



# **ABUSE IN LATER LIFE**

**Elisa Covarrubias**

**Patricia Zedler**

# INTRODUCTION

- Abuse in Later Life Project
- Who is in the room?
  - Advocates?
  - LE?
  - Prosecutors?
  - Medical?
  - FVIP?
  - Other?



# OVW ABUSE IN LATER LIFE

## 3-YEAR PROJECT

- Training for law enforcement, prosecutors, judges and victim service providers
- Cross training for various disciplines
- Coordinated community response team
- Victim services



# KEY TRAINING POINTS

- Focus on victim safety
- Be aware of and avoid assumptions
- Recognize abuser tactics
- Work collaboratively




# TYPES OF ABUSE IN LATER LIFE

- Intimate Partner Violence
- Stalking in Later life
- Sexual Abuse in Later Life
- Neglect
- Financial Exploitation

(Any of the above may co-occur with each other)



# O.C.G.A. 16-5-100

- TITLE: “Exploitation and intimidation of disabled adults, elder persons, and residents; obstruction of investigation.”
  - Does NOT mention abuse in Title
  - But, subsection (a) contains the abuse language
  - Defines:
    - Alzheimer’s disease
    - Dementia
    - Disabled Adult
    - Elder person
    - Essential services (neglect)
    - Exploit
    - Long-term care facility
    - Sexual Abuse
- 

# INTIMATE PARTNER VIOLENCE IN LATER LIFE

- Significant segment of elder abuse is intimate partner violence
- Long-term relationship
- New relationship
- Late onset
- Family violence laws may be applicable as well as 16-5-100



## CASE STUDY

Linda is a 52 year old woman who has been married for about 25 years. Linda and her husband got into an argument as her husband was getting inside of his tractor trailer truck in a hotel parking lot. Linda is disabled and needed her medicine that was inside the truck. Linda ran in front of the truck to grab her husband's attention. Her husband refused to give her the medicine and instead ran Linda over with an 8- wheeled truck.

**\*Please note names have been changed to protect victim's privacy**





# DISCUSSION

- What are some of the challenges you might have in this case?
- What resources might you utilize for Linda?
- What would you charge Linda's husband with?



# SERVICES PROVIDED

- Initial Follow up at Hospital
- Assistance with placing animals
- Assistance with Georgia Crime Victim's Compensation Application
- Assistance with returning belongings left at hotel
- Legal Advocacy
- Safety Planning



# ADULT CHILDREN AS ABUSERS



# DISCUSSION

- What factors contribute to Norman being ambivalent about participating in criminal proceedings?
- What are some unique aspects of the situation when the offender is the adult child?
- How would these factors affect how you work with Norman?



# ADULT CHILDREN AS ABUSERS

## **Victim wants:**

- Abuse to end but may want to have relationship
- To try to be a good parent
- To be perceived as a good parent

## **Victim may:**

- Protect the adult child rather than self
- Recant or be reluctant to work with an LE but may be more willing to work with Adult Protective Services or an advocate



# ADULT CHILDREN AS ABUSERS

- Power and control dynamics present
- Financial exploitation is often present
- Elder abuse generally involves an ongoing relationship with an expectation of trust.
- Abusers may justify and excuse their behavior.



# COMMON ABUSER JUSTIFICATIONS

- “I have a problem with my temper.” (anger)
- “I was drunk or high.” (substance abuse problem)
- “I’m sick. It’s not my fault.” (physical or mental health issue)
- He is too difficult to care for.” (caregiver stress)
- “He hit me when I was a child.”
- “She’s clumsy.”
- “She started it.”
- “In my culture, elders share their resources.” (culture)



# CAREGIVER STRESS AS JUSTIFICATION

- Emotions and feelings that some caregivers experience while assisting a person with medical needs or disabilities.
- Everyone experiences stress but most do not abuse.
- Abusers target only the older adult – not others.
- Abusers often use caregiver stress as an excuse to create sympathy for themselves.
- Do you think there is a difference in how society responds to abuse of children and abuse of elders?





