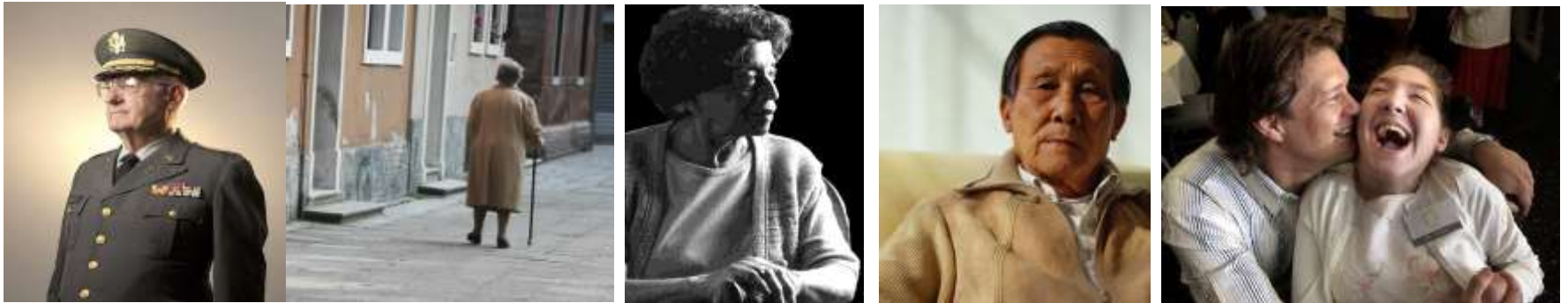


Creating a Multidisciplinary Response to Elder Abuse in Your Community



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Objectives

At the end of this workshop, you will be able to:

- Describe the benefits of multidisciplinary responses to elder abuse
- Understand different multi-disciplinary models to respond to elder abuse
- Identify an action step YOU can take to address elder abuse in your organization, community and/or state



**I WILL NOT
KEEP CALM
UNTIL
THERE IS SO MUCH
ELDER ABUSE
AWARENESS THAT IT
NEVER HAPPENS AGAIN.
EVER.**



2012 PROFILE OF OLDER AMERICANS

10% of seniors are abused, neglected, and/or exploited annually

1 in 7 seniors are threatened by hunger

3.6 million live in poverty

80% have at least one chronic condition

50% have at least two

36% of older women live alone

21% are Minorities

9% African American

7% Hispanic

4% Asian or Pacific Islander

72% of older men are married

Median income

\$27,707 males

\$15,362 females

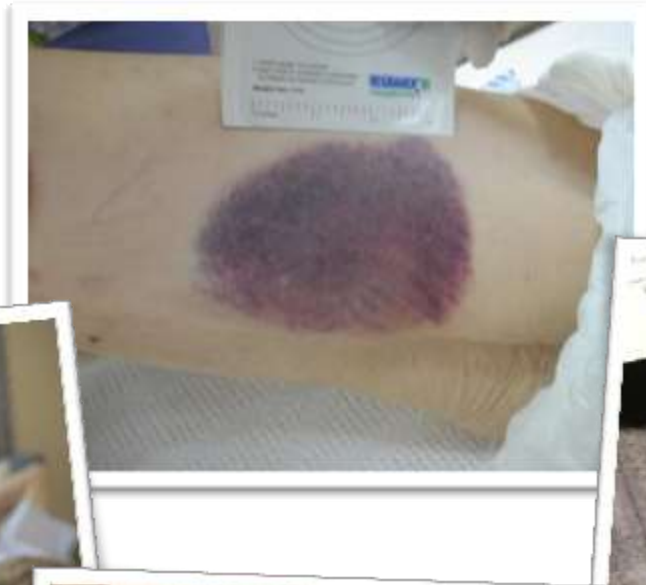
497,000 have primary responsibility for grandchildren

5% of the labor force are older adults



SOURCES: AoA, www.aoa.gov/aging_statistics/profile/index.aspx; Meals on Wheels Research Foundation, www.nfesh.org/cgi-bin/download.cgi; ACL, http://www.acl.gov/About_ACL/Budget/docs/FY2014_ACL_CJ.pdf

Elder Abuse is . . .



Elder Abuse

- Physical, sexual or psychological abuse, as well as neglect, abandonment and financial exploitation of an older person by another person or entity,
- That occurs in any setting (e.g., home, community or facility),
- Either
 - In a relationship where there is an expectation of trust; and/or
 - When an older person is targeted based on age or disability.

