



EMOTIONAL ABUSE OF OLDER ADULTS

AN INTERVENTION GUIDE FOR
SERVICE PROVIDERS AND
PARTNERS IN CARE

PRODUCED BY:



WWW.ELDERABUSEONTARIO.COM



Introduction

Elder Abuse Ontario has developed a series of ‘Training Modules’ on specific issues related to elder abuse. The modules have been designed to provide a standardized format that can be utilized when training interdisciplinary sectors. The sections within the module can be used separately, to teach about specific subject areas or the module used in its entirety, to suit a variety of training environments or challenges of time constraints.

The Emotional Abuse Module includes the following:

- Guiding Principles
- Overview and Definition(s)
- Risk factors and Warning Signs
- Assessment Questions
- Interview Strategy
- Safety Planning
- Reporting and Legislation
- Case Studies – Discussion Questions, Fact Boxes, Decision-Trees to assist with navigating supports and interventions
- Provincial Resources/Services

By design, the module allows participants opportunities to engage in discussions throughout the training session. There are several examples of Case Studies, reflecting real life stories, which are intended to elicit personal reflections about experiences, to encourage critical thinking regarding a response or intervention and to promote best practices, specific to the person’s role and position. This module can help guide participants through a complex issue, through an iterative process. Understanding grows with experience and reflection.

Recognize Indicators of Abuse

- Why is this situation causing me concern?
- What am I observing?

Interact with the Senior at-risk

- How do I feel about this situation/the alleged abuse?
- What are the values, wishes, goals of the person?
- Is the senior making the decisions?

Respond

- What resources are required?
- What are my responsibilities?
- What is my role on the team?

Reflect

- Stop and think about the situation to promote a better understanding of the issues, on the individual, the team, the organization, and at a systemic level. This can lead to better responses and the prevention of elder abuse.

The wide range of case studies presented, incorporate unique issues, risk factors, and safety considerations. The inclusion of assessment questions for each type of abuse case provides a guideline intended to elicit a response from an older adult. The assessment questions serve as a starting point, to begin the conversation with the older adult, to gather more information about the suspected abuse.

The listing of provincial organizations that provide support to older adults, dealing with abusive situations, is included at the end of the modules. This resource list can be very helpful for agencies, to connect older adults with support services and programs. Consulting listings of local community services and programs and referring to these, is also helpful.

Target Audiences

Prior to facilitating a training session about elder abuse, the trainer/facilitator should gain a better understanding of the background of their audience. For example, an agency/organization may request the training have a particular focus. It is important to inquire about the level of knowledge and expertise of the individuals receiving the training, their professional role and responsibility within their field of work, as well as the specific sector they are working in (Long-term care or community services). With this information, the content of the module can be tailored accordingly.

The module is adaptable for:

- Seniors and volunteers in the community
- Health-care professionals working in hospitals, community-based agencies, or individuals' homes
- Retirement Homes
- Long-term care staff
- Front-line responders

Disclosures:

It is important to be prepared for disclosures or personal reactions, from participants during any training session on elder abuse. A discussion of a sensitive topic may trigger memories from, an experience with a client or a personal experience. Facilitators, might consider inviting a counsellor to the training session, particularly if they feel unsure of their capacity to provide the necessary supports.

Accompanying Training Materials:

A supplementary PowerPoint presentation accompanies the module. It can be used either prior to the presentation or in tandem with the module. In addition, Elder Abuse Ontario offers additional resources, which may be found on its web site, including links to research, reports, and information from/links to other agencies working in the field of elder abuse. The website is: www.elderabuseontario.com

Guiding Principles:

The Guiding Principles will assist in providing appropriate responses and interventions, to assist older adults who are at-risk or experiencing elder abuse.

