



TESTIMONY

Presented by

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on

**Oversight:
The Needs of Immigrant Older Adults in NYC**

before the

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

on

**Tuesday, February 27, 2024
10:00 A.M.**

Introduction

Good morning, Chairpersons Hudson and Aviles, and members of the Committees on Aging and Immigration. I am Anya Herasme, Associate Commissioner for the Bureau of Community Service for the New York City Department for the Aging (NYC Aging). Joining me here today is Penney Vachirapapun, our General Counsel at NYC Aging. Additionally, we are pleased to be joined today by Miosotis Munoz, the Deputy Commissioner for External Affairs, and Miguel Santana, Chief of Staff from the Mayor's Office of Immigrant Affairs (MOIA). I appreciate the opportunity to testify before you today and discuss this incredibly important subject. I am happy to share some of the current highlights from NYC Aging and our work with immigrant populations and discuss the ways that as an agency, we achieve cultural competency in all areas.

Older Adult Immigrant Population

NYC Aging is tasked with serving New York City residents over the age of 60. Our goal is to ensure that any older adult can walk into any Older Adult Center (OAC), call our in-house helpline Aging Connect, be referred to a program they may qualify for, or receive some service to assist their lives and combat social isolation regardless of their background, immigration status or preferred language. There are 1,775,783 older adults living in New York City, meaning slightly more than one in five New York City residents is over the age of 60. Overall, New York City's aging population is growing and will encompass more than 40% of all New York State residents in the future, we need to focus on closing addressing populations in need and closing funding gaps with the state. According to the American Community Survey, in 2022, 3,065,136 New Yorkers were foreign born—or around 36.7% of the city's population. For those over the age of 60, there are 1,023,698 who are foreign born or close to 58% of all older adults. This is a larger fraction than is seen in the under 60 adult population and greater than all of New York State's older adult population. Older adults in New York City are less likely to be white, more likely to speak a language at home other than English, more likely to live alone, be considered "frail," and receive SNAP benefits when compared to the overall population of older adults in the United States.

In short, we know that older New Yorkers are more likely than their counterparts in other cities in the United States to live alone, below the poverty level, experience some kind of language barrier, and require some kind of public assistance. The need to ensure that aging services meet the wide range of needs for older adults is a paramount goal for New York City and this Administration. After all, any older adult, of any background, with any citizenship status is able to access meals at an OAC or other programs provided by NYC Aging as long as they are 60 or older, and in some cases 55 or older in particular workforce programs.

Because our goal is to reach every older New Yorker we have been following the current migrant crisis situation in New York City as we collectively address the many asylum seekers crossing our southern border. It is our understanding that a majority of asylum seekers are not older adults and those who arrive in New York and are over 60, typically are quickly connected with family and are not navigating processes on their own. Nonetheless, we continue to work with our partners at NYCEM, DOHMH, and H+H as they navigate this current crisis.

NYC Aging Services

NYC Aging offers a wide range of services for all adults over the 60 regardless of immigration status. Our case management (CMA), Home Delivered Meals (HDM), Caregiving, Elder Abuse, Friendly Visiting, Legal Assistance, Transportation, Geriatric Mental Health (DGMH), and of course our OACs, do not deny services based on residency or immigration status. Furthermore, we work continually to be inclusive of an individual's background, language needs, and culture because that is how we build a more age inclusive city as New York City's aging population grows in the future. NYC Aging services follow guidance from Local Law 30 of 2017 regarding language access and we provide translation services through Language Line for Aging Connect as

well as a host of other programs. This year, as part of our Annual Plan Summary hearings which occur yearly, and are the public's opportunity to weigh in on NYC Aging services, we translated the summary report into Spanish and Mandarin Chinese. This is not a requirement of the report which is determined by the State, however, we are committed to ensuring that as many older adults as possible can give comment and share their thoughts the services we provide.

Additionally, in conjunction with Mayor Adams, we have hosted a series of nine Older Adult Town Halls at OACs throughout the five boroughs beginning last August. Many of these have been bilingual with translation in communities where older adults may not be English proficient, more comfortable speaking a different language, or come from an immigrant background with particular needs and concerns. These events have allowed us to expand our reach into more immigrant communities and really bring together partner agencies to better serve older New Yorkers. At our first town hall in the Bronx at BronxWorks Morris Heights, 75% of the older adults in attendance preferred to speak Spanish, so the table discussions with older adults as well as the larger town hall portion were conducted both in English and Spanish. At this particular town hall, there were questions about immigrant services and benefits which we were able to answer or direct people to the appropriate resources.

Cultural Competency in All Areas

A paramount goal at NYC Aging is to strive for cultural competencies in all our services and ensure that older adults—regardless of their background—can connect with our programs in a way that makes them feel most comfortable. In particular we are proud of where our meals and OAC programming has come when considering the cultural needs of a particular neighborhood. Our own staff are assigned based on the culturally competent backgrounds they bring to the table when those considerations can be made. This helps to ensure that program evaluation is executed with an understanding of the unique cultures in a community they are serving. In early 2023, we worked with Council to develop what ultimately became Local Law 19, which requires OACs to identify the languages spoken in the surrounding communities and tailor programming to those relevant languages or cultures. Many of our programs were already doing this and we have worked to include more culturally competent language into subsequent Requests for Proposals (RFPs) to further ensure that whatever an older adult's background, our programs can serve their specific needs.

Meal provision is a large portion of the work that NYC Aging undertakes every day. We are proud of the great work our contracted providers, whose mission it is to service the unique and nuanced needs of the older adults in the specific communities they serve. NYC Aging meals are offered in a wide range of options, including halal, kosher and pan-Asian, which seek to address the cultural and dietary needs of clients. These meals are available at the OACs, dependent on what their immediate community's cultural needs. The HDM program providers are required per their contracts to serve culturally relevant cuisines to clients receiving those meals. Different community boards throughout the city make up various catchment areas for HDM providers and are required to provide meals for those cuisines. This includes Kosher, Halal, Latin, Chinese, Caribbean, Russian, and other cuisine types. The populations that make up those communities are considered when cuisine types are determined.

The CMA program also requires cultural competency and is part of the standards required for employment in those programs. CMA providers are going into people's homes and making specific evaluations about their lives and abilities with the ultimate goal of meeting the client where they are. In order to do that, they must understand the specific cultural considerations which may factor into their current situation. Because CMA is the first step in receiving meals through an HDM provider, the case manager should understand that individuals cultural background to better provide the meals which are contractually required as an HDM provider. While we strive to further include culturally appropriate considerations into other programs, we recognize the immediate importance of meals and OAC programming and have of course prioritized those areas.

Additionally, the Geriatric Mental Health (DGMH) program which operates within our OAC network has expanded in the past two years to include 88 sites across the city, with a high priority put on neighborhoods which are in need of these services. This includes communities which have been historically underfunded or need additional investment to meet growing needs. Our DGMH sites were identified with these needs in mind surrounding mental health and access which communities, like newly arrived immigrants, need in order to live successful and full lives. Center staff and DGMH providers in these neighborhoods reflect the overall needs of communities which surround those locations and may be multicultural, bilingual, and able to understand those unique experiences. DGMH clinicians speak English, Spanish, Mandarin, Cantonese, Russian, Ukrainian, and Italian. Beyond meals and languages spoken at centers, the DGMH program offers a glimpse into ways in which NYC Aging is serving immigrant older adults.

Preconsidered Introduction

I know that today's hearing is also discussing the preconsidered introduction to direct NYC Aging to make information available to older adults about the NYC Care program in our centers or program offices and the NYC Aging website. Our goal remains to ensure that all older adults, regardless of language needs or cultural background can access the information they need to address critical issues in their lives and successfully age in place within their communities. As we continue to review this bill, we look forward to discussing this legislation with Council in the future in our shared goal of sharing information and working with partner agencies.

Conclusion

These are just some of the ways that NYC Aging is working to serve the needs of New York City's older adult population who are immigrants to this country. We are pleased to provide culturally competent programs and resources for this vulnerable population and look forward to continuing to adapt to the needs of this community in the future. I am grateful to Chair Hudson and the Aging Committee for your continued advocacy and partnership in support for this important community of older New Yorkers.

