



DIVERSE
ELDERS
COALITION

SECURING OUR FUTURE

ADVANCING ECONOMIC SECURITY
FOR DIVERSE ELDERS

*A report of the Diverse Elders Coalition
in partnership with the Insight Center for Community Economic Development*

ABOUT THE DIVERSE ELDER'S COALITION

Seven organizations formed the Diverse Elders Coalition (DEC) in 2010 in an effort to improve the quality of life for this country's racially and ethnically diverse older adults and LGBT elders. This unique and one-of-a-kind coalition promotes policy changes and programmatic solutions that respond to the needs of a significantly growing but often ignored population. DEC consists of:

- Asociación Nacional Pro Personas Mayores (ANPPM)
- National Asian Pacific Center on Aging (NAPCA)
- National Caucus and Center on Black Aged, Inc. (NCBA)
- National Hispanic Council on Aging (NHCOA)
- National Indian Council on Aging (NICOA)
- Services and Advocacy for GLBT Elders (SAGE)
- Southeast Asia Resource Action Center (SEARAC)

For more information, visit www.diverseelders.org.

ABOUT THE INSIGHT CENTER FOR COMMUNITY ECONOMIC DEVELOPMENT

The DEC contracted with The Insight Center to write this report. The Insight Center for Community Economic Development, formerly the National Economic Development and Law Center (NEDLC), is a national research, consulting and legal organization dedicated to building economic health in disenfranchised communities. The Insight Center's multidisciplinary approach utilizes a wide array of community economic development strategies including promoting industry-focused workforce development, building individual and community assets, establishing the link between early care and education and economic development, and advocating for the adoption of the Self-Sufficiency Standard as a measurement of wage adequacy and as an alternative to the Federal Poverty Line. Susan E. Smith was the lead author, with research and writing assistance by Anne Price and Eric Gerard Parsons, and design assistance by Esther Polk.

For more information, visit www.insightccd.org.

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ELDERS ARE OUR STRENGTH

The United States is growing both older and more diverse. Diverse elders (see text box for definition) bring expertise, wisdom, experience, language, cultural and institutional knowledge, and countless other contributions to their own communities and to the nation as a whole. The more the talents of all communities are cultivated—regardless of age, race, gender, ethnicity, sexual orientation or gender identity—the stronger we are as a nation.

As a more diverse and burgeoning segment of society, older adults contribute to the economic, political and cultural landscape of our country. Diverse older adults are (or once were) entrepreneurs, teachers, farm workers, doctors, municipal workers, engineers, civil servants, factory workers, corporate and government leaders, nonprofit workers, attorneys, and manual

A NOTE ON TERMINOLOGY

“Diverse elders” or “diverse older adults” in this report refer to the racial/ethnic populations represented by the Diverse Elders Coalition member organizations: African Americans, Asian American and Pacific Islanders, American Indians and Alaska Natives, Southeast Asians, Hispanic populations, and lesbian, gay, bisexual, and transgender older adults.

these elders negatively—as a burden and problem to be addressed, rather than as a resource to be honored and cultivated.

“Elders are the backbone of Southeast Asian American communities. They are the glue holding families together, often raising grandchildren while their parents work. They are hard-working and entrepreneurial in spirit, feeding their families from gardens that they tend to themselves. Unafraid to speak out, Southeast Asian American elders are also civically engaged in their churches, temples, and communities. They pass on histories that would otherwise be forgotten—and through these stories, they teach younger generations about resilience.”

- Doua Thor, Executive Director, Southeast Asia Resource Action Center

laborers. These are the older persons who worked in our factories, picked our food, served in our military, and helped rebuild the American infrastructure. Today, many diverse older adults volunteer at their places of worship, tutoring the underprivileged, providing daycare services, and running food pantries. Some care for grandchildren who might otherwise end up in the foster care system. Others serve as the financial anchor of their family. Yet, despite these many contributions, mainstream society often views

Regardless of perception, ethnicity, heritage, culture, gender, sexual orientation, or gender identity, older adults want to live their later years with dignity through economic security, access to needed health services, decent housing, and freedom from ageism. Many want to remain active in society: participating in the creation and implementation of policy; volunteering in positions appropriate to their time and interests; and forming movements or associations that serve the country at large.

DIVERSE ELDER'S AND THEIR STRUGGLES

Large numbers of diverse elders face financial difficulty. In part, the causes of this economic insecurity have roots in past discriminatory practices, when redlining, segregation, and labor market discrimination was the norm. For example, starting in the 1930s and carrying through World War II, the Federal Housing Authority (FHA) subsidized home mortgages to increase homeownership, but of the \$120 billion in new housing financed by the FHA and the Veterans Administration in its first 30 years, 98 percent went to white first-time home purchasers.¹ While great strides have been made in recent years to protect against housing and employment discrimination, discrimination still persists, and elders often suffer the cumulative consequences of a lifetime of discriminatory practices. While the experiences of different groups of diverse elders have some commonalities, American Indian

more than 390 treaties. These binding treaties put an end to fighting and resulted in lands “reserved” for tribes, but they also led to the involuntary relocation of American Indian people, whose livelihood depended on East Coast ecology.³ Furthermore, the United States government held the underlying fee title to many tribal lands.⁴ While the original intention was for the United States to be a guardian, or “trustee,” loss of ownership and control of land has been a detriment to economic development in Indian country.

