



The impact of domestic violence on older people

*NSW Helpline
& Resource Unit*

Mary Ciantar



- **Introducing the NSW Helpline and Resource Unit**
- **What is abuse of older people**
- **Prevalence of abuse and ageism**
- **Signs, behaviours and impacts of abuse**
- **Broad impacts and risk factors**
- **A case study**
- **The 2014 NSW interagency approach in identifying and responding to abuse.**

The NSW Elder Abuse Helpline & Resource Unit



Funded by the State Government - NSW Ageing Strategy.

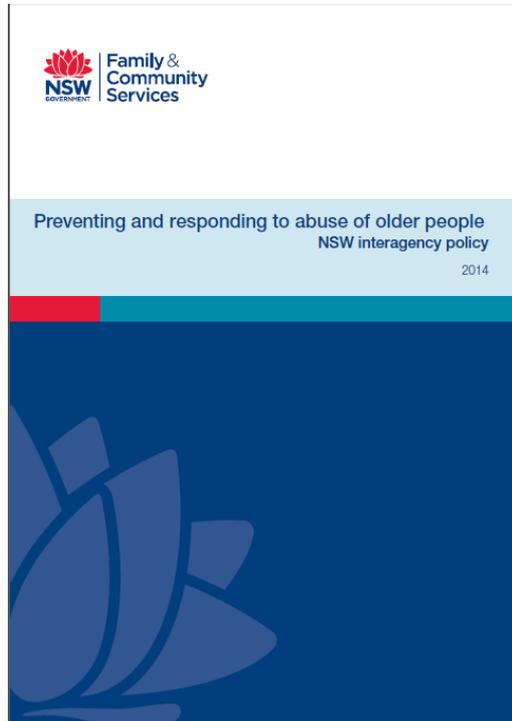
Provides information, support and referrals to any caller who has experienced, witnessed, or suspects abuse of older people living in the community.

Since February 2013, received nearly 3,000 calls.

Other roles include:

- development of resources
- awareness raising
- education
- implementation of the NSW Interagency Policy 2014: Preventing and responding to abuse of older people

An interagency approach



NSW interagency policy – 2014 - a state-wide response to the abuse of older people.

“...the success of an interagency approach is largely determined by the ability of staff from different agencies around the state to respond with both a common purpose and confidence to different cases of abuse.

...this [is] best achieved through refining the interagency protocol as a State policy which sets out principles for action to guide the work of the Helpline and Resource Unit and the development of local/regional protocols and practice guidelines at agency level.”

What is elder abuse?



Elder Abuse

Elder abuse can be defined as “...a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an **expectation of trust** which causes harm or distress to an older person”.

Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect.

World Health Organisation (WHO – 2002)



Abuse is a human rights issue

Older persons should be able to live in dignity and security and be free of exploitation and physical and mental abuse.

Principle 17, United Nations Principle for Older Persons



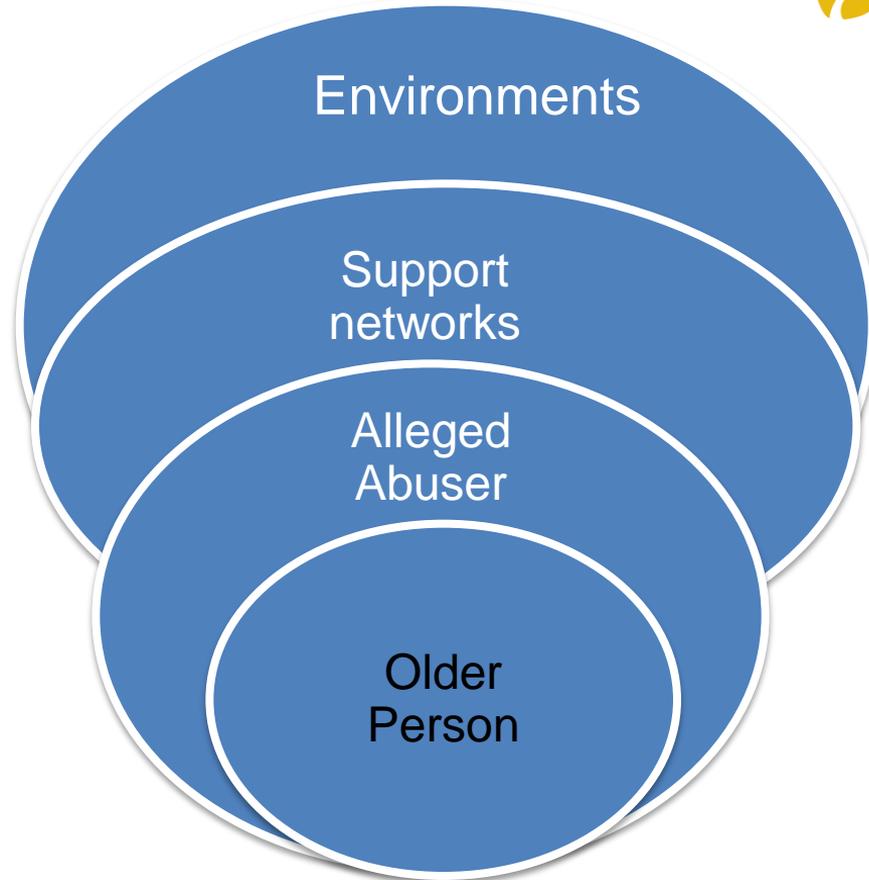
*Independence
Participation, Care
Self-fulfillment
Dignity*

