

## **Intentional abuse and neglect**

Cases of flagrant, willful abuse of nursing home residents are apt to capture public attention. That's understandable, but it's somewhat misleading. The fact is that willful abuse, like other forms of elder abuse and neglect, is far more apt to occur outside institutional settings, in elders' own homes or in the homes of their relatives.

The vast majority of vulnerable elders live with relative caregivers, and relatives of elderly victims account for most cases of intentional abuse. When caregiver abuse occurs, it's likely to be persistent, rather than an isolated instance of "snapping" under the stress of providing constant care.

Due to feelings of shame, fear and misplaced loyalty, abused elders are unlikely to report that they are being abused or neglected by their family members. They derive some sense of security from living in familiar surroundings, and their fear of the unknown may outweigh their desire to escape from a terrible situation.

Reports of intentional abuse often come from neighbors who notice that something's amiss, or from home health providers or hospital workers who see clear signs of mistreatment. If APS workers substantiate intentional abuse, they notify law enforcement officials and try to get them involved. They also try to get the abused elder's consent to be moved to live elsewhere. If the victim is unable to give informed consent, workers can ask a court to order that he or she be moved to a safe setting.

In the cases described here, the perpetrators were all relatives of the abused or neglected victims. Intervention came too late for two of the victims, who died soon after APS workers became aware of their circumstances.

### **Case 1**

An 80-year-old man with Parkinson's disease and advanced Alzheimer's was seen out driving a car and was reported to Adult Protective Services because he shouldn't have been driving. APS investigated and found that he lived with his daughter, who was stealing her father's medications and leaving him unsupervised. APS encouraged another daughter to move into the home and take over the duties of caregiver. As a result, this gentleman was able to remain safely in his home.

### **Case 2**

An 85-year-old woman on kidney dialysis was abused in succession in three homes of members of her family. In the first, a daughter stole her money and used it to pay her own bills and buy things for herself. The lady then moved in with another family member, who denied her food and medicine. APS then offered to help the lady move into a nursing home. Rather than move to a nursing home, she chose to move into the home of what turned out to be a third abusive family member. A subsequent APS investigation concluded that she had died in a neglectful environment.

### **Case 3**

An 82-year-old man, who was terminally ill, was living with members of his family. APS went to the home the day they received an allegation he was being neglected. He had multiple pressure sores and was lying in feces and urine. APS got the victim admitted to a hospital, where he died the next day.

### **Case 4**

A 70-year-old woman was living with her daughter. APS investigated and found the 70-year-old locked in a basement. The daughter fed her food straight from a can, made her watch while others ate, pushed her, called her names, and kicked her. APS helped the woman get an Emergency Protection Order against this daughter and helped her find an apartment in a retirement tower. APS opened an ongoing case to help her stabilize, and a local domestic violence shelter supplied her with a cellular phone for emergency use in case of a violation of the EPO.