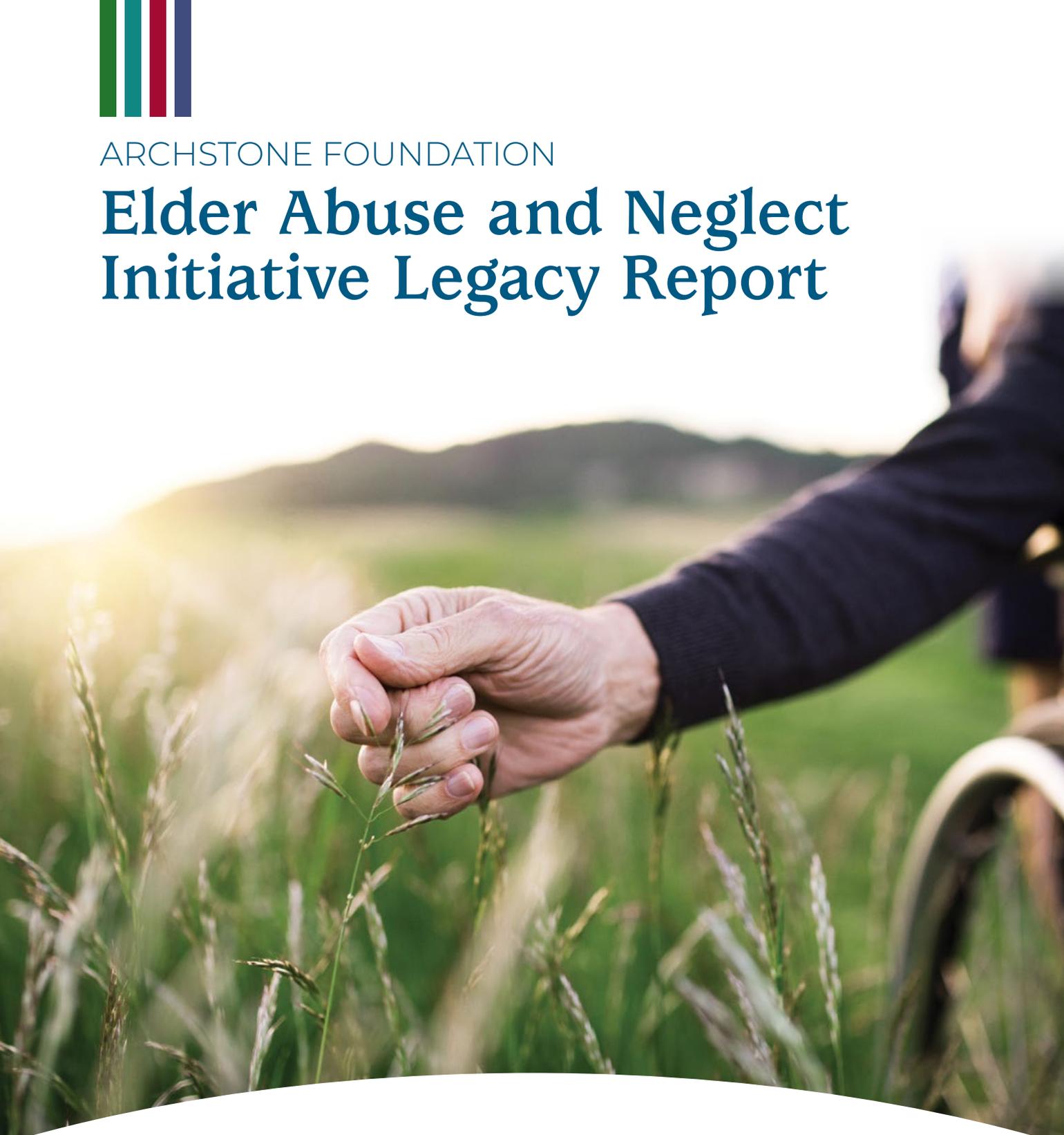




ARCHSTONE FOUNDATION

Elder Abuse and Neglect Initiative Legacy Report



Keck School of
Medicine of **USC**





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This report was prepared by the Department of Family Medicine
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Executive Summary

Effecting social change is an arduous and unforgiving process. Waiting for movement can and often does test the most patient and committed of advocates, as progress travels in fits and starts and incremental shifts emerge over long periods of time. Yet, at the moment when vision, hope, knowledge, and hard work align, the promise of change can evolve into realized potential. This is the point of inflection, when real transformation materializes, and the implausible becomes possible.

Twenty-five years ago, elder mistreatment was largely unacknowledged. In private quarters, the topic was veiled in secrecy, infrequently addressed and rarely reported. Among the public, awareness of this inherently unpleasant issue was limited and marked by indifference. Providers charged with helping older adults operated in discrete silos, within an underfunded, disjointed system, ill-equipped to respond to the need. Compounding the problem, elder mistreatment was not regarded as a discipline worthy of practice, study, or philanthropy. Too often, aggrieved older adults suffered silently without recourse or relief.

Globally, approximately one in six people aged 60 years and older experience physical, psychological, financial and/or sexual abuse and neglect. In the United States, the incidence approximates one in 10. For elders with cognitive impairments, the likelihood of harm is even greater. It is believed that a small percentage of events are actually reported. Resultant physical injuries, psychological consequences, direct economic losses, and billions of dollars in increased health care costs have rendered elder mistreatment a serious public health concern.

 *With the global population of older adults predicted to double in size to about two billion in 2050, elder mistreatment is expected to surge.*

Amid the vacuum of service delivery, Archstone Foundation entered the arena and laid the groundwork for improved and validated systems and practice. With over 25 years of funding, the Foundation has effected real, palpable change in the field, funding 130 projects exceeding \$16 million. Archstone Foundation has been among the most prolific champions of elder mistreatment projects, applied research, and model interventions.

During the 1990's and early aughts, the Foundation launched over 30 direct service, educational, and training projects and held the first national conference on elder mistreatment. The Foundation's early investments roused a listless system from somnolence, inciting interest in a vital concern long obscured from public consciousness. In 2000, the Foundation invested in the innovative Vulnerable Adult Specialist Team (VAST), a multidisciplinary medical response model of collaborative case review.

Building upon and enhancing the VAST model, in 2003 Archstone Foundation supported the nation's groundbreaking Elder Abuse Forensic Center in Orange County which engaged diverse experts across fields in one forum to efficiently and comprehensively address complicated cases of adult mistreatment from report to resolution. The pioneering mechanisms for collaborative case assessment and reparation offered a best practice approach to assure elder safety and remediate civil and criminal harms.

The Forensic Center's success inspired the Foundation to reproduce the template statewide and to reconstitute California's fragmented response system. The multi-year Elder Abuse and Neglect Initiative (the Initiative) was unveiled in 2006. Eighteen projects were funded in each of two phases over a five-year period. The focal point was the replication of Forensic Centers in Los Angeles, San Francisco, and San Diego and the growth of six multidisciplinary teams throughout California. Over 75% of the Initiative projects continued to serve their communities in an original, modified, or related form after the Foundation's Initiative concluded. The California Forensic Centers alone have leveraged close to \$7 million in funds from public and private sources since the grant period ended.

The Foundation-financed models have provided content expertise, toolkits, and information to institutions and agencies which have proliferated multidisciplinary units nationwide. Teams in Colorado, Hawaii, New York, Tennessee, Texas, and Virginia, among others, were informed by the archetype. The Department of Justice's Multidisciplinary Team Technical Assistance Center was similarly influenced by resources and products developed for the California-based teams. Most consequential, Forensic Center processes and principals directly advised the nation's first elder justice legislation, the Elder Justice Act of 2010, which authorized the creation of Forensic Centers and a forensic research agenda. To date, Congress has appropriated approximately \$46 million to fund the Act.

The Initiative also promoted complementary components of a statewide service delivery system in areas such as training and education, financial protection, and legal and ombudsman services. Through its grantmaking, the Foundation transformed elder mistreatment training and education with the development of core curriculum modules for Adult Protective Services, emergency medical technicians, clergy, civil attorneys, judges, law enforcement, and medical, legal, and dental students. The Foundation also sponsored Training Resources on Elder Abuse, a web-based repository of webinars, videos, and tutorials for professionals and the public.

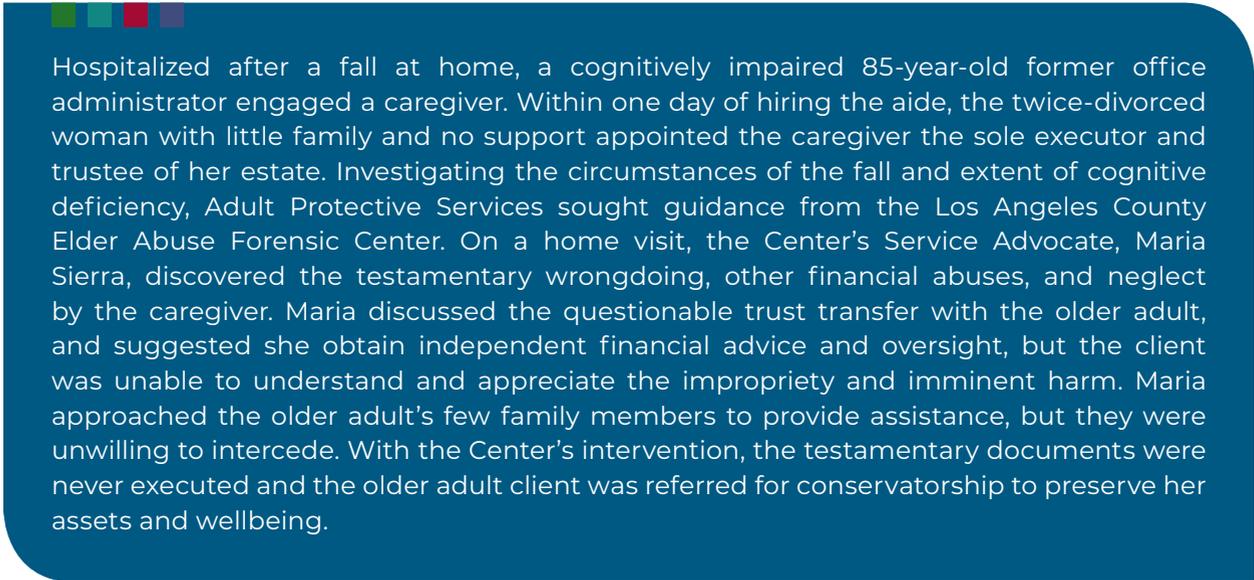
In addition to demonstration projects, the Foundation enhanced the field through applied research, beginning with the Initiative evaluation documented in the *Journal of Elder Abuse and Neglect*. Other studies funded by the Foundation include the cross-site evaluation of the California-based Forensic Centers, the novel Abuse Intervention Model, and the National Elder Mistreatment Study: Outcomes. Forensic Centers have also proven fertile ground for studies on concept validation and forensic markers of abuse, among others. Collectively, projects commissioned by the Foundation have contributed to an evidence-base for critical interventions and furthered aggregate scholarship in the area.

 *Through the Initiative, the Foundation advanced champion practitioners and academics who continue to lead myriad thriving project-based interventions and ambitious research studies. In turn, champions mentored emerging leaders, many of whom have since become trailblazers in the field. The connections forged transcended the term of the Initiative and have resulted in ongoing collaborations and enduring professional relationships.*

In recent years, Archstone Foundation has furthered person-centered approaches, trauma-informed care, and social support. Mining individual reserves of empowerment, the Foundation innovated the first service advocate-case management enhancement to the Los Angeles County Elder Abuse Forensic Center and promoted elder autonomy and safety through the Gatekeeper project and Safe Options for Seniors. The Foundation has funded technology-based modules to assist caregivers and prevent mistreatment. With the objective of enhancing strengths-based capacity, the Foundation has helped reframe the cultural exchange on aging and adult mistreatment and raised national awareness of the overriding need for elder equality and justice.

The Foundation has populated a domain once considered unsuited to practice, research, or philanthropy. Inspired to build on the bedrock of inventions laid by the Foundation, private philanthropies and government funders have embraced and augmented the field. Notably, since its elder mistreatment funding began in earnest in 2001, the National Institute of Justice has awarded nearly \$14 million in elder abuse-related grants. From 2016 through the present, the Administration on Community Living distributed approximately \$8 million in Elder Justice Innovation Grants. Abuse-related funding from the National Institutes of Health in 2018-2019 was over eight times greater than all of its pre-1995 elder mistreatment awards combined. And, since the Victims of Crime Act funding was expanded in 2016 to include elder abuse, over \$10.5 million in appropriations have been directed to support programs in California.

Archstone Foundation has been the agent of change, and its sustained investment in the field, the point of inflection for quantum improvement. From activating interagency collaboration and coordination, to enhancing training and education, and increasing professional and public awareness of elder mistreatment, the Foundation has indelibly advanced statewide and national remediation across practice, research, legislative, and policy domains. With continued momentum and collective efforts from philanthropies, government funders, policymakers, and stakeholders to build upon gains, the path to prevention lies ahead to further the objectives of elder justice and preserve the rights and freedoms of all older adults.



Hospitalized after a fall at home, a cognitively impaired 85-year-old former office administrator engaged a caregiver. Within one day of hiring the aide, the twice-divorced woman with little family and no support appointed the caregiver the sole executor and trustee of her estate. Investigating the circumstances of the fall and extent of cognitive deficiency, Adult Protective Services sought guidance from the Los Angeles County Elder Abuse Forensic Center. On a home visit, the Center's Service Advocate, Maria Sierra, discovered the testamentary wrongdoing, other financial abuses, and neglect by the caregiver. Maria discussed the questionable trust transfer with the older adult, and suggested she obtain independent financial advice and oversight, but the client was unable to understand and appreciate the impropriety and imminent harm. Maria approached the older adult's few family members to provide assistance, but they were unwilling to intercede. With the Center's intervention, the testamentary documents were never executed and the older adult client was referred for conservatorship to preserve her assets and wellbeing.



I. Introduction

Archstone Foundation began its elder abuse-dedicated philanthropy over twenty-five years ago when adult mistreatment was little known and discussed. The somber, unappealing topic was considered a private issue, rather than a social, health, or criminal justice concern. Infrequently reported, harms were largely outside professional purview and public consciousness. Mistreatment within communities and institutions went largely unnoticed and unheeded.

Compounding matters, the inadequately funded aging network, inexperienced service sector, and under-informed legal system, were collectively ill-equipped to effectively support elders who had been mistreated and redress their injuries. The systemic rifts which afflicted institutions were even more pronounced across the fractured network of service providers, whose respective practices were detached from the interdisciplinary proficiencies of other professionals in the field.

Practice shortcomings paralleled research deficits. Elder mistreatment was neither regarded a field, nor a legitimate discipline worthy of study. To punctuate the problem, the area was lacking a uniform definition. As a result, private funders and public agencies were disinclined to invest in research to test and validate potential interventions. A dearth of academic studies and evidence-based practice standards to inform interventions inhibited effective solutions-based responses. The lack of widespread professional and public awareness of the phenomenon further contributed to the unsteady structural foundation upon which prevention efforts were dependent.

 *For the growing elder population, the response to adult mistreatment was insufficient, remedies were scarce, and needed relief was unavailing.*

Amid the sparse and quiescent landscape, Archstone Foundation perceived the need, observed the chasm of care, and sought to redress the inequity. Over the dedicated course of a generation of funding, the Foundation laid the groundwork for improved systems, reformed processes, and validated practices. Among its 130 projects and approximate \$16 million in grant awards, the Foundation supported innovative Forensic Centers, multidisciplinary teams, training and education for first responders, financial protections, ombudsman safeguards, and legal services to improve the quality of care and services for older adults.

Archstone Foundation has remained resolute in the breach against elder mistreatment and effected appreciable change. Catalyzing the elder justice movement, the Foundation impelled a field to action across practice, research, legislative, and policy domains. With its landmark investment, the Foundation has promoted multidisciplinary mechanisms and activated structural and process reforms to move the field forward. With a fluent response network expanding, the tides of transformation are rising and resounding for older adults nationwide.



“Archstone Foundation laid the groundwork to make research possible.”

– Laura Mosqueda, MD, Dean, Keck School of Medicine of USC; Professor of Family Medicine and Geriatrics; Director, National Center on Elder Abuse

II. Archstone Foundation

Archstone Foundation was founded in 1985 when Family Health Plan (FHP), Inc., a non-profit, federally qualified health maintenance organization was converted to a for-profit corporation. In accordance with California law, FHP’s assets were transferred into a charitable entity, FHP Foundation, Archstone Foundation’s predecessor in interest. Early FHP Foundation funding supported public health and health care delivery systems across the lifespan.

A decade after its inception, FHP Foundation installed visionary Long Beach business leader, Joseph F. Prevratil, as President and Chief Executive Officer. Together with the Board of Directors, he redefined the Foundation’s mission and strategic direction to address the pressing needs of California’s growing aging population. In 1996, when the for-profit business, FHP, Inc., was acquired by a health care corporation, the charitable entity was renamed Archstone Foundation. Much like the stone for which it is named, the Foundation has served as a support and connector. For over 30 years, the Foundation has braced the structure of elder justice through partnerships committed to improving the lives and wellbeing of older adults.

Among its primary areas of funding, Archstone Foundation has sponsored innovative multi-year programming, projects, and research dedicated to the prevention of elder mistreatment. The collective Foundation-advised initiatives and their progeny have demonstrably transformed the landscape of interventions throughout California and immeasurably improved the national response to elder mistreatment.



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III. Elder Mistreatment: Defined & Described

An estimated one in six older adults globally, aged 60 and older, will experience elder mistreatment¹. In the United States, the incidence approximates one in 10². For every case reported, it is presumed that approximately 24 additional occurrences remain undetected³. Elder mistreatment is defined as an intentional act or omission by a caregiver or trusted other that causes or creates a risk of harm to an older adult. Injurious conduct includes physical, psychological, sexual, and financial abuse, as well as exploitation and neglect⁴. Offenses occur in both institutional and community settings, by caregivers, family members, professionals, and fellow residents, and often result in significant physical and psychological harm⁵. Associated financial costs approximate \$2.9 billion in personal losses and \$5.3 billion in annual health care expenditures⁶. With elder mistreatment a serious public health concern and the aging population in the United States expected to increase to nearly 70 million by 2030⁷, effective intervention is critical.

FORMS OF ELDER MISTREATMENT



PHYSICAL: Intentional use of physical force that results in illness, injury, pain, functional impairment, distress, or death



PSYCHOLOGICAL: Verbal or nonverbal behavior that results in the infliction of anguish, mental pain, fear, or distress



SEXUAL: Forced or unwanted sexual interaction (touching and non-touching acts) of any kind with an older adult, whether or not competent to give informed approval



FINANCIAL: Illegal, unauthorized, or improper use of an older individual's resources by a caregiver or trusted other for the benefit of someone other than the older individual



NEGLECT: Failure by a caregiver or trusted other to protect an elder from harm, or the failure to meet needs for essential care which results in a serious risk of compromised health and safety⁸

RISK & PROTECTIVE FACTORS



¹⁻⁸ See endnotes on page 65.



“They funded elder abuse at the time when no one else had. So really, they were the first to recognize what a serious problem this is and establish themselves as a leader.”

– Lisa Gibbs, MD,
Director of the Center of
Excellence and Clinical
Professor of Family
Medicine at UCI

IV. Early Funding

With its emergent foray into the field, Archstone Foundation observed the unmet need and mounting demand for elder mistreatment interventions and resources throughout California. While funding projects to enhance the quality of elder care and coordination of services statewide, the Foundation recognized that systemic deficits within governmental institutions, professional organizations, and provider agencies led to ineffective service delivery measures and yielded uncertain results.

