Elder Abuse: Speakers Notes
Power Point Presentation (for a general audience)

Slide 1 - Elder Abuse - A Community Issue

We live in an aging society. People 85 and older represent the fastest growing segment of the population. As the number of elderly Canadians continues to grow, so will the cases of elder abuse. Elder abuse is not always easy to detect and has many underlying causes.

Slide 2 - Today We Will Talk About…

In today's presentation we will discuss a growing social concern - Elder Abuse. We will define this issue, talk about the prevalence, highlight some of the indicators and contributing factors, and discuss why older adults may be reluctant to reveal this issue to outside helpers. Lastly, we will discuss the various resources that can assist an older adult in breaking the cycle of abuse.

Slide 3 - Elder Abuse Is…

This definition: "any action or inaction by self or others that jeopardizes the health or well being of any older adult" is the one adopted by the Edmonton Elder Abuse Intervention Team. This is only one definition used in Alberta. In fact, the lack of a generally acceptable definition has spawned a wide variety of definitions of abuse and neglect across Canada. Despite this, most would agree that elder abuse is an action or inaction by someone in a position of trust; often a family member or unrelated caregiver.

Any elderly person may become the victim of abuse. Males and females of any income level, any cultural or ethnic group, persons in good health or persons incapacitated in some way may be abused by someone close to them.

Source: Elder Abuse Intervention Team
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Slide 4 - Categories Of Elder Abuse

Elder abuse can take several forms. Often more than one form of abuse is being inflicted onto the older adult. Statistics on both a national and provincial scale indicate that financial and emotional abuse are the two categories most often identified. The categories include:

**Financial** - This is "the misuse of an older person's funds or property through fraud, trickery, theft or force."

**Psychological** - This may take the form of "verbal aggression, humiliation, isolation, intimidation, threats and inappropriate control of activities. It can also include removal of decision-making power while the person is competent; withholding affection for manipulative purposes; refusing access to grandchildren and denying privacy in institutions."

**Physical** - This is "any kind of physical assault, such as slapping, pushing, kicking, punching or injuring with an object or weapon. It also includes deliberate exposure to severe weather and unnecessary physical restraint."

**Sexual Assault** - This includes all "unwanted sexual activity, such as verbal or suggestive behavior, fondling, sexual intercourse or a lack of personal privacy."

**Neglect** - This is "the intentional or unintentional failure to provide for the needs of someone. Active neglect is the intentional withholding of basic necessities or care, while passive neglect is not providing basic necessities and care because of a lack of experience, information or ability. Another area to consider is self-neglect where older adults, by choice or ignorance, live in ways that disregard health or safety needs, sometimes to the extent that the disregard also poses a hazard to others."

**Medication** - This is "the misuse of an older person's medications and prescriptions. It may include withholding medication, overmedicating or not complying with prescriptions refills."

**Violation of Human Rights** - This is "the denial of an older person's fundamental rights according to legislation, the Canadian Charter of Rights and Freedoms or the United Nation's Declaration of Human Rights. Examples of Violations of rights include withholding information; denying privacy, visitors, or religious worship; restricting liberty; unwarranted confining to a hospital or institution; or interfering with mail."

Source: Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994
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Slide 5 - National Statistics

The 1999 General Socialization Survey (GSS) "interviewed more than 4000 older Canadians about their experience regarding emotional and financial abuse as well as physical and sexual violence by children, caregivers and spouses. In total, approximately 7% of seniors reported they had experienced some form of emotional or financial abuse by an adult child, caregiver or spouse in the five-year period preceding the survey." If we take this statistic and apply it to the current senior population of Alberta it represents approximately 23,000 Alberta seniors who are experiencing one or more forms of abuse.

Additionally, we know that the senior population is the fastest growing sector of our population. In fact, in 2000, the Alberta for All Ages - Directions for the Future report stated that "Between 1999 & 2016 the Alberta seniors’ population will increase 60-70%, while the general population will only grow by 30%." Thus, in all likelihood the prevalence of elder abuse will also grow.

