

Mary Lyn Kasunic
Written Testimony
for
Administration on Aging
Older Americans Act Reauthorization Listening Session

Alexandria, VA
February 25, 2010

I am Mary Lynn Kasunic, President & CEO of the Area Agency on Aging, Region One, in Phoenix, Arizona. Thank you, Assistant Secretary Greenlee, for the opportunity to testify today.

The Older Americans Act focuses the aging services network to serve those who are frail, those who have the greatest economic need, and those who have the greatest social need, including people with physical and mental disabilities, language barriers, and cultural, social, and geographic isolation caused by racial or ethnic status.

In keeping with the spirit of the Act, our Area Agency believes that two additional groups should receive attention in the Older Americans Act: LGBT older adults and elder refugees.

Many Lesbian, Gay, Bisexual and Transgender older adults experience isolation and ageism **both** in the general population and within the LGBT community itself. LGBT seniors are not comfortable accessing formal services, often due to their past experiences of being treated with discrimination and disdain.

While data regarding LGBT seniors is very limited, the *Outing Age* report published by the National Gay and Lesbian Task Force Policy Institute in 2000, and updated in its *Outing Age 2010* report, indicated that LGBT seniors:

- Are twice as likely to age as a single person;
- Are 2½ times more likely to live alone; and
- Are half as likely to be able to name someone who should be called in case of an emergency.

Outing Age 2010 also indicated that nearly 1 in 5 LGBT boomers reported being unsure of who will take care of them when the need arises.

We request that the Older Americans Act include LGBT seniors as a targeted client population, encourage the aging services network to create culturally appropriate services for this population, and assure that cultural competency training includes understanding the issues of LGBT seniors.

Another population that needs to be targeted in the Older Americans Act is the elder refugee population. When refugees come to this country, they usually come as a family. However, the elder soon becomes cut off from the rest of the family: the children go to school; the adults get jobs; and the elder family member is left home alone and isolated.

In most of the refugees' countries of origin, elders were respected and considered leaders and mentors in their community. But in the U.S., this role is virtually non-existent for them, and they find themselves disengaged from their new community. They don't feel comfortable going to senior centers, due to cultural and language barriers, dietary concerns, deteriorating health, and transportation issues, and they become even more isolated.

We need to remember that a refugee is not an immigrant (someone who wanted to move to the U.S.). Refugees have fled their country due to persecution or a fear of persecution for belonging to a certain race, religion, nationality, social or political group. Many refugees have spent 5 to 10 years in refugee camps.

Refugees are invited by the U.S. government to find asylum in the U.S. But after the initial resettlement, elder refugees are essentially forgotten. They become isolated without knowledge of the healthcare system and other critical services that their mainstream elder counterparts are more aware of through the aging services network.

Although the Office of Refugee Resettlement provides a small amount of funding for elder refugee services, we request that the Older Americans Act include elder refugees as another targeted population, and encourage the aging services network to create culturally appropriate services for this population, including English as a Second Language and citizenship classes.