

Prevention of abuse of persons who lack capacity

How can we as a society do this?

- build safer organisations for older persons or persons who lack capacity
- reduce the risk of abuse
- raise awareness and minimise access and opportunities for abuse to take place
- empower persons to share
- encourage participation in programmes

Why is prevention and protection important?

- value of human spirit
- physical, sexual and financial abuse of persons who lack capacity have lasting effects on victims
- harm can be minimised when intervention takes place as early as possible
- intervention can often save the assets, health, dignity or even the life of a person who lack capacity
- abuse can continue and often escalates if there is no intervention. Known or suspected cases of abuse should be reported.

Definition of Abuse

WHO defines elder abuse 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."

- Physical harm
- Sexual harm
- Emotional harm
- Neglect and self neglect
- Financial exploitation
- Healthcare fraud and abuse
- Social abuse or isolation

Myths ?

Physical, Sexual and Financial Abuse should not be tolerated

- Offenders tend to target agencies that work with vulnerable people
- Majority of those who offend **do NOT** have criminal convictions for their abuse and are known to the victims
- Agencies can prevent abuse

Some Statistics

- Can this be the case?
 - ... that reported abuse cases in Singapore has doubled in the past 3 years?
 - ... that for every 1 reported case, experts say there are 5 unreported ones?
 - ... that in at least 50% of reported cases, elders are abused by their own children?
 - ... that 60 cases of Family Violence (including elderly abuse) are reported to Trans Safe @ Bedok every month?

Physical Abuse

Physical abuse is non-accidental use of force against a person who lacks capacity that results in physical pain, injury, or impairment. Such abuse includes not only physical assaults such as hitting or shoving but the inappropriate use of drugs, restraints, or confinement.

Possible indicators of Physical Abuse

- Uncombed or matted hair
- Poor skin condition or hygiene
- Unkempt or dirty
- Patches of hair missing or bleeding scalp
- Any untreated medical condition
- Malnourished or dehydrated
- Foul smelling
- Torn or bloody clothing or undergarments
- Caregiver's refusal to allow you to see the elder alone
- Signs of being restrained, such as rope marks on wrists
- Scratches, blisters, lacerations or pinch marks
- Unexplained bruises or welts
- Burns caused by scalding water, cigarettes or ropes
- Injuries that are incompatible with explanations
- Injuries that reflect the outline of an object ie belt, cord, hand
- Report of drug overdose or apparent failure to take medication regularly (a prescription has more remaining than it should)

Sexual Abuse

Sexual abuse is any sexual activity or behaviour for which the older person does not consent or is incapable of giving consent (eg a person with dementia)

Sexual assault and abuse includes a range of offences such as rape, indecent assault and sexual harassment. It can also include sexually exploitative or shaming acts such as:

- Leaving a person in a state of undress
- Forced viewing of sexually explicit materials or images
- Sexually suggestive comments
- Exhibitionism
- Inappropriate touching
- Uninvited sexual approaches

Possible Indicators of Sexual Abuse

- Bruises around breasts or genitals
- Unexplained venereal disease or genital infections
- Unexplained vaginal or anal bleeding
- Torn, stained, or bloody underclothing
- Discloses sexual abuse
- Constant complaints of headaches and/or abdominal pains
- Persistent habit disorders, (e.g. sucking, biting, rocking, etc.)
- Sleep disorders
- Inhibition to socialise
- Serious difficulties relating to peers

Emotional or Psychological Abuse

Emotional or psychological abuse is the infliction of mental or emotional anguish, such as humiliating, intimidating, or threatening.

It may include threatening, belittling, or controlling caregiver behaviour that you witness, or it may happen behind closed doors.

Possible Indicators of Emotional Abuse

Some behavioural indicators could include:

- Very low self-esteem
- Compliant, passive, withdrawn, tearful and/or apathetic behaviour
- Aggressive or demanding behaviour
- Anxiety
- Serious difficulties with peers, and/or adult relations
- Behaviour from the elder that mimics dementia, such as rocking, sucking, or mumbling to oneself
- Distorted speech

Neglect

Neglect occurs when a person who lacks capacity is deprived of the basic necessities of life. There are two types of neglect.

Active neglect

- Active neglect is the deliberate withholding of basic care or necessities, eg
- Leaving a person in an unsafe place or state
- Stopping access to medical treatment
- Abandoning
- Not providing adequate clothing or sufficient food and liquids
- Untreated illnesses
- Over or under medicating

Passive Neglect

- Passive neglect is the failure to provide proper care, due to carer stress, lack of knowledge or ability. It may occur unintentionally and may simply require getting additional support to assist the carer and person.