# STALKING IN LATER LIFE

- Intimate partner violence
- Dating violence
- Acquaintance, neighbor or stranger



## CASE STUDY

Rebecca is a woman in her 50's who ended a romantic relationship with Jim. After the break-up, Rebecca began finding love notes on her car windshield, roses at her front door, cards, etc. Rebecca knew it was Jim but would never see him. She made several police reports.

**\*Please note names have been changed to protect victim's privacy**



# DISCUSSION

- What resources and services would you offer Rebecca?
- What considerations might you take into account while safety planning?
- Would you refer to Adult Protective Services?



# SERVICES PROVIDED

- The DV/Stalking unit referred Rebecca to a victim advocate (agency collaboration)
- Assistance with filing a Temporary Protective Order
- Court Accompaniment
- Safety Planning
- Use of a Stalking Log
- Counseling



# TECHNOLOGY AND STALKING

- Some older adults may lack knowledge and skill with technology and may need extra assistance safety planning around:
  - Computers and the Internet
  - Social media
  - Phones
  - Global Positioning Systems (GPS)
  - Spoofing
- <https://victimsofcrime.org/our-programs/stalking-resource-center/stalking-information/the-use-of-technology-to-stalk>

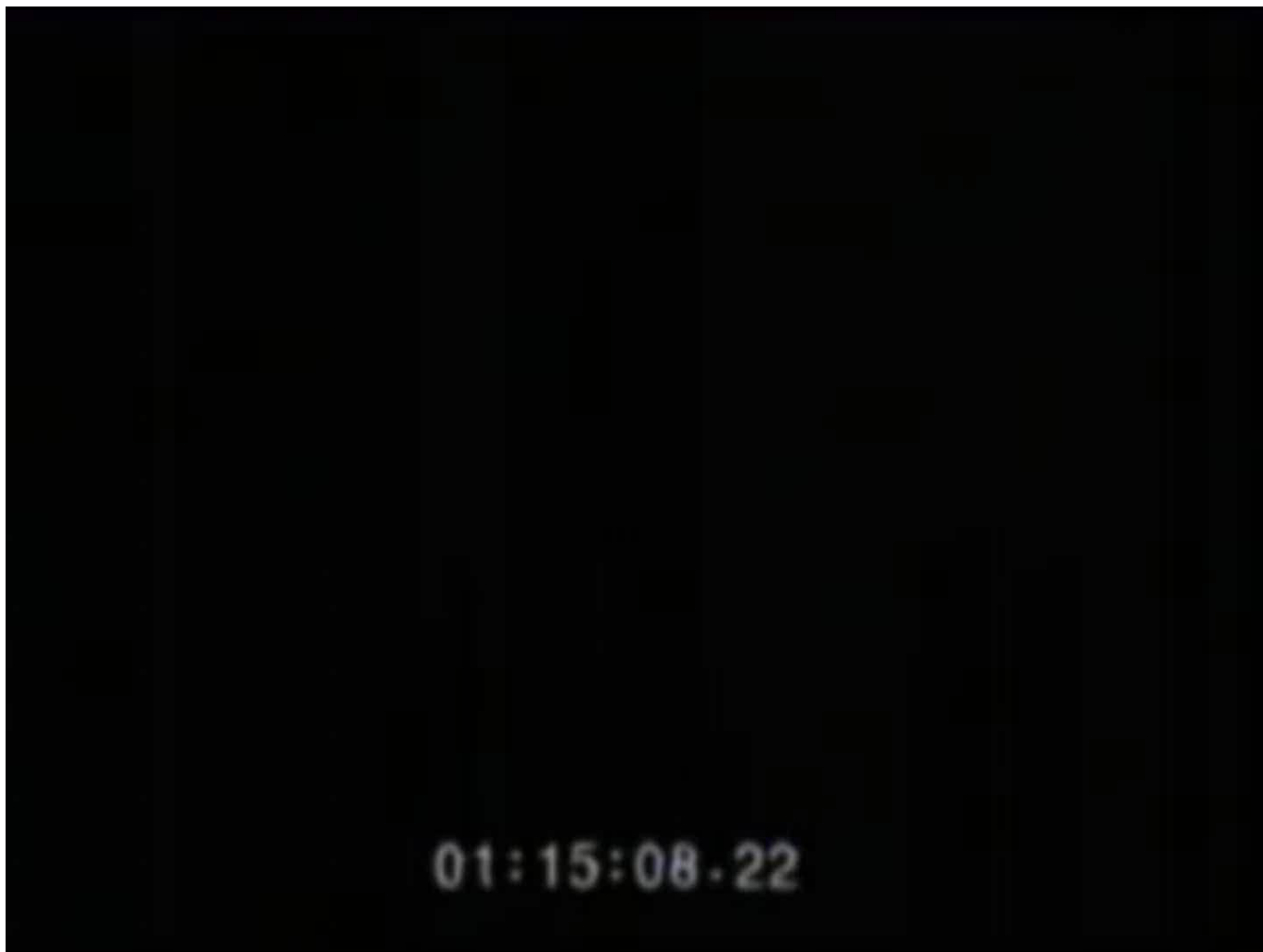


# SEXUAL ABUSE IN LATER LIFE

- Victims: any age and range of ability
- In private dwellings or facility settings
- Offenders: spouses/partners, adult sons, grandchildren, caregivers, family members, and others. Least common offenders—strangers



# MISS MARY



# DISCUSSION

- What surprised you about this case?
- Have you worked on any similar cases?
- What do you think some unique challenges might be when working with an older sexual assault survivor?





# UNIQUE ISSUES

- Less likely to have strong support system
- May exacerbate existing illness
- Longer recovery time
- Increased chance of serious injury
- Increased vaginal/anal tearing and bruising that may never heal