Today, more than 500 tribal governments are recognized by the United States government, with the Cherokee Nation having the largest membership.⁵ Each tribal government has its own form of self-governance. Seventy-eight percent of AI/AN people live off-reservation and 22% live on reservations,

“American Indians and Alaska Natives are the first Americans. Our Elders share creation stories and Legends to pass from one generation to next generation. Knowing who you are and where you come from gives us the strength and motivation to live life as a part of a community--from the beginning of life to the end. Many of our communities may not always have monetary wealth or economic stability readily at our finger tips but we can laugh, sing, pray, and provide the love and care that connects one generation to the next. The wealth in Indian country is Kinship.”

- Randella Bluehouse, Executive Director, National Indian Council on Aging

and Alaska Natives (AI/AN) possess a unique political status and history that have resulted in a very distinct set of challenges. Between 1887 and 1934, the U.S. Government seized 90 million acres, nearly two-thirds of all reservation lands, from Indian tribes without compensation and gave it to (mostly) white settlers.² With the relationship between the United States and Indian tribes set as one of a sovereign government to another sovereign government, the United States and Indian tribes ultimately negotiated, signed and ratified

according to the latest public figures.⁶ Many have left reservations to seek economic opportunities elsewhere. Once an AI/AN leaves the tribe, however, they lose their political status and their tribes are no longer obligated to provide them with benefits. In theory (but not always practice), off-reservation AI/ANs are eligible for services administered by county and state governments.

“Whether arriving as new immigrants, refugees, or relocating from U.S. territories in the Pacific Islands, Asian American and Pacific Islander older adults share common challenges with other diverse elder populations. The ability to overcome barriers and adapt to a new language, culture, social and economic system is evidence of AAPI and other diverse elder populations’ strength, courage and determination. The wisdom and depth of experience of older adults enrich our communities and contribute to a better society.”

- Christine Takada, President & CEO, National Asian Pacific Center on Aging

This unique historical, political, and economic context of AI/ANs has a direct bearing on the kinds of opportunities—and services—available to them throughout their lives. One key statistic highlights how these kinds of challenges have disproportionately affected the economic condition of AI/AN people: 28 percent of AI/AN populations were living in poverty as of 2010, almost twice that of the nation as a whole (15 percent).⁷

While their circumstances and histories are different, African American, Hispanic, Asian American and Pacific Islanders (AAPI), and lesbian, gay, bisexual and transgender (LGBT) elders also experience disproportionately higher poverty rates, as measured by the official Federal Poverty Thresholds (Thresholds).⁸ Nearly 10 percent of AAPI elders have incomes below the Federal Poverty Thresholds⁹, and one-third of Hmong, one quarter of Cambodian, and 15 percent or more of Laotian, Korean, Vietnamese, and Samoan elders have incomes below the Thresholds, compared to 9 percent of all American elders and 7 percent of non-Hispanic white elders.¹⁰ Similarly, while African American older adults make up only 9 percent of the elderly population, they represent 21 percent of the elderly population living below the Federal Poverty Thresholds. And one out of every six (18 percent) of older Hispanics live in poverty.¹¹ According to a more nuanced measure of economic well-being, the Senior Financial Stability Index¹², 52 percent of African

American elders and 56 percent of Latino elders are “economically insecure,” meaning they do not have adequate resources to maintain a secure standard of living for the remainder of their lives.

While there are no public data sources on elder LGBT poverty (a significant problem in and of itself), a study by the Center for Social Policy at the University of Massachusetts Boston found that 24 percent of lesbians and 15 percent of gay and bisexual men have incomes below the Federal Poverty Thresholds, compared to 19 percent and 13 percent of heterosexual women and men, respectively; this disparity is also shown to persist as LGBT people age.¹³ LGBT elders of color, moreover, face the compounding effects of discrimination based on race, gender identity, and sexual orientation, all of which impact economic success.

Women, especially, are vulnerable during their retirement years. Unpaid caregiving, long considered “women’s work,” can jeopardize a woman’s potential for economic security. Women constitute 75 percent of all older Americans who fall below the official poverty line. Older Latinas face the highest elder poverty rates (43.1 percent), followed by older African American women (34.7 percent).¹⁴ Lesbian couples also face higher poverty rates than their gay male counterparts, and much higher rates than their heterosexual counterparts.¹⁵

DIVERSE ELDERS ON THE RISE

The elder population is growing exponentially, and becoming increasingly diverse. In the coming years, older adults will shift the balance of population majorities and minorities, altering demographics for years to come. The number of people age 65 and older is expected to double over the next 30 years. By 2050, it is expected to reach 80 million people. **Today, one in five older adults is Latino or non-White. By 2030, this number is projected to be almost one in three.** Over the next 40 years, AAPI elders will have the largest relative population growth among all elders. And, LGBT baby boomers now reaching retirement age are the first “out” generation of elders in our history. By 2030, the number of LGBT older adults will double to more than 4 million.¹⁶

Given these changing demographics and the baby boomer explosion, the cost to the nation of not addressing the economic condition of diverse older adults may in the end be higher than it would to actually address this issue in some way. For example, in the healthcare arena, uninsured or under-insured older adults more frequently visit the emergency room, driving up healthcare costs for everyone. Without community supports to help older adults transition from the hospital back into communities, more elders end up re-hospitalized.

