. The threat of sweeping federal cuts to existing safety net programs, will further endanger older New Yorkers. Now more than ever, there must be a commitment to fully fund aging services that meet the evolving needs of today's older New Yorkers.

Nearly 1.6 million people 60 and older call New York City home. As the range of services indicates, this is not a homogenous population but a diverse demographic group covering a lifespan of 30 years or more. **58 percent of older New Yorkers are women, nearly half are immigrants, and a third have limited English proficiency.** The majority of older New Yorkers (71.4 percent) are no longer in the workforce, so **fixed incomes are a hard reality for many: the average social security benefit is \$17,211, and 30 percent live below or just above the poverty level.**

The number of older New Yorkers has grown rapidly since the mid-2000s, and **by 2030 one in five New Yorkers will be 60 and older.** Yet, over the years there's been no plan to prepare for this demographic shift and the wider-ranging needs that come with a longer lifespan. Instead, DFTA's budget endured stagnation and cuts, stifling much needed growth and service improvements.

But last year, thanks to the strong support of the City Council the tide started to turn. We are so grateful to the Council and the Administration for clearly demonstrating their commitment to older adults by securing an investment of nearly \$23 million in baselined funding for senior services in FY18, including: \$10M for a model budget for senior centers, \$6.5 million to address the homecare waitlist, \$1.2 million to address the case management waitlist, \$1.2 million for weekend meals, and \$4 million for a new caregiver support program.



We now ask that the Council fight to further stabilize funding, not only to meet current needs but also to shore up the City's safety net infrastructure for older adults, which is threatened by proposed federal cuts. According to our analysis, Trump's budget proposal cuts DFTA's federal funding by nearly \$27 million—more than a third of the agency's federal funding in FY18, or 7.2 percent of its \$372 million budget. DFTA relies on more than a dozen federal grants, several of which are eliminated entirely in the budget proposal. These cuts are in addition to the decimation of direct federal assistance, such as housing, food assistance, and healthcare. (Please see the attached report.)

Especially now, under this threat to the existing safety net for older adults, a continued, city-led investment in a long-term plan to build this service infrastructure is the right way forward.

**In FY19 we encourage the council to seek an investment of \$22.1 to build up the safety net for older New Yorkers, and push for an expedited process to implement the funding committed by the administration for the model budget for senior centers.**

**In FY19 we urge the Council to seek an investment of \$22.1 to build up the safety net for older New Yorkers, and push for an expedited process to implement the funding committed by the administration for the model budget for senior centers.**

### **Re-Building a Community-Based Safety Net for Older New Yorkers**

Last year, FPWA worked with other advocates for older adults to determine what the service gaps in the sector were and how we could build an infrastructure capable of supporting the increasing needs we are already seeing. We proposed an investment of \$132.8 million over five years to address current needs and develop an upgraded and expanded infrastructure for each of DFTA's core services: senior centers, homecare, congregate meals, home-delivered meals, case management, social adult day services, NORCs, caregiver programs, transportation, and elder abuse prevention. The Council stood with us, declaring it the Year of the Senior, and demanding that older New Yorkers be included in the city's vision for equal opportunity.

We are grateful for the Council's support and the city's strong commitment to improving senior services in FY18 with \$22.89 million in baselined funding and ask that, in year two of our five-year plan, the administration continue to make progressive improvements to the network of services. In FY19, we ask for an allocation of \$22.1 million for services that help keep older New Yorkers in their communities (see chart below).

<b>DFTA Core Service</b>	<b>Description</b>	<b>FY19 New Needs</b>
Congregate Meals	Increase reimbursement rate by \$1.00 and ensure cultural competency and flexibility	\$7,600,000
DFTA-run NYCHA Senior Centers	Facilities improvements and supports for nearly 100 centers located within NYCHA developments	\$5,000,000
Home-Delivered Meals	Increase reimbursement rate by \$1.00 and ensure cultural competency and flexibility	\$4,500,000
Case Management	Address waitlists and growing demand	\$2,000,000
Homecare	Address waitlists and growing demand	\$1,000,000
Transportation	Increase transportation support	\$1,000,000
Elder Abuse Prevention	Increase prevention and awareness	\$500,000
Caregiver Supports	Continue outreach and expand services	\$500,000
	<b>TOTAL</b>	<b>\$22,100,000</b>

Of particular importance this year is funding for both congregate and home-delivered meals, neither of which have received increases in several years. Current reimbursement rates are below the national average, according to DFTA. And while culturally appropriate meals such as kosher and halal are mandated by DFTA, they are more expensive, resulting in a deficit to nonprofits that provide them. **Therefore, we request that per-meal reimbursements be increased by \$1.00, at a total cost of \$12.1 million in FY19.**

There are nearly 100 DFTA-funded senior centers located within NYCHA developments. Most of these centers are in dire need of support and stability in order to adequately serve older adults. These programs have unique needs for facility improvements given the long-standing federal disinvestment in Public Housing that has now created a capital backlog. While these centers will receive some funding for staff and programming through the model budget process, facilities and OTPS costs are not included. **In order to make these centers safe, inviting spaces, we request \$10 million over two years: \$5 million in FY19 and \$5 million in FY20.**

There are over 1,100 seniors on case management waitlists across the city and over 200 on waitlists for homecare. The investments made in FY18 have begun to address the waitlists, but the need continues to grow, along with the population of older adults. We must continually build this system not only to serve today's need, but also future needs. Additional funding is needed to ensure that caseloads don't go higher than 65, per DFTA mandates. **We request \$2 million to ensure that services keep pace with the ever-increasing demand.**

Funding is also needed to serve frail, homebound seniors waiting for a social worker to be available to visit them at home, assess their needs, and provide ongoing services. Living wages must be funded to ensure there are professionally trained social workers who can manage complex situations, as well as multilingual staff who can work with immigrant populations.

Homecare offers vital supports for older adults that allow them to remain at home with the care they need to remain independent. **Therefore, we request \$1,000,000 to address the current homecare waitlists.**

Funding for transportation services has been stagnant for many years. Vans take older adults to programs and cultural or recreational trips, to run errands like food shopping, and even to medical appointments. Reliable, accessible transportation is critical for living independently in our homes as we age. **Therefore, FPWA requests \$1,000,000 for increased transportation services provided by nonprofit service organizations.**

DFTA's Elder Abuse prevention services are a critical resource to address this crisis, in which only one out of every 24 cases is reported. **We request \$500,000 to increase outreach and awareness of these services.**

Access to affordable elder care and support for caregivers are critical for so many New Yorkers who must balance family caregiving with full-time work. In addition to workplace flexibility, caregiver programs allow people opportunities to manage their own life responsibilities in addition to the caregiving they provide. **We request \$500,000 for caregiver supports to continue outreach & expand services, including support groups and respite.**

### **Model Budget for Senior Centers**

As part of FY18's historic increase in funding for senior services, the Administration committed to creating a model budget for senior centers. We thank DFTA, OMB, and the Administration for their work over the past year to finalize the details of this model budget. The process has culminated in a determination that, to bring equity into funding for senior centers, an additional investment of \$10 million dollars (beyond the \$10 million allocated in FY18) would be necessary. The city has committed to providing this funding, to be fully implemented by FY21.

This is an important investment focusing on direct staff and programming, and we are very pleased that DFTA has committed to working with each provider individually as they work to amend contracts. However, this is no small feat, and **we urge the administration to ensure that there is enough capacity at DFTA to process these amendments promptly.**

Moreover, **FPWA encourages the Council to push to for expediting the implementation of the full \$20,000,000 in funding by FY20, rather than the proposed FY21.** This funding will have a hugely positive impact on the operations of these programs. As stated, this funding applies only to personnel and programming, but there are many other upgrades and expansions of the senior center network that are necessary to meet the needs of older adults across the city, especially in new immigrant communities. We urge the Council to prioritize the implementation of this funding so that we can attend to these other needs such as meals, rent, OTPS and other associated costs.

## Human Services Sector Investments

Last year saw an important investment in human services provider organizations that hold City contracts. With your help, we secured \$300 million of our \$500 million ask to help nonprofit provider organizations cover the cost of delivering essential services to New Yorkers.

There are two areas of human service nonprofit operations that need special attention in FY19 - costs associated with indirect rates and fringe and escalating occupancy and insurance costs. We are suggesting funding parameters that set a floor of 15% for indirect in all human services contracts, and request a 10% increase in the portions of human services contracts covering occupancy and casualty and liability insurance to cover escalating costs in these areas. Additionally, the City uses an outdated formula for calculating employee fringe benefits. We ask for a 37% fringe rate in all human service contracts to reflect a generally accepted industry standard that also mirrors the fringe rate used by the City for its own employees.

As a member of the Human Services Advancement Strategy Group (HSASG), a group of nine membership organizations representing 2,000 human service provider organizations across the city, **FPWA respectfully requests that the Council include in its March Response a \$200 million ask for FY19 to address these critical funding shortfalls.**

## Conclusion

We thank the Committee on Aging for the opportunity to testify. We look forward to working closely with you to ensure that older New Yorkers and their families receive sufficient services needed for them to live and thrive in the City.



## New York City's Older Adults Would Suffer Under President Trump's Budget

By Derek Thomas, Senior Fiscal Policy Analyst

March 15, 2018

Following \$1.4 trillion in deficit-financed tax giveaways for profitable corporations and the wealthy, President Trump is following through with step two of his harmful fiscal policy agenda; paying for those tax cuts with deep cuts to services that support low- and middle-income families, children, older adults, and people with disabilities. These services – when properly funded – strengthen the economy, improve the quality of life for all New Yorkers, and demonstrate how we as a city value opportunity and dignity.

This brief focuses on the dangers posed to New York City's older adults by examining the President's proposed cuts to federal grants that the City's Department for the Aging (DFTA) relies upon and to direct federal assistance.