A societal approach

This diagram shows that the older person does not live in a vacuum.

Social isolation is a key risk factor and therefore a societal approach adopted in supporting people to stay connected.

An interagency and cross sectoral response is needed.

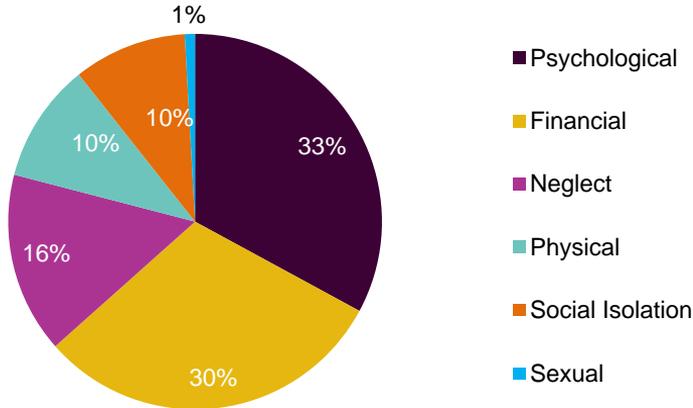


Elder Abuse – Prevalence of abuse

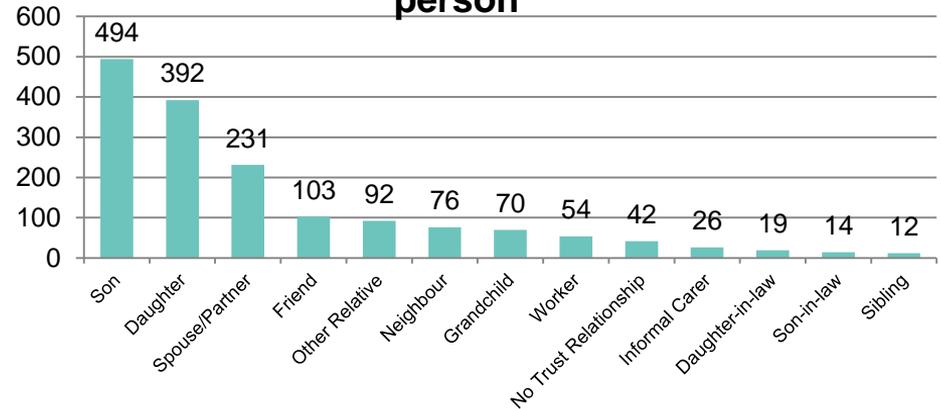
- Research suggests that as many as 50, 000 older people may have experienced abuse in NSW.
- It is estimated as few as one in five cases are reported.
- One of the major problems in dealing with abuse is the difficulty in recognising it.
- Symptoms and signs are often subtle and are attributed to the ageing process.
- Older people are often reluctant to admit that they are being abused by a family member or caregiver on whom they rely for their basic needs.

Helpline Statistics: (since inception March 2014 – Dec 2014)

Abuse Types



Alleged abuser's relationship to older person





Abuse types and some examples

Psychological
*(including social
isolation)*

Financial

Neglect

Physical

Sexual

- Pension skimming and taking/selling belongings without permission
- Misusing Powers of Attorney by taking money, assets or property
- Misusing the role of Guardian
- Forcing or coercing a person to change their will, sign documents
- Denying someone's access to, or control of their own funds
- Intimidating, humiliating, or harassing an older person such as verbally abusing them, frightening or threatening to hurt them, their pet or break belongings
- Neglecting a person's physical, medical or emotional needs such as preventing services from providing help to someone, or preventing a person from seeing family or friends
- Slapping, hitting, pushing or restraining an older person (physically and medically)
- Rape, indecent assault, sexual harassment, or behaving indecently. Non consensual sexual contact

Impact of abuse



NEWS



A Hunter Valley couple has pleaded not guilty to starving and abusing the 80-year-old man they were meant to be caring for. Police say the older man was found underweight and malnourished in his house in December last year. Officers were called a tip off was made to the Elder Abuse Hotline.

