



Elder Abuse

©2009 eNotes.com, Inc. or its Licensors. Please see [copyright information](#) at the end of this document.

- [Background](#)
- [Types of Elder Abuse](#)
- [Scope of the Problem](#)
- [Federal, State, and Local Action](#)
- [Striking a Balance](#)
- [Additional Resources](#)
- [Organizations](#)

Background

As the population of elderly people in the United States increases, so does the incidence of what is known as elder abuse. Estimates put the number of cases in which elderly victims are abused as high as half a million annually. The number of reported incidents, however, is barely 15 percent of that.

As with all forms of abuse, elder abuse affects people from all socioeconomic backgrounds. The more frail the individual, the more likely he or she will be a victim of abuse. Abuse can be physical or emotional, subtle or blatant. Most frightening is that abuse is most likely to come at the hands of someone the victim trusts: a child, a spouse, a caregiver.

With elder abuse more pervasive, the issue has garnered increased attention, and a number of groups, along with federal, state, and local agencies, are taking steps to reverse the trend. Part of the challenge is to find ways to get people to report abuse when it happens. This means educating people to know and watch for warning signs, and it means encouraging victims to speak out without fear of recrimination.

Types of Elder Abuse

The word "abuse" carries a number of interpretations; legal definitions may differ from researchers' definitions, and experts frequently disagree among themselves. Abuse can manifest itself in any of several forms; as a practical matter, we can define abuse here as deliberate maltreatment or mistreatment. The most pervasive forms of mistreatment include the following:

Physical Abuse

Any use of physical force that results in injury, pain, or any sort of impairment constitutes physical abuse. It includes striking, pushing, and shoving, shaking, kicking, punching, and slapping. Some abusers will strike the victim with an object. Others will inflict burns on the victim. Force-feeding or withholding food, administering inappropriate drugs, and applying physical restraints all come under the heading of abuse. There will often be visible signs of physical abuse, such as bruises, swellings, burn marks, scratches, or broken bones. Not infrequently, these injuries will be attributed to carelessness (a fall, standing too close to the stove).

Emotional Abuse

There are no overtly physical signs of emotional or psychological abuse, but that does not make it any less serious than actual physical abuse. A victim may be subjected to angry verbal tirades, harassment, threats, and humiliation. Affecting an over-protective manner toward the victim, as though to imply that the victim is in capable of caring for him- or herself, can be a more subtle form of emotional abuse. Sometimes the abuser will isolate the victim from family and friends or much-enjoyed activities (even something as simple as a daily outing to the local newspaper stand). A person who is being emotionally abused may become either strangely agitated or overly withdrawn.

Sexual Abuse

Sexual activity that is non-consensual is abuse, and unfortunately the elderly are not immune to this sort of victimization. It could be anything from unwanted touching and groping to forced posing for explicit photographs to rape and [SODOMY](#). Unexplained genital bruising, bleeding, or infection can be a sign that [SEXUAL ABUSE](#) is taking place.

Financial Exploitation

In the 1935 play *Kind Lady*, an elderly woman is befriended by a family that subsequently robs her of her money and possessions. Unfortunately, this crime happens in real life all too frequently. This form of abuse includes cashing the victim's [PENSION](#) checks and keeping the money, forging the victim's signature, misusing a [POWER OF ATTORNEY](#), coercing the victim to sign a will or a [DEED](#) to property, and outright stealing. An elderly person who makes any sudden changes in legal documents such as wills or deeds or who transfers large sums of money out of a bank account for no apparent reason, may well be the victim of exploitation.

Neglect and Abandonment

Neglect of an elderly person's needs, especially by one who has been entrusted to take care of that person, is sadly not as uncommon as it should be. A relative may ignore much-needed repairs at the victim's home, or a caregiver may neglect to feed and bathe a victim properly. An abusive caregiver may not bother to make sure that the victim's home has such necessities as heat and hot water. Some caregivers will simply abandon an elderly person, much the same way one might abandon a newborn. They may leave the victim at a hospital or nursing home, or they may leave the victim at a shopping mall.

If caregivers neglect an elderly person who is frail or confused, that person will become neglectful of his or her own needs. Ill health, coupled with loneliness and depression, may rob the person of any desire to eat, to go outside, to bathe, or to see old friends. This can put the person's life in danger; he or she may become malnourished or ignore serious medical problems, for example.

