Elder Abuse and Dementia

Talitha Guinn
“I’m 75 and you’re behind me!”
Definitions

- **Elder**: any person residing in California who is 65 years of age or older.

- **Elder abuse**: acts of omission or commission by a person who stands in a trust relationship that result in harm or threatened harm to the health and welfare of an older adult.

- **Caregiver**: any person who has the care, custody or control of, or stands in a position of trust with, an elder or dependent adult.
Definitions

- **A dependent adult** is aged 18-64 and can be physically, mentally or emotionally disabled.

- **Disability** can also be temporary:
  - if you are hospitalized, you fall under *temporarily disabled* provision.
National Elder Abuse Incidence Study

❖ 5 million elders abused nationally every year or

❖ 1 in 10
Under Reporting

- Reluctance to admit
  - Shame
  - Fear of losing independence or being moved
- Unlike kids, older adults can quietly disappear from society without much inquiry
- Signs of abuse may be missed/mistaken for “usual aging”
- Dementia! May be too incapacitated to report
Why a Special ‘Elder’ Category?

- Dementia = Special Issue
- Dementia = memory problem + other cognitive problem
- Dementia affects:
  - 3-5% of those 65+
  - 40-50% of those 85+

From Dr. Laura Mosqueda's UCI Center of Excellence in Elder Abuse and Neglect website
Dementia and Elder Abuse

- Research indicates that people with dementia are at greater risk of elder abuse than those without. \(^1\&^2\)

- Approximately 5.1 million American elders over 65 have some kind of dementia. Close to half of all people over 85, the fastest growing segment of our population, have Alzheimer’s disease or another kind of dementia. By 2025, most states are expected to see an increase in Alzheimer prevalence.\(^3\)

- One 2009 study revealed that close to 50% of people with dementia experience some kind of abuse.\(^4\)

- A 2010 study found that 47% of participants with dementia had been mistreated by their caregivers.\(^5\)
Why a Special ‘Elder’ Category?

This means the person with dementia

- May be unable to report
- May not be believed
- May be unable to recognize abuse

From Dr. Laura Mosqued-orienteda's UCI Center of Excellence in Elder Abuse and Neglect website
Vulnerabilities to Mistreatment

- Difficulty defending oneself, physically and emotionally
- May be more dependent on others for assistance than in the past
- Fear of losing independence if a report is made, so more susceptible to threats
Aging in SF

- SF has the highest percentage of senior citizens (14.6%) in an urban area in California and the highest median age.
- 40% of households with a resident 60+ are single person households.
- 1 in 3 persons 75+ lives in poverty.
- SF’s APS receives about 6,000 reports of elder abuse per year.
Scam suspect arrested

YVETTE URREA
Staff Writer

SAN MARCOS — An Encinitas man accused of scamming senior citizens with a phony insurance policy will be arraigned today.

Sheriff's investigators arrested Kenney W. Foster, 52, on Tuesday after serving a search warrant at his rented home in the 200 block of Gardendale Road, Detective Deborah Boyd said. Detectives also gathered evidence that could tie him to other cases of elder financial abuse, she said.

“We did find numerous mobile-home park directories from all around North County (at his house),” Boyd said.

Detectives have not yet determined how many victims are involved or what the monetary loss was to them, she said.

Boyd said they began the investigation in mid-April after receiving a tip from the Adult Protective Services phone line about a suspicious insurance policy. When detectives looked into it, they found the policy was a scam and a couple in their 80s had been victimized, she said.

Foster allegedly phoned potential victims and claimed to represent National Home Care, then made appointments to meet the senior citizens, Boyd said. The home health-care policies, which cost about $1,000, included promises to bring the seniors prepared meals and do light cleaning around the home, she said.

If the policyholders were in good health, they would not call and realize the policies were phony, Foster said.

Foster was arrested on three counts of elder financial abuse and two counts of theft by false pretenses stemming from an earlier Oceanside case, Boyd said. He has an additional count of elder financial abuse from the San Marcos case, she said.

Foster has been booked into Vista jail and is being held on $145,000 bail.

If anyone has bought a National Home Care policy from Foster, they are asked to contact her at (760) 510-5246.
Reportable Abuse: California

- Physical Abuse
- Sexual Abuse
- Financial Abuse
- Neglect
- Self-Neglect
- Abandonment
- Abduction
- Psychological (optional report)

Welfare and Institutions Code 15610
Physical Abuse

- The use of physical force that may result in bodily injury, physical pain, or impairment.

