



Governor's Commission
to Prevent Intimate Partner
and Gender-Based Violence

Governor's Commission to Prevent Intimate Partner and Gender Based Violence
November 14, 2023, 10:00 AM
Arizona Prosecuting Attorneys' Advisory Council (APAAC)
3838 N. Central Ave, Phoenix, AZ 85012

A general meeting of the Governor's Commission to Prevent Intimate Partner and Gender-Based Violence convened on November 14, 2023, notice duly given.

Members Present (9)	Members Absent (6)
Elizabeth Ortiz, Co-Chair	Jon Eliason
Kirstin Flores	Patricia Klahr
Mary Egesa, Proxy for Sheila Sjolander	Kay Radwanski
Jenna Panas	Nicole Bidwell
Ed-Mercurio-Sakwa	Eve Scarff
Neil Websdale	Beth Hoel
Jon Smith	
Muna Haddad, Proxy for Tene Marion	
Richard Jessup	
Staff and Guests Present (4)	
Emily Uline-Olmstead, Staff	Leslie Cooper, Presenter
Sandra Mucino, Staff	
Amy Peep, Staff	

Call to Order

- **Elizabeth Ortiz, Co-Chair**, called the Governor's Commission to Prevent Intimate Partner and Gender-Based Violence meeting to order at **10:06 AM** with **nine** members and **four** staff/guests present.

Welcome/Introductions

- **Elizabeth Ortiz, Co-Chair**, welcomed everyone and conducted a roll call, stating **Kate Brophy McGee, Co-Chair**, has submitted her resignation.

Approval of Minutes

- **Elizabeth Ortiz, Co-Chair**, stated that a quorum had not been reached and approval of meeting minutes from May 9 and August 15, 2023, will move to the March 2024 meeting.

Intimate Partner Violence and Neurocognitive Disorders

- **Elizabeth Ortiz, Co-Chair**, introduced **Amanda Kraker**, the Assistance Program Manager of Intimate Partner Violence at the Arizona Department of Veterans' Services.
 - **Amanda Kraker** coordinates annual awareness month programming, participates in more than 15 outreach events annually, and provides over 20 annual trainings to local and national staff, as well as community stakeholders, on the topics of Intimate Partner Violence (IPV), Military Sexual Trauma, post-traumatic stress disorder (PTSD), trauma-informed care, and provider burnout. She is passionate about advocacy and ensuring inclusive and safe treatment environments for clients and staff. She chairs various committees that work to implement trauma-informed care and harassment prevention interventions within organizations and programs. Before this role, **Amanda Kraker** was the Military Sexual Trauma Clinic Coordinator within the PTSD Clinical Team.
- **Amanda Kraker** thanked the Commission for having her and began her presentation by explaining what a neurocognitive disorder is, the types of neurocognitive disorders and brain domains affected, and provided statistics to support how common it is.
- **Amanda Kraker** explained the most notable changes in specific brain domains affected by dementia:
 - Language: expressive and receptive language are difficult to grasp. Understanding concepts in conversation becomes increasingly challenging, and people may experience trouble verbalizing their thoughts.
 - Learning and Memory: there is an overlap in anxiety disorders affecting dementia patients due to the cognitive decline of understanding their surroundings and the brain attempting to gather information to keep them safe. Their brain consistently lives in a crisis state and uses all body energy to retain this information. In an average anxious episode, information and memory will return to one. However, the cognitive decline in dementia patients affects their retention and does not allow information to return.
- **Amanda Kraker** displayed pictures of a healthy brain and one affected by Alzheimer's, stating the best way to help a caretaker conceptualize the effects of the disease is by showing these photos.
 - Neurodegeneration is visible in the shriveled cortex, the brain area responsible for thinking, planning, and remembering; therefore, none of the patient's positive or negative reactions are intentional and understood from this perspective.
- **Amanda Kraker** continued her discussion of the intersectionality between IPV and the role of neurocognitive diseases by reviewing the definition and statistics of IPV.
- **Amanda Kraker** illustrated the impacts of IPV by sharing her previous clients' stories, explaining the importance of teaching survivors what coercion is and how they have been a victim of it.
- **Amanda Kraker** explained that IPV is becoming more prevalent as elderly caretakers become younger, noting that 1 in 10 elderly adults report abuse, revealing a lack of screening for IPV from medical practitioners as there is an assumption that any cognitive decline or physical injury may result from another health condition.
 - The most common IPV injuries in elders are head and neck, with arms and trucks following close behind.
 - Older patients report feeling dismissed/unheard by medical staff.

