ALONE AND AFRAID:
THE OUTSIZED IMPACT OF COVID-19 ON ASIAN SENIORS

ANTI–ASIAN VIOLENCE
DIRECT SERVICES
MENTAL HEALTH AND SOCIAL ISOLATION

ASIAN AMERICAN FEDERATION
Acknowledgements

We are grateful to the AARP Foundation for their generous support of the Seniors Working Group, the first and only Asian senior-focused advocacy coalition in NY state, and our on-going research about our seniors’ needs.

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RECOMMENDATIONS SUMMARY

The Asian American Federation’s Seniors Working Group (SWG) consists of 12 organizations who serve approximately 125,000 low-income seniors annually. We surveyed 153 Asian seniors, 15 Community-Based Organizations (CBOs), and convened four times to develop this Policy Agenda. We present the following recommendations for the City to meet the needs of Asian seniors in our community:

Anti-Asian Violence:

1. Make permanent and expand funding for the AAPI Community Support Initiative to deliver critical resources such as in-language anti-violence trainings and reporting tools that CBOs seniors can trust.
2. Restore and make permanent funding to the Hate Crimes Prevention Initiative
3. Issue RFPs that have a multifaceted approach to combating anti-Asian hate that highlights all the ways our CBOs and community members keep each other safe, such as mutual aid, rideshare, and protective accompaniment programs.

Direct Service Support for Senior Centers:

1. Increase contract and discretionary funding for senior centers to hire staff and volunteers to meet the increased needs of and grow their hybrid model programs to meet full capacity.
2. Engage Asian senior-serving CBOs regularly throughout the reopening process to clarify changing guidelines, provide support to CBOs to meet them, and hear how the guidelines impact their clients.
3. Provide funding to cover the cost and distribution of digital devices to seniors, and to train seniors to use the devices.
4. Negotiate with internet providers to provide free wifi/data to our seniors, including trainings and device access.
5. Designate a point person or team at the NYC Department for the Aging (DFTA) to provide updates and answer questions about changing regulations.
Direct Service Support for Food Programs and Social Service Assistance:

1. Provide timely additional funding for staff members to put together meals and manage volunteers for meal delivery.

2. Adjust DFTA RFP guidelines to:
   a. Prioritize CBOs with a history of executing culturally competent meal delivery programs, and
   b. Provide timely funding for full case management staff and services for seniors.

Mental Health and Social Isolation:

1. Release DFTA RFP guidelines that emphasize novel methods of delivering culturally competent mental health care. This includes prioritizing groups that deliver nonclinical interventions to increase access to support for uninsured, underinsured, and undocumented seniors.

2. Provide funding for culturally competent, in-language, and senior-focused mental health clinicians, individual sessions, support groups, and resources so seniors can access them for free or at a subsidized cost.

3. Center CBOs that provide culturally-competent and language-accessible mental health support in City service delivery by providing institutional support and funding. This is especially important as our CBOs are expected to care for community members who are quickly discharged by public clinics and hospitals or who are otherwise denied service because of insurance issues or other systemic barriers.

4. Invest in infrastructure for small CBOs to retain bilingual and bicultural clinicians.
The Asian American Federation’s Seniors Working Group (SWG) is the only Asian senior-focused advocacy coalition in New York City, and we are made up of 12 organizations\(^1\) serving approximately 125,000 low-income seniors. Our purpose is to identify and address the greatest needs of Asian seniors ages 50 and above by amplifying common points of advocacy and sharing resources and best practices for the challenges our community members face.

SWG members and the clients they serve span a diverse range of geographies and experiences. Before and during COVID, our organizations have addressed the needs of our seniors, serving populations ranging from the hundreds to the hundreds of thousands. The seniors we surveyed live in every borough of New York City except Staten Island and represent 10 different ethnicities and 12 different languages.

Despite their enormous diversity, our Asian senior community faces many common challenges in their daily lives. At the same time, because of their vast differences, their needs are frequently overlooked.