Trump's budget proposal puts New York City's older adults at risk by cutting the Department for the Aging's (DFTA) \$77.4 million in federal funding by more than a third, and by further decimating direct federal assistance, such as housing, heating and food assistance, and healthcare.

### Trump Budget Decimates Programs for New York City's Older Adults

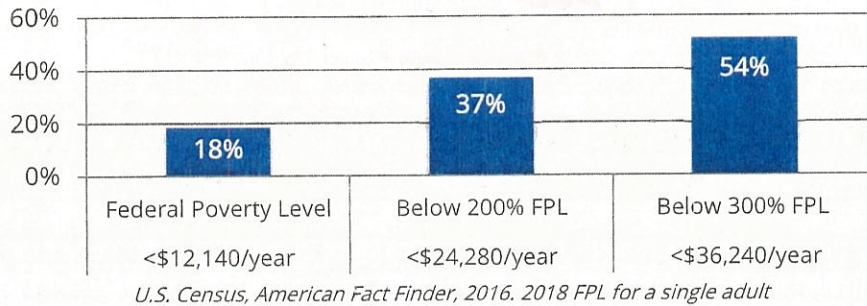
*Trump budget cuts DFTA's federal grants by 35%*



*FFIS and NYC FY18 Modified Plan. Federal funds account for 21% of DFTA's total FY18 budget*

These harmful cuts could worsen economic prospects for older New Yorkers, many of whom already live on a modest fixed income, and whose population is growing rapidly.<sup>ii</sup> Currently, 18 percent of seniors live below the official Federal Poverty Level (FPL) and more than half live below three times the FPL (the latter being a better measure of the income required to meet basic needs).<sup>iii</sup> Poverty rates vary widely based on race and ethnicity; 13 percent of White older adults live in poverty compared to 19 percent of Black older adults, 24 percent of Asian older adults, and 28 percent of Hispanic/Latino older adults.

**Most New York City Older Adults Are Just Barely Getting By**  
*Percent of NYC seniors living at various income levels*



**Federal Budget Basics**

The City’s Fiscal Year 2018 (FY18) Modified Budget of \$87.4 billion relies on \$8.6 billion in federal aid – equal to nearly one out of every ten dollars the City spends – most of which supports services for low- to middle-income residents.<sup>iv</sup> The federal budget pays for these grants through mandatory and discretionary spending.

Mandatory programs – such as Medicaid, Children’s Health Insurance Program (CHIP), Child Care and Development Block Grant (CCDBG), Temporary Assistance to Needy Families (TANF), and Social Services Block Grants (SSBG) – are set in permanent law.

Discretionary programs – funding for much of what the government does outside of the major entitlement programs, such as mental health, child care, heating assistance, training and employment programs, transportation, and public safety – must be appropriated annually.

The President’s proposed budget would be in addition to seven years of federal austerity spending. The 2011 Budget Control Act set caps on defense and nondefense discretionary funding through 2021 and further reduced funding over time through sequestration. As a result, mandatory grants are lower than any year since 1980, while discretionary grants were lower in 2015 than all but one year since 1980, even as need increases, such as for the growing population of seniors.<sup>vii</sup> Steep cuts to these grants would be catastrophic and would likely mean even deeper cuts to programs that are critical to the health and well-being low- and moderate-income children and their families.

At the moment, Congress is operating on what’s known as “continuing resolutions”. CRs are bare-minimum spending bills that typically maintain current levels of spending for discretionary programs. The most recent continuing resolution – known as the Bipartisan Budget Act (BBA) – keeps the lights on until March 23<sup>rd</sup>, 2018, raises caps on defense and non-defense spending, and provides for disaster assistance. Non-defense spending adjustments include a long-term extension of CHIP, increased childcare investments, and spending to tackle opioid and mental health crises. Congress must now decide how to distribute the increased funds. Trump’s budget, however, undermines this agreement by not supporting non-defense increases, while supporting increased defense spending.

## Impact of Federal Budget Proposals

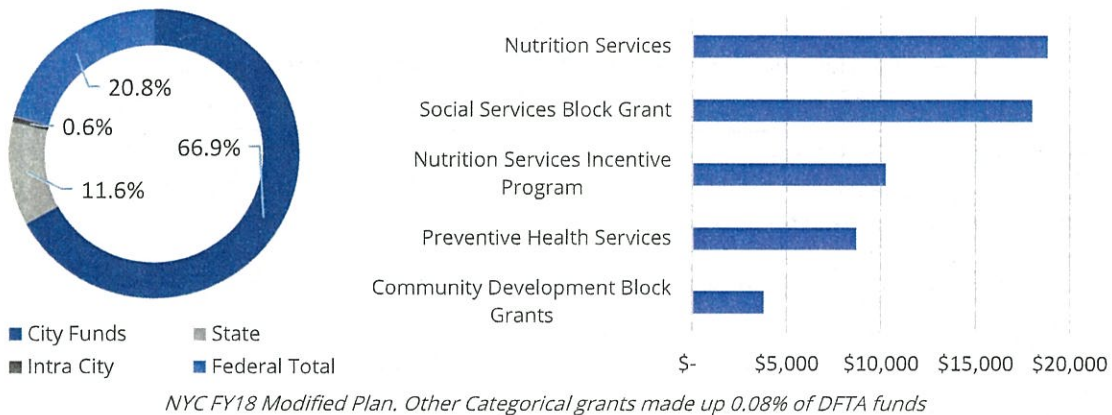
While Presidents' proposals historically carry little weight in Congress, President Trump's budget is aligned with Congressional Republicans' fiscal priorities. Moreover, a budget proposal is the way in which public officials express their vision and priorities, and should be scrutinized thoroughly.

The following analysis includes the President's cuts to both federal grants that the City's agencies – in this case, DFTA – rely upon *and* direct federal assistance such as food assistance, healthcare, and housing.

### Overview – DFTA's Federal Funding

DFTA's FY18 Adopted Budget is more than \$372 million, of which nearly 21 percent (\$77.5 million) comes from the federal government through more than a dozen individual grants. Of those, just five federal grants account for 77 percent of DFTA's federal grants.

**Federal Grants Account for 1/5<sup>th</sup> of DFTA's FY18 Budget**  
*Just five federal grants account for 77% of all federal grants*



### Cuts to DFTA Grants

**Social Services Block Grant (SSBG):** The President's budget would **eliminate** the SSGB. The SSGB was designed as a flexible source of funding that allows states to tailor programs to meet the needs of vulnerable populations, such as protecting elderly adults from harm and helping them stay in their own homes. Like many discretionary programs, spending on SSBG has fallen by 73 percent since 1982 and, unless spending caps are amended, will continue to experience sequestration cuts as a result of the 2011 Budget Control Act.<sup>vii</sup> DFTA's SSBG grant was worth more than \$18 million in FY18 – equal to 23 percent of the agency's federal funding, to support senior centers and meals.

- **FPWA Member Profile – Project FIND:** The Social Services Block Grants funds Project FIND's Senior Centers, which provide access to nutritious meals, benefits screenings, fitness activities, art, cultural, and educational programming, diabetes, and high blood pressure, and for those living alone, the opportunity for social companionship to more than 750 older adults daily on Manhattan's Midtown and West Side. SSBG comprised more than 50 percent of Project Find's nearly \$1 million in federal support in 2016, and if eliminated, would devastate the services they provide.<sup>viii</sup>

*Community Development Block Grant (CDBG):* The President's budget would eliminate the SSBG. And like the SSBG, the CDBG is a flexible funding source that, among others, supports home-based services for seniors. CDBG grants represented nearly five percent of DFTA's federal funding in FY18.

*The Foster Grandparent Program:* The President's budget would **eliminate** the Foster Grandparent Program. First established in 1965, the program connects volunteers age 55 and over with opportunities to provide one-on-one mentoring, nurturing, and support to children with special or exceptional needs, or who are at an academic, social, or financial disadvantage. The Foster Grandparent grant represented two percent of DFTA's federal funding in FY18.

*Community Service Employment for Older Americans (SCSEP):* The President's Budget would also **eliminate** the SCSEP. SCSEP is the only federal program targeting workforce development for older adults. In FY18, SCSEP accounted for more than 4 percent of DFTA's FY18 federal funding.

- *FPWA Member Profile – Chinese-American Planning Council:* Approximately 150 SCSEP participants provided over 100,000 community service hours to public and non-profit agencies, allowing them to enhance and provide needed services.<sup>ix</sup>

**Trump's Budget Eliminates Several of DFTA's Federal Grants (in thousands)**

	FY18 Modified	Cut	Percent Change
Social Services Block Grant (SSBG)	\$18,025	(\$18,025)	(100%)
Community Development Block Grant	\$3,811	(\$3,811)	(100%)
Community Service Employment for Older Americans	\$3,344	(\$3,344)	(100%)
Foster Grandparent Grant	\$1,664	(\$1,662)	(99.9%)
State Health Insurance Assistance Program*	\$585	(\$585)	(100%)
		<b>Increase</b>	
Home & Community-Based Supported Services**	\$8,694	\$25	0.3%
Nutrition Services	\$18,849	\$54	0.3%
Preventive Health Services***	\$2,219	\$555	25%
<b>Total</b>	<b>\$57,191</b>	<b>\$(26,794)</b>	
<i>Share of DFTA Budget</i>	<i>15.4%</i>	<i>7.2%</i>	
<i>Share of DFTA's Federal Grants</i>	<i>73.8%</i>	<i>34.6%</i>	

*FFIS and agency federal budget data and NYC FY18 Modified Plan from FY19 Preliminary Plan. Described as \*Health Insurance Assistance PM, \*\*Title III, Part B: Supportive Services A, and \*\*\*Title 3D Health Promotion in the FY18 Modified Plan.*

*Cuts to Direct Assistance*

In addition to the federal grants that directly affect the City's operating budget, the federal government provides direct assistance to individuals (such as food and disability benefits) and supports local authorities (such as those tasked with providing housing, transportation, and health care). Proposed cuts in these areas will further harm seniors while also putting additional pressure on the City's budget.



