

#### AAPI SENIOR ASSISTANCE AND LANGUAGE ACCESS

### RESILIENT AAPI COMMUNITIES IN THE TIME OF COVID-19

HOW AAPI COMMUNITY-BASED ORGANIZATIONS ARE RESPONDING TO THE PANDEMIC

### COVID-19 AND AAPI COMMUNITY-BASED ORGANIZATIONS

The novel coronavirus (COVID-19) has dramatically changed the economic and social landscape of our nation. COVID-19 has infected well over 25 million Americans, with over half a million lives lost. Millions of people have lost their jobs. People's mental and physical health has been taxed as everybody tries to adjust to our current conditions. And—as in so many crises—people who were already vulnerable have been hit hardest. It is well documented that COVID-19 has had disproportionate impact on seniors, communities of color, low-wage workers, persons with disabilities, persons who are marginally housed, immigrants, women, LGBTQ persons—with increasing levels of impact on people who live at the intersections of multiple categories.

Nonprofit community-based organizations (CBOs) that serve vulnerable populations have been doing heroic work—in providing food and emergency services, in keeping people housed and engaged, in doing everything that they can to keep their communities afloat. Since the start of the pandemic, National CAPACD member and sub-grantee organizations have raised and distributed over \$18 million dollars in emergency cash assistance to more than 8,000 families in their communities. And, while they have been doing this heroic work, they have been stretched to near breaking points, with funding from state and local governments becoming increasingly scarce in this difficult economy.

National CAPACD is a coalition of 100 CBOs working in low-income Asian American, Native Hawaiian, and Pacific Islander (AAPI) communities. Through our advocacy, programmatic support, and coordination, we help local organizations to better engage and serve their communities. From our work with our CBO members, we have seen the deep, devastating impact of COVID-19 on our communities. Our CBO members report that, even before local shelter in place orders were declared, AAPI-owned small businesses in their communities had seen substantial drops in revenues, with customers driven away by xenophobic and racist fears that an individual might be more likely to catch the virus from a person of Asian descent. Likewise, reports of hate crimes against AAPIs have gone up as national leaders stoked fears of the "China Virus." And for low-income AAPI families and individuals—as with other communities at the intersecting categories of class and race—the pandemic has meant a disproportionately increased risk of loss of jobs, loss of housing, and loss of life.



Our analysis of the geographic distribution of COVID-19 shows that low-income and vulnerable AAPI communities continue to be at risk<sup>2</sup>. In the 30 Metropolitan Statistical Areas (MSAs) with the most confirmed COVID-19 cases on January 1<sup>st</sup>, 2021, there are over 1.2 million AAPIs living in poverty. This represents approximately 60% of all AAPIs in poverty in the US. In comparison, approximately 40% of the overall, general poverty population lives in the 30 MSAs with the most COVID-19 cases. That is, AAPIs in poverty are disproportionately concentrated in COVID-19 hot zones. Similarly, other vulnerable AAPI populations in the 30 MSAs with the most COVID-19 cases include over 1.6 million AAPI seniors and over 3.6 million Limited English Proficient (LEP) AAPIs.

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### **PURPOSE AND METHODOLOGY**

At National CAPACD, as the scope and scale of the pandemic and its impact on our communities have become more apparent, we understood that the crisis urgently required a deeper level of coordination and support than our business as usual. And, at the same time, in reaching out to our members, we have observed the resilience and creativity of our member organizations in how they have risen to the challenge of mobilizing, serving, and protecting their communities in many inspiring and innovative ways.

In order to learn from our members about how they are better serving their communities and to better inform our own response to the pandemic in terms of our policy advocacy and programmatic support, we surveyed our members three times (in March, July, and December 2020) and held a number of virtual focus groups and an online "town hall" meeting. Over 60 CBOs participated in this process, with the majority providing multiple touch points over time, allowing us to have a sense of how the on-the-ground response to the pandemic has evolved.

Resulting from our engagement with our members, this document is part of a series of three briefs, each organized around our members' pandemic responses within a specific set of issues. In this series of briefs, we document the pandemic's impact and our members' on-the-ground response for the following issues:

- Housing,
- Senior Services and Language Access,
- AAPI Community Needs for the Recovery.

These briefs serve the purpose to:

- Document and lift up the innovation and best practices of our member organizations;
- Call attention to the ongoing needs (and how these needs have changed as the pandemic has progressed) within low-income AAPI communities;
- Advocate for policies and programs that would better serve low-income AAPI communities during the pandemic and into the forthcoming recovery.