\(^1\) The Seniors Working Group comprises of the following organizations: Asian Americans for Equality; Brooklyn Chinese-American Association; Council of Peoples Organization; Chinese-American Planning Council; Homecrest Community Services; Hamilton-Madison House; India Home; Japanese American Association of New York; Japanese American Social Services, Inc.; The Korean Community Services of Metropolitan New York, Inc.; South Asian Council for Social Services; and YWCA Queens.
According to our 2016 report on Asian seniors, Asian seniors are New York City’s fastest-growing senior population. There are over 390,000 Asians ages 50 and above, making up 15% of the total population of 50+ seniors. Asian seniors are also among the poorest in the City; 42% of Asian seniors ages 50+ are poor or low-income, compared to 36% of non-Asian seniors.

Community-Based Organizations

Our senior-serving CBOs are overextending themselves to provide services to their clients, especially during COVID and a time of heightened anti-Asian violence. All surveyed CBOs provide food support, healthcare access, and translation/language support services. The majority of them also provide social service and government program access; technology access and usage support; and mental health and social isolation support. They also participate in advocacy efforts, including contacting elected officials, forming partnerships with other organizations, and testifying at public hearings.

Our CBOs have regularly proven themselves as the primary conduits between our most marginalized and vulnerable citizens, and the community resources they need.
Challenges Facing Asian Seniors

The seniors we surveyed regularly use the resources their CBOs are offering, particularly senior centers, healthcare access support, and food support. However, there are still many obstacles that prevent seniors from getting the services they need:

- Approximately 68% of seniors need English to be translated into one of 12 languages.
- Even in our increasingly virtual world, 35% of seniors do not have a technology device that can access the Internet, and 51% of seniors are not comfortable accessing the Internet, whether or not they have the technology.
- Approximately 30% of seniors live alone, and 37% do not have daily contact with family, friends, or neighbors they do not live with.

When one of our CBOs realized our seniors were afraid to leave their homes—even for groceries—they started meal-delivery programs that doubled as wellness checks to provide both basic needs and social isolation support. Another CBO distributed safety whistles along with food to seniors, and once senior centers opened up, another put seniors on a rotating schedule so everyone would have a chance to attend different in-person events. They have done all this while dealing with limited staff capacity and funding obstacles; only 60% currently receive funding from DFTA.
## Services or Resources Seniors Use

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Service/Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1%</td>
<td>Anti-Asian violence reporting and safety resources</td>
</tr>
<tr>
<td>18.4%</td>
<td>Food support</td>
</tr>
<tr>
<td>22.8%</td>
<td>Healthcare access</td>
</tr>
<tr>
<td>6.5%</td>
<td>Mental health and social isolation resources</td>
</tr>
<tr>
<td>6.5%</td>
<td>Technology access and usage support</td>
</tr>
<tr>
<td>13.8%</td>
<td>Social service and government program access</td>
</tr>
<tr>
<td>23.3%</td>
<td>Senior centers</td>
</tr>
<tr>
<td>3.3%</td>
<td>Elder abuse support</td>
</tr>
</tbody>
</table>
These obstacles and others compound each other, and they are even greater for our many low-income seniors: 89% use Medicare and/or Medicaid, and 30% report that they do not have enough income to cover all of their monthly expenses. For example, when seniors were trying to register for the COVID vaccine in Spring 2021, both the digital divide and language barriers made it nearly impossible for them to make an appointment. These factors, combined with isolation caused by COVID and anti-Asian violence, made it difficult for seniors to request support from family members or trusted community organizations.

The challenges Asian seniors face have far-reaching consequences, and each issue—and solution—is inextricably linked to the next.

“I would be happy if I could receive welfare and medical care smoothly without needing to speak English.”

— Participant of AAF’s Community Needs Assessment Survey
JOINT POLICY PRIORITIES

Our policy priorities are:
1. Protecting seniors from anti-Asian violence;
2. Promoting access to direct services, including senior centers, social services, and food programs; and
3. Combating mental health and social isolation.

Protection from Anti-Asian Violence

Since the pandemic, anti-Asian violence has sky-rocketed. Though reports of hate incidents do not dominate the news as much as they did a year ago, our seniors continue to struggle with long-term fear that threatens to permanently change the way they live. Multiple senior-serving CBOs report that their clients are afraid to leave their homes for any reason because of anti-Asian violence. If they must travel, they strongly prefer to travel only to places they feel at ease and avoid taking public transportation. Their fears are not unfounded.

