Module 2
What Is Elder Abuse?

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Module 2
WHAT IS ELDER ABUSE?

Presenter Biography

Lori A. Stiegel, J.D., of the American Bar Association Commission on Law and Aging in Washington, D.C., directs the Commission's elder abuse activities and is a partner in the National Center on Elder Abuse. She was a subcontractor to APPA for the development of its curriculum on elder abuse and is the author or co-author of numerous other books, manuals, curricula, and articles including: Elder Abuse Detection and Intervention: A Collaborative Approach (Springer, 2007). Lori was a member of the National Research Council Study Panel on the Risk and Prevalence of Elder Abuse and currently serves on the editorial boards of the Journal of Elder Abuse and Neglect and Victimization of the Elderly and Disabled.
Polling Questions

1. Which one of these best describes your job?
   - [ ] Direct supervision of offenders
   - [ ] Supervision of other officers
   - [ ] Administration of the agency
   - [ ] Work with victims
   - [ ] Something else

2. Which type of community corrections work do you do most of the time?
   - [ ] Probation
   - [ ] Parole
   - [ ] Probation and Parole
   - [ ] Community-based programs
   - [ ] Something else in community corrections
   - [ ] I don’t work in community corrections
Module Goal and Objectives

- **Goal**
  Promote understanding of the types of elder abuse and acquire information about elder abuse statutes and reporting requirements

- **Objectives**
  1. List categories of elder abuse
  2. Distinguish between domestic and institutional elder abuse
  3. Recognize indicators of elder abuse.
  4. Describe responsibilities for reporting elder abuse

Definitions

- **Elder Abuse**: Criminal and noncriminal abuse, neglect, and exploitation of persons aged 60+.
- **Community Corrections**: Community supervision of defendants/offenders under the jurisdiction of a court or releasing authority (pretrial, probation, parole).
- **Adult Protective Services**: Services provided to older people and people with disabilities who are in danger of being abused, neglected, or exploited and are unable to protect themselves.

Elder Abuse Awareness Quiz

1. Physical Abuse is the most prevalent form of reported elder abuse.
   - □ True
   - □ False

2. Financial exploitation is frequently linked with other types of abuse.
   - □ True
   - □ False

3. Sexual assault does not occur to the elderly, it only happens to the young.
   - □ True
   - □ False
Categories of Elder Abuse
- Physical abuse
- Sexual abuse
- Emotional abuse
- Financial/material exploitation
- Neglect
- Abandonment
- Self-neglect

National Center on Elder Abuse

http://www.elderabusecenter.org/default.cfm

State Statutes and Types of Elder Abuse


Elder Abuse Awareness Quiz

4. Most abuse of the elderly is done by their spouse or adult children.
   - [ ] True
   - [ ] False

5. Elderly Medicaid clients are more frequently reported as victims because elder abuse happens more often in poor families.
   - [ ] True
   - [ ] False
Module 2: What Is Elder Abuse?

Where Does Elder Abuse Occur?

- Domestic Abuse
- Institutional Abuse

Who Commits Elder Abuse?

- Relative of the older person
- Intimate partner
- Caregiver
- Friend or neighbor
- Fiduciary or other trusted individual

Risk Factors for Elder Abuse

- Dependency of abuser or older person
- Mental Health Problems of abuser
- Older person’s frailty, disability, or impairment
- Social isolation of older person
- History of substance abuse or mental health problems
- History of elder abuse by a caregiver
- History of family violence
Indicators of Elder Abuse
- Physical Abuse
- Sexual Abuse
- Emotional or Psychological Abuse

Indicators of Elder Abuse
- Neglect
- Self-Neglect

Indicators of Elder Abuse
- Abandonment
- Financial or Material Exploitation
TYPES AND INDICATORS OF ELDER ABUSE

Physical Abuse

Physical abuse is defined as the use of physical force that may result in bodily injury, physical pain, or impairment. Physical abuse 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, inappropriate use of drugs and physical restraints, force-feeding, and physical punishment of any kind also are examples of physical abuse.

Signs and symptoms of physical abuse include but are not limited to:

- bruises, black eyes, welts, lacerations, and rope marks;
- bone fractures, broken bones, and skull fractures;
- open wounds, cuts, punctures, untreated injuries in various stages of healing;
- sprains, dislocations, and internal injuries/bleeding;
- broken eyeglasses/frames, physical signs of being subjected to punishment, and signs of being restrained;
- laboratory findings of medication overdose or under utilization of prescribed drugs;
- an elder's report of being hit, slapped, kicked, or mistreated;
- an elder's sudden change in behavior; and
- the caregiver's refusal to allow visitors to see an elder alone.

Sexual Abuse

Sexual abuse is defined as non-consensual sexual contact of any kind with an elderly person. Sexual contact with any person incapable of giving consent is also considered sexual abuse. 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.

Signs and symptoms of sexual abuse include but are not limited to:

- bruises around the breasts or genital area;
- unexplained venereal disease or genital infections;
- unexplained vaginal or anal bleeding;
- torn, stained, or bloody underclothing; and
- an elder's report of being sexually assaulted or raped.

