

## **RESIDENTIAL AND OTHER RELATED ISSUES OF INDIAN ELDERS**

by Rajeshwar Prasad\*

Presented at the Birhan Convention in Philadelphia July 2-5, 2009

### **INDIAN ELDERS ABROAD & IN USA:**

Let me first give you an idea about Indians abroad. There are about 25 million Indians who have either settled or reside outside India: they are PIOs (People of Indian Origin) who have taken citizenship of foreign countries; or NRIs (Non Resident Indians) who are citizens of India but residing outside India. It is estimated that about 12 % of them fall in the category of 'seniors' i.e. those 60 years of age or older. Thus the number of seniors outside India is in the neighborhood of three million. Among these three million there are those who left India for job and education opportunities in late sixties and they are now seniors (early immigrants), and those who left India as seniors (recent immigrants) mostly sponsored by their adult children. In USA there are about three million persons of Indian origin and about 350,000 are 60 years and older.

### **WHAT MADE THEM LEAVE INDIA?**

I will not go over in details the issues related to why Indians left India, but broadly speaking they left for higher education; better opportunities of employment, business or professional enhancement; and joining family members already settled abroad. I will also not touch upon the longevity of residency abroad issue as it differs widely from country to country: It could be need of indentured labor in places such as Trinidad, Guyana and African countries; India's partition leading many to migrate to England; and opening up of immigration by foreign governments such as in sixties to USA. We may like to make a note that Indians' way of life in different regions such as Europe, Middle East, West Indies, African countries, and North America varies widely. This Worldwide variation also determines their social, economic and business relationship between their motherland and adopted land.

### **ISSUES OF IMPORTANCE TO ELDER INDIANS:**

Let me now briefly present to you issues which are important to seniors: both who have been outside India for a period of 30-40 years (there are some who came to USA much earlier) and those who have joined their adult children in the last 15-20 years. Each group has unique issues to tackle, though there are some common issues as well. Very briefly I will enumerate these issues as below: The reason for touching on this area is primarily for the fact that they do affect their housing and residential issues directly or indirectly. This is based on my experience in USA only.

#### **Early Immigrants:**

Starting with **Early immigrants**, what issues they face that are important to them:

\* Financial independence after retirement, including maintenance of living standard: Majority of them did not perceive, at an appropriate time, of the situation they would be facing when they retire. Many were also not aware that there were professional groups and individuals who could help them in pre-planning their financial independence.

\* Management of living arrangements conducive to their age and health: In other words, these people did not visualize that after certain age and status of their health, and after their children have moved out and settled they would need a different kind of living arrangement such as retirement housing.

\* Adequate and timely allocation and protection of their assets: If they had planned it when they started working, they could have enjoyed increasingly satisfying results of their assets after retirement.

\* Conceptualizing a productive use of their professional knowledge and experience, in order to have an opportunity of being a great professional resource to the society at large. Familiarity and adoption of 'End of Life' issues such as will, durable power of attorney, health proxy.

### **Recent Immigrants:**

Seniors in the category of *recent immigrants*, who primarily came to this country when they were already seniors, have some different issues that need to be addressed. Majority of them are dependents, face problems of isolation, difficulties in communication particularly with Americans, negotiating transportation and mobility, and financial insecurity. Unlike the early immigrants, this group of seniors may not be cognizant of some of their handicaps. What matters most to this group is to:

- \* Make efforts to assimilate with groups outside their immediate family and friends.
- \* Need to develop a cultural sensitivity to American History, cultural mores, consumerism as opposed to the typical recent immigrant tendency of just sticking to traditional way of life in India.
- \* Develop a social network of their peers to deal with isolation and loneliness.
- \* Comprehend the sensitiveness of their adult children and grand children who in all likelihood are used to a different way of life by virtue of growing up here and also by virtue of their different exposure.
- \* Utilize their rich and valuable experiences in India for a much needed vacuum that may exist between them and early immigrants. These could be related to family values, social upbringing

The third emerging category is that of *single seniors*. These people may be widowed, never married or divorced. Hardships and problems this group faces, particularly widowed, are very different and unique. What matters most to them is to first overcome the pain and trauma of the spouse loss. That situation if lingered on for long may cause problems such as depression. Their isolation and loneliness require approaches where they can find companionship, dignified acceptance in the society, and develop a social network of their peers. One should, however, bear in mind that this emerging group may be early immigrants or recent immigrants.

