

Elder Abuse in Oregon: Building Awareness and Encouraging Action Leader's Guide

Objectives: Participants will...

- define the types of elder abuse and list warning signs
- learn possible causes of elder abuse
- become familiar with community resources that address elder abuse
- explore ways to be proactive for themselves and in the community

Materials Needed for Leaders:

- Definitions
- Scenario activity cards
- Brochures from Office of the Long-Term Care Ombudsman: “Reaching Out for Quality Care” and “Volunteer Opportunities”

Materials Needed for Participants

- Participant handout (FCD06-05)
- Elder Abuse Evaluation (FCD06-06)

Introduction:

(directions for leaders are in italics)

Say: As our society's aging population has increased, so has the incidence of elder abuse. The personal losses associated with abuse can be devastating and include the loss of independence, homes, life savings, health, dignity, and security.

Elder Abuse is widespread: It is estimated that 4-6% of elders, about one to two million U.S. residents from all walks of life and all cultural backgrounds experience elder abuse each year. Experts estimate that as many as 1 in 5 elder abuse cases go unreported. Here in Oregon, over 9,000 cases of elder abuse and neglect were reported in 2004. According to the state office of Seniors and Persons with Disabilities, as of October 2005 there is funding for 95 Adult Protective Service Specialists in the state.

Risk Factors

Elder abuse is an extremely complex problem. Below are some possible factors that can contribute to elder abuse. Theories are still being developed as to why some people abuse or are abused.

- Caregiver stress
- Dependency or impairment of the older person
- External stress such as financial problems, job stress, etc.
- Social isolation
- Intergenerational transmission of violence
- Individual dynamics or personal problems of the abuser.

A **key concept** to understand is the effect an elder's **diminished capacity** can have on their vulnerability to abuse. They may act like they know what they're doing, but they may not actually understand what is being done to them or not done for them. When the ability to think things through, to discern what is going on, and to discriminate between what is appropriate and what is not appropriate is diminished, the elder may not be in a position to give informed consent. They may be passively accepting sexual abuse, for example, acting as if it's normal, yet on an emotional level, it makes a negative impact. Yet, they are unable to respond, unable to say "stop it" or "you can't treat me that way".

Types of Abuse

Refer to the Leader Guide on Definitions of Abuse. Review the Oregon definition briefly, then read each description of the types of abuse that follows. Page 1 of the member handout has abbreviated descriptions of the types. Encourage members to jot notes in the margins if, as you are reading the definitions, they hear other descriptions they hadn't thought about.

Possible Indicators

Review the section "Possible Indicators of Abuse, Neglect and Exploitation" that appears in the participant handout. Encourage discussion.

Activity: Matching Scenarios to the Types of Abuse

Distribute the Scenario cards to the members so they can work in pairs or groups of three. Instruct them to read the Scenario, then discuss it among themselves and determine which type or types of abuse are being illustrated, and what they could do in that situation. When they are finished, ask them to share their findings with the entire group, and allow discussion about each scenario.

Possible answers to the Scenario Matching Activity

Because elder abuse in its many forms can be difficult to identify, there is the possibility that many types of abuse are going on.

Scenario A: sexual or psychological/emotional or both

Scenario B: physical or psychological/emotional or both

Scenario C: psychological/emotional or physical (domestic violence) or both

Scenario D: self neglect

Scenario E: neglect or financial abuse/exploitation or both

Scenario F: psychological/emotional or financial abuse/exploitation or both

Review with participants:

Prevalent Types of Abuse Reported in Oregon

Of the community complaints (which do not include those in licensed care facilities) made in 2004, the largest percentages of abuse types were

- Self Neglect, 29%
- Financial Exploitation, 26%
- Neglect, 16%
- Other 9%
- Verbal Abuse 9%
- Physical Abuse 8%

Who are the Perpetrators?

According to DHS statistics for community complaints in 2004, the highest percentage of identified abusers, when that data was available, were

- the persons themselves (as in self neglect) 18%
- sons 10%
- acquaintances 10%
- daughters 9%
- other 9%
- non-relative caregiver 7%
- husbands 3%
- wives 2%

Barriers to Detection

Elder abuse is regarded as a complex health and social problem, and because of this complexity, it can be hard to detect. Some of the barriers to detection include:

- lack of awareness by the public and service providers, lack of training for providers.
- not all forms are equally recognizable. Neglect and emotional abuse are more difficult to detect, and sexual abuse may not even be considered as a possibility.
- signs of abuse may be subtle or confused with chronic illnesses or other problems.
- the victim may deny that elder abuse has occurred. Denial is especially likely if the perpetrator is a family member or caregiver.