Source: Family Violence in Canada: A Statistical Profile 2002 Alberta for All Ages: Directions for the Future

Slide 6 - Annual Costs Of Family Violence In Canada

Being able to measure the economic impact of violence allows us to examine the issue from another vantage point. It gives us additional information when planning prevention and intervention efforts. However, we must not forget that economic measures do not take in to account the human cost of emotional suffering, decreased quality of life and in some cases the loss of life.

The figures in this slide come from a study titled The Health-Related Costs of Violence Against Women in Canada: The Tip of the Iceberg, by Tanis Day, Ph.D.

- The category “Health and Well-being” includes mental health
- The category “Social Services” includes SFI (Supports For Independence) commonly known as welfare.
- The category “Health/Medical” includes physical health
- The category “Social Programs” includes counseling, preventive services, addictions services, victims’ assistance, as well as treatment and counseling for the batterer.

What these figures highlight is the need to ensure community response is multidisciplinary and multi faceted. Many professions and sectors have a role to play in addressing the issue of family violence which includes elder abuse.

Although elder abuse in not a new phenomena it has only recently come to the forefront of our attention as another complex dimension of family violence. Despite research being in its early stages there are a few theories that address the cause of elder abuse. These include:

**Learning Theory** - "Learning theory or transgenerational violence theory states, that violence is a learned behaviour pattern in some families. A child observes violence as an acceptable reaction to stress which then becomes internalized as a behaviour. This, in turn, leads to a cyclical family pattern where the abused becomes the abuser." If elder abuse is a case of spouse abuse the situation can be reversed. "If the abusive spouse becomes ill or disabled the previously abused partner may retaliate and become the abuser."

**Physical/Mental dependence (Impairment)** - "The impairment theory states that elderly persons who have a severe mental or physical impairment are most likely to be abused. Whenever there is a relationship in which one person is dependent and another person has the helping or care giving role, there is the potential for misuse of power by the caregiver."

**Pathologic Abusers** - "This theory focuses on the abusers having personality flaws or character flaws that cause abusiveness. Overuse of drugs and alcohol on the part of the abuser as well as those with mental retardation or mental illness are far more likely to be abusive than those without these impairments." As caregivers, these people often do not possess the decision making capacity to make appropriate judgments for their elderly parents but nevertheless are thrust into this role.

**Stressed Caregiver** - "This theory proposes that internal & external stresses builds and may erupt as violence. The stress may be due to the conflicting demand on the caregiver by various household members. If there is no escape for the caregiver, abuse may occur."

**Societal Attitudes** - "This theory states that negatives attitudes dehumanize elders and make it easier for the abusers to victimize without remorse. The elderly are often stereotyped as frail, incompetent and powerless."

Source: Golden Years Hidden Fears by: Virginia Boyack, (1997)
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Slide 8 - Risk Factors

Abuse of older adults is a complex issue, with no single explanation. Many factors seem to contribute to abuse and each case has its own unique mix of factors. Some of these risk factors include:

History Of Spousal Abuse: "Many older adults, who have been in troubled marriages characterized by abuse, will continue to be abused by their spouses."

Family Dynamics: "Values, habits and methods of handling problems and feelings are learned early in life, largely through family interaction. A child, who has been exposed to family violence while growing up, may become abusive."

Isolation: "Isolation can conceal and perpetuate abuse or neglect. An older adult, who lives alone, with few family members or friends nearby, may be at risk. If imposed, isolation can also be a form of mistreatment."

Troubled Relatives, Friends Or Neighbours: "People who abuse or neglect older adults are often functioning only marginally themselves and are ill-equipped to handle the responsibility of others."

Inability To Cope With Long-Term Caregiving: "Sometimes caregivers react to the stress of too many responsibilities in inappropriate ways such as abusing or neglecting the older adults in their care."

Institutional Conditions: "Some long-term care facilities maintain a workforce that is overworked, poorly trained and undervalued. This may lead to neglect or abuse of residents."