Demographics, of course, can also influence votes. If mobilized in communities across America, older adults and diverse elders in particular have the potential to shift the balance of political power in the United States to protect, expand, and increase access to public policies that directly affect their economic well-being: Social Security, Supplemental Security Income, Medicare, Medicaid, Affordable Care Act, Supplemental Nutrition Assistance Program, Senior Community Service Employment Program, and other critical programs.

PROGRAM SPOTLIGHT:

NHCOA'S EMPOWERMENT AND CIVIC ENGAGEMENT TRAINING

The National Hispanic Council on Aging's (NHCOA) Empowerment and Civic Engagement Training (ECET) helps Hispanic older adults, their families, caregivers, and grassroots leaders become their own best advocates for policies and programs that impact their lives. The Hispanic community cherishes older adults, and ECET demystifies public policy advocacy by building on the power and strength of Hispanic older adults' collective voice and wisdom.

The ECET's customized curriculum is designed to inspire, motivate, and provide participants with the tools needed to advocate for policies that advance economic security, health, housing, and leadership development in Hispanic communities across the country. Over the years, NHCOA has trained hundreds of Latino seniors and community members, including grassroots leaders, who are currently leveraging their advocacy skills in different arenas to improve the lives of Hispanic older adults, their families, and caregivers. In the words of one participant, Maria Teresa Guzman: “[NHCOA is] multiplying leadership through us. If these thirty some people trained today can reach at least two people, in one or two weeks we will double. And, in few more weeks, they will train others and we will multiply again, and so forth.”

All of this calls for an urgent re-evaluation of the priorities of public policy, government spending, philanthropic initiatives, and how society views elders. The task we face today is how to rethink policies to create new opportunities for diverse communities to achieve greater economic security, fairness and equity. Doing so requires a multifaceted approach with both short- and long-term policy goals, and an unprecedented level of energy, focus, and political mobilization among diverse older adults, and the communities that care for and about them.

This report describes a number of policy and program reforms that, taken as a whole, would significantly improve the economic well-being of elders across the lines of race, ethnicity, sexual orientation, and gender identity.

In the short-term, the priority should be to preserve critical programs such as Social Security and Medicare that have been proven to work; in the long-term, the focus should be on expanding access and enrollment to these kinds of programs and others, so that more diverse elders can benefit.

The recommendations are divided into two sections: the first section focuses on important policy reforms; the second section focuses on successful models for replication, as well as improvements needed to make existing programs more accessible for diverse communities.

PROGRAM SPOTLIGHT:

**NAHE'S
EMPLOYMENT PROGRAM**

For more than 37 years, the National Association for Hispanic Elderly (NAHE) has been at the forefront in providing job opportunities for older workers. With a special focus on diversity in the workforce, NAHE has provided over 55,000 jobs to Hispanics and other low-income older workers in 12 states and the District of Columbia. NAHE's primary goal is to help provide job opportunities for mature workers—respecting the experience, knowledge, dependability and dignity that each older worker brings to their job. NAHE's older worker employment program can be summarized in a simple Spanish phrase: “No quiero que me den, sino quiero que me pongan donde hay”...“I don't want to be given a hand out. I want to be in a place where I have the opportunity...”

POLICY REFORMS

PRESERVE AND REFORM SOCIAL SECURITY AND SUPPLEMENTAL SECURITY INCOME

As the foundation of economic security for generations of elders, Social Security lifts millions of elders out of poverty and prevents millions more from falling into poverty. Without Social Security, according to one study, 45 percent of all Americans aged 65 or older would have been living on incomes below the Federal Poverty Thresholds in 2008.¹⁷ And yet, policymakers are now considering cuts to Social Security, a prospect that not too long ago would have been considered politically unthinkable.

We must not only preserve the current Social Security system in the short-term, but in the long-term, we must also make it more inclusive (e.g. of same-sex partners, non-married partners, etc).

Diverse elders are disproportionately dependent on Social Security and Supplemental Security Income (SSI) to make ends meet. And yet, certain populations have historically been, and continue to be, excluded due to restrictions on eligibility. At the same time, other groups receive less than they otherwise would be entitled due to traditional definitions of marriage, workers being paid off the books, or other causes.

Below are some of the most important changes necessary to improve Social Security for diverse communities in the long run:

- **Broaden the concept of “family”** from the nuclear version of husband, wife, and children to account for broader types of household arrangements: specifically, same-sex couples and heterosexual couples who are not married. Policymakers should also extend spousal benefits, survivor benefits, and the one-time death benefit to include same-sex partners of LGBT elders.
- **Provide an enhanced minimum benefit for low-wage workers.** This “special minimum benefit” would provide full career (30-year) minimum wage workers a benefit of no less than 125 percent of the Federal Poverty Guidelines.¹⁸
- **Finalize the Consumer Price Index for the Elderly¹⁹ and use it to calculate Social Security’s cost of living adjustment.** Social Security’s cost of living adjustments are used to make benefits match inflation. However, the way the cost of living adjustment is currently calculated does not accurately reflect elders’ expenses. A Consumer Price Index for the Elderly would increase Social Security benefits to match rising costs of the goods elders buy the most, such as prescription medication and health care.