I acknowledge that while this is a hearing about the needs of immigrant older adults, and the population of immigrant older adults is diverse, we are working through a migrant crisis right now in New York City. I look forward to sharing information on what NYC Aging does to serve immigrant population, however, I would like to acknowledge that our partners at, the Office of Asylum Seeker Operations (OASO) New York City Emergency Management (NYCEM), Department of Health and Mental Hygiene (DOHMH), and Health and Hospitals (H+H) are more directly involved in the day-to-day operations of processing the many thousands of asylum seekers crossing the southern border and arriving in New York City. I look forward to answering your questions. Thank you.



Asian American Federation

Testimony to the New York City Council Committee on Aging and Immigration

February 27th, 2024

Written Testimony

I want to thank Chair Hudson, Chair Avilés, and the Council Members of the Aging and Immigration Committee for holding this hearing and giving the Asian American Federation (AAF) the opportunity to testify on the needs of our older adult community. I am Lisha Luo Cai, Advocacy Coordinator at AAF, where we proudly represent the collective voice of more than 70 member nonprofits serving 1.5 million Asian New Yorkers.

Going into FY 2025, Asian older adults continue to endure the impacts of teetering economic conditions and continued anti-Asian hate. Making up 13.7% of New York City's senior population, Asian older adults constitute as the fastest-growing older adult community citywide, with 23.2% of said population living in poverty. Of our older adults in poverty, 25.2% live alone and 83.5% possess limited English proficiency (LEP). Our Seniors Working Group (SWG), the first and only Asian older-adult-focused advocacy coalition in New York City and State, is composed of 12 Asian-led, Asian older-adult-serving member organizations. Since its inception, the SWG, under the guidance of AAF, has become an authoritative voice for policymakers to reference and consult with about addressing the concerns of Asian older adults, from food delivery, to anti-Asian hate, to language accessibility. This group has served more than 144,459 Asian older adults spanning numerous ethnic and linguistic communities in Q1 of 2023 alone. It is critical to note that 37,933 of these older adults were also low-income.

Anti-Asian violence uniquely targets Asian older adults. The COVID-19 pandemic and its related crisis of anti-Asian hate have had a disproportionate impact on the Asian older adult population in New York City, with multiple of the most high-profile anti-Asian attacks recorded being against older adults of our community. Given this reality, our older adults require support that fully addresses their physical, emotional, and financial needs. Moreover, as our partners in the Asian community can attest, these dual crises are fundamentally changing the behavior of clients as they seek out older adult services; thus, the City must adapt its policies in order to adequately support our older adult service providers.

Food insecurity is among the top concerns of Asian older adults within our Seniors Working Group, in addition to anti-Asian violence, functioning older adult centers, and mental health, all of which are interconnected. Culturally competent meal programs have become our older adults' lifeline, especially amid an era of increased anti-Asian violence that have left older adults understandably terrified to leave their homes. Such conditions make it even more critical that our older adults are receiving as much support as they can every time they interact with one of their trusted CBOs. The meal programs our CBOs offer not only give older adults an opportunity to eat together, but also to participate in social activities, receive assistance applying for services, and access health and mental health care.

A lack of cultural sensitivity in meal programs, however, has become an issue for many older adult service providers according to members of our SWG. The arbitrary and large inaccurate standards for 'culturally-sensitive meals' set by DFTA have left many providers restricted with the meal options they can offer Asian older adult clients. For example, DFTA's criteria that claims 'tofu and soy sauce' are ingredients required for Asian food is not only culturally incorrect, but also extremely limiting for our already understaffed, overworked providers who are seeking to address problems of health, poverty, and



Asian American Federation

food insecurity. Asian older adults are not a monolith - they are incredibly diverse and a one-size fits all model for DFTA's standard for culturally sensitive meals only serves to further exacerbate existing issues our older adults and providers face.

With the newly redrawn district lines, Asian New Yorkers comprise at least 10% of the population in 35 City Council districts, with the remaining districts possessing some of the most rapidly-growing Asian populations. It is always important to note that from Fiscal Year 2002 to 2014, the Asian community received a mere 1.4% of the total dollar value of New York City's social service contracts, a reflection of a broader, long-term trend. SWG members, in balancing the need for culturally-competent food, managing older adult centers, and simultaneously addressing the needs of isolated older adults, are consistently on the brink of physical and emotional collapse. CBOs continue to report more burnout among staff who are stretched to their limits with too much work and not enough institutional support.

CBO staff members say meeting our most vulnerable where they are with culturally-competent, effective older adult services requires **systemic change**. They cite that DFTA's 'one-size fits all' models create additional challenges and barriers for Asian and immigrant communities. This necessitates further understanding of our diverse community's needs, as such change is dependent on the City and its work in supporting, reinforcing, and building capacity for programming by and for marginalized communities through prioritizing cultural competency and language access in contracting processes. It also requires a greater focus on funding smaller contracts so the organizations providing care to our most marginalized communities have access to funds they can spend down at their size.

Our recommendations for further action are elaborated on below.

Recommendations:

1. Increase funding to Asian-led, Asian-serving older-adult service providers, and expand this funding to include time and expenses spent on case management and digital literacy, devices and training. Our CBOs are juggling the expansion of in-person services while simultaneously catering to the needs of an isolated older adult population without funding to meet the demand for both streams.
2. Prioritize funding both congregate and remote services and programming. CBO staff are stretched thin because of the City's focus on the former while the broader community continues to demand the latter.
3. Continue funding a network of linguistically and culturally competent food service programs that provide alternative food benefits to older-adults.
4. Expand funding to include culturally competent, in-language, and older-adult-focused non-traditional mental health service models. This includes prioritizing CBOs that have a history of providing free or subsidized nontraditional, culturally competent services for funding opportunities.

On behalf of the Asian American Federation, thank you for raising up the work that needs to be done, and prioritizing the voices and needs of our older adults and our older adult service providers, the true experts in this work. We look forward to working with all of you in the near future, and want to emphasize that policymakers always have a standing invitation to our Seniors Working Group meetings.



February 27th, 2024

To the Esteemed Members of the NYC Council Committees on Aging and Immigration,

African Services Committee (ASC) appreciates the opportunity to provide testimony on the critical issues facing the aging African immigrant population in New York City. For over 40 years, African Services has been at the forefront of addressing the needs of NYC's African immigrants and through our work, we have identified several key areas where legislative action can significantly impact the well-being of our community and the broader immigrant community.

Background: New York City has a vibrant and diverse African immigrant population. Recent estimates from the American Community Survey indicate that the median age of African immigrants in the city has risen to 43.4 years, signaling a notable aging trend. This demographic shift presents unique challenges, particularly regarding healthcare access and social integration. Our community is navigating a complex landscape of healthcare needs, often exacerbated by chronic conditions such as cardiovascular disease, diabetes, and mental health disorders.

Legislative Support: The ASC strongly supports Int 0085-2024 and Int 0228-2024, which are crucial steps towards addressing the healthcare needs of aging African immigrants. Int 0085-2024, by establishing an annual health survey for newly arrived migrants and asylum seekers, will provide invaluable data to tailor healthcare policies and services effectively. Int 0228-2024's focus on providing information on NYC Care and support services to older adults, clearly indicating that the services are free, is essential to promoting awareness among aging immigrants.

Policy Recommendations: In addition to these legislative initiatives, there are several policy recommendations that we urge the Committees to consider:

- **Enhance Language Access Services:** Expand funding for translation and interpretation services to improve communication between healthcare providers and aging African immigrants.
- **Facilitate Marketplace Enrollment:** To effectively enroll newly eligible immigrants aged 65 and older in the New York State health insurance option for undocumented immigrants, we recommend targeted outreach and messaging that is culturally and linguistically tailored. This strategy should involve partnerships with trusted community organizations, developing multilingual resources, culturally relevant messaging, accessible enrollment assistance, and continuous monitoring for feedback.