Cite: DOJ/HSS Elder Justice Roadmap Project

Generally Accepted Categories

Physical

Sexual

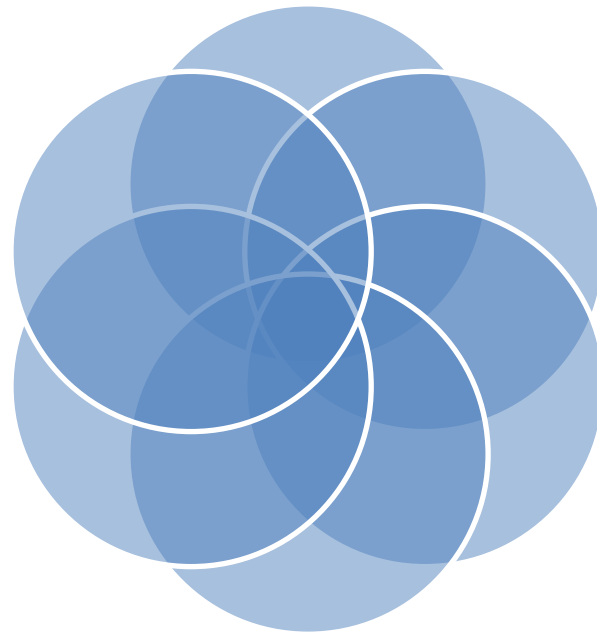
Emotional

Neglect

Abandonment

Self-Neglect

Exploitation



Incidence of Elder Abuse



FOR EVERY REPORT OF ABUSE

23.5 CASES GO

UNREPORTED

Lifespan of Greater Rochester, Inc., Weill Cornell Medical Center of Cornell University, and New York City Department for the Aging. (2011).

Under the Radar: New York State Elder Abuse Prevalence Study.

Dementia: A Major Risk Factor for Elder Abuse

NEARLY 1 IN 2 PEOPLE WITH DEMENTIA

EXPERIENCE SOME FORM OF ABUSE BY OTHERS.



**AN ESTIMATED 5.2
MILLION AMERICANS
HAVE
ALZHEIMER'S DISEASE.**

¹ Cooper, C., et al. (2009). *British Medical Journal*, 338, b155

² Wiglesworth, A., et al. (2010). *JAGS*, 58, 493-500

³ Alzheimer's Association (2013). *Alzheimer's Facts & Figures*

Abuse of Long-term Care Residents

In a study of 2,000 NH residents, 44% said they had been abused.

Over 50% of NH staff admitted to mistreating older residents.

Abuse of Adults with Disabilities

30% of adults with disabilities who used Personal Assistance Services for support of Activities of Daily Living reported one or more types of mistreatment by their primary provider (Oktay & Tompkins, 2004)

In an anonymous sample, 68% of 305 adult women with disabilities reported experiencing one or more types of abuse in the preceding year. Of those abused, 30% experienced sexual abuse in the preceding year (Curry, et al, 2009)

The Case of Mrs. G

Mrs. G, a 77-year-old bed-bound woman, was referred to APS for suspected neglect

- Had a feeding tube and a urinary catheter
- Received care from husband and son at home
- Attending home health nurse reported malnutrition, dehydration, worsening Stage III pressure ulcer
- Reports of verbal abuse by husband and son
- Home health nurse reported the family members could not agree on care plans and gave conflicting stories as to what care was occurring for Mrs. G

Mrs. G (cont'd)

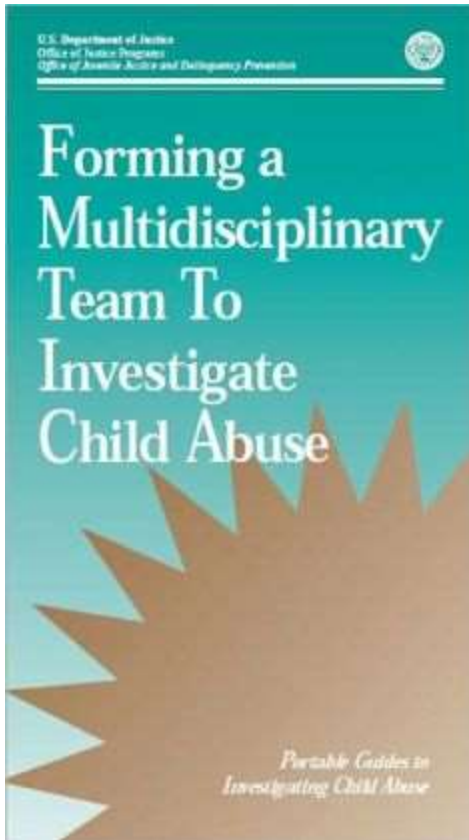


- What else would you want to know?
- What kinds of professionals might be needed?
- Which of these are available in your organization/ community/ state's network?

