

# **Outreach and Working with Service Providers to Improve Elder Justice Services to the LGBTQ community**

**JASA Elder Justice Training Institute  
July 30, 2020**

# Welcome

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Fraud, Scams, ID Theft Prevention

Upstate Elder Abuse Center

# Lifespan of Greater Rochester

- Upstate aging service provider
- Founded 1971
- 30 programs for older adults and caregivers
- Mission: “Help older adults *take on* both the challenges and opportunities of longer life.”



# Elder Abuse Thrives in Silence



**BREAK THE SILENCE**  
Upstate Elder Abuse Center *at Lifespan*

# If It Sounds Too Good To Be True— It Probably Is!

Lifespan helps older adults  
take on scams, fraud and  
consumer protection.

*Program funded by the Monroe County and  
City of Rochester Community Development Departments  
through grants from the U.S. Dept. of Housing  
and Urban Development.*



# Introduction



## Why Are We Here?

LGBTQ+ older adults often present many of the risk factors for elder mistreatment

Older adults who are LGBTQ+ face additional barriers to help.



## Training Goals

To better understand the dynamics of elder abuse, with a focus on older adults who are LGBTQ+. To provide attendees with practical information to better reach and assist survivors of elder abuse who identify as LGBTQ+.

# Learning Objectives

Participants of this training will be able to:

- Identify at least 3 unique challenges that older victims of abuse who are LGBTQ may face.
- Better understand the dynamics of elder abuse in LGBTQ cases.
- Identify at least 2 interventions that can assist older LGBTQ victims of abuse.



*Under the Radar:  
New York State Elder Abuse Prevalence Study*

SELF-REPORTED PREVALENCE AND DOCUMENTED CASE SURVEYS

FINAL REPORT

May 2011

Prepared by:  
Lifespan of Greater Rochester, Inc.  
Weill Cornell Medical Center  
of Cornell University  
New York City Department for the Aging

## Elder Abuse in New York State

- One year incidence rate: 7.6%
- Financial exploitation – most common form of mistreatment
- Only in in 24 cases is reported to authorities able to help

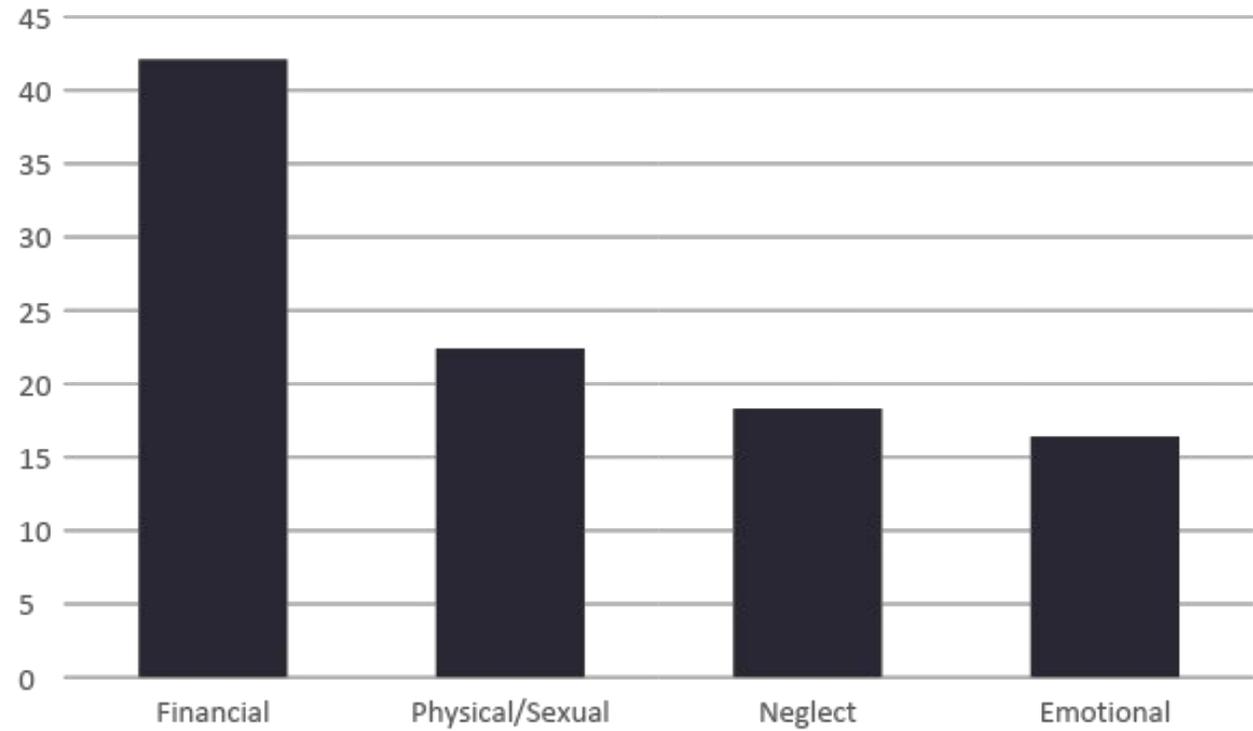
# Key Terms & Concepts

# Key Terms

- Cisgender
- Transgender
- Ally
- Heterosexism
- Cissexism
- LGBTQ+
- Gender Dysphoria
- Queer