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- **Increase Funding for Culturally Competent Healthcare:** Support initiatives that provide healthcare services tailored to the unique needs of older African immigrants, including training for healthcare providers. Similarly, funding should be allocated to involve more community-based organizations in NYC Care and NYC Health + Hospitals, particularly in neighborhoods with low healthcare utilization among immigrants.
- **Strengthen Economic Support Programs:** Implement and expand existing targeted economic support programs intended solely for aging immigrants, such as job training, affordable housing access, and food services.
- **Promote Social Integration Initiatives:** Fund community-based programs that facilitate social integration through cultural events and senior centers offering culturally appropriate activities. Creating spaces that offer culturally relevant activities, healthcare information, and social support is crucial for improving the quality of life for aging African immigrants, including those living with HIV, mental illness, and other chronic conditions.

The aging African immigrant population in New York City faces distinct challenges that require thoughtful and targeted legislative and policy responses. By supporting Int 0085-2024 and Int 0228-2024 and implementing the policy recommendations outlined above, the NYC Council Committees on Aging and Immigration can significantly improve the health outcomes and quality of life for this vulnerable population. The African Services Committee is committed to working alongside the Committees and other stakeholders to ensure that aging African immigrants receive the support and services they deserve.

We thank the Committees for their attention to this critical issue and for their continued efforts to support aging and immigrant communities in New York City.

Respectfully,
Amanda Lugg
Executive Director
African Services Committee

Testimony of Rachel Neches
Data Researcher, Center for an Urban Future
Before the New York City Council
Committee on Aging, jointly with the Committee on Immigration
on the Needs of Immigrant Older Adults
February 27, 2024

Good morning. I'm Rachel Neches, the data researcher at the Center for an Urban Future, an independent think tank focused on creating a stronger and more inclusive economy in New York. Thank you to Chair Hudson, Chair Avilés and members of both committees for the opportunity to testify.

A decade ago, the Center for an Urban Future published *The New Face of New York's Seniors*, the first comprehensive report to document the fast-growing population of older immigrants across the five boroughs. At the time, we showed that foreign-born New Yorkers made up an incredible 46 percent of all older adults in the city, and we detailed the many unique challenges that New York's older immigrants face—from financial insecurity to elder abuse and social isolation. We've since published several other reports about the city's rapidly aging population, the troubling prevalence of poverty among the city's older adults, the continuing challenges facing older immigrants, and opportunities to tap the many strengths of older New Yorkers—as workers, entrepreneurs, mentors, and more. About a month before the start of the pandemic in 2020, we published a blueprint for expanding and improving older adult services in the city, with 63 policy recommendations for how city and state policymakers can meet the needs of New York's fast-growing older adult population.

Our latest research shows that immigrants make up an even greater share of the city's older adult population today. Indeed, foreign-born New Yorkers account for an incredible 52.2 percent of all those who are 65 and over in New York City today. Overall, 726,000 immigrant New Yorkers are 65 and above. That's roughly the size of the entire population of Seattle.

In total, there are around 350,000 more older New Yorkers than there were 10 years ago, a rise of 34 percent. While the entire older adult population has swelled over the last decade, older immigrants have largely propelled this growth, representing 234,000, or 66 percent, of these additional older New Yorkers.

The growth of New York's older immigrant population is far outpacing that of U.S.-born seniors; older immigrants have increased by 47 percent in the past decade, while U.S. born adults have risen by 21 percent. While this demographic shift is seen in every borough, it is happening most prominently in Queens, where the number of immigrant seniors has risen by 59 percent while the U.S.-born senior population increased just 12 percent.

Our research at CUF demonstrates that not only is the older population larger and more diverse but has also been getting poorer, a deeply troubling development. Today, there are over 250,000 older adults living in poverty in New York City, 34 percent more than a decade ago.

And while the city's entire older population is experiencing a rise in poverty, older immigrant New Yorkers tend to be the most vulnerable. While older immigrants represent 52 percent of all older adults, they make up 64 percent of older adults in poverty.

Citywide, there are 160,000 immigrant older adults living in poverty, or 22 percent of all immigrant seniors. In contrast, only 13.6 percent of U.S. born seniors live in poverty. In Manhattan, 29 percent of older immigrants live in poverty, compared to 11 percent of U.S.-born older adults. The Bronx also has a poverty rate of 29 percent for its older immigrants. And over the past decade, all boroughs except Staten Island saw an increase in the total number of older immigrants living in poverty.

These demographic shifts have significant implications on how city services should be delivered. While many older adults struggle with financial security and healthcare costs, older immigrants can be among the worst off, tending to be poorer and with less in retirement savings. Almost all older immigrants receive much less in Social Security benefits than U.S.-born peers, including many who don't qualify for the program or never enrolled. Language and cultural barriers can also serve as challenges to immigrants getting help or receiving the city and state supports they're otherwise eligible for—from rent freezes to heating help to meal delivery.

Because of the obstacles that older immigrant adults often face, many in this group are at risk of falling through the social safety net. The dramatic rise of older immigrants in poverty will likely continue if policymakers do not address this trend and take new steps to support older immigrant New Yorkers.

Our 2020 blueprint for expanding and improving older adult services included several policy ideas that would help the city plan for its fast-growing and increasingly diverse older adult population. Among other things, we suggest that city leaders ensure that more of the city's older adult services reflect the diverse needs of today's older New Yorkers. We applaud the important steps that the City Council and the Department for the Aging (DFTA) have already taken to ensure that city services are serving today's highly diverse older adult population, but there are still significant gaps in the reach and effectiveness of the city's programs.

DFTA faces a budget cut of nearly \$40 million next year, which would seriously limit the agency's ability to keep pace with growing needs. Full funding should be coupled with renewed efforts to pursue innovation in older adult services. For instance, DFTA's future RFPs should require all applicants to clearly demonstrate how they will ensure that their services are accessible to the immigrant populations in their catchment areas. Older adult services contracts should also give providers more flexibility to partner with organizations with the cultural and linguistic competencies to serve immigrant populations—including community-based workforce and small business development organizations, cultural groups, and public libraries. And city leaders should ensure that other key agencies are prioritizing the needs of immigrant older adults, including the Departments of Transportation, Housing Preservation and Development, Small Business Services, and Parks and Recreation.

Our other recommendations for city policymakers include launching a major new initiative to reduce poverty among older New Yorkers, undertaking a citywide campaign to enroll older New

Yorkers in federal, state, and local benefits programs for which they are eligible, and increasing city funding for older adult services to keep pace with the growth of this population and the rise in unmet needs.



**New York City Council
Committee on Aging
Chair Hudson
Committee on Immigration
Chair Avilés
February 27, 2024**

The Needs of Immigrant Older Adults in NYC

My name is Megan Macdonald and I am the Director of Social Work and Community Services at Emerald Isle Immigration Center. Thank you for the opportunity to testify.

EIIC is a non-profit that for over 35 years as offered social services and immigration legal services to New Yorkers. EIIC's origins are rooted in the immigration reform movement, and was founded with funding to serve immigrant older adults in NYC. Our Aging program is over 35 years old and has grown from year to year with the social work team we have in place to support a myriad of questions we provide assistance on from both our office locations. Some of our seniors have on going case work; some are once off enquiries. Over the last year we have added COVID related questions into the mix in addition to health and wellness, vaccine information, testing, booster vaccines and more. In addition to being able to provide basic immigration counseling and assistance on immigration, visas, greencard applications and renewals, family petitions and annual immigration updates, passports and enquiries related to lost documents for naturalization.

We handle requests by phone, in person and via email / on line on SCRIE, SNAP, HEAP, ACCESS-A-RIDE, and senior metrocard benefits / social security benefit assistance / help with job search / referral to food pantries / referral to GMHI geriatric counseling services or bereavement counseling services /communication with family members to facilitate home care or rehabilitation center discharge / referral to EIIC CHA navigators for Medicaid, Medicare, and medical insurance and billing issues / assistance with financial management ie. bill payment and identifying SCAM correspondence with requests for donations / client support through phone or home visits to homebound clients with medical conditions to prevent isolation / tenant advocacy with management companies and landlords / housing applications (SRO's, affordable housing).

We also serve many immigrant clients through our citizenship and ESL classes as well as VITA free tax preparation clinic. Each year actively seek funding to support food security to older adults and undocumented older adults.

