

The Honorable Senators of the Committee on Aging:

Thank you for the invitation. It is an honor to appear before you in support of Senator Gordon Smith's Senate Bill 821.

My name is Mir Salahuddin Ansary (aka Salah Ansary). I was born in Afghanistan in 1953. I came to Poughkeepsie, New York as an exchange student. Upon my return to Afghanistan, I worked at the US Cultural Service Center as an assistant librarian and then with USAID until 1978. Because of the fast political changes in Afghanistan at the time, and my mother's persistent worry and encouragement for my safety, I left Afghanistan in 1978 and found my home in Portland, Oregon. In 1980, after the invasion of my homeland, my family (mother, 3 of my siblings, sister-in law and four of her children) fled Afghanistan and took refuge in the neighboring country of Pakistan. In 1981, I was fortunate to have welcomed my family in Portland, Oregon with the assistance of a local church. From 1980-1984, I worked for the Multnomah County Library and in 1984 joined Lutheran Family Service of Oregon and Southwest Washington, now known as Lutheran Community Services Northwest (LCSNW). I was also the co-founder and president of the Afghan Cultural Service Center and assisted Afghan refugees adjust to life in the US.

Oregon:

In Oregon there are four faith-based agencies that resettle refugees: LCSNW, Catholic Charities, Ecumenical Ministries of Oregon and Jewish Family and Child Services. Other refugee service providers include the Immigrant and Refugee Community Organization (IRCO), state, and local government branches. Since 1975, LCSNW alone has resettled close to 30,000 refugees in the Northwest. Behind these numbers are

individuals. Each has a unique story of suffering and survival, hopes for happiness and security, and individual strengths and talents to offer.

The State of Oregon ranks ninth in the nation for refugee resettlement. Since 1975, Oregon has received a total of 55,598 refugees of which 26,204 are from S.E Asia, 18,684 are from the former Soviet Union, 2,192 are from Cuba, 2,066 are from Romania, 1,445 are from Bosnia, and 1,702 are from Somalia. The remaining are from Afghanistan, Burma, Iran, Iraq, Sudan, and various other African countries. These figures do not take into account birth and secondary migration into the state. The people of Oregon have responded magnificently in welcoming many asylees and refugees with their love and support. In particular, the church congregations across our network have joined hands “In welcoming the stranger.”

Oregon is known for its well-established and close coordination of services to refugees. The passage of the Immigration and Nationality Act of 1980 provided alternative approaches in seeking to reduce refugee dependency on welfare programs. Oregon was one of the first states to design and implement an innovative project that successfully demonstrated refugees could enter the job market and achieve their early self-sufficiency goals with adequate resources during their initial months of resettlement. Today, this public and private partnership continues in the state of Oregon. LCSNW and other faith-based agencies administer cash eligibility determination and provide intensive case management services for all newly arrived refugees/asylees during the first eight months, while IRCO works to place them into jobs before their benefits expire. This function had previously been handled by the state welfare program. As I recall, former

Senator Hatfield was a strong advocate and true champion for refugees who helped Oregon with such program innovation.

Lutheran Community Services:

After over 75 years of service, Lutheran Family Service of Oregon and Southwest Washington merged with Lutheran Social Services of Washington and Idaho in 2001 to form Lutheran Community Services Northwest (LCSNW), a non-profit 501 (c)(3) organization whose mission is to “partner with individuals, families and communities for health, justice and hope.” For refugee resettlement work, LCSNW is affiliated with Lutheran Immigration and Refugee Service (LIRS), a national voluntary resettlement agency whose tireless advocacy on behalf of the uprooted spans 68 years. LIRS through their partnership with the Department of States contracts with 26 affiliate Lutheran social service agencies across the country for the reception and placement of refugees. LCSNW provides an array of social services tailored towards the specific needs of refugees, such as ESL and literacy programs, youth mentorship programs, mental health services for African and Slavic refugees, drug and alcohol treatment, immigration counseling services, citizenship services for elderly populations, and an African Women’s Empowerment program. There are a total of 36 languages spoken by the staff in our LCSNW Multicultural Community Services program with offices in Portland, Vancouver and Seattle.