# What is Elder Abuse?

Self-Reported Rate per 1,000



# Types of Mistreatment

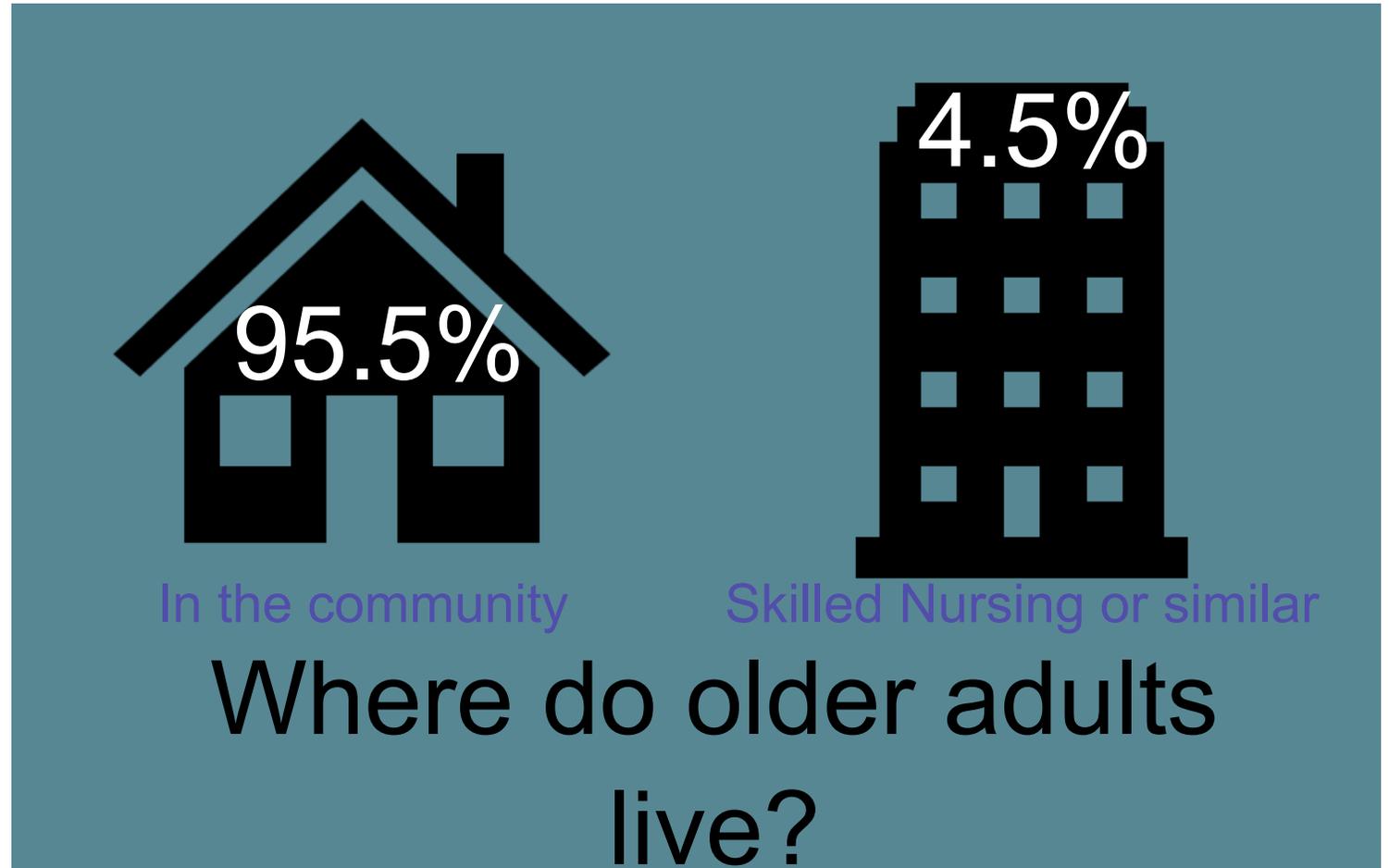
Crime

Elder Abuse

Scams

# Where Does Abuse Occur?

Abuse can and does occur in skilled nursing and other congregate living facilities by both family members and employees; however, most older adults reside in the community.