A perceptible disconnect between these entities similarly frustrated necessary collaboration and effective outcomes. Essential agencies along the continuum of elder care, including law enforcement, Adult Protective Services, prosecutorial agencies, long-term care ombudsmen, and medical professionals functioned in disparate silos limited to their respective areas of expertise. Provider organizations were administered independently under distinct operating guidelines, with discrete and sometimes conflicting goals and prevention protocols. Because elder mistreatment is often multifactorial and complex, concerted and coordinated care across disciplines is necessary to assure optimal results for victims.

! *Chronic fissures in California’s response to elder mistreatment hindered comprehensive statewide delivery of optimum care, and spurred Archstone Foundation’s commitment to bridge the gap through targeted philanthropy.*

From 1992 through 2005, the Foundation awarded 37 grants exceeding \$3.7 million to California-based institutions and agencies to address elder mistreatment. Primary funded areas included direct service programs, training and awareness for first responders, financial abuse specialist teams, and education for medical, financial, and legal professionals.

During this time, the Foundation sponsored multiple conferences to promote shared knowledge and concerted efforts across geographic and practice domains. The Silent Suffering: Adult Abuse Task Force Conference was held in 1992, the National Conference on Elder Abuse in Minority Populations in 1998, and the National Conference on the Medical Aspects of Elder Abuse in 2002.



V. The Elder Abuse Forensic Center Model

Effective remediation requires intervention from professionals across intersecting social service, medical, legal, and mental health systems. The Vulnerable Adult Specialist Team, funded by Archstone Foundation in 2000, recognized the value of the multidisciplinary model. Initiated by Laura Mosqueda, MD, a professor of family medicine then at the University of California, Irvine (UCI), the medical response team was comprised of a geriatrician, gero-psychologist, researcher, and gerontologist. Specialists provided medical evaluation, capacity assessment, and service referrals for adults who had been mistreated. In concert with Adult Protective Services and law enforcement, Vulnerable Adult Specialist Team members documented injuries and gathered evidence, aligning proficiencies to enhance elder health care delivery and facilitate legal requisites.

Expanding the Vulnerable Adult Specialist Team model in 2003, the Archstone Foundation-funded Orange County Elder Abuse Forensic Center was transformative. Led by Mosqueda and Kerry Burnight, PhD, the nation's first Elder Abuse Forensic Center engaged a full complement of experts in one forum to address the complex, multi-layered dimensions of adult mistreatment from report to resolution. The practice was ground-breaking in integrated service innovation and breathtaking in the advancement of client-centered intervention.

Agencies with traditionally discrepant perspectives and procedures collectively evaluated facts, developed case-specific action plans, and coordinated services. Forensic practices included in-home assessments, medical review, victim interviews, and evidence preservation. Adult Protective Services, law enforcement, long-term care ombudsman, prosecutors, Vulnerable Adult Specialist Team members, older adult services, victims' advocates, and guardianship representatives each had a seat at the table, a stake in the process, and a compelling view to contribute. The bounty of shared insights and expertise exchanged offered a best practice approach to assure elder safety and remedy civil and criminal harms.

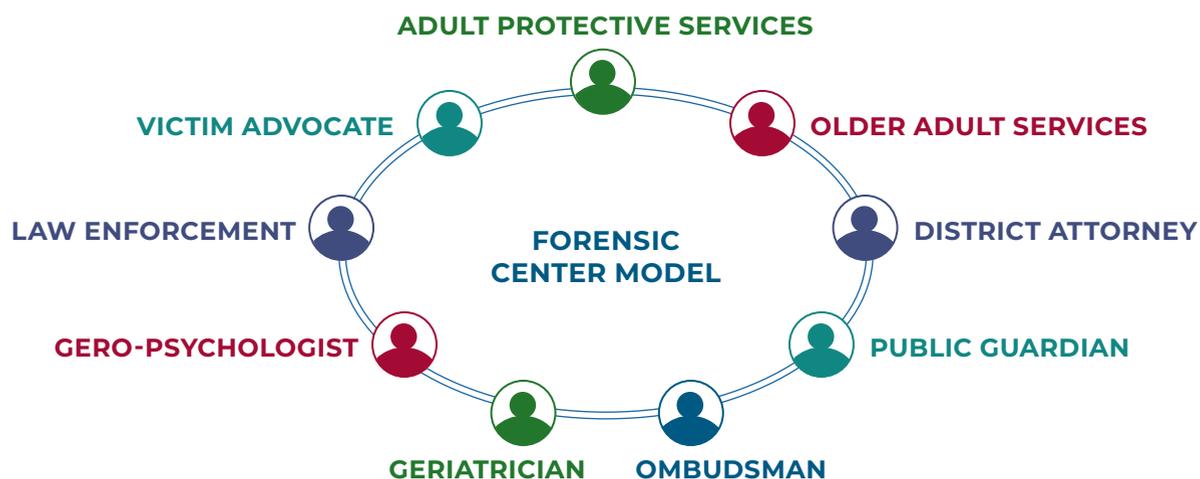
Far beyond its financial investment, the Foundation was instrumental in securing key support from Orange County legislators, agencies, and community leaders for the creation of the Forensic Center. With significant in-kind and direct financial commitments, Orange County Adult Protective Services was an indispensable partner in the Center's achievement and continuity. Other county departments were similarly integral to fulfilling the promise of the forensic model.

“You could have what we used to call turf war rivalry, jealousies, political in-fighting between the heads of different agencies, which defeats so many things and doesn't help anybody. And when you get to the level of building a multidisciplinary coalition, that's where you get rid of the egos, you get rid of the rivalry aspects and you come to the table ... It doesn't happen overnight, but eventually you build a level of trust with one another, to the point that you see things from a different perspective.”

– Paul Greenwood, LLB, Former Deputy District Attorney, Help and Outreach to Protect the Elderly (HOPE) Forensic Center Team, San Diego County



THE ORANGE COUNTY ELDER ABUSE FORENSIC CENTER MODEL



In practice, agencies that referred cases of adult mistreatment – typically Adult Protective Services, the ombudsman, and law enforcement – were deemed the Forensic Center’s clients. Participants understood that all actions were taken in service to the elder victims who were the tacit parties-in-interest. To this end, the Forensic Center worked closely with victim advocates and Human Options, which offered domestic violence prevention programs, to ensure that the proceedings contemplated each victim’s voice and respective wishes. Both domestic violence prevention and victims’ services attended weekly Forensic Center meetings. A Victim Services Needs Panel, comprised of victims, domestic violence, mental health, and human rights advocates, and law enforcement personnel, was formed to assess the needs of older adults and the effectiveness of follow-up services and resources.

In addition to providing combined expert review and individualized case management, the Forensic Center was a font of innovation, information, and education. Helmed by Mosqueda and the Forensic Center team, the Elder Abuse Training Institute, funded by UniHealth Foundation, complemented Forensic Center practices, guiding professionals, students, and the public. Law enforcement, mental health workers, and coroner employees received instruction in the detection and investigation of elder mistreatment. Medical, pharmacy, and law students were educated in the forensic markers of abuse and mandatory reporting requirements. Over the years, numerous professional and community presentations, workshops, and trainings have been conducted by and through the Forensic Center in California and nationwide, reaching thousands, elevating professional competence, and increasing public awareness of elder mistreatment.

Under the umbrella of the Forensic Center, the UCI team directed groundbreaking research studies which revolutionized practice and intervention for elders who had been mistreated. They developed the *Geriatric Pocket Doc* to educate social workers, police officers, and related professionals on geriatric practice and to aid the detection of elder mistreatment. Forensic Center principals provided medical and technical consultation throughout California and across the country. With the Institute on Aging in San Francisco, the Center engineered a mobile app called “368+ Elder and Dependent Adult Abuse Guide for CA Law Enforcement.”

In a community which fostered growth and innovation, specialized teams offering discrete services were created in cooperation with the Forensic Center. The Orange County Elder Abuse Prevention Coalition aligned groups devoted to advocacy and awareness, and the Elder Death Review Team investigated suspicious elder deaths.

THE ORANGE COUNTY ELDER ABUSE FORENSIC CENTER ACTIVITIES

RESEARCH

- Forensic Markers of Abuse
- Bruising Studies
- Caregiver Stress
- Elder Financial Abuse
- Elder Physical Abuse
- Mistreatment in Long-term Care Facilities
- Integrated Care
- Findings from Forensic Centers

PRODUCTS

- *Geriatric Pocket Doc*
- 368+ Mobile App
- Forensic Center Training Video
- Fact Sheets
- Training Manuals

TEAMS

- Elder Death Review Team
- Elder Abuse Prevention Coalition
- Vulnerable Adult Specialist Team
- ElderPEACE Coalition

EDUCATION

- Elder Abuse Training Institute
- Police Officer Standard Training
- Medical, Pharmacy, and Law Student Education
- Mental Health Worker Training
- Coroner Instruction

SERVICES

- Case Evaluation and Management
- Technical Assistance and Teleconsultation
- Expert Testimony
- Medical File Review
- Telehealth

The Center's successes drew the interest and investment of other public and private funders eager to contribute to its invention, growth, and potential to address elder mistreatment. It also served as a catalyst to the Archstone Foundation's unprecedented statewide juggernaut, the five-year Elder Abuse and Neglect Initiative launched in 2006.



VI. The Elder Abuse and Neglect Initiative

Inspired by the Forensic Center and other teams, Archstone Foundation envisioned a large-scale strategy to replicate the success, synergy, and ingenuity of the model statewide. The Elder Abuse and Neglect Initiative (the Initiative) was the first significant philanthropic effort to improve the quality of care and coordination of services for mistreated and neglected elders throughout California. With sustained strategic investments in directed programs, projects, research, and policy, the Foundation curated an array of innovative models that generated best practice approaches, populating a previously sparse landscape with a thriving, synergistic ecosystem offering resources and services that have bettered the lives of countless older adults who had been mistreated.

Planning for the Initiative

Brimming with the potential for attainable solutions for older adult victims, the Foundation formulated a plan to bring the concept to life. Archstone Foundation Vice President Mary Ellen Kullman methodically appraised the breadth and scope of elder mistreatment in California. The months-long undertaking began with exhaustive research and literature reviews and culminated in expert focus group advisories. A diverse cache of professionals, educators, and academics were assembled in both Northern and Southern California to advise the Initiative. Among them, leaders representing prosecutorial, Adult Protective Services, medical, legal, financial, ombudsman, and social service sectors joined victim advocates in discussion about significant topics in the field. These included deficits in public awareness, education and training, prevalence estimates, supportive programming, and provider services.

Based upon the multimodal guidance elicited and distilled, the Foundation issued a broad-based, statewide clarion call inviting proposals to fund projects. Over one hundred submissions from interested entities were evaluated by the Foundation. Eighteen projects were selected to participate in Phase I of the two stage Initiative.

With considered precision, Archstone Foundation invested in grants representing integral and interrelated components of a care and service delivery system dedicated to elder mistreatment intervention. Funds were awarded to academic institutions, government agencies, municipalities, social service agencies, and non-profit organizations throughout California. The projects ranged in size, budget, community, geographic region, and area of focus. All fell into six major categories identified during the focus group sessions: education and training of first responders, multidisciplinary teams, innovative projects and forensic center models, systems analysis, financial protection, convening, and technical assistance.

The Framework

The Initiative embraced distinct service models across divergent systems. Unique interventions engaged geographically and culturally diverse older adult victims across the state. By design, the construct emboldened participants to realize project autonomy, productivity, and potential. It also encouraged them to glean and share knowledge from their affiliates, untethered to the insularity of their own projects, disciplines, and objectives. The Foundation fostered a capacious arena for innovation and progress through which strategic alliances were forged and a blueprint was developed to cohesively meet the needs of California's burgeoning population of elders.

At the outset, the Foundation installed an infrastructure, operational protocols, and practice measures into the grants to facilitate the success of the Initiative and its component projects. Grant awards were moderated by discretion, necessity, and accountability. Funds were intended to solely support execution of the core concept, exclusive of operating costs and overhead. Quarterly reports prepared by project coordinators for the Foundation detailed program activities and fiscal expenditures for the period. From launch to closure, all grants were grounded in sustainability, driven by outcome, and guided by goal attainment.



“When I became a program officer for the federal government, my first call was to Archstone and I said, you guys did a great job, how do I do a great job too?”

– Mary Twomey,
MSW, Former
Co-Director, Center of
Excellence and Aging
Program Specialist,
Administration for
Community Living



CONVENING AND TECHNICAL ASSISTANCE – THE CENTER OF EXCELLENCE

In addition to funding, Archstone Foundation wove strata of support into the fabric of the Initiative. With the grant-sponsored Center of Excellence at UCI, the Foundation offered affiliates continuing content expertise and resources on the multifarious facets of elder mistreatment. Technical assistance was tendered to improve practices and overcome operational challenges. The Elder Abuse Training Institute provided a bank of trainings, toolkits, and resources to enable projects to build capacity and attain proficiency. UCI-led research in novel practice areas, such as forensic markers of abuse, was dispatched to Initiative practitioners for immediate application. Projects also engaged in pivotal biannual, day-and-a-half, intensive Center of Excellence-organized and Foundation-funded meetings. At these convenings, leaders in the field delivered keynote addresses and participants shared their own best practices, challenges, and lessons learned. Beyond the formal sessions, the convenings afforded formative opportunities for peers to exchange ideas, insights, and resources. Members of various agencies drew from the acumen of more experienced colleagues, and worked in unison to mediate solutions to seemingly confounding issues. Participants cultivated essential relationships with Initiative colleagues in other areas of practice. The Center of Excellence also served as a trusted resource to the Foundation to trace and report project status and advise future Initiative directions.

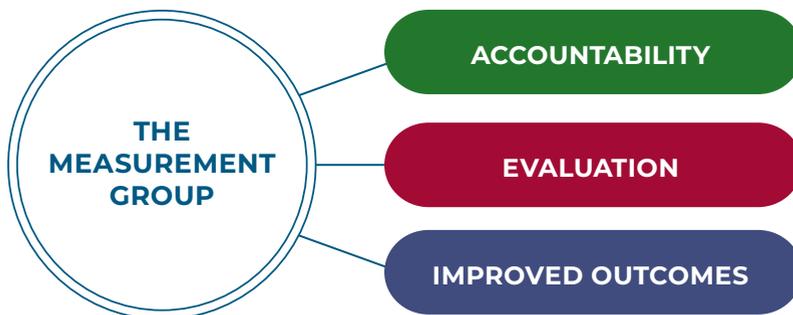
The Center of Excellence Activities



CROSS-CUTTING EVALUATION – THE MEASUREMENT GROUP

To complement the banded support offered by the Center of Excellence, Archstone Foundation retained The Measurement Group to evaluate data and provide feedback on project processes and outcomes. Scaffolded measures were embedded within the Initiative design to ensure project fidelity, refine best practices, and promote efficacy. Monthly reviews, quarterly reports, and semi-annual convenings served as benchmarks for assessment. Together, The Measurement Group, the Foundation, and the Center of Excellence called participants each month to elicit updates and provide guidance. In addition, The Measurement Group and the Foundation conjointly constructed thorough quarterly report templates to elicit qualitative and quantitative data and track outcomes. Project coordinators prepared and submitted the detailed reports describing their progress, the status of service and product deliverables, the successes achieved, and challenges confronted. The reports provided a touchstone for introspection and accountability, and an impetus to adjust course where appropriate. Though some project personnel found the reports cumbersome, and others felt they were not rigorous enough, the Foundation considered the findings essential to develop a critical evidence base. Convenings presented another forum to address project performance. At the conclusion of the Initiative, The Measurement Group quantified the aggregate impact of the projects and resultant improvements in the quality of care and delivery of services to older adults.

The Measurement Group Objectives



“Convenings helped to give me a vocabulary and a broader sense of strategy working with people, a bigger understanding of what these larger systemic issues were. It definitely helped me as a coordinator to be a better leader of the team and have broader awareness.”

– Julia Rowan, PhD

Phase I Projects

PHASE I PROJECTS AWARDED

Education and Training

- » City College of San Francisco – Elder Abuse and Neglect Prevention Training and Education program
- » County of Santa Clara – Elder Abuse Training Program for Faith Communities
- » San Diego State University Research Foundation – Advanced Training Program for Adult Protective Service Workers
- » University of California, Los Angeles – Elder Abuse Training Program for Dental Students

Multidisciplinary Teams

- » Area Agency on Aging, Napa and Solano – Fiduciary Abuse Specialist Team
- » City of Long Beach, Department of Health and Human Services – Comprehensive Multidisciplinary Elder Abuse Prevention Team
- » County of San Bernardino, Arrowhead Regional Medical Center – Elder Abuse Multidisciplinary Team
- » Elder Financial Protection Network, Marin – Be Wise: Recognize and Report Elder Abuse
- » Institute on Aging, San Francisco – Multidisciplinary Assessment Team (MAT)
- » Riverside County Regional Medical Center – Geriatric Assessment in Elder Self-Neglect Evaluation and Treatment

Forensic Centers

- » County of San Diego District Attorney’s Office – Help and Outreach to Protect the Elderly (HOPE)
- » University of California, Irvine – Center of Excellence in Elder Abuse and Neglect
- » University of Southern California, Keck School of Medicine of USC – Los Angeles County Elder Abuse Forensic Center

Financial Protection

- » Council on Aging Silicon Valley, San Jose – Fair Lending Project for Seniors
- » WISE Senior Services, Santa Monica – Seniors Against Investment Fraud

Systems Analysis and Change

- » Judicial Council of California, San Francisco – Effective Court Practice for Abused Seniors
- » University of California, Irvine – Estimating Incidence of Elder Abuse from Social Service Data

Convening and Technical Support

- » University of California, Irvine – Convening and Technical Assistance

PHASE I ALLOCATION OF FUNDS

In total, the Foundation distributed **\$3,345,496** to the projects over the 2006-2007 Phase I grant term, with nearly half allocated to Forensic Centers.



Phase II Projects

Successful programs launched in the first two years of the Initiative were reinforced in Phase II, and new legal and ombudsman projects were added. The financial support and technical assistance provided by Archstone Foundation through the successive three-year term proved even more critical as state funding sources dwindled under the weight of the global economic crisis and statewide recession. Project coordinators reassessed expenditures and reallocated resources to maintain processes and render vital remedial services amid state budget cuts. Despite financial challenges, participants continued research studies and applied innovations, refined and disseminated emergent practices, and most facilitated long term sustainability.

PHASE II PROJECTS AWARDED

Education and Training

- » City College of San Francisco – Elder Abuse and Neglect Prevention Training and Education program
- » County of Santa Clara – Elder Abuse Training Program for Faith Communities
- » San Diego State University Research Foundation – Advanced Training Program for Adult Protective Service Workers
- » University of California, Los Angeles – Elder Abuse Training Program for Dental Students

Multidisciplinary Teams

- » Area Agency on Aging, Napa and Solano – Fiduciary Abuse Specialist Team
- » City of Long Beach, Department of Health and Human Services – Comprehensive Multidisciplinary Elder Abuse Prevention Team
- » Conejo Valley Senior Concerns, Ventura – Financial Abuse Specialist Team in Ventura County
- » County of San Bernardino, Arrowhead Regional Medical Center – Elder Abuse Multidisciplinary Team

Forensic Centers

- » County of San Diego District Attorney's Office – Help and Outreach to Protect the Elderly (HOPE)
- » Institute on Aging, San Francisco – Elder Abuse Forensic Center
- » University of California, Irvine – Center of Excellence in Elder Abuse and Neglect
- » University of Southern California, Keck School of Medicine of USC – Los Angeles County Elder Abuse Forensic Center

Financial Protection

- » Council on Aging Silicon Valley, San Jose – Home Lending Protection Project

Systems Analysis and Change

- » Judicial Council of California, San Francisco – Training and Implementation of Court Interventions and Services to Assist Abused Elders
- » University of California, Irvine – Improving the Quality of Elder Abuse Incidence Data Documentation in California

Convening and Technical Support

- » University of California, Irvine – Convening and Technical Assistance to Initiative Projects

Legal Protection

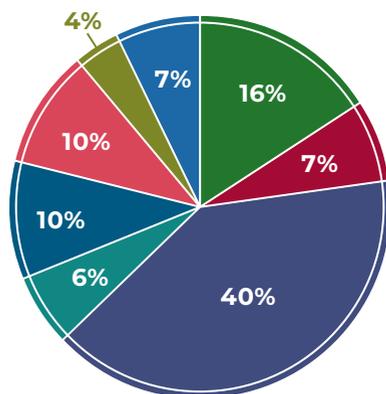
- » Bet Tzedek, Los Angeles – Expansion of Elder Law Clinics in Los Angeles County

Long-Term Care Ombudsman Services

- » WISE and Healthy Aging, Santa Monica – Monitoring of Unlicensed Long-term Care Facilities in Los Angeles County

PHASE II ALLOCATION OF FUNDS

In total, the Foundation awarded **\$4,007,565** from 2008-2010 to the Phase II projects.