- **Improve enforcement of employee versus independent contractor labor classifications.** Janitors, maintenance workers, construction workers, truck drivers, domestic care workers, and other low-wage workers are often misclassified by their employers as independent contractors so that the employer does not have to pay minimum wage, overtime, or Social Security payroll taxes. Immigrants and people of color disproportionately hold these kinds of jobs and, therefore, not only get paid less than they otherwise would, but they also end up receiving less in Social Security.
- **Provide a caregiver's Social Security credit** for those caring for dependent relatives. For example, caregivers could receive the amount of Social Security benefit equivalent to what they would have been allocated if they were actually compensated during their years of caregiving.²⁰
- **Provide paid family leave through Social Security.** The United States is the only developed country that does not require that workers have access to paid leave for the birth of a child or to care for a seriously ill family member. This proposal would enable workers to access Social Security disability benefits so they have income when they need leave from work due to the birth of a child or a serious illness.²¹ Such a proposal would enable more people to care for elderly family members.

POLICY SPOTLIGHT:

SUPPLEMENTAL SECURITY INCOME

For many low-income, elderly and/or disabled Southeast Asian American refugees, Supplemental Security Income (SSI) is a critical program. With payments of \$698 a month for individuals and \$1,048 for couples in 2012, SSI provides a bare minimum income for basic necessities for individuals unable to work due to age and/or disability.

Many Southeast Asian American refugee elders who depend on SSI are veterans who fought alongside American troops in Southeast Asia during the Vietnam War. In the aftermath of the war, they were forced to flee from their homelands in fear of persecution because of their allegiance to the U.S.

Under welfare reform in 1996, refugees and humanitarian immigrants must naturalize within seven years of arriving in the United States to remain eligible for SSI. However, many refugee elders struggle to naturalize within this time due to numerous barriers, including:

- difficulty in learning or retaining necessary information due to age, disability, or educational background
- medical circumstances, such as Post-Traumatic Stress Disorder, from the war experience
- financial cost of naturalization
- lack of accessible resources
- language barriers

In 2008, a two-year extension allowed many refugees to continue to receive SSI benefits after the seven-year deadline. These extensions expired on September 30, 2011 and as a result, many low-income Southeast Asian American refugee elders are now at risk of destitution. A long-term solution is needed to address the seven-year cut off of SSI, including more vigorous support and resources for elders seeking to naturalize, and ultimately, the de-linking of naturalization from SSI eligibility for this population.

- **Delink citizenship from eligibility for Supplemental Security Income.** SSI is a federal income supplement program to help the aged, blind, and disabled who have little or no income by providing cash to meet basic needs. It is available to citizens and historically was available to unnaturalized refugees and asylees, until welfare reform was enacted in 1996. Now, refugees and asylees are only eligible for seven years. Though many refugees do naturalize within that time, a small segment are unable to for reasons of age, infirmity, or disability.

Policymakers must take reasonable steps to not only keep the Social Security Fund solvent but to also pay for the program improvements discussed above in a way that does not penalize low-income people.

- **Remove the payroll tax cap, or raise it to cover 90% of wages from the current \$110,100 to \$180,000.** This would cause those making above that amount to pay their fair share. The Social Security tax is capped now at 6.2 percent of \$110,100. In 1983, the ceiling was set so the Social Security payroll tax would apply to 90 percent of all wages covered by Social Security. Today, though, the Social Security payroll tax applies to only about 84 percent of total income. To go back to 90 percent, the ceiling on income subject to the Social Security tax would need to be raised to \$180,000. Doing so would keep Social Security fully solvent for more than the 26 years that the Social Security Trust Fund is projected to pay full benefits.²²

PRESERVE AND PROTECT MEDICARE AND MEDICAID

MEDICARE

Cuts to Medicare or Medicaid have a direct and disproportionate impact on diverse elders. Among those over age 55, 46 percent of Latinos are covered by Medicare, 43 percent of Asians, and 52 percent of African Americans. For all races, those not solely receiving Medicare coverage receive health insurance through a variety of other providers: military health care, Medicaid and private insurance, Medicare and private insurance, or Medicaid and Medicare. Preservation of Medicare and Medicaid is critically important to the health and economic well-being of diverse elders.

MEDICAID

As with Social Security, not all senior populations have equal access to important protections under Medicaid. For example, same-sex couples in most states are excluded from “spousal impoverishment” protections.²³ Medicaid, the single largest payer of long-term care in the U.S., requires an individual to spend down all of his/her assets in order to become eligible for long-term care coverage. For married heterosexual couples, however, Medicaid has exemptions to avoid forcing a healthy spouse to give up all resources, and live in poverty, in order to qualify a spouse for long-term care. Unfortunately, these spousal impoverishment protections do not apply to same-sex domestic partners. While the Obama Administration recently notified states that they are allowed to correct these inequities, *further action should be taken to require states to extend spousal impoverishment protections to same-sex couples.*²⁴

FULLY IMPLEMENT THE AFFORDABLE CARE ACT

The Affordable Care Act includes expansion of Medicare and Medicaid; full implementation of the law, however, will be vitally important to the health and economic well-being of diverse populations. Funding should be directed to ensure significant outreach to low-income and diverse communities, so that the new benefits of Medicaid and Medicare and other expanded programs actually reach them. According to the Kaiser Family Foundation,