# Risk Factors

*Isolation*

-isms

Communication barriers

Access

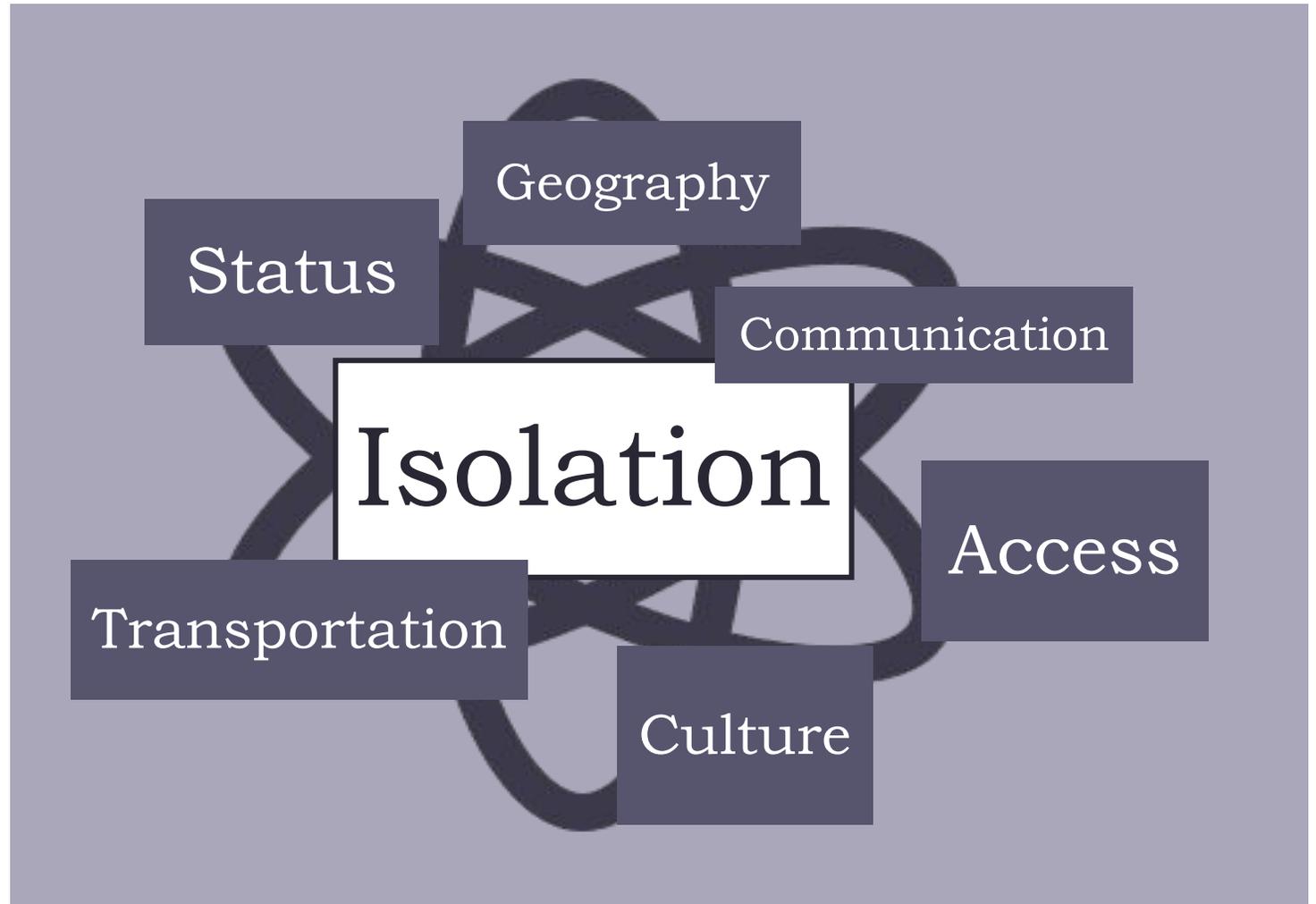
Dementia/cognitive decline

Substance abuse

History of abuse and mistreatment

Unconscious Biases

# Isolation: Cause & Effect



# Barriers to Help

Discrimination

Ageism

Guilt and shame

Fear of outing

Lack of appropriate resources and programs

Inadequate legal recourse

Inadequate funding

Fear of loss

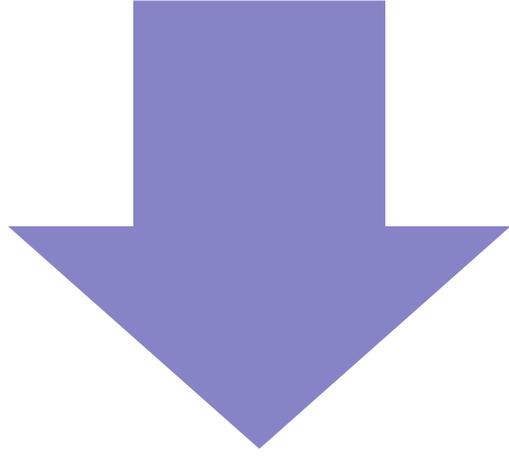
Fear of retaliation

Physical and/or cognitive barriers

# Who Are the Perpetrators?

- Statistically, perpetrators of elder abuse are most likely to be family members of the victim; however, studies on elder abuse have not specifically analyzed LGBTQ+ victims.
- Perpetrators often have a history of abuse of others.
- Often, there is a substance misuse component in either or both the victim and perpetrator.
  - Consider the opioid epidemic and that older adults are prescribed opioids more often than any other age group!
- Traditional Power & Control dynamics apply.
- Interdependency between the victim and perpetrator.

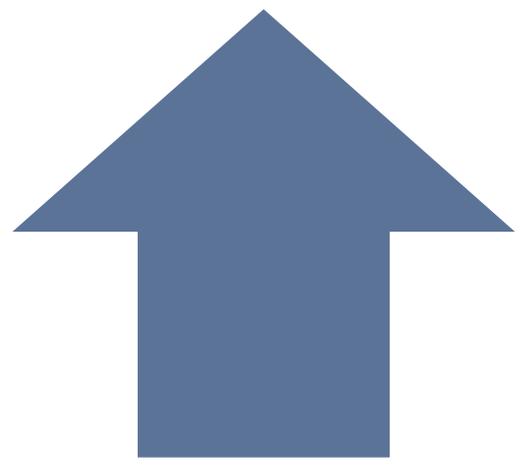
# Additional Tips – COVID Considerations



Access to the  
helpers



Social  
distancing  
and access by  
perpetrators



# Fraud, Scams & ID Theft Targeting Older Adults

**Scams  
and Fraud**  
against  
seniors cost  
nearly  
\$3 billion  
dollars each  
year

Scam artists use a “**HOOK**” to trick individuals in to providing personal information &/or sending money:

- **Love &/or Good Will**--we all want to help those we care about.
- **Money**--the promise of a great deal or the dream of sudden riches.
- **Fear and Desperation**--being afraid can make us less cautious, more open to the promise of a quick fix or an unexpected cure.