- Among older adults, IPV risk factors include social isolation, loneliness, and functional impairment; a primary protective factor is having strong personal relationships.
- **Amanda Kraker** spoke on the barriers for older adults to disclose IPV, explaining these are often a result of older adults experiencing abuse to the degree of questioning their choices:
 - Confidentiality
 - Financial Stability
 - Shame
 - Fear of Retaliation
 - A disability that impacts the ability to report/verbalize the events
 - Cultural/Spiritual differences
 - Housing
 - Community Reputation
 - [Arizona Department of Child Safety \(DCS\)](#) or [Adult Protective Services \(APS\)](#) involvement
- **Amanda Kraker** stated caregivers might also feel discouraged from exiting IPV relationships due to formally established caregiving responsibilities by the court, explaining while designed to protect elders from abuse, they can create a problematic situation for the caregiver to surrender their responsibility.
 - If a caregiver exits the relationship, they run the risk of being charged with abandonment or domestic violence if the negligence was deemed "intentional" per A.R.S [46-455](#), [46-451](#), and [13-3601](#).
 - Caregivers who do engage in IPV behaviors may be a result of IPV experienced by the dementia patient before the diagnosis, explaining why it is essential to understand when the IPV began.
- **Amanda Kraker** stated dementia-related behaviors can be physical, psychological, and sexual, more often occurring in activities of daily living (ADL) or another close contact.
 - She explained behaviors tend to stem from stress, recommending the best way to navigate these is by asking oneself, "What would I do with a child?" The most appropriate way to engage with an individual with dementia is by offering a puzzle or healthy stimulation.
 - Individuals with dementia may have selected preferred caretakers for different tasks, such as eating or bathing.
 - She emphasized contacting the [Alzheimer's Association](#) to build a safety plan.
- **Amanda Kraker** concluded her presentation with resources from the [Arizona Department of Veterans Affairs](#).
- **Elizabeth Ortiz, Co-Chair**, thanked **Amanda Kraker** for the presentation and asked members if they had any questions.
- **Muna Haddad, proxy for Tene Marion**, commented on the excellent presentation, relaying a personal story about her mother's dementia.
- **Elizabeth Ortiz, Co-Chair**, asked if any other commissioner had any more questions.
- **Neil Websdale** thanked **Amanda Kraker** for her presentation. He asked if her office or operation guided him on how to manage dementia patients with a view on how to deflect or de-escalate situations. As a follow-up question, **Neil Websdale** asked if **Amanda Kraker** has concerns about the overmedication for people with dementia to manage the disease.

- **Amanda Kraker** responded by thanking **Neil Websdale** for his questions. She stated that her office has a coaching program through medical providers to help with behavioral interventions. They also try to connect them to agencies that will help them receive tailored services for the safety of those people who have dementia. To address **Neil Websdale's** second question, **Amanda Kraker** continued by stating that she is on the IPV team and, therefore, has not had reports of overmedication; however, it is likely a valid concern.
- **Elizabeth Ortiz, Co-Chair**, thanked **Amanda Kraker** again for the information and resources.
- To view **Amanda Kraker's** presentation, [click here](#).