Background

Our city has many different populations of aging immigrants across the five boroughs that have different needs than the non-immigrant aging population. Our members and partners in this work have highlighted the following top issues unique to aging immigrant populations across the city:

- Oftentimes, as older adult immigrants age, their country of origin becomes more distant and connections here and there begin to diminish. It is important to continue creating new ones to increase social connection and reduce isolation and health related consequences such as cognitive impairment. Mental health services can be more difficult for these older adults to access, in particular with perception of these services and conventions attached. Older adults benefit from a network of supports; in particular the most vulnerable in our immigrant communities.
- Cultural competence is important to immigrant communities, and older immigrant adults often rely on community to survive and create a network of support. Often engagement with harder to reach populations starts with language and connection. Greater access to translation services for non-profits in the absence of bilingual staff, but begin with frontline language provision.
- Some immigrants are unable to apply for any retirement benefits and are at risk of losing housing as they age. This is a constant source of stress, and many live in substandard housing. Some who lose housing are afraid to go into temporary housing with younger populations.

Recommendations

- **Immigration trauma should be recognized as an important factor that can be related to aging, and resulting changes. Mental health services should be available in languages that support work in the immigrant community and bolstered by related outreach that is imperative to reach these communities, oftentimes it is through this initial outreach that other missing services are identified.**
- **Increase access to social housing specifically for older adults, along with specific housing for temporary housing for older adults.**
- **Increase outreach regarding scams and recognize the effects that these have on our vulnerable immigrant older adult communities.**
- **As a member of LiveOn NY, EIIC supports the preconsidered legislation that would provide more information about benefits available to NYC's older immigrant population. EIIC has active healthcare advocacy and benefits and entitlements case**

management outreach programs which provides unique opportunity to inform and assist immigrant older adults and has seen the direct positive impact that this can yield in outcomes and quality of life.

Thank you for the opportunity to testify.

*Testimony provided by Megan Macdonald, LMSW, Director of Social Work and Community Services
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February 27, 2024

Good morning, Chairperson Crystal Hudson and members of the NYC Council Committee on Aging. Thank you for this opportunity to deliver written testimony on the needs of immigrant older adults in NYC. My name is Bonnie Lumagui, Assistant Executive Director of Older Adults and Community Services at Hamilton-Madison House a settlement house that has served the residents of Manhattan's Lower East Side and Chinatown since 1898. The programs we provide address the needs of Asian American non-English-speaking, vulnerable, and underserved older adults and their families, the majority of whom are immigrants. The immigrant senior population is growing rapidly in New York, and we observe a deficit in senior services. It is important to support the growth of social service organizations to guarantee linguistically and culturally proficient senior services to meet the needs of a progressively diverse immigrant senior population in NYC.

I have served the vulnerable, underserved immigrant seniors and their families, as well as people who were born and aged in the USA, for 25 years. Every day I see that the needs of people we serve grow while their abilities to address these challenges decrease.

Barriers to independent living:

1. Linguistic isolation creates a knowledge gap and difficulties to navigating the system in order to apply for supportive benefits or make adjustments to the existing plans.
2. The constantly growing demand for senior services makes it challenging to support seniors with the existing senior services and resources; we do not have enough bilingual manpower to deliver the services.
3. Staff once trained leave for higher paying positions and we constantly struggle to maintain our staffing levels.
4. Seniors prioritize shelter expenses over food and health care.
Barriers to long-term managed care and home care services across different populations deprive seniors of being independent and living with dignity and aging in place.

Hamilton-Madison House's programs serve more than 5,000 older adults per year and meet a wide range of their needs through congregate meal programs, social services, after-school programs, early childhood education, and mental health services. We address growing food insecurity we see in our older adults by offering well-balanced, affordable, nutritious food every day at our programs as well as by hand-delivering grocery bags from our biweekly community food pantry. We provide culturally and linguistically proficient social services that ensure that older adult immigrants have access to supportive resources and health care.

The share of older adults (65+) within the Asian American population has grown from 9% to 13% from 2010 to 2020 and we expect this trend to continue. This means there are now almost 200,000 Asian American older adults living in NYC. The population of immigrant Asian seniors has increased; however, funding does not keep up with the demand for social services we see from this population. Financial support for senior services should grow as well. Older adult immigrants live in fear that they might lose support because of multiple budget cuts to senior services.

I hope that my testimony will help to better understand the challenges that both older adult immigrants and native-born citizens continue to face. We want them to be an integral part of NYC, live healthy and productive lives without fear, and share their wisdom with new generations.

Thank you for the opportunity to testify this morning, and we look forward to continuing our partnership with the Council to protect services that are vital to the well-being of so many New Yorkers who are older adult immigrants.

*Testimony provided by Bonnie Lumagui, Assistant Executive Director Older Adults & Community Services,
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February 27, 2024

Good morning, Chairperson Crystal Hudson and members of the NYC Council Committee on Aging. Thank you for this opportunity to deliver testimony on the needs of immigrant older adults in NYC. My name is Maryna Lysenko, Director of Knickerbocker Village NORC Senior Services for Hamilton-Madison House (HMH), a settlement house that has served the residents of Manhattan's Lower East Side and Chinatown since 1898. The programs we provide address the needs of Asian American non-English-speaking, vulnerable, and underserved older adults and their families, the majority of whom are immigrants. The immigrant senior population is growing rapidly in New York, and we observe a deficit in senior services. It is important to support the growth of social service organizations to guarantee linguistically and culturally proficient senior services to meet the needs of a progressively diverse immigrant senior population in NYC.

I am an immigrant myself, and I have served vulnerable, underserved immigrant seniors and their families, as well as people who were born and aged in the USA, for 22 years. As a front-line employee, every day I see that the needs of people we serve do not decrease. Every day, life unfolds new challenges for them, and they struggle to address them on their own.

Barriers to independent living:

1. Linguistic isolation creates a knowledge gap and difficulties to navigating the system in order to apply for supportive benefits or make adjustments to the existing benefits package. This increases hospital and nursing home stays.
2. The constantly growing demand for senior services makes it challenging to support seniors with the existing senior services and resources; we do not have enough bilingual manpower to deliver the services.
3. Rising housing costs impact access to healthy food and health care. Seniors prioritize shelter expenses over food and health care.
4. Barriers to long-term managed care and home care services across different populations deprive seniors of being independent and living with dignity and aging in place.

Hamilton-Madison House's programs serve more than 5,000 older adults per year and meet a wide range of their needs through congregate meal programs, social services, after-school programs, early childhood education, and mental health services. We address growing food insecurity we see in our older adults by offering well-balanced, affordable, nutritious food every day at our programs as well as by hand-delivering grocery bags from our biweekly community food pantry. We provide culturally and linguistically proficient social services that ensure that older adult immigrants have access to supportive resources and health care.

Because the immigrant population is growing, financial support for senior services should grow as well. Older adult immigrants live in fear that they might lose support because of multiple budget cuts to senior services.

I hope that my testimony will help to better understand the challenges that both older adult immigrants and native-born citizens continue to face. We want them to be an integral part of NYC, live healthy and productive lives without fear, and share their wisdom with new generations.

Thank you for the opportunity to testify this morning, and we look forward to continuing our partnership with the Council to protect services that are vital to the well-being of so many New Yorkers who are older adult immigrants.

Testimony provided by Maryna Lysenko, Director of Knickerbocker Village NORC Senior Services at Hamilton-Madison House. For follow-up questions, please reach out to MarynaLysenko@hmonline.org



Making New York a better place to age

**New York City Council
Committee on Aging
Chair Hudson
Committee on Immigration
Chair Avilés
February 27, 2024
The Needs of Immigrant Older Adults in NYC**

My name is Kevin Kiprovski and I am the Director of Public Policy at LiveOn NY. Thank you for the opportunity to testify.

LiveOn NY's members include more than 110 community-based nonprofits that provide core services which allow all New Yorkers to thrive in our communities as we age, such as older adult centers, home-delivered meals, affordable senior housing, NORCs, and home care. LiveOn NY is also home to the Reframing Aging NYC Initiative, part of the national Reframing Aging Initiative aimed to counteract ageism and improve the way policymakers, stakeholders, and the public think about aging and older people. With our members, we work to make New York a better place to age.