“[t]he Patient Protection and Affordable Care Act, contains many provisions that will likely impact the health of and health care received by people of color. Chief among them are the expansions in coverage, since people of color are disproportionately represented among the uninsured. While the coverage expansions promulgated by the health reform law will not be sufficient to eliminate health disparities, they are a necessary first step.”²⁵

PROGRAM SPOTLIGHT:

SAGEWORKS

Starting a job search is never an easy process, especially for LGBT older people, who may be dealing with ageism and a lifetime of social stigma that has disrupted their ability to earn a living. In 2010, Services and Advocacy for GLBT Elders (SAGE) launched SAGEWorks, a work readiness program for LGBT people age 40+ to improve their capacity to remain productive and vital participants in today’s job market. Now in five sites across the country, SAGEWorks helps LGBT older adults: gain a deeper knowledge and understanding of job search strategies and employment resources; increase technology and job skills; and increase income and overall financial security.

SAGEWorks currently serves nearly 300 LGBT older adults in the New York City site alone. “Due to SAGEWorks, I was able to find a part-time position as a Personal Assistant to a wonderful woman,” explains program participant Carol Alessi. “The skills I learned at the computer classes have helped me on a daily basis. And I know the workshop on interviewing is what really helped me land the job.”

EXPAND AND STRENGTHEN SENIOR EMPLOYMENT PROGRAMS

While reducing barriers to employment equity among diverse communities is a long-term project which will take decades to address, older adults need income-generating opportunities now.

There is only one federal employment program for low-income older adults: the Senior Community Service Employment Program (SCSEP). In SCSEP, program participants are provided with part-time, subsidized employment at non-profit and public agencies, while they receive training, job placement assistance, and supportive services. A recent Government Accountability Office study found that SCSEP was one of the few non-duplicative federal programs in existence.²⁶ Despite this finding, SCSEP recently suffered a 45 percent cut to its budget, reducing those served from 78,021 to 46,125 annually.²⁷

SCSEP remains a vital link to employment, community service, and job training for diverse elders; given the growing need, it should be expanded, not cut.

- Expand SCSEP to reflect the growth and diversity of the aging population. SCSEP operators serving diverse elders across the country experience long waitlists. For example,
 - The National Indian Council on Aging’s SCSEP waitlist is 505, more than its total number of SCSEP slots (476) this fiscal year due to the budget cut.

PROGRAM SPOTLIGHT:

NAPCA SCSEP

National Asian Pacific Center on Aging (NAPCA) enrolls and trains over 1,100 previously unemployed, low-income AAPI older adults age 55 and older, in nine cities across the country. Many immigrant, refugees and Pacific Islanders enroll in the program with multiple barriers to employment including limited English proficiency, low literacy, and poor employment prospects. NAPCA assigns participants to community-based organizations and government agencies to learn on-the-job skills to help them become employable and self-sufficient, while also receiving minimum wages.

“This is my first chance to work,” says Samoan-born SCSEP participant Simamao Lee Casper, “and I’m very proud of it. I am so happy that NAPCA gives me this opportunity to learn and to talk to people. I’m supporting myself with this money I receive. It helps me pay my rent. I don’t want to apply for the SSI now. Other people need it. As long as these legs can take me and I can do my work – my arms, my hands, my fingers still move – I’m not going to retire. I’m going to work.”

➤ The National Asian Pacific Center on Aging's SCSEP program has a waitlist of 300 individuals in nine different cities. The recent cut is projected to reduce NAPCA's program from 1,141 to only 581 participants, while demand continues to increase due to the recessionary impacts.

- Community service should be maintained as a strong program component. In addition to helping older workers achieve self-sufficiency, SCSEP provides an economic boost to communities and much needed assistance to non-profit and public agencies where the older workers provide services.
- Eliminate durational limits for SCSEP. Participants in SCSEP should be allowed to remain on the program, rather than be subjected to time limits.
- Priority service to older individuals with multiple barriers to employment should be maintained as a strong emphasis and the program should continue to provide the full range of customized services and supports that have been proven successful in serving older workers and helping them transition to the workforce.

RAISE THE MINIMUM BENEFIT IN THE SNAP PROGRAM FOR ELDERNS AND INCREASE ACCESS

A study conducted by the University of Kentucky Center for Poverty Research and Iowa State University reveals that relative to their representation in the overall older adult population, African Americans, Latinos, never-married elders, renters, and elders living in the South are more likely to be at-risk of hunger.²⁸

At the same time, elders have the lowest participation rate and lowest benefit levels of any group that qualifies for the Supplemental Nutrition Assistance Program (SNAP, formerly called Food Stamps).²⁹ Elders have lower SNAP benefit levels than younger recipients for two main reasons. First, many elders are eligible for only the minimum benefit, which is \$16/month. Second, the process for documenting out-of-pocket expenses, which is used to determine eligibility, is burdensome and confusing. As a result, over 75 percent of elders claim \$0 in medical expenses, which we know is not accurate. The minimum benefit needs to be raised and a standard medical deduction must be established for elders, allowing those with high out-of-pocket expenses to claim their true medical costs, and therefore increase their benefit levels. States should take steps to simplify the application process, and improve education and outreach.

