# Types of Abuse by Frequency

<table>
<thead>
<tr>
<th>Type of Abuse</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neglect:</td>
<td>49%</td>
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<tr>
<td>- Self-Neglect</td>
<td></td>
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<tr>
<td>- Neglect by others</td>
<td></td>
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<tr>
<td>Emotional Abuse</td>
<td>35%</td>
</tr>
<tr>
<td>Financial Abuse</td>
<td>30%</td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>26%</td>
</tr>
<tr>
<td>Abandonment</td>
<td>4%</td>
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<tr>
<td>Sexual Abuse</td>
<td>1%</td>
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</tbody>
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Self-Neglect

An adult’s inability, due to physical or mental impairments, to perform tasks essential to self care

- Malnutrition
- Dehydration
- Untreated medical/dental problems
- Unclean clothing
- Inappropriate clothing for weather
- Inability to manage finances
- Hoarding/cluttering
Failure by someone who has assumed a caregiving role to provide for adequate food, clothing, shelter, medical care or assistive devices

- Malnutrition
- Dehydration
- Untreated medical/dental problems
- Unclean clothing
- Left alone without assistance
- Pressure ulcers
Emotional Abuse

- Threats, humiliation, intimidation by caregiver
- Patient demeanor:
  - Flat affect, listless, apathetic, hesitant, evasive, fearful, anxious, hostile, aggressive, uncooperative, suspicious
Physical Abuse

75% of physical abuse in head and neck area

- Bruises, lacerations, rope marks, burns
- Bone and skull fractures or breaks
- Untreated injuries
- Broken assistive devices, dentures, glasses
- Fractured or avulsed teeth

Consider whole patient
- General appearance
Location of bruises on abused elders
Steps to Screen for EAN

• **Look** for signs of abuse and neglect.
• **Ask** questions: can reveal abuse or neglect.
• **Listen** to the patient’s answers. A “Yes” answer to 1 or more questions is reason to suspect abuse or neglect.
• **Report** suspected abuse to Adult Protective Services and/or Ombudsman and/or police.
1. Are you afraid of anyone at your home or care facility?
2. Has anyone close to you tried to hurt or harm you recently?
3. Has anyone close to you called you names or put you down or made you feel bad recently?
Screening questions continued

4. Does someone in your family make you stay in bed or tell you you're sick when you know you aren't?

5. Has anyone forced you to do things you didn't want to do?

6. Has anyone taken things that belong to you without your OK?

Follow up if a yes answer

- Affirm elder’s right to safety
- Provide information
  - educate about dynamics of abuse
  - refer to community resources
- Follow established reporting protocol
What to do if you suspect mistreatment

- Talk with the older patient alone;
- Normalize the situation as much as possible
- Try to maintain an objective and supportive demeanor with both patient and caregiver
Confirming the diagnosis

• Ubiquity statements:
  ✦ "These are questions I ask of everyone."
  ✦ "Because there is help available for people who are being abused, I now ask everyone about the possibility if it is occurring to them."
  ✦ Allow silence!
Listen for Elder’s Response

“Yes” to 1 or more questions = Reason to suspect abuse or neglect
• Dialogue
  ▪ **You:** Are you afraid of anyone here in your home?
  ▪ **Elder:** Hmm...well, only when she drinks...
  ▪ Is this a YES or a NO?

• Use open-ended questions to follow up:
  ▪ 😊 Can you tell me more about that?
  ▪ 😞 But, she doesn’t hit you, right?
**More dialogue**

- **You**: Has anyone close to you called you names or put you down or made you feel bad recently?
  - **Elder**: (With tears in eyes) “It’s hard getting old and having to depend on others.”
  - Is this a YES or a NO?
- Use open-ended questions to follow up:
  - 😊 Silence or confirming comment: “It is hard...”
  - 😞 Well, it beats the alternative (none of you would say this, I know)
More dialogue

- Avoid accusation about abuse:
  🙁 “You’re being abused, aren’t you?”

- Avoid assigning blame:
  😞 “You’re son is a loser, isn’t he?”
Where to Report Abuse

In the community:
- Adult Protective Services
  - Social workers/nurses
  - Receive reports of abuse from mandated reporters and others
  - Work with elder/dependent adult and family/friends
  - Help access resources in community to stay safe
  - In many states: Cross report to police

In residential facilities:
- Long-term Care Ombudsman
  - Social workers/volunteers
  - Receive complaints from residents
  - Advocate on behalf of residents
  - Work with State Licensing to identify problems in facilities
A Word About APS

- Does not have the same powers as CPS
- Elders are adults and have the right to make poor choices
- APS is a voluntary service
- APS is not police or Immigration
- APS will work with the senior to maximize his strengths while minimizing risk of abuse/neglect
Recap: Steps to Screen for EAN

**Look** for signs of abuse and neglect

**Ask** abuse/neglect screening questions

**Listen** to the patient’s answers
   A “Yes” answer to 1 or more questions is reason to suspect abuse or neglect

**Report** suspected abuse to APS, Ombudsman or law enforcement
Research Briefs from NCEA

• Adults with Dementia
  www.centeronelderabuse.org/docs/ResearchBrief_Dementia_508web.pdf

• Residents of Long Term Care Facilities
  www.centeronelderabuse.org/docs/ResearchBrief_LongTermCare_508web.pdf

• Adults with Disabilities
Resources

• National Center on Elder Abuse  
  www.NCEA.aoa.gov

• Center of Excellence on Elder Abuse and Neglect  
  www.centeronelderabuse.org

• The Consumer Voice for Quality Long-term Care  
  www.theconsumervoice.org

• Ageless Alliance: a grassroots elder justice movement  
  www.agelessalliance.org
Additional Resources

● Geriatric Pocket Doc
  Info on common geriatric syndromes, conditions, elder abuse and medications
  130 pages

● 368+ Elder Abuse App: designed for law enforcement, but useful to all who work with elders or adults with disabilities! Download for your mobile device today. FREE!
Join the movement!
Thank you!