Background

Our city has many different populations of aging immigrants across the five boroughs that have different needs than the non-immigrant aging population. Our members and partners in this work have highlighted the following top issues unique to aging immigrant populations across the city:

- Mental health needs differ across many populations, but recent older immigrants who have been here for 10 years or less tend to experience more anxiety, depression, and higher rates of suicidal ideation. Anti-asian hate during the pandemic exacerbated these feelings for many older adults throughout the city and made many feel unsafe in their own communities.
- Language services provided by the city only cover the 10 languages required by existing statute, leaving out many languages used every day by older immigrants and cutting them off from vital services. Our members have identified Hindi, Punjabi, Urdu, Punjabi, and Gujrathi as just 5 languages that need more resources to support from the city, but there are many more.
- Resources provided by the city in the 10 specified languages do not always meet the needs of speakers. Oftentimes the translators who create materials use an academic language framework and do not reflect the lived experience of those who need the resources. The materials created through this process can be unintelligible to the intended audience, and literacy levels are not considered when making exclusively printed materials.



Making New York a better place to age

- Many older immigrants who have been in the US for less than 10 years find themselves renting rooms in cramped apartments or basements and do not have the resources to find healthier housing. This contributes to the poor mental health outcomes and lower quality of life.
- Remittance scams have become much more prevalent in older immigrant communities with individuals being targeted for the money they send back to their country of origin. These scams are not covered in existing anti-scam programs or materials and this leaves older immigrants uniquely vulnerable to them.

Recommendations

- **In language and culturally sensitive mental health services should be offered that recognize the unique experiences of older immigrants.** People's immigration experience could be a contributing factor to poor mental health outcomes, from trauma experienced in their country of origin to financial and legal difficulties faced in the US, there are many factors that are unique to the older immigrant population. Additionally linguistic barriers can prevent even the most experienced mental health professional from properly treating someone, so extra care must be paid to build up a multilingual workforce among our providers.
- **Embrace new housing models, such as India Home's Co-living project to meet both the social health and housing needs of older adults.** We must explore new and creative ways to solve our housing crisis and to meet the social health needs of older immigrants in our communities.
- **Work with local nonprofits that provide services to these communities to provide effective translations, interpretations, and materials.** Colloquially translated materials and materials that meet the literacy needs of populations can be made in partnership with local organizations if given the resources. Groups should be funded and included in the production of these materials to ensure their effectiveness.
- **Add remittance scams to the existing lists of materials and programs aimed at protecting older adults from bad actors and research other scams that may impact immigrant communities.**
- **LiveOn NY supports the preconsidered legislation that would provide more information about benefits available to NYC's older immigrant population.**

Thank you for the opportunity to testify.

Testimony provided by Kevin Kiprovski, Director of Public Policy at LiveOn NY For questions, please email kkiprovski@liveon-ny.org

LiveOn NY

Making New York a better place to age

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 also administers a citywide outreach program and staffs a hotline that educates, screens and helps with benefit enrollment including SNAP, SCRIE and others, and also administers the Rights and Information for Senior Empowerment (RISE) program to bring critical information directly to seniors on important topics to help them age well in their communities.



Advocacy &
Services for
LGBTQ+ Elders

We refuse to be invisible®

TESTIMONY

New York City Council Committee on Immigration
Jointly with the New York City Council Committee on Aging
Oversight Hearing the Needs of Immigrant Older Adults in New York City
Tuesday, February 27, 2024

Delivered by:

MJ Okma

Senior Manager of Advocacy and Government Relations

Good afternoon, Chair Avilés, Chair Hudson, and members of the New York City Council Committee on Immigration and Committee on Aging. Thank you for your leadership and the work of your staff and the committee staff for bringing together this important oversight hearing on the needs of immigrant older adults in New York City. My name is MJ Okma, and I am the Senior Manager of Advocacy and Government Relations at SAGE, the country's first and largest organization dedicated to improving the lives of lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ+) elders and older people living with HIV.

SAGE is a resource for all older New Yorkers regardless of immigration status through our network of LGBTQ+ affirming Older Adult Centers (OACs) in Midtown Manhattan, Harlem, Brooklyn, and The Bronx as well as providing LGBTQ+ aging services on Staten Island through a partnership with the Pride Center of Staten Island. We also provide extensive virtual programming and services for homebound LGBTQ+ elders and older New Yorkers living with HIV. Our services are currently provided in English, Spanish, Mandarin, and Cantonese for all those over 60 and to transgender elders and older adults living with HIV over the age of 50.

SAGE also runs monthly pop-up food pantries with fresh produce that is open to everyone in the community, regardless of age, in Harlem (220 W 143rd Street, every second Wednesday of the month between 3-5 PM), Brooklyn (271 Myrtle Avenue, every fourth Thursday of the month between 1-3 PM), and The Bronx (1784 Prospect Avenue, every third Thursday of the month between 1-3 PM).

Immigrants are the majority of our city's older adult population and there is a wide variety of populations of aging immigrants across the five boroughs, each of which has their own unique needs.ⁱ New York is also a destination for LGBTQ+ asylum seekers from around the world, who come here fleeing persecution in their home countries.ⁱⁱ Inequities in the United States immigration system also disproportionately harm people living with HIV and impedes HIV testing, treatment, and prevention efforts.ⁱⁱⁱ Past discrimination on HIV status and HIV stigma also discourages individuals from seeking testing or treatment for fear of being denied entry or

placed on deportation proceedings, especially given the fact that before 2010, federal immigration law prohibited people with HIV from entering the country.^{iv}

All these factors compound and, for older immigrants who came to New York seeking asylum, there are pronounced mental health needs including social isolation, depression, post-traumatic stress disorder, and the effects of unmanaged trauma of forced displacement. At the same time, these elders are often hard to reach as they are extremely isolated and fearful around immigration issues and policies, especially if they are also LGBTQ+ and/or living with HIV.

Walking into an LGBTQ+ affirming space like a SAGE Center or attending an HIV and aging support group can be a difficult step for an elder who has lived the majority of their life hiding those aspects of their identity. Because of these barriers, SAGE needs to connect and build trust for them to come in and be open to all the services we can provide and help connect them to other trusted supports. We do this, in part, by working with partners that have an influence in immigrant communities, expanding the languages spoken at our Centers, and through our community food pantries and grab-and-go meals which provide a gateway to services.

SAGE is also a founding member of the LGBTI Elders Advancing Initiative (LEAP) alongside OutRight International, Mitini Nepal, EnGendeRights (the Philippines), CIPAC (Costa Rica), and Aspidh (El Salvador).^v LEAP is a cross-regional initiative designed to strengthen the human rights protections of lesbian, gay, bisexual, transgender, and intersex (LGBTI) elders and build a more robust and well-connected global LGBTI aging movement. Around the world, LGBTI older adults experience rampant human rights violations based on sexual orientation and/or gender identity and the stigma of ageism. While the specifics of LGBTI aging vary from country to country and region to region, older members of the LGBTI community commonly face widespread discrimination in care, services, and housing, and are at acute risk for severe social isolation and economic insecurity. These international partnerships have also strengthened and expanded the scope of SAGE's work here in New York City through partnership with global LGBTI advocates.

SAGE strongly supports the preconsidered legislation to promote NYC Care services at all NYC Aging contracted services sites, making it clear that services are available to all uninsured New Yorkers, regardless of immigration status, and applauds the City Council for passing a bill to expand linguistic and cultural programming offered at Older Adult Centers during last session.

These are strong steps forward, but more can be done to support the unique and varied needs of older immigrant New Yorkers, including LGBTQ+ elders and those living with HIV.

- **Provide Older Adult Centers with additional flexibility to serve food catered to the communities they serve, which is instrumental to building trust to connect people to further services.** Many older immigrants often want to maintain their traditional food habits and meal preferences, which offers comfort and security.

- **Support NYC providers in the development of linguistically and culturally sensitive mental health services that are LGBTQ+ and HIV competent and recognize the unique experience of older immigrants, including those seeking asylum.** This also must come with a recognition that increased funding for personnel will be needed to recruit and maintain experienced and multilingual mental health care professionals.
- **Direct coordination among agencies to ensure community partners that serve immigrants and/or older adults under contact with any city agency can seamlessly refer clients to services provided by others.** Service provision is often siloed, resulting in individuals having to seek out legal advice from one organization and care management from another. Whether the first touchpoint for an older adult is immigration services, aging services, or family services there must be a holistic approach to addressing their needs so that pathways to other services are easily accessible.