# Scams and LGBTQ Older Adults

## Sweetheart Scam

- **34%** of LGBTQ older Adults live alone
- **32%** LGBTQ older Adults are concerned about being lonely or growing old alone
- **40%** LGBTQ older Adults report shrinking support networks
  
- Never provide personal information
- Be wary if the individual is quick to profess their love
- Never send money in a way that can't be traced
- If a romantic interest threatens to “out” you if you don't pay them money, this may be considered extortion and therefore a crime – **file a complaint** with the police or contact a lawyer.

# **Covid-related & Census Scams**

Personal Protective Equipment and Medical Equipment

Fake Cures

Fake Medical Sites

Fake Charities

Covid-19 Stimulus Check Scams

Fake Census Sites Requesting Personal Info

# Common Scams

## *Money*

Grand Parent/Friend

Lottery/Sweepstakes/  
Publisher Clearinghouse

Lower Credit Card Payments

Fraudulent/Fake Check

Go Fund Me

IRS Impersonation

Jury Duty

U.S. Treasury Impersonation

Collection Agency

# Common Scams

Contractor/Home- Improvement

IT/Tech Support

Fake E-Bay/Craig's List

Utility

Charity

Government Grant

Counterfeit Prescriptions

## **Common Scams**

## ***Fraud / Miscellaneous cont'd***

Telephone Scams

-Robocalls

Lightning Strikes Twice

Spoofing: Fake # on  
caller ID

Cramming: Unauthorized  
charges on accounts

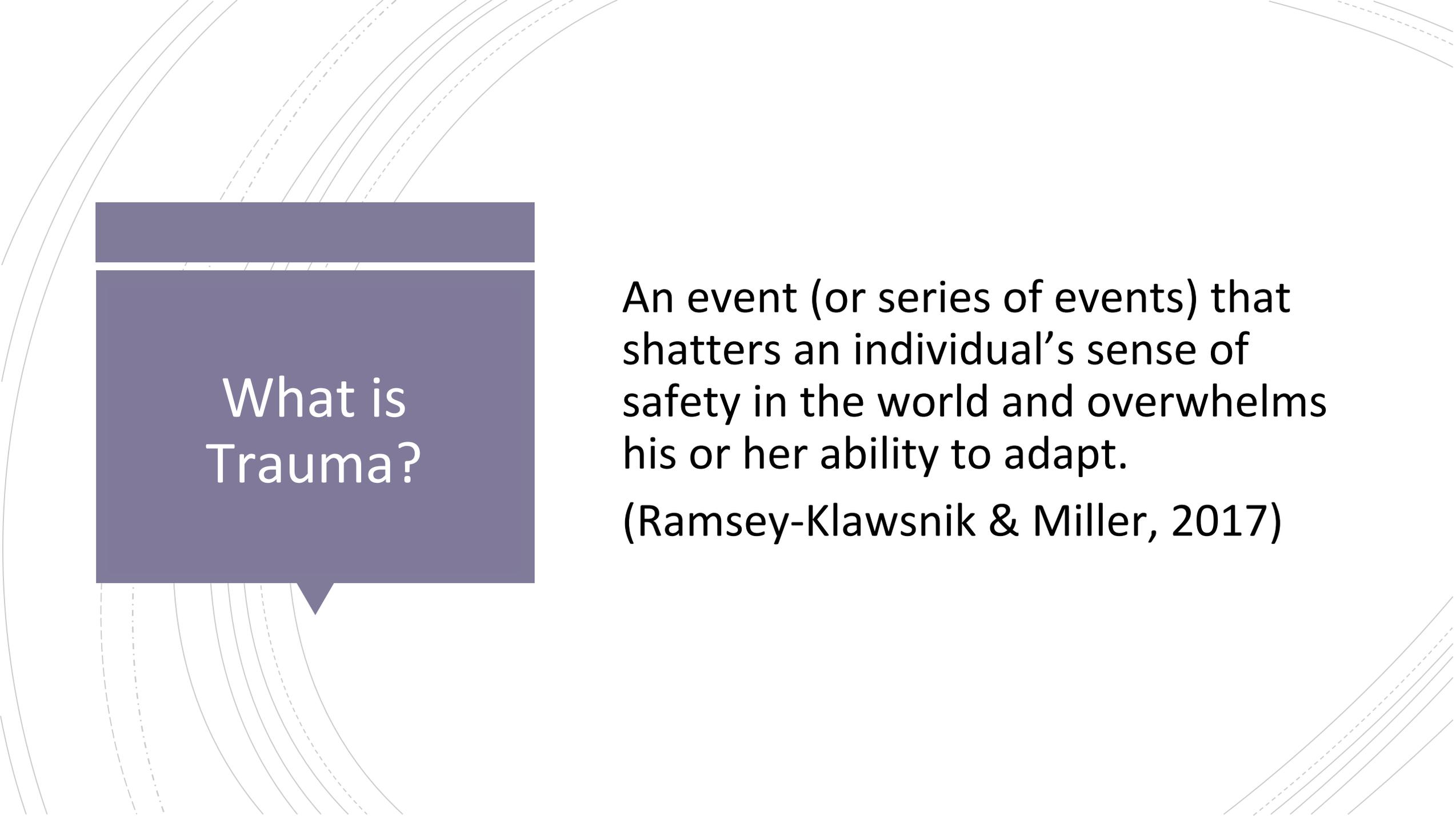
'YES" Scam – Phone

# Scams Target Older Adults...

- Trust – older adults raised in an era of trust.
- Isolation – less visible in society.
- Loneliness – eager for social contact.
- May be less savvy about online and high-tech dangers.
- Incidence of dementia; loss of capacity to weigh financial risks.
- Older adults usually have more assets than young people. It's where the money is!