Scope of the Problem

In the fall of 1998 a study examining the number of elder abuse incidents in the United States painted an alarming picture of the true scope of abusive behavior. Called the National Elder Abuse Incidence Study, it was funded by two branches of the U. S. Department of Health and Human Services: the Administration on Aging and the Administration for Children and Families. Conducted by the National Center on Elder Abuse and a survey research firm, the study found that for the year 1996 some 450,000 elderly persons in domestic settings were abused or neglected. That figure is frightening enough, but more frightening is the fact that only

a fraction of those cases were reported to local Adult Protective Services (APS) agencies. Through several methodologies including local reports from "sentinels" (specially trained people in community agencies who have contact with and access to the elderly), they were able to arrive at the 450,000 number. The actual number of cases reported by APS agencies in 1996 was 70,942. That represents a mere 16 percent of the estimated figure.

Problems Reporting Abuse

Why would a problem so pervasive, and so potentially deadly, be so easily hidden? Part of the answer lies in the victims themselves.

Many elderly people are both physically and emotionally healthy. They enjoy rewarding lives and remain independent. Others are not so fortunate. They may be mentally alert but physically frail. Or they may be suffering from Alzheimer's disease or the effects of circulatory problems, both of which reduce mental awareness. Some elderly people who might otherwise be mentally alert suffer from depression, which makes them appear listless and apathetic. These individuals may be victims of abuse and neither fully comprehend nor care. Thus, they make no effort to protect themselves.

Other elderly victims of abuse are no doubt quite aware of what is happening to them. There are a number of reasons why these people might fail to speak out. Often they are embarrassed to admit that they are being abused; they feel that it makes them appear helpless. Some may be protective of those who are abusing them. Being abused may be the preferable option when the only other choice is turning one's own child in to the local police. Finally, a number of elderly victims are afraid of their abusers. Fear of bodily harm or of [ABANDONMENT](#) keeps them from taking action.

As with any type of abuse (such as [CHILD ABUSE](#) or [DOMESTIC VIOLENCE](#)), the issue is often more complex than simply identifying behavior and taking action. A family that is locked in a cycle of violent behavior may see elder abuse as acceptable despite the obvious reasons why it is not. Substance abusers create a special problem because they may be violent only when they are under the influence of alcohol or other drugs. The elderly parent, like the spouse or the child, may keep quiet as a means of denying that an addiction exists. Sometimes, family members who are put in the role of serving as caregivers react violently out of total frustration with a situation they are totally unprepared to handle. The elderly victim may feel guilty for putting the caregiver in such a stressful position and consequently say nothing. It is also likely, in some cases, that since abuse can take its toll quickly, an elderly person in otherwise reasonable health may go downhill quickly once abuse starts and thus be unwilling or unable to speak out forcefully.

Federal, State, and Local Action

Federal legislation protecting elderly people, such as the Older Americans Act of 1975, do not address specific issues related to elder abuse. (The Older Americans Act was amended in 1987 to include definitions of abuse, but those definitions are meant to serve primarily as a guideline.) Elder abuse is handled primarily by state laws, and each state has different regulations. All agree, however, that obvious abuse of an elderly person demands quick action, and all 50 states have some method of reporting abuse.

Usually it is the local or state APS agencies that handle reports of elder abuse. In some communities, the responsibility falls to other government agencies, such as a county social services department. Usually the state's human services agency has responsibility for programs for the aging. Many states have a toll-free 24-hour hotline number for those who wish to report instances of abuse.

Encyclopedia of Everyday Law: Elder Abuse

The Administration on Aging works closely with state and local agencies to provide support, to help train APS workers to recognize and work with elder abuse, and to develop informational materials such as posters, videos, and public service announcements. It also helps state agencies coordinate their efforts as a means of streamlining their work. It also funds the National Center on Elder Abuse, which serves as a clearinghouse for public and private agencies, as well as individuals, who are seeking information on elder abuse and its prevention. The Center's web site (<http://www.elderabusecenter.org>) includes a listing of toll-free telephone numbers for each state, as well as access to a variety of information on abuse.