*Supplemental Nutrition Assistance Program (SNAP):* In 2016, SNAP benefits protected, on average, more than 300,000 thousand New York City seniors from food insecurity each month while also freeing up their resources for other necessities such as housing, health care, and transportation, helping them to avoid hospitalization and to age in place.<sup>xxi,xii</sup> Thousands stand to lose their food assistance as a result of Trump's proposal to slash SNAP benefits by \$230 billion (or a full 30 percent) over ten years. These cuts will take place at a time when food pantries in the city are experiencing increased demand following cuts to SNAP in 2013.<sup>xiii,xiv</sup>

*Health:* Once again, the President is calling for the repeal of the Affordable Care Act and replacing it with the Graham Cassidy proposal. This would result in hundreds of billions of dollars of cuts to Medicaid, the primary source of funding for nursing home care and home- and community-based services. As a result, more older Americans would be forced to rely on institutional care, rather than allowing them to age in their own homes.<sup>xv</sup>

*Low Income Home Energy Assistance Program (LIHEAP):* Trump's proposal **eliminates** the program that helps keep low-income households safe by assisting with heat and other utilities. Even as need has increased, LIHEAP funding has declined by 30 percent since 2010. Nationally, some 40 percent of eligible households include at least one person aged 60 or older.<sup>xvi</sup>

*Social Security Disability Insurance (SSDI):* cuts would hit many older Americans. Workers pay into Social Security to protect themselves and their families if they retire, become disabled, or die leaving family members to support. Most SSDI beneficiaries — nearly 6 million — are 55 or older and can't keep working until their full Social Security retirement age due to serious illness or injury. Though the President repeatedly promised not to cut Social Security, his budget cuts SSDI by tens of billions of dollars.<sup>xvii</sup>

*Housing:* Affordable housing for seniors would be endangered by cuts to the New York City Housing Authority' (NYCHA), the Community Development Block Grant (CDBG), and Section 8 vouchers. Under the President's budget, NYCHA's capital fund would be **eliminated** and its operating fund — which receives 63 percent of its \$3.2 billion from the federal government — would be cut by several hundred million dollars. Cuts to the operating fund would reduce the availability of subsidized units while eliminating the capital fund — used to repair properties — would leave units in a dangerous state of disrepair.<sup>xviii</sup> As of 2015, 19 percent of the nearly 600,000 served by NYCHA were age 62 and older.<sup>xix</sup> In addition, the proposal to **eliminate** the CDBG would gut the New York City Department of Housing Preservation and Development (HPD), which relies on federal assistance for 86 percent of its funding to provide emergency repairs, lead-paint removal, enforcement, and inspections. Deep cuts to the Housing and Urban Development would result on the loss Section 8 rental assistance for nearly 21,000 households across New York State. In New York City, half of recipients are elderly or people with disabilities.<sup>xx</sup>

## Policy Choices

Federal austerity budgets over the last several years have kept DFTA's federal funding flat even as need has surged. The City, to its credit, has stepped up, increasing DFTA spending by 64 percent since 2014. Nevertheless, seniors, most of whom live on fixed incomes, deserve an investment equivalent to their population: While people 60 and older represent 18 percent of the City's population, the DFTA budget is equal to less than one-half of one percent of the City's budget – an inequity that will only grow as the population surges.<sup>xxi</sup> Doing so will take the coordinated effort of City, State, and Federal officials.

### City

FPWA, in coalition with nonprofit advocates and service providers, has proposed to strengthen the safety net for older New Yorkers by rightsizing DFTA's budget. In FY18, the coalition asked the administration to allocate \$60.6 million as part of a five-year plan for an additional \$132.8 million to baseline discretionary funding for core services and fill the gaps in current services.<sup>xxii</sup> The City's eventual increase of \$23 million fell short of the coalition's ask by \$37 million, and federal budget proposals threaten to further deepen the services gap.

### Federal

New York's congressional delegation largely exhibited bipartisan leadership during the tax debate, and should commit to doing so during the appropriations process. Specifically, they should oppose cuts in SNAP, Medicaid, housing, and other programs, including by opposing any free-standing bill or budget resolution the same partisan reconciliation process used for repeal and replace efforts and the tax giveaways' passage. Cutting programs that help struggling families meet basic needs is not a responsible approach to addressing our nation's fiscal challenges.

## Citations

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<sup>i</sup> According to the *New York City Population Projections by Age/Sex & Borough, 2010-2040* report, "the population 65 years and over stood at 1,002,000 in 2010 and is projected to increase to 1,410,000 in 2040—a jump of 408,000 persons or 40.7 percent." [https://www1.nyc.gov/assets/planning/download/pdf/data-maps/nyc-population/projections\\_report\\_2010\\_2040.pdf](https://www1.nyc.gov/assets/planning/download/pdf/data-maps/nyc-population/projections_report_2010_2040.pdf)

<sup>ii</sup> According to the Comptroller Stringer's *Aging with Dignity* report, 40 percent of New York City senior-headed households depend on government programs (including Social Security) for more than half of their income, while more than 30 percent depend on these programs for three-quarters of their income. The most significant of these programs is Social Security...with almost 83 percent of New Yorkers over 65 receiving income from Social Security, with an average annual benefit of \$17,800, or slightly less than \$1,500 per month." <https://comptroller.nyc.gov/reports/aging-with-dignity-a-blueprint-for-serving-nycs-growing-senior-population/>

<sup>iii</sup> According to the New York Self-Sufficiency Standard, 300 percent FPL is a closer approximation of the income required to meet an individual's most basic needs, such as food, shelter, utilities, groceries, etc. Self-sufficiency varies by borough, ranging from \$48,520 in Lower Manhattan to \$27,126 in Upper Manhattan. The unweighted average across boroughs is \$33,191, which is 2.75 times the FPL. See our *With One Voice* report for more: <http://fpwa.org/wp-content/uploads/2017/10/With-One-Voice-Final-Draft-10.3.17.pdf>

<sup>iv</sup> Approximately \$922 million is federal aid for Sandy projects through the Community Development Block Grant – Disaster Recovery fund

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**TESTIMONY BEFORE  
NEW YORK CITY COUNCIL  
COMMITTEE ON AGING**

**FISCAL YEAR 2019 PRELIMINARY BUDGET  
FRIDAY, MARCH 23, 2018**

PREPARED BY  
ZAKIA HAYWOOD  
DIRECTOR, COMMUNITY PROGRAMS  
NEW YORK ROAD RUNNERS

*Good afternoon Chair Chin. My name is Zakia Haywood and I serve as the Director of Community Programs at New York Road Runners (NYRR). Thank you for this opportunity to testify before the Committee on Aging on the Fiscal Year 2019 Preliminary Budget.*

**INTRODUCTION**

NYRR's mission is to help and inspire people through running. We achieve our mission by creating running and fitness opportunities and programming for people of all ages and abilities.

NYRR demonstrates its commitment to keeping New York City's five boroughs healthy through races, community events, youth initiatives, school programs, and training resources that provide hundreds of thousands of people each year with the motivation, know-how, and opportunity to run for life.

NYRR's premier event, the TCS New York City Marathon, is not only a celebration of New York City but is a powerful contributor to its betterment. The Marathon generates \$415 million in economic impact for New York City and in 2017, 9,300 charity runners raised \$35.5 million on behalf of hundreds of not-for-profit organizations.

NYRR is woven into the fabric of our city, with programming across all age groups and an activated constituency. We engage over 25,000 volunteers annually, providing free time, talent and energy to keep our events safe, and parks and communities clean and beautiful. Our free community running and walking initiative, NYRR Open Run, is getting thousands of New Yorkers out running and walking weekly in 13 local New York City Parks in all five boroughs, with three more park sites set to open this year. NYRR is also working with local stakeholders to identify areas with high health disparities, participating in local health fairs, and serving as a resource and partner to public officials, community boards, business improvement districts, hospitals, community health organizations, and grassroots community groups.



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While NYRR is best known for producing the TCS New York City Marathon and our free school-based programs for youth, our organization is also **a dedicated provider of free senior health and fitness programs in all five boroughs of New York City.**

In 2017, our weekly senior walking program **NYRR Striders**, operated in 45 unique senior and community centers, and our other free programming and resources—like our **Walking 101** workshops coordinated in partnership with New York City’s Department for the Aging—combined to touch the lives of over 3,000 older adults and seniors throughout New York City.

### **THE NEED FOR HEALTH AND FITNESS SERVICES FOR NEW YORK CITY SENIORS**

Maintaining and increasing access to free health and fitness services is an imperative for the wellbeing of our City’s seniors and the people who call them friends, parents, grandparents, and loved ones. The U.S. Department of Health and Human Services recognizes physical activity as critical for both preventing and treating many chronic conditions that affect people of all ages and abilities. You may be aware that the Surgeon General formalized a call to action surrounding this issue called *Step It Up!*, which promotes walking and walkable communities to improve the physical, social, and emotional well-being of all Americans. There is an abundance of evidence that active older adults are less likely to suffer from falls, and that walking is an easy way to help seniors enjoy better quality of life and live independently for longer. Additionally, walking programs and walkable communities are good for social connectedness, good for business, and good for the environment.