Self Neglect

- Self-neglect is a behavioural condition in which an individual neglects to attend to his or her basic needs, such as personal hygiene, appropriate clothing, feeding, or tending appropriately to any medical condition
- Self-neglect is characterised as the behaviour of an elderly person that threatens his/her own health or safety.

Possible Indicators of Neglect

- Unusual weight loss, malnutrition, dehydration
- Untreated physical problems, such as bed sores
- Unsanitary living conditions: dirt, bugs, soiled bedding and clothes
- Being left dirty or unbathed
- Unsuitable clothing or covering for the weather
- Unsafe living conditions (no heat or running water; faulty electrical wiring, other fire hazards)
- Stealing food
- Extended stays at school
- Constant fatigue, listless or falling asleep in class
- Alcohol or drug abuse
- Child states there is no caregiver
- Aggressive or inappropriate behaviour
- Isolation from their peer group
- Desertion of the elder at a public place

Social abuse or isolation

Social abuse is preventing a person from having contact with relatives, friends, service providers and other people or restricting the person's activities, thereby increasing their sense of isolation.

Social abuse can include:

- Confining a person to his her home or room
- Preventing a person from answering the phone or door
- Intentional embarrassment in front of others
- Stalking

Financial abuse

Financial abuse is the illegal or improper use of a person's property, finances and other assets without their informed consent or where consent is obtained by fraud, manipulation or duress.

It usually occurs between an older person and a family member but can also occur with carers or friends.

Possible Indicators of Financial Abuse:

- Significant withdrawals from the elder's accounts
- Sudden changes in the elder's financial condition
- Items or cash missing from the senior's household
- Suspicious or forceful changes in wills, power of attorney, titles, and policies
- Addition of names to the senior's signature card
- Forced transfers of property
- A family member taking a loan with a promise of repayment but not paying the money back
- Unpaid bills or lack of medical care, although the elder has enough money to pay for them
- Financial activity the senior couldn't have done, such as an ATM withdrawal when the account holder is bedridden
- Unnecessary services, goods, or subscriptions
- Sale of any property or assets without authority or consent

Other Warning Signs include:

- Unusual bank account activity, such as withdrawals from automatic teller machines when the individual cannot get to the bank.
- Signatures on checks and other documents that do not resemble the elder's signature.
- Checks or other documents signed when the elder cannot write or understand what he or she is signing.
- Lack of personal amenities – appropriate clothing and grooming items.
- Numerous unpaid bills when someone else has been designated to pay the bills.
- Change in spending patterns, such as buying items he or she doesn't need and can't use.
- The appearance of a stranger who begins a new close relationship and offers to manage the elder's finances and assets.

Healthcare Fraud and Abuse

Carried out by unethical doctors, nurses, hospital personnel, and other professional care providers, examples of healthcare fraud and abuse regarding elders include:

- Not providing healthcare, but charging for it
- Overcharging or double-billing for medical care or services
- Getting kickbacks for referrals to other providers or for prescribing certain drugs
- Overmedicating or under medicating
- Recommending fraudulent remedies for illnesses or other medical conditions
- Evidence of inadequate care when bills are paid in full
- Problems with the care facility:
 - Poorly trained, poorly paid, or insufficient staff
 - Inadequate responses to questions about care
 - Crowding

Risk Factors

- Those with chronic progressive disabling illnesses that impair function and create care needs that exceed or will exceed their caregiver's ability to meet them.
- Those with progressive impairments who are without informal support from family or neighbours, or whose caregivers show signs of 'burnout'.
- Those with a personal history of substance abuse or violent behaviour, or a family member with the same history.
- Those with family members who are financially dependent on them.
- Those whose caregivers are under sudden increased stress due, for example, loss of a job, health or spouse.

Where does abuse take place?

In the home where the person lives

Institutional setting especially long-term care facilities with minimal visits

Caregiver Risk Factors in Abuse

The stress of care giving can lead to mental and physical health problems that make caregivers burned out, impatient, and unable to keep from lashing out against persons in their care.

Among caregivers, significant risk factors for abuse are :

- inability to cope with stress (lack of resilience)
- depression, which is common among caregivers
- lack of support from other potential caregivers
- the caregiver's perception that taking care of the older person is burdensome and without psychological reward
- substance abuse

Who could be abusers

- Abusers can be anyone inside or outside the family and may involve multiple offenders.
- Most victims are abused by caregivers or relatives, with adult children and spouse believed to be the most frequent abusers.
- Alleged abusers tend to rationalise and justify their actions and deny that they have inflicted harm on the person.
- They often find excuses for their behaviour, blaming it mainly on the victim for provoking them or claiming that they have "lost control".