Guiding Principles

Responding To Elder Abuse

- 1. Talk to the older adult.** Ask questions to learn more about his or her experience. Help the person identify resources that could be helpful. Note their mental capacity for decision-making and their understanding of the consequences of their decisions – each decision is assessed independently.
- 2. Respect personal values, priorities, goals and lifestyle choices of the older adult.** Identify support networks and solutions that suit the older adult's individuality.
- 3. Recognize the right to make decisions.** Mentally capable older adults have the right to make decisions, even if those choices are considered risky or unwise by others (including you). Understand that often before a person will seek or agree to accept help, they need to be able to trust you and know that you will follow through with the help you offer to give.
- 4. Seek consent or permission.** In most situations, you should get consent from an older adult before taking action.
- 5. Respect confidentiality and privacy rights.** Get consent before sharing another person's private information, including confidential personal or health information

Guiding Principles

- 6. Avoid ageism.** Avoid making ageist assumptions or discriminatory thinking based on age, from affecting your judgment. Avoid stereotypes about older people and show respect for the inherent dignity of all human beings, regardless of their age.
- 7. Recognize the value of independence and autonomy.** Where this is consistent with the older adult's wishes, assist them in identifying the least intrusive way to access support or assistance.
- 8. Know that abuse and neglect can happen anywhere and to anyone.** Abuse and neglect of older adults can occur in a variety of circumstances.
- 9. Respect rights.** The appropriate response to abuse, neglect, or risk of abuse or neglect should respect the legal rights of the older adult, while addressing the need for support, assistance, or protection in practical ways.
- 10. Get informed.** Ignorance of the law is not an excuse for not taking action, when someone's safety is at stake. If you work with older adults you need to educate yourself about elder abuse. It is your responsibility to be aware of appropriate resources and services in the community.

SOUND FAMILIAR?



“Since I told my son I was not going to give him money, he has not allowed me to see my grandchildren anymore.”



“People keep making rude comments about me because of my age, telling me I am I useless.”

Are you concerned about a client or family



“I feel so lonely. My family never comes to visit me anymore. I don't know why they forget about me, I am their father”.



“I don't know where to go for help. My daughter keeps yelling at me, telling me what to do and making all my decisions.”

What is Emotional Abuse of Older Adults?

Emotional Abuse is any action, verbal or non-verbal, that lessens a person's sense of identity, dignity and self-worth. Emotional abuse includes any attempt to demoralize, dehumanize or intimidate older adults.¹

Perpetrators of psychological abuse against older adults often take advantage of older adult's vulnerability in ways that control or humiliate them.² Similar to other forms of abuse, the underlying motivation for emotional abuse is the desire of perpetrators to exert control over other individuals and destroy their sense of self-esteem.³

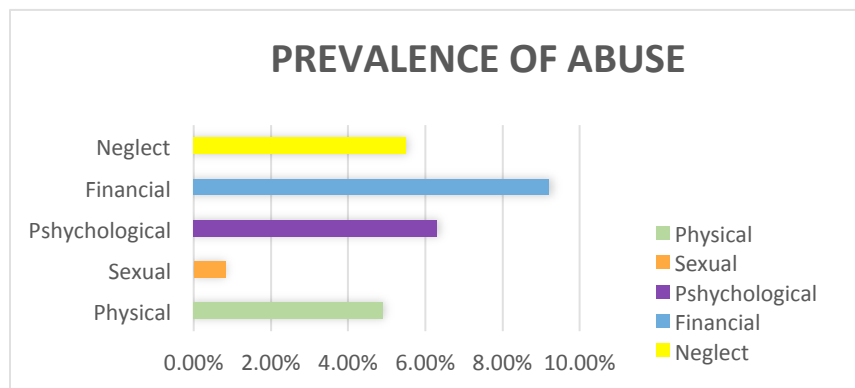
Emotional abuse is often interchanged with a variety of terms including **psychological abuse**, mental cruelty, verbal abuse and psychological aggression.³ For the purposes of this module, the term emotional abuse will be used.