Elderly Refugee and Asylee Populations:

For the past 27 years, I have witnessed the tremendous source of joy elderly populations bring to their families. They pass on rich cultural values to their children and grandchildren. I have personally experienced the journey and resettlement of my own

mother who is now 78 years old and a proud US citizen. The following are challenges faced by many refugee/asylee elderly populations:

- 1) **Health:** Many come to the US with health-related issues due to poor health care available in their country of origin, refugee camp, or host country. Due to language barriers and a poor understanding of the healthcare system in the US, they avoid preventive care until they end up in a hospital emergency room.
- 2) **Language:** The majority of elder refugee/asylee populations coming to the US lack English literacy skills. Many cannot access resources without interpretation. Often a family member, friend or a professional interpreter needs to accompany elderly populations to their medical visits. Learning a new language is a challenge for most elderly refugees. Some are illiterate even in their native language. Lacking basic English literacy skills disqualifies them from employment opportunities that require limited English proficiency. Elders also lack mobility for often they cannot drive and are fearful of using public transportation because they cannot read, write, or speak English.
- 3) **Economic:** The elderly refugee population is among the poor. They live with their adult children and families. They are dependent on others for food and shelter. When ill, they depend on adult children or grandchildren to schedule a medical appointment or to visit the emergency room for immediate care.
- 4) **Social:** Elderly refugees are isolated from each other due to their lack of physical and financial abilities. For some, their resettlement in the U.S. leads to a loss of family, friends, and other social ties established in their home country or

refugee camp. Some elderly refugees suffer from depression. Yet, due to cultural stigmas associated with mental health and counseling it often goes untreated.

Systemic challenges:

- 1) **Lack of adequate resources:** Most often service providers are lacking adequate funding to provide individualized one-on-one assistance to address these challenges more effectively.
- 2) **Citizenship:** The road to citizenship poses many obstacles for elder refugees. The recent U.S. Citizenship and Immigration Service (USCIS) fee increases have added additional barriers. Recently, the filing fee for an application for citizenship increased from \$400 to \$675. The request for a fee waiver is cumbersome and consumes staff time. A medical disability waiver for an exemption of the English and civic naturalization test also takes considerable time.
- 3) The Seven year limit for refugee elders and disabled refugees in accessing SSI based on the 1996 rule has created panic and devastation for those that have and or will lose their benefits.
- 4) The USCIS website now indicates that citizenship applications submitted after June 1, 2007 will take somewhere between 16-18 months to be processed.

There are currently two citizenship programs in Oregon and Southwest Washington that specifically deal with some of these challenges. LCS administers the Southwest Washington citizenship project for seniors, funded by the state of Washington legislation and Office of Refugee Resettlement (ORR) at the federal level. IRCO administers the program in Portland, Oregon which is funded by ORR. The majority of

both program participants are Slavic elder refugees/asylees. From January 2005 through November 2007, IRCO enrolled 237 senior clients in their citizenship projects of which 197 achieved citizenship. From July 1, 2006 to June 30, 2007 LCSNW had over 350 people attend citizenship classes. The program assisted 91 elder refugees with citizenship applications. Out of 91 clients, 78 passed their citizenship tests and 37 (out of 91) requested a waiver of the English and U.S. history and government requirements based on their disability or impairment. Since July 1, 2007, LCSNW has enrolled 250 elder students in LCS citizenship classes. Classes are held in seven different locations for client convenience. There are 18 classes weekly.

Some elder refugees repeat these classes numerous times and still it is a struggle for them to pass the citizenship test. I had the pleasure of teaching an elder citizenship class and witnessed their yearning to learn and to obtain citizenship, despite their struggles and frustrations. It is not a lack of trying on their part. Something must be done. Can the citizenship test be administered in their native language for individuals over the age of 60? Can the USCIS obtain supplemental funding from Congress to avoid rising filing fees?

The following are testimonials from counselors and case managers who have worked with clients affected by the “Seven Year Rule”:

Testimonial One:

Client name: Nina Fedorova
DOB: 11/5/39
Age: 66
Gender: Female
Date of admission: 1/30/02
Date of report: 11/27/07

This letter is in support of my client Nina Fedorova, who was diagnosed with PTSD – 296.33 and Major Depressive Disorder- 309.81 in 2002. She was successfully treated and is currently receiving support services at Lutheran Community Services Northwest.

Nina Fedorova is a 66 year old female, who was born in Russia and recently lost her husband and 19 year old son. Nina came to the US in 2000 and received asylum status in 2001. She was on disability due to PTSD. Nina has been on the Oregon health Plan and was treated for her medical condition.