- **Education and Training:** \$651,579
- **Multidisciplinary Teams:** \$300,000
- **Forensic Centers:** \$1,600,000
- **Financial Protection:** \$225,000
- **Systems Analysis and Change:** \$410,986
- **Convening and Technical Support:** \$400,000
- **Legal Protection:** \$150,000
- **Long-Term Care Ombudsman Services:** \$270,000

Outcomes

Archstone Foundation discerned a pressing need to improve the quality of care, supportive services, and interventions for older adult victims in California. Through its combined projects across the diverse service spectrum, the Foundation enhanced the capacity of frontline responders to render aid, aligned networks of providers to deliver coordinated care, and offered reparation to thousands of elders.



to 142,427 older adults,
agencies, staffers, and
mandated reporters



Clients received augmented
medical, financial,
psychological, and/or case
management services



Brief Assessments/
Screenings by
professionals

\$50.9 Million 
in assets preserved



1,270 Formal Trainings
for 26,136 individuals

\$13.2 Million 
in additional grants and services leveraged

Partial findings from the Cross-Cutting Evaluation of the Archstone Foundation Elder Abuse and Neglect Initiative by The Measurement Group LLC, www.TheMeasurementGroup.com

With Archstone Foundation's financial investment and technical guidance, promising ideas ripened into thriving programs, operationalized and institutionalized to support a range of interventions: directed training curricula for numerous professionals, multidisciplinary team review and assessment, Forensic Center intervention and case resolution, education for court officers and implementation of tailored judicial processes, procedures for asset protection and preservation, and ombudsman screening and investigation of elder mistreatment.

Through the second phase, parallel projects met at convening break-out sessions to document their individual and collective findings in articles, later published in a special Initiative-dedicated double issue of the *Journal of Elder Abuse and Neglect*. The issue was widely disseminated, increasing the visibility of the best practice Initiative innovations embraced and evaluated. Cooperative efforts to write the articles emboldened the learning community, solidified close working partnerships, and further facilitated interconnected supportive statewide networks.

As individual programs realized efficacy and sustainability, project coordinators recognized the potential of continued alliances with fellow Initiative participants. The Foundation had cultivated a process model for coordinated interdisciplinary union among previously disconnected yet interrelated systems. Strategic convenings, cross-disciplinary education, technical assistance advisories, and *Journal of Elder Abuse and Neglect* collaborations proved productive means to bridge institutional chasms and forge lasting connections. Colleagues bound by common goals and shared experiences developed robust professional relationships and friendships that would have direct and enduring impact.



VII. The California Elder Justice Coalition

With an insider’s lens, Initiative fellows perceived the systemic faults, policy failings, and service and delivery disparities that impeded intervention efforts. Harnessing the momentum of the Initiative, participants were eager to use their respective field-based insights and experiences to further elder justice policy. Girded with best practice models they hoped to replicate statewide, they pressed for institutional reform. Constituted as the California Elder Justice Workgroup, members planned a Foundation-sponsored statewide summit in 2010 (the “Summit.”) Joined by other service providers, experts, and advocates, the Summit attendees discussed and deliberated the advancement of elder justice.

Practice and policy recommendations addressed at the Summit covered a broad range of issues affecting diverse constituencies of older adults. A platform of proposed change across twelve domains was promulgated in, *Improving California’s Response to Elder Abuse, Neglect, and Exploitation: A Blueprint*. The guide suggested improvements in the state’s reporting and response structure, justice system, service sectors, long-term care facilities, and community-based long-term care network. In addition to financial abuse prevention and accessibility and parity for underserved populations, topics included training for professionals, policy-focused research, increasing awareness, enhancing national involvement, and appointing a united body to execute the plan.

Blueprint

The California Elder Justice Coalition was founded in 2012, and led by project participants Lisa Nerenberg and Molly Davies, among others, to implement the recommendations outlined in the Blueprint. Like its predecessor, the California Elder Justice Workgroup, the Coalition is comprised of a network of Initiative participants, affiliated experts, and advocates. Pledged to pursue elder rights and the prevention of elder mistreatment, exploitation, and neglect, the California Elder Justice Coalition engages in policy development, advocacy, and public awareness.

IMPROVING CALIFORNIA’S RESPONSE TO ELDER ABUSE, NEGLECT, AND EXPLOITATION: A BLUEPRINT

Abuse Reporting and Response Team	The Justice System	Meeting Service Needs
Financial Abuse and Exploitation	Abuse and Neglect in Long-Term Care Facilities	Safeguarding the Community-Based Long-Term Care Network
Ensuring Access and Parity	Training	Policy-Focused Research
Public Awareness	Improving the Federal Response to Elder Abuse	A Plan for California

Practice to Policy

Archstone Foundation funded a second Statewide Elder Justice Policy Summit (“Summit II”) and related activities in 2013 to facilitate continued dialogue, exchange, and advances in the elder justice movement. A progress report detailing *Practice to Policy* Summit II sessions and tracking statewide developments in the field was compiled. Focus areas include modernizing APS, improving the response to elder mistreatment in institutional care, exploring strategies for supporting caregivers, shoring the legal system’s response, and ensuring equal access and parity.

FROM PRACTICE TO POLICY: SETTING THE COURSE FOR ELDER JUSTICE SUMMIT

Modernizing Adult Protective Services	Elder Abuse in Institutional Settings	Preventing Caregiver Abuse	The Justice System	Access and Parity
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Benchmarks

In 2016, the California Elder Justice Coalition updated and refined the Blueprint in, *From Blueprint to Benchmarks: Building a Framework for Elder Justice* (“Benchmarks”). The policy manual captures progress in the 12 priority areas highlighted in the Blueprint, coalesced under nine topic headings. Benchmarks proposes new directions for an improved, coordinated statewide and national response to elder mistreatment.

Disseminated to 300 key policymakers and Coalition members, Benchmarks specifies the status, progression, challenges, and requisites of prevention efforts. The guide offers an invaluable repository of promising practices to state and federal legislators, analysts, and proponents. It also provides end users with a foundation for new research and program possibilities to enhance Elder Justice.

FROM BLUEPRINT TO BENCHMARKS: BUILDING A FRAMEWORK FOR ELDER JUSTICE

Modernizing Adult Protective Services	Elder Abuse in Institutional Settings	Preventing Caregiver Abuse
The Legal System’s Role	Fair Access to Services and Resources	Long-Term Services and Supports
Financial Abuse and Exploitation	Victim’s Rights and Service Needs	The Federal Role

California Elder Justice Coalition Advocacy

Over the years, the California Elder Justice Coalition has secured continuation funding from the Foundation and other sources. Among the principal advocacy achievements credited to the Coalition, the distribution of federal Victims of Crime Act funds to benefit older adult victims, and the allocation of Adult Protective Service training monies are standouts. Victims of Crime Act grants are drawn from the Crime Victims Fund, a reserve for federal criminal fines, assessments, and fees, and awarded by the Department of Justice to states for distribution to eligible victims. Beginning in 2016, Victims of Crime Act Elder Abuse (XE) Program grants were given to 10 multidisciplinary teams. For 2017, California-based grant recipients included the Orange County Elder Abuse Forensic Center, the Bet Tzedek Elder Justice Team, and the Holistic Elder Abuse Response Team at WISE and Healthy Aging, all Archstone Foundation alumni. In all, 25 multidisciplinary teams statewide have received grant awards.

The California Elder Justice Coalition also procured \$3 million in funding from the state of California to enrich Adult Protective Service trainings through the California Department of Social Services. Several of the original Adult Protective Service core curriculum training modules were developed by San Diego State University and collaborators through Initiative funding. Most recently, with Coalition advocacy, California's confidential address program for specified categories of crime victims was extended to protect the identity and privacy of elders who have been mistreated.

With Archstone Foundation's support, project coordinators transcended the Initiative to form a potent assemblage of progressive advocates. Exponents of elder justice, they and fellow California Elder Justice Coalition members changed processes and cultivated new government and philanthropic funding opportunities which continue to inure to the benefit of mistreated adults throughout California and the nation.



CALIFORNIA ELDER JUSTICE COALITION

ADVOCACY

- VOCA Funding for Abused Older Adults
- “Undue Influence” Statorily Redefined
- Adult Protective Services Leadership Position Within the California Department of Social Services
- Funding for APS Training
- Home Safe: Preventing Elder Homelessness

STRATEGIC POLICY INITIATIVES

- Improving California’s Response to Elder Abuse, Neglect, and Exploitation: A Blueprint (2011)
- Long Term Support Services Action Plan (2014)
- Caregiving Policy Brief (2015)
- From Blueprint to Benchmarks: Building a Framework for Elder Justice (2016)

PARTNERSHIPS

- California Commission on Aging
- County Welfare Directors Association of California
- California Long-Term Care Ombudsman Association
- California Association of Area Agencies on Aging

SERVICES

- Policy Workshops and Technical Assistance for Lawmakers
- Testimony at Legislative Committees
- Training to California Office of Emergency Services-Funded Elder Abuse Prevention Projects
- Administered Development of California Undue Influence Screening Tool

EDUCATION & AWARENESS

- Principles of Elder Justice Fact Sheet (2017)
- *News & Updates* Newsletter
- Webinar: Building an Elder Justice Movement State by State
- Webinar: Engaging Financial Institutions in Abuse Investigations
- Webinar: International Financial Crimes: How Do We Turn the Tide and Help Older Victims?
- Webinar: Homelessness in Older Adults: Causes, Consequences and Prevention
- Webinar: But Did it Work? Elder Justice Interventions II: Self-Neglect
- Webinar: What’s New in Undue Influence: Definitions, Tools, and Court Responses
- Webinar: State ID Theft Coalitions: Stolen Identities and Beyond

NATIONAL ADVOCATES ACADEMY

- Legislative Developments
- Statutory Updates
- National Innovations



VIII. Federal Legislative Milestones

Elder Justice Act

Archstone Foundation's contributions to the field have had significant collateral impact beyond the scope of its severally funded projects. Most notably, key provisions of the pivotal Federal Elder Justice Act of 2010 were advised and shaped by Foundation-funded programs and principals.

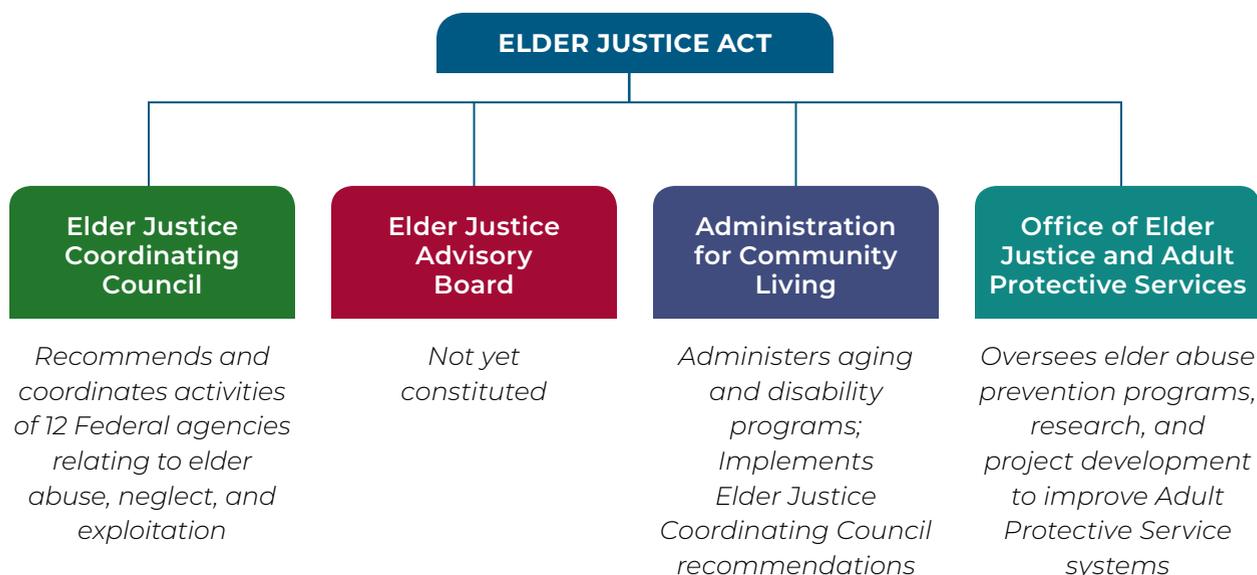
In the late 1990's, before the first version of the bill was introduced in 2002, Mosqueda and Marie-Therese (MT) Connolly of the Department of Justice, the bill's drafter, engaged in numerous conversations regarding the utility of multidisciplinary team practice and the development of elder abuse Forensic Centers. National discussions about the model continued at the National Institute of Justice's Elder Justice Roundtable in 2000. The convening of 27 experts in the field was moderated by Mosqueda and attended by the Foundation's personnel. In 2001, Mosqueda testified before the Special Committee on Aging of the United States Senate at which she proposed the formation of Forensic Centers to address mounting, acute cases of elder mistreatment. The following year, in 2002, Archstone Foundation sponsored the National Conference on the Medical Aspects of Elder Abuse, which highlighted multidisciplinary efforts and forensic markers of abuse. The conference was attended by staff from the Senate Committee on Aging. Months later, the first iteration of the Elder Justice Act was proposed in Congress, which highlighted the Forensic Center innovation.

Enacted in 2010 as part of the Affordable Care Act, the Elder Justice Act incorporated the practices initiated and heralded with Archstone Foundation's support years earlier. Among areas of directed funding, the Elder Justice Act authorized the creation of Forensic Centers and expanded cross-disciplinary training of invested professionals, capacity enhancement of Adult Protective Service and frontline responders, and the development of a federal research agenda which incorporated studies on forensic markers of abuse.



The initiatives promulgated within the Elder Justice Act mirrored the best practice approaches applied in Archstone Foundation-backed projects. The Forensic Center concept was rooted in the prescient Vulnerable Adult Specialist Team work and Department of Justice colloquies, and educed from the California archetypes. Likewise, the Elder Justice Act's call to identify markers of abuse and hone forensic knowledge is inspired and informed by the UCI team's seminal bruising studies conducted at the Orange County Elder Abuse Forensic Center. The Elder Justice Act both affirms the efficacy of the forensic-based interventions and evinces the national reach of the Foundation's responsive funding in the area.

To discharge its objectives, the Elder Justice Act established national leadership through the creation of the Elder Justice Coordinating Council, an Advisory Board, and an administrative apparatus led by the Administration for Community Living.



 *Thus far, Congress has appropriated approximately \$46 million to fund the Elder Justice Act.*

Elder Justice Roadmap

The Foundation has directly contributed to the compilation of the Elder Justice Roadmap, a strategic planning tool which distills the perspectives and best practice suggestions of 750 stakeholders in the field. The document identifies priority areas across four domains to respond to elder mistreatment and the consequent human, social, and economic toll absorbed by older adults. Authored by MT Connolly, Risa Breckman, and Bonnie Brandl, the Roadmap posits collective implementation of measures within domains of direct service, education, policy and research to enhance the quality of care and lives of older adults who have been mistreated. Through its varied projects over the course of time, Archstone Foundation has substantially invested in and expanded the bandwidth of the Elder Justice Roadmap's designated domains.



“ [T]he most distinct thing that they did, which ended up being a part of a federal law, actually was their support for the development of four Elder Abuse Forensic Centers located in four areas of California to provide a new model of understanding how to detect elder abuse as effectively as we do things like child abuse. And in the Elder Justice Act, which became law in 2010, there was an authorization for funding additional forensic centers based on the model that Archstone supported and, you know, that’s a testament to their vision.”

– Bob Blancato, President, Matz, Blancato and Associates, the National Coordinator of the Elder Justice Coalition and the Executive Director of the National Association of Nutrition and Aging Services Programs

Elder Rights Legislation

In addition to the Elder Justice Act, over the past two years, several notable federal elder justice legislative enactments have augmented federal funding, supportive services, professional expertise, and public awareness.

- » **VICTIMS OF CRIME ACT (RULE CHANGE)** (2016)
As amended, victims of federal crimes and elder abuse are eligible for VOCA-funded assistance
- » **ELDER ABUSE PREVENTION AND PROSECUTION ACT** (2017)
Enhances the federal government’s response to elder abuse by, among other directives, expanding data collection and cooperative information sharing, training prosecutors and FBI investigators, installing elder justice coordinators at the Federal Trade Commission and Department of Justice, and increasing penalties for offenders
- » **SENIOR SAFE ACT** (2017)
Encourages employees of financial institutions to report suspected elder abuse by offering immunity from liability, provided they have received training on detecting suspicious activity
- » **ECONOMIC GROWTH, REGULATORY RELIEF, AND CONSUMER PROTECTION ACT** (2018)
Incorporates elements of the Senior Safe Act and offers guidance on training employees of financial institutions regarding suspected elder financial exploitation
- » **BIPARTISAN BUDGET ACT OF 2018**
Increases funding to the Administration for Community Living to support elder justice research and programs
- » **DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES (HHS), AND EDUCATION APPROPRIATIONS** (2018)
Maintains Elder Justice Program funding allocated in 2018, including appropriations for the Elder Justice Initiative, the Social Services Block Grant, the long-term care ombudsman program, and Elder Rights Support Activities
- » **CONTINUING RESOLUTION** (2018)
Ensures funding for certain government programs, including Department of Justice Elder Justice projects, through December 7, 2018



IX. Archstone Foundation Imprint

With nearly 130 elder mistreatment-dedicated grants over a 25-year span, Archstone Foundation has altered the destiny of countless mistreated and at-risk older adults. The project innovations, research-informed practices, and direct-service programs have transformed the quality and coordination of elder services through real solutions-based interventions. Thoughtfully constructed and implemented with a clear and cogent strategy, the quantum of grants was maximized to optimal and enduring effect. Yet, triumphs do not occur in a vacuum. The Foundation carefully vetted and meticulously managed projects to success and sustainability. The watermark of Archstone Foundation is indelible.

Archstone Foundation

“What we want ideally to do is to have the biggest impact on the lives of older adults particularly focused on areas where they’re disadvantaged, they’re not getting the treatment in society that we would want for our loved ones and ourselves, and where we think we can really do something about it. So that’s why I think historically Archstone’s work has been so powerful.”

– Christopher A. Langston, PhD, President and Chief Executive Officer, Archstone Foundation

Archstone Foundation was among the first foundations to recognize elder mistreatment as a pervasive problem which necessitated attention and remediation. Despite the complexity of cases and gravity of ensuing harms, elder mistreatment was neither regarded a proven field of practice nor a legitimate discipline worthy of study. Public and private benefactors were disinclined to fund demonstration projects and research to validate interventions in a domain which lacked a formal underpinning. Within this framework, with exacting due diligence and a surfeit of intelligent planning, Archstone Foundation entered the realm and set a course to develop systems, practice, and an evidence base.

From the outset, the Foundation’s financial investment in projects paralleled its steadfast mission to improve the quality of care and coordination of services for older adults who have been mistreated. To this end, the Foundation supported team progress and potential. The commitment to projects was observed in word and deed. With an expert understanding of the areas of need and attendant challenges, Archstone Foundation served as wise counsel to all projects. When participants sought advice on putative obstacles or relief from preset objectives, Foundation principals listened intently, offered encouragement and guidance, and suggested measured resolutions without reproach.