Elder abuse is an important public health problem. The World Health Organization (WHO) estimates 1 in 10 older adults experience abuse each month, indicating this is likely an underestimation, as only 1 in 24 cases of elder abuse is reported, in part because of the fear of reporting to family, friends, or to the authorities.⁴

According to the WHO, prevalence studies estimate that of the most common types of abuse in high-or-middle-income countries, financial abuse occurs most often (1.0-9.2%), followed by psychological abuse (0.7-6.3%), neglect (0.2-5.5%), physical abuse (0.2-4.9%) and sexual abuse (0.04-0.82%).⁴

By reviewing opinions by Canadians, about the awareness and perceptions of elder abuse, a public poll indicated that more than one-fifth of Canadians mentioned a specific case of a senior who they thought may be experiencing abuse. Older

Canadian respondents in the study identified psychological/emotional abuse as the most prevalent form of elder abuse experienced by seniors and respondents who reside with seniors in the home were inclined to believe that emotional abuse is the most frequent form of abuse.⁵



Older adults residing in long-term care or retirement homes can be victims of emotional abuse and harassment. Although there is limited data on the extent of the problem in institutional settings, a survey of nursing-home staff in the United States of America, suggests rates may be high.⁴

- 36% witnessed at least 1 incident of physical abuse in the previous year;
- 10% committed at least 1 act of physical abuse towards an elderly patient;
- **40% admitted to psychologically abusing patients.**

Identification of Tactics Used and Communication Cues of Emotional Abuse Occurring

Emotional abuse can be identified as either a:

- Consequence of other forms of abuse particularly physical or sexual abuse and/or
- Separate and distinct form of abuse.

In a summary of the research on psychological abuse, the findings concluded that both forms result in trauma that can have short and long term effects. In fact, victims experience greater trauma from ongoing, severe psychological abuse than trauma from experiencing infrequent physical assault.³

When identifying emotional abuse we must consider cultural values, beliefs, family dynamics, intergenerational relationships, social norms and an individual's acceptance levels of harm and abuse. Our societal attitudes may contribute and even condone the abuse of older adults or the belief, that it is 'acceptable' allowing it to continue without detection or intervention. These attitudes include discrimination, the lack of respect for older adults and the belief that what goes on in the home is a private, 'family matter'.^{3,6} Perspectives of abuse also vary across diverse cultural, ethnic and religious communities, so it is important not to ignore signs of abuse by attributing the behaviors to cultural differences. For example, some cultures do not honor the basic rights of women, and older women in these cultures may not realize they are being abused.⁶

The influence of public awareness, changes in legislation and response to abuse have contributed to a shift of social norms and cultural values towards elder abuse. Our views on what were acceptable forms of controlling tactics and "harmful/abusive" behaviours have changed over time, once considered acceptable by some are now viewed as abusive.³

Many older seniors report psychological/ emotional abuse to be the most harmful. Many reported that physical scars could heal but psychological scars festered and were the most difficult to deal with.⁷

Perpetrators of emotional abuse utilize willful infliction of neglectful and deliberate tactics, consisting of verbal or nonverbal communication cues that cause mental anguish and emotional harm. Abusers may also adapt their tactics, depending on the victim's gender, age, health and ability status, ethnicity or place of residence (e.g., whether the abuse happens at home, in a residential facility or in an urban or rural setting).^{2,3,6} This is important to remember when identifying emotional abuse of older adults, particularly if their health and cognition changes, thereby increasing their vulnerability to abuse.

The following table provides an overview of research findings of both neglectful and deliberate tactics of emotional abuse, with examples of verbal and nonverbal communication cues.^{1,2,3,6}



Tactics/Cues of Emotional Abuse

Neglectful

- **Denying Emotional Responsiveness**

- Failing to provide care in a sensitive and responsive manner
- Interacting in a detached and uninvolved manner
- Interacting only when necessary
- Removal of decision-making powers
- Inappropriately infringing on their privacy
- Shunning, or lack of acknowledgement

- **Discounting**

- Not giving any credence to the person's point of view
- Not validating the person's feelings
- Claiming the behaviour was meant as a joke
- Manipulating the older adult into doing what the abuser wants