- May include striking, hitting, beating, pushing, shoving, shaking, slapping, kicking, pinching, and burning. Inappropriate use of drugs and physical restraints, force-feeding, and physical punishment.
Case of Mr. R

- Demented and Diabetic elder 83-years-old
- Caregiver withheld and/or overdosed with insulin and sugary foods
- During altered states caregiver forced client to sign over home, car, bank accounts
- Financial institution ROA due to client’s inability to report
- Charges filed for two types of abuse.
Financial Abuse

- The illegal or improper use of an elder or dependent adult’s funds, property, or assets.
  - Examples include:
    - cashing a person's checks without permission
    - forging a person's signature
    - misusing or stealing a person's money or possessions
    - coercing or deceiving a person into signing any document (e.g., contracts or will)
    - and the improper use of legal documents.
New study shows that the first sign of dementia is not memory loss, but the inability to manage finances.

Elder’s with early stage dementia vulnerable to financial abuse.
Warning Signs

- Financial
- Irregular pattern of spending/withdrawals
- Frequent purchases of inappropriate items
- Withdrawals made in spite of penalties
- Bills not paid
- Utilities turned off
- Presence of “new best friend” or “sweetheart”
Domestic Violence in Late Life

- Violence between spouses, intimate partners, or couples who are dating.
- Can be physical, emotional, or sexual abuse.
- Can occur regardless of sexual orientation or gender expression.
- Power and Control dynamics
Case of Mr. and Mrs. F

- Both in their late 80s
- Mrs. F mildly demented
- Screaming at bus stop
- Mr. F battered her with his cane
- She was hospitalized, then in temporary shelter
- Investigation - he was beginning to decline, couple very isolated, no history of prior abuse
- Home health and supports in place
Case of Mrs. V

- Hospitalized for broken hip
- Advanced dementia
- Husband escalating anger
- Instructed his wife not to eat
- Hospital concerned by husband’s behavior called APS
- Assault = ban from hospital
- APS sought ROA on client’s behalf
- Client placed in skilled nursing facility under pseudo name
Sexual Abuse: The Great Taboo

**Encinitas man accused of raping 82-year-old woman**

UNION-TRIBUNE

ENCINITAS — A 50-year-old man is in jail on suspicion of raping an 82-year-old woman last week. The Sheriff’s Department released little information about the attack, saying only that it occurred on or around May 20. The victim remains hospitalized from injuries sustained in the attack. A sheriff’s official declined to provide additional information on the woman’s condition.

The suspect, identified as Jonathan “Jack” Wells of Encinitas, was arrested yesterday on suspicion of rape and elder abuse. Wells was booked into the Vista Jail on $250,000 bail. The sheriff’s official said information about the rape was not released until last night because of fear the investigation would be jeopardized.
Sexual Abuse

- Any non-consensual sexual contact of any kind. Sexual contact with any person incapable of giving consent is also considered sexual abuse.

- Includes: unwanted touching, coerced nudity, making someone watch pornography, and sexually explicit photographing.
80% of women with a disability will be sexually abuse at some point in their life. 22

Among developmentally disabled adults, as many as 83 percent of the women and 32 percent of the men have been victims of sexual assault. Persons with disabilities are 1.5 to 5 times the risk of sexual abuse and assault as are members of the general population. 22

More than 90 percent of people with developmental disabilities are sexually abused at some point in their life. 23

About half—49 percent—of persons with developmental disabilities who experience sexual abuse experience 10 or more abusive incidents. 24
Case of Mrs. C

- Demented elder
- Living in a care facility
- Staff left door left ajar after a smoke break
- Sexual assault
- Staff slow to recognize warning signs due to client’s inability to articulate harm = lag time in reporting
- Suspect fled country before police investigation began
Neglect

- The refusal or failure to fulfill any part of a person's obligations or duties to an elder or dependent adult.

- Also, failure of a person who has responsibility to provide care (e.g., pay for necessary home care services) or the failure of an in-home service provider to provide necessary care.
Neglect

- Not providing life necessities such as:
  - Food
  - Water
  - Clothing
  - Shelter
  - Personal hygiene
  - Medicine
  - Comfort
  - Personal safety
Warning Signs

- Person is lying in urine and feces for hours or days
- Person is dirty, has elongated nails and matted hair, is living in filth
- Person becomes malnourished and dehydrated because food and water are not provided
- Person develops deep, open pressure sores (down to her bones) on her back and heels because no one repositions her
Case of Mrs. G

- Mid 90s - monolingual Chinese
- Neighbor reported suspicions of neglect
- APS investigated-
  - Emaciated, bedsores, contracted, dehydrated
  - Dementia + non-verbal
- Called 911
- Hospitalized
- Daughter was overwhelmed, under-trained, afraid of immigration
- Home hospice instituted
Self-Neglect: Also a mandated report

- The behavior of an elder or dependent adult that threatens his/her own health or safety: For example, refusal or failure to provide himself/herself with adequate food, water, clothing, shelter, personal hygiene, medication, and safety precautions.