This brief addresses issues of AAPI senior services and language access.

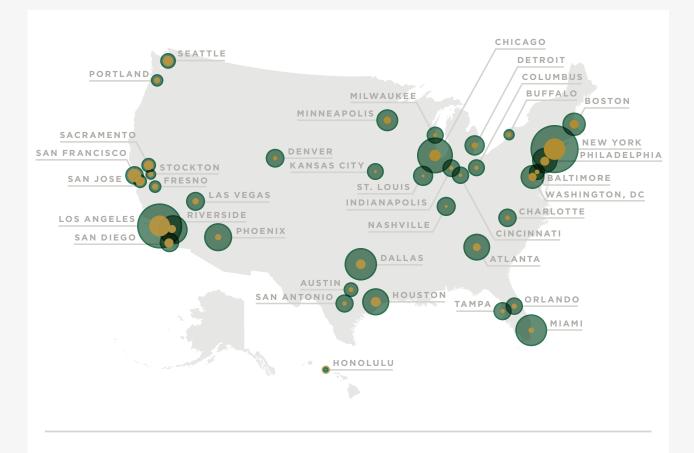
<sup>&</sup>lt;sup>2</sup> https://www.nationalcapacd.org/covid19-response/aapi-demographic-data-for-covid-19-hot-spots/

## AAPI POVERTY POPULATION IN TOP 30 CITIES WITH HIGHEST COVID CASES\*, BY MSA\*\*

NUMBER OF CONFIRMED COVID CASES

NUMBER OF AAPIS IN POVERTY

\* As of 1/22/21 \*\* MSA listed by major city



Listed alphabetically by major MSA city, with confirmed number of COVID cases followed by AAPIs in poverty ATLANTA 433,945 / 33,735 // AUSTIN 120,233 / 12,143 // BALTIMORE 146,178 / 11,722 // BOSTON 324,963 / 42,544 // BUFFALO 65,474 / 13,025 // CHARLOTTE 195,351 / 12,797 // CHICAGO 796,104 / 70,683 // CINCINNATI 171,528 / 6,089 // COLUMBUS 162,200 / 9,906 // DALLAS 646,017 / 51,627 // DENVER 201,106 / 10,526 // DETROIT 240,574 / 20,552 // FRESNO 83,591 / 20,354 // HONOLULU 20,297 / 37,155 // HOUSTON 444,806 / 53,355 // INDIANAPOLIS 179,788 / 10,320 // KANSAS CITY 160,677 / 4,658 // LAS VEGAS 205,926 / 22,156 // LOS ANGELES 1,277,006 / 237,587 // MIAMI 619,616 / 17,507 // MILWAUKEE 165,755 / 10,171 // MINNEAPOLIS 282,311 / 29,349 // NASHVILLE 210,161 / 5,044 // NEW YORK 1,461,952 / 251,737 // ORLANDO 171,634 / 15,163 // PHILADELPHIA 387,631 / 44,697 // PHOENIX 475,969 / 21,497 // PORTLAND 81,190 / 19,094 // RIVERSIDE 514,550 / 35,515 // SACRAMENTO 117,907 / 50,398 // ST. LOUIS 236,974 / 4,890 // SAN ANTONIO 188,854 / 10,779 // SAN DIEGO 219,794 / 46,143 // SAN FRANCISCO 197,655 / 94,515 // SAN JOSE 100,978 / 47,088 // SEATTLE 135,966 / 55,614 //STOCKTON 59,096 / 13,560 // TAMPA 188,942 / 10,886 // WASHINGTON, DC 339,969 / 37,976

Sources:

https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html US Census, 2018 1-year American Community Survey



# SENIOR SERVICES AND LANGUAGE ACCESS RECOMMENDATIONS

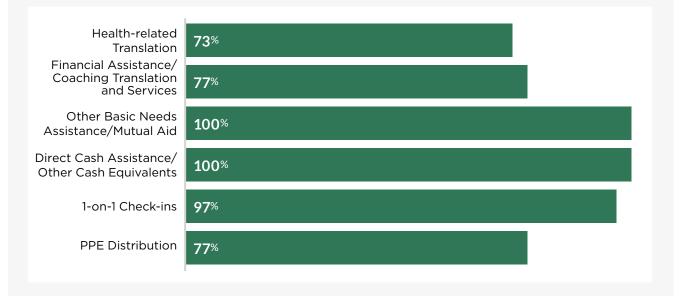
Seniors are at high risk from COVID-19. A study by the Centers for Disease Control and Prevention analyzing COVID-19 deaths during the summer of 2020 estimates that 8 in 10 U.S. deaths from COVID-19 were persons aged 65 and up. Given this context, special attention needs to be paid to make sure that community elders have access to basic life needs in ways that allow them to maintain social distancing, and that they have proper information and tools so that they can stay safe and healthy. Because such a high proportion of AAPI seniors are Limited English Proficient (LEP), distribution of needed resources and information is doubly difficult. In this context, we recommend the following:

