

# ELDER ABUSE

## What are the Signs



Elder abuse is an unfortunate aspect of the care of our most elderly individuals. The truth is that every year, an estimated 2.1 million elderly Americans are victims of psychological, physical or other forms of abuse or neglect. More harmful, every case of reported elder abuse and neglect is likely associated with an estimated five cases of elder abuse that are not reported by anyone. Researchers report that those elders who have been abused or neglected tend to die sooner than those who are not abused, even if they have no life threatening conditions or chronic medical conditions.

Up to ninety percent of elder abuse and neglect happens at the hands of known perpetrators, usually family members. Two-thirds of perpetrators are adult children or the spouses of the abused individual. Forty-two percent of victims of murder over the age of sixty were killed by their own children and spouses represented a total of 24 percent of murders of the elderly.

Sadly, it is the most elderly of the elderly—those over the age of 80 years or more—who are abused and neglected at a rate of 2-3 times that of younger elderly persons. Nearly seventy percent of all adult protection cases involve patients over the age of sixty. Elder reports often come in by mandatory reporters of elder abuse. A total of 21.6 percent come in from physicians or healthcare providers, 9.4 percent come in from service providers and 14.9 percent from family members.

### TYPES OF ELDER ABUSE

- **Psychological or emotional abuse:** This involves the treatment of the elderly person such that they are caused emotional pain or distress. It can involve yelling, threats, ridicule, humiliation, terrorizing the elderly, habitual blaming, isolating the person from

friends or activities or even ignoring the elderly person.

- **Physical abuse:** the non-accidental use of force or injury against an elderly patient that causes injury, physical pain, or some kind of impairment. It can involve a physical assault such as hitting or shoving but can mean the inappropriate use of restraints, drugs or confinements.

- **Sexual abuse:** This involves sexual contact with an elderly person without his or her consent. It can involve physical acts of sex, showing pornography to the elderly, forcing the elderly person to watch sex acts or forcing the elderly person to remain in states of undress.

- **Neglect:** This involves a failure to take action in cases of sickness of the elderly person, the unwillingness to help them with their usual cares (such as toileting and bathing) or actively ignoring problems the patient might have. Neglect can be passive (due to ignorance) or active (choosing to ignore the patient's needs).

- **Financial abuse:** This involves a caregiver having the unauthorized use of the elderly person's property or monetary funds by either a caregiver or by an outside scam artist. It can involve the misuse of an elderly person's checks, credit cards or accounts, the stealing of cash, checks or household goods, or the forging of the elderly person's signature. It can escalate to a form of identity theft.

- **Healthcare Fraud:** Another form of fraud and abuse against the elderly person comes at the hands of the healthcare industry. The healthcare provider can abuse or place fraud against an elderly person by charging for a service that was not delivered, double-billing for medical services, getting kickbacks for prescribing certain drugs, over- or under-medicating the elderly person, recommending fraudulent remedies or taking part in Medicaid fraud.

There are specific elder risk factors that play into who gets abused and who does not:

- Having physical frailty due to age or chronic disease
- Not being able to talk or communicate
- Having dementia
- Having a mental illness
- Being socially isolated
- Being financially dependent upon another
- The tendency of the elderly person to be violent themselves

Among caregivers, significant risk factors for elder abuse include:

- inability to cope with stress (lack of resilience)
- depression, which is common among caregivers
- lack of support from other potential caregivers
- the caregiver's perception that taking care of the elder is burdensome and without psychological reward
- substance abuse on the part of the caregiver

## SIGNS AND SYMPTOMS OF ELDER ABUSE

The signs and symptoms of elder abuse depend on the type of abuse that is being perpetrated. All forms, however, cause stress to the elderly person and they may become depressed or more socially isolated.

## SIGNS AND SYMPTOMS OF ELDER ABUSE

At first, you might not recognize or take seriously signs of elder abuse. They may appear to be symptoms of dementia or signs of the elderly person's frailty — or caregivers may explain them to you that way. In fact, many of the signs and symptoms of elder abuse do overlap with symptoms of mental deteriora-

tion, but that doesn't mean you should dismiss them on the caregiver's say-so.

## GENERAL SIGNS OF ABUSE

The following are warning signs of some kind of elder abuse:

- Frequent arguments or tension between the caregiver and the elderly person
  - Changes in personality or behavior in the elder
- If you suspect elder abuse, but aren't sure, look for clusters of the following physical and behavioral signs.



## SIGNS OF PHYSICAL ABUSE

- Broken, bones, sprains or dislocations that cannot be easily understood as to the cause.
- Unexplained bruising, scars or welts.
- Medication “failure” or reported drug overdose with more medication being used than is recommended on the prescription.
- Broken frames on the elderly person's eyeglasses that cannot be explained.
- Rope marks or other restraining marks on the wrists of the individual
- Caregiver refusing to let you talk to the elderly patient alone.
- The elderly patient has an exaggerated startle reflex.
- The elderly patient shows signs of rapidly increasing depression or dementia.