# Scams Impact on Older Adults

- Loss of trust in others & loss of security.
- Feelings of fear, shame, guilt, anger, self-doubt, remorse, worthlessness.
- Depression, isolation, possible substance abuse, even suicide.
- Financial hardship- inability to replace lost assets through employment.
- Inability to hire attorney to pursue legal protections and remedies.
- Becoming reliant on government 'safety net' programs.
- Inability to provide long term care needs.
- Loss of primary residence.

The background features several sets of concentric, curved lines in shades of gray, some solid and some dashed, creating a sense of depth and movement. A dark purple rectangular box with a speech bubble tail at the bottom is positioned on the left side of the slide.

## What is Trauma?

An event (or series of events) that shatters an individual's sense of safety in the world and overwhelms his or her ability to adapt.

(Ramsey-Klawnsnik & Miller, 2017)

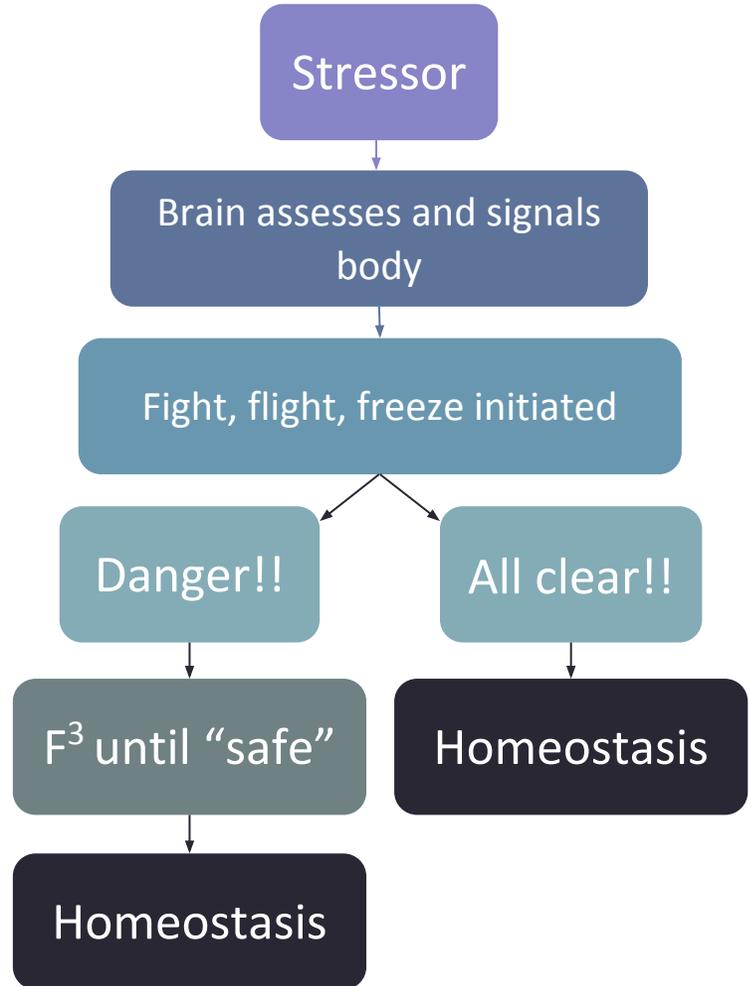
# Five Guiding Principles of Trauma-Informed Care

- Safety
- Trustworthiness & transparency
- Peer support and mutual self-help
- Collaboration & mutuality
- Empowerment, voice, & choice
- Cultural, historical, & gender issues

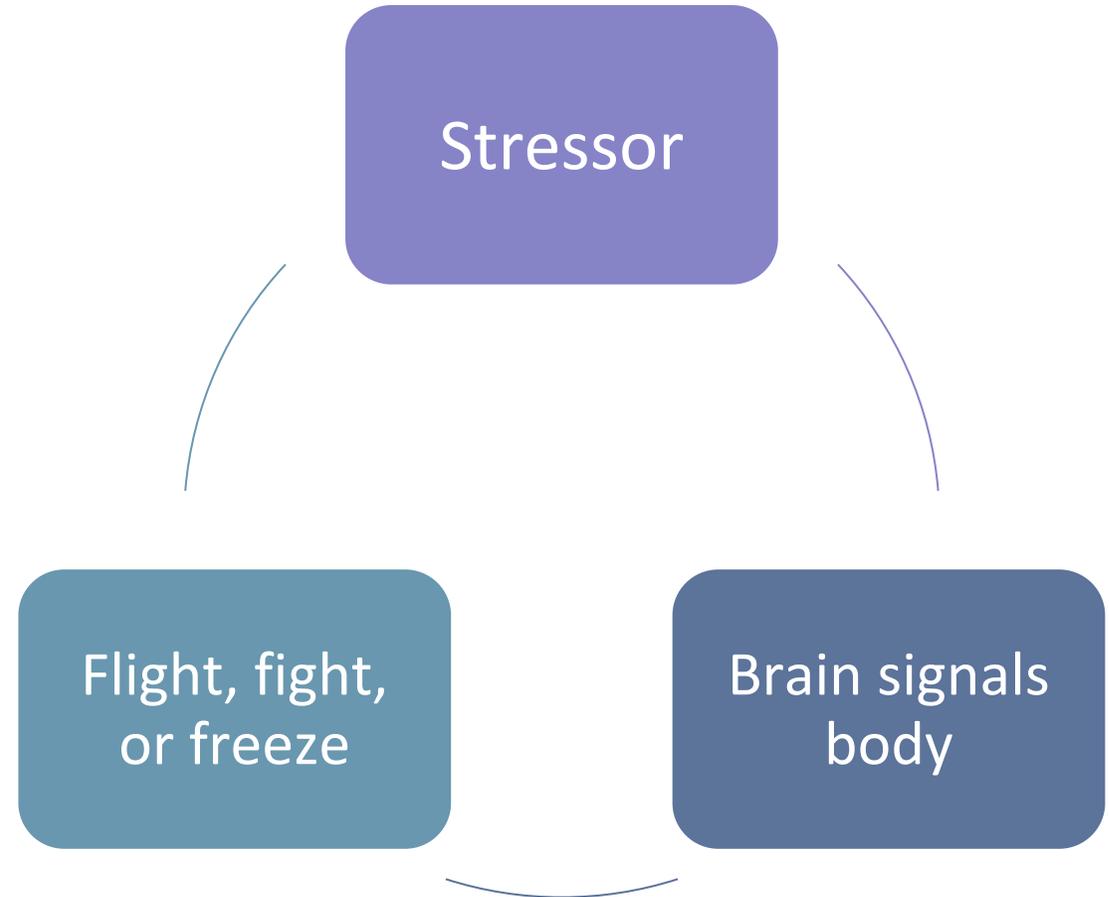
*A trauma-informed approach changes your mindset from “what’s wrong with you?” to “what happened to you?”*

