

CAREGIVER ABUSE, NEGLECT AND EXPLOITATION

The Journey Through Caregiving



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Introduction

The purpose of this module is to help community-based organizations prepare family caregivers to care for their elderly loved one who has a chronic disease or disability. It is designed to be tailored to specific training needs and to be a helpful resource to caregivers in their homes.

It is written in a question and answer format from the perspective of the family caregiver. The questions address concerns that caregivers often have.

Because each module was designed to stand alone, some information found in one section may be repeated in another. This repetition was built into each module so trainers will not have to search for relevant information from one module to another.

Transparencies, Microsoft PowerPoint presentations, and activities have been developed for each module. Trainers may choose to use all of these materials in a training session or only one of these references. These materials have been developed to help trainers reinforce the information found in each module.

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❖ ELDER ABUSE AND NEGLECT

Caring for another person can be one of the most rewarding and challenging jobs that you will ever confront. You may be wondering how you will balance all of the demands in your life: family, work, and now caring for another person. Will there be enough hours in the day to do all of the things that must be done? If something has to give, what should it be? Are you being fair to your family? How will you know what to do? These and other questions are probably racing through your mind. This series of training modules is designed to assist in answering these and other important questions.

Did you know.....

- Abuse can happen anywhere.
- There are no social or class barriers.
- It is wrong to stereotype the typical victim and typical abuser – it can happen to anyone.
- Abuse can be premeditated/deliberate.
- Abuse is not just related to caregiver's stress.

(Adapted Pritchard, 2000)

Often caregivers consider what they can or should do for others while neglecting themselves. When they do this, the stress can build leading to actions that would not normally occur. The caregiver may yell or even hit. Is this abuse? What are other ways of dealing with frustration or stress? This module will discuss the various types of abuse, causes, and alternative ways of dealing with difficult situations.

Abuse is not a normal reaction to stress and most caregivers, even in extremely stressed situations, will not resort to it. It is, however, important to understand what abuse is and how to prevent it.

What is elder abuse and neglect?

North Dakota law has specific definitions of abuse and neglect. They may vary from other states, but are similar in many ways. They are:

Abuse refers to any willful act or omission of a caregiver or any other person which results in physical injury, mental anguish, unreasonable confinement, sexual abuse or exploitation, or financial exploitation to or of a vulnerable adult.

Physical indications of abuse:

- Multiple bruising, not consistent with a fall
- Black eyes, slap marks, kick marks, grasp marks, finger tip bruising, other bruises
- Burns, such as cigarette burns, dunking burns (hands/feet being immersed in boiling hot water)
- Fractures not consistent with falls
- Stench of urine or feces
- Indications of malnutrition or over-feeding
- Administration of inappropriate drugs

(Pritchard, 2000)

Neglect is failure of a caregiver to provide essential services necessary to maintain the physical and/or mental health of a vulnerable adult.

Indicators of neglect:

- Lack of basic care
- Abandonment
- Not providing proper food or fluids
- Failure to provide proper health care
- Lack of personal care
- Not dressing someone (e.g., from the waist down because they are incontinent)
- Not dressing someone appropriately (e.g., wearing thin clothes in winter)
- Refusing to buy new clothes for someone who has gained/lost weight
- Being left to sit in urine/feces
- Absence of mobility aids so the person's movements are restricted
- Absence of necessary medication
- Improper fitting or damaged dentures
- Nonfunctioning hearing aids, including lack of batteries
- Isolation (e.g., person may be locked in a room or confined space with only basic necessities)
- No social contact or stimulation

(Pritchard, 2000)

Sexual abuse includes sexual offenses. It occurs when a person is involved in sexual activities to which they have not consented or, if they are in a confused state, do not truly comprehend (Pritchard, 2000).

Indicators of sexual abuse:

- Inappropriate touching
- Fondling
- Inappropriate kissing
- Oral contact
- Genital contact
- Digital penetration (vagina or anus)
- Rape (vagina or anus)
- Penetration with objects
- Exploration
- Pornography – forced to participate in, forced to watch videos, forced to read magazines, etc.
- Ritual/satanic abuse
- Initiating unwelcomed talk about sex
- Proposing unwelcomed sexual contact

(Adapted Pritchard, 2000)

Financial exploitation is the taking or misuse of the vulnerable adult's property or resources by means of undue influence, breach of fiduciary relationship, deception, harassment, criminal coercion, theft, or other unlawful or improper means.