Emotional or Psychological Abuse

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.

Signs and symptoms of emotional/psychological abuse include but are not limited to:

- being emotionally upset or agitated;
- being extremely withdrawn and non-communicative or non-responsive;
unusual behavior usually attributed to dementia (e.g., sucking, biting, rocking); and
an elder's report of being verbally or emotionally mistreated.

**Neglect**

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.

Signs and symptoms of neglect include but are not limited to:

- dehydration, malnutrition, untreated bed sores, and poor personal hygiene;
- unattended or untreated health problems;
- hazardous or unsafe living condition/arrangements (e.g., improper wiring, no heat, no running water);
- unsanitary and unclean living conditions (e.g. dirt, fleas, lice on person, soiled bedding, fecal/urine smell, inadequate clothing); and
- an elder's report of being mistreated.

**Abandonment**

Abandonment is defined as the desertion of an elderly person by an individual who has assumed responsibility for providing care for an elder, or by a person with physical custody of an elder.

Signs and symptoms of abandonment include but are not limited to:

- the desertion of an elder at a hospital, a nursing facility, or other similar institution;
- the desertion of an elder at a shopping center or other public location; and
- an elder's own report of being abandoned.

**Financial or Material Exploitation**

Financial or material exploitation is defined as the illegal or improper use of an elder's funds, property, or assets. Examples include but are not limited to cashing an elderly person's checks without authorization or permission; forging an older person's signature; misusing or stealing an older person's money or possessions; coercing or deceiving an older person into signing any document (e.g., contracts or will); and the improper use of conservatorship, guardianship, or power of attorney.

Signs and symptoms of financial or material exploitation include but are not limited to:

- sudden changes in bank account or banking practice, including an unexplained withdrawal of large sums of money by a person accompanying the elder;
- the inclusion of additional names on an elder's bank signature card;
- unauthorized withdrawal of the elder's funds using the elder's ATM card;
- abrupt changes in a will or other financial documents;
- unexplained disappearance of funds or valuable possessions;
substandard care being provided or bills not being paid despite the availability of adequate financial resources;
- discovery of an elder's signature being forged for financial transactions or for the titles of his/her possessions;
- sudden appearance of previously uninvolved relatives claiming their rights to an elder's affairs and possessions;
- unexplained sudden transfer of assets to a family member or someone outside the family;
- the provision of services that are not necessary; and
- an elder's report of financial exploitation.

Self-neglect

Self-neglect is characterized as the behavior of an elderly person that threatens his/her own health or safety. Self-neglect generally manifests itself in an older person as a refusal or failure to provide himself/herself with adequate food, water, clothing, shelter, personal hygiene, medication (when indicated), and safety precautions.

The definition of self-neglect excludes a situation in which a mentally competent older person, who understands the consequences of his/her decisions, makes a conscious and voluntary decision to engage in acts that threaten his/her health or safety as a matter of personal choice.

Signs and symptoms of self-neglect include but are not limited to:
- dehydration, malnutrition, untreated or improperly attended medical conditions, and poor personal hygiene;
- hazardous or unsafe living conditions/arrangements (e.g., improper wiring, no indoor plumbing, no heat, no running water);
- unsanitary or unclean living quarters (e.g., animal/insect infestation, no functioning toilet, fecal/urine smell);
- inappropriate and/or inadequate clothing, lack of necessary medical aids (e.g., eyeglasses, hearing aids, dentures); and
- grossly inadequate housing or homelessness.

Source: National Center on Elder Abuse. Available at http://www.elderabusecenter.org/default.cfm?p=basics.cfm
INDICATORS OF ELDER ABUSE

**Physical Indicators**
- Unkempt or dirty physical appearance; poor hygiene; foul odor
- Malnourished or dehydrated; underweight, sunken eyes, hollow cheeks; pale
- Patches of hair missing or bleeding scalp
- Soiled clothing or bed
- Torn, stained, or bloody underclothing
- Cuts, pinch marks, skin tears, lacerations, or puncture wounds; injuries that reflect the outline of an object used to inflict it (such as an electric cord or hand)
- Unexplained bruises or welts; bruises or welts in various stages of healing; discolorations; swelling
- Burns
- Sleeplessness
- Signs of confinements, such as being tied to furniture or being in a locked room
- Untreated medical conditions; unexplained delays in seeking medical treatment; inadequate care, such as untended bed sores
- Inadequate or inappropriate administration of medication
- Injuries that are incompatible with explanations
- Frequent use of emergency room; evidence of hospital or physician “shopping”
- Lack of necessary assistance appliances such as walkers, canes, bedside commodes, eyeglasses, hearing aids
- Lack of food, water, and heat
- Home and yard in obvious need of cleaning and repair; unsafe conditions in the home

**Behavioral Indicators**
- Confused
- Disoriented about time and place
- Frightened
- Extremely forgetful
- Withdrawn; unresponsive
- Depressed
- Resigned
- Helpless
- Passive
- Angry
- Agitated
- Anxious
- Denial
- Guarded with and wary of outsiders
- Telling implausible or contradictory stories
- Hesitant to talk freely
- Low self-esteem
- Embarrassment and shame