Mediating grantor oversight with project independence, the Foundation and grantees partnered as equals and communicated regularly to facilitate each project’s vision, development, and eventual success. The Foundation removed amendable hurdles to progress and assented to reasonable requests for course corrections or project modifications. When appropriate, projects were provided no-cost budget extensions and allowed to renegotiate their scopes of work or proposed activities.



“Archstone’s funding and program officials are responsive, they’re flexible, they understand the spirit of the funding as opposed to the letter of the law when real world design changes are called for, they are communicative and they are responsive. I have never worked with a better funder.”

– Ron Acierno, PhD, Professor and Associate Dean for Research in the College of Nursing at the Medical University of South Carolina, and a Senior Clinical Research Scientist at the Ralph H. Johnson Veterans Affairs Medical Center

Archstone Foundation promoted the undertakings of its funded projects, celebrating collective achievements and individual talents. The Foundation reposed confidence in the abilities of grantees beyond the project requirements through, among other efforts, *Journal of Elder Abuse & Neglect* articles, convening addresses, and conference presentations. Stalwart Foundation support engendered reciprocal trust and helped projects build capacity, cultivate cohort relationships, and expand participants’ skillsets.

Dedicated to moving the field forward, the Foundation consistently embraced a collaborative culture and information exchange. Advances in the field were widely disseminated to increase visibility and public awareness of elder mistreatment. Expertise gleaned from project successes and challenges, was often and openly shared with fellow grantmakers, policymakers, and advocates to encourage other funders to engage in the arena.

FOUNDATION SUPPORT AND PROJECT EVOLUTION: EXEMPLARS

INSTITUTE ON AGING

The Phase I grant awarded to the Institute on Aging supported the development of the Multidisciplinary Assessment Team. Recognizing the team’s success and potential to expand, the Foundation encouraged its transition to the Forensic Center model in Phase II, and allocated additional funds to scale services and functions. Today, the San Francisco Elder Abuse Forensic Center is thriving.

THE LONG BEACH ELDER ABUSE PROTECTION TEAM

The multidisciplinary construct envisioned by the Foundation did not align with the needs of the Long Beach community. Together, the Foundation and the Long Beach Elder Abuse Protection Team fashioned a coalition-based approach with an interdisciplinary component to best serve the needs of invested professionals, agencies, and the public. The model has successfully served the community.

SAN DIEGO STATE UNIVERSITY

After the Academy of Professional Excellence at San Diego State University was awarded a grant to create three advanced training modules on self-neglect, the project coordinator recognized that Adult Protective Services first needed a comprehensive core curriculum for service providers. With Foundation assistance and approval, project goals were modified to incorporate the development of basic training for Adult Protective Service workers.

Established Champions and Emergent Leaders

Among the requisites for programmatic success, effective leadership is fundamental. In assessing Initiative submissions, the Foundation deliberated proposals tendered by principals best suited to marshal projects to potential and develop a coordinated, supportive network across the state. Many of the projects selected were administered by established champions in the field, while others were led by coordinators who exhibited promise. While their defined functions and roles varied by grant, project leaders demonstrated proficiency within their respective teams, across agencies, and beyond their immediate communities.

Forensic Center leaders who navigated uncharted, and often unsteady, terrain are particularly noteworthy. Mosqueda set the bar with her inspired, purposeful vision to improve mechanisms for older adults to attain redress. She channeled her passion for the cause into the paradigm multidisciplinary forensic model, replicated nationally and recognized legislatively. The Forensic Center principals successfully ignited interest among the community, building stakeholder consensus, and eliciting support from funders to facilitate complementary opportunities and secure sustainability for the Forensic Center.

Inspired by her template, exceptional Forensic Center champions throughout the state resolutely harnessed the unbridled talents of experts across domains through forged connection and cooperation. Los Angeles County Elder Abuse Forensic Center Director, Diana Homeier, MD, continues to mediate the delicate balance between robust exchange and diatribe by eliciting varying perspectives and recognizing the intrinsic value of each voice. With characteristic composure, she refocuses energies and redirects efforts to tap into the core strengths of team members to produce optimal case review and enhanced outcomes for older adults.

Within the Initiative, champions modeled leadership, mentored their peers, and nurtured the abilities of cohorts, burnishing new leaders in the field. Education and trainings at convenings refined existing skills and introduced new tools. Information was generously shared and encouragement was frequently offered. As those newer to the field developed confidence and capability, content expertise was less unidirectional, and more often reciprocally exchanged between members and broadly disseminated to older adult constituencies statewide.

Established and rising leaders embraced the learning community and the possibilities afforded through the Initiative, enhancing respective projects, crystallizing a coordinated network, and expanding research and practice. Equipped with knowledge and skillsets, they disseminated best practice protocols and interventions, promoting hope and change in the field. Through and beyond the Initiative, principals grew personally and professionally, with most, if not all, tracing career trajectories and subsequent practice in the field to the Initiative. All deserve recognition and, but for space, a representative few are highlighted below.

“ [Dr. Laura Mosqueda] went above and beyond anything any of us had ever heard of... She was really, really exceptional. When she came to Orange County, she wanted to do more than just see patients in the clinic. She really wanted to look for ways to further the discipline.”

– Rebecca Guider, MSG, Former Adult Protective Services Division Manager, Orange County

“A champion is somebody who really has taken on the cause and wants to advance it. And even if everybody else is ignoring it or dismisses it, they’ve got some righteous indignation and some sense that it’s something they can do, they can make a real difference in. It’s not just leadership. Leadership is important but, to me, it’s something bigger than that. It’s somebody who, even if there was no funding, they’d figure out a way to do it because it’s important work to them.”

– Mary Ellen Kullman, MPH, Vice President, Archstone Foundation

CHAMPIONS

LAURA MOSQUEDA, MD

Chair of the Department of Family Medicine at UCI School of Medicine and Founder of the Orange County Elder Abuse Forensic Center



Dean, Keck School of Medicine of USC; Director, National Center on Elder Abuse

LORI DELAGRAMMATIKAS, MSW

Program Manager, San Diego State University



Executive Director, NAPSA

BONNIE OLSEN, PHD

Clinical Professor at the Department of Family Medicine at UCI School of Medicine and Geropsychologist at the Orange County Elder Abuse Forensic Center



Professor of Clinical Family Medicine, Vice-Chair of Academic Affairs Keck School of Medicine of USC

MARY TWOMEY, MSW

Co-Director of the Center of Excellence and the National Center on Elder Abuse



Aging Program Specialist, Administration for Community Living

KIM HUBBARD, JD

Financial Abuse Specialist Team Coordinator, Orange County



Judge, Superior Court, Orange County

MOLLY DAVIES, MSW

WISE and Healthy Aging



Vice President of Elder Abuse Prevention and Ombudsman Services, WISE and Healthy Aging

At the launch of the Coordinated Response to Elder Abuse Initiative in Memphis, Tennessee funded by the Plough Foundation, Dr. Mosqueda asked the program staff if the coroner was present. Informed that he was unable to attend, she left the event and proceeded directly to his nearby office where she met with him. In their hour and a half discussion, Dr. Mosqueda educated the coroner on the role of the medical examiner in elder abuse detection and the importance of implementing a fatality review team. One week later, plans were being developed to establish the interdisciplinary unit in the Memphis community.

EMERGENT LEADERS

ZACH GASSOUMIS

Masters in Gerontology Student, USC Evaluation Team



PhD, Assistant Professor of Family Medicine, Keck School of Medicine of USC

LAURA RATH, MSG

Orange County Elder Abuse Forensic Center, Coordinator



Senior Program Officer, Archstone Foundation, PhD Candidate

TALITHA GUINN

Director of Elder Abuse Prevention, Institute on Aging



Elder Abuse Multidisciplinary Team Technical Advisor, Department of Justice

SHAWNA REEVES, MSW

Fair Lending Project for Seniors



Director of Elder Abuse Prevention, Institute on Aging

CAROLYN PICKERING

Masters in Gerontology Student, Orange County Elder Abuse Forensic Center, Intern



PhD, Assistant Professor, School of Nursing, University of Texas

Outside the Initiative, Foundation-backed evaluation studies supported a cadre of young dedicated researchers in the field. Budding leaders matured through Forensic Center internships. As masters' students under the tutelage of Professor and mentor Kate Wilber, PhD, at the University of Southern California (USC) School of Gerontology, Jeanine Yonashiro-Cho, Zach Gassoumis, and Julia Rowan were part of the USC evaluation team for the Initiative. All have gone on to conduct seminal studies relating to Forensic Center practices for their doctoral dissertations, and have become distinguished leaders in their own right in the field.

By design, Archstone Foundation invested in leadership development to expand and enhance the scarcely inhabited research and practice arena. Their philanthropy has enriched the realm with committed, passionate champions positing vastly improved service and care delivery systems to best serve adults who have been mistreated. This return on investment continues to yield compounding benefits that will resonate for years to come.

Building Teams and Cultivating Relationships

“Collaboration is not just important in elder abuse and neglect, or falls prevention, or dementia in older adults, it's in everything and it's really important in social justice... if you don't have collaboration, you won't have progress.”

– Joseph F. Prevratil, JD, former President and Chief Executive Officer, Archstone Foundation

A culture of collaboration infuses Archstone Foundation's philanthropic practices. This ethos is prominently perceived in its administrative protocol, founding support of Grantmakers in Aging, and patronage. It also underpinned the Foundation's relationship with project principals and served as the core objective of the Initiative. To improve the coordination of services and quality of care for older adults, the Foundation fostered a complex of alliances within and throughout invested agencies and institutions.



“The power of convening is a lesson learned that you alone, or your dollar alone, or one project can’t change the world. But if you bring a body of people who are passionate, who are creative, and innovative, and committed to caring for people and making life better, you can do amazing things and you can change the world.”

– E. Thomas Brewer, MBA, MPH, MSW, Former Director of Programs, Archstone Foundation and Director, Finance and Administration, The Ralph M. Parsons Foundation

Directed funding fortified intra-program success and capacity. Projects were endowed the means and creative expanse to realize their own visions. This is most manifestly observed with the Forensic Centers and multidisciplinary teams. Rooted in a cooperative construct, all teams coalesced expertise across spheres of service to improve processes and outcomes for older adults who had been mistreated. Yet, interdisciplinary approaches varied respectively, by context, function, size, and mandate, reflecting their own constituencies and capabilities.

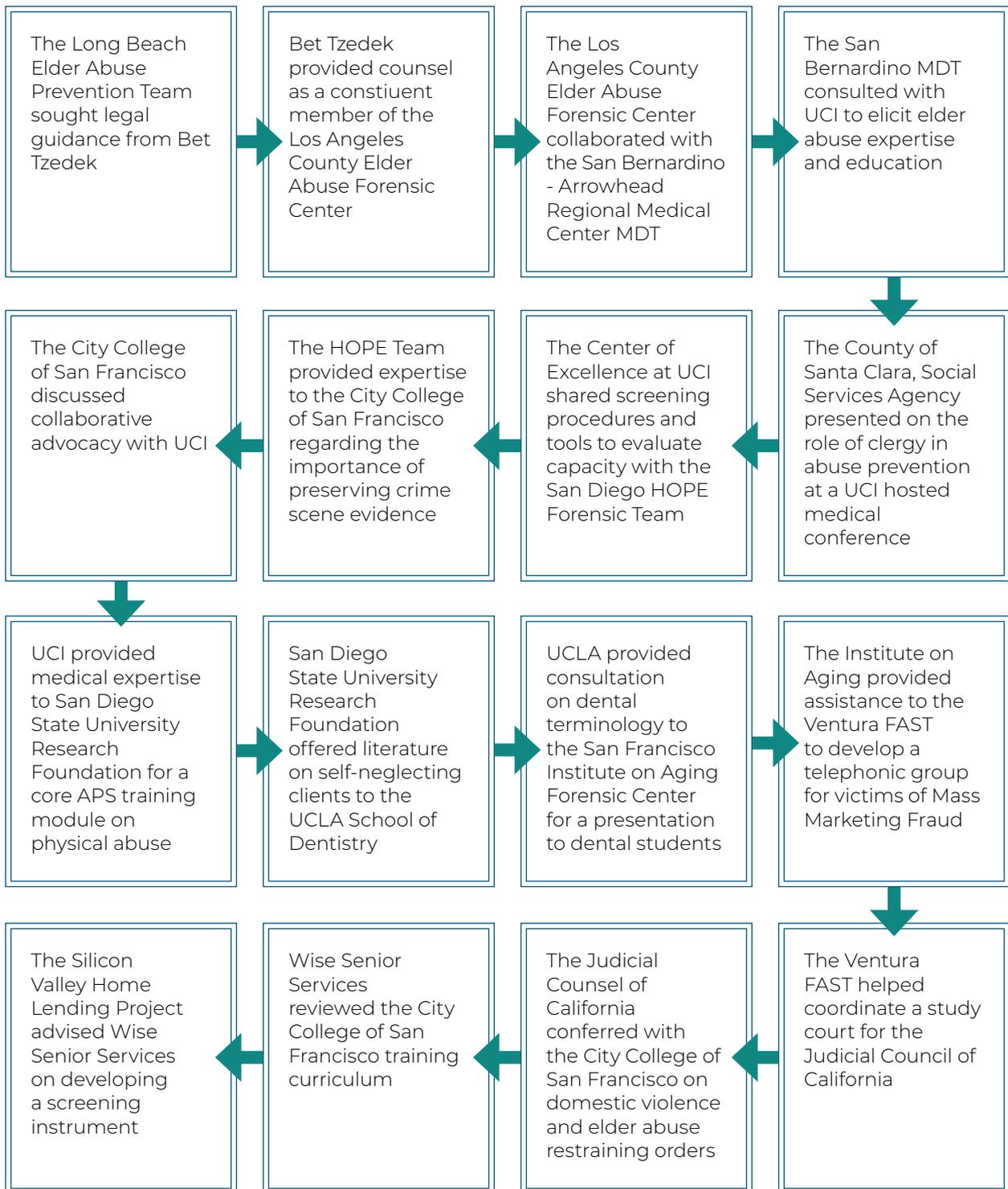
Beyond success within projects, Archstone Foundation intended to remediate California’s fragmented elder care delivery system. The Initiative contemplated the dispatch of coherent statewide service through facilitated team interactions and relationship building. The Foundation envisioned the interchange of dialogue, support, and shared practices between projects with common agendas, as well as the enhancement of fluent affiliations across diverse professional work domains.

The convenings nurtured a learning community, within which cohorts became acquainted, gleaned, and imparted content expertise, and developed professional rapport. Novel ideas teemed and were considered by the collective. Project challenges were similarly raised and curative measures were prescribed. The guidance initially delivered at convenings was soon discharged between conclaves. As information, resources, and advice were exchanged, projects benefited from the synergistic interactions. In practice, these linkages evinced the potency and consequences of concentrated teamwork far beyond individually wrought efforts. Alliances were cemented through common elder justice goals, and reinforced in joint *Journal of Elder Abuse and Neglect* collaborations and California Elder Justice Workgroup advocacy. Connections soldered transcended the grant period, resulting in continuing collaborations and vibrant professional relationships.



At one of the later convenings, participants were given a ball of yarn and asked to throw it to someone they had worked with over the course of the Initiative. By the end of the exercise, participants formed an oversized interwoven net, demonstrating the breadth of the connections forged and relationships developed.

BUILDING A NETWORK: RECIPROCAL TECHNICAL ASSISTANCE





Years after the Initiative had ended, Lori Delagrammatikas, then the California Department of Social Services' APS Program liaison, wanted to provide capacity assessment training for APS workers. She reached out to her colleague Bonnie Olsen, a geropsychologist, whom she knew through the Initiative. Olsen was aware of the Interview for Decisional Abilities (IDA) being piloted in New York. Together, they drafted a grant proposal for ACL and implemented a trial program in California. In turn, to execute the IDA plan, Olsen gathered a team of knowledgeable, expert trainers drawn from convening cohorts with whom she had preexisting relationships.

Measurement Driven Success

“You can say all you want that this is a great model, it's effective, it has fantastic results, but if you don't have the receipts, as we might say, and ... if you aren't able to demonstrate with numbers that things are effective, you're not going to be able to convince policy-makers to put money towards funding these programs. And without sustained, especially public financing efforts, it's really difficult to enable these things to last.”

– Zach Gassoumis, PhD, Assistant Professor of Family Medicine, Keck School of Medicine of USC

Archstone Foundation nested rigorous, results-based measures in projects to facilitate operational constancy and compliance. The constructs were designed as a prism through which activities were conducted, progress was evaluated, and outcomes were quantified. Within the Initiative, the monthly meetings, continuous technical assistance, quarterly reports, and convenings gauged project performance and delivered timely, constructive feedback. The cross-cutting quarterly report template was crafted by The Measurement Group based on Archstone Foundation reporting guidelines to engage participants in meaningful and mindful goal-oriented reflections. At convenings, promising practices were presented, reviewed by The Measurement Group and interrogated by Initiative peers. Through the tiers of assessment, effective approaches were endorsed, programmatic or procedural discrepancies were challenged and, where appropriate, course recalibration and corrections were suggested and implemented. For the duration of the Initiative, periodic findings were presented yearly by the Center of Excellence and The Measurement Group to the Foundation's Board to provide quantifiable metrics for project updates.

At the conclusion of the Initiative, cluster evaluations pooled results of activities. Performance and outputs were directly tracked, assessed, and recorded. Outcomes were reported and reproduced in *Journal of Elder Abuse and Neglect* articles, disseminated widely and hailed by researchers and practitioners in the arena. The evaluation helped validate promising work in the field and develop an evidentiary basis for the Initiative programs, critical to elicit outside support and assure project sustainability.

Mirroring the evaluative guidance imposed by the Foundation, several projects instituted their own internal mechanisms to gather data, track fidelity to objectives, and monitor the efficacy of practices. The Solano Financial Abuse Specialist Team elicited data through exit interviews and evaluations collected at the close of each meeting. Participant time sheets were distributed to record in-kind contributions, and surveys were disseminated to identify gaps in knowledge, barriers to recovery, and opportunities for education and collaboration. Separately, the Solano team circulated a statewide survey of all California multidisciplinary and financial abuse specialist teams to garner information on respective team structure and operation. Barometers of proven performance shaped and contributed to programmatic success.

With the aim of optimizing and institutionalizing Forensic Center systems, the Foundation supported a cross-site evaluation of the four Centers after the Initiative concluded. Wilber and the USC evaluation team appraised the structure, processes, and outputs of the Centers. A common database was developed to collect a minimum dataset. Through a filter of Continuous Quality Improvement, demographic data was gathered, agency engagement was recorded, procedures were compared and distinguished, and Forensic Center collaborations were documented. Client objectives at the outset were measured against case resolutions at completion. The protocol captured best practices, outcomes, and impact. Through the assessment, effective tools were disseminated among the four Centers, aligning procedures and contributing to eventual model sustainability. Most significantly, an evidence base was being established to validate the utility of the Forensic Center concept.

“Good evaluation is absolutely essential to program sustainability because, in most cases, what we’re looking for is a public-sector payer to continue these services.”

– Mary Odell, Former President UniHealth Foundation

“Because the pilot data was gathered, there was a clear message that solid science can occur around these complex issues – that there’s both need and interest in the academic community to do serious scientific work on this subject.”

– Bonnie Olsen, PhD,
Professor of Clinical
Family Medicine,
Vice-Chair of Academic
Affairs Keck School of
Medicine of USC



“Archstone was at the leading edge of committing to funding work that might not otherwise be funded by the NIA or others.”

– Terry Fulmer,
President, The John A.
Hartford Foundation

“By having a natural dedicated track around elder abuse for such a long period of time, [Archstone Foundation] really inspired other funders in the country to do the same.”