Multidisciplinary Responses: A History



Multidisciplinary Responses: A History



Child Abuse Multidisciplinary Teams (1990s)

- Child Protective Services
- Health Dept
- Mental Health
- Juvenile Dept
- District Attorney
- Law Enforcement
- Victim Advocate
- Faith Community/
CBO

Elder Abuse Multidisciplinary Teams and Coalitions

Jurisdictions

- State
- County/Region
- Local

Participants

- Government only
- Non-profits
- For-profits

Goals of Multi-disciplinary Responses

- Improve quality and quantity of services to victims
- Inform program planning
- Increase prosecutions
- Influence public policy



Ways and Means

- Regularly analyzing and advising on challenging cases with professionals from a variety of fields
- Identifying system problems and making recommendations
- Networking between agencies/organizations
- Training members
- Collecting data

Developing and strengthening a comprehensive community response



**Religious
Leaders**

Advocates

Police

**Adult
Protective
Agencies**

**Aging &
Disability
Services**

Friends

Policy Makers

**Judges &
Legal
Professionals**

**Health
Professionals**

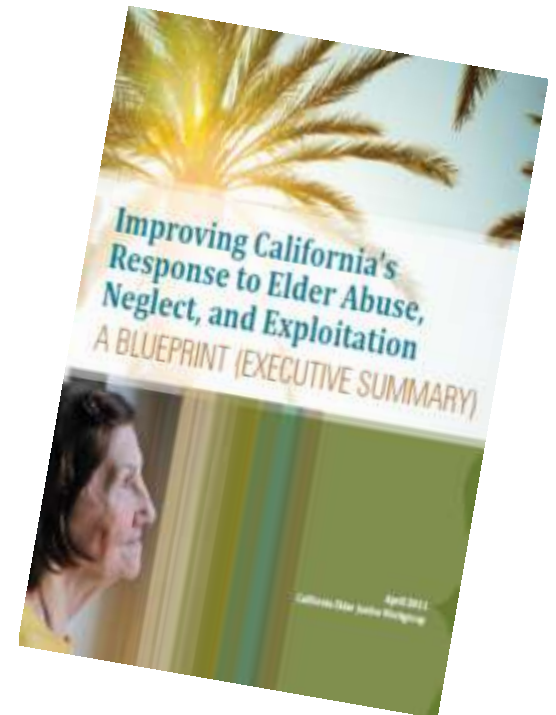
Benefits

- Improve client services
- Less “system inflicted” trauma to victims
- Professional development
- Better interagency understanding
- More respect and less burnout in the community
- Advocacy and impact on policy
- Data collection and research questions
- More efficient use of resources
- Better agency decision making



Statewide Elder Justice Coalitions

- California Elder Justice Coalition
- The Center for Elder Justice and Policy (William Mitchell School of Law, Minneapolis)
- Ohio Elder Abuse Task Force (Attorney General's office)
- Iowa Elder Abuse Initiative (State Unit on Aging)
- Others?



Multidisciplinary Teams:

The more complex the social problem is, the more benefit will derive from MDT's

- What response will work
- Which limited resources should be used
- How to allocate limited manpower
- Which services will effect a change
- Timely response to urgent problems

Local responses

- Multi-disciplinary Teams: case review
 - MDTs –
 - Complex abuse cases reviewed
 - Financial Abuse Specialist Teams
 - Financial abuse cases reviewed
 - Elder Death Review Teams
 - Suspicious deaths reviewed
 - Elder Abuse Forensic Centers
 - MDT on steroids



Local coalitions

- Public awareness
- Professional education
- Coordinated response
- Advocacy

Learn from our mistakes

- Think ahead and be clear about who is the client
- Important players may decide not to join in
- Consider data collection before starting
- Money helps, but isn't absolutely necessary
- Be open (help comes in mysterious ways)

Lessons Learned:

- Anticipate disparity in terminology/language:
Make it ok to ask for clarification
- Anticipate conflicted goals:
Consider articulating the conflicts
- Avoid/restrict personalizing issues:
Focus on agency, policy, limited resources

Lessons Learned:

- Recognize everyone's contribution:
 Make time to educate each other @ agencies, policies, history, limitations, etc.
- Create opportunity to collaborate:
 Partnering fosters understanding
- Make time to celebrate wins and recognize when everything you try doesn't work:
 Due diligence, watchful waiting, etc.

Resources

- National Center on Elder Abuse
- National Committee for the Prevention of Elder Abuse
- National APS Resource Center
- National Clearinghouse on Abuse in Later Life



www.ncea.aoa.gov



CENTER OF EXCELLENCE
ON ELDER ABUSE AND NEGLECT
UNIVERSITY of CALIFORNIA, IRVINE

www.centeronelderabuse.org

1 in 10 older Americans experience abuse each year

How will *you*
take a stand?



Join the movement
www.agelessalliance.org



- **Speak** out for justice
- **Collaborate** with other agencies and disciplines
- **Educate** the public, other professionals and policy makers
- **Initiate** changes in policy and protocols
- **Promote** resources for victim services

