

Helping Elderly Victims of Crime*

Estelle Reingold

Project Director, Shorefront Service Center, Jewish Association for Services for the Aged, New York †

A community-based crime victim program acts as a catalyst in mobilizing greater community awareness of itself, its strengths and vulnerabilities and brings with it the very real potential for making what was a conglomeration of streets, people and services, a true community of interested, caring citizens.

Social service agencies in New York City, like those in all other large cities, have always been attuned to the traumata, financial and emotional, suffered by innocent victims of crime. The Jewish Association for the Services for the Aged has been particularly sensitive to the havoc wreaked on the frail aged whose special vulnerabilities are well known. Elderly victims of crime have been helped by a variety of supports since the agency was founded approximately twelve years ago. Through the years as JASA expanded to meet the needs of the increasingly large population of persons 60 and older, so too have the outreach, advocacy and casework skills of workers become more finely honed better to reduce the impact of insensate violence directed against the most helpless of our urban population.

If one considers that a large number of Jewish aged are survivors of the Holocaust or escapees from vicious anti-Semitism in Russia, people who have struggled with profound issues of helplessness and victimization and loss of health, self-confidence and general well-being, it follows that this target population is particularly vulnerable to further attacks on already fragile feelings of safety. When this kind of lossridden person becomes a victim of crime he often feels a paradoxical "proof" that he "deserves" his punishment. After all, he had "survived."

* Presented at the Annual Meeting of the Conference of Jewish Communal Service, Kiamesha Lake, New York, June 1, 1981.

† Mrs. Reingold has recently joined the staff of Altro Rehabilitation Service.

Because JASA already had a good "track record," when the Elderly Crime Victims' Assistance Program was established by the New York City Department for the Aging in 1979, JASA was among the first of the agencies to receive a grant which would supplement our relief funds which are allocated by Federation of Jewish Philanthropies and The New York Times annual appeal to the giving public as well as to promote better coordination of effort and resources between the Department for the Aging, JASA, the police and the community at large. JASA's Shorefront area's grant, the highest allotted, is \$2,500.

JASA's Shorefront catchment encompasses the south Brooklyn communities of Coney Island, Brighton Beach and Sheepshead Bay, an area whose proportion of aged is second only to that of Miami Beach (30% versus 50%) and hence, has an extremely high percentage of "at risk" crime victims. It is, in fact, one of the highest crime rate districts in the country.

Elderly crime victims come to JASA's attention in a variety of ways, but to be eligible for the formal supports provided by the Crime Victims' Assistance Program, referrals must be accompanied by a police complaint number (known as the 61 number). Every week a list of elderly crime victims is assembled by each of the two police precincts covering the Shorefront area and one of our community aides is dispatched to the 60th and 61st precincts to collect the lists.

Information on the list includes name, address, telephone number, age, date of crime, type of crime committed and the

police complaint number. A letter is then mailed to each person, inviting the victim to call the JASA social worker whose signature is affixed and a summary of the types of services available is included in the letter. Many aged persons do not respond to this initial contact and when the crime is particularly traumatic the social worker follows up the letter with a phone call.

A home visit is made to each responsive crime victim when an assessment determines which service may be appropriate. *All* victims receive counseling in which the ventilation of feelings of helplessness, rage and depression is encouraged. Many concrete types of assistance are provided such as aid in replacement of stolen entitlement cards, installation of window gates, door locks and window panes and transportation with escort to doctors and suppliers of prosthetics. More frequently than one might imagine, eyeglasses, hearing aids and dentures are among the items contained in stolen pocketbooks! When cash has been stolen, unpaid bills may be paid directly to utility companies. The maximum allocation per client is \$75 but we are flexible and can extend more in an emergency. Funds for food, clothing or temporary shelter are made available by special arrangement with the American Red Cross. In order to expedite funds we provide money immediately from agency office petty cash and are then reimbursed with a check by mail from the Red Cross.

In those instances when elderly persons have sustained personal physical injury, awards may be granted by the Crime Victims Compensation Board with whom we work closely. The Board has a special unit for the elderly and when alerted by the police or JASA provides payment of medical expenses and home care during recuperation. In the interim, while the Board processes referrals, JASA provides an agency home attendant to help with household chores as well as Meals on Wheels and shopping service.

In addition to *ex post facto* services, JASA is an active community sponsor of crime prevention programs. Regular meetings are scheduled in the two JASA housing complexes in Coney Island (Scheuer and Friendset) at which police representatives run workshops to disseminate hints on how the aged can protect themselves from potential crimes. We are particularly gratified that both crime prevention committees are chaired by former crime victims who initially had been traumatized to the point of frightened reclusiveness. Too, JASA was instrumental in establishing a pilot project whereby police escort in police vans is provided to elderly shoppers in Coney Island. As the *New York Times* noted on April 1, 1980, "... in Coney Island, where robberies climbed 25 percent last year and have continued to climb this year, a safe trip to the store can be a real feat for an older person."

