



**Testimony delivered before the New York City Council's Committee on Aging**

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**OVERSIGHT HEARING:**

**Adapting the Senior Center Model to Meet the Needs of Future Generations of Seniors**

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Good morning, my name is Monica Serrano and I am a Policy Analyst at the United Neighborhood Houses of New York (UNH). UNH is a membership association and leader in promoting and strengthening the neighborhood-based, multi-service, multi-generational approach to improving the lives of today's New Yorkers in need and the communities in which they live. Rooted in the history and values of the settlement house movement, we build the capacity of our member organizations through policy development, advocacy, and supportive services. It is because of this historic and continued commitment to our communities that we appear before you today. Thank you for giving me this opportunity.

There are more than 30 DFTA-funded senior centers within the UNH member network. If you've ever seen seniors eat their lunch at the Good Companions Senior Center on the Lower East Side of Manhattan, or play a friendly game of bingo at the Morris Senior Center in the Bronx, or receive flu shots at the Hudson Guild Senior Center in Manhattan, or participate in salsa dancing at the Senior Center for Active Older Adults in Sunnyside, Queens, then you already understand the importance of senior centers. They are host to a variety of social programs, such as congregate lunches, exercise classes, intergenerational programs, discussion groups, senior advisory councils and advocacy, and special holiday events.

On the most basic level, centers help seniors remain active, independent, healthy, and engaged with others. The connections formed at senior centers often serve as surrogate families for many seniors who no longer have their own. According to a 2001 report by DFTA on senior center utilization, more than 51% of participants attend their center everyday, while another 29% attend three to four times a week.<sup>1</sup> The fact that the overwhelming majority of senior center participants are frequent attendees testifies to the centrality of these centers in many seniors' lives.

Even so, questions remain about the long-term viability of the current senior center model.

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<sup>1</sup> Office of Management and Policy of the New York City Department for the Aging, *Senior Center Utilization Study*, Spring 2001, 22.

A process to redesign senior centers to meet future need must start with a clear understanding of their purpose and target population. The questions that must be considered before moving forward with planning efforts is, What are City-funded senior centers trying to achieve and for whom?

### **The purpose of senior centers**

Most aging service systems are based on one of two frameworks: a *safety net* model and a *wellness* model. Traditionally, senior centers have operated on the *safety net* model, providing essential supportive services, such as meals, transportation, and friendly visiting. Recent years, however, have seen a shift to more of a *wellness* model, which seeks to promote overall health and well-being through a range of activities, such as physical fitness and disease management programs.

The *safety net* model strives to help seniors live in safety and to satisfy personal care needs, including the provision of meals, home health aides, and housing subsidies. This approach often focuses on helping the most vulnerable first, especially low-income and disabled older adults. As such, seniors just above the eligibility requirements for many of these services may not receive adequate help, as they are often also unable to pay out-of-pocket to meet all of their basic needs, and do not qualify for government-subsidized programs.

The *wellness* model strives to enhance overall life satisfaction and well-being among older adults. This approach attracts a wider range of older adults by working to meet the concrete and pressing needs of the vulnerable, while also focusing considerable attention on helping those with lesser, but still significant, needs. Activities may include programs to promote social engagement, or manage life transitions (such as retirement or declining health). The target population is much more inclusive than that of the *safety-net* model, as it aims to support seniors at all levels of need.

Of course, the more ambitious the aims of publicly-funded aging services, the more the system must do, and consequently, the more it is likely to cost. In New York City, limited public funding has steered the majority of funds for aging services toward those most in need. Going forward, however, policymakers and program planners must answer a vital question: What is the purpose of senior centers in New York City? The answer to this question has significant implications for the future, as it will directly inform programmatic priorities and funding levels. Increasingly, a fundamental disconnect is surfacing in New York City. Many nonprofit providers are delivering services under the well-being model, while the City's funding structure remains fixed on the safety-net model.

### **The role of senior centers in New York City**

New York City is home to a diverse population of older adults. There are now 1.3 million New Yorkers age 60 and over, and the demographics of this population are changing dramatically. From 1990 to 2000, the number of people of color age 60 and over increased by 32 percent; they now account for nearly half of all New Yorkers in this age group. In addition, more than a quarter of the population of older adults in New York City are immigrants. The poverty rate among older adults in New York City is twice the national average. More than one-fifth (21.6%) of New Yorkers age 65+ lives below the poverty line. Between 2000 and 2015, New York City is expected to see a 20 percent increase in its older adult population.