Taking Action for Yourself and Others

Review the sections in the participant guide titled “Keeping yourself safe” and “Keeping others safe” Look up the local Adult Protective Services number and ask everyone to write it in their handout. Encourage discussion about additional ideas for action, or examples of what participants are already using.

Conclusion and Evaluation

*Say: Each of us can make a difference in our lives and in our communities by helping to spread the message about elder abuse and taking appropriate actions. What can **you** do after this meeting to help yourself or others avoid this societal problem?*

Hand out the evaluation and consent letter. Read the consent letter to the group, address any questions they may have, and say they may keep their copy for future reference. Read through the instructions for the evaluation so that everyone understands it, then allow time for completion and collect the evaluations. Send them to the appropriate local Extension Service FCD faculty member.

*And a sincere thank you to **you**, the lesson leaders for sharing this difficult but important topic with your study group!*

Resources used in this lesson:

“2004 Community Adult Protective Services Complaints Statewide”, DHS Seniors and People with Disabilities Office of Licensing and Quality of Care

The Abuse of Elderly People: A Handbook for Professionals, by Jackie Pritchard, 1992, Jessica Kingsley Publishers, London.

“Elder Abuse and Neglect” by Linda M. Woolf, Ph.D., Webster University
<http://www.webster.edu/~woolflm/abuse.html>

“Elder Abuse Identification and Referral: The Importance of Screening Tools and Referral Protocols” by Georgia J. Anetzberger, PhD, ACSW in Journal of Elder Abuse and Neglect, volume 13(2) 2001

Ending Elder Abuse – A Family Guide by Diane S. Sandell and Lois Hudson. 2000 QED Press, Fort Bragg, California

“Mid-Willamette Valley Senior Services Agency Family Caregiver Support Program” <http://www.nwsds.org/FCSP2%20for%20web%20page.pdf>

National Center on Elder Abuse web site www.elderabusecenter.org

National Committee for the Prevention of Elder Abuse web site
www.preventelderabuse.org

Oregon Department of Human Services, Seniors and People with Disabilities web site www.oregon.gov/DHS/spwpd/abuse

“Preventing and Responding to Senior Financial Abuse in Oregon” by Oregon Senior Financial Abuse Coalition

“Too Many Elder Abuse Cases Go Unreported”. Global Action on Aging
<http://www.globalaging.org/elderrights/us/2004/toomany.htm>

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Definitions of Abuse

Federal definitions of elder abuse, neglect, and exploitation appeared for the first time in the 1987 Amendments to the Older Americans Act. These definitions were provided in the law only as guidelines for identifying the problems and not for enforcement purposes. Currently, elder abuse is defined by state laws, and state definitions vary considerably from one jurisdiction to another in terms of what constitutes the abuse, neglect, or exploitation of older adults.

State of Oregon definition: (on July 29, 2005, Governor Ted Kulongoski signed Senate Bill 106, which amended the definition of elder abuse.)

(1) 'Abuse' means one or more of the following:

- (a) Any physical injury caused by other than accidental means, or that appears to be at variance with the explanation given of the injury.
- (b) Neglect that leads to physical harm through withholding of services necessary to maintain health and well-being.
- (c) Abandonment, including desertion or willful forsaking of an elderly person or a person with disabilities or the withdrawal or neglect of duties and obligations owed an elderly person or a person with disabilities by a caregiver or other person.
- (d) Willful infliction of physical pain or injury.
- (e) Use of derogatory or inappropriate names, phrases or profanity, ridicule, harassment, coercion, threats, cursing, intimidation or inappropriate sexual comments or conduct of such a nature as to threaten significant physical or emotional harm to the elderly person or person with disabilities.
- (f) Causing any sweepstakes promotion to be mailed to an elderly person or a person with disabilities who had received sweepstakes promotional material in the United States mail, spent more than \$500 in the preceding year on any sweepstakes promotions, or any combination of sweepstakes promotions from the same service, regardless of the identities of the originators of the sweepstakes promotion and

who represented to the court that the person felt the need for the court's assistance to prevent the person from incurring further expense.

(added) (g) Wrongfully taking or appropriating money or property, or knowingly subjecting an elderly person or person with disabilities to alarm by conveying a threat to wrongfully take or appropriate money or property, which threat reasonably would be expected to cause the elderly person or person with disabilities to believe that the threat will be carried out.

(h) Sexual contact with a nonconsenting elderly person or person with disabilities or with an elderly person or person with disabilities considered incapable of consenting to a sexual act as described in ORS 163.315. As used in this paragraph, 'sexual contact' has the meaning given that term in ORS 163.305.