Addressing Abuse and Neglect in Older Adults

- **Elizabeth Ortiz, Co-Chair**, introduced **Alice Ghareib** and **Cyndi Patterson** from the [Area Agency on Aging - Region One, DOVES Program](#).
 - **Alice Ghareib** is the DOVES Community Program Manager at the Area Agency on Aging. A graduate of the Social Work Program at Arizona State University, Alice has worked in the domestic violence field for more than 25 years, serving older victims of abuse.
 - **Cyndi Patterson** is the DOVES Domestic Violence Program Director at the Area Agency on Aging. After graduating from the Behavioral Health and Science Program at the University of Arizona, Cyndi continued her studies at Northern Arizona University with a focus on counseling. She has worked in the Social Service Arena for over 30 years.
- **Alice Ghareib** began by commending **Amanda Kraker** for her presentation before discussing the DOVES Domestic Violence program, the only program of its kind nationwide, noting recognition from the [National Center for Assisted Living \(NCAL\)](#) as a comprehensive service for older adults aged 50 and older experiencing IPV.
 - Several avenues exist to serve older adults within Area Agency on Aging - Region One, but after surveying shelters, results conveyed implementation of strategies that meet the needs of older individuals but did not have the capacity for additional programs in shelters.
 - This led to developing a program tailored for older adults around transitional housing.
- **Alice Ghareib** explained Mobile Advocacy is one of the many services the organization offers to help victims still living in the community.
 - Some victims decide not to leave their abuser, but the mission of this program is to provide a safety plan.
 - If they plan on leaving or have already left their housing and require additional support services, they have transitional housing to assist.
 - Ultimately, the most important thing is safety planning. After establishing a plan, they discuss goal setting and accomplishments with the victim; the organization provides support regarding relocating states.
- **Alice Ghareib** introduced their organization's four virtual community support groups.
 - Initially, they had accessibility concerns about their older participants being unable to navigate Zoom; however, they discovered that this was a favorable change that was more accessible because it did not require traveling to a facility.

- The community support groups teach older IPV survivors about the dynamics of domestic violence and resources available, encouraging networking with fellow survivors; many participants have developed friendships beyond the programming, which help them feel supported even after receiving services from the organization.
- Another branch of the community support groups provides outreach. Before COVID-19, advocates visited assisted living facilities, hospitals, and other community-based locations where older adults frequent. While the organization works to revamp this part of its services slowly, it provides 1:1 counseling through its [ElderVention](#) program.
- **Alice Ghareib** continued by discussing their transitional housing program.
 - Before the Area Agency on Aging, transitional housing for elderly victims of domestic abuse was unheard of in the nation.
 - With donations from the [City of Phoenix](#) (approximately \$1 million) and the [Arizona Department of Housing](#) (approximately \$342,000), the organization purchased and remodeled housing complexes serving 197 individuals since opening.
 - Transitional housing is a six-month program (can be extended to 2 years) to help the individual before self-sufficiency.
- **Alice Ghareib** explains that to help an elder abuse victim, listening and believing them is vital. Many victims do not come forth about their situation for fear of others knowing; therefore, confidentiality is a significant factor in helping victims. Regardless of what a victim chooses, the Area Agency on Aging wants to ensure that individuals always have a safety plan, such as keeping a walker by their side, a backpack with essentials and medication, or even guaranteeing an escape is available in any room. Alice Ghareib emphasizes that any plan that ensures elders stay mobile and able to leave is good.
- **Elizabeth Ortiz, Co-Chair**, thanked **Alice Ghareib** and **Cyndi Patterson** for the presentation and asked members if they had any questions.
- **Muna Haddad, proxy for Tene Marion**, stated seeing many IPV cases in older couples as a caseworker.
- **Elizabeth Ortiz, Co-Chair**, invited presenters to participate in the [APAAC Across Arizona](#) podcast to share information on DOVES with a broader audience.
- To view **Alice Ghareib** and **Cyndi Patterson's** presentation, [click here](#).

The Role of the Arizona Attorney General's Office in Matters Related to Elder Abuse

- **Elizabeth Ortiz, Co-Chair**, introduced **Leslie Cooper**, Chief Counsel of the Civil Litigation Division of the Arizona Attorney General's Office (AGO).
 - The Civil Litigation Division includes the Consumer Protection and Advocacy Section, the Civil Rights Division, the Bankruptcy, Collections, and Enforcement Section, and the Tobacco Enforcement Unit.
 - The Consumer Protection and Advocacy Section has long protected older adults and vulnerable consumers from fraud and scams.
 - It recently added safeguarding vulnerable adults from abuse, neglect, and exploitation to its portfolio.
- **Leslie Cooper** began by stating one of the AGO's priorities is Elder Abuse.
 - Understanding the strains people go through to ensure their loved ones are safe and the elders worry about their care without causing their family financial stress.