### **BUDGET REQUEST FOR FISCAL YEAR 2019**

**NYRR respectfully asks the New York City Council to consider a request of \$35,000 to support our free health services to over 3,000 seniors in all five boroughs through the Healthy Aging Initiative during the 2019 Fiscal Year.**

NYRR is asking the New York City Council to support our free services for seniors, which in 2017, operated in 49 New York City Council Districts. NYRR has received generous support from the New York City Council during the past two budget years under the Healthy Aging Initiative in the amount of \$22,990. With this 2019 request, we are hoping to continue to provide, at no cost, the organized and supportive program environment that helps our weekly NYRR Striders participants across New York City take the steps necessary to make fitness and wellness part of daily life. We also hope to continue to, in partnership with the New York City Department for the Aging, provide free Walking 101 workshops to senior centers surrounding Heart Health Month in February and Fall Prevention Awareness Week in September.



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### NYRR Striders

The NYRR Striders program serves adults and seniors in predominantly low-income and under-resourced communities in New York City with free, weekly walking and fitness programs. Currently, NYRR is offering this coach-led walking program every week in 40+ unique senior centers, community facilities, and neighborhood parks across all five boroughs to more than 2,300 seniors. While we are operating the program in almost every single New York City Council District, more than half of our participants hail from Districts 1, 4, 8, 9, 18, 36, and 41. The program is geared toward adults aged 50 years and older and aims to improve attitudes toward exercise, to make running and walking more accessible, and to build and contribute to communities. Each session includes:

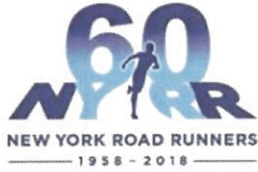
- 30-45 minutes of walking or physical activity (indoor or outdoor)
- Stretching and drills to develop strength, coordination, and flexibility
- Active conversations on nutrition and best practices for healthy living
- An opportunity to gather with peers in a fun, social environment

In 2018, we are expecting to again serve more than 2,300 seniors with the Striders program and select a number of participating senior and community centers to serve as “Striders Neighborhood Hubs,” with the goal of increasing local participation at each site by inviting and engaging the larger aging communities that surround them.

NYRR also aims to expand upon the program’s successful “Discovery Walk Series,” which began as a pilot in 2017 through funding from the Mayor’s Building Healthy Communities Initiative in East Harlem. NYRR’s first Discovery Walk Series helped hundreds of senior participants explore their local neighborhood’s assets while getting active through themed art, nutrition, and health and fitness walks along the East Harlem Community Walking Trail. The project was recently chosen as a success story for the Building Healthy Communities Initiative, and NYRR plans to use its model to encourage social interaction and provide local stakeholder integration to advance the betterment of senior health in neighborhoods where it is needed most.

### NYRR Walking 101

Walking 101s are free, on-site, wellness education workshops provided by NYRR to senior and community centers in New York City. These one-hour interactive sessions, led by one of the NYRR Striders certified running coaches and fitness instructors, focus on critical areas of adults’ health, nutrition, and independence. Walking 101 workshops are usually requested by the New York City Department for the Aging senior centers twice a year surrounding Heart Health Month (February) and Fall Prevention Awareness Week (September). In addition to a fun and active session, NYRR also gives each attendee a free walking journal, nutrition guide, and chair exercise guide. Technical Assistance is also provided to senior and neighborhood centers that want to start walking programs at their locations. In 2017, NYRR held Walking 101s for 987 unique participants in all five boroughs.



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## CONCLUSION

As the premier non-profit community running organization of our great city, NYRR recognizes that health disparities and inequities stifle growth opportunities within communities. Running and walking is something that almost everyone can do and is an activity that empowers you in your day-to-day life. NYRR is committed to working with and in every community to bring opportunities for physical activity and fitness to every aging adult and senior who wants and needs it.

*NYRR looks forward to continuing our commitment to New York City's aging population, and growing our relationship with the New York City Council. Thank you for allowing me to testify today. I would be happy to answer any questions you might have about the work of New York Road Runners, and I urge you to prioritize the funding of health and fitness programs for our City's seniors.*

Greetings.

I am Bonnie Lumagui, Director of Educational Alliance's Co-Op Village Naturally Occurring Retirement Community Supportive Service Program (NORC SSP) on the Lower East Side of Manhattan.

Thank you very much convening what we believe is a highly important and very timely hearing regarding Older Adult Services in NYC. Today I am here to speak about NORC SSPs, a program that, in our view, has benefitted many thousands of seniors and their families in this City in the most profound ways and had a transformational effect on our City.

At the Co-op Village NORC program, since 1994, we have been pleased to work closely with approximately 5000 seniors. For them, we have provided medical, mental health and a range of social support services alongside a full calendar of social, cultural and community-building activities. We engage with them in their homes and in our programmatic spaces, wherever is most convenient and sensible for them, and we develop customized service plans for each participant.

We are certain that the program has enabled hundreds of seniors to avoid nursing homes, illness, isolation and alienation while affording nearly all participants greater quality of life. We also have the ability to nimbly respond to emerging needs and crises, and this was never more evident or significant than in the aftermath of Hurricane Sandy, when we tended to the needs of many home-bound elderly, for whom we were in many instances the first and sometimes only source of support.

We are pleased to be a partner with City government in operating the program and we look forward to working together to ensure that it remains strong and relevant far into the future. In this spirit, we offer a number of points and recommendations:

- We have found in recent years that the numbers of seniors in our community is rising, and that it is becoming an increasing struggle to accommodate all participants.
- We are increasingly serving seniors as young as 60 years of age as well as those more than 100 years of age. Clearly, different sorts of programming are necessary for seniors along the age spectrum and the need to expand and diversify programming accordingly has caused a budgetary strain.
- As prime examples, the younger seniors are seeking modern health and wellness programming while older seniors are requiring intensive and individualized attention, including medical services.
- Our health partners are a crucial component to meeting the deliverables NYC Department of Aging requires. They can no longer provide these services without reimbursement. We need additional funds to continue to provide the vital nursing service we presently offer to clients. These services enable faster identification of medical issues before it becomes critical and hospitalization is required. We need the funding that city council provided in FY 16 for nursing services baselined in the budget.



- We are now being asked by the City to collect and maintain data to help measure the effects of the program. While we wholeheartedly support the intent of this effort, we are very concerned that we have not been extended the funds necessary to manage this function.
- We are struggling to maintain qualified staff especially MSW social workers because our salaries are significantly lower than average. We can only afford to pay 45,000.00 for an entry level position. We cannot attract and retain strong candidates for our open positions. In one year I lost three excellent MSWs because of the low salary. This constant transitioning negatively impacts our seniors and our program. I am requesting starting salaries of 50,000 for an MSW entry level position which would help to retain staff and improve how we meet older adult's social service needs.

So, in sum, the points we most want to convey are: we believe NORC programs are vital and deeply necessary, but we are being increasingly challenged to manage the program financially as the demand for services grows larger and more complex while the funding does not keep pace with these demands.

We urge City government, then, to invest more deeply in the program. Our conviction is that such an investment will reduce our society's expenses in medical and institutional care while making possible humanistic rewards that are unquantifiable.



## Commitment to Improve the Quality of Life

Friday March 23, 2018

**To: New York City Council Committee on Aging**  
**From: India Home, Inc.**  
**Re: FY19 Preliminary Budget Hearing**

India Home is a non-profit organization founded by community members to serve South Asian older adults. The mission of India Home is to improve the quality of life for older adults by providing culturally appropriate social services.

India Home has been on the forefront of advocating for increased senior services and programs and especially highlighting the needs of immigrant older adults. We have regularly testified in front of the Committee on Aging for many years now. We are happy to see the increase to the DFTA budget for FY 2018. We believe that all service providers need help keeping up with the large demand for senior services. Our larger partners such as Queens Community House, Sunnyside Community Services, and others deserve these increases because they are doing important work and support our work by incubating and nurturing smaller groups such as India Home. We here today to advocate for greater increases to the DFTA budget in the coming years.

Nevertheless, we must note that despite our continued advocacy, grassroots, community-led programs such as India Home have not received the benefits of the baseline budget increase. India Home and other immigrant-led organizations that serve seniors fill a critical gap in serving a multiply vulnerable population – those who are immigrants, LEP, and low-income. We are laying the foundation for services that will only be more in demand in the coming years.

In fact, just yesterday despite there being a foot of snow on the ground, we had over 50 seniors come to our Desi Senior Center. The demand is undeniably palpable, and we are being creative to best meet their needs. The city council has been an invaluable partner in our efforts to provide these critical services to immigrant older adults. However, councilmembers alone cannot bear this burden and our community resources are running thin.


India Home has started in 2008 and our largest most successful center, Desi Senior Center, which gets on average over 100 immigrant Bangladeshi Muslim seniors a day, was started in 2014. DFTA recently proposed that the next senior center contract will start on July 1<sup>st</sup>, 2021.

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After a decade of struggles, our seniors, our communities, India Home, and organizations and providers like India Home simply cannot wait for another three years. Each day, we see our congregate meal programs filled to capacity; we do not have enough chairs, tables, and space to fill our programs; we try to address the growing need for case assistance and various one-on-one services; culturally appropriate mental health programs and caregiver supports are sorely missing for our seniors and their families. And by far the biggest need is transportation – to our senior center programs, for daily errands, and healthcare needs. Furthermore, even though we do not receive fully adequate support to sustain all our innovative programming, we are expected to be compliant to DFTA standards and regulations.

We ask for equity in resource allocation and distribution. Our communities cannot continue to be shortchanged especially when they exist at the intersections of marginalization. Until 2021, there have to be provisions for programs not currently in the RFP system in the new baselined funding for FY 2019 and FY 2020. It is a matter of fairness and equity. The need is urgent and the time to act is now!

We thank the council for your leadership in pushing the city budget, the council budget, the Department for the Aging, and various other stakeholders and for listening to our needs and concerns. We want to make New York City a better place to age for everyone, and we appreciate your support in our journey to do so.