Documents tendered in the Local Court say he weighed just 40 kilograms and had not received medication for his diabetes or prostate cancer for nearly a year. His son and partner have pleaded not guilty to several offences, including domestic violence, intimidation, and failing to provide the necessities of life.

Court documents say the older man was often locked in his bedroom and he told police his son once said: "I detest feeding you". He also alleges he was only allowed out of the house to withdraw money, which he would give to his son and that his sons partner threatened to stab him and have him locked up in a dementia hospital. The court documents say a specialist found the older man does not have dementia.

The court heard he is now recovering and living alone, after originally needing double portions of all meals to boost his 40 kilogram frame.

Updated 25 Mar 2015, 2:12pm Wed 25 Mar 2015, 2:12pm

Signs and impacts from abuse

- Missing belongings, valuables and property
- Inability of an older person to access bank accounts or statements
- Stockpiling of unpaid bills
- Sudden inability to pay for daily essentials for the home including food, clothing, utilities.
- Inadequate clothing, complaints of being cold or too hot
- Poor personal hygiene and unkempt appearance
- Malnutrition, weight loss
- Injuries that have not been properly cared for
- Absence of required aids
- Sudden change in behaviour – unusual passivity or anger, loss of appetite, insomnia or anorexia, shame, depression, tearfulness, confusion and social isolation.

Signs and impacts from abuse

- Feelings of helplessness, excessive fear, nervousness around carer, reluctance to talk openly
- Broken or healing bones, pressure sores, missing teeth, burns, rope marks
- Torn or bloody clothing
- Unexplained STD or incontinence (bladder or bowel)
- Injury (scratches, bruises etc.) to face, neck, chest, abdomen, thighs or buttocks
- Trauma including bleeding around the genitals, chest, rectum or mouth
- An overly attentive carer in the company of others, frequent or sudden changes in a GP
- Caregiver won't let you talk to the older person alone or speaks for the older person
- Delay in seeking care, Older person told they are sick and need to stay in bed.

Broader impacts

- Loss of independence.
- Not reporting due to a sense of obligation to an adult child.
- Service providers can be unaware of differences between a power of attorney and enduring guardian – impact of having a substitute decision maker.
- Decisions being made are contrary to good care.
- Loss of income, stability, poverty.
- Lack of social contact , family relationships.
- Change in power balance between adult child/relation - abuser's sense of entitlement.
- Homelessness or tenancy in jeopardy.
- Anxiety and cognitive decline.
- Living in circumstances that can be defined as hoarding and squalor.
- Death.

Workers sometimes worry about issues of client confidentiality and not report to their manager or make a report to the NSW Police, application to NSW Civil and Administrative Tribunal.

Some risk factors



Older person

- Social isolation or living alone
- Dependency
- Cognitive capacity issues – such as dementia
- Insecure or inadequate accommodation
- Financial difficulties
- Poor physical health/frailty
- Physical/Psychological dependency on alleged abuser
- Family conflict, history of family violence
- Lack of appropriate services involved
- Substance abuse / gambling addiction
- Cultural factors.

Abuser

- Carer stress
 - Lack of education/experience in the caring role
 - Feeling burdened or resentful
 - Caregivers with inadequately treated mental health and/or substance abuse problems
- Cognitive decline
- Dysfunctional relationships
- History of family violence
- Financial difficulties
- Gambling and/or financial problems
- Drug and alcohol issues
- Cultural factors.

The grand compromise



The Sydney Morning Herald

National

Elderly folk accept rorts to maintain family ties

Many elderly people put up with their children siphoning off their money because they don't want to jeopardise family relationships by confronting them, according to new research.