Thank you for the opportunity to testify on this important topic. SAGE looks forward to continuing our partnership with the council as we fight to preserve and grow services to support all our city's LGBTQ+ elders and older adults living with HIV.

MJ Okma, Senior Manager for Advocacy and Government Relations, SAGE
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ⁱ González-Rivera, Center for an Urban Future, "The Aging Apple: Older Immigrants a Rising Share of New York's Seniors," May 2017 <https://nycfuture.org/research/the-aging-apple>

ⁱⁱ United Nations Human Rights Office of the High Commissioner, "Forcibly displaced LGBT persons face major challenges in search of safe haven," 16 May 2022 <https://www.ohchr.org/en/statements/2022/05/forcibly-displaced-lgbt-persons-face-major-challenges-search-safe-haven>

ⁱⁱⁱ The Center for HIV Law and Policy, "Immigration," <https://www.hivlawandpolicy.org/issues/immigration>

^{iv} U.S. Customs and Border Protection, "Final Rule Removing HIV Infection from U.S. Immigration Screening," 12 October 2016 <https://www.cbp.gov/travel/international-visitors/esta/final-rule-removing-hiv-infection-us-immigration-screening>

^v Evaluation Plus, "THE LGBTI ELDERS ADVANCING PROJECT INTERIM EVALUATION REPORT," September 2023 <https://www.sageusa.org/wp-content/uploads/2023/09/abridged-interim-report.pdf>

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

**Oversight: The Needs of Immigrant Older Adults in New York City
February 27, 2024 Hearing**

Chairman Hudson, Chairman Avilés, and esteemed committee members: Thank you for the opportunity to provide testimony today.

My name is Amreen Partap Singh Bhasin, and I serve as a Staff Attorney for the Sikh Coalition—the largest Sikh civil rights organization in the United States.

The Sikh Coalition was founded in New York City in the immediate aftermath of the September 11, 2001, terrorist attacks in response to a wave of bias, bigotry, and backlash targeting the Sikh community. As you may know, many Sikhs—members of the world’s fifth-largest organized religion—maintain articles of faith, including unshorn hair and beards as well as turbans. Though intended to remind us of our commitment to Sikh teachings, these articles of faith became targets in the days, weeks, and months after 9/11 when they were conflated in the American public’s eye with the Taliban.

In the more than 20 years since, our organization has grown from a volunteer operation to a national and community-based nonprofit organization. A core component of our work, however, remains the provision of expert, pro bono legal assistance to Sikh community members who suffer discrimination, both institutional and individual, as well as violent acts of hate. The need for these services are not anecdotal, but a matter of statistical fact: The FBI’s most recent dataset shows that Sikhs are the second most commonly targeted faith group for hate crimes and bias incidents and includes the highest rate of anti-Sikh victimizations since data collection began in 2014.

It is this continual targeting that brings me before you all today.

- In January of 2022, a 58-year-old Sikh taxi driver was attacked (struck in the head and turban), called “turbaned people,” and told to “go back to your country” at JFK airport.
- In April of 2022, Nirmal Singh, a 70-year-old Sikh man, was assaulted while on an early morning walk in the Richmond Hill neighborhood of Queens.
- Less than 10 days later, two additional men—Gulzar Singh, age 45, and Sajan Singh, age 58—were both attacked and robbed in the same neighborhood.
- And in October of 2023, 66-year-old Jasmer Singh succumbed to his injuries after being assaulted following a car accident; during the course of the attack, he was called “turban man” by his assailant.

Five cases, in the past two years alone, targeting older or elderly Sikh men. Clearly, there is a significant issue at the intersection of aging, immigration, and violent hate crimes in our city.

We can only speculate as to why older Sikh men have been targeted in such assaults. Perhaps it is because of their more visible articles of faith—again, their turbans and long beards—or other intersectional aspects of their identity, like skin color or accented speech. Perhaps it is because of perceptions their assailants have about them, be it estimations of their physical

strength or assumptions about their heritage, country of origin, or immigration status. Regardless, what we know for sure is that our community cannot continue to watch our elders suffer the brunt of this violent hate.

Accordingly, I come before you today with a series of recommendations that the New York City Council can undertake to help reverse this tide and make our city safer for members of the Sikh community, both old and young:

First, we encourage the council to work with local law enforcement to ensure that translation services are available to officers who are investigating crimes that may have a hate or bias component. Too often, details that may shed light on a perpetrator's motive are literally lost in translation when survivors or eyewitnesses have limited English proficiency. Within the past year, the Sikh Coalition published a guide to investigating and prosecuting hate crimes and bias incidents, which outlines the questions that responding officers should ask to help determine if hate or bias may have been a motive in a given crime; these conversations, however, are only possible with adequate language accessibility.

Second, the security of Sikh gurdwaras and other houses of worship remains a critical issue. Though federal and state programs exist to provide funds for this purpose, they are difficult to access without professional grantwriters—and of course, funding is limited. City council members, however, have funding for capital investments, and that funding could be put towards strengthening infrastructure that makes the areas *around* a given house of worship safer. We would be very glad to discuss this issue further with interested council members.

And finally, we are broadly supportive of legislative efforts to compel more inclusive education in New York City, whether that be through inclusive curricula measures, professional development for educators focused on cultural awareness or bias-based bullying, or other means. My colleagues are already conducting Sikh Awareness presentations at Queens schools in March, teacher trainings at a different set of schools in May, and joining with other AANHPI organizations to support state-level legislation on inclusive curricula, but we are always looking for the opportunity to do more at the city level.

Thank you for your consideration, and for the opportunity to speak today.

**New York City Council
Committee on Aging
Chair Hudson
Committee on Immigration
Chair Avilés
February 27, 2024
The Needs of Immigrant Older Adults in NYC**

I am Shyvonne Noboa, Associate Executive Director of Sunnyside Community Services (SCS). Thank you for the opportunity to testify today and for your support of immigrant older adults in New York City.

We are proud to serve 16,000 New Yorkers of all ages, mainly in Western Queens, but you will find our participants throughout the borough and beyond. We are delighted to share that we are celebrating our 50th anniversary this year.

For those unfamiliar with Sunnyside Community Services, we are a community-based not-for-profit centered on the belief that every person deserves meaningful support to achieve their aspirations – especially struggling families and individuals.

Older adult services at SCS promote healthy aging and enable the older members of our community to age comfortably in place for as long as possible. Our continuum of services to support people as they age includes caregiving, geriatric mental health, case management, a vibrant older adult center and elder justice. Home care provides essential care for home-bound older adults and people with disabilities, and we also have a social adult day care for people with Alzheimer's. For immigrants, we offer English classes, legal support, emergency assistance, and access to benefits. We are proud to employ more than 1,200 people.

Additionally, as part of the vast nonprofit workforce, my organization also plays a role in the City's recovery. As a member of the Human Services Council, we are calling on the City to provide 3.2% COLA and a commitment for COLAs in future years.

Our main site in Sunnyside is surrounded by several hotels converted into migrant shelters. We ask the city to rely more on local, trusted, community-based organizations. Funding should go to these groups so that we can offer social services to our newest neighbors and help them adjust to their new lives in Queens.

Below is an outline of our experiences and needs of immigrant older adults.

Caregiving

The lack of a fair wage for HHA's hits the immigrant community hard, and this indirectly impacts the people needing care and their families, who might also be immigrants, by creating shortages of HHA's that speak their language. We are seeing diverse languages to serve caregivers and their care recipients that include Russian, Mandarin and Cantonese.

Caregiver immigrant clients have always faced harder challenges in getting long term homecare in place. This is easier now with the NYS expansion of coverage to people 65 and older who are undocumented. But it needs to be protected from Medicaid cuts.

Undocumented

What we have been seeing since 2020 has been an increased need of critical services for immigrant older adults; in particular, undocumented older adults who are most vulnerable.

They mostly come to us seeking financial assistance for rent and utilities. These are people who are not eligible for benefits; other than MTA reduced fare and now Medicaid. Unfortunately, most of the time they are not eligible for financial assistance because they don't have a lease. Many live in very precarious situations, often renting rooms with

limited access to a kitchen. They struggle because their work is irregular, and often seasonal, i.e. construction, restaurants, or cleaning services. The only substantial assistance that some received was the Excluded Worker's Fund program back in 2021. But that program was out of funds within two months. One program that would be able to help them is the Unemployment Bridge Program, which is a state level legislation for excluded workers we hope it would pass this year.