– Georgia Anetzberger,
PhD, ACSW, LISW,
Adjunct Assistant
Professor, Department
of Medicine, and
Adjunct Faculty,
the Mandel School
of Applied Social
Sciences at Case
Western Reserve
University, Fellow in the
Gerontological Society
of America

Leveraging Resources

The Foundation's early investment in national conferences and multidisciplinary teams lent visibility to the hidden affliction of elder mistreatment and a sense of urgency to remediation. Later funding of demonstration and applied research projects advanced collective knowledge and lent credence to the important work being conducted in the nascent field. The Foundation's efforts affirmed that change in the formerly dormant domain was more than possible, it was viable, drawing public and professional acclaim and the notice of benefactors who had not previously contemplated grant giving to redress the need.

Beyond its own commitment to advancing the field, the Foundation actively engaged in a directed regional and national effort to educate other philanthropies about the prevalence and myriad harms of elder mistreatment. Project promotion through Grantmakers in Aging and Grantmakers in Health collaborations further elevated the cause and inspired funders to enter the arena. Eminent funders like UniHealth Foundation, the John A. Hartford Foundation, and the Plough Foundation were informed by Archstone Foundation's groundbreaking drive to move the field forward. In addition to funding the Elder Abuse Training Institute, UniHealth Foundation supported a research position on the USC evaluations team to conduct its assessment of the Los Angeles County Elder Abuse Forensic Center. Archstone Foundation provided direct counsel, in concept and design, to the Plough Foundation to launch the exceptional Coordinated Response to Elder Abuse Initiative in Memphis.

The strong foothold staked by the Foundation drew the interest of governmental agencies inspired to invest in the field. Numerous studies have been funded by the Department of Justice, National Institutes of Health, and the Department Health and Human Services, respectively, building upon pivotal Archstone Foundation-sponsored work. Federally funded evaluations of the forensic center concept, Adult Protective Service practices, and the Abuse Intervention Model reflect the broad-based leveraged impact of the Foundation's fundamental work in the field. Further illustrating the prominence gained among federal benefactors, elder mistreatment funding from the National Institutes of Health in 2018-2019 was over eight times greater than all of its pre-1995 adult abuse awards combined.

The privately inspired, public funding dynamic observed through the precedent setting Orange County Elder Abuse Forensic Center is illustrative. Archstone Foundation seeded the archetype which grew into a nationally renowned model and platform for a host of ancillary projects. Among other funding leveraged, Orange County contributed \$150,000 to the Forensic Center, UniHealth Foundation financed the Elder Abuse Training Institute, the Orange County Sheriff's Department underwrote Police Officer Standardized Training, the California Department of Health Services supported a Caregiver Stress research study, and the National Institute of Justice sponsored a Geriatric Bruising Study.

Numerous other Archstone-sponsored programs garnered funds, in-kind support, human capital, and community goodwill from a panoply of partners to sustain, supplement, and enhance practices.

SAMPLING OF ADDITIONAL RESOURCES LEVERAGED BY PROJECTS

» **THE MEDICAL UNIVERSITY OF SOUTH CAROLINA**

Obtained matching funds from the National Institute of Justice to conduct Wave II of the National Elder Mistreatment Study: Outcomes

» **COUNTY OF SANTA CLARA, SOCIAL SERVICES AGENCY**

Secured resources and a commitment from the Santa Clara County Mental Health Department to continue training to the faith community

» **SAN DIEGO STATE UNIVERSITY RESEARCH FOUNDATION**

Awarded a three-year grant from the Office of Victims of Crime to develop nine core competency modules

» **SAN DIEGO HOPE TEAM**

Received additional resources from the City of San Diego, county agencies, the San Diego Elder Justice Center and private foundations

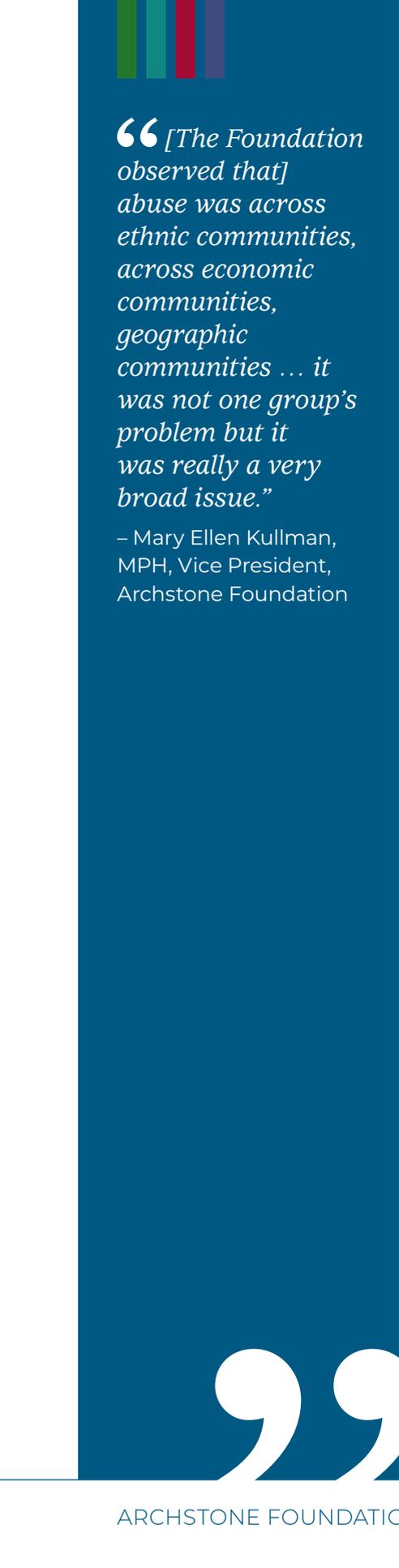
Archstone Foundation's strategic investment in the field levered national attention and awareness, leading to replication of the multidisciplinary concept and inclusion of Forensic Centers and a forensic research agenda in the Elder Justice Act.

“ [Archstone Foundation has] been impactful with their giving [and] in helping other foundations work through their own process, sharing ideas, and being a thought leader.”

– Katie Midgley, MSCJ, Director of Research and Evaluation, Plough Foundation

“ To the extent that we can partner with the private sector through foundations like Archstone, it just furthers the overall mission of the elder justice field, which is again to raise public awareness of it and show the fact that this is not an issue just in the private domain or just in the public sector, but it matters to everyone.”

– Andy Mao, JD, Assistant Director/ Elder Justice Initiative Coordinator, U.S. Department of Justice



“ [The Foundation observed that] abuse was across ethnic communities, across economic communities, geographic communities ... it was not one group's problem but it was really a very broad issue.”

– Mary Ellen Kullman, MPH, Vice President, Archstone Foundation

Focus on Minority Populations

From the start of its dedicated philanthropy, the Foundation recognized the paucity of interventions targeting minority elders and the limitations of existing models to reach underserved communities. The increasingly diverse older cohort is not a uniform monolith. Older adults are neither similarly impacted by the variant forms of elder mistreatment, nor collectively receptive to the same interventions. Incongruent and circumscribed service and delivery systems which had been in place were inapposite, ill-designed to remediate mistreatment among varied aging communities. Inequitable access to resources, language barriers, and victims' culturally-based reluctance to reveal and report offenses also served as a bar to address harms. Individuals with disparate historical, traditional and ethnocentric frames of reference necessitate intervention models which are tailored to their unique experiences and directly responsive to their particularized needs.

Archstone Foundation has significantly invested in minority-driven prevention programs, promoted project-based diversity awareness, education, and materials, and advanced culturally competent statewide policies and platforms. Representative Foundation-directed measures such as funding conferences geared to prevention in underserved communities, producing multi-lingual informational pamphlets and videos, and training multi-ethnic care providers, have educated thousands of professionals in cultural fluency and provided appropriate interventions to legions of previously underserved older adults.

ILLUSTRATIVE PROJECTS PROMOTING DIVERSITY, EQUITY, & INCLUSION

- » **FAMILY HEALTH PLAN, INC.** – White House Conference on Aging Forums, 1995
- » **NATIONAL CENTER ON ELDER ABUSE, AMERICAN PUBLIC WELFARE ASSOCIATION** – National Conference on Elder Abuse in Minority Populations, 1998
- » **UNIVERSITY OF CALIFORNIA, IRVINE** – Elder Abuse Integrated Medical Response Team, 2000
- » **LONG-TERM CARE SERVICES OF VENTURA COUNTY, INC.** – Latino Ombudsman Project, 2004
- » **OREGON HEALTH AND SCIENCE UNIVERSITY** – Physician's Orders for Life-Sustaining Treatment (POLST) Video, 2005
- » **CATHOLIC CHARITIES** – Gatekeeper Project, 2004, 2005

Sustainability and Replicability

Complementing the leadership, teamwork, protocols, and evaluations referenced above, which are vital to project success, the Foundation embedded operational mechanisms within programs to promote long term viability. Sustainability, concept replicability, and project impact were contemplated at the outset. For the Initiative, optimum performance began with the intentional initiative design, expert consultation, the environmental scan, and the considered selection of funding categories. Proposals were fully vetted and thoughtfully selected to reflect coordinated components of a fully integrated, geographically diverse care delivery system throughout California. Particular attention was given to innovative and impactful projects, proven and promising leaders, and strong institutions and agencies most likely to attain goals and institutionalize outcomes.

Implementing a five-year plan, executed in two phases, the Foundation recognized that enduring and meaningful progress required time and dedication. The multiyear initiative afforded model interventions the financial means and temporal latitude to implement and operationalize projects. Archstone also dedicated assistive and evaluative resources to best assure project development and success. The Center of Excellence bolstered projects with content expertise and training. Convenings provided additional layers of support through capacity building, connective networks, and sustainability training sessions. The external evaluator, The Measurement Group, reinforced project accountability and fidelity to imperatives. Aggregated data from the quarterly reports, qualitatively analyzed and distilled in a cross-cutting evaluation, formed a critical evidence base from which to validate model projects. Building upon the findings, the Foundation-funded cross-site evaluation of the four California-based forensic centers generated tools for replicability and affirmed concept efficacy, vital to attract funding from other sources.



Beyond providing direct financial, technical, and appraisal support, the Foundation signaled to participants the end goal of sustainability through the grant period. The Phase I request for proposals noted that grants were limited by term. Phase II continuation funding, similarly defined by time, was awarded at the discretion of the Foundation and dependent on Phase I performance. Grants were tapered to enable projects to titrate and progress appropriately. The Foundation provided budgetary guidance to foster fiscal prudence and autonomy.

The Elder Abuse and Neglect Initiative was time-limited by design, although the hope from the outset was to support innovative projects that could be taken to scale by public funding sources. To additionally cushion the eventual termination of philanthropic succor, the Foundation promoted the Initiative projects through Grantmakers in Aging, Grantmakers in Health, and national forums attended by governmental and private funders. Archstone Foundation introduced program innovations to a wider audience and facilitated project presentations at aging-related conferences throughout the nation. Dissemination of novel practices through the *Journal of Elder Abuse and Neglect* articles increased visibility and viability of the highlighted ventures. Foundation efforts to share insights and information with other benefactors, and introduce grantee agencies to philanthropists helped projects to leverage funds, attain sustainability, and in many cases become institutionalized.



Commitment
Collaboration
Coordination
Consistency
Change

Overcoming Challenge/Lessons Learned

Challenges naturally arose within Initiative projects as emergent enterprises treaded uncharted territory. Growing pains were observed across domains. Obstacles included administrative attrition, budgetary shortfalls, incongruous protocols, and interagency conflict. Many projects were dogged by the Great Recession of 2008 and the subsequent statewide financial crisis in California, which necessitated reallocation of funds, reassignment of duties, and program cutbacks. As a result of the recession, the Archstone Foundation endowment decreased by one-third. At a time when other foundations pulled back funding levels or renegotiated funding terms with awarded sites, Archstone Foundation honored its full funding commitments to projects.

Whether the project challenges were existential or ephemeral depended upon manifold contextual factors unique to respective projects. Extrapolating from the experiences of the collective, more often than not, opportunities for growth surfaced from struggle and intermittent stagnation. Within the impasse, creative solutions were frequently forged, resulting in productivity, innovation, and improved systems. The path to change was nearly always paved with lessons learned and shared.

SURMOUNTING CHALLENGES

FORENSIC CENTERS

Notwithstanding the palpable benefits of the Forensic Center multidisciplinary construct, invested agencies were initially reluctant to cede their professional biases and territorial prerogatives to advance the cause and embrace the collective. Forensic Center leads mediated longstanding discrepancies through cross-agency training and education, open dialogue, and relationship building. Over time, with tenacity, patience, goodwill, and successful case resolution, coordinated and collaborative intervention has proven an effective tool for redress in cases of elder abuse.

VENTURA COUNTY FINANCIAL ABUSE SPECIALIST TEAM

The Ventura County Financial Abuse Specialist Team coordinator, Julia Rowan, consulted with Los Angeles County Elder Abuse Forensic Center Director Dr. Diana Homeier regarding the periodic shortage of case referrals and consequent cancellation of meetings. Homeier suggested using the meeting time constructively to discuss case trends, team function, and service gaps. In the vacuum of case exchange, cohort discussions wrought new projects, including the development of an Oxnard Police Department Volunteer Visitation Program for older adult victims of crime. Volunteers monitored and provided social support to vulnerable elders susceptible to recurrent abuse.

CALIFORNIA ELDER JUSTICE COALITION

The California Elder Justice Workgroup, later renamed the California Elder Justice Coalition, was formed during discussions at Phase II Initiative convenings, at which participants voiced frustrations with inveterate systemic apathy in responding to elder abuse. Members banded together to form committees, plan a summit, and advocate for statewide changes in policy and practices. The California Elder Justice Coalition remains the foremost elder advocacy group in the state and has had myriad successes promoting an elder justice agenda.

ELDER ABUSE IN HOME LENDING PROTECTION PROJECT

At launch, the Senior Fair Lending Project provided holistic social and legal services and education to older adults to redress abusive and predatory lending practices. Midway through Phase I, the global economic decline and housing market collapse obviated procedural remedies offered by the project, rendering the program effectively moot. With The Measurement Group's guidance, the project recalibrated course and revised its objectives to remediate present exigencies and offer appropriate services to elders. The focus shifted to educating older adults about reverse mortgage loans and advocating for better regulation and protections.

ORANGE COUNTY ELDER ABUSE FORENSIC CENTER

To address the lack of robust engagement and case referrals by law enforcement, the Orange County Elder Abuse Forensic Center began dedicating one forensic meeting each month to cases presented for potential prosecution. The meeting is led by law enforcement, prosecution-oriented, and quick paced to assess the need for criminal justice intervention.



“ [Archstone Foundation’s] legacy is one of the greatest ever... certainly in the field of elder abuse it’s the most compelling. And it’s one of the greatest in the field of gerontology quite frankly in which a model was impactful.”

– Marc Lachs, MD, MPH, Medical Director of NYCEAC and Co-Chief of Weill Cornell Medical College Division of Geriatrics and Palliative Care

X. Lasting Change: Enduring Impact

Most transformative social movements progress in protracted and diminutive increments. The elder justice movement is no exception. For years, elder mistreatment was an unrealized field. Beyond practice and research deficits, a paucity of training for frontline responders hampered detection and effective response. A riven state infrastructure and disjointed care coordination system further frustrated intervention efforts. Solitary projects were funded incongruously. Without a preponderant agenda, comprehensive relief was unavailing for the vast majority of mistreated adults.

Amid the impasse, Archstone Foundation intrepidly invested in the potential for tangible change and forged a bedrock of connectedness and collaboration statewide. Innovative models of intervention have taken root, training and education have elevated professional knowledge and public consciousness, and research studies and practice competencies have markedly improved. There is much more to be done to eradicate mistreatment and enhance the quality of care and lives of older adults. However, quantum shifts evolve over long periods of time, and the Foundation’s abiding commitment has impelled a field to action, driving systems change and cultural reforms in the pursuit of elder justice.

Systems Change

-  **FORENSIC CENTERS & MULTIDISCIPLINARY TEAMS**
-  **TRAINING & EDUCATION**
-  **RESEARCH-INFORMED PRACTICE**
-  **INFRASTRUCTURE IMPROVEMENT**





FORENSIC CENTERS & MULTIDISCIPLINARY TEAMS

The California Forensic Centers

California Multidisciplinary Teams

The Forensic Centers and multidisciplinary teams best exemplify the value of cooperative expert exchange to effectively address the complexities of elder mistreatment, and have collectively improved processes and outcomes for thousands of older adults. In total, approximately 220 multidisciplinary teams have been identified nationwide, and all are situated along the continuum of service provision, from specific to comprehensive delivery. Many have replicated, in whole or part, the original design or have gleaned content expertise, technical assistance, toolkits, and information from the forerunner in California, including those in Colorado, Hawaii, New York, Tennessee, and Virginia. Even teams which have emerged independently, like the Texas Elder Abuse and Mistreatment Institute, have collaborated and exchanged technical proficiencies with the California centers.

Federal approbation of the Forensic Centers was cemented with the passage of the Elder Justice Act which authorized \$26 million in funding to reproduce the construct nationally. Though the Centers have yet to be funded, federal recognition of the import and utility of the collaborative, coordinated approach to adult mistreatment and neglect has been a consequential milestone in the field. Federal interest in the topic piqued again with the Elder Justice Roadmap commissioned in 2014, marking forward momentum and a perceptible shift in the federal response to elder mistreatment. Of the four strategic domains cited in the report, direct services, education, policy, and research, Archstone Foundation has significantly contributed to each, laying the foundation for the objectives promulgated in the Elder Justice Roadmap.

The downstream impact of Archstone Foundation's early work is further reflected in the Department of Justice's Elder Justice Initiative and Multidisciplinary Team Technical Assistance Center, which offers extensive support to budding, struggling, and successful teams nationwide. Of note, the sample multidisciplinary team toolkit promulgated by the Department of Justice integrates resources derived from the model developed by the USC evaluation team at the Center on Elder Mistreatment. The Justice Department's Technical Advisor, Talitha Guinn-Shaver, formerly the Director of the San Francisco Elder Abuse Forensic Center, credits the Initiative with providing her "one of the most valuable experiences of [her] career."

“The technical expertise that filtered through the Forensic Center and was represented there was extremely important on a daily basis for our clients.”

– Janet Morris, JD,
former Director, Bet
Tzedek Legal Services
Elder Justice Project



“*[The Forensic Center] was a best practice that got lifted into the federal law because it was exemplary and a real indication of what we needed to do for the field. That all comes from [Archstone Foundation’s] investment.*”

– Kathy Greenlee, JD,
former Administrator
of the Administration
for Community Living
and Assistant Secretary
for Aging, U.S.
Department of Health
and Human Services

THE CALIFORNIA FORENSIC CENTERS

Of the California Forensic Centers, Orange County, Los Angeles, and San Francisco are vibrant enterprises and have attained sustainability variously through county support, state Cy Pres funds, and federal grants. While each has made operational adjustments to comport with capital constraints, funding remains an ongoing concern. Orange County and Los Angeles continue to provide capacity assessments, although monetary limitations have circumscribed the number of evaluations conducted in Los Angeles. At present, San Francisco does not offer assessments. The Orange County and Los Angeles teams meet weekly, whereas the San Francisco-based center meets biweekly. The Southern California models are affiliated with medical institutions and run by geriatricians. The San Francisco center is a component of the Institute on Aging, led by a social worker.

Over the past few years, the Orange County and Los Angeles Forensic Centers have augmented person-centered and trauma-informed service provision. Through Archstone Foundation funding, the Los Angeles center added a Service Advocate to provide mistreated older adults in crisis with short-term, directed social services, facilitating elder stability and safety from ambient harms. The program has been an innovation in responding to the unique needs of individuals in context and helping them attain tailored resolution and optimal outcomes. The model has been replicated in Orange County through an Administration for Community Living Innovation Grant, funding case management and trauma-informed care to older adults. The Service Advocate program is currently informing a Maine-based research study evaluating the efficacy of elder advocates in client-focused case intervention and goal-directed remediation.