INCREASE ASSET LIMITS FOR PUBLIC ASSISTANCE ELIGIBILITY

Public benefit programs – like Temporary Assistance for Needy Families (TANF) and Medicaid – limit eligibility to those with few or no assets, making it more difficult for people to build assets over the long-run. Families with assets over a state’s limit must “spend down” savings, for example, in order to receive benefits, which actually increases their economic vulnerability. In some states, owning a vehicle worth more than \$5,000 disqualifies a person from eligibility, yet research indicates that owning a car increases the probability of employment. Increasing asset limits allows low-income people to have a cushion to survive emergencies and enables them to begin to develop emergency and retirement savings and accumulate

assets, so that they escape poverty for good. Increasing asset limits would particularly help diverse populations, who are disproportionately reliant on public benefits due to historic and structural barriers.

INCREASE ACCESS TO TAX-DEFERRED SAVINGS

Just 33 percent of Latino workers and 49 percent of African American workers had access to a workplace retirement plan in 2009. In order to help the next generation of diverse elders become more economically secure, new retirement savings tools must be implemented for all workers, but most especially low-income workers who normally do not work for businesses that offer retirement benefits. Scaling and sustaining incentives like matched savings accounts, linked to financial education, would be a first important step. Extending payroll retirement savings opportunities—through proposals such as an Automatic IRA plan—would also help remedy this situation. The Automatic IRA plan requires

employers (with more than 10 employees) that have been in business for at least two years but do not offer a retirement plan to automatically enroll their workers in a Roth IRA. Plans like these usually require 3 percent of pay to be withheld from employee paychecks and directly deposited into their accounts as the default savings option. (Employees can opt-out, but these plan encourage savings by making the enrollment process easier.)

“The National Hispanic Council on Aging (NHCOA) and the Diverse Elders Coalition reflect the values of our country. We cherish all older adults and stand ready to learn from their wealth of experience and diverse perspectives. Older adults are a national treasure and NHCOA will continue to highlight all they have to offer.”

- Dr. Yanira Cruz, President and CEO, National Hispanic Council on Aging

GROW PROGRAMS THAT CAPITALIZE ON THE SKILLS AND STRENGTHS OF OLDER ADULTS

Programs that recognize, honor, and capitalize on the existing skills of older adults should be replicated throughout the country. The Office of Refugee Resettlement, for example, has a small grants program to help refugee populations cultivate land and then partner with farmers' markets to sell fruit and produce. This program recognizes and capitalizes on the farming skills that many refugees developed in their home countries. Diverse elders bring incredible assets; those assets should more systemically be embraced and cultivated.

BUILD CAPACITY OF MINORITY-, AI/AN- AND LGBT-LED ORGANIZATIONS TO DELIVER MORE PROGRAMS

Culturally, linguistically, and LGBT-competent community-based organizations (CBOs) throughout the country serve a critical role in helping diverse elders enroll in a wide array of programs and services for which they are eligible but would otherwise not receive. Significantly more funding and technical assistance, however, is needed to build the capacity of these CBOs to serve many more people across the country.

In some areas of the country (e.g., Los Angeles and Minneapolis-St. Paul), local area agencies on aging actually contract out Older American Act-funded programs to an array of minority-specific CBOs, so that these services are culturally and linguistically appropriate for diverse communities. While the federal government has also recently begun increasing funding support for LGBT aging-related programs and initiatives in parts of the country, the available dollars remain marginal when paired with the millions of LGBT elders living throughout the country.

PROGRAM SPOTLIGHT:

NICOA'S SAVVY CAREGIVER IN INDIAN COUNTRY

The National Indian Council on Aging (NICOA) is developing a new training module to support caregivers of elders living with Alzheimer's disease and other dementias in Indian Country. Funded through a cooperative agreement with the U.S. Department of Health and Human Services – Administration on Aging, NICOA serves as a National Minority Aging Organization Technical Assistance Center and collaborates on this project with experts in the field of Alzheimer's disease and caregiver education. The project will adapt The Savvy Caregiver program, a widely successful Evidence Based Program, for the special needs of AI/AN elders and their family caregivers. The modified training program will be tested in two Indian communities and the final product will be distributed throughout Indian Country.

EXPAND HOLISTIC ECONOMIC CASE MANAGEMENT TO ORGANIZATIONS MOSTLY SERVING DIVERSE ELDER

Holistic, individualized economic case management is needed to help prevent diverse elders from getting lost in an often fragmented and uncoordinated network of aging services and programs. Recognizing that many older adults fall through the cracks, the National Council on Aging is working with 14 community organizations across the country to provide 5,000 low-income older adults “holistic, person-centered economic case management” which includes: individualized comprehensive assessment, economic action plan, benefits counseling, assistance navigating public and private community resources, and ongoing follow-up.³⁰ Through a combination of economic action plans and personal referrals, older adults are therefore gaining access to a wide range of

“African American seniors have not only witnessed significant changes in American society, but were major contributors to this change. However, with all the gains in civil and human rights, this particular minority group still faces adversity and inequity in many aspects of life.”

- Karyne Jones, President & CEO, National Caucus and Center on Black Aged, Inc.

benefits and services and increasing their economic security.³¹ This promising holistic model should be replicated and expanded to include partnerships with minority-, refugee-, AI/AN- and LGBT-led community organizations.