Some matters of importance will be interfacing in all the three groups such as 'end of life' issues, family conflicts and compromises. One must also bear in mind that all matters do not apply to all people, as some by virtue of their professional work and/or exposure to the mainstream may have addressed some or all these matters at the appropriate time.

### **RESIDENTIAL ALTERNATIVES FOR SENIORS:**

Today in this session we will be focusing on residence issues. The discussion will probably provide a wide range of alternatives in foreign countries as well as in India. These residential alternatives are applicable both for Indians abroad in general and seniors in particular. There are experienced speakers and I am sure the participants will join in an interactive manner for the benefit of all here and through us for the benefit of others with whom we deal on a regular basis. I will give a brief description of residential issues of seniors in the United States. This is based on my involvement for over eleven years with the National Indo-American Association for Senior Citizens (NIAASC), and other groups both in private and public sectors.

### **Naturally Occupied Residential Community:**

This is an approach whereby seniors stay in their homes but organize in a way that the government entities develop an ongoing working relationship with them. Instead of they for example going to the department of Social Services, the department professionals

visit them in the community. This concept is easily workable in apartment complexes but in suburban housing it can be tried as long as there are some 30 seniors who form this group. The fact that some seniors do not want to move out of their houses, such a project is worth the efforts.

### **Home Share:**

Under this approach the agency providing “Home Share” services try to provide a tenant to senior(s) who will share in day to day chores but have a private residence in the house. The agency professionals investigate thoroughly the senior(s) and the prospective person to share in the house. It requires a perfect match. The person sharing has a place to stay at a lower rent and it helps the seniors financially and otherwise as well.

### **Independent Senior Housing or Retirement Community Complexes:**

This is the most common practical approach being initiated or undertaken for the benefit of seniors. There are such complexes by Catholic Charities, Jewish Groups and others. Indian groups are far behind but there are a few concrete proposals and projects underway in different countries. Speaking of USA I can cite one where construction is on the way after 2-year efforts to procure necessary permission for various authorities. It is called ShantiNiketan in Travers, Florida near Orlando. It is run by a not for profit entity known as Bharat Vilas. I have some copies of their project with me and those interested may like to have one. I don't want to go in details about the project but information is available on their web site that is update on regular basis. Legally ShantiNiketan is not just restricted to Indians.

### **Assisted Living:**

I am sure everyone is familiar with the Assisted Living. This is between Independent Senior housing and Nursing Homes. To my knowledge there is no exclusive Indian facility in USA. However, there are some steps being taken to initiate a facility. The Assisted Living is costly and it may vary from \$3,500 to \$5,000 per month. There is one in Florida known as “Nirvana on the Beach” run by a for profit entity near Fort Lauderdale. To my understanding it is not a high cost facility but I am unable to comment any further.

### **Nursing Homes:**

I am sure everyone is familiar with the Nursing Homes. These are normally long term nursing care facilities for frail and elderly who need 24-hour care. These could be run by for profit or Not for Profit entities. Some nursing homes are run through government. Price differs on the basis of location, ownership and other factors. and heritage. This however requires an understanding of family conflicts and compromise.

*\*The author is cofounder of NIAASC and currently serves as its Executive Director. His voluntary involvement with Indian Organizations such as India Association of Long Island, FIA, GOPIO, NAAAID, and American Organizations such as United Way of Long Island, Suffolk County Human Rights Commission, stretch over the last three decades. A professional in health and human services, he has worked as chief executive for various nonprofit organizations.*