Sincerely,



Vasundhara D. Kalasapudi, M.D.

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## TESTIMONY: UJA-FEDERATION OF NEW YORK

**New York City Council Committee on Aging  
Honorable Margaret Chin, Chair**

**FY19 Preliminary Budget Hearing**

**Submitted by:  
Ariel Savransky and Hillary Stuchin**

**March 23, 2018**

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\*Executive Committee member \*\*Of Blessed Memory

On behalf of UJA-Federation of New York, our network of nonprofit partners and those we serve, thank you, Chairperson Chin and members of the Aging Committee, for the opportunity to submit testimony on the importance of supporting New York City's older adults. I am Ariel Savransky, Advocacy and Policy Advisor at UJA-Federation of New York.

Established over 100 years ago, UJA-Federation of New York is one of the nation's largest local philanthropies. Central to our mission is to care for those in need. We identify and meet the needs of New Yorkers of all backgrounds and Jews everywhere. We connect people to their communities and respond to crises in New York, Israel and around the world. We support nearly 100 nonprofit organizations serving those that are most vulnerable and in need of programs and services.

### **Supporting the Human Services Sector**

The Human Services Advancement Strategy Group (HSASG), a group of nine membership organizations that includes UJA, represents 2,000 nonprofit human service provider organizations across the City. HSASG was created to advocate for and secure the programmatic, financial and operational resources needed to fully cover costs and meet the contractual obligations of nonprofit providers holding New York City health and human services contracts.

In the months since the FY18 budget was adopted HSASG has worked to disburse funds and identify funding gaps that continue to plague human service providers.

UJA, as a member of HSASG, greatly appreciates the important investment made in City-contracted human services provider organizations in FY18. With the support of the City Council, \$300 million (of a \$500 million funding request) was included in the final budget to help provider organizations cover the cost of delivering essential services to New Yorkers.

However, there are two areas of human service nonprofit operations that need special attention in FY19 - costs associated with indirect rates and fringe benefits as well as escalating occupancy and insurance costs. We are suggesting funding parameters that set a floor of 15% for indirect costs in all human services contracts and are requesting a 10% increase in the portions of human services contracts covering occupancy and casualty and liability insurance to cover escalating costs in these areas. Additionally, the City uses an outdated formula to calculate employee fringe benefits. We are also asking for consideration of a 37% fringe rate in all human service contracts to reflect a generally accepted industry standard and that, coincidentally mirrors the fringe rate used by the City for its own employees.

**UJA, as a member of the Human Services Advancement Strategy Group, respectfully requests that the Council include in its March Response a \$200 million ask for FY19 to address these critical funding shortfalls.**

### **Supporting New York City's Older Adults**

UJA applauds the Council's continued interest and support of New York City's seniors and the programs and services on which they rely. More than 1.1 million older adults, age 65 and older, make up more than 13% of City's total population, a number that is projected to increase by 20% by 2030. According to Comptroller Stringer's March 2017 report, *Aging with Dignity: A Blueprint for Serving NYC's Growing Senior Population*, a growing number of seniors live at or

below the poverty line; more than 40% of New York City's senior-headed households depend on government programs, and 25.5% of adults over 65 rely on nutrition assistance programs like SNAP.<sup>1</sup> As this population grows, their needs will increase. The Council's investments in this population help bolster the Department for the Aging's core services, and through Initiatives, maintain vital programs for older adults, many of whom might otherwise not have access to these resources.

UJA, along with a coalition of advocacy organizations and providers dedicated to ensuring support for New York City's older adults, respectfully requests the Council to consider the following investments for seniors in FY19:

### **1. Fully Fund Senior Centers through the "Model Budget" Process**

UJA thanks the City Council and Chairperson Chin for their efforts in securing significant increases for the Department for the Aging in FY18. We were particularly encouraged by the \$20 million allocated to develop "model budgets" for senior centers. This funding is split into an initial \$10 million investment in FY18 with the remaining funds currently set to be released over the next three fiscal years.

DFTA is in the process of disbursing the first \$10 million installment, which will apply only to personnel and programs. We appreciate efforts to right size senior center budgets, particularly when it will bolster staff salaries and help implement high quality programming; however, these funds do not cover the full cost of services. OTPS (other than personnel services) costs such as rent, meals, utilities and insurance remain unaccounted for.

We request that the release of the remaining investment of \$10 million promised through the "model budget" process be expedited and fully allocated by FY20, as opposed to the proposed three year rollout. We will continue to monitor this funding and advocate for increased funding as needed to ensure senior center providers are adequately reimbursed for the full cost of providing services.

### **2. Increase the Reimbursement Rates for Home Delivered and Congregate Meals**

UJA's network of nonprofit partners provides vital food services and supports to all New Yorkers throughout the five boroughs. It is also through our partners that UJA is also the largest provider of kosher food in New York City. As demonstrated by our Digital Choice Food Pantry System, UJA believes in the importance of food choice and access to culturally competent meals. Our Digital Choice Food Pantry System integrates access to kosher food with a central warehouse inventory system that allows clients to order food either at a pantry site, or from the convenience of their own home. Clients are able also to select a pick-up time for their food package, making the system work best for them.

There are over 500,000 people living in poor or near-poor Jewish households in New York City. The high cost of a kosher meal – which on average is 30% more expensive than a not-kosher meal – presents a unique challenge for many of our agencies in their work with clients who

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<sup>1</sup> [https://comptroller.nyc.gov/reports/aging-with-dignity-a-blueprint-for-serving-nycs-growing-senior-population/#Aging by the Numbers](https://comptroller.nyc.gov/reports/aging-with-dignity-a-blueprint-for-serving-nycs-growing-senior-population/#Aging%20by%20the%20Numbers)

observe these dietary laws. SNAP recipients often exhaust their SNAP allotments by the last week of the month, but for those observing kosher dietary laws, benefits may run out much sooner.

While food insecurity rates among most New Yorkers have declined, rates among older adults have increased. Between 2014 and 2016, almost 200,000 seniors in New York experienced food insecurity, which is a 16.5% increase from 2013-2015 and represents 12.2% of seniors in New York City.<sup>2</sup> Furthermore, federal cuts to SNAP in 2013 decreased the amount of SNAP benefits that New Yorkers receive each month, resulting in increased reliance on the Emergency Food Assistance Program (EFAP) to get adequate nutrition throughout the month. Because of this increased reliance on EFAP, according to a report by the Food Bank for New York City, more than 75% of food pantries and soup kitchens saw increased visitor traffic and an increased number reported experiencing food shortages in September 2017 compared to September 2013.<sup>3</sup> Additionally, many food pantries struggle to obtain an adequate food supply, especially kosher proteins.<sup>4</sup>

Adequate nutrition is necessary to ensure better resistance to illness and disease as well as increased mental capacity and overall health. As evidenced by the increasing rates of food insecurity among seniors and increased nutritional requirements there is an immense need for access to nutritional and culturally appropriate meals for this population.

Beyond simple meal provision, home-delivered meals provide important social contact for those who are confined to their homes. Meal delivery can act as an access point for other important services, and helps older adults to age safely and in place. However, the high cost of a kosher meal presents a unique challenge for many of our agencies in their work with clients who observe these dietary laws. Providing culturally sensitive meal services for seniors is a priority for UJA, and we are particularly concerned about reimbursement rates for kosher home-delivered meals. The cost of kosher home-delivered meals is higher than the current DFTA reimbursement rate, and our agencies that provide these kosher meals to the elderly struggle to cover the higher costs. This also makes it difficult for service providers to meet the needs of the diverse senior communities throughout the City. Although increased investment in FY15 alleviated some of this burden, providers of kosher meals continue to feel strained.

**UJA urges the City Council to include rate increases that are adequately flexible and culturally competent for Congregate and Home Delivered Meals in the March Response. We request an investment of \$7.6 million for Congregate Meals and \$4.5 million for Home Delivered Meals.**

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<sup>2</sup> Hunger Free America. *Working New York Still Hungry: New York City and State Hunger Report*. November 2017. <http://www.hungerfreeamerica.org/sites/default/files/atoms/files/2017%20NY%20City%20and%20State%20Annual%20Hunger%20Survey%20Report%20.pdf>

<sup>3</sup> Food Bank for New York City. *Trade-Offs at the Dinner Table: The Impacts of Unwanted Compromises*. November 2017. [https://www.foodbanknyc.org/wp-content/uploads/Trade-Offs-at-the-Dinner-Table\\_FB-Research-Brief\\_Nov2017.pdf](https://www.foodbanknyc.org/wp-content/uploads/Trade-Offs-at-the-Dinner-Table_FB-Research-Brief_Nov2017.pdf)

<sup>4</sup> Food Bank for New York City. *Meeting NYC's Need: Bolstering the Emergency Food Network in 2017*. <http://www.foodbanknyc.org/wp-content/uploads/MeetingNYCsNeedNetworkBrief20172.pdf>

### **3. Naturally Occurring Retirement Communities (NORCs)**

Classic NORCs and neighborhood NORCS are multi-age housing developments or neighborhoods that were not originally built for older adults, but now are home to a significant number of older people. These supportive service programs provide critical nursing services and promote health and stability among New York's seniors. NORCs provide services and resources that help enable low-middle income older New Yorkers age in place and thrive in their communities.

DFTA contracts with 28 classic NORCs funded by a \$6.5 million baselined source. The City Council invests \$3.85 million of discretionary funds to exclusively support 25 classic NORCs and neighborhood NORCs and ensure continuity of service in these communities.