The National Indian Council on Aging had a similar pilot project in the state of Washington to help AI/AN elders access health, social and other support services through information, assistance, and advocacy. Tribal members were trained to serve as Benefits Counselors and helped AI/AN elders apply for and receive Medicare, Medicaid, Social Security, and Veterans

benefits. Culturally relevant posters, pamphlets and materials were distributed to Indian Elders’ programs and a web-based toolkit was developed for Native American Benefits Counselors. Through partnering with the National Indian Council on Aging and other AI/AN groups, this program should become a national model.³²

CREATE AFFORDABLE, LINGUISTICALLY, AND CULTURALLY APPROPRIATE OLDER ADULT HOUSING

In major metropolitan areas, the waiting lists for senior housing is years long. In Seattle, for example, the wait is five years. In Oakland, elders must apply online and enter a lottery in the hope that their name is selected. New York City also has such a small inventory of senior-specific housing that many low-income elders end up living in projects in high crime neighborhoods.

In many instances across the country, older adults simply die before they become eligible for affordable housing. While the shortage of affordable housing is a problem for many elders in high cost areas, the problem is exacerbated for diverse elders because of linguistic, social, and cultural isolation—and in many instances, overt prejudice and discrimination.

To address this issue, there are some innovative, non-profit models of affordable, and culturally and linguistically appropriate housing developments, funded mostly through low-income housing tax credits.

While anti-discrimination laws prohibit ethnic- or LGBT-specific only housing, projects can be made friendly to these communities through targeted marketing and location.

- In **Oakland**, California, for example, the East Bay Asian Local Development Corporation has developed a variety of affordable housing options for ethnic communities, and special attention is given to cultural awareness, community building, and multigenerational households. Complexes, for example, include a community room, and large as well as small apartment options. Exterior murals depict a multi-ethnic mix of tenants. One such development, called Hismen Hin-Nu Terrace, even borrows its name from the language of the Muwekma Ohlone Indians, who at one time lived in the area, celebrating the ethnic and cultural diversity of all those who have settled in the community.³³
- In **Los Angeles**, the non-profit Gay & Lesbian Elder Housing has developed the first (and currently only) LGBT affordable elder housing complex in the nation: Triangle Square-Hollywood, a 104-unit affordable rental housing complex open since 2007. The Triangle's population is about 90 percent LGBT and 35 of the units are set aside for elders with HIV/AIDS and for those at risk of becoming homeless. The waitlist to get in is about 200 people. Similar projects are underway in Philadelphia, San Francisco, and Chicago.³⁴

PROGRAM SPOTLIGHT:

NCBA HOUSING MANAGEMENT DEVELOPMENT CORPORATION

The National Caucus and Center on Black Aged (NCBA) established the NCBA Housing Management Corporation in 1977 to develop NCBA's first affordable, Section 202 housing project for low-income elderly people in Washington, D.C. Today, NCBA provides subsidized housing to more than 1,000 seniors nationwide. In several cities, NCBA has partnered with other minority development organizations to develop and manage senior housing facilities. This year, all NCBA-owned properties will be undergoing multi-million dollar renovations. These massive renovations will allow seniors to age gracefully, with dignity and with services in place. Still, the demand for NCBA's senior housing continues to exceed the supply or available resources; the current average waitlist to get into a unit is 2 years.

- In **Seattle**, Washington, statewide low-income housing developer Common Ground works in partnership with a wide range of nonprofit and government agencies to fund, create and preserve affordable housing and community facilities. Common Ground has developed affordable housing for AI/AN people located in or near Indian Country as well as projects for elders living in rural parts of the state.³⁵

Affordable, culturally, linguistically and LGBT-friendly housing models like these, however, are the exception. These models should be studied further and replicated nationally. In addition, cultural competency training for staff, and culturally and linguistically competent staffing at existing senior affordable housing facilities would improve housing options for diverse elders.

Lastly, there are some innovative, affordable senior “village” or “concierge club” models, which provide membership-based, low-cost home care services to help older adults age in place. Currently, eighty-nine villages are operating across the country.³⁶ Extending this concept to more diverse communities could also help meet the growing demand for varied, affordable, and culturally appropriate senior housing options.

In considering any future policies or programs aimed at helping older adults reach economic security, policymakers and advocates should consider the following three related principles:

1. Policies and programs must **address past structural barriers** that have often prevented communities of color, AI/AN, and LGBT communities from benefitting. (One clear example of a past structural barrier is the Social Security “occupational exclusions” for domestic and agricultural workers that prevented those workers—who were disproportionately African American—from receiving Social Security benefits until the 1950s when the ban was lifted.)
2. Policies and programs must be **culturally, linguistically and age appropriate** so that diverse older adults have meaningful access to them.
3. **Program participation rates and poverty indicators must be collected by age and race, ethnicity, sexual orientation, and gender identity.** Without data for certain populations, it is difficult to capture their economic status or understand which communities are accessing programs meant to help all economically vulnerable elders. Particular attention should be given to collecting data on the economic status of AI/ANs, Asian American and Pacific Islander subgroups, Hispanic subgroups, and LGBT older adults, since public data sources do not recognize or are very limited for these populations.

Regardless of perception, ethnicity, heritage, culture, gender identity, or sexual orientation, older adults have the capacity and desire to remain integrated in society; to actively participate in the formation and implementation of policy; to serve as volunteers in positions appropriate to their interests, to form movements or associations that serve them and generations to come; and to contribute to the wellbeing of the country as a whole.