- Brittle pelvis or hip bones more likely to fracture
- Increased risk of infection
- Investigators must prepare their cases knowing that the victim may not be around to testify in court later



## BARRIERS TO REPORTING (DISCUSSION)

- What additional barriers may exist for an older victim reporting a sexual assault?



# BARRIERS TO REPORTING

- May not be believed because of society's view that sexual assault only happens to younger persons (ageism)
- May not be believed if there are cognitive limitations
- If born before the violence against women's movement, may not have the language to identify the assault
- Generational beliefs that increase shame and guilt
- Fear of lack of social support/ isolation



## POSSIBLE PHYSICAL SIGNS

- Bruises to outer arms, chest, mouth, genitals, abdomen, pelvis, or inner thighs
- Bite marks
- Difficulty walking or sitting
- Torn, stained, and/or bloody clothing including underwear, bedding, or furnishings
- Unexplained STDs or HIV



## POTENTIAL BEHAVIORAL CUES

- Unexplained or sudden **changes** such as in:
  - Mood or temperament
  - Personal hygiene
  - Substance use or abuse
  - Sudden avoidance or fear of specific people
  - Sleep disturbances
  - Recent resistance to certain kinds of caregiving such as bathing
  - Seems hyper-vigilant
  - Shies away from being touched



## OTHER POTENTIAL BEHAVIORAL CUES

- Coded disclosures by older adult:
  - “He’s my boyfriend”
  - “He loves me”
  - “I’m his favorite girl”
- Potential offender (family or caregiver) behaves in inappropriate or romantic ways



# CAPACITY TO CONSENT

- Mental capacity is having sufficient understanding and memory to comprehend in a general way the situation in which one finds oneself and the nature, purpose, and consequence of any act or transaction into which one proposes to enter
- There are currently no state statutes in Georgia that define mental capacity. Each case will be different.
- APS may be able to help with issues regarding determining capacity