# The Science of Trauma

## Basic Response to Stress



## Chronic Stress



# History Lesson

# Point of Reference – Through the Years



	Born in the: 1920s	Born in the: 1930s	Born in the: 1940s	Born in the: 1950s	Born in the: 1960s
Age Range	91-100	81-90	71-80	61-70	60-69
Significant Events	Society for Human Rights is founded in Chicago. It lasts for a few months before being shut down.	The American Psychological Association approves electric shock therapy as a treatment for "homosexuality"	As many as 10,000 – 15,000 people who were LGBT were killed in concentration camps	The American Psychiatric Association lists homosexuality as a mental disorder	The Stonewall Riots in Greenwich Village start a national civil rights movement.

# Stonewall Uprising – 1969



<https://www.youtube.com/watch?v=Q9wdMJmuBIA>

# LGBT+ Older Adults & Historical Context

Three different generations of LGBT+ older adults have been suggested, each with its own unique culture and circumstances. It should be noted that even within each of these generations, there is variation in individuals. (Fredriksen-Goldsen, 2016)

The Invisible Generation

The Silent Generation

The Pride Generation

# Historical Context, continued

## The Invisible Generation

- Lived through the Great Depression and WWII.
- LGBT+ were detained in concentration camps *after* liberations because being gay was illegal.
- Larger public didn't openly discuss LGBT+.

## The Silent Generation

- McCarthyism – people who were LGBT+ were



categorized as a “threat” to national security. Many were fired or denied employment.

- “Homosexuality” was categorized as a psychiatric disorder.

## The Pride Generation

- Came of age during a time of tremendous social change:
  - Stonewall Riots.
  - Decriminalization of same-sex activities.
  - “Homosexuality” was removed from the Diagnostic & Statistical Manual of Mental Disorders.