Indicators of financial abuse:

- Cash is stolen.
- Pension book is taken.
- Benefit/pension is cashed and all/or part of the money is not given to the older person.
- A person says that something cost more than it did (e.g. shopping).
- A person is made appointee (through the Department of Social Security) or acquires power of attorney (through the Court of Protection) and then withholds money from the older person.
- Money is withheld to such a degree that the older person does not have enough money to buy food, pay bills, rent, etc.
- People say they are paying for groceries, bills, rent, etc., but they are not.
- A person is persuaded/forced to transfer money, bank accounts, property, assets, financial affairs over to another person.
- An older person is not allowed to be admitted to residential care by a relative who is expecting to inherit money/property when the older person dies.

(Pritchard, 2000)

Mental anguish is psychological or emotional trauma, characterized by behavior changes or by physical symptoms, which may require treatment or care.

Indicators of mental anguish (emotional abuse):

- Humiliation
- Intimidation
- Ridicule
- Causing fear/mental anguish/anxiety
- Threats/threatening behavior
- Bullying
- Verbal abuse (e.g., shouting, swearing)
- Harassment
- Lack of acknowledgment
- Isolation/withholding social contact
- Denial of basic rights (e.g., choice, opinion, privacy)
- Being over protected – not allowed to do things, kept back

(Pritchard, 2000)

Self-neglect is the inability or lack of desire by the vulnerable adult to maintain and safeguard his or her own physical and/or mental health. It is important to remember, however, that often older adults are dealing with limited resources that may limit their ability to fully care for himself/herself.

Indicators of self-neglect:

- Refusing needed assistance
- Not taking medications as prescribed
- Not eating for proper nutrition
- Home in disrepair or dirty

Who is most vulnerable to being abused?

Anyone may find themselves in an abusive situation, however some people are more vulnerable to abuse. It is estimated that two-thirds of all victims of abuse are female and over the age of 78. That means that a third of all people who are abused are male. Abuse knows no gender or age limits.

While there is no set pattern of who will be abused, there are certain characteristics that make someone vulnerable. A study that was completed in North Dakota identified that often the victim is a female who lives alone but relies on others to provide some cares. This person has recently experienced a decline in physical or mental health, which has lead to an increase in stress. In addition, often the person has had a recent change in their economic conditions, usually a decrease. It could, however, include a

financial gain. A key component is the change in the relationships and roles. It is difficult, at best, to go from being a care provider to a care recipient.

Also, the caregiver can be abused emotionally or physically by the person for whom they are caring. It can be difficult to know how to handle this and you may question where to turn. Seek help.

Reactions to abuse:

- Deny that anything is amiss, with an accompanying emphasis that things ‘have never been better’.
- Resign, be stoicism, and, sometimes, accept incidents as being part of being old/vulnerable.
- Withdraw from activity, communication, and participation.
- Change behavior and have inappropriate attachments. Fear subsequently combined with depression and a sense of hopelessness.
- Exhibit mental confusion.
- Have anger and physical/verbal outbursts.
- Seek attention/protection, often from numerous sources, some of which can be unlikely.

Who abuses?

Again, anyone who finds himself or herself in a stressful situation may say something or act in a way that could hurt another. A majority of care providers do not abuse. It is important that when we find ourselves in that situation we stop, take a deep breath and try to find a more positive way to respond.

Some people have grown up in an abusive situation or learned abusive behavior that drives their reaction to others. Several years ago a research study was conducted in North Dakota to learn more about abuse of older adults in the state. The following table lists the greatest risk factors for causing abuse:

Greatest risk factors for causing abuse in North Dakota:

- Being male (although this is different from national research that finds in caregiving situations more females are the abusers because they are more often the care provider).
- Under the age of 60.
- Most often a relative.
- Often has a history of mental illness.
- Had a recent decline in mental health.
- Abuses alcohol.
- Often the primary caregiver.
- Often lives with or has access to the adult they abuse.
- There is a change in the family roles from being cared for to being the care provider.
- A prior history of violence.

What causes abuse?

The reasons for abuse are as varied as the people who abuse. However, there are certain situations that are more likely to trigger abuse.

Stress is not a cause of abuse, but can intensify any problems. If you are not sure when stress is greatest for you, it may be helpful to journal for at least two weeks. Then re-read the daily journals paying close attention to times when you were stressed. Can you find a pattern?

If so, try to reduce the stress by making a plan for dealing with the stressful situation before it occurs. This could include going for a walk or to a different room or asking someone to take on the care giving for a time. Ask for help. Please realize that it takes strength to know when you can't do it all by yourself.

What pushes care providers over the edge?

- Behavior traits of the older person.
- The nature of the tasks that have to be performed on a daily basis.
- Frustration experienced by the care provider.
- The care provider's sense of isolation.
- Lack of services and/or other community support.