Further Definitions

Domestic and institutional elder abuse may be further categorized as follows (adapted from the National Center on Elder Abuse) :

Physical abuse is defined as the use of physical force that may result in bodily injury, physical pain, or impairment. It may include, but is not limited to, such acts of violence as striking (with or without an object), hitting, beating, pushing, shoving, shaking, slapping, kicking, pinching, and burning. In addition, it may also include the inappropriate use of drugs and physical restraints, force-feeding, and physical punishment.

Sexual abuse is defined as non-consensual sexual contact of any kind with an elderly or disabled person or with any person incapable of giving consent. It includes but is not limited to unwanted touching, all types of sexual assault or battery, such as rape, sodomy, coerced nudity, and sexually explicit photographing.

Emotional or psychological abuse is defined as the infliction of anguish, pain, or distress through verbal or nonverbal acts. Emotional/psychological abuse includes but is not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment. In addition, treating an older person like an infant; isolating an elderly person from his/her family, friends, or regular activities; giving an older person the "silent treatment;" and enforced social isolation are examples of emotional/psychological abuse.

Neglect is defined as the refusal or failure to fulfill any part of a person's obligations or duties to an elder. Neglect may also include failure of a person who has fiduciary responsibilities to provide care for an elder (e.g., pay for necessary

home care services) or the failure on the part of an in-home service provider to provide necessary care. Neglect typically means the refusal or failure to provide an elderly person with such life necessities as food, water, clothing, shelter, personal hygiene, medicine, comfort, personal safety, and other essentials included in an implied or agreed-upon responsibility to an elder.

Self-neglect is the failure of the person themselves to provide their own care as outlined above.

Exploitation is defined as misusing the resources of an elderly or disabled person for personal or monetary benefit. This includes taking Social Security or SSI (Supplemental Security Income) checks, abusing a joint checking account, and taking property and other resources.

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Agriculture, 4-H Youth, Family & Community Development, Forestry, and Extension Sea Grant Programs. Oregon State University, United States Department of Agriculture, and Tillamook County cooperating. The Extension Service offers its programs and materials equally to all people.

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Scenarios to Match with Types of Abuse

A.

You are working part time as a home health aide and you come to Mrs. Adams' house to get her dressed every morning, and return to put her to bed at night. Mrs. Adams has dementia and lives with her 38-year-old son. One Sunday morning you arrive to find her sitting huddled in the corner of her room sobbing and uncommunicative. The following two Sundays the same thing happens, but during the weekdays she appears to be okay.

B.

You have known Lydia for quite some time and when you see her by herself she is always quite talkative and welcomes your support. However, on the few occasions you have seen Lydia with her daughter, who lives around the corner and is her primary caregiver, Lydia is a different person. She is totally withdrawn and flinches if her daughter comes near her. When you have talked to Lydia about this she denies that she is frightened of her daughter.

C.

Helen regularly attends the lunch program at the senior center. She is rather quiet and after eating usually sits near the hall entrance, watching TV until the bus arrives for the return trip home. She told the driver she cannot miss the bus or be late, as she needs to cook for George, her husband of forty years. One day Helen did not board the bus, stating she was not going home. You are the senior center coordinator and encourage her to get on the bus, but again she refuses, and seems upset and anxious. You have noticed that Helen always wears a sweater, even in warm summer weather.

D.

Your cousin David, age 85, totally blind from childhood, has always lived alone and independently. He is mentally alert and adamant about not making any change in his living arrangements. Since he cannot see, he does not like strangers coming into his apartment to clean, cook, or provide other services. When you visit, the apartment not only smells of urine, but it is infested with ants and cockroaches. His refrigerator is full of spoiled food, which he doesn't hesitate to consume. The apartment is cluttered with piles of Braille books, soiled laundry, and supplies from his hobbies.

E.

Ellen, age 92, is a former member of your study group and lives in her own home. She had her family move in to care for her, rather than go into a nursing home. Her daughter and son-in-law work during the day and her 20-year-old granddaughter is responsible for providing her personal care, meals and house maintenance. When you and another member of your group pay a visit, you notice that the house has old furniture, rags, piles of paper, clothes, baby food, toys, and diapers scattered all over the house. It is nearly noon and when you arrive Ellen is still sitting on her bed, with her urine-soaked nightgown on. When you ask Ellen if she has had breakfast, she says she had some cookies and a candy bar that were near the bed. She tells you she hasn't had her medicine for three days and says she has no money to pay for it, because she has to turn over her Social Security check to her daughter.

F.

*You are 95 years old. Your adult children are telling you that you're getting sick, and you're going to die soon, so they want you to give them their portion of the inheritance now, rather than when you die. They tell you that if you don't listen to reason, they'll put you in a nursing home, and you won't be able to see your great-grandchildren as much anymore. The fact that you don't listen to reason is **proof** that your dementia is worse than you realize.*

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