NEWS ARTICLES COVERING ANTI-ASIAN HATE

Source: Various news headlines from U.S. media
According to Stop AAPI Hate, seniors reported 6.9% of all hate incidents across the US from March 2020 through June 2021, and more seniors submitted reports in 2021 than in 2020. In just the span of a few months in NYC, an elderly Filipina nurse was brutally attacked both verbally and physically on the subway while passing out free masks. And another senior, an Asian American nonprofit leader and lifelong advocate for low-income immigrants was attacked while walking in her neighborhood in Chinatown.

We anticipate this violence will continue at this scale at least for the next few years, as racist rhetoric first amplified by the Trump Administration continues to fuel violence toward Asian American communities. We have every expectation that this crisis will fundamentally impact how our seniors engage with their community and the services they need for a long time after.

Even before City agencies could respond, our CBOs have been on the frontlines making a real difference in the lives of our seniors through anti-Asian violence reporting and safety resources. For example, Homecrest Community Services is partnering with The Black Institute to facilitate cross-community conversations about safety. They are also working with Council For Unity to engage local schools to raise awareness about anti-Asian violence. AAF’s own Hope Against Hate Campaign is being implemented to improve reporting capacity, re-imagine existing victim resources with an eye on cultural competence, and expand preventive solutions.

To help seniors overcome tremendous linguistic, technological, and social barriers to accessing these resources, we recommend the City:

1. Make permanent and expand funding for the AAPI Community Support Initiative to deliver critical resources such as in-language anti-violence trainings and reporting tools that CBOs seniors can trust.

2. Restore and make permanent funding to the Hate Crimes Prevention Initiative.

3. Issue RFPs that have a multifaceted approach to combating anti-Asian hate that highlights all the ways our CBOs and community members keep each other safe, such as mutual aid, rideshare, and protective accompaniment programs.
Direct Service Support

Senior Centers: A Source of Hope

From June 2020 to December 2021, CBOs were mandated to operate at 25% capacity to follow COVID guidelines. Even at this significantly reduced capacity, they still needed full staff and services available to clean, host sessions, and facilitate hybrid activities. As reopening continues and that capacity increases, senior centers need more staff to carry out their services, as all these tasks take much longer than they did before the pandemic.

Due to language and technological barriers, one of our CBOs that made the switch to virtual classes reported that facilitators had to provide individual guidance for two hours per senior just to set up the technology required to access one session. Another CBO reported that virtual sessions are simply underutilized because their seniors lack the necessary devices and data plans.

Senior centers, in addition to being a hub for social services and community, are also a source of hope. Despite their anxieties about COVID and anti-Asian violence, the vast majority of seniors want to visit them again. Seniors expressed a desire to have leisure and exercise equipment as well as educational classes, at senior centers. These also help combat mental health issues and social isolation, which is our third priority.

To make the work being done at senior centers sustainable during and after COVID, we recommend the City:

1. Increase contract and discretionary funding for senior centers to hire staff and volunteers to meet the increased needs of and grow their hybrid model programs to meet full capacity.

More than 80% of seniors want to go back to senior centers
2. Engage Asian senior-serving CBOs regularly throughout the reopening process to clarify changing guidelines, provide support to CBOs to meet them, and hear how the guidelines impact their clients.

3. Provide funding to cover the cost and distribution of digital devices to seniors, and to train seniors to use the devices.

4. Negotiate with internet providers to provide free wifi/data to our seniors, including trainings and device access.

5. Designate a point person or team at DFTA to provide updates and answer questions about changing regulations.

Food Programs: More than Just a Meal

Our seniors have been so traumatized by COVID and anti-Asian prejudice to the point where some are unable to leave their homes to get food. Our survey revealed that food assistance is the second-highest priority for CBOs, due largely to the daily and recurring urgency of our seniors’ basic needs. Our findings are backed up recently by an article in Bloomberg that found:

“A surge in anti-Asian hate crime across the U.S. has made the most vulnerable in the community, especially seniors, more afraid to leave their homes. For the low income, that can translate to worsening hunger. Adults in Asian households were twice as likely to report not having enough to eat because of fear of going out than their White counterparts, a government analysis showed last year.”