(Pritchard, 1996)

Where can I find help?

If you identify with any of these risk factors or if you find yourself making poor reactive choices, please seek help. Each region of the state has a human service center that offers mental health services. These are usually available on a sliding fee scale that is affordable to everyone. In addition, there are crisis centers, private counselors, and clergy who could help. If you have problems controlling your emotions or are stressed, please seek help today. You and the person you care for are worth the effort.

Can people in long-term care facilities (nursing homes) be abused?

Yes. In long-term care facilities, different people can be the victims or the abusers. It may be a member of the staff who abuses a resident, a resident who abuses a member of the staff, a resident who abuses another resident, or an outsider who abuses a resident (Pritchard, 1996). While most people working in institutions are there because they want to help, like other caregivers, some are abusive. If you believe that someone living in an institution is being abused contact a regional long-term care ombudsman, North Dakota Aging Services, North Dakota Division of Health Facilities or the local police. (A long-term care ombudsman is a person trained to receive, investigate, and resolve concerns affecting residents.)

Signs of institutional abuse:

- There is individual abuse, where a resident or residents are hit, are verbally abused, or have their money stolen or misused.
- The administration of the facility:
 - Awaken residents too early in the morning.
 - Does not provide flexibility in choice in the time of going to bed.
 - Denies residents' opportunity for getting drinks and snacks.
 - Limits choice and consultation about meals; the last meal being served too early.
 - Refuses residents' personal possessions, furniture, telephone, TV, radio, etc.
 - Has no procedure for washing, mending, and marking personal clothing.
 - Provides too few toileting facilities.
 - Does not help residents stay clean and tidy; does not provide underwear.
 - Handles medical complaints poorly.

(Adapted Pritchard, 1996)

Possible signs of institutional abuse:

- An individual living in an institution may be in danger of abuse if there is/are:
 - Failure to agree within the managing agency about the purpose or/and tasks of the home.
 - Failure to manage life in the center/home in an appropriate way. (When things go wrong they are not sorted out, e.g., maintenance of building.)
 - Poor standards of cleanliness.
 - Low staffing levels over a long period of time.
 - Lack of knowledge or confusion about guidelines.
 - Breakdown of communication between managers of the home.
 - Staff factions or anger.
 - Staff working the hours to suit themselves.
 - Staff who drinks heavily on and off duty.
 - Staff ordering residents around or even shouting at them.
 - Lack of positive communication with residents.
 - Low staff morale.
 - Failure by management to see a pattern of events which often are treated as individual instances in isolation.
 - Punitive methods adopted by staff against residents.

(Pritchard, 1996)

What are the legal alternatives?

If you believe that someone you know is being abused there are legal alternatives that may be used to protect the person or the person's property. Contact an attorney, the state's attorney's office, Legal Assistance of North Dakota, or Aging Services Division of the Department of Human Services for more information.

The following definitions provided by Legal Assistance of North Dakota will help you to determine what may be needed. If you would like additional information you could also go to www.legalassist.org and click the tab "Legal Assistance of North Dakota" on the left, then click "Publications" at the top for a list of brochures. Brochures often include "Frequently Asked Questions" that will give more information.

Financial Power of Attorney

- A document in which you appoint someone to handle your financial matters.
- The person creating the document is the principal.
- The person appointed is the attorney-in-fact.
- Your attorney-in-fact will usually be a relative or friend (not an actual attorney).

Durable Power of Attorney for Health Care – A document in which you (the principal) appoint someone (the agent) to make health care decisions for you. It contains your wishes on the medical treatment you do or do not want to receive.

Conservatorship

- A conservatorship is a court action which appoints someone (conservator) to handle your money and property.

- A conservator is appointed when you cannot manage your own property and affairs due to a mental or physical illness/disability, advanced age, chemical dependency, or confinement.
- Under North Dakota law, the Conservator's powers must be limited to only those financial or business functions which you are no longer able to handle.

Guardianship

- A guardianship is a court action appointing someone (guardian) to make personal decisions for you (ward).
- A guardian is appointed when you lack the capacity to make/communicate responsible decisions due to an illness/ disability or when the incapacity endangers your health or safety.
- Guardianship deprives persons of their freedom to decide how they will lead their lives.

Caring for another person can be extremely stressful, even when there are good relationships. It is important that each of us develop a support network; someone to talk with, a shoulder to cry on and respite services when we need them. Plan ahead so that when the burden becomes too great we know who where we can turn.

If there are concerns that a relationship may include abuse or neglect seek professional help. Don't wait until it becomes a crisis.

❖ RESOURCES

References

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