In lieu of dismembering programs such as Medicare and Social Security that work to promote health, well-being, and purpose, it is more crucial than ever that communities come together to support solutions that capitalize on the strengths of older adults and encourage independence, foster participation, combat prejudice, and endorse solidarity for everyone.

Communities of color or people of color: the authors use these terms to describe communities of African Americans, Asian Americans and Pacific Islanders, and Hispanic populations. American Indians and Alaska Natives (AI/ANs) and older lesbian, gay, bisexual, and transgender (LGBT) people are referred to as such separately.

Consumer Price Index for the Elderly: the Consumer Price Index (CPI) measures the average change over time in the prices paid by urban consumers for a representative market basket of consumer goods and services. In 1987, Congress directed the Bureau of Labor Statistics (BLS) to begin calculating a consumer price index for the elderly. In response, BLS developed an experimental consumer price index for Americans 62 years of age and older, and found that those aged 65 and older spent more than twice as large a share of their total outlays on health care as did the overall population.

Diverse elders or diverse older adults: the authors use these terms interchangeably throughout this report to describe all of the racial/ethnic populations represented by the DEC member organizations: African Americans, Asian Americans and Pacific Islanders, American Indians and Alaska Natives, Hispanic populations, and lesbian, gay, bisexual, and transgender (LGBT) older adults. The authors also recognize that these racial/ethnic categories are politically contested, neither mutually exclusive nor exhaustive (e.g., multiracial), and often encompass within them a variety of sub-groups with distinct languages, cultures, nationalities, and historical experiences. Finally, the authors recognize that many populations served by DEC organizations use a variety of terms to define themselves and that some community members might not always self-identify as “diverse elders.”

Federal Poverty Guidelines: the Federal Poverty Guidelines are issued each year in the Federal Register by the Department of Health and Human Services. The Guidelines are a simplification of the Federal Poverty Thresholds and are used for administrative purposes — for instance, determining financial eligibility for certain federal programs.

Federal Poverty Thresholds: the Federal Poverty Thresholds are the original version of the federal poverty measure. They are updated each year by the Census Bureau, although the methodology was originally developed in 1962-1963 by Molly Orshansky of the Social Security Administration. To calculate the Thresholds, the cost of a minimally adequate diet is multiplied by three (because, at the time the Thresholds were developed, expenditures on food accounted for one-third of a typical family’s budget). Since the late 1960s, the only change to the Thresholds is that they are adjusted annually for the rise in the cost of living. The resources the current measure counts to establish whether a family is under or over the poverty line is pre-tax cash income. The Thresholds are used mainly for statistical purposes — for instance, preparing estimates of the number of Americans in poverty each year. (All official poverty population figures are calculated using the poverty thresholds, not the guidelines.)

Senior Financial Stability Index (SFSI): Developed by the Institute on Assets and Social Policy (the research institute at The Heller School for Social Policy and Management at Brandeis University) in collaboration with Dēmos, this Index provides an assessment of long-term economic security of senior households throughout their retirement years. Major components of the SFSI are: housing expenses, healthcare expenses, household budget, and home equity.

Temporary Assistance for Needy Families (TANF): TANF is a block grant program to help move recipients into work and turn welfare into a program of temporary assistance. Under the welfare reform legislation of 1996, TANF replaced the old welfare programs known as the Aid to Families with Dependent Children (AFDC) program, the Job Opportunities and Basic Skills Training (JOBS) program, and the Emergency Assistance (EA) program. The law ended federal entitlement to assistance and instead created TANF as a block grant that provides States, Territories, and Tribes federal funds each year. These funds cover benefits and services targeted to needy families.

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⁵Ibid.

⁶See U.S. Department of Health and Human Services Office of Minority Health: <http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=52>

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¹⁶Fredriksen-Goldsen, Karen I. and Hyun-Jun Kim, Charles A. Emler, Anna Muraco, Elena A. Erosheva, Charles P. Hoy-Ellis, Jayn Goldsen and Heidi Petry. (April 2011). "The Aging and Health Report - Disparities and Resilience among lesbian, gay, bisexual, and transgender Older Adults." Institute for Multigenerational Health.

¹⁷Asociación Nacional Pro Personas Mayores, Social Security Insuring Its Effectiveness and Stability, November 2011

¹⁸See President's Commission to Strengthen Social Security, Strengthening Social Security and Creating Personal Wealth for All Americans, Washington, DC.

¹⁹See glossary for more on this index

²⁰See H.R. 2290: Social Security Caregiver Credit Act of 2011 at <http://www.govtrack.us/congress/bill.xpd?bill=h112-2290> for a caregivers credit bill currently under consideration in Congress.

²¹For a current family leave proposal, see Center for American Progress' "Social Security Cares" at http://www.americanprogress.org/issues/2010/02/social_security_cares101.html

²²Robert Reich, "How to Fix Social Security," February 17, 2011, <http://www.readersupportednews.org/opinion2/279-82/4982-how-to-fix-social-security>

²³For more information on which states, see "A State Advocacy Guide for Understanding Spousal Impoverishment Protections, Medicaid and Same-Sex Couples," SAGE.

²⁴For more information, see SAGE's web link here: http://www.sageusa.org/about/news_item.cfm?news=262

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