Many of these older adult clients have been with us since 2020 and when we have flexible funds, we reach out to them. Unfortunately, flexible funds have disappeared slowly such as MOIA debit cards (which were a one-time help for undocumented individuals and families).

Additionally, most of these older adults have medical issues, which is also another reason why they are not able to work much. Many of them don't have relatives in the state and no one to support them. It's very sad that there is no safety net for them and we must do better.

Housing

Some of the issues that we see are the lack of affordable housing and sustainability for immigrants that are not eligible for retirement benefits and/or HRA benefits such as SNAP or Cash Assistance (5 year residency period for Resident Card holders) that help in meeting rent cost. Without our staff to help immigrant older adults navigate the housing systems, get on waitlists, and gather documents and translate them, it is near impossible for them to successfully gain affordable, permanent housing. Many immigrants only have the option of renting rooms or sharing a room whereby they don't have any privacy or security in housing. For undocumented older adults who can no longer work at low paying jobs and have no income to find a place to live the challenges are insurmountable, or because they had low paying jobs and spouse dies, we find they can no longer afford where they were living.

Recommendations

- More affordable Housing for Immigrant families. Often, we receive calls from families who must move into more affordable housing because their rent keeps increasing and they can no longer afford to live there.
- A language line system with a more robust and diverse staff to assist with the different immigrant's that speak other languages besides Spanish. We have clients that speak many other languages.
- Helping create fair wages to increase the home health aide workforce. The shortage of home care agencies that speak other languages besides English which in turn makes it difficult for us to place someone in that household for assistance.
- We recommend more flexible funds for community-based providers such as ours to determine the best way to support undocumented immigrant older adults.
- Higher wages to recruit and retain bilingual staff.

Thank you for the opportunity to testify today.

Aging Committee Hearing
Oversight – The needs of Immigrant Older Adults in New York City
Submitted by Pia Scarfo – Vision Urbana, Inc.
February 27th, 2024

I would like to thank the Committee on Aging for their leadership and the opportunity to testify on the **needs of Immigrant Older Adults in New York City**. My name is Pia Scarfo, Deputy Director for Senior Services and Health Initiative at Vision Urbana, Inc. a multi-service community based nonprofit organization.

Vision Urbana, Inc. (VU), incorporated in 1996 as a NYS nonprofit organization, is a federally tax-exempt 501(c)(3) organization committed to developing strong and caring families, empowering the community to achieve its fullest potential, and helping older adults secure benefits and entitlements, stay healthy, and remain in their own homes with dignity and as productive members of their community. VU's older adult services are comprised of a senior center for immigrant populations and a Naturally Occurring Retirement Community (NORC.) While the senior center promotes social engagement and provides educational and recreational activities to older adults at 175 Delancey Street, the NORC program brings case management and health management to the seniors' homes. VU's NORC program serves the Seward Park Extension NYCHA complexes; the Guild Grand Street located at 131 Broome Street; 410 and 460 Grand Street and the Frances Goldin Senior Apartment Building at 175 Delancey.

Vision Urbana provides access to critical programs and social services to residents and community members through our Naturally Occurring Retirement Community (NORC), a Center for Immigrant Seniors with a roster of over 500 active members, and a Food Pantry program that provides provisions to almost 2000 seniors and families, serving the Lower East Side's most vulnerable populations.

Foreign-born individuals now make up 46 percent of New York City's seniors, and account for virtually all of the growth in the city's older adult population. The older immigrant population in NYC grew by 30 percent in the last five years. That rate of growth means that immigrants ages 65 or older will comprise the majority of New York's senior population within five to ten years.

Moreover, despite comprising 46 percent of the senior population in the city, immigrants comprise 65 percent of all seniors living in poverty. Sixty percent are limited English proficient (LEP), and 37 percent live in linguistically isolated households, meaning that nobody over the age of 14 in their households speaks English.

These numbers show that older immigrants are clearly not a niche population. In fact, **we cannot talk about older people in New York City without talking about immigrants.**

Aging Committee Hearing
Oversight – The needs of Immigrant Older Adults in New York City
Submitted by Pia Scarfo – Vision Urbana, Inc.
February 27th, 2024

Vision Urbana, In. would like to share with the Committee on Aging some of the **recommendations** that we believe should make it into DFTA’s budget if the agency is to be empowered to respond effectively to the increasing diversity of New York’s seniors.

We have five specific sets of about what the city should prioritize in DFTA’s budget:

- Establish a baselined, permanent funding stream at DFTA for neighborhood based Naturally Occurring Retirement Communities (NNORCs)
- Strengthen the ability of organizations based in ethnic communities to work with seniors either through more robust subcontracting or through disaggregating large contracts
- **Additional funding for language and culturally sensitive mental health services which recognize the unique experiences of older immigrants.** People’s immigration experience could be a contributing factor to poor mental health outcomes, from trauma experienced in their country of origin to financial and legal difficulties faced in the US, there are many factors that are unique to the older immigrant population. Additionally linguistic barriers can prevent even the most experienced mental health professional from properly treating someone, so extra care must be paid to build up a multilingual workforce among our providers.
- **Embrace new housing models, such as India Home’s Co-living project to meet both the social health and housing needs of older adults.** We must explore new and creative ways to solve our housing crisis and to meet the social health needs of older immigrants in our communities.
- **Work with local nonprofits that provide services to these communities to provide effective translations, interpretations, and materials.** Colloquially translated materials and materials that meet the literacy needs of populations can be made in partnership with local organizations if given the resources. Groups should be funded and included in the production of these materials to ensure their effectiveness.

Vision Urbana look forward to working with Members of the Committee on Aging, as well as leadership at DFTA, to ensure that the sector’s ability to provide quality meals and case management services for our City’s most vulnerable are not compromised.

Testimony provided by Pia Scarfo, PhD, NORC Director at Vision Urbana, Inc. For questions, please email pia@visionurbana.org



**NEW YORK CITY COUNCIL COMMITTEES ON
AGING AND IMMIGRATION**

Tuesday, February 27, 2024, 10:00 a.m.

SUBJECT: Oversight – The Needs of Immigrant Older Adults in N.Y.C.

Good morning. My name is Elisa Mercedes Tustian. I am the Supervising Attorney in the Senior Law Project at Volunteers of Legal Service (VOLS). VOLS was established in 1984 and we partner with private attorneys to provide free legal services to low-income New Yorkers to help fill the justice gap.

Our VOLS Senior Law Project serves low-income New Yorkers age 60+ by providing Last Wills and Testaments, Powers of Attorney, Health Care Proxies, and other essential advance directives free of charge. These life planning documents enable older adults to prepare for possible incapacity, illness and/or death. With the proper documents in place, we help our clients to maintain income and avoid homelessness, ensure that their dying wishes are fulfilled, and can empower our clients' eventual caregivers to obtain services necessary for our clients to access health care and age in place. The VOLS Senior Law Project also provides legal services on a range of other civil legal issues including landlord tenant matters, access to benefits, consumer matters, and other civil legal needs. We provide training and ongoing support to social workers, older adult center staff, and pro bono attorneys to address our clients' legal needs.

While we strongly believe that all older adults should have the right documents in place as they plan for the future, we have several initiatives that focus on vulnerable sub-sets of the older adult population. These include older veterans, Latine and Spanish speaking seniors, older women, and LGBTQIA+ older adults. We have created these initiatives because we know that it is important to deliver targeted and culturally competent services to each of the immigrant groups we seek to serve.

In January of 2024, the New York Times reported that immigrant older adults make up over half of New York City's over 65 population and in January of 2023 the Center for an Urban Future already noted that the number of immigrant older adults had increased at more than twice the rate of non-immigrant older adults since 2010. The Center for an Urban Future also notes that, just over 12 percent of older adults in New York live at or below the poverty level, but Latine older adults experience poverty at the highest rates at 23.5 percent (composed of 25.6% for U.S. born Latine older adults and 21.9% for immigrant Latine older adults). Older Adults of Asian descent have the second-highest poverty rate, at 19.1 percent. Looking at these statistics it is clearly incumbent upon service providers to target services to where the need is greatest.