# CHALLENGES WHEN SEXUAL ABUSE OCCURS IN FACILITIES

- Many possible suspects
- Victim may not be able to report or may not be believed
- Facility may wait to call law enforcement or not call at all
- Evidence may be cleaned up or removed
- Multiple concurrent investigations may be occurring





# NEGLECT

- Refusal or failure of a caregiver to fulfill duties to care for an older adult
- Failure of a person who has fiduciary responsibilities to provide care for an older adult
- Failure of a facility or in-home service provider to provide necessary care
- **Neglect:** Per O.C.G.A. § 16-5-101, neglect is the **willful deprivation** of health care, shelter or necessary sustenance to the extent that an older persons health or well-being is jeopardized
- Neglect of older adults can occur in three forms: intentional, unintentional, and self-neglect.



# NEGLECT: REFUSAL OR FAILURE TO PROVIDE NECESSITIES

- Food
- Water
- Clothing
- Shelter
- Personal hygiene
- Medication
- Medical care
- Comfort
- Personal safety
- Assistive living devices





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# POSSIBLE SIGNS OF NEGLECT

- Dehydration
- Malnutrition
- Over- or under- medication
- Extreme weight loss
- Decayed teeth
- Overgrown nails
- Matted, infested hair
- Repeated falls
- Lack of assistive devices (hearing aids, glasses, etc.)
- Pressure ulcers



# REPORTING NEGLECT

- 911
- Law enforcement
- Adult Protective Services (APS)
- Healthcare Facility Regulation
- Medicaid Fraud Control Unit
- Social Security Fraud
- State Long-Term Care Ombudsman
- Consider also reporting to:
  - Mental health agencies
  - Humane Society
  - Code enforcement agencies



# ROLE OF APS

- Assessing a victim's living situation and risk factors
- Assessing a victim's capacity to understand his/her risk and ability to give informed consent
- Developing a case plan
- Arranging for services



# CONTACTING APS

- Reports are accepted by phone Monday through Friday 8 a.m. to 5 p.m.
- Metro-Atlanta Calling Area: (404) 657-5250
- Toll-Free: 1-866-55-AGING (1-866-552-4464, Option 3)
- Report on the web:  
<http://aging.dhs.georgia.gov/adult-protective-services>
- Report by fax: (770) 408-3001
- Reporting form can be located on the Division of Aging website.





## APS vs. HFR

- DV/SA advocates are mandated reporters
- Contact APS whenever you suspect abuse or neglect of an adult 65+ or a disabled adult 18+ in a community setting OR if the suspected abuser is a family member or caregiver
- Contact Healthcare Facilities Regulation if you suspect abuse in a personal care home or nursing home



## CASE STUDY

- Evelyn Blue lived with adult daughter in a motel
- Daughter reported that her mother had been stabbed
- Mother died at hospital from health problems caused by severe neglect
- Mental illness was used as defense
- Walked out on time served (3 years 14 days)



# FINANCIAL EXPLOITATION

- Illegal or improper use of an older adult's funds, property or assets.
- Because not all older adults use the banking system, consider cash, gold, jewelry, antiques, and homes as assets.
- 16-5-102(a) Exploitation, abuse, or neglect (Felony)



# METHODS OF FINANCIAL EXPLOITATION

- Scams
- Identity theft
- Theft
- Coercion and extortion
- Fraud and deception
- Abuse of legal authority (i.e. Power of Attorney)
- Manipulation



# POWERS OF ATTORNEY AND GUARDIANSHIPS

- Power of Attorney
  - An instrument which delegates to another person authority to make health care and/or financial decisions to another
- Guardianship
  - A court order granting certain powers to a family member, other individual, governmental agency, or institution to control the affairs of another person
- POA/guardianship is not a license to steal
- Just because a POA or guardianship was used does not make it a civil matter



# IF YOU HAVE CONCERNS ABOUT CONSENT

- Don't take perpetrator's claim of consent at face value
- Interview victim alone, away from suspect
- Document pattern of conduct and concerns expressed by others
- Contact APS
- Law enforcement - Refer to detective or contact prosecutor to discuss further investigation



## CASE STUDY

- Mrs. Johnson's daughter calls 911
- Reports her brother, Stan (age 45) may be abusing her mother (age 68)
- Daughter saw fist mark injuries
- Mrs. Johnson claims she fell
- Mrs. Johnson has mild to moderate Alzheimer's disease.
- She has difficulty tracking questions.
- Her short term memory may not be accurate.