Unlike the three other California centers, the San Diego Team was unable to secure continuation funding beyond the grant term to operate in its original form. While the team as initially structured has disassembled, the forensic-inspired processes have been partially reconstituted in several referential formats: the Cross-disciplinary Team, Anchor Team, and the Elder Protection Council. The bimonthly Cross-disciplinary Team arose in 2014 in the wake of the San Diego Team’s dissolution and facilitates informal discussion about complex cases of mistreatment among Adult Protective Services, prosecutors, and law enforcement. The Anchor Team, funded in 2017 through a two-year Victims of Crime Act grant, provides weekly case management and client services and is embedded within APS. The Elder Protection Council founded in 2018 is a community coalition intended to raise elder awareness and provide a networking forum for stakeholders. While the plenary San Diego wraparound format suspended operations, collaborative service delivery remains viable within current structures.



A physically infirm 81-year-old widower gifted his caregiver \$170,000. As the primary attendant aiding the vulnerable man, the caretaker had near plenary authority over his care and pain management, assuring her sway and his dependence. She received \$2000 per week for seven hours of work, though his other caregivers received a customary rate. When police were notified of potential impropriety, the widower was preparing to designate his aide as power of attorney and alter his will to name her beneficiary of his near \$6 million estate – even though under California law gifts by a dependent adult to a caretaker, are presumptively void. The Los Angeles County Elder Abuse Forensic Center reviewed the case and recommended a cognitive screening, further Adult Protective Services and police investigation, possible prosecution for financial fraud, and conservatorship to secure his safety and assets.

I *Over 75% of the Initiative projects continued to serve their communities in an original, modified, or related form after the Foundation's Initiative concluded. The California Forensic Centers alone have leveraged close to \$7 million in funds from public and private sources since the grant period ended.*

CALIFORNIA MULTIDISCIPLINARY TEAMS

During the Initiative, Foundation-backed medical, financial, and general multidisciplinary teams collectively provided services to thousands of older adults, and/or preserved and recovered millions of dollars in assets. Interagency trainings and presentations were frequently conducted, increasing public awareness and professional expertise in the field. At conclusion, most teams thrived, but some disbanded. The standout Riverside group grew into a Forensic Center. The Ventura Financial Abuse Specialist Team and the Long Beach Elder Abuse Prevention Team continue to deliver valuable interdisciplinary services with invested volunteer members, the former as a multidisciplinary team and the latter as a coalition. The Fair Lending Project in Silicon Valley is no longer operative as originally constituted and wraparound services have ceased, but legal counsel is still provided to older adults.

Though the remaining teams were unable to attain sustainability, the combined footprint of all Initiative multidisciplinary teams have had resounding impact throughout California. Project leaders within the Initiative organized monthly convenings of financial abuse specialist team coordinators statewide both during and beyond the grant period, at which best practices and sustainability measures were addressed. At one meeting, Victims of Crime Act funding opportunities were discussed and coordinators were advised how to frame project goals to align with the Act's mission. Numerous teams have since been recipients of awards. In addition, coordinators of discontinued teams have transferred the knowledge and skills amassed through the grant term to new assignments within the field. As a group, the Foundation-funded teams helped overall proliferation of the multidisciplinary concept and enriched the community with skilled, informed leaders.



A banker, wary of a conservator's incongruous financial transactions, reported his concerns to the Orange County Financial Abuse Specialist Team. Upon review of the fiduciary's account withdrawals, the team notified the court of apparent misconduct. The judge suspended the fiduciary and conducted a forensic accounting. Nearly \$799,000 was misappropriated from the account. The account holder had been dead for a year. The conservator was prosecuted, fined double damages, and sentenced to prison.

“At the stage that the field is at right now, education is absolutely crucial and what we should be really working on [is] how to have clear messaging about the data that’s out there, the scope of the problem, what’s available and building up a cadre of more champions and trainers that can go out and spread this message.”

– Bonnie Brandl, MSW, Founder and Director of the National Clearinghouse on Abuse in Later Life



TRAINING & EDUCATION

Adult Protective Services
Health Care
Law Enforcement
Judicial
Legal
Clergy
Training Resources

In addition to the prolific education and interdisciplinary training provided to professionals through the Forensic Centers and multidisciplinary teams, the Foundation invested in the development of curricula for mandated reporters. While further institutionalized training and screening tools for frontline responders nationwide is essential to enhance recognition and redress, targeted programs across invested disciplines have decidedly advanced elder mistreatment literacy and practice proficiencies.

ADULT PROTECTIVE SERVICES

Foundation-supported curricula have been transformative for Adult Protective Service providers and older adult clients nationwide. Prior to the Initiative, Adult Protective Services did not have comprehensive competency training for staffers to acquire requisite field and practice-based skills and knowledge. Archstone Foundation provided the financial impetus for the Academy for Professional Excellence at San Diego State University to create essential instructional modules. Over the course of the Initiative, six core and three advanced trainings were devised by San Diego State University in concert with the National Adult Protective Services Association. The 23 core courses are recommended for all providers and accessible on the National Adult Protective Services Association website. Notably, fellow Initiative members provided technical expertise for the curricula at convenings. Building upon the predicate materials, new trainings have been created, most recently, Estate Planning and Financial Abuse Issues and Investigating APS Criminal Cases. All modules are available at no cost to Adult Protective Service agencies and staffers nationwide.

HEALTH CARE

With Foundation assistance, numerous health care pre-professionals have received instruction in elder mistreatment detection and reporting requirements. Medical school students, interns, residents, and masters and doctoral candidates have been educated in identification and response at UCI and USC medical schools, and the USC School of Gerontology. Training at the Orange County and Los Angeles Forensic Centers, respectively, continues to complement course studies and reinforce exposure to the area and the need. In addition, through the Initiative, students at the University of California, Los Angeles School of Dentistry were educated in the forensic indicators of elder abuse and reporting mandates. The model has been circulated in peer-reviewed articles, and researchers have since affirmed the efficacy of forensic dentistry, but the subject is no longer a part of the university's pre-doctoral dental curriculum.

The Initiative also produced the comprehensive *Geriatric Pocket Doc* resource guide, developed by the Center of Excellence expert team to inform service providers of common geriatric maladies and medications and the signs and symptoms of mistreatment. Over the years, the handbook has been disseminated to thousands of professionals nationwide and continues to be used by those in the field.

The Foundation funded City College of San Francisco to design an elder mistreatment course and infuse training content in programs for emergency medical technicians, paramedics, health care interpreters, and community health workers. The course is currently taught, and detection among emergency medical service providers has become a prevailing and resonant issue in intervention. In 2018, California mandatory reporting dictates were extended to emergency medical technicians and paramedics. Expert researchers from California, New York, North Carolina, and Texas have crafted, refined, and are testing protocols for assessment of mistreatment by emergency medical providers. Of note, the Geriatric Injury Documentation Tool, derived from the *Geriatric Pocket Doc*, has been developed to enhance detection and documentation of physical geriatric injuries within clinical settings. The visual tool is intended to aid medical providers to accurately record observations of injury in patients' medical records and assist forensic investigation of elder mistreatment and neglect.



“We don't let people go into accounting without massive amounts of training. Why do we think we can let them intervene in people's lives without some level of training?”

– Lori Delagrammatikas,
MSW, Executive Director
NAPSA



LAW ENFORCEMENT

Elder abuse instruction for law enforcement has been conducted through the Center of Excellence and significantly improved knowledge, skills, recognition, and reports by officers. Countless officers were introduced to the Police Officer Standard Training curriculum. Seminars imparted investigative techniques, capacity assessment, and indicia of abuse. In Orange County, the “368+” mobile app aided officers in the field with relevant information to effectively respond to incidents of mistreatment. A similar tool, the Guide for Elder Abuse Mobile Response, was generated through the Los Angeles Forensic Center and USC School of Gerontology. The *Geriatric Pocket Doc* has also abetted forensic investigation. These early trainings and tools were antecedents to the recently implemented, innovative Elder Abuse Guide for Law Enforcement (“EAGLE”) funded by the Department of Justice and designed by the National Center on Elder Abuse with expert guidance from Lisa Gibbs, MD, Director of the Center of Excellence and Clinical Professor of Family Medicine at UCI. The website equips officers with ready investigative and forensic protocols, a repository of pertinent state statutes, and community resource referrals in an easily navigated, information-rich, and publicly accessible platform.

JUDICIAL

Significant strides in the legal arena continue to augment understanding and awareness among professionals to improve the response and increase the efficacy of remedies for older adults. The Foundation commissioned the Judicial Council of California to develop a curriculum for court officers to enhance recognition of elder mistreatment-related issues and heighten sensitivity to the procedural and assistive courtroom accommodations that older litigants, witnesses, and victims may need. The very first standalone multi-day training for jurists nationwide has been memorialized in the *Elder Abuse: An Overview for the Courts* presentation, and continues to be taught biennially to judicial officers statewide.

Elevating the quality and ease of judicial tools, the Center of Excellence team adapted the *Geriatric Pocket Doc* to the judiciary in a reinvented *Elder Abuse Pocket Reference: A Medical/Legal Resource for California Judicial Officers*. Advised by judicial experts, the guide expounds upon the intersection of law, medicine, and elder treatment. Topic areas include forensic markers of elder abuse, protective orders, restraining orders, conservatorships, medical conditions, pharmacology, and related terminology. The handbook is currently used by members of the California Judiciary. More recently, Mosqueda and colleagues penned an article for *Court Review* on *Recognizing Elder Mistreatment: A Guide for Courts*, propagating elder forensic knowledge in the legal domain.

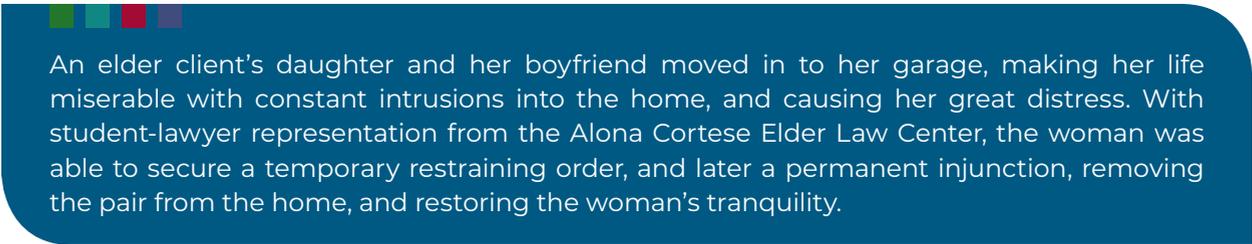
Both the guide and the article address the critical issue of capacity within the context of elder judicial proceedings. Gero-psychological expertise is increasingly indispensable in prosecutions, conservatorship, and other litigation to educate the trier of fact on brain aging and the impact of a victim or witness's cognitive impairment on decision-making capacity, testimony, understanding, and recall. Screenings are often conducted through Forensic Centers.

The Foundation also underwrote the National Center for State Courts' *Courts Working Group* meeting in 2006. Attended by a multidisciplinary group of practitioners, specialists, and government officials, the participants discussed the development of tools and resources for the judiciary to identify and respond to cases of elder mistreatment. The group's recommendations were consolidated in a white paper. The content proposed was later integrated into a fully realized and dedicated website, Center for Elders and the Courts, funded by the Retirement Research Foundation and often used by jurists and court officers.

LEGAL

Civil legal counsel and resources for older mistreated adults in Los Angeles County have markedly improved through the Foundation's grantmaking. Bet Tzedek has expanded free services to elders through the installation of self-help Elder Law Clinics at county courthouses, legal aid to institutionalized older adults, and the addition of a diagnostic screening tool at intake to detect mistreatment. Conservatorship clinics located in Lancaster, Long Beach, Los Angeles, and Norwalk expeditiously and effectively assist litigants with filing petitions and responding to prevailing procedural concerns. The Elder Abuse Restraining Order Clinic at the Los Angeles Superior Court delivers guidance to older adults in need of imminent physical or financial protection from perpetrators. Bet Tzedek also advocates on behalf of long-term care residents to preserve their rights and remedies in the event of mistreatment. The Foundation funded the creation of an Elder Justice and Assessment System at Bet Tzedek, an intake protocol which embeds screening for elder mistreatment regardless of the issue presented, and renders appropriate advice if latent harms are discovered. Many older adult victims whose truths would otherwise have remained hidden have benefited from these systemic improvements.

In addition, the Foundation has awarded several grants to the Alona Cortese Elder Law Center at Chapman University, Fowler School of Law, in Orange County, to support an elder law curriculum and student clinic which provides free legal services to low income older adults. Numerous students have been, and continue to be, educated in the intricacies of elder issues and represent clients at administrative, conservatorship, and elder abuse restraining order hearings. Many budding law students have entered the field as elder justice advocates.



An elder client's daughter and her boyfriend moved in to her garage, making her life miserable with constant intrusions into the home, and causing her great distress. With student-lawyer representation from the Alona Cortese Elder Law Center, the woman was able to secure a temporary restraining order, and later a permanent injunction, removing the pair from the home, and restoring the woman's tranquility.

CLERGY

In a novel faith based-intervention, the County of Santa Clara received Foundation funding to strengthen the parochial response to elder mistreatment and neglect by educating clergy and lay church leaders about the issue and the need for reports and referrals. The project successfully taught leaders across faith communities about elder mistreatment, and introduced methods to better serve their older congregants. Support groups for caregivers and visitation programs for isolated older members were initiated during the project, which remains active today through committed volunteer efforts.

TRAINING RESOURCES

The Center of Excellence continues to house training curricula, webcasts, and handbooks tailored by discipline on its website, available to professionals and the public. The Foundation also invested in Training Resources on Elder Abuse, an inventive and comprehensive web-based repository of webinars, videos, and tutorials for service professionals and the public maintained by the National Center on Elder Abuse.



Elder Abuse and Neglect Initiative Evaluation
Forensic Center/Multidisciplinary Team Evaluations
Forensic Center/Multidisciplinary Team Data Set
Forensic Indicia of Abuse Research
Abuse Intervention Model Studies
Adult Protective Services' Research Studies
National Elder Mistreatment Study: Outcomes

ELDER ABUSE AND NEGLECT INITIATIVE EVALUATION

Though Archstone Foundation has primarily invested in intervention projects, it has both directly funded and indirectly advanced a thriving research agenda. Prior to the Foundation's foray into the area, research studies were sparing and sorely inadequate for a field in dire need of remedies. As the pioneering philanthropic advocate for elder justice, the Foundation aspired to mend the evidentiary gap by conceiving an evaluative basis for its programmatic design. Lodging a rigorous evaluation component within Initiative projects, the Foundation facilitated measurement of individuated and collective performance outcomes. Demonstrable project progress towards creditable practices was borne by The Measurement Group findings, and documented in the peer-reviewed *Journal of Elder Abuse and Neglect*.

FORENSIC CENTER/MULTIDISCIPLINARY TEAM EVALUATIONS

Numerous privately and publicly funded studies evaluate, or emanate from, Forensic Centers. Endowed research conducted by the USC evaluation team at the Center for Elder Mistreatment has examined Los Angeles Elder Abuse Forensic Center processes, tested the efficacy and cost-effectiveness of case review, assessed neuropsychological profiles of victims of financial exploitation, and analyzed Forensic Center impact on prosecution and conservatorship referrals, among other projects. The Foundation supported a cross-site evaluation of the four California Forensic Centers by the team in 2012 which has, in turn, informed a pending Innovation Grant funded by the Administration for Community Living. USC researchers are currently identifying Forensic Centers and multidisciplinary teams nationwide and analyzing their respective processes, protocols, and impact to guide replication and implementation of the models. Attendant to the grant, auxiliary Forensic Center practices are being examined to enhance multidisciplinary efficacy and proficiency, including the Foundation-funded Service Advocate position, enhanced Adult Protective Services, and the addition of a forensic accountant in cases of elder financial exploitation.

FORENSIC CENTER/MULTIDISCIPLINARY TEAM DATA SET

Common demographic intake information collected from the California Forensic Centers is now being analyzed by a research team from the Weill Cornell Medical College Division of Geriatrics and Palliative Care (“Weill Cornell.”) Integrating data culled from the Foundation-funded USC-led cross-site evaluation, the New York-based team intends to refine and articulate best-practice, minimum standardized intake requirements for all multidisciplinary teams nationwide.

FORENSIC INDICIA OF ABUSE RESEARCH

Breakthrough National Institute of Justice-funded studies on forensic markers of abuse conducted through the Orange County Elder Abuse Forensic Center have significantly enhanced the detection of elder mistreatment. Recent scholarship is founded upon the seminal bruising studies conducted by Mosqueda, which differentiate accidental from intentional contusions. Originative work at the USC Center on Elder Mistreatment is currently focused on exploring and distinguishing physical signs of mistreatment from narrative or contextual evidence and evaluating the weight of the evidence in criminal prosecution. In other forensic studies, multiple forms and patterns of abuse-related injuries are being ascertained and classified. Results will inform the development of screening instruments for emergent care and other clinical settings to enhance early recognition by medical personnel. Research at Weill Cornell has also underscored the importance of radiologic imaging to detect fractures and other physical manifestations of mistreatment.



ABUSE INTERVENTION MODEL STUDIES

At the vanguard, the Abuse Intervention Model provided a comprehensive, meaningful framework for understanding risk factors for elder mistreatment, viewed through the complex interrelationship between the victim, trusted other, and the context. The research model drew from experiences and empirical data garnered at the Forensic Centers and validated through interviews of older adults and their caregivers. Originally funded by the Foundation with other private and public institutions, the National Institute on Aging has awarded a grant to USC to address the applicability of the Abuse Intervention framework to dyads of older adults with Alzheimer's Disease and related dementias and their caregivers. Identification of the multifaceted indicators of mistreatment will inform an evidence-base and creditable approaches to intervention.

ADULT PROTECTIVE SERVICES' RESEARCH STUDIES

A grant award to UCI led to the improved quality and consistency of elder abuse incidence data reported by Adult Protective Services. Researchers from UCI, in partnership with the Adult Protective Services' Protective Services Operations Committee of the California Welfare Director's Association, found that agency definitions, guidelines, and reporting practices varied widely by county, resulting in discrepant data, inaccurate prevalence estimates, and inconsistent outcomes for older adults statewide. The project sought to standardize definitions, guidelines and policies. To this end, the Protective Services Operations Committee formed a workgroup which implemented a protocol, reference tool, and online Adult Protective Service training to facilitate uniformity and reliability in reports. Later efforts to systematize data collection and ensure best practices through the National Adult Maltreatment Reporting System and the Voluntary Consensus Guidelines for State Adult Protective Service Systems are drawn from the foundational consistency study and the body of knowledge that Archstone Foundation nurtured.

 *The Foundation elevated the stature and professionalism of Adult Protective Services and initiated the research upon which current studies are building on today.*

NATIONAL ELDER MISTREATMENT STUDY: OUTCOMES

The Foundation and the National Institute of Justice jointly financed Dr. Ron Acierno's eight-year successor study to the seminal National Elder Mistreatment Study which had substantiated the importance of social support to elder health and wellness. The decisive Outcomes research affirms the adverse health and mental health correlates of elder mistreatment, and identifies social support as an actionable intervention which can mitigate the harm incurred. The study established a nexus between financial abuse and contrary mental health outcomes. Findings also confirmed that financial misconduct by family members and friends is far less likely to be reported to authorities than offenses committed by strangers, and that emotional mistreatment by any category of offender was seldom reported.



INFRASTRUCTURE IMPROVEMENTS

The Judiciary

California Advocacy

Long-Term Care

Funding

Leadership and Collaboration

THE JUDICIARY

During the Initiative, the Judicial Council of California investigated elder practices at four study courts in California: Alameda, Orange, San Francisco, and Ventura. Various procedural and structural accommodations were documented and best practices court protocols nationwide were noted. Study results were memorialized in a report to the Foundation, *Effective Court Practice for Abused Adults*. Many processes observed at the study courts have thrived, while new approaches have been promoted.