Only Asian-serving CBOs consistently provide culturally competent food that Asian seniors will eat, and seniors frequently choose which centers to visit based on the quality of their food. As a result, Asian seniors are particularly at risk of food insecurity and malnutrition. Our groups wanted to distribute bags of ethnic groceries at the start of the pandemic so seniors could stay home, but DFTA paused the raw food budget at the time. Even at present, there is a lack of adequate DFTA funding available for delivery and grab-and-go meal programs. Whereas communal meals could be a vital opportunity to foster connection and combat isolation, our CBOs report that the only reliable way to consistently feed their seniors is through grab-and-go meals. Seniors have lined up around the block to pick up a portion, regardless of the weather or temperature. This is because, for over a year, senior centers were restricted by the 25% occupancy limit set by the City, despite many seniors being vaccinated and eligible to visit restaurants and other indoor spaces. While this limit was meant to protect seniors, in reality, these restrictions can make it more difficult to deliver services.
These meal programs are often the only reliable point of contact our CBOs have with their seniors, and offering other essential services at the same time and place as meal programs is our best opportunity to reach seniors. Our CBOs are also the only ones who have the language capabilities to support our seniors, especially when the digital divide is making services more difficult to access than ever before.

To nourish our seniors and connect them to resources, we recommend the City:

1. Provide timely additional funding for staff members to put together meals and manage volunteers for meal delivery.

2. Adjust DFTA RFP guidelines to:
   a. Prioritize CBOs with a history of executing culturally competent meal delivery programs, and
   b. Provide timely funding for full case management staff and services for seniors.

Mental Health and Social Isolation

While mental health challenges and social isolation are heightened due to COVID and anti-Asian violence, they are long-enduring issues in our community. Of the seniors we surveyed, 30% live alone, and 37% do not have daily contact with people they do not live with. When our seniors also have difficulty accessing the internet, this means many are thoroughly isolated.

Our CBOs also report that seniors are usually interested in emotional support and behavioral health programs that are free or can be billed to their insurance. So, they have provided creative non-clinical programs to support seniors. One CBO is experimenting with calling in-person group therapy a “tea party” to reduce stigma,
and another is organizing social activities like origami folding with children. In this process, our members have learned that Asian seniors need to spend significant time building trust among each other in support groups, regardless of whether or not the groups are labeled as therapy. Alongside these group activities, seniors also need to receive individual sessions to build trust and reinforce the learnings and relationships group activities foster.

To meet the mental health needs of our seniors, we recommend the City:

1. Release DFTA RFP guidelines that emphasize novel methods of delivering culturally competent mental health care. This includes prioritizing groups that deliver nonclinical interventions to increase access to support for uninsured, underinsured, and undocumented seniors.

2. Provide funding for culturally competent, in-language, and senior-focused mental health clinicians, individual sessions, support groups, and resources so seniors can access them for free or at a subsidized cost.

3. Center CBOs that provide culturally-competent and language-accessible mental health support in City service delivery by providing institutional support and funding. This is especially important as our CBOs are expected to care for community members who are quickly discharged by public clinics and hospitals or who are otherwise denied service because of insurance issues or other systemic barriers.

4. Invest in creating infrastructure for small CBOs to retain bilingual and bicultural clinicians.
METHODOLOGY

These priorities are based on data gathered from our members and their clients through SWG meetings, a CBO Needs Assessment Survey conducted in June 2021 with 15 CBO respondents, and a Community Needs Assessment Survey conducted in July and August 2021 with 153 Asian senior respondents. Both surveys were created by the Asian American Federation, then distributed to SWG member organizations to either complete themselves or administer with their Asian senior clients. The Community Needs Assessment Survey was delivered in five different Asian languages physically, telephonically, and electronically according to seniors’ accessibility needs. This survey captured our seniors’ demographic information, issue area priorities, service needs, and service usage behaviors, while the CBO Needs Assessment Survey captured our member agencies’ current areas of work and programmatic priorities moving forward.

We came to our collective policy priorities by focusing on unique short- and medium-term needs that would lay the foundation for sustained, long-term senior service support. As a result, some important issue areas, like healthcare and wellness and translation and language support, are not highlighted explicitly in our SWG policy agenda, but are embedded in the context of our priority areas.
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Homecrest Community Services

Japanese American Association of New York

Japanese American Social Services, Inc.

Korean Community Services of Metropolitan New York, Inc.

South Asian Council for Social Services

YWCA of Queens
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