Ageism And Lack Of Knowledge About The Aging Process: "Abuse and Neglect can result from the negative stereotype of older adults having no useful role, combined with non-acceptance of the increasing dependence that accompanies old age."

Society’s Acceptance Of Violence: "Canadians see violence in the news, in sports and movies and on television shows. This wide exposure often leads to a general acceptance or tolerance of violence as an acceptable way of venting frustration or anger. This tolerance creates an environment which can contribute to abuse and neglect of older adults."

Source: Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994
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Slide 9 - Barriers To Disclosure

It is not always possible to know the full extent of abuse of older adults. Those who are being abused may be unwilling – or unable – to report it due to:

**Fear:**
- Of being punished for reporting
- Of institutionalization
- Of rejection or abandonment by other family members
- Of losing their caregiver or other family members including grandchildren
- That the disclosure will reflect poorly upon their family

**Love For The Abuser:** The senior often does not want to see the abuser criticized or face consequences for the behavior.

**Lack Of / Or Impaired Understanding:** This may be due to medical disability or mental impairment or inappropriate medication

**Shame And / Or Guilt:** The senior often blames him/herself for the behavior of the children even when the children are adults. The senior may also believe that it was something they did that brought on the abuse.

**Unaware Of Resource Options:** The senior who either believes abuse is a private family issue or who is unaware of the community supports and services available to assist them will be more hesitant to openly identify with this issue.

**Acceptance Of Abuse Or Neglect As Normal:** The abuse may be seen as a typical pattern of behavior in the family; abusers may learn to be abusive by witnessing or experiencing it. Additionally, the abuse is a product of society’s general tolerance and acceptance of violence (i.e.) children's toys, movie content, and the methods used by nations to solve conflict.

Source: Edmonton Elder Abuse Intervention Team
Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994
Slide 10 - Elder Abuse In Ethno-cultural Communities

“Family Violence exists in all communities and cuts across all ethno-cultural, racial, class, socio-economic and religious groups. Victims of family violence in new Canadian, refugee and ethno-cultural communities which are not ‘main stream’ often face additional challenges and barriers in escaping family violence.” These include:

**Language Barriers:** “An inability to communicate in either official language could leave a senior susceptible to abuse and exploitation. Language barriers can result in dependence and isolation making both disclosure and access to services significantly more difficult.”

**Social Isolation:** “Physical limitations or an unfamiliarity with surrounding communities can leave New Canadian seniors vulnerable to abuse. In the absence of a social network, abuse may be more easily hidden and seniors are unlikely to seek help.”

**Financially Dependent:** “Many new Canadian seniors do not have savings or a pension when arriving in Canada. Often they become financially dependent on their children or caregiver - increasing the potential for neglect or exploitation.”

**Emotionally Dependent:** Adult children or other family members may take advantage of a senior’s emotional dependence through manipulation or neglect. “Threats to withdraw sponsorship can cause seniors to refrain from reporting. As well, fear of abandonment, deportation and institutionalization often deters seniors from disclosing abuse. These fears are often rooted in a lack of understanding of their legal and human rights or a fear of the Canadian Justice System.”

**Cultural Taboos:** “Cultural Taboos against revealing “private” family issues serve as another deterrent against reporting abuse - seniors are reluctant to ‘bring shame’ to their families.”

Source: Abuse in Ethno-cultural & New Immigrant Communities - Department of Community Service Government of Nova Scotia
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Slides 11– 16 – Indicators

Given the reluctance of seniors to disclose an abusive situation it is vital that we be alert to the possible indicators of abuse. In assessing any situation, it is important to realize that an indicator may be present for reasons other than abuse or neglect. However, if a combination of the following indicators are present there is a need to further explore why those indicators are present.