NORCs play a crucial role in helping seniors to continue to live safely at home, allowing them to access supportive services and social programs and avoid hospital stays or costly moves to nursing homes. However, some programs struggle to cover the high cost of health and nursing care associated with the NORC supportive service model. Further, there are many parts of New York City that do not have a NORC program, despite having a high concentration of older adults.

**UJA recommends that the City Council increase the NORC Initiative to \$5 million to support discretionary award enhancements, nursing services and/or new pilot programs to underserved parts of New York City.**

### **4. Elie Weisel Holocaust Survivor Initiative**

New York City is home to roughly 45,000 Holocaust survivors—almost half of the total population of survivors living in the United States. Approximately 40% of Holocaust survivors live at or below 150% of the national poverty line; many live month to month on meager assistance that does not cover the cost of food, heat, rent and medical expenses. Furthermore, as survivors grow older they require enhanced health and mental health care as the trials of their younger years show dire effects with age. It is crucial to provide specialized care and support services to this vulnerable population and enhance their quality life to allow them to live out their remaining years with dignity.

UJA applauds the leadership of the City Council in its continued investment in New York City's Holocaust survivors. Many of our nonprofit partners have received initiative grants to provide specialized programming and comprehensive services for Holocaust survivors. The estimated average annual cost of care for one Holocaust survivor is \$3,000, excluding home care costs. Grants funded through the Elie Weisel Holocaust Survivor Initiative provide case management services, personal care and assistance, legal services and entitlement counseling, transportation services, end of life care and specialized caregiver supports. As we continue to care for this last generation of survivors, we ask that the City Council continue its compassionate support of this vulnerable population.

**UJA respectfully requests that the City Council increase funding for the Elie Wiesel Holocaust Survivor Initiative and invest \$3.5 million in FY 2019.**



## **5. Salary Parity Across DFTA Contracts**

UJA appreciates the efforts of the City Council and Chairperson Chin for securing significant funding increases for DFTA and the human services sector in FY 18. Part of this funding is allocated to support the “model budget” process to right-size personnel and programming in DFTA senior center contracts.

With attention being giving to senior center staffing, UJA requests that the City Council further advocate to implement increases in salaries for all DFTA funded contracts. Salaries at NORC programs, caregiver programs, and other DFTA contracts remain significantly underfunded. Providers are left wrestle with the inequity of paying different salaries to staff doing comparable work, and the inevitable recruitment, turnover, and morale problems that will lower service access and quality for New York’s seniors. For some of our larger nonprofit partners, who provide services to seniors citywide, this cost has amounted to millions of dollars. Competitive salaries are needed in order to retain qualified staff, avoid turnover, and provide uninterrupted service to clients. With the aging population growing at an incredible rate, the City should recognize the ever growing need to attract skilled individuals, interested in the geriatric field.

## **CONCLUSION**

UJA-Federation of New York respectfully urges your consideration and support of these vital programs, services and resources that assist our City’s most vulnerable and neediest individuals and the organizations that serve them.

**Testimony by Dr. Cynthia Maurer, Executive Director  
Visiting Neighbors, Inc.  
to New York City Council Hearings on Aging  
March 23, 2018**

My name is Dr. Cynthia Maurer. I am Executive Director of Visiting Neighbors.

Thank you for this opportunity to give voice to the needs of our City's forgotten seniors...the oldest old, the homebound and frail elderly, the seniors who spend their days alone, hidden behind the locked doors of their apartments, unable to attend senior centers, so isolated that they have no incentive to eat their meals or to see their doctors. Many have outlived their friends and families. They may be alone, but we must not forget them!

For the past 46 years, Visiting Neighbors has earned an outstanding reputation as a trusted lifeline for seniors and caregivers. We serve more than 1,000 seniors each year in lower Manhattan and parts of Queens. We provide vital support services to seniors and their caregivers who have nowhere else to turn. The average age of the seniors we serve is 89, and we now have a dozen seniors who are age 100+. Our oldest client is 106 and with our help, he is still able to enjoy the comfort of living in his own cherished apartment. Yes, our seniors are frightened and vulnerable, but they are proud and resolutely determined to remain independent. They often do not know that help is available, or they are afraid to ask for help because they fear that asking for help may be the first step towards a nursing home. We reassure seniors, helping them keep their fears and anxieties in perspective.

Most of the seniors we serve are unable to leave their apartments without someone to help them. Too often, their radios and televisions are their only companions. It becomes too easy for society to forget about them because we do not see them on a daily basis. The seniors look forward to visits and calls from their Visiting Neighbors' volunteers as the only respite in their lonely lives. As 93-year old Rose recently told us, "Visiting Neighbors is the only family I've got."

Our seniors are struggling to survive on limited fixed incomes, and often have to choose between paying for food or medication. They are slightly above eligibility levels for Medicaid-funded services, but cannot afford to pay privately for care on a regular basis. Without someone to help them with errands and shopping, or to escort them to medical appointments, they may be forced prematurely into nursing homes, or they may neglect vital care. Their lives may end in tragedy that could have been prevented.

Visiting Neighbors reaches out to keep these seniors safe, connected with their community, providing companionship and encouragement, health advocacy, helping them with shopping and errands and escorting them to medical and other important appointments so they can safely navigate our City's treacherous streets. The hazards they face when they leave their apartments are familiar to all of us, but can be life-threatening to a frail senior whose vision may be impaired or who may be unsteady on their feet – traffic that comes barreling down on pedestrians the second the light changes, potholes, cracks in the sidewalk, bicycles and oblivious pedestrians engulfed in their cell phones. Volunteers provide an arm to hold onto and the confidence that

enables seniors cross our City's streets more safely. As the number of our oldest old grows dramatically, we are concerned that the City has turned its back on their needs. Over the past decade, there has been nearly a 26 percent increase in our City's oldest population, yet DFTA seems to be more focused on providing services that are valuable to younger seniors who can go to senior centers, for example, but which virtually exclude our City's most isolated, lonely and vulnerable. We must not overlook the oldest old!

Cost-effective supportive services for seniors living at home help reduce the number of seniors who are forced into nursing homes. The current cost of a nursing home in New York City is estimated to be \$131,484 for one senior for one year, according to The New York State Partnership for Long-Term Care. As you know, most of this cost is paid for by Medicaid and other government programs. The government can significantly reduce costs by funding cost-effective preventive supportive services like Visiting Neighbors to help maintain seniors in their own cherished homes. It just makes sense!

Our volunteer visitors also serve as extra eyes and ears for our professional staff, alerting us immediately of any change in a senior's mental, physical or emotional condition so they can get the attention they need promptly, before irreversible damage is done. Prevention is key, as well as addressing problems as they arise, before they have disastrous consequences.

We have found that many of our seniors avoid going to the doctor when they are sick because they are afraid that they will be sent to the hospital and that once they are hospitalized, they will never return home. Our Health Advocate encourages the seniors to see their doctors regularly, to follow their doctors' advice, to eat right, to not ignore symptoms, and to ask for help when they need it. He checks their apartments to remove safety hazards and helps them prepare an Emergency Readiness magnet with their doctors' names, prescriptions and other drugs they take, a list of their medical conditions and emergency contact names. If they are hospitalized, he visits them so the hospital staff knows that someone is watching. When it is time for them to be discharged, he makes sure that proper supports are in place. Every senior needs an advocate, and unfortunately, many seniors have no family or friends who can fill that role.

We also focus on increasing seniors' and caregivers' confidence by providing assistance with the common problems that many elderly face. Few seniors are prepared to understand the choices they must make, whether it involves choosing a Medicare plan, a service provider, or executing advanced directives. They know they can ask a question, and Visiting Neighbors will point them in the right direction to answer their concerns.

Based on Visiting Neighbors' 46 years of serving this population, we look forward to helping you meet their growing needs. There is much we can do, but we need the Council and DFTA to commit the resources it takes. Programs like Visiting Neighbors are compassionate, extremely cost-effective, and they work! I hope that you will include these seniors and organizations like Visiting Neighbors in your plans and commit the needed resources.

We are dependent on the support of the Council. Discretionary funds have helped us keep our doors open so we can keep our seniors safe and at home. It is inhumane to turn your backs on

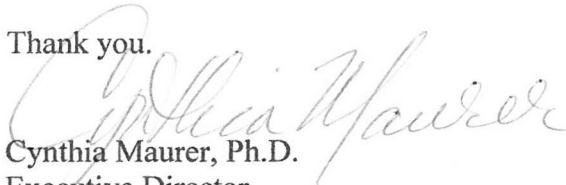
the needs of our vulnerable seniors who have done so much for our City. I am here today to urge you to remember the needs of our City's oldest old. They must not be forgotten!

We urge you to continue to provide funding and support for programs like Visiting Neighbors. Agencies like us must receive the support we need so we can help our City's elderly remain safe, healthy and confident with the knowledge that they have not been cast aside by society.

Our programs are smart and a sound investment. They are humane, kind, caring and cost-effective. As more of us live longer, they will enable us to remain connected with the communities and individuals we value. We will all benefit from knowing that seniors can get the care they need and deserve.

We are appreciative of the support of the Council. We are counting on you so we can continue to help our City's seniors who have nowhere else to turn.

Thank you.



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**Testimony of Cathy Kim  
Program Director, Most Vulnerable Populations  
Enterprise Community Partners, Inc.**

**To the New York City Council  
Preliminary Budget Hearing- Aging**

**March 23, 2018**

On behalf of Enterprise Community Partners, I would like to thank Chair Chin and the City Council Committee on Aging for convening today's preliminary budget hearing. This hearing provides an opportunity to discuss city priorities reflected in this year's Aging Committee budget.

Enterprise is a national non-profit organization that provides capital for affordable housing and community development, advocates for policies that advance these goals, and supports local groups working on these issues. Since our New York office opened in 1987, we have committed nearly \$3.4 billion in equity, loans, and grants to help create or preserve over 60,000 affordable homes for nearly 160,000 residents in the region.