The VOLS we try to do just that, Extensión Comunitaria para Adultos Mayores is our initiative for Spanish speaking and Latine older adults. This initiative ensures that Latine clients have language accessible and culturally competent legal services. Since launching, we have translated all of our educational materials and life planning documents into Spanish, increased outreach,

and created partnerships with community-based organizations and older adult centers serving largely Latine communities.

The VOLS Senior Law Project also targets outreach to the Asian American immigrant community. We leverage our network of volunteer attorneys and our partnerships with community-based organizations to provide presentations in Mandarin and Cantonese and to serve clients with legal counsel in a variety of Asian languages.

We specifically target outreach and services to immigrant older adults, because of the unique challenges they may face as they age. We notice that our immigrant clients more often than our non-immigrant clients have no family here in the United States. Recently, one of our clients wanted to know how best to leave her modest savings to her niece in China. Another wanted to make a similar bequest to a nephew in Colombia. We help our clients have their last wishes fulfilled.

Family members step in as caregivers for some older adults. The importance of planning for the future becomes amplified when those traditional caregiving structures are not present. Medical decision-making defaults to next of kin, therefore unless the older adult has completed advance directives, immigrants who live far from their families may not have their wishes followed. During the pandemic, we helped a client whose friend had passed away and was held in the morgue for months while relatives in Cuba were consulted about how to handle his remains. If this client's friend had completed an Appointment of Agent for the Disposition of Remains form, then he could have easily named his best friend in NYC to handle his remains.

Even when a caregiver is a spouse or adult child, they need to have the right documents in place to be effective in financial decision making. An immigrant older adult who has executed a Power of Attorney authorizes their agent to seek government benefits to pay for housing costs, to sign leases, apply for and recertify for housing subsidies, and deal with any issue that may arise with their landlord or housing provider. The agent can also seek SNAP, Medicaid, and other critical benefits. Without a Power of Attorney loved ones may have to file for Guardianship in court, a process which is invasive, time consuming, and potentially costly.

Planning for the future is a hard process. It is a process that forces older adults to face their mortality and think seriously about who they trust to care for them if their health declines. We believe that it is important for legal services providers to explicitly acknowledge the unique challenges that planning for the future poses for immigrant older adults and to create a safe space for immigrant older adults as they grapple with this process and make these hard decisions.

The challenges outlined in my testimony are just a few facing immigrant older adults. Thank you for allowing us to submit this testimony and for supporting the New York City's aging immigrant community.

Elisa M. Tustian, Esq.
Supervising Attorney, VOLS Senior Law Project

Testimony for Feb. 27, 2024: Expedite Work Permits to all Asylum Seekers

Good Afternoon Chair Person Aviles, and Chair Person Hudson,

I'll be sharing the contents of this testimony with my Congress person, Dan Goldman's office, when I meet with them on Friday:

During the cold snaps in January and February, Gowanus Mutual Aid alerted myself and my neighbors to the need for warm clothing for Asylum seekers.

When I took warm clothing to the Floyd Bennett Field Tent shelter, and the Hall Street shelter — I had the privilege of meeting a couple of young families from Latin America — As I chatted in the cold with the families, all of them told me that they came to America, and to New York, to work and to become good citizens.

They told me they do not want to be a burden on the system: They want to work.

I stayed in touch with the two families. The Dads told me of their prior work experience in their countries of origin. One Dad has the dream of opening his own bakery, as he is a pastry chef. The other Dad is a fine woodworker; his job in Ecuador, which has become a dangerous country to try to raise a family in.

My husband passed away in June, and several things in my apartment broke. I set up a barter system with the Woodworking Dad - If he could fix my broken window shutter and kitchen cabinet, I would cook his family some soup and hot food, as the food in the shelter is inedible.

His work was impeccable. And his wife and kids enjoyed the meals I cooked.

Why are we not doing everything to scaffold these folks into the work force so they can do the work they know how to do, and want very much to do - to become productive human beings on the path to citizenship?

We must expedite the work permit process immediately so they can work and become self supporting. They don't want to leech off our city services.

Ukrainian refugees were granted work permit status quickly. Why are newcomers from Latin America and Africa and China forced to wait, in uncertainty? They are stranded and forced to rely on triage in shelters - for medical care, food and clothing and daily needed supplies?

We need their talent, stamina and intelligence. They need to be seen as the assets they are to our city. Please expedite the work permit process for all of these newcomers, with no restrictions on any country of origin. This is my urgent request. Thank you.

**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: NILUSA COYOTE

Address: 71-29 Roosevelt Av.

I represent: NICE - Senior Immigrants

Address: _____

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Date: 2-27-24

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Name: DID MOKRIL HOSSAIN

Address: Wexford Terrace

I represent: _____

Address: _____

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Name: MJ OKMA

Address: _____

I represent: SAGE

Address: _____

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 in favor in opposition

Date: 2/27/24

(PLEASE PRINT)

Name: Noemy Reyes

Address: [redacted] 23rd St. Brooklyn, NY 11215

I represent: _____

Address: _____

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 in favor in opposition

Date: 02/27/24

(PLEASE PRINT)

Name: Laura Rivera

Address: [redacted] 23rd St, Brooklyn, NY 11215

I represent: _____

Address: _____

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 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Kan Ohni

Address: [redacted] Monroe St [redacted] 11215

I represent: _____

Address: _____

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THE CITY OF NEW YORK**

Appearance Card

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in favor in opposition

Date: 2/27/2024

(PLEASE PRINT)

Name: Elisa M. Tushian

Address: _____

I represent: Volunteers of Legal Service

Address: 40 Worth St., Suite 829

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in favor in opposition

Date: 2/27/24

(PLEASE PRINT)

Name: Penney Vachirapapun

Address: _____

I represent: NYC Aging

Address: 2 Lafayette

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THE CITY OF NEW YORK**

Appearance Card

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in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Deputy Commissioner Miosotis Munoz

Address: _____

I represent: Mayor's Office of Imm. Affairs

Address: 253 Bwy

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THE CITY OF NEW YORK**

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in favor in opposition

Immigration

Date: Feb 27, 2024

(PLEASE PRINT)

Name: Jane Willis

Address: [redacted] 10th St Brooklyn, NY 11215

I represent: myself

Address: _____

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THE CITY OF NEW YORK**

Appearance Card

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in favor in opposition

Date: 2/27/24

(PLEASE PRINT)

Name: Anya Herasme

Address: _____

I represent: NYC Aging

Address: 2 Lafayette

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THE CITY OF NEW YORK**

Appearance Card

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in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Miguel Santana, chief of staff

Address: _____

I represent: Mayor's Office of Imm. Affairs

Address: 253 Bwy

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THE CITY OF NEW YORK**

Appearance Card

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in favor in opposition

Date: 02/07/24

(PLEASE PRINT)

Name: KISHAN BAISINGHANI of J.H.

Address: [redacted] 28th [redacted]

I represent: tilur200@yahoo.com

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

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in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Aurice Wildman

Address: 239 West 49th St. 10019

I represent: Encore Community Services

Address: 239 W. 49th Street 10019

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Appearance Card

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in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Amreen Bhasin

Address: [redacted] Grant Ave. Cresskill, NJ 07626

I represent: The Sikh Coalition

Address: 165 Broadway, office 2359 New York, NY 10006

Needs of Immigrant Older Adults NYC

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in favor in opposition

Date: 2/27/24

(PLEASE PRINT)

Name: Kevin Kiprodski

Address: _____

I represent: Live on NY

Address: _____

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in favor in opposition

Date: 2/27/24

(PLEASE PRINT)

Name: MARYNA LYSENKO

Address: _____

I represent: Hamilton-Madison House

Address: _____

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Date: 2/27/2024

(PLEASE PRINT)

Name: Rachel Neches

Address: 80 8th Avenue

I represent: Center For An Urban Future

Address: 80 8th Avenue

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THE CITY OF NEW YORK**

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in favor in opposition

Date: 2/27/2024

(PLEASE PRINT)

Name: Christopher Leon Johnson

Address: Buffalo Avenue

I represent: Self

Address: _____

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