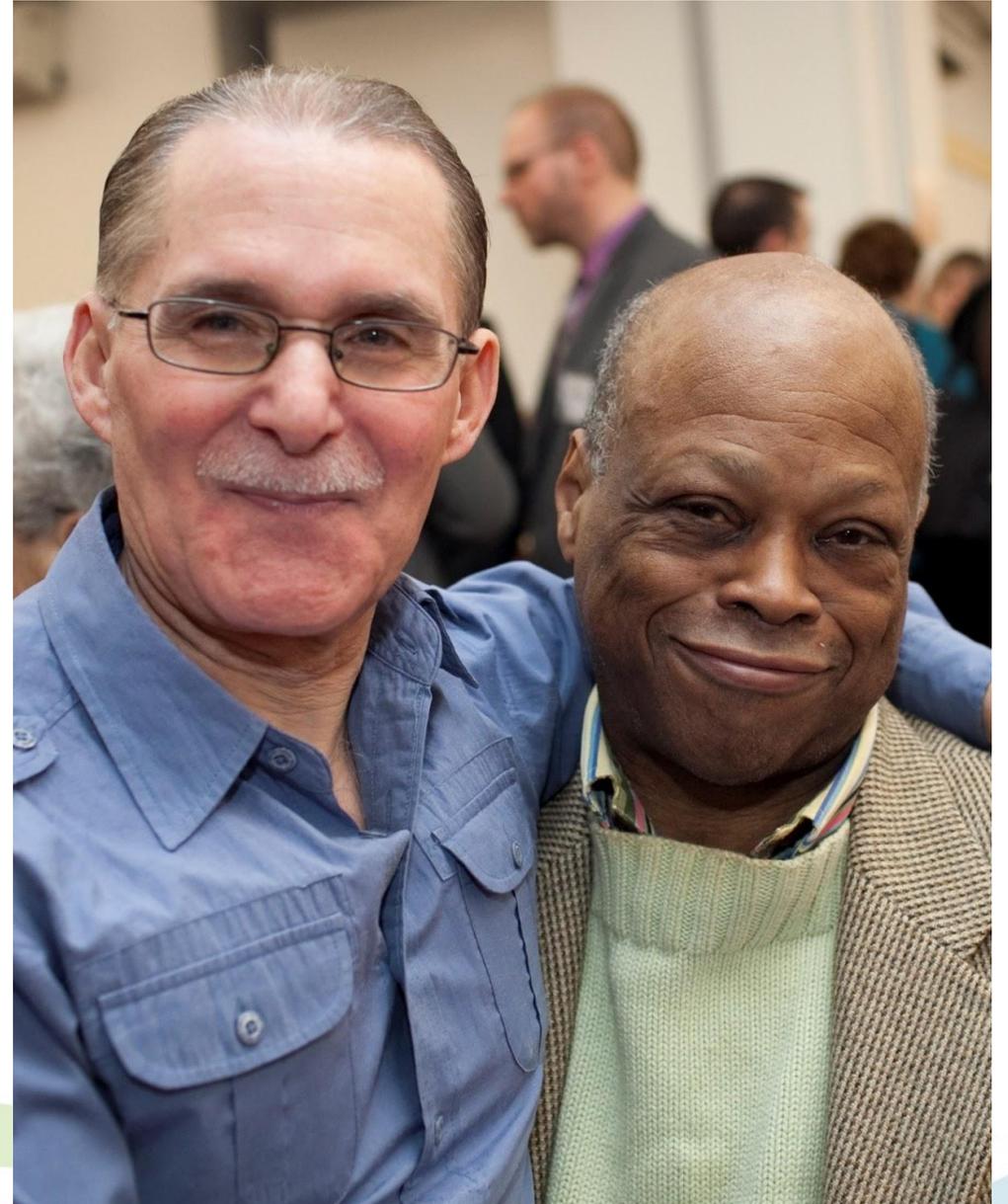
# Facts About LGBT Older Adults

- Twice as likely to be single
- Twice as likely to live alone
- 4x more likely not to have children



# Historical & Institutional Issues for LGBTQ Older Adults

- Housing
- Medicine
- The Law
- The Military
- Religion
- Family





## Coping with discrimination by...

- Becoming **invisible** or **closeted**
- Developing strong **self-reliance**
- Being open with a **limited circle** of supporters
- Making "**home**" an important safe-haven

# Case Analysis – Celia & Marnie

- Braxton and Marnie have been partnered for 22 years.

## About Celia

- 72-year-old white cisgender lesbian
- Has COPD and MCI (Mild Cognitive Impairment)
- Out since she was in her 40s but is more recently going “back in the closet” with new people.
- Has two daughters from a previous marriage. They have not accepted Marnie as Celia’s partner.
  - Daughters are Ellen and Brenda

## About Marnie

- 65-year-old hispanic trans woman who is bisexual.
- Has had top surgery only.
- Is HIV+
- Lost former partner in the 80’s
- Immigrated to the United States from the Dominican Republic in 1997
- First language is Spanish

# The Incident - Celia and Marnie

- While at a family reunion, Brenda confronted Marnie in the restroom. The altercation became physical, and Brenda struck Marnie on the side of her head, causing Marnie to fall and hit her head on the sink. Brenda quickly left the party.
- Marnie did not fall unconscious, but was bleeding pretty heavily. She called 911 but was unable to tell the operator the where she was located.
- The operator said, “Sir, I need to know your location so that I can send help.”
- Upset, Marnie hung up the phone.

- 
1. What assumptions did the 911 operator have regarding Marnie? What was the operator’s intent? Does it matter?
  2. Why did Marnie hang up on the operator?
  3. What’s a better way to address people if gender identity is unknown?

# The Hospital – Celia and Marnie

- Marnie arrives at the hospital. The police officer is also there. He tells hospital staff that Marnie is “difficult” and tells them he still needs to get her statement.
- Marnie starts to seize. The hospital staff asks the officer to leave and that he can come back some other time.
- Marnie is admitted to the hospital for observation. ED staff do not report that Marnie is “difficult.”
- The social worker greets Marnie and says, “Hi. My name is Kacey. How would you like me to address you?”
- After responding, Kacey then asks, “Who may be coming to visit you? Is there anyone you would like us to call for you?”

- 
1. What did the social worker do well? How about the staff?
  2. What if the staff had reported that Marnie was “difficult” to the observation unit?

# Case Analysis – Liam and Alex

- Liam and Alex have been dating for 9 months. Alex has recently moved into Liam's house to help take care of him and the home.

## About Liam

- 68 year-old Black transgender gay man
- Is currently residing at home but needs assistance due to decreased mobility
- Is not “out” regarding his identity as a transgender man to anyone aside from his boyfriend, Alex and a few close friends.
- Liam has no contact with his family who ostracized him 30 years earlier because of his identity
- Liam has given Alex a copy of his credit card in order to do grocery shopping, pick up medicine and pay bills

## About Alex

- 27-year-old white cisgender gay man
- Met Liam through an online dating service and they have been together for 9 months
- Has recently moved in to Liam's home to help care for him
- Liam is “out” and proud of his identity as a gay man
- Liam has a strong support system of family and friends

# Law Enforcement Response- Celia and Marnie

- Celia found Marnie and called 911, who responded. Out of precaution for the Emergency Responders, Celia discloses Marnie's HIV status.
- Police arrived first. The responding officer loudly reported in his radio that he was responding to "the AIDS call. Don't worry, I've got my gloves, but I hope backup is coming soon."
- Marnie refused to speak to the officer, becoming verbally aggressive to him.