**SCRIE**

I would like to start off by thanking the city for their recent outreach to enroll more seniors in the Senior Citizen Rent Increase Exemption (SCRIE) program. In 2016 we released the report "Reducing Rent Burden for Elderly New Yorkers: Improving the Senior Citizen Rent Increase Exemption Program" calling on the city to expand outreach to grow the number of seniors enrolled in the underutilized program. We are so pleased to see that nearly 10,000 more seniors have enrolled in the last two years. We encourage the city to continue their outreach to ensure that more eligible seniors are enrolled in this critical program.

Regarding SCRIE, I would be remiss if I did not mention rent burden. Right now, more than a third of SCRIE participants pay 70 percent or more of their income on rent. Among those who are severely rent burdened, their average remaining income after rent is \$183 per month. The SCRIE & DRIE Rollback Act (S5881B/A8424), which would freeze rents at one-third of income for eligible households, would provide much needed benefits to seniors.

## **Seniors First and Age-Friendly Design**

We were particularly pleased to see the launch of HPD's new Seniors First program. We believe that this program, modeled in part, off Enterprise's Healthy Aging in Affordable Housing Demonstration, is an important step in protecting our city's growing senior population. Since its launch in 2017, Enterprise's Healthy Aging Demonstration has shown that age appropriate modifications improve the daily lives of seniors. Specifically,

- 75% of participants who were connected to an occupational therapist during the demonstration reported that they are now able to perform activities of daily living independently or with greater ease.
- 100% of participants who received home modifications reported that they can perform more activities independently in their homes than they could before their participation in the demonstration.
- 100% of participants who received home modifications reported that they feel "safer" or "a lot safer" in their homes.

We look forward to working with the city as it rolls out Seniors First. Other resources that may be helpful as the city rolls it out include Enterprise's [Aging in Place Design Guidelines](#), the city's own [Aging in Place Guide for Building Owners](#) and the State's [Access to Home](#) and [RESTORE](#) programs.

Additionally, the city continuing to ensure that landlords are adhering to their requirements to make reasonable accommodations for persons with disabilities in housing, including structural such as ramps and grab bars in bathrooms, will help ensure seniors are able to age in place.

## **Senior Services**

Affordable, age-friendly senior housing must be paired with services. Improving senior residents' access to health care services has been proven to reduce hospital admissions and Medicaid costs. A study conducted by Enterprise of seniors in Oregon showed a 16% decrease in Medicaid expenditures just one year after moving into affordable housing with services.

Modeled after the successful HUD 202 program, resident service coordinators allow seniors to remain in their homes, connect with their community and avoid costly and undesirable outcomes like hospitalization or premature nursing home stays.



At the state level, Enterprise is advocating for the Affordable Independent Senior Housing Assistance Program, A.10017 (Cymbrowitz)/S.7866 (Little). The program would enable a \$10 million state investment in resident service advisors over five years that would serve as a pilot to be studied for impact. This pilot would be a cost-effective way to help seniors statewide age in place by extending independence and improving quality of life.

All of these programs not only meet a critical and growing need, they are smart investments for the city and state. Thank you and we look forward to working with the Council to ensure that New Yorkers of all ages have access to a safe, affordable home.



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**TESTIMONY**

**COUNCIL COMMITTEE ON AGING**

**HEARING**

**MARCH 23, 2018**

**10:00 A.M.**

**PAOLA MICELI, PRESIDENT/CEO**

**Services Now for Adult Persons, Inc.**

**(SNAP)**

**80-45 Winchester Boulevard**

**Building # 4 CBU # 29**

**Queens Village, N.Y. 11427**

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DISTINGUISHED MEMBERS OF THE COUNCIL COMMITTEE ON AGING MY NAME IS PAOLA MICELI, THE CHIEF EXECUTIVE OFFICER FOR SERVICES NOW FOR ADULT PERSONS, INC (SNAP). SNAP, IS A MULTI-SERVICE SOCIAL SERVICES AGENCY DEDICATED TO ADDRESSING THE NEEDS OF THE ETHNICALLY AND ECONOMICALLY DIVERSE SENIOR POPULATION HERE IN QUEENS. ON A DAILY BASIS SNAP HAS THE OPPORTUNITY TO WITNESS FIRST HAND HOW DFTA FUNDED SENIOR SERVICES ARE CRUCIAL TO HELPING OLDER ADULTS EXPERIENCE A SAFE AND ENJOYABLE QUALITY OF LIFE. BY OFFERING VARIOUS PROGRAMS AND SERVICES FOR BOTH INDEPENDENT AND HOMEBOUND SENIORS, SNAP IS ABLE TO MAKE A SIGNIFICANT DIFFERENCE IN THE LIVES OF OLDER ADULTS IN QUEENS. INCREASING SOCIALIZATION THROUGH SENIOR CENTER ACTIVITIES AND EVENTS IS A PARTICULARLY VALUABLE SERVICE AS SENIORS OFTEN FIND THEY ARE ALONE AND ISOLATED. PROVIDING SENIORS WITH A HOT CONGREGATE MEAL THAT THEY CAN EAT WITH OTHERS IS INVALUABLE TO PROMOTING CONNECTIONS AND FRIENDSHIP WHICH IS CRUCIAL TO DIMINSHING ISOLATION. SENIOR CENTER

PROGRAMS OFTEN RUN WITH LIMITED STAFF DUE TO BUDGET RESTRAINTS. THE BUDGET FOR EXAMPLE HAS NOT INCLUDED INCREASES FOR KITCHEN STAFF OR MEALS ON WHEELS DRIVERS/DELIVERERS. HIRING EFFICIENT KITCHEN AND HOME DELIVERED MEALS STAFF DUE TO LIMITED SALARIES BECOMES MORE DIFFICULT. THE BUDGET FOR FOOD SERVICES WHICH INCLUDES RAW FOOD AND DISPOSABLE EXPENSES ALSO DOES NOT REFLECT ACTUAL COSTS FOR THESE ITEMS. PROVIDING HEALTHY FOOD OPTIONS BECOMES MORE CHALLENGING AS EXPENSES AND COSTS INCREASE.

FOR THOSE SENIORS WHO FIND THEMSELVES UNABLE TO GET TO THE SENIOR CENTER DUE TO CHRONIC ILLNESS AND FRAILITY CASE MANAGEMENT AND EISEP/HOME CARE SERVICES BECOME VITAL TO REMAINING SAFE AT HOME AND IN THE COMMUNITY. SNAP WISHES TO EXPRESS OUR GRATITUDE TO THE MAYOR AND THE CITY COUNCIL FOR INCREASING AND BASELINING CASE MANAGEMENT AND EISEP FUNDING. THIS INCREASE AND BASELINING OF FUNDING HAS NOT ONLY HELPED TO LOWER WAIT TIME FOR THESE SERVICES TO BEGIN BUT THEY ALLOW THE STAFF THE NECESSARY TIME TO WORK WITH SENIORS ON

EFFECTIVE CARE PLANS RATHER THAN SPENDING TIME ADVOCATING FOR NEEDED FUNDING YEAR AFTER YEAR. THE NEED FOR THE INCREASED AND BASELINED FUNDING FOR SENIOR SERVICES HAS BEEN EVIDENT AS INDIVIDUALS ARE LIVING LONGER AND ADVANCED AGED SENIORS ARE AMONGST THE FASTEST GROWING OF THE ELDERLY POPULATION. THE NEED FOR EISEP/HOME CARE IS PARTICULARLY SIGNIFICANT FOR THESE OLDER AND FRAILER SENIORS.

AS THE AGING POPULATION INCREASES THE NEED FOR FAMILY MEMBERS TO PROVIDE CARE FOR LOVED ONES INCREASES AS WELL. SNAP PROVIDES INFORMAL CAREGIVERS WITH SUPPORT THROUGH OUR CAREGIVER PROGRAM WHICH HAS BEEN OPERATING SINCE 2003. CAREGIVERS FEEL OVERWHELMED TRYING TO JUGGLE FAMILY LIFE, WORK AND CAREGIVING RESPONSIBILITIES. ELDERLY SPOUSES ALSO STRUGGLE TO CARE FOR ONE ANOTHER AND NEED CAREGIVER SUPPORT. SNAP HAS BEEN ABLE TO PROVIDE INDIVIDUAL COUNSELING, SUPPORT GROUP AND EDUCATIONAL SERVICES TO CAREGIVERS WHICH HELPS TO REDUCE STRESS. RESPITE AND SUPPLEMENTAL SERVICES ALLOWS CAREGIVERS AN OPPORTUNITY TO TAKE A

BREAK FROM THEIR CAREGIVING RESPONSIBILITIES KNOWING THEY CAN GET A PAID HOME ATTENDANT TO WATCH THEIR LOVED ONE WHILE THEY STEP AWAY. MANY CAREGIVERS FEEL OVERRWHELMED IN THIS ROLE AND RESPITE SERVICES HELP TO REDUCE BURN OUT AND ALLEVIATE STRESS. CAREGIVERS ALSO FIND FINANCIAL MATTERS CHALLENGING AS THEY OFTEN BALANCE THEIR OWN EXPENSES WITH HAVING TO SUPPLEMENT THEIR LOVED ONES' EXPENSES AS WELL. PURCHASING MEDICAL SUPPLIES AND OTHER ITEMS CAN BECOME COSTLY. THE CAREGIVER PROGRAM OF SNAP IS ABLE TO PROVIDE FINANCIAL REIMBURSEMENT TO CAREGIVERS WHICH ALSO HELPS TO ALLEVIATE THE FINANCIAL CONCERNS THEY FACE. THE CAREGIVER PROGRAM OF SNAP APPRECIATES THE ADDITIONAL BASELINED FUNDING FOR CAREGIVER PROGRAM SERVICES. THESE INCREASES WILL MAKE A SIGNFICANT DIFFERENCE IN SUPPORTING CAREGIVERS AND WILL PREVENT COSTLY INSTITUTIONALIZATION OF CARE RECEIVERS. ONE OF THE MOST CONCERNING ISSUES AT THIS TIME REGARDING THE CAREGIVER BUDGET IS THE LACK OF FUNDING FOR INCREASED SALARIES FOR STAFF. SNAP'S CAREGIVER STAFF HAVE BEEN WORKING IN THE

PROGRAM FOR MANY YEARS, SOME SINCE THE INCEPTION OF SERVICES. THESE EMPLOYEES HAVE NOT RECEIVED INCREASES BUT CONTINUE TO PROVIDE INVALUABLE SERVICES. THEIR PROFESSIONALISM AND MUCH NEEDED EXPERIENCE HAVE CREATED AN EXCELLENT PROGRAM WHICH MEETS THE NEEDS OF MANY. AS WE DRIVE HOME THE NEED TO SUPPORT CAREGIVERS, WE MUST REMEMBER NOT TO NEGLECT THE VERY INDIVIDUALS THAT PROVIDE THAT SUPPORT TO THEM.