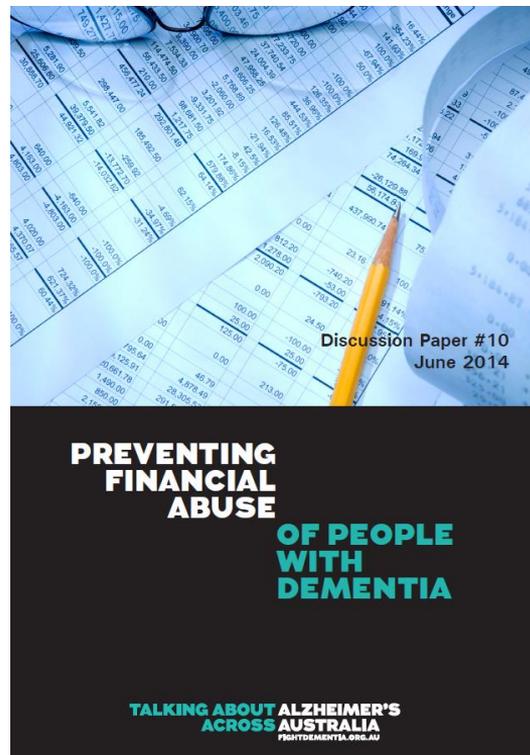
Research involving more than a decade of interviewing older people, public trustees, social workers and aged care staff has been released by the University of Queensland.

"A lot of older people know they're being ripped off and are prepared to put up with it, to a certain point," Professor Jill Wilson said in a seminar called *Minding the Money: Families and the Management of Older People's Assets* at the Australian Institute of Family Studies this week.

ALZHEIMER'S AUSTRALIA NSW

PREVENTING FINANCIAL ABUSE OF PEOPLE WITH DEMENTIA

- Survey
- Interviews
- Focus groups
- Key stakeholders
- Expert advisory committee
- Review of previous research
- Law and Justice Foundation Grant



"I'm convinced money is thicker than blood, and I think more and more people will take advantage of people with dementia in family situations."
(AlzNSW consumer)

"...when someone has dementia they can be easily swayed to make a PoA not in their best interests or to change one that is also not in their best interests."
(survey respondent – legal sector)

Responding to abuse of older people

1. Identify abuse

- Suspected, witnessed or disclosed.

2. Assess risk

- If in immediate danger, contact police/ ambulance where appropriate.
- Do not engage abuser, protect evidence.

3. Provide support

- Provide emotional support (consider the need for an interpreter). Listen, acknowledge and validate.

4. Record and document

- Report to supervisor. Ensure documentation/reporting is completed. Follow own procedures.

5. Refer and follow up

- Provide information about referral options to client, consent, case conference, interagency approach.
- Monitor and follow up.

Three key questions determining the response



- Is this an emergency?



- Does the person have capacity?



- Has the person given consent for intervention?

Meet Sally

Caller to helpline: by a Coordinator/Manager

- Sally is 79 yrs old, has been diagnosed with early signs of dementia.
- She lives in her own home with her dog and was receiving home care services which she has cancelled as she cannot afford to pay.
- Sally has 3 daughters and 1 son (Jeff).
- Jeff moved back in with Sally some years ago (after her husband died).
- Jeff keeps American pit bulls in cages in Sally's backyard.
- Jeff pays no rent, receives a carer's payment (previously disability support) and often demands money from Sally.
- On a recent visit to one of her daughters, Sally revealed that she can no longer afford to support Jeff anymore and is afraid of his behaviour and his dogs.
- Sally always took pride in her appearance, but her daughter noticed that Sally looked dishevelled and thin and had some bruise marks to her upper arm.
- Sally has now moved in with her daughter 300 kms away to a granny flat..

What abuse types might be present?

- psychological, financial, neglect, physical.

What are some of the health, legal and social issues?

- Dementia (Sally)
- Health (Jeff)
- Loss of potential income from home to fund care
- Sally has moved to an area away from friends.

What don't we know?

- What does Sally want?
- What are Jeff's behaviours?
- Anything else?

What does Sally want?

- Sally is 79 yrs old, has been diagnosed with early signs of dementia.
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If Sally wanted Jeff to move out

- Legal Aid brochure – adult children living at home what to do if you want them to leave
- Apprehended Domestic Violence Order
- Aged Care Assessment
- GP

If Sally wanted Jeff to stay

- Apprehended Domestic Violence Order
- Conditions: tenancy agreement, remove dogs
- Centrepay
- Aged Care Assessment
- Capacity – NSW Civil and Administrative Tribunal

Role of the Elder Abuse Helpline

A person who will help you...

- Identify what the older person wants
- Develop a support and action plan (incl. referral options)
- Explore all possibilities
- Empower the older person or advocate for the older person
- Understand the rights of the older person and demystify some of the options (e.g. AVO's, Behavioural Management Orders, Community Treatment Orders, Powers of Attorney, Legal Support Services, Guardianship Tribunal).





Questions?

NSW Elder Abuse Helpline & Resource Unit

Monday – Friday (8:30am – 5:00pm)

www.elderabusehelpline.com.au

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1800 628 221 – Anyone can make the call.