She received her green card in December 2005. Mrs. Fedorova is approaching 7 years of stay in the US, but is not qualified to file an application for citizenship. An individual is eligible to apply for citizenship five years after the date of the approval of their green card. However, Mrs. Fedorova has lived in the US for 7 years but 2 years less than she would qualify for citizenship. She is at the point of losing all her medical and social benefits according to the “7 year rule”.

While approaching this date this patient began to decompensate and exhibit symptoms of anxiety and depression due to the knowledge that she is going to lose all of her benefits within a few months.

If you need any further information regarding this matter, please contact me at (503) 231-7480 ext. 644

Olga Parker, Ph.D., Multicultural Services

Testimonial 2:

Mrs. Faduma A. Abukar, a single mother, left Somalia in 1993 with her two children after her husband passed away. They took refuge in Nairobi, Kenya. She arrived in Portland, Oregon in July 2000. In November 2000, her application for asylum was granted. She received her green card in 2004.

Faduma suffers from Fybromyalgia, anxiety, and Post Traumatic Stress. She lives with her daughter who is thirteen years of age. Faduma has had English tutors but cannot grasp the English language. Her daughter manages to do most of the housekeeping as Faduma cannot move around very well. She tries to take walks but this proves extra painful after 30 yards. Some of her relatives give her as much help as they can. Faduma receives \$623 per month out of which she has to pay rent of \$253 per month as well as electricity and telephone charges.

It will be a great hardship for her to lose her SSI benefits. Faduma will lose her SSI benefits beginning December 1, 2007. This is seven years after November 2000, the month she was granted asylum.

Faduma Sheik
Case Manager
Multicultural Community Services

The following are stories from IRCO's Oregon Refugee Senior Naturalization Project:

First Story:

In 1996, a couple and their daughter came as refugees from Russia to the U.S. At that time the father was 66 years old. He was having some memory loss and had one leg amputated. His wife, who was 57 years old suffered from high blood pressure, diabetes and heart problems. Their daughter was 17 years old. She became a student at Portland State University. The couple spoke no English. In 2001, the couple enrolled in an IRCO Senior Refugee Program to get assistance with naturalization. In 2003, all three family members went for INS interviews on the same day. The daughter took the INS examination in English and passed. The INS officer accepted the father's medical waiver and he passed the exam. The physician who wrote out the medical waiver for the wife did not accurately reflect her medical conditions in the waiver. The INS officer interviewing the wife did not accept her medical waiver. She then had to take the INS exam in English. She very obviously couldn't speak English well enough to respond to the INS interviewer's questions and she failed the exam. The stress and humiliation of not passing the INS exam caused the wife to have increased heart pain. Within a few days after the exam, she was hospitalized from having a heart attack. Upon medical examination, physicians found tumorous growths in her gastrointestinal tract which would require several surgeries due to her weakened condition. Within months of her INS exam, she underwent two surgeries to have partial intestinal tract removal. She had increasing bouts of dizziness and had to use a walker. The father became her caretaker. On August 8, 2004 she had heart surgery. She was even placed in a nursing home. She died on February 23, 2005.

Second Story:

In August, 2000 a couple arrived in the U.S. as refugees from Russia. The husband had a history of heart problems but had not had a heart attack as well as memory problems. His wife had hypertension and memory loss. He and his wife were both 76 years old when they enrolled in the IRCO Oregon Senior Refugee Naturalization project. On May 23, 2006 they both went for the INS examination. The husband passed his exam. However, because the physician who wrote her medical waiver didn't adequately explain her medical conditions, she did not pass the exam. He was so stressed by her failure to pass the exam that he began to lose consciousness. He was taken to the emergency room. On May 25, 2006, he went for a medical appointment for heart pain and was hospitalized for heart attack. On May 31, 2006, he underwent heart surgery. With intervention from IRCO ORSEN staff, the wife was able to get another physician for the medical waiver who described her mental condition as severe memory loss in which she could barely remember short term events much less take a course on U.S. history. On February 7, 2007 she went for and passed the second INS exam with a medical waiver and was naturalized on February 8, 2007.

We urge the passage and support of Senate Bill 821 sponsored by Senator Gordon Smith that provides tremendous relief for this resilient and yet vulnerable population.

Thank you.