- **Ignoring**

- Purposefully not acknowledging the presence, value or contribution of the other
- Ignoring the person -acting as though the other person were not there
- Making fun of or preventing someone from practicing their faith or religion

- **Denying or Forgetting**

- Denying that any abuse has ever taken place
- Telling the person no one would believe the accusations because it is all in his/her head
- Forgetting promises or agreements
- Minimizing / trivializing
- Denying access to grandchildren or friends, family or regular activities
- Refusing to validate the other person's feelings of hurt
- Suggesting that nobody else would be upset by the same treatment

- **Rejecting**

- Refusing to acknowledge a person's presence, value or worth
- Communicating to a person that he/she is useless or inferior
- Devaluing his/her thoughts and feelings
- Not considering a person's wishes



Tactics/Cues of Emotional Abuse

Deliberate

• Accusing, Blaming and Jealous Control

- Telling a person repeatedly that he/she has caused the abuse
- Criticizing behaviour and ridiculing traits
- Continuously finding fault with the other person or making the person feel nothing he/she does is ever right
- Setting unrealistic standards
- Belittling the person's thoughts, ideas and achievements
- Diminishing the identity, dignity and selfworth of the person
- Mimicking her/him

• Degrading

- Insulting, ridiculing, name calling, labelling the person as stupid
- Gossiping, making up rumours about the senior
- Humiliation, shaming
- Criticism, put downs
- Bullying (including on the internet)
- Treating a senior like a child
- Yelling, shouting, swearing
- Harassing-repeatedly contacting, following or watching the other person

• Terrorizing

- Inducing terror or extreme fear in a person through coercion or intimidation
- Threatening to hurt or kill a pet or loved ones
- Threatening to destroy possessions
- Threats of violence or abandonment
- Threatening to have the person deported or placed in an institution
- Verbal intimidation, being forced into making decisions against the older adult's will
"Give me gas money or I won't take you to visit your grandchildren"

• Isolating

- Physically confining the person
- Controlling - not allowing older adults to socialize, including limited access to telephone, friends, or attending social gatherings;
- Limiting freedom and excluding an older adult from personal decisions
- Locking a person in a closet or room
- Refusing a person access to his/her own or jointly owned money
- Depriving a person of mobility aids or transportation
- Using others as pawns in relationships

Characteristics of Abusers and Risk Factors

Who Are The Likely Perpetrators Of Emotional Abuse?

- Partner/Spouse
- Family member (grandchildren, adult offspring)
- Caregiver
- Paid caregiver
- Other residents residing in care home
- Facility Staff

Characteristics of Perpetrator

- Suffering from mental illness
- Misuse of Substances/alcoholism
- Caregiver depression
- Anxiety from level of care provision by self or others
- Financially dependent on victim
- Seeking power and control over older adult they perceive to be vulnerable

Risk Factors for Older Adult of Emotional Abuse

- Socially or Physically Isolated
- Lacks social or emotional support
- Requires physical/ mechanical assistance
- Lives alone
- Suffers emotional health issues
- Misuses substances/alcoholism
- Some dependence on activities for daily living
- Poor health
- Poor social well-being
- Lesbian, gay, bisexual or transgendered older adults
- Experiencing language and cultural barriers

Based a research report, psychological abuse is the most common form of abuse within lesbian relationships and the rate of emotional and/or financial abuse among visible minority men is 1.5 times higher than visible minority women.³

Though it leaves no outward scars, elder psychological abuse exploits older adults' vulnerabilities through cruel acts of omission or commission.²

Recognizing Behavioural Signs of Abuse

Signs that may indicate that an older adult is/has experienced emotional abuse include changes in their normal routines, behaviour, as well as their mental health. Unexplained or uncharacteristic changes in behavior may also be mistaken for memory loss or illness, when really, they are the effects of stress or worry resulting from emotional abuse the senior is experiencing. The chart below highlights key behavioral changes that an older adult may experience as well as changes in a caregivers behavior when they become abusive.^{1,3,6,8}

Older Adult

