



RED Flags: Recognizing Elders in Danger

Central Plains Area Agency on Aging

Putting the Issues in Context



- In the United States, the 2010 Census recorded the greatest number and proportion of people age 65 and older in all of decennial census history: 40.3 million, or 13% of the total population.
- This “Boomer Generation” effect will continue for decades.
- By 2050, people age 65 and older are expected to comprise 20% of the total U.S. population. The fastest growing segment of American’s population consists of those 85 and up.
- In 2010, there were 5.8 million people aged 85 or older. By 2050, it is projected that there will be 19 million people aged 85 or older.



Why We Should All Care



- Elder abuse, neglect and exploitation (ANE) can truly happen to anyone. Research indicates that one in ten American elders is affected by abuse.
- Elder abuse happens in all types of relationships
 - Family- spouse, adult children, grandchildren
 - Caregivers
 - Friends

Why We Should All Care



- Fiduciaries: power of attorney, court-appointed guardian/conservators, trustees, other professionals who have an obligation to the individual: financial advisor, lawyers, real estate agents...
- **Abuse happens and through awareness:**
- **YOU** can make a difference: changing the statistics and addressing abuse/neglect and exploitation that is occurring.

Extent of the Problem



- Studies report that approximately 10% of older adults experienced abuse in the prior year.
- Adult Protective Services (APS) data indicates an increase in the reports of elder abuse.
- APS exists in all 50 states, and most states have mandatory reporting laws for elder
- There is an overwhelming number of cases of abuse, neglect, and exploitation that are not reported.



Extent of the Problem

- Recent studies estimate that only 1 in 14 cases of elder abuse comes to the attention of authorities.
- The New York State Elder Abuse Prevalence Study found that for every case known to programs and agencies, 24 were unknown.
- Financial exploitation was self-reported at a rate of 41 per 1,000 surveyed, this is higher than self-reported rates of emotional, physical, sexual abuse or neglect.
- People with dementia are at greater risk of elder abuse. A 2010 study found that 47% of participants with dementia had been mistreated by their caregivers.

The Abusers



- The highest percentage of abusers are family members (90%), :adult children, spouses, partners, and others.
- Family members who abuse drugs or alcohol, who have a mental/emotional illness, and who feel burdened by their caregiving responsibilities abuse at higher rates.
- Elder abuse occurs in :
 - community and institutional settings
 - In one study of nursing home residents, 44% said they had been abused and 95% said they had been neglected or seen another resident neglected.

The Abusers



- Risk factors for being an abuser
 - Dependence on the victim for financial or other forms of support
 - History of abuse, neglect or exploitation
 - Living with the victim
 - Mental illness
 - Substance abuse

Victim Risk Factors



- Dementia
- Isolation
- Limited social support
- Living with others
- Mental illness
- Physical impairments
- Substance abuse



The Consequences

- Elder victims of abuse :
 - 300% higher risk of death
 - Higher levels of psychological distress and lower perceived self-efficacy.
 - Experience decreased health and higher rates of disability
- The impact of ANE has a financial impact:
 - Medical costs associated with violent injuries to older adults estimated at over \$5.3 billion annual health expenditures
 - Annual financial loss by victims of financial exploitation -\$2.9 billion in 2009.

Physical Abuse



- **Definition**—Inflicting, or threatening to inflict, physical pain or injury on a vulnerable elder, or depriving them of a basic need.
- **Signs and symptoms** of physical abuse include:
 - bruises, black eyes, welts, lacerations, and rope marks;
 - Slap marks, unexplained bruises, most pressure marks, and certain types of burns or blisters, such as cigarette burns;
 - 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;
 - medication overdose or under utilization of prescribed drugs;
 - report of being hit, slapped, kicked, or mistreated;
 - sudden change in behavior; and
 - the caregiver's refusal to allow visitors to see an elder alone.



Emotional Abuse

- **Definition**—Inflicting mental pain, anguish, or distress on an elder person through verbal or nonverbal acts. Behavior such as belittling, threats, and other uses of power and control are indicators of verbal or emotional abuse.
- **Signs and symptoms** of emotional/psychological abuse include but are not limited to:
 - Unexplained withdrawal from normal activities
 - Change in alertness or unusual depression
 - 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.

Sexual Abuse



- **Definition**—Non-consensual sexual contact of any kind, coercing an elder to witness sexual behaviors.
- **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.



Exploitation

- **Definition**—Illegal taking, misuse, or concealment of funds, property, or assets of a vulnerable elder.
- **Signs and symptoms** of fiduciary abuse or exploitation include :
 - sudden changes in bank account or banking practice such as withdrawal of large sums of money by a person accompanying the elder
 - Checks written as “loans” or “gifts;”
 - Addition of names on an elder's bank signature card
 - unauthorized withdrawal of funds
 - abrupt changes in a will or other financial documents
 - substandard care being provided, unpaid bills
 - forged signature for financial transactions
 - sudden appearance of previously uninvolved relatives claiming their “rights “;
 - sudden transfer of assets to a family member or someone outside the family;
 - provision of services unnecessary services

Neglect



- **Definition**—Refusal or failure by those responsible to provide food, shelter, health care or protection for a vulnerable elder.
- **Signs and symptoms** of neglect include :
 - dehydration, malnutrition, untreated bed sores (pressure ulcers), unusual weight loss, and poor personal hygiene
 - untreated health problems
 - hazardous or unsafe living condition/arrangements
 - unsanitary and unclean living

Self Neglect



- Self-neglect is the most frequently reported type of report made to adult protective services.
- **Signs and symptoms** of self-neglect :
 - Lack of adequate food / nutrition for self,
 - Lack of medical care/treatment
 - poor personal hygiene
 - hazardous / unsafe living
 - lack of the necessary medical aids
 - Confusion
 - grossly inadequate housing or homelessness



Risk Factors

- **Dementia and Cognitive Impairment**
- **Domestic Violence Grown Old**
- **Personal Problems of Abusers**
- **Living with Others and Social Isolation**
 - Abusers who live with the elder have more opportunity to abuse and yet may be isolated from the larger community themselves or may seek to isolate the elders from others .

What to Do



- **IF SOMEONE IS IN A LIFE THREATENING SITUATION OR IMMEDIATE DANGER**, contact **911** or the local police or sheriff.
- To report suspected abuse in the community in Kansas, contact Adult Protective Services agency at 1-800-922-5330.
- To report suspected abuse in a nursing home or long term care facility in Kansas, contact 1-800-842-0078.
- To find reporting agencies in other states, call the Kansas Aging and Disability Resource Center at 1-855-200-2372.

The Elder Justice Act

- The Elder Justice Act was signed into law by President Obama on March 23, 2010, as part of the Patient Protection and Affordable Care Act. It provides federal resources to “*prevent, detect, treat, understand, intervene in and, where appropriate, prosecute elder abuse, neglect and exploitation.*”



Requirements in Elder Justice Act

- Requires that the HHS to develop and manage of federal resources:
- Establishment of the Elder Justice Coordinating Council
- Establishment of an Advisory Board on Elder Abuse
- Establishment of Elder ANE Forensic Centers
- Enhancement of Long-Term Care
- Funding to state and local APS offices
- Grants for long-term care ombudsmen programs and evaluation of programs
- Programs to provide training
- Grants to state agencies to perform surveys of care and nursing facilities.
- Focus on education, research, leadership and guidance in establishing programs to stop elder abuse. Additionally, the Elder Justice Acts directs the U.S. Department of Justice (DOJ) toward actions to prevent elder abuse.



Summary

- *Most cases of elder abuse go undetected. Don't assume that someone has already reported a suspicious situation.*