Slide 11 – Indicators Of Physical Abuse

- Unexplained injuries such as bruising, burns, fractures, or lacerations
- Medical attention sought from a variety of doctors or clinics
- Injuries have not received proper medical attention
- History of accidents/injuries

Source: Edmonton Elder Abuse Intervention Team Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994

Slide 12 – Indicators Of Emotional Abuse

- Changes in affect
  - fear, passive, withdrawn
- Low self esteem
- Reluctance to talk openly
- Inconsistent statements (not from mental confusion)
- Waits for caregiver to respond
- Insomnia, fatigue, listlessness
- Notable behavioral changes
  - appetite, social interaction

Source: Edmonton Elder Abuse Intervention Team Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994

Slide 13– Indicators Of Financial Abuse

- An older adult has signed a document (i.e. property deed) without full understanding
- An older adult has a lack of financial choices / decisions
- Family members moving in without agreement / shared costs
- Unexplained discrepancy between known income and standard of living
- Unusual bank / ATM activity
- Possessions disappearing

Source: Edmonton Elder Abuse Intervention Team Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994
Slide 14 - Indicators Of Neglect (Active & Passive)

- Malnutrition, Dehydration, Weight Loss
- Medical treatment being withheld
- Missing dentures, glasses, hearing aid
- Necessities of life not being met
- Lack of safety precautions or supervision if necessary
- Clothing threadbare / inappropriate

Source: Edmonton Elder Abuse Intervention Team Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994

Slide 15 - Indicators Of Medication Abuse

- Reduced Mental or Physical Activity
- Depression
- Heightened / Reduced / or Absent therapeutic response
- Prescriptions not being filled or being filled too often

The following are possible factors for why medication abuse is occurring.
- A family member or caregiver may be over or under medicating:
  - To control difficult behavior of the senior
  - OR
  - To confuse the senior in order to gain control of finances, or speed the admission to a care facility

- A family member or caregiver may not be filling prescription(s) for:
  - Financial reasons – they may be keeping the seniors money for themselves.

Medication may be stolen for self use or resale

Source: Edmonton Elder Abuse Intervention Team Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994

Slide 16 - Indicators Of Sexual Abuse

- Unwanted sexual suggestions, comments, materials
- Lack of personal privacy (being watched)
- Unnecessary help with dressing / hygiene
- Unwanted sexual activity

Source: Edmonton Elder Abuse Intervention Team Abuse and Neglect of Older Adults - Resource and Training Kit for Service Providers, Health Canada 1994
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Slide 17 - Where Might Help Be Available?
As you have heard to this point, the issue of elder abuse is a complex problem and the dynamics in each case can be different. Therefore, the response has to be individualized and may require a number of resources. Consider the list of agencies and professionals on this slide as a starting point. Your community may have a direct response to the issue of elder abuse or may have other agencies that are not listed here where help may be available. Remember, given the various types of elder abuse and the number of possible contributing factors, a multi-disciplinary approach to prevention and intervention is often considered the best way to deal with the problem.

Slide 18 – Older Adult Knowledge Network (OAK-NET)
This website describes different types of abuse in non-institutional settings and how Canadian law protects older adults. The information provided on this site will give you a general understanding of the issue and possible legal actions. Additionally, the site contains an index of resources across the province.

Slide 19 – Future Direction
Awareness: As you have heard, elder abuse is a growing issue; therefore, we need to continue to create awareness. Knowledge is power. If older adults are aware that they do not have to accept abuse and know where to turn for help it allows them to protect themselves.

It is especially important for professionals to be able to identify when seniors are abused and to intervene constructively and appropriately. Education and training of professionals is a critical prevention effort.

Additionally, it is essential to promote public awareness of elder abuse. It is everyone’s responsibility to take action against this growing issue and to offer support to victims in a manner that encourages them to get help.

Community Driven Initiatives: Communities come in all sizes and shapes; therefore each community response needs to be tailored to the community’s needs. A common thread however, is the need for collaboration. It is very important to assist each other in addressing the complex needs that most clients have. No one agency can do it all. We need each other to “intervene” successfully with the issue of elder abuse.
Bibliography of Resources Used

The Alberta Elder Abuse Awareness Network would like to acknowledge the following resources which have been used to develop the power point presentations and the subsequent speaker’s notes.

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