Barriers and Challenges

Complacency

Lack of resources

Fear

Denial

Competing priorities

Entrenched culture

Challenges

- Even caregivers in institutional settings can experience stress at levels that could lead to abuse.
- Nursing home staff may be prone to abuse if they lack training, have too many responsibilities, are unsuited to care giving, or work under poor conditions.

Managing Risk to Minimise Abuse



Definition of Risk

RISK means the potential for something to go wrong.

RISK MANAGEMENT means identifying the potential for an accident or incident to occur and taking steps to reduce the possibility of it occurring.

Rights of the Client

- the right of individuals to be treated with respect;
- the rights of the individual to life, liberty, and security;
- the right of individuals to have their religious and cultural identity respected;
- the right of competent individuals to self-determination;
- the right to an appropriate standard of care to meet individual needs;
- the right to privacy and confidentiality;
- the recognition that human beings are social beings with social needs.

Code of Conduct should include:

- Physical touching
- Sleeping arrangements
- Sign in and out procedures
- Adult client ratio
- Respect for privacy
- Cultural sensitivities
- Confidentiality
- Perceptions and appearances
- Transport
- Out of hours contact
- Toileting and bathing
- Language
- Photography
- Favouritism
- Internet use

Screening

We must screen people who work with persons who are vulnerable

Screening is an ongoing process

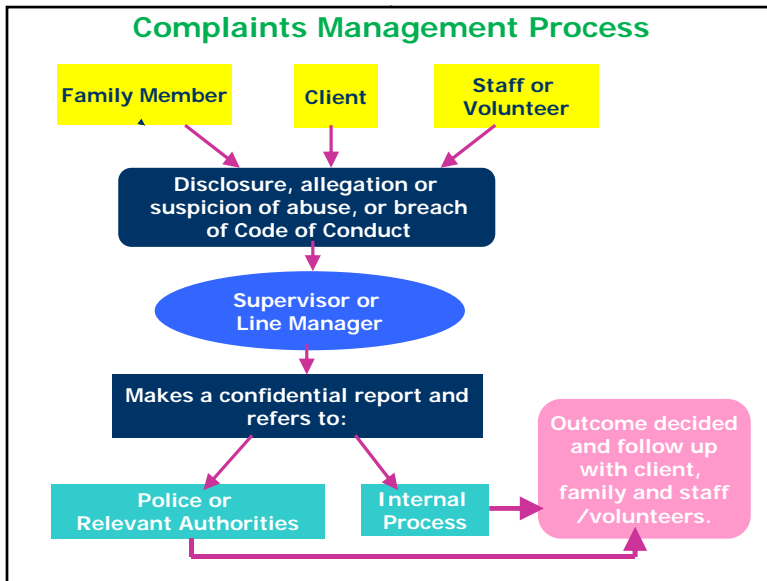
Reference checks

- Check dates of employment.
- Ask probing questions.
- Ask about candidate's strengths and weaknesses.
- Tell referee about the job and the level of trust with vulnerable clients. Ask about any concerns they might have about the candidate working with the clients.

Red flags and warning Sig



- Evasiveness and inconsistency
- Personal early warning signs/gut instinct
- 'Befriending' vulnerable people
- Asks about opportunities to be alone with clients
- Particular interest in a group of persons with specific needs/risks
- Excessive interest in sexual behaviours
- Does not value or "need" supervision
- Erratic employment history or constant changes of address
- Lack of accountability (lone operator)
- How the applicant behaved/ questions asked when first making contact with the organisation
- Doesn't disclose certain information relevant to the role



Responding to a Disclosure

Show your care and concern for the person by:

- Listening carefully to what they are saying, let them take their time and use their own words
- Letting them know they did the right thing by telling
- Telling them it is not their fault and that they are not responsible for the abuse
- Telling them you are pleased they told you
- Present as 'calm' and don't be afraid of saying the wrong thing
- Letting the person know what will happen next eg report made and how support will be given
- Make notes as soon as possible

Empowering the person

Clients who are encouraged to express their views are less vulnerable to abuse

Organisations can help clients to speak up by:

- Client Feedback Form (for positive and negative feedback)
- Clients Code of Conduct displayed (accessible)
- Client friendly Reporting Process
- Contact person for clients and their families.
- Easily accessible and transparent complaints process
- Encourage participation in activities for surveillance by others

Child Protection Service

1800 7770000 and

OPG (for person without capacity)
1800 2266222