UNH recently convened a focus group of 15 aging-service provider member agencies to discuss the current role of senior centers, and to begin planning for the future. The agencies provide an extensive array of services, including case assistance, transportation, meal provision, socialization, physical fitness programs, and arts and cultural activities.

Participants stressed their neighborhood-based locations as critical to their ability to respond effectively to the current and shifting needs of local communities. In addition to meeting the concrete needs of older adults (through the range of service listed above), member agencies identified the following broad functions served by their centers:

- Social connectivity (reduce and prevent social isolation);
- Support (senior center services allow older adults to “age in place”);
- Identification (identify emerging and changing needs of local senior population);
- Linkages (connect older adults with appropriate services);
- Meaningful opportunities for community engagement.

### **Planning for the future**

In the coming weeks, UNH will release a new report designed to inform policymakers, program planners, and service providers about the changing needs of the City’s aging population. It intends to start an important dialogue about the need for planning and offers principles to guide any future restructuring of programs and services for older adults in the City.

Between 2000 and 2030 the City’s elderly population (those ages 65 and over) is expected to rise from 938,000 to 1.35 million – a 44 percent increase. However, the majority of this projected growth will take place after 2020. The growth occurring prior to 2020 will predominantly be among younger seniors, those age 60 to 74.

In recent years, there has been much discussion within the aging services sector about the implications of the growing population of older adults for the sector. Many suggest that the needs and preferences of this emerging population will necessitate service changes within the sector. For example, some speculate that there will be greater demand for job training (as more people are expected to work beyond traditional retirement age, either out of need or desire), opportunities for civic engagement, and resources for managing chronic and newly diagnosed health problems.

While some needs and preferences among older adults may shift, an array of “safety net” service needs in New York City will continue to exist among the most vulnerable. These ongoing needs should not, however, preclude innovative program design and development.

**UNH and our members believe there is a strong need for services and programs from both the *safety net* and *wellness* models.** We identified the following core service areas as essential to future senior centers at our recent focus group:

- Social service supports
- Health and wellness
- Socialization and recreation
- Community engagement and community building
- Lifelong learning

These program categories include services from the “safety net” model, such as meal provision (health and wellness) and home health aides (social services supports), as well as the “wellness” model, such as job training for a new phase of employment (lifelong learning) and disease management (health and wellness). They are broad enough to allow communities the flexibility to develop and operate programs that meet the unique needs of their specific communities, and specific enough to facilitate the creation of outcome measures through which programs could be held accountable.

### **Healthy Aging Initiative**

UNH supports the *Healthy Aging* Initiative, which seeks to identify enhanced models of service that will effectively meet the emerging needs of the growing and changing population of older adults. The Initiative proposes a pilot demonstration grant program in New York City: community organizations with existing senior service contracts through the City's Department for the Aging would be eligible to propose a demonstration program to promote healthy aging. Selected providers would address one or more of the following issues through a newly developed program or service: healthy lifestyles; early detection of diseases; immunizations; fall prevention, and chronic disease management.

As noted earlier, despite the changing and growing needs of older adults, senior centers are funded to deliver services through the *safety net* model. The Initiative will provide valuable support to senior centers offering programs within the *wellness* model. In addition, it includes an evaluation component, which will help identify particularly promising practices. Finally, the diversified programming is likely to appeal to a wide cross-section of older adults. We encourage the Council to support this important Initiative.

### **Measuring success**

There is a disconnect between the broad array of services senior centers provide and the way programmatic success is measured. At present, senior center utilization is measured by the number of meals served. As you know, however, senior centers, provide a variety of critical supportive services beyond meals. UNH encourages the City to develop new measures of program success that would more accurately reflect the depth of services provided by senior centers. We want to work with the City to identify such measures; the five core areas identified above could be used as a starting point.

### **Infrastructure**

Senior centers of the future must be equipped to meet both the basic needs of older adults in the traditional "safety net" model, and the broader needs of a large population of older adults through the "wellness" model. The two models need not be mutually exclusive. In order to ensure that senior centers have the capacity to effectively respond to the diverse and changing needs of the City's older adults, policymakers and program planners must ensure that funding streams:

- support a broad range of program activities;
- allow community-based agencies the flexibility to meet the unique needs of their communities; and
- include resources for outcome measurement, such as staffing, initial and ongoing training in data collection/management and resources (i.e., staff, technology) for data collection and input.

We appreciate the work of the City Council and its willingness to highlight and seek solutions to these important issues. We look forward to working with you to bring about these necessary improvements.

Thank you.