- Look for signs of dementia, depression, untreated drug or alcohol abuse.
Case of Mrs. A

- Demented
- Husband died
- No children
- No family in the area
- Disease progressed
- Became withdrawn
- Client conserved
- Placed in a care facility
Abduction

- The removal from this state of any elder or dependent adult who does not have the capacity to consent to the removal or is a conservatee without the consent of the conservator or the court.
Abandonment

- The desertion of an elder or dependent adult by anyone having the care or custody of that person under circumstances in which a reasonable person would continue to provide care.

- Leaving person at a hospital without ID and driving away.
Case of Mr. K

- Demented elder
- Daughter added her name to title for his house; signer on bank accounts
- Removed tags from father’s clothes and took his wallet
- Left him at SF International Airport
- Took police over 2 weeks to figure out who he was
Who is abused?

- In 66% of all reports of abuse, the victim is a woman
- People over 80 years of age are 2 to 3 times more likely to be victims
- People with cognitive difficulties
- People who are isolated
- People with behavioral issues
Who Abuses?

- **90%** of abuse of elders and dependent adults is perpetrated by family
- **50%** are adult offspring
- **20%** are spouses/intimate partners
- **48%** are women
- **52%** are men
- **30%** are themselves over 60 years of age
Signs of Abuse

- Caregiver
- Excessive concern about costs
- Attempts to dominate elder
- Won’t let elder talk
- Won’t let you see elder alone
- Verbal abuse of elder or you
- Controlling behavior
An abused client may:

- Have repeated “accidental” injuries that are suspicious.
- Visit the doctor for vague complaints or acute anxiety.
- Avoid seeking medical attention for injuries until days or weeks after injury occurred.
An abused client may

- Express a sense of isolation – no access to friends, family or community
- Refer to a family member or caregiver’s “anger” or “temper”
- Have a history of alcohol or drug abuse or suicide attempts
- Present as a “difficult” patient
Reporting Elder Abuse
You are a mandated reporter under California law if:

- You have assumed full or intermittent responsibility for care or custody of an elder or dependent adult
- Whether or not you receive compensation.

*(Welfare and Institutions Code section 15630(a))*
Mandated Reporter

Also includes, **but is not limited to**

- Health Practitioners
- Police Officers
- Fire Fighters & Paramedics
- Social Workers
- Faith Leaders
- Home Health Workers
- ILRC staff, Regional Center staff
- Nutrition Services Staff
- Banks 😊

*(Consult Welfare & Institutions Code 15630(a) for complete list.)*
Reporting

- Failure to report: jail, fine ($5K) or both!
- If report is unsubstantiated: no penalty if report was made in good faith
What if I am not sure?

- You don’t need to be sure.
- You simply need to suspect the abuse.
- APS will investigate the alleged abuse.
- You can always call APS to consult about a situation.
- They are happy to listen and to give you advice and recommendations.
Do I have to give my name?

- Mandated reporters are required to give their name when reporting abuse. However, your name will NOT be revealed to the victim or the alleged abuser.

- Otherwise, no.
Your Legal Obligations

- Must make a phone report within **24 hrs**
- Must submit **SOC341** within **72 hrs**
- Any selected member of a team may be assigned to make the report.
- The person who observes or reasonably suspects the abuse is the person liable for ensuring that the report is made.
Can a client refuse APS services?

- Yes, APS remains a voluntary service and can only act with the consent of the client.

- If a mentally competent elder or person with a disability, who understands the consequences of his/her decisions, makes a decision to engage in acts that threaten his/her health/safety, he/she has the “right to folly” and may refuse services offered by APS.
Local Resources

- **Institute on Aging**
  - Elder Abuse Prevention Program **415.750.4188**
    - Leads MDT bi-monthly- WELCOME!
  - Elder Abuse Forensic Center [www.sfeafc.org](http://www.sfeafc.org)
  - Friendship Line: **415.752-3778**

- **Legal Assistance for the Elderly** **415.861.4444**
Most Alzheimer’s patients will eventually get lost in familiar surroundings. Safe Return is a national program that registers persons with Alzheimer’s disease or dementia in case they get lost. Bracelets, necklaces, or other identifying articles are issued.

If a confused elderly person is found, call Safe Return to share information, even if the “wanderer” bears no pertinent identifying data.

1-800-572-1122
There’s an App for that!

**Over 2300 downloads!**

3 states making apps based on ours
- Boulder County Area Agency on Aging and
- William Mitchell College of Law in Minnesota
- Virginia Center on Aging with Virginia Commonwealth University

Learn more
http://www.centeronelderabuse.org/368ElderAbuseCA.asp
YOU are the good news!

You can save lives and end suffering by reporting elder abuse.

Contact Adult Protective Services
Phone 415-355-6700
Fax 415-355-6750