# CASE STUDY

The upstairs of Mrs. Johnson's home is immaculate.





# CASE STUDY

The basement where Stan lives is a mess with food and trash everywhere.



# CASE STUDY

- Mrs. Johnson was recently prescribed pain medication for a sprained wrist
- Mrs. Johnson's medications that were just filled were already gone
- She does not remember where they went
- Stan is his mother's Power of Attorney for financial decisions
- Stan beats his mother when she won't sign over Social Security checks
- Stan does not have a job and is a gambler deep in debt



# DISCUSSION

- In your community, who would investigate financial exploitation?
- In your group, discuss what evidence you would collect if you were the investigator.
- What specific crimes may be occurring?
- What resources or services could you provide to Ms. Johnson?



# CRIMINAL MISUSE OF POWER OF ATTORNEY

- Did Stan spend his mother's money on himself rather than her?
- Does the gifting clause place limits on what he can gift himself?
- Are there prior investigations involving Mrs. Johnson or Stan?
- Work with APS.



# VICTIM CENTERED RESPONSE

- In domestic and sexual violence movements described as “empowerment”
- In APS described as “self-determination”
- Both built on principle of listening to victims and recognizing a victims strengths
- Requires active listening



# REASONS OLDER VICTIMS MAY NOT BE ABLE TO LEAVE ABUSIVE SITUATIONS

- Lack of affordable housing options
- Lack of system response and collaboration
- Isolation of seniors in our society
- Racism, ageism, and sexism that may affect delivery of services from agencies
- Limited financial options
- Lack of options for help for perpetrator



# CONDITIONS THAT SUPPORT RESILIENCY

- Care and support from others
- Belief in their ability to succeed
- Positive peer relationships & influence
- Spiritual connection



# TIPS FOR WORKING WITH OLDER VICTIMS

- Expect – victims may want contact with family and/or partners
- Recognize – making major life changes takes time and is a process
- Collaborate – working with other professionals can help our understanding of victims choices
- Help connect the victim with additional support





# WHAT YOU CAN DO

- Create a plan to maintain contact (if safe and the victim is interested)
- Provide information and referrals
- Be clear about options and outcomes
- Create a safety plan with the victim