At present, the Alameda Court has an Elder and Dependent Abuse Access Program, through which staff assist elders to navigate the court system, obtain restraining orders, attend hearings, and access social service resources. In Ventura, a specialized Elder Law Court hears all elder mistreatment cases in one courtroom, including criminal, financial, and domestic violence offenses. Related service providers extend ancillary services to older adult petitioners. The San Francisco Superior Court provides self-help legal and conservatorship assistance through their ACCESS center. At the Orange County Superior Court, older adults who are mistreated can receive legal aid through an Elder Abuse Self Help Clinic. A restraining order calendar is heard every morning by Judge Kim Hubbard, the former coordinator of the Foundation-funded Orange County Financial Abuse Specialist Team. Older adults receive priority calendaring and assistive accommodations. In an inventive approach, the Orange County probate court is piloting an Eldercaring Coordination program, which diverts pending conservatorship cases from probate court to alternative dispute resolution. This mediation model is intended to reduce court congestion, avoid protracted litigation, ameliorate family disputes extra-judicially, and prevent mistreatment.

CALIFORNIA ADVOCACY

Elder justice advocacy in California sprouted from the camaraderie sown through the course of the Initiative. The convenings cultivated the ambient shared passion for the cause which was converted to purposeful action in the Phase II advocacy workgroups, and catalyzed into a productive agenda for changed practices through the Summit, Blueprint and their progeny. With dedicated outreach and legislative advocacy, the California Elder Justice Coalition has had a profound impact on securing funding for Adult Protective Service's provider training and Victims of Crime Act grants to support multidisciplinary team practice. The California Elder Justice Coalition continues to offer salient webinars, trainings, and materials on elder justice issues for professionals and the public.

“ [The California Elder Justice Coalition] hosted brown bag sessions at the Capitol and invited legislators and their staff to learn about different topics on elder abuse. [W]e really relied very heavily on the former members of Archstone’s elder abuse projects to be those subject matter experts.”

– Molly Davies, MSW, Vice President of Elder Abuse Prevention & Ombudsman Services, WISE and Healthy Aging

Shawna Reeves of the Fair Lending Project gave a presentation on predatory lending practices to the local Santa Clara community. An older adult attendee told Ms. Reeves that he had planned to take out a reverse mortgage, but his broker had not explained the instrument or its implications. The exchange was relayed to Prescott Cole of the California Advocates for Nursing Home Reform. Mr. Cole subsequently testified before the Senate Special Committee on Aging advocating for mandated mortgage counseling. He shared this anecdote to punctuate his argument. Following the session, the US Department of Housing and Urban Development began requiring brokers to counsel elders on mortgage options.

LONG-TERM CARE

Projects awarded to WISE and Healthy Aging, a non-profit social service organization dedicated to aiding older adults in Los Angeles, have strengthened services and enforcement protocols for elders in institutions. Among them, the elder abuse complaint and investigation component of the long-term care ombudsman program has significantly supported elder rights. Last year, WISE and Healthy Aging ombudsmen responded to approximately 10,000 complaints on behalf of residents. The Foundation also bolstered ombudsman investigation of complaints in unlicensed facilities by funding a service liaison to process grievances. Though the dedicated position no longer exists, the functions have been incorporated into ombudsmen’s daily practice.

A Los Angeles-based nursing home was notorious for expelling residents who had maximized their Medicare days and were unable to pay for their care. On several occasions, older adult men were driven far from the facility and dumped on the streets, without shelter, to fend for themselves. Some were cognitively impaired, unable to recall their names or the facility address. WISE and Healthy Aging was contacted by community agencies, including police and firemen, who found the residents wandering the streets, wearing identifying wrist bands from the nursing home. On behalf of the men, the agency notified the Department of Public Health. Allegations of neglect were substantiated and reported to the City Attorney’s Office which negotiated, in consultation with WISE and Healthy Aging, an agreement with the nursing home to execute a discharge protocol which bars patient dumping, compels the hiring of a discharge coordinator, installs an oversight monitor who collaborates with WISE and Healthy Aging, and creates a fund to aid in legitimate patient transfers. Since implementation, complaints about the facility have declined.

FUNDING

The Foundation's steadfast commitment to the remediation of mistreatment has had substantial, certain, and sustained impact which has far exceeded its prolific catalogue of directly funded projects. In both practice and research domains, private and public funders have supported ancillary programs, continuation projects, and original ventures in intervention. Archstone Foundation used its platform as a primary investor and founder of Grantmakers in Aging to propagate elder justice initiatives and advance the field. Foundation principals generously shared insights, challenges meted, and lessons learned with benefactors, federal institutions, and invested professionals to expand the bandwidth of the arena and improve the quality of care and life for older adults.

Increased Federal Funding



In 2018-2019, elder abuse funding from the **National Institutes of Health** was over **8 TIMES GREATER** than all its combined pre-1995 awards.



Since 2001, the **National Institute of Justice** has awarded nearly **\$14 MILLION** in elder abuse-related grants.



The **Victims of Crime Act** funding was expanded in 2016 to include elder abuse, leading to over **\$10.5 MILLION** directed to programs in California

From 2016 to date, the **Administration on Community Living** has awarded approximately **\$8 MILLION** in Elder Justice Innovation Grants to address elder mistreatment.



LEADERSHIP AND COLLABORATION

One of the most consequential outcomes of the Foundation's work has been the promotion of champions and development of young leaders. With a shared passion for the cause, these agents of invention have introduced impactful models of intervention and embraced research innovations which have infused the elder justice community with palpable and promising solutions and inspired generative efforts. As well, the professional and personal bonds fomented through the Initiative have resulted in continuing alliances and novel endeavors with resounding returns to the field and its older adult beneficiaries. These collaborative currents have now permeated the greater elder justice circuitry and led to dynamic cooperative partnerships among funders, researchers, and practitioners, dedicated to assuring older adults live with dignity, free from mistreatment, neglect, and exploitation.

“ [The elder justice community has] to work together on this incredibly complicated problem because it crosses so many different disciplines and entities... on all sorts of levels, at a practice level, at a research level, at a policy level, at a training level.”

– Marie-Therese Connolly, JD, Senior Scholar at the Woodrow Wilson International Center for Scholars, a 2011 MacArthur Foundation fellow, and the original architect of the EJA

“We do a lot on behalf of elders but we’re not involving them as much as we could. Especially, since they’re by and large the experts of their experience and [would likely be] really empowered by have us partner rather than serve.”

– Shawna Reeves, MSW, Director of Elder Abuse Prevention, Institute on Aging, San Francisco

Cultural Transformation

Though systems change has been a predominant focus of Archstone Foundation’s strategic vision, the Foundation has also decidedly trained its philanthropic lens on improving outcomes for older adult as individuals. Prevailing wisdom favors client-centered care delivery which contemplates personal preferences and requisites, eschewing fungible service provision and preordained modes of case redress. A differential approach can reinforce prevention efforts and offer directed support in the event of mistreatment. Elder victims are intrinsically impacted by harms inflicted. Regarding them as arbiters of their own destiny, as practicable, can be empowering and restorative in the aftermath of harm. In person-centric care, optimal goals are defined by the person and variable with context. This method has been embraced by the Foundation through a multitude of projects beginning with the Forensic Center and multidisciplinary team processes, which render case-specific, holistic review and recommendations for individuated resolution.

PERSON-CENTERED CARE MODELS



Service Advocate

The Foundation-endowed Service Advocate enhancement to the Los Angeles County Elder Abuse Forensic Center fully realizes the client-focused construct. A dedicated social worker eases the older adult’s path from oppressed to enabled. Guided by the individual’s expressed objectives and readiness to transition, the Service Advocate draws upon the older adult’s internal strengths-based reserves and ambient filial and community resources to gradually shepherd the client to a place of safety and stability.

The social support-imbued case management intervention reinforces client autonomy and facilitates sound and sustainable outcomes. This best practice model has been replicated with unqualified success and will likely serve as the paradigm for future iterations nationwide.



APS referred Mary, an 97-year-old self-neglecting hoarder, to the Los Angeles County Elder Abuse Forensic Center for case review and management. After receiving a neurological assessment and diagnosis of mild cognitive impairment with hallucinations, Mary was recommended to Maria Sierra, MFT, the Center's Service Advocate. An at-home visit exposed Mary's small unkempt apartment, cluttered with objects, and open cat food tins. It also laid bare Mary's isolation, lack of social support, and inability to manage her home, nutrition, and finances. Maria helped Mary pay her delinquent rent and electric bills, arranged for meals-on-wheels food delivery, and scheduled medical appointments. She also gently persuaded Mary to part with some of her belongings to clear obstructive pathways, and arranged for the unsteady, fall-prone client to receive a much needed walker. Beyond tending to imminent necessities and providing social support, Maria coordinated communication between the client, her estranged son, and nephew, and facilitated her safety and security.

Eliciting Change in At-Risk Elders

In accord with the person-centered concept, the Foundation-funded Eliciting Change in At-Risk Elders (ECARE) program administers directed services and local resources to older adults who have been mistreated, through an interdisciplinary social work, law enforcement alliance. Piloted in Pasadena, California, the robust intervention encourages the client's relationship with family members and utilization of resources to diminish abuse-induced distress and mitigate the likelihood of recidivism. Over an extended period, older adults receive therapy to counsel them through stages of change on the path to recovery and safety. Through the course of the intervention, older adults effectively unearth latent stores of strength, enabling them to reclaim their lives and assert their independence.

Trauma-informed Care

Through a Foundation grant to WISE and Healthy Aging, mistreated older adults were afforded psychotherapy to help them process traumatic experiences. Individual clinic and field-based therapy sessions sought to reduce the aftereffects of mistreatment through therapeutic collaborations, and empower clients to elude re-victimization. For many, basic health, nutrition, housing, and transportation needs took precedence over therapeutic goals, and case management efforts were redirected to respond to more immediate concerns. A Critical Response Liaison assisted clients with safety planning, community resources, and coordinated services. WISE and Healthy Aging has since incorporated this project into the Holistic Elder Abuse Response Team, a permanent self-sustaining program within its mental health services department. The thriving program is currently funded through a Victims of Crime Act grant.



An older woman in her 70's was physically and financially abused by a substance-addicted family member and his friends, who co-opted her apartment and confined her to the bedroom. With the help of the Holistic Elder Abuse Response Team advocates, the woman sought and obtained an elder abuse restraining order against each of the offenders. Mandated to leave the home, the relative looted all of the woman's furnishings and personal items, except her bed. With donations, the team secured a kitchen table, couch, dishes, and utensils and a grocery card for her provisions. Advocates also provided the woman with safety planning to assure her physical wellbeing, and financial advice to protect her assets. Once stabilized, the woman received therapeutic support. She is currently enrolled in courses at community college.

Like the Holistic Elder Abuse Response Team, the Foundation-funded Human Options' Safe Options for Seniors program, provides clinical counseling, education, information, and service referrals to alleviate mistreatment in later life. Emboldening older adults, the program consists of safety planning, family conflict resolution, and group meetings to facilitate communal support and healing. Safe Options for Seniors has been subsumed by Human Options' core domestic violence services.

Commitment to Intervention in Diverse Communities

The Foundation's client-focused strategies are also observed in its commitment to interventions within diverse communities. Cultural, ethnic, gender, and socio-economic differences inform an older adult's respective response to mistreatment, decision to report harms, and help-seeking behavior. Language barriers can also inhibit elders from seeking needed relief, and discrimination and disadvantage in early life can further complicate remedial efforts. Appropriate interventions must comport with the person-centered, situation-specific imperative to effectively reach and provide relief to adults who have experienced mistreatment. The Foundation has responded through its ground breaking conference on Elder Abuse in Minority Populations, direct service programs like the Latino ombudsman project, and numerous interventions which have incorporated diverse, culturally competent measures to address the prevailing demand. This remains a primary Foundation objective enriching pending and future projects.

Technology-Based Resources for Caregivers

With Foundation funding, USC Center on Elder Mistreatment researchers have developed a technology-based online curriculum to bolster coping strategies in response to caregiving challenges. "Kinder" is an educational tool to equip caretakers with the knowledge and tools to support ailing older adults. Through the self-directed study modules, learners are exposed to trials shared by similarly situated caregivers and provided effective means to address the dilemmas presented. The process is intended to normalize the strain of caregiving, diffuse unhealthy dyadic engagement, and countermand the adverse outcomes of inherent stresses. This model is currently being piloted and broad dissemination is planned.

Social Support

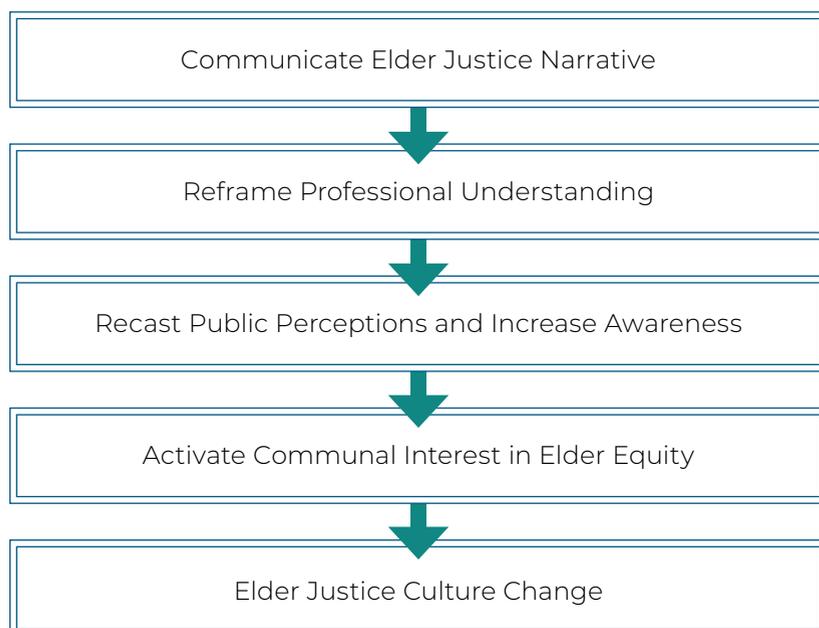
The transformative National Elder Abuse Mistreatment Study: Outcomes, and its predecessor study, affirmed the powerful role of social support for older adults, writ large, and adults who have been mistreated, in particular. Indeed, the value of social support as a bulwark to thwart mistreatment and a buffer in its aftermath cannot be overstated. Enhanced social connection and engagement facilitates autonomy and dignity in older age, reinforcing strengths and mediating susceptibility to harm. Adequate resources in the wake of mistreatment can similarly moderate adverse outcomes.

Aligned with this principle, the Foundation has awarded several grants to Catholic Charities' Gatekeeper program, which offers assessment, case management, and service referral to low income, frail older adults living at home. Monthly volunteer visits enhance the physical, psychological, and emotional wellbeing of isolated seniors. Enlisted providers supply emotional sustenance, deliver food, and coordinate transportation.

Reframing Elder Abuse

In a concerted effort with other philanthropies, the Foundation has endorsed and funded dissemination of a solutions-oriented, strengths-based communication strategy to frame elder abuse remediation as a justice issue and a societal objective. Reframing the prism through which prevailing perceptions of aging and mistreatment are refracted, the approach is intended to educate invested professionals and providers in the elder justice construct, impart tools to effectively communicate with older adults, and offer training to increase public awareness and promote prevention. Recently, the Gerontological Society of America received a three-year grant from several funders, including the Foundation, to promulgate the justice ideology and expand the communal exchange on elder equality.

THE PATH TO REFRAMING ELDER ABUSE





“*[Archstone Foundation] has helped fund and provide leadership and the vision that allowed the landscape to be completely changed to what it is today. It feels as though for years we pushed the boulder up the hill one tiny-tiny inch at a time. When Archstone got involved and brought all of the players together and all of its resources to bear, we moved up the side of the mountain a lot faster. We now are at a place that is so different and so far beyond what was imaginable in the 1980’s as to be awe inspiring. Archstone has really been the fuel that has lighted the fire ... with elder abuse, in our understanding and response to it.*”

– Candace Heisler, JD,
Assistant Professor of Law,
University of California,
Hastings College of Law



XI. Final Thoughts

Through its dedicated investment in the area, Archstone Foundation elevated elder mistreatment to an accepted field of practice, research and study, increased public awareness of the need for redress, actuated interagency systemic and process reforms, and promoted multidisciplinary mechanisms to address cases of abuse. The Foundation has indelibly impacted the field and advanced efforts statewide and nationally, across practice, research, legislative, and policy domains. With a response network rapidly expanding, the path to prevention and remediation lies ahead to further the objectives of elder justice and preserve the rights and freedoms of older adults.



Philanthropies, government funders, policymakers, and stakeholders can augment the strides forged by Archstone Foundation through myriad opportunities, including those set forth below.

EDUCATION & TRAINING	RESEARCH	LEGAL
<ul style="list-style-type: none"> <input type="checkbox"/> Expanding resources <input type="checkbox"/> Training and education for mandatory reporters <input type="checkbox"/> Screening tools for elder abuse detection and intervention <input type="checkbox"/> Increasing public awareness 	<ul style="list-style-type: none"> <input type="checkbox"/> Developing an evidence base <input type="checkbox"/> Evaluating the efficacy of existing programs, including Adult Protective Services, ombudsman, and Forensic Center practices and outcomes <input type="checkbox"/> Developing and implementing tools for capacity evaluations 	<ul style="list-style-type: none"> <input type="checkbox"/> Implementing courtroom accessibility <input type="checkbox"/> Engaging assistive navigators <input type="checkbox"/> Imposing calendaring and teleconferencing adaptations <input type="checkbox"/> Installing restorative justice alternatives <input type="checkbox"/> Applying wraparound services
POLICY	ADVOCACY	PERSON-CENTERED CARE
<ul style="list-style-type: none"> <input type="checkbox"/> Increasing federal leadership in abuse and neglect <input type="checkbox"/> Distribution of Elder Justice Act funding for forensic centers and forensic-based tools and research agenda 	<ul style="list-style-type: none"> <input type="checkbox"/> Allocating federal funding for Adult Protective Services <input type="checkbox"/> Sustainable funding for elder advocacy <input type="checkbox"/> Victims of Crime Act Funding 	<ul style="list-style-type: none"> <input type="checkbox"/> Person-in-context care delivery <input type="checkbox"/> Intervention through a multi-cultural lens <input type="checkbox"/> Integrating elder voices and views <input type="checkbox"/> Facilitating physical, emotional, and spiritual healing <input type="checkbox"/> Promoting strengths-based healthy aging and improved quality of life
PREVENTION	FORENSIC CENTER & MULTIDISCIPLINARY TEAMS	LONG-TERM CARE
<ul style="list-style-type: none"> <input type="checkbox"/> Bolstering social supports and community resources <input type="checkbox"/> Screening for cognitive impairment <input type="checkbox"/> Understanding the crossing of dementia and abuse <input type="checkbox"/> Advance care planning <input type="checkbox"/> Recognizing self-neglect as a precursor to abuse <input type="checkbox"/> Perceiving the intersection of poverty, homelessness, and abuse 	<ul style="list-style-type: none"> <input type="checkbox"/> Replication of model and concept <input type="checkbox"/> Enhancement through Service Advocates, trauma-informed services, and forensic accountants <input type="checkbox"/> Common data collection, sets, and sharing among Forensic Centers <input type="checkbox"/> Common multidisciplinary team protocols 	<ul style="list-style-type: none"> <input type="checkbox"/> Improving safety, standards, reports, and responses to elder abuse <input type="checkbox"/> Increasing oversight and implementing standards and guidelines for unlicensed care facilities

Endnotes

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Appendix A: Archstone Foundation Elder Abuse Projects

1992

Adult Abuse Task Force Conference – *Paul Feldstein, PhD, University of California, Irvine*

1993

Coordinating Case Manager of Financial Management – *Martha Spinks, PhD, Saint Barnabas Senior Center of Los Angeles*