The Shorefront area is particularly blessed with warm, caring police officers who work very cooperatively with agency staff and clients. That this is so is due in no small measure to the efforts of a very outgoing, seductive blue-eyed blonde case aide to whom I assigned the task of enlisting better police cooperation two years ago. The case aide's capacity for engaging the interest of even the most laid-back, lethargic policemen has truly been notable!

By way of demonstrating the importance of case management vested in the social worker assigned to the elderly crime victim, a few case examples follow. The management piece is particularly important to this target population because services to crime victims remain quite fragmented and there is little communication among the official agencies. The manager ensures linkages among the specific crime-oriented agencies as well as those agencies not specifically targeted to crime victims. A case in point is the situation requiring replacement of stolen documents, a feat which is something more

than a nightmare even to those of us under the age of 70. The number of phone calls and letters required to reach the particular city personnel who can help with replacement is truly mind-boggling. The energy and articulateness required are completely beyond the ability of most elderly crime victims, and even our younger, most committed social workers need extra "pick-me-up" supervisory meetings to prevent burn-out.

Case Examples

Mrs. S. is a 76 year-old widow whose husband was killed by unknown assailants five years after marriage leaving his widow with a small son. Mrs. S's apartment was ransacked in December, 1980 and over \$100 was stolen. Her dog had been drugged by the robbers who came in through her front door. The money had been withdrawn from the bank in order to buy special molded shoes for Mrs. S's severely arthritic feet. When the social worker visited, she learned that Mrs. S. had not received her food stamps for January and the client was edging towards panic at this point. Mrs. S's total monthly income was \$282.50 from Social Security and \$24 from V.A. Her rent was \$142.50 exclusive of utilities and she had no savings. She is hard of hearing, has a serious heart problem, a thyroid condition, hypertension and gets dizzy easily. The apartment was a mess because Mrs. S. gets dizzy if she bends and clothes are strewn everywhere. The social worker collected all documentation required for recertification for food stamps, arranged for payment of electric and telephone bills (to compensate for the \$100 set aside for special shoes, an item not covered officially by the crime victim program), helped Mrs. S. apply for Meals on Wheels. With receipt of Medicaid, Mrs. S. became eligible for daily home attendant services and on last follow up, was feeling better and was particularly grateful for the company and help provided by her home attendant.

Mr. M. is an 80 year-old widower whose only son has many problems of his own and is not available for help to his father. Mr. M.'s monthly income is \$168 from Social Security,

\$152 from SSI and \$70 worth of Food Stamps. He lives on the ground floor of a five family house in Sheepshead Bay and had been robbed three times in January and February, 1981. The landlord had installed a second lock after the first robbery, but the thieves were not deterred. On subsequent visits, the thieves entered through front windows and rear windows. Mr. M's bicycle, digital clock radio and trumpet were stolen along with \$180 put aside for rent. More important was the emotional trauma suffered by Mr. M. who became phobic, withdrawn and confused and knew only that he did not want to stay any longer in his easily accessible ground floor apartment. The social worker arranged for partial payment of Mr. M's rent, had gates installed on all windows and provided supportive counseling for three months until Mr. M. became sufficiently comfortable to rejoin his senior citizen club where he receives many peer and professional supports.

Mrs. K. is an 84 year-old childless widow who became known to us through an emergency referral from the 61st precinct. Mrs. K. had been shoved into her apartment where she was sexually assaulted (but not raped) and suffered a fractured jaw. As a result of this, Mrs. K. was extremely fearful and had blockaded herself in her apartment. The social worker could not gain entry on the first visit and returned with a representative from the police department and a representative from the Crime Victims Compensation Board. It took an hour to convince Mrs. K. that the visitors meant no harm and she should let them in. Mrs. K.'s neighborhood was so crime infested that the social worker felt relocation was imperative and arrangements were made to move Mrs. K. to a JASA residence in Coney Island where 24 hour security and social services exist. Mrs. K. has become an active member of the tenants council and is now chairperson of the crime prevention program of the building. At the social worker's request, the Crime Victims Compensation Board helped with moving expenses and the culture shock of moving from one neighborhood to another was mitigated by the intensive counseling provided by the social worker.

This is not an easy program to sponsor.

The statistical requirements are necessary but very time consuming. The clients are frequently either completely immobilized with fear or uncontrollably enraged and demanding. Social workers assigned to such a program need to be very skillful and psychologically knowledgeable, and supervisors need to be especially available for support. But the rewards are great. A

community-based crime victim program acts as a catalyst in mobilizing greater community awareness of itself, its strengths and vulnerabilities and brings with it the very real potential for making what was a conglomeration of streets, people and services a true community of interested, caring citizens.