- Make services and resources available in multiple AAPI languages, with on-demand translation/ interpretation;
- Fund local, trusted CBOs to deliver a variety of basic resources (including translation, per above);
- Deploy local, trusted CBOs as hubs for coordinated outreach, information, and referrals for COVID-19 response targeting seniors;
- With pandemic related social distancing, care and attention need to be given to address seniors' social isolation and its effects on their mental health.

### THE RESPONSE ON THE GROUND

To serve vulnerable AAPI seniors during the pandemic, our members report doing the following activities<sup>2</sup>:

### PANDEMIC RESPONSE — SENIOR SERVICES AND LANGUAGE ACCESS



<sup>2</sup> Please note that seniors were also likely served through other CBO activities (e.g., housing) covered in a separate brief and with data not disaggregated by age.

### **COMMUNITY STORY**

#### They Speak My Language

Ms. Maly lives in southern California. She lost her job due to the pandemic and has been struggling to make ends meet. She wanted to apply for unemployment insurance to help her and her small children stay afloat. Ms. Maly does not speak much English, and when she called California's insurance helpline to apply, she had to rely on her young children to translate for her. Due to language barriers, she was not able to complete her unemployment application by herself.

Ms. Maly discovered The Cambodian Family (TCF) on social media and reached out to seek assistance with enrolling in unemployment insurance and other public benefit programs.



TCF's Financial Coach assisted Ms. Maly throughout the entire process of applying for unemployment insurance and SNAP benefits. Ms. Maly felt comfortable working with TCF's Financial Coach, who spoke her language, Khmer.

Now that Ms. Maly has secured the financial benefits she is entitled to, she feels much less stressed and no longer constantly worries about finding money to pay for food and utilities. She feels more at ease and has more room to breathe.

Ms. Maly greatly values receiving help in her primary language. She has now referred her mother, who is a senior, to TCF for assistance and has been guiding her through the process.

Because of the increased risks to seniors and because of social isolation as seniors shelter at home, over 90% of members have adopted some form of 1-on-1 wellness checks with seniors for outreach, information sharing, assessing an individual's health, etc. However, such check-ins are difficult, and social isolation and technological capacity are constant issues. The HANA Center, a member in Chicago reports, "We still experience difficulties to assist aged or [technologically] non-literate clients since telephonic consultation is too hard for them. Some of our clients don't know how to operate phones: how to check messages, text, send images, and so on. So we send out forms and the list of what we need to see for consultation by mail with stamped return envelopes."

Many low-income seniors supplement social security with low-wage employment. Members report that many of these constituents have lost jobs and income. Therefore, during the pandemic, members have provided direct relief to seniors (and other vulnerable community members) through the following:

- Emergency cash assistance,
- Community relief funds,
- Mutual assistance funds,
- Rental relief.

Over **90%** of members have adopted some form of **1-on-1 wellness checks with seniors** for outreach, information sharing, assessing an individual's health, etc.



Members have also provided for seniors' basic needs through:

- Food/food pantries/food delivery services;
- Grocery store gift cards,
- Medication,
- Culturally appropriate meals,
- Access to community-supported agriculture (CSA) food distribution,
- PPE distribution.

Several members have taken notable or creative approaches within the multiple activities listed above. For example, the Little Tokyo Service Center, in Los Angeles, has been using neighborhood small businesses to provide meals to low-income seniors. In this way, they provide nutritional, culturally appropriate meals to seniors while supporting neighborhood restaurants that have lost substantial business during the pandemic. As another example, SEAMAAC, in Philadelphia, has taken a notable and comprehensive approach to getting seniors online during this time of social distancing. For isolated seniors, they provide digital devices, facilitate digital literacy classes, maintain a digital helpline, and offer multi-lingual virtual chat groups. SEAMAAC notes that seniors are being targeted for online scams and offers one-on-one language support for elders to address these issues.

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For more information about the work of National CAPACD and our member organizations during the COVID-19 pandemic, please contact <u>info@nationalcapacd.org</u>.