Typically, a report of elder abuse is followed up by someone from an APS agency, which will investigate the charge. If the report turns out to be accurate, the agency will work with other community groups to ensure the safety of the victim. If a victim is competent and refuses to be helped, the APS can do nothing. But if the victim asks for help, or if the victim has been declared incapacitated by a court and a **GUARDIAN** has been appointed, the APS can initiate action. Other advocacy groups such as AARP offer guidelines and advice to elderly people who may fall prey to abuse.

Striking a Balance

Elderly people who are frightened and confused are often stereotyped and, consequently, not listened to when they complain. While many elderly individuals may indeed be suffering from Alzheimer's disease or other conditions that affect brain functions, (a series of small and apparently insignificant strokes, for example, can affect cognitive skills and memory), others may merely be suffering from the effects of over or under medication. Spouses, children, and caregivers need to understand this and be willing to help determine the cause of confusion, mood swings, or memory loss. Local agencies provide support and counseling for caregivers, especially first-time caregivers who have no understanding of how to take care of a frail elderly person. APS agencies may have information on community programs, so may local hospitals or senior citizen recreation centers. Educating caregivers helps those whose frustration might push them over an unacceptable edge to know how and when to step back and reevaluate their actions before they become abusive.

For those whose abusive tendencies are more deeply rooted, any help that can be given to them is a step in the right direction. That said, people who for whatever reason cannot be trusted to care properly for an elderly person should not be allowed to do so. If they violate the law through their abuse, they must be dealt with. So should those who are motivated not by deep-seated problems but rather such base instincts as greed (those who try to exert control over an elderly person's finances, for example).

When an elderly person complains of abuse, he or she should be listened to. For those who are being abused but cannot or will not admit it, they, too, must be listened to, in the chance that they might say something that backs up suspicions of abuse. Elderly people need to feel that they are taken seriously. Community service providers who can develop a feeling of trust with them will be providing an invaluable service.

As for those elderly who suffer from self-neglect, if it turns out that they are truly unable to care for themselves, their advocates must ensure that anyone who seeks a power of attorney or conservatorship is acting in the individual's best interest.

Additional Resources

Abuse and Maltreatment of the Elderly: Causes and Interventions. Kosberg, Jordan I., editor., Wright-PSG, 1983.

Encyclopedia of Everyday Law: Elder Abuse

Abuse, Neglect, and Exploitation for Older Persons: Strategies for Assessment and Intervention. Baumhover, Lorin A., and S. Colleen Beall, editors., Health Professions Press, 1996.

Family Crimes Against the Elderly: Elder Abuse and the Criminal Justice System. Brinell, Patricia J., Garland Publishing, 1998.

Issues in Intimate Violence. Kennedy Bergen, Raquel, editor, Sage Publications, 1998.

Organizations

American Association of Retired Persons (AARP)

601 E Street NW
Washington, DC 20049 USA
Phone: (202) 434-2257
Fax: (202) 434-2588
URL: <http://www.aarp.org>
Primary Contact: William Novelli, Chief Executive Officer

National Council on the Aging

409 Third Street, Suite 200
Washington, DC 20024 USA
Phone: (202) 479-1200
Fax: (202) 479-0735
URL: <http://www.ncoa.org>
Primary Contact: James P. Firman, President and Chief Executive Officer

National Council on Elder Abuse

1201 15th Street NW, Suite 350
Washington, DC 20005 USA
Phone: (202) 898-2586
Fax: (202) 898-2583
URL: <http://www.elderabusecenter.org>
Primary Contact: Sara Aravanis, Director

U. S. Department of Health and Human Services, Administration on Aging

330 Independence Avenue SW
Washington, DC 20201 USA
Phone: (202) 619-0724
Fax: (202) 260-1012
URL: <http://www.aoa.gov>
Primary Contact: Josefina G. Carbonell, Assistant Secretary for Aging

Copyright Notice

©2009 eNotes.com, Inc.

ALL RIGHTS RESERVED.

No part of this work covered by the copyright hereon may be reproduced or used in any form or by any means graphic, electronic, or mechanical, including photocopying, recording, taping, Web distribution or information storage retrieval systems without the written permission of the publisher.

For complete copyright information, please see the online version of this work:
<http://www.enotes.com/everyday-law-encyclopedia>