- 
1. What could have been done differently?
  2. What may have caused the officer to act the way he did?
  3. How many folks here have come across a survivor of abuse who has become "aggressive" or "combative"?

# The Incident – Liam and Alex

- Alex offers to move in with Liam in order to help take care of him and his home. Liam recognizes that his decreasing mobility makes it hard to complete everyday tasks and happily agrees. He is also happy to have the company of Alex.
- Liam begins to notice that Alex has been coming home with lots of shopping bags and packages from online retailers he does not remember ordering.
- Liam confronts Alex about all the new packages and Alex says he must not remember ordering them and is probably losing his memory

- 
1. Aside from losing his companionship and feeling isolated, why else may Liam be afraid for Alex to leave him?
  2. Do you see Alex's actions as being elder abuse? Why or Why not?
  3. Do you think Alex sees what he is doing as elder abuse?

# The Incident – Liam and Alex

- Realizing the balance on his credit card bill getting higher and higher, Liam again confronts Alex about the increased spending of his money.
- Alex admits to picking a few things out for himself but says he thought Liam would want him to have them since he has worked so hard to help take care of him and his house.
- Not sure what to do and not wanting to lose the help and company of Alex, Liam lets it slide as his debt grows.

- 
1. Why may Liam be afraid to have a home health aid or social worker help him rather than Alex?
  2. What could a home health aid agency or social worker do to give Liam the peace of mind that he would not be discriminated against while working with them?

# Case Analysis – Richard and Carly

- Richard and his late husband adopted Carly 19 years ago when she was just a baby

## About Richard

- 74-year-old white cisgender gay man
- Is currently residing in a skilled nursing facility where he has been the past 4 months while recovering from a fall
- Has been out since his 20's, but has recently started to go "back in the closet" with new people at the facility.
- Has become more introverted with staff and visitors
  - Daughter is 20-year-old Carly

## About Carly

- 20-year-old white cisgender bisexual woman
- Grew up celebrating LGBTQ+ Identities with her fathers
- Visits her father each evening after work
- Lost her other father within the past 5 years

# The Incident – Richard and Carly

- While Carly was visiting her father at the skilled nursing facility with a gift or a framed picture of herself and her two fathers all together as a family.
- While visiting, a nurse walked into Richard’s room. Seeing the family photo, she asks if that is his brother and why he never has any pictures of his wife up.
- Richard stumbles and hesitates for a second and replies that his wife didn’t like to have her picture taken.
- Satisfied with the answer the nurse finishes up in the room and leaves.

- 
1. What assumptions did the nurse who checked in on Richard and Carly make.
  2. Why did Richard feel the need to lie about not having any photos of his “wife” and about who the other man was in the photo
  3. What could have the nurse have done or said differently?

# The Incident - Richard and Carly

- After the nurse had left, Richard and Carly began talking when they heard yelling down the hall.
  - Another resident a few rooms down began to shout profanities about gay men using many hateful slurs in response to an advertisement on his in-room television.
  - Rather than intervening, the staff in the hall began to chuckle and dismiss the situation.
  - Richard turned to the picture that Carly had brought of their family together and asked her to take it back home with her rather than keep it up in his room there.
- 

1. What could have been done differently?
2. What may have caused the staff to react the way they did by chuckling and dismissing the situation?
3. Why would Richard ask Carly to take the photo back home with her? How would this make him feel?

**Resources & Service Providers  
for  
LGBTQ victims  
(New York City Region)**

# Resources & Service Providers for LGBTQ victims

- **Adult Protective Services (HRA)**
- **NYC Department for the Aging (DFTA)**
- **NYC Not for Profit Elder Abuse Services Providers**
  - JASA (Brooklyn & Queens)
  - Carter Burden Network (Manhattan)
  - SHOPP (Bronx)
  - CASC (Staten Island)

# Resources & Service Providers for LGBTQ victims

- **New York City Elder Abuse Center (NYCEAC at Weill Cornell)**
  - **Case Consultation**
  - **Concerned Citizen Helpline**
- **Enhanced Multidisciplinary Teams (E-MDTs) – all five boroughs**
- **Weinberg Center at the Hebrew Home at Riverdale (EA Shelter)**
- **NYPD Domestic Violence Unit**
- **SAGE**

# Resources & Service Providers for LGBTQ victims

- **Safe Horizons**
- **WomanKind**

# Other Resources

- Domestic Violence Programs

- National Domestic Violence 24-hour Hotline: 1-800-799-7233 or 1-800-787-3224 (TTY) or [deafhelp@thehotline.org](mailto:deafhelp@thehotline.org)
- New York State Domestic Violence 24-hour Hotline: 1-800-942-6906 or 711 for Deaf or Hard of Hearing
- New York State Office of Victim Services: <https://ovs.ny.gov/locate-program>
- New York State Coalition Against Domestic Violence (NYSCADV): <https://www.nyscadv.org/find-help/program-directory.html>

# New York Connects

- Bronx: Neighborhood SHOPP (347) 862-5200
- Brooklyn: JASA (718) 671-6200
- Manhattan New York Foundation for Senior Citizens (212) 962-2720
- Queens Selfhelp Community Services, Inc. (718) 559-4400
- Staten Island Community Agency for Senior Citizens (718) 489-3954

# New York State Coalition on Elder Abuse

NEW YORK *Takes Action* AGAINST  
ELDER MISTREATMENT AND NEGLECT

**Target:  
Elder  
Abuse**

[nyselderabuse.org](http://nyselderabuse.org)



# Thank you!



# Questions and Answers

(Please use Chat Box)