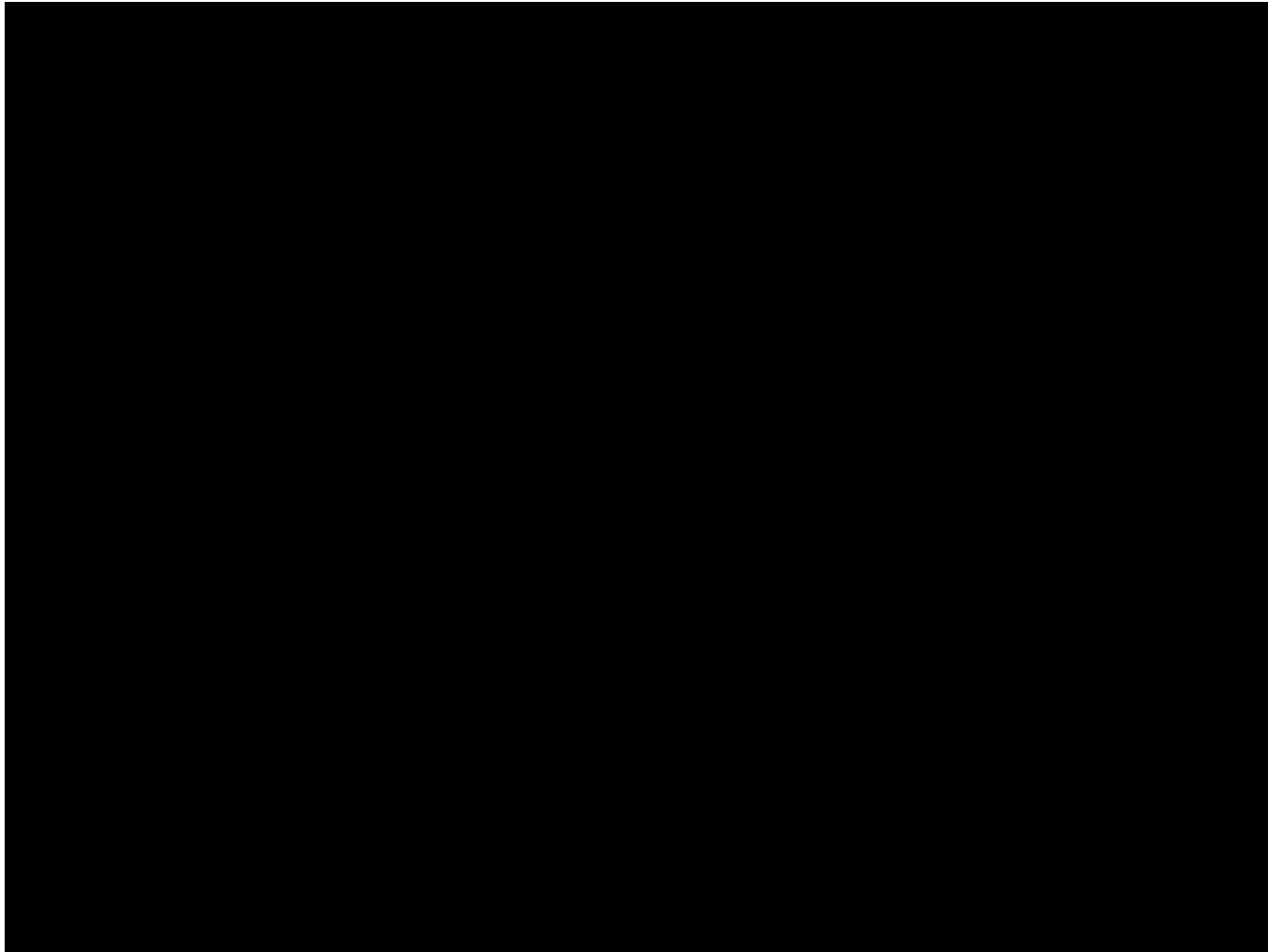


# A SURVIVOR-CENTERED PLAN

- Where will the victim live?
- Does the victim have access to resources? Are these resources available?
- Are there health issues that affect the options available to the victim?
- Who else is affected by the abuse?
- What legal issues need to be addressed in the safety plan?
- What are the victim's concerns if she decides to leave her abuser?
- What has the victim tried to stay safe in the past? How did it work?
- Has she left before? If so, what happened?



# RUTH – SAFETY PLAN



# DISCUSSION

- What are some strategies the woman in the video used as part of her safety plan?
- What local referrals & resources would you provide?
- What other entities in your community might you collaborate with?



# KEY TRAINING POINTS

- Focus on victim safety
- Be aware of and avoid assumptions
- Recognize abuser tactics
- Work collaboratively



# WHY WE DO THIS WORK



# CONTACT

Elisa Covarrubias, Director of Sexual Assault and Advocacy Programs [ecovarrubias@ywcanwga.com](mailto:ecovarrubias@ywcanwga.com)

Patricia Zedler, Abuse in Later Life Coordinator  
[pzedler@ywcanwga.com](mailto:pzedler@ywcanwga.com)

YWCA of Northwest Georgia

(770) 427-2902

Crisis Line: (770) 427-3390

[www.ywcanwga.com](http://www.ywcanwga.com)