- For this reason, the Attorney General's office ensures that the level of care in assisted living/nursing facilities operates at the level marketed to the public.
- **Leslie Cooper** explained that the AGO Criminal Division leads the efforts of the Adult Protective Services Act, placing civil liability on those who commit Medicare Fraud and Abuse, estimated at \$2.4 million.
 - Most of their focus is conducting extensive investigations on Medicare facilities and financial fraud, ensuring older adults in these facilities receive the care they deserve regardless of who is funding it; AGO will prosecute if there is abuse, adding there is a lawyer dedicated to such.
- **Leslie Cooper** asked **Kirstin Flores** to share what she does as the AGO's Executive Director for the Office of Victim Services since they collaborate in victim advocacy and support. **Kirstin Flores** shared she provides services to victims of these cases and connects them to the Arizona Health Care Cost Containment System (AHCCCS) for additional support as needed. **Leslie Cooper** thanked **Kirstin Flores** for her contributions, noting the great work in the criminal division.
- **Leslie Cooper** explained that the [Consumer Information and Complaint Unit \(CIC\)](#) upholds the [Consumer Fraud Act](#).
 - Recently, CIC has been working more effectively across government agencies such as the [APS](#) at DES, the [Arizona Department of Health Services \(ADHS\)](#), and other agencies as they develop the work to prevent elder abuse fraud.
- **Leslie Cooper** discussed the Consumer Litigation Unit (CLU) dedicated to cases of false advertisement and incongruent representation of products or services targeting older adults.
 - The main issue the CLU attempts to resolve within older adult living facilities is systemic ignorance; when staff switch shifts, there should be documentation and notes on the tenants. They have begun asking facilities to take specific steps for any victims of elder abuse or fraud.
 - Emphasized the CLU can request monitors and look at all records to ensure they cooperate with the law. Should abuse be identified, they will place those facilities into receivership with drastic remedies reserved for severe misconduct or fraud.
 - To better examine these cases, the AGO hired a special agent from Chicago to reorient information and research to help locate instances and a lawyer with expertise in prosecuting these cases.
- **Leslie Cooper** explained that the additional resources relay Arizona's dedication to the Consumer Fraud Act that makes it illegal to depict services to people falsely.
 - The civil cases under the Adult Protective Act require a depth of research due to the ownership hiding under multiple layers of corporations; therefore, identifying systemic failures in individual cases helps improve processes.
 - The CIC answers 15,000 calls a year and preserves \$5 million for those who have been victims of scams and fraud. A majority of the calls received come from older adults.
- **Leslie Cooper** stated the AGO reinvigorating the [Task Force Against Senior Abuse \(TASA\)](#) with two divisions under it:
 - Law Enforcement led by Jim Hennelly
 - Perform case reviews and discussions
 - Process elder abuse reports
 - Community Outreach led by Sophia Braham and Courtney Bennett

- Host quarterly community meetings
- Support law enforcement division
- **Elizabeth Ortiz, Co-Chair**, commented on her delight on the reinvigoration of TASA and asked members if they had any questions.
- **Neil Websdale** asked if there are any concerns regarding the extent of the theft and fraud, along with undetected homicides of older adults, explaining there has been research showing several homicides that are undetected due to the misidentified autopsy results.
 - **Leslie Cooper** responded the AGO has discussed these challenges, especially when the victim is unable to narrate any abuse before their death. Furthermore, the case research will bring more instances to light and ensure better prosecution.
- **Elizabeth Ortiz, Co-Chair**, added that APAAC's Vulnerable Adult Abuse Investigation and Prosecution Conference will be held on Friday, November 17, 2023, focusing on effective communication and interviewing individuals with various disabilities.
- To view **Leslie Cooper's** presentation, [click here](#).

Upcoming Meetings

- **Elizabeth Ortiz, Co-Chair**, provided meeting dates for 2024:
 - March 5
 - May 21
 - August 27
 - November 12

Adjourn

- **Elizabeth Ortiz, Co-Chair**, called for adjournment.
 - **Kirstin Flores** motioned to adjourn.
 - **Mary Egesa, Proxy for Sheila Sjolander**, seconded the motion.
- The motion was approved unanimously, and the meeting adjourned at **11:50 AM**.

Dated November 15, 2023

Governor's Commission to Prevent Intimate Partner and Gender-Based Violence
Respectfully Submitted By:
Sandra M Mucino
Program Administrator