## SIGNS OF EMOTIONAL ABUSE

- Witnessing threatening, controlling or belittling behavior around the caregiver and the elderly person together

- The elderly person mimics dementia with rocking behavior, thumb sucking, or mumbling to themselves
- Depression as a new finding
- An exaggerated startle response on the part of the elderly person

### **SIGNS OF SEXUAL ABUSE**

- Bruising around breasts or genitalia
- Unexplained genital infection or venereal disease
- Unexplained vaginal or rectal bleeding
- Stained, torn or bloody undergarments
- Exaggerated startle response
- Depression or dementia-like illness

### **SIGNS OF NEGLECT BY SELF OR OTHERS**

- Untreated medical conditions
- Bed sores
- Unusual weight loss or evidence of malnutrition or dehydration
- Living in unsanitary living conditions with soiled bedding, bugs in the home or a very dirty home
- Being unbathed or dirty
- Unsuitable clothing for the weather
- Desertion of the elderly person in a public place
- Living with no hot water, faulty wiring or no heat

### **SIGNS OF FINANCIAL ABUSE**

- Significant numbers of withdrawals from the elderly person's account
- Changes in the elderly person's financial situation
- Items, such as cash and other items of value, missing from the elderly person's household.
- Suspicious changes in the power of attorney, wills, titles and insurance policies.
- Addition of names to the elderly person's signature card
- Unpaid bills, even if the elderly person has the funds to pay for them
- Financial activity the elderly person couldn't have done, such as an ATM withdrawal
- The finding of unnecessary goods, services or subscriptions

### **SIGNS OF HEALTHCARE FRAUD AND ABUSE**

- Duplicate billing for the same medical service or device
- Evidence for under-medicating or over-medicating
- Evidence of poor care when bills have been paid
- Problems with the nursing facility such as overcrowding, poor responses to questions or the fact of insufficient staff

*What family members can do to prevent elder abuse:*

*What you can do as a caregiver to prevent elder abuse*

*If you find yourself overwhelmed by the demands of caring for an elder, try the following:*

- Request help, from friends, relatives, or local respite care agencies, so you can take a break, if only for a couple of hours.
- Find an adult day care program.
- Stay healthy and get medical care for yourself when necessary.
- Adopt stress reduction practices.
- Seek counseling for depression, which can lead to elder abuse.
- Find a support group for caregivers of the elderly.
- If you're having problems with drug or alcohol abuse, get help.

And remember, elder abuse helplines offer help for caregivers as well. Call a helpline if you think there's a possibility you might cross the line into elder abuse.

*What you can do as a concerned friend or family member if there may elder abuse:*

- Watch for warning signs that might indicate elder abuse. If you suspect abuse, report it.
- Take a look at the elder's medications. Does the amount in the vial jive with the date of the prescription?
- Watch for possible financial abuse. Ask the elderly person if you may scan bank accounts and credit card statements for unauthorized transactions.
- Call and visit as often as you can. Help the elderly person consider you a trusted confidante.
- Offer to stay with the elderly person so the caregiv-

er can have a break — on a regular basis, if you can.

## MANDATORY REPORTING

The law has selected out a subset of the population who are considered “mandatory reporters” in the event of possible elder abuse or neglect. The law as it stands varies from state to state. Such mandatory reporters face problems with their own licenses if they fail to report suspected elder abuse or neglect. The list is similar to those who must report child abuse and neglect:

- licensed physicians and surgeons and licensed or unlicensed residents and interns
- registered and licensed practical nurses
- nursing home administrators, nurse’s aides, orderlies, and anyone else paid for providing care in a nursing home
- patient advocates
- medical examiners
- dentists
- osteopaths, optometrists, chiropractors, and podiatrists
- psychologists and social workers

- clergy
- police officers
- pharmacists
- physical therapists

While it’s important for elders to seek refuge from abuse, either by calling a local agency or telling a doctor or trusted friend, many seniors don’t report the abuse they face even if they’re able. Many fear retaliation from the abuser, while others believe that if they turn in their abusers, no one else will take care of them. When the caregivers are their children, they may be ashamed that their children are behaving abusively or blame themselves: “If I’d been a better parent when they were younger, this wouldn’t be happening.” Or they just may not want children they love to get into trouble with the law.

If you are a caregiver who suspects that an elder is being abused, tell at least one person. Tell your supervisor, a trusted doctor or even one of your own family members whom you trust. You can also call Eldercare Locator at 1-800-677-1116.

The person who answers the phone will refer you to a local agency that can help. The Eldercare Locator answers the phone Monday through Friday, 9 am to 8 pm, Eastern Time.