I APPRECIATE HAVING THE OPPORTUNITY TO WRITE TO ALL OF YOU TODAY AND KNOW THAT YOU WILL CONTINUE TO WORK HARD ON BEHALF OF SENIORS AND CAREGIVERS THROUGHOUT QUEENS.



Testimony Presented by Karen Zhou  
Executive Director, Homecrest Community Services  
Margaret Chin, Chair  
Corey Johnson, Speaker  
Preliminary DFTA Budget Hearing  
March 23, 2018

Good afternoon.

My name is Karen Zhou and I'm representing Homecrest Community Services (HCS), a multi-social service agency serving the Asian immigrant community in Brooklyn.

HCS started 21 years ago to better serve the rapidly growing and greatly underserve Asian immigrant population in Brooklyn when there were few culturally competent resources available for this community in Brooklyn. Today according to the most recent US Census data, the Asian population in NYC have reached 1.23 million in 2015, accounting for nearly 15% of the city's population. Brooklyn has the fastest growing Asian population of the five boroughs with a change of 43.9% according to NYC Dept. of Planning research from 2008-2012.

With this rapid growth, the Chinese remains the largest Asian immigrant group in the NYC, making up about 46% of all Asians. Chinese immigrant seniors in particular represents a very vulnerable segment of this population that desperately need local access to social services. This segment experience a much higher rate of poverty due to many Asian immigrants working in low paying jobs such as garment factory, hand laundry and restaurant workers to make ends meet. Compounding the problem is that few Chinese immigrant seniors are English proficient. Many of these Chinese immigrant seniors have limited education since the means for survival to support their families and help the next generation often outweigh their own education attainment. Also, many older generation Chinese immigrant women born in rural villages in China during Communist times were not given education due to gender inequalities which favored boys over girls. It meant that many were left with high illiteracy both in Chinese and English. This group highly needs assistance with basic letter translation, case assistance, counseling, mental health and social service support.

Because of language and cultural barriers, HCS was formed to fill a gap in these services by providing direct social services to meet the needs of the Brooklyn Asian community. Currently HCS operates two community senior centers in Brooklyn. Of the two centers, only HCS' Bensonhurst neighborhood senior center have a multi-year operational funding to operate a senior center from DFTA. HCS' Sheepshead Bay senior center, the older of the two centers does not have this type of funding and is subsisting on year to year in-kind donations, Council and private support. Because of our long track record, we have become a trusted anchor in the community and the demand for our services continues to grow as baby boomers retire at a rapid pace.

It is hard for an organization like us to turn anyone away and so we are thankful to our local elected officials for their compassion in understanding the hardship of our circumstance and for providing local funding support for our senior programs. We are also thankful to the Council for continuing to support the "Senior Centers for Immigrant Populations Initiative" and other essential senior related initiatives which senior centers like us desperately need in order to support the abundance of programs and services we offer to the community for free.

Senior centers are essential for every community since it is inevitable that we will all age and eventually become a senior one day. In today modern times, more seniors need special assistance than before as they are living long past their retirement age and they need senior centers to help reduce social isolation and in some instances provide emotional and mental support. Many like HCS seniors live on fixed income, worry about rent and food insecurities, and are living alone. Their best connection to society is through a senior center like HCS where we have specialized programs that are linguistically and culturally competent for Asian immigrant seniors but are non-denominational and open to all seniors 60 years or older, regardless of race, religion, ethnicity or other characteristic.

In short, we know DFTA is cognizant that in order for senior centers to adequately serve the communities it represents, the services offered at each senior centers must reflect the changing demographics of the community. The demographic shifts in Brooklyn have shown a spike over the last two decades of an ever increasing Asian population in both Sheepshead Bay and Bensonhurst, both areas where HCS operates. These newer Chinatowns are bringing with it more Asian immigrants that need help. We hope DFTA will consider funding HCS Sheepshead Bay senior center in addressing the demographic shifts in its next wave of funding. We have been doing the work of serving the underserve Asian immigrant community for so long and ask for equity to bring up this center which does not receive DFTA funding.

I thank you in kind for your consideration and time!

---

Homecrest Community Services' Community/Senior Center and Main Office: 1413 Avenue T, Brooklyn, NY 11229

Mailing Address: PO Box 290-728, Brooklyn, NY 11229-0728

Tel: 718-376-4036

Fax: 718-376-4124

Bensonhurst Neighborhood Senior Center (Funded by the Department for the Aging)

7907 New Utrecht Avenue, Brooklyn, NY 11214

Tel: 718-621-7960

Fax: 718-621-7961

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: JoAnn You

Address: \_\_\_\_\_

I represent: Asian American Federation

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Molly Krakowski

Address: JASA

I represent: \_\_\_\_\_

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

3/23/18

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Ahsia Badi

Address: \_\_\_\_\_

I represent: New York Academy of Medicine

Address: \_\_\_\_\_

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



**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3-23-18

(PLEASE PRINT)

Name: Vickie Owen

Address: 40-51 Mosholu Pk.

I represent: Council Andy King

Address: 12 DIC

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Jeanelle Estima

Address: 40 Broad St NYC

I represent: FPWA

Address: same

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23

(PLEASE PRINT)

Name: Liza Schwartzwald / Kevin Douglas

Address: \_\_\_\_\_

I represent: United Neighborhood Houses

Address: 45 Broadway

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

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Andrea Cianfrani

Address: LIVE ON NY

I represent: \_\_\_\_\_

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Rachel McCullough / Bobbie Sackman

Address: \_\_\_\_\_

I represent: NY Caring Majority Coalition

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Katie Foley

Address: \_\_\_\_\_

I represent: Selfhelp Community Services

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Rachel Sherron

Address: City meals on

I represent: wheels

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: 3.23.18

(PLEASE PRINT)

Name: Sasha Fishman

Address: Associate Commissioner, Budget + Fiscal Operations

I represent: DFA

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: 3.23.18

(PLEASE PRINT)

Name: Donna Conrado

Address: Commissioner

I represent: DFA

Address: \_\_\_\_\_

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

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3.23.18

(PLEASE PRINT)

Name: Fran Winter

Address: Deputy Commissioner, Programs

I represent: DFA

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: John Reeves

Address: 100 Belmont PL, Apt 6C

I represent: STATEN ISLAND  
AARP

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Dr Cynthia Maurer

Address: 3 Washington Square Village

I represent: Visiting Neighbor, South of NYC 10012

Address: \_\_\_\_\_

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

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Lakshman Kalasapudi

Address: 178-38 Noyah Ter Ste 2C Jamaica NY

I represent: India Home Inc

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Miranda Hoffner, Lincoln Center

Address: 165 West 65th St. New York, NY

I represent: Lincoln Center for the Performing

Address: ARTS

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: \_\_\_\_\_

(PLEASE PRINT)

Name: Mohammad Razi

Address: 1081 CONY Island Ave

I represent: COPO SENIOR CENTER

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Alan Podharzer

Address: 601-A Surf Ave Bklyn, NY 11224

I represent: Brightwater Tower Tenants Association

Address: 601 A Surf Ave Bklyn NY 11224

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Ariel Savransky

Address: \_\_\_\_\_

I represent: UJA-Federation of New York

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_  
 in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Zakia Haywood

Address: 156 W. 56<sup>th</sup> St New York, NY

I represent: New York Road Runners

Address: same as above

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Barbara Brown

Address: 3626 Kings Highway Apt 32 Brooklyn, NY

I represent: New York Road Runners

Address: 156 W. 56<sup>th</sup> St New York, NY

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Pakhi Kane

Address: \_\_\_\_\_

I represent: Stanley M. Isaacs Neighborhood Center

Address: \_\_\_\_\_

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Tanya Krupat

Address: \_\_\_\_\_

I represent: the Osborne Association

Address: \_\_\_\_\_

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

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

*City Budget*

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: Chris Widelo

Address: 750 Third Avenue 3rd floor

I represent: AARP NY

Address: Same

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3-23-18

(PLEASE PRINT)

Name: Bonnie Lumagui

Address: 465 Grand St 4th Fl NYC 10002

I represent: Educational Alliance Coop Village NoEC

Address: 465 Grand St. 4th Fl NYC 10002

**THE COUNCIL  
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. \_\_\_\_\_ Res. No. \_\_\_\_\_

in favor  in opposition

Date: 3/23/18

(PLEASE PRINT)

Name: SARIE TEICHMAN

Address: 530 D GRAND ST 11-C

I represent: SIRACH CENTER

Address: 331 EAST 12th