**Financial Indicators**
- Unusual activity in bank accounts, such as withdrawals from automatic teller machines when the person cannot walk or get to the bank.
- Signatures on checks and other documents that do not resemble the older person’s signature.
- Checks and other documents signed even though the older person cannot write
- Lack of necessities and amenities, such as food, medicine, appropriate clothing, television, telephone, personal grooming items.
- Changes in spending patterns, such as buying things the older person doesn’t need and cannot use

**Social Indicators**
- Isolated or lonely with no friends or relatives who drop by.
- Family members or caregiver isolate the older person, restricting the person’s contact with others
- The elder’s interaction or activity within the family is restricted or prohibited.
- Elder is not given the opportunity to speak for him/herself or see others without the caregiver being present.
- Family has a history of violence or substance abuse
- Unemployed adult children with criminal records and emotional problems
- Unpaid bills and overdue financial obligations (e.g., rent) when someone has been designated to pay the bills.
- The person controlling the elder’s resources denies him or her necessary placement and/or services.
- The older person is grossly overcharged for rent or other services.
- An older person loans someone large sums with no arrangement for repayment.
- An older person complains of deception or theft of property, funds, or personal assets; clothing, jewelry, silverware, or other items of value are missing.
- Elder’s papers, credit cards, checkbook, or other financial items are missing.
- A will has been executed recently even though the person is incapable of making a will.
- Title for a house or other property has recently been transferred to someone even though the older person is unable to understand the nature of the transaction.
- Power of attorney given to someone even though the older person is unable to comprehend the meaning and process.
- A person expressing affection for a wealthy older person even though they have only recently met.
- Living environment is not commensurate with the older person’s financial means.

Caregiver Indicators
- The caregiver only asks financial questions and does not ask questions about the person’s care.
- The caregiver has no obvious means of support.
- Defensiveness.
- Depression.
- The level of care needed by the elder is beyond the ability of the caregiver to provide; the caregiver feels overwhelmed by the older person’s care needs.
- Caregiver has a history of substance abuse.
- Caregiver has abused others in the past.
- Anger or indifference toward the elder; blaming the older person; defensiveness; aggression, such as threats, harassment, or insults.
- Caregiver has emotional or psychiatric problems.
- Caregiver is reluctant to comply with plans for the elder’s care.
- Caregiver’s concern that too much money is being spent on the older person.
- Caregiver does not allow the older person to speak for him- or herself.
- Caregiver is hostile toward outsiders.
- Caregiver is flirtatious or coy with the older person.
- Caregiver has had extended period of responsibility for a dependent adult without assistance or relief.

Sources:


Identifying Indicators of Elder Abuse
Case Study

- What are the indicators of elder abuse?
- What might have prevented this abuse?

John Hall
Parolee,
Age 32

Nick DeLeon
Parole Officer
Indicators of Elder Abuse

Case Study

1. What indicators of elder abuse are apparent in this example?
2. What might the community corrections officer have done that could have prevented this abuse from occurring?
Elder Abuse Awareness Quiz

6. Forty-five (45) states have a mandatory reporting law for elder abuse in the community.
   □ True    □ False

7. After interviewing an apparent victim of elder abuse, it is necessary that you corroborate the story with the alleged abuser.
   □ True    □ False

8. Home health aides, nurses and social workers that work in the community are the most frequent reporters of elder abuse.
   □ True    □ False

9. Adult Protective Services can remove a victim of abuse or neglect from their home, even if they choose to stay with the abuser.
   □ True    □ False
Laws and Legal Issues

Statutes addressing elder abuse vary regarding:
- Ages of victims
- Definitions of elder abuse
- Classification of abuse (criminal or civil)
- Types of abuse covered
- Reporting requirements
- Investigation procedures
- Remedies

Community Corrections Officers must know...

- How elder abuse is defined
- Mandated reporting requirements
- To whom to report

State Numbers for Reporting Elder Abuse
www.elderabusecenter.org/default.cfm?p=statehotlines.cfm

State Long Term Care Ombudsman Numbers
www.ltcombudsman.org/static_pages/help.cfm

State Medicaid Fraud Control Units
www.naag.org/issuessh/issue-medicaid.php

US Attorney’s Offices Directory
www.usdoj.gov/usao/offices/index.html
**Summary**

- Types/categories of elder abuse
- Domestic versus institutional elder abuse
- Indicators of Elder Abuse
- Elder abuse statutes and reporting requirements
- Responsibilities for reporting elder abuse

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**In Conclusion**

- Program Evaluation
  - Complete online, quickly and easily
  - Complete manually; fax or mail
- Continuing Education Credit
  - Score ≥ 70% on test (online)
  - Print certificate for 1.5 contact hours

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**Program Evaluation**

We value your opinion and will appreciate your taking a few minutes to evaluate this program. Please submit your evaluation online, or complete the Program Evaluation form included in your handout materials and mail or fax it to APPA as instructed at the bottom of the form. Thank you for your assistance!