Elder Abuse in America Conference – *Sandra Lund, Archstone Foundation*

1994

Los Angeles Times Insert on Elder Abuse – *Sandra Lund, Archstone Foundation*

White House Conference on Aging Community Forums – *Sandra Lund, Archstone Foundation*

1998

National Conference on Elder Abuse in Minority Populations – *Toshio Tatara, PhD, American Public Welfare Association*

Financial Abuse Specialist Team – *Pamela McGovern, Orange County Council on Aging*

1999

Serving Elderly Victims of Financial Exploitation – *Rosalie Wolf, PhD, National Committee for the Prevention of Elder Abuse*

Money Management Program – *Sally Little, Southern California Presbyterian Homes*

2000

Long-Term Care Ombudsman Program of Ventura County – *Mary Zanolini, Long-Term care Services of Ventura County, Inc.*

Friendship Line Expansion Project – *David Werdegar, MD, MPH, Institute on Aging*

Elder Abuse Integrated Medical Response Team – *Laura Mosqueda, MD, University of California, Irvine*

Financial Abuse Specialist Team – *Lisa Anne Holland, MSW, Redwood Senior Homes and Services Corporation*

2001

Elder Law Clinical Program Development – *Parham H. Williams, Jr., Chapman University School of Law*

Recruitment and Training of Volunteer Ombudsmen – *Sylvia Taylor Stein, Long-Term Care Services of Ventura County, Inc.*

Project Supporting the Implementation of New Nursing Home Legislation – *Gerald McIntyre, National Senior Citizens Law Center*

A National Conference on the Medical Aspects of Elder Abuse: The Role of Health Care Professionals – *Laura Mosqueda, MD, University of California, Irvine*

Mental Health Outreach to Hard to Reach Elders – *Janet Anderson Yang, PhD, The Center for Aging Resources*

2002

Phase 2 of the Center for Elder Suicide Prevention's Friendship Line – *David Werdegar, MD, MPH, Institute on Aging*

Renewed Funding for "Clinical Mental Health Outreach to Older Adults: Reaching the Hard to Reach," – *Janet Anderson Yang, PhD, The Center for Aging Resources*

"To the Contrary" Segment on Elder Abuse – *Bonnie Erbe, Persephone Productions, Inc.*

2003

Retiree Response Technical Team – *Pamela McGovern, Orange County Council on Aging*

The Creation of an Elder Abuse Forensics Center – *Laura Mosqueda, MD, University of California, Irvine*

2004

Latino Ombudsman Project – *Sylvia Taylor Stein, Long-Term Care Services of Ventura County, Inc.*

The FAST Program – *Evie Greene, Senior Concerns*

The Gatekeeper Program – *Heidi Holly, Friendship Adult Day Care Center*

The Elder Abuse Counseling Program – *David Werdegard, MD, MPH, Institute on Aging*

2005

Senior Ombudsman Services, Elder Abuse Prevention – *Mary Salvador, Volunteer Center of Riverside County*

Continued Funding for the FAST Project – *Joan Virginia Allen, JD, Senior Concerns*

Conference Support for the Elder Abuse Track at the 2005 Joint Conference of ASA and NCOA – *Jim Emerman, American Society on Aging*

The Elder Law Conference – *Chisorom Okwusao, California Department of Aging*

Senior Mental Health and Substance Abuse Initiative – *Vivian Sauer, LCSW, Jewish Family Service of Los Angeles*

The Elder Abuse Investigation Component of the Federally Mandated Long-Term Care Ombudsman Program – *Grace Cheng Braun, WISE and Healthy Aging*

The Gatekeeper Program – *Daryl West, Friendship Adult Day Healthcare Center*

17th Annual Adult Protective Services Association Conference Training Adult Protective Service Workers – *Kathleen Quinn, National Adult Protective Services Association*

2006

10th International Conference on Family Violence and Elder Abuse & Neglect – *Pamela Sanford, Family Violence and Sexual Assault Institute*

Identifying Elder Abuse, A Handbook for Healthcare Professionals – *Marilyn Peterson, MSW, MPA, Regents of the University of California, Davis*

Financial Abuse Specialist Team – *Joan Virginia Allen, JD, Senior Concerns*

National Meeting of Elder Abuse and the Courts Working Groups – *Thomas Clarke, PhD, National Center for State Courts*

Elder Abuse and Neglect Prevention Training and Education Program – *Lisa Nerenberg, City College of San Francisco*

Project MASTER: Multidisciplinary Adult Services Training and Evaluation for Results – *Lori Delagrammatikas, MSW, San Diego State University Research Foundation*

Increasing Dental Health Professionals' Awareness of Elder Abuse and Neglect – *Melanie Girona, PhD, University of California, Los Angeles*

Enhancing the Capacity of the Diverse Faith Communities to Address Elder Abuse – *Betty Malks, MSW, CSW, County of Santa Clara, California*

Utilizing Clinical Assessments to Combat Elder Abuse – *Liam Gibson, Institute on Aging*

Geriatric Assessment in Elder Self-Neglect Evaluation and Treatment – *Tracey Gomez, MSN, NP, Riverside County Regional Medical Center*

Marin County Financial Abuse Specialist Team – *Jenifer Duane, Elder Financial Protection Network*

Dependent Adult and Elder Abuse Multidisciplinary Team – *Jean Brian, RN, County San Bernardino Arrowhead Regional Medical Center*

Solano County Financial Abuse Specialist Team (FAST) – *Terri Restelli-Deits, MSW, Area Agency on Aging Serving Napa and Solano*

Long Beach Comprehensive Multidisciplinary Elder Abuse Prevention Team (LBMDT) – *Theresa Marino, MPH, Long Beach Department of Health and Human Services*

Center of Excellence in Elder Abuse and Neglect – *Laura Mosqueda, MD, University of California, Irvine*

Los Angeles County Elder Abuse Forensic Center – *Diana Homeier, MD, University of Southern California*

Wraparound Service Intervention Model – *Paul Greenwood, LL.B., San Diego County District Attorney's Office*

Elder Abuse in Home Lending Protection Project – *Shawna Reeves, MSW, Council on Aging Silicon Valley*

Seniors Against Investment Fraud (SAIF) – *Grace Cheng Braun, WISE and Healthy Aging*

Convening and Technical Support for Elder Abuse and Neglect Initiative Grantees – *Laura Mosqueda, MD, University of California, Irvine*

Effective Court Practice for Abused Elders – *Amy Nuñez, Judicial Council of California, Administrative Office of the Courts*

Estimating Incidence of Elder Abuse from Social Services Data – *Laura Mosqueda, MD, University of California, Irvine*

2007

3rd Annual Elder Abuse Conference – *Susan Williams, Legal Assistance for Seniors*

Development and Validation of a Criterion Standard for Elder Mistreatment – *Laura Mosqueda, MD, University of California, Irvine*

18th Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

Elder Abuse Conference Track and Journal Dissemination Project – *Robert Geffner, PhD, Alliant International University*

2008

Elder Abuse Training for Frontline Health and Emergency Response Providers – *Lisa Nerenberg, MSW, MPH, City College of San Francisco*

Enhancing the Capacity of a Diverse Faith Community to Address Elder Abuse, Phase II – *Betty Malks, MSW, CSW, County of Santa Clara, California*

Project MASTER: Multidisciplinary Adult Services Training and Evaluation for Results – *Lori Delagrammatikas, MSW, San Diego State University Research Foundation*

Moving EA&N Training from the Classroom to the Clinic – *Melanie Gironde, PhD, University of California, Los Angeles*

Solano FAST – *Terri Restelli-Deits, MSW, Area Agency on Aging Serving Napa and Solano*

Long Beach Comprehensive Multidisciplinary Elder Abuse Prevention Team (EAPT) – *Theresa Marino, MPH, Long Beach Department of Health and Human Services*

Financial Abuse Specialist Team (FAST) of Ventura County – *Julia Rowan, PhD, Senior Concerns*

San Francisco Elder Abuse Forensic Center – *Erika Falk, PsyD, Institute on Aging*

Family Justice Center (HOPE) Team – *Paul Greenwood, Esq., San Diego County District Attorney's Office*

Center of Excellence in Elder Abuse and Neglect – *Laura Mosqueda, MD, University of California, Irvine*

Los Angeles County Elder Abuse Forensic Center at LAC+USC Medical – *Diana Homeier, MD, University of Southern California*

Elder Abuse in Home Lending Protection Project – *Shawna Reeves, MSW, Council on Aging Silicon Valley*

Improving the Quality of Elder Abuse Incidence Data in California – *Laura Mosqueda, MD, University of California, Irvine*

Convening and Technical Assistance for the Archstone Foundation Elder Abuse and Neglect Initiative – *Laura Mosqueda, MD, University of California, Irvine*

Los Angeles County Elder Law Clinics – *Janet Morris, JD, Bet Tzedek Legal Services*

San Bernardino Department of Aging and Adult Services - Arrowhead Regional Medical Center - Multidisciplinary Team Project - Phase II – *Glenda Jackson, MSW, The San Bernardino County Department of Aging and Adult Services*

Implementing Effective Court Practice for Abused Elders – *Francine Byrne, MA, Judicial Council of California, Administrative Office of the Courts*

Elder Abuse and Unlicensed Facility Complaint Investigations in the Long-Term Care Ombudsman – *Grace Cheng Braun, WISE and Healthy Aging*

19th Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

2009

2008 Elder Abuse Symposium – *Erin Grigat, California District Attorneys Association*

2009 Aging in America Falls Prevention and Elder Abuse Programs – *Carole Anderson, American Society on Aging*

Financial Abuse Specialist Teams (FAST) – *Joy Ellen Lippman, Central Coast Commission for Senior Citizens*

5th Annual Elder Abuse Conference – *Susan Williams, Legal Assistance for Seniors*

2010

20th Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

Elder Abuse Statewide Summit and Blueprint – *Laura Mosqueda, MD, University of California, Irvine*

2009 Elder Abuse Symposium – *Erin Martinelli, California District Attorneys Association*

Financial Abuse Specialist Team (FAST) – *Jeanne West, Central Coast Commission for Senior Citizens*

2010 Elder Abuse Symposium – *Erin Martinelli, California District Attorneys Association*

21st Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

2011

San Diego HOPE Team Elder Abuse and Neglect Forensic Center – *Paul Greenwood, LL.B., San Diego County District Attorney's Office*

San Francisco Elder Abuse Forensic Center Continuation Project – *Erika Falk, PsyD, Institute on Aging*

Center of Excellence in Elder Abuse and Neglect & Convening and Technical Assistance Laura Mosqueda, MD, University of California, Irvine

Los Angeles County Elder Abuse Forensic Center – *Diana Homeier, MD, University of Southern California*

Continuation of the Santa Barbara Financial Abuse Specialist Team – *Joy Ellen Lippman, Central Coast Commission for Senior Citizens*

Elder Justice Assessment Team – *Janet Morris, JD, Bet Tzedek Legal Services*

Eliciting Change in At-risk Elders (ECARE) – *Janet Anderson Yang, PhD, The Center for Aging Resources*

Adult Protective Services Preventative In-Home Partnership Project – *Linda Henderson, County of Ventura Human Services Agency*

Psychotherapy for Elder Abuse Survivors – *Grace Cheng Braun, WISE and Healthy Aging*

2013

23rd Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

Safe Options for Seniors Program – *Vincent Marquez, Human Options*

Adult Protective Services Distance Learning Development Project – *Jennifer Tucker-Tatlow, San Diego State University Research Foundation*

Elder Law Clinic – *Mike Stringer, Chapman University School of Law*

Institute of Medicine Workshop: Elder Abuse and its Prevention – *Linda Kilroy, National Academy of Sciences*

Statewide Elder Justice Summit – *Sandra Fitzpatrick, California Commission on Aging*
Project to End Family Violence in Later Life – *Karen Stine, Laura's House*

25th Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

2014

24th Annual National Adult Protective Services Association Conference – *Kathleen Quinn, National Adult Protective Services Association*

The National Elder Mistreatment Study: Outcomes – *Ron Acierno, PhD, The Medical University of South California*

When the Going Gets Tough: Educating Caregivers to Prevent Elder Abuse – *Linda Bakabak, Ms. Mary Twomey, MSW, University of California, Irvine and University of Southern California*

Safe Options for Seniors – *Judith Rose, Human Options*

National Forum on Elder Justice at the 2014 American Society on Aging Annual Meeting
Carole Anderson, American Society on Aging

APS Distance Learning Development Project – *Jennifer Tucker-Tatlow, San Diego State University Research Foundation*

Project to End Family Violence in Later Life – *Margaret Bayston, Laura's House*

National Elder Abuse Training Initiative – *Linda Bakabak, University of Southern California*

2015

Forum on Global Violence Prevention: Elder Abuse Discussion Papers – *Kimberly Scott, National Academy of Sciences*

National APS Training Certificate Program – *Andrew Capehart, National Adult Protective Services Association*

Addition of a Service Advocate to the Los Angeles County Elder Abuse Forensic Center – *Nicole Diaz-Ordaz, University of Southern California*

Senior Safe House – *Christine Holdregger, Volunteers of America Northern California & Northern Nevada*

Continued Support of the Alona Cortese Elder Law Center – *Mike Stringer, Chapman University School of Law*

Safe Options for Seniors Program – *Judith Rose, Human Options*

Elder Abuse Project - Frameworks – *John Feather, PhD, Grantmakers in Aging, Inc.*

Improving California's Response to Elder Abuse, Neglect, and Exploitation: Blueprint Update – *Lisa Nerenberg, Community Partners*

Project to End Family Violence in Later Life – *Karen Stine, Laura's House*

2016

Family Violence Prevention Program and Consumer Protection (Seniors) – *Molora Vadnais, Legal Aid Foundation of Santa Barbara County*

2017

Adding a Service Advocate to the Los Angeles County Elder Abuse Forensic Center Team: Implementation and Evaluation – *Linda Bakabak, University of Southern California*

2018

ReFraming Elder Abuse Project – *Laura Mosqueda, MD, University of Southern California*

Appendix B: Archstone Legacy Report Interviewees

Ron Acierno, PhD, The Medical University of South Carolina

Georgia Anetzberger, PhD, ACSW, LISW, Case Western Reserve University

Bob Blancato, Elder Justice Coalition

Bonnie Brandl, MSW, National Clearing House on Abuse in Later Life

Risa Breckman, LCSW, New York City Elder Abuse Center

E. Thomas Brewer, MBA, MPH, MSW, The Ralph M. Parsons Foundation

Marie-Therese Connolly, JD

Molly Davies, MSW, WISE and Healthy Aging

Lori Delagrammatikas, MSW, NAPSA

Rami Djal, JD, San Diego Anchor Team Supervisor

Carmel Dyer, MD, University of Texas

Kurt Eggert, JD, Fowler School of Law, Chapman University

Terry Fulmer, PhD, RN, FAAN The John A. Hartford Foundation

Zach Gassoumis, PhD, University of Southern California

Paul Greenwood, LLB, Retired San Diego County District Attorney

Lisa Gibbs, MD, Orange County Elder Abuse Forensic Center

Melanie Gironda, PhD, MSW, WISE and Healthy Aging

Kathy Greenlee, JD, Greenlee Global

Rebecca Guider, MSG, California Department of Aging

Talitha Guinn-Shaver, Department of Justice

Candace Heisler, JD, University of California, Hastings College of Law

Diana Homeier, MD, Los Angeles County Elder Abuse Forensic Center

Kim Hubbard, JD, Orange County Superior Court

Penny Jacopo, San Diego County, Adult Protective Services

Julie Kaufman, PhD, Retirement Research Foundation

Mary Ellen Kullman, MPH, Archstone Foundation

Christopher A. Langston, PhD, Archstone Foundation

Mark Lachs, MD, MPH, Weill Cornell Medical College

Rosemary Lewallen, MSG, CPG, Long Beach Elder Abuse Prevention Team

Betty Malks, MSW, County of Santa Clara, Social Services Agency
Theresa Marino, MPH, Long Beach Elder Abuse Prevention Team
Andy Mao, JD, Department of Justice
Lisa Melchior, PhD, The Measurement Group
Gail Mendez, JD, Former Hope Team Supervisor
Katie Midgley, MSCJ, The Plough Foundation
Janet Morris, JD
Laura Mosqueda, MD, University of Southern California
Lisa Nerenberg, California Elder Justice Coalition
Mary Odell, Former President, UniHealth Foundation
Mary O' Donnell, Retirement Research Foundation
Bonnie Olsen, PhD, University of Southern California
Carolyn Pickering, PhD, Michigan State University
Scott Pirello, JD, San Diego County Deputy District Attorney
Joseph F. Prevratil, JD, Archstone Foundation
Laura Rath, MSG, Archstone Foundation
Shawna Reeves, MSW, Institute on Aging
Terri Restelli-Deits, MSW, Solano Financial Abuse Specialist Team
Julia Rowan, MA, Ventura Financial Abuse Specialist Team
Julie Schoen, JD, National Center on Elder Abuse
Sandy Skahen, JD, Chapman University, Fowler School of Law
Mary Twomey, MSW, Administration for Community Living
Kate Wilber, PhD, University of Southern California
Jeanine Yonashiro-Cho, PhD, University of Southern California
Nancy Zweibel, PhD, Retirement Research Foundation

Appendix C: Archstone Foundation Interview Guide

Name: _____

Institution: _____

Project: _____

Interview Date: _____

QUESTIONS

1. Describe the most consequential way(s) Archstone Foundation has impacted the field of elder abuse?
2. In your experience, what quality or qualities distinguish Archstone Foundation as a funder in the field of elder abuse?
3. Other than funding, in what way or ways did Archstone contribute to the success of your project?
4. How did technical assistance provided by the Center of Excellence support the success and performance of your project?
5. The Elder Abuse and Neglect Initiative brought together researchers and practitioners in diverse fields. In what ways, if any, did the convenings impact your project's performance?
6. How have the connections forged through convenings informed your subsequent and current practice in the field?
7. Interagency collaboration and coordination underpinned most of the Elder Abuse and Neglect Initiative projects, through forensic centers, MDTs and other models. How important is this concept to successful intervention and have you perceived greater cohesion and understanding among the disparate disciplines in the field in the years following the Initiative?
8. Archstone retained the Measurement Group to provide timely, and sometimes real-time, feedback on the process and management of your project. How did the measures embedded in the quarterly reports impact your success?
9. How did the monthly meetings with Archstone, the Measurement Group, and the Center of Excellence affect your performance?

10. In what ways did Archstone nurture and mold the current generation of leaders in the field?
11. How important is cultural competence in providing appropriate person-centered intervention, and how did Archstone embrace this concept?
12. Research is critical to informed and improved practices. How has Archstone supported research ventures to move the field forward?
13. Did Archstone funding for your project enable you to leverage support from other private or public institutions? If so, what was the impact of the initial Archstone investment on your ability to leverage funds?
14. In what ways did Archstone encourage or facilitate the sustainability and/or replication of your concept and project?
15. Please identify the research, practice, projects, interventions, and/or innovations undertaken by you and/or others that have derived directly or indirectly from the Archstone-funded project in which you were involved.
16. Current trends in prevention and intervention posit the efficacy of person-centered care and case management. How has Archstone influenced these approaches?
17. Social support has been identified as a potential prevention and intervention. How important is this concept and, if you know, how has Archstone contributed to this development?
18. How has the field changed in the past 30 years?
19. What systemic improvements have you observed in the field over the past 30 years?
20. To what extent, if any, are those developments attributable to Archstone funding?
21. What has Archstone contributed to statewide, national, and international elder abuse policy and practice?
22. In what ways did Archstone remediate or bridge gaps in the field?
23. In developing the Elder Abuse and Neglect Initiative, Archstone set out to improve the quality of life and coordination of services for abused older adults. Have they achieved that objective and, if so, how?
24. Going forward, what are the most pressing issues for practitioners and researchers in the field of elder abuse?

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Archstone Foundation and the Department of Family Medicine at the Keck School of Medicine of USC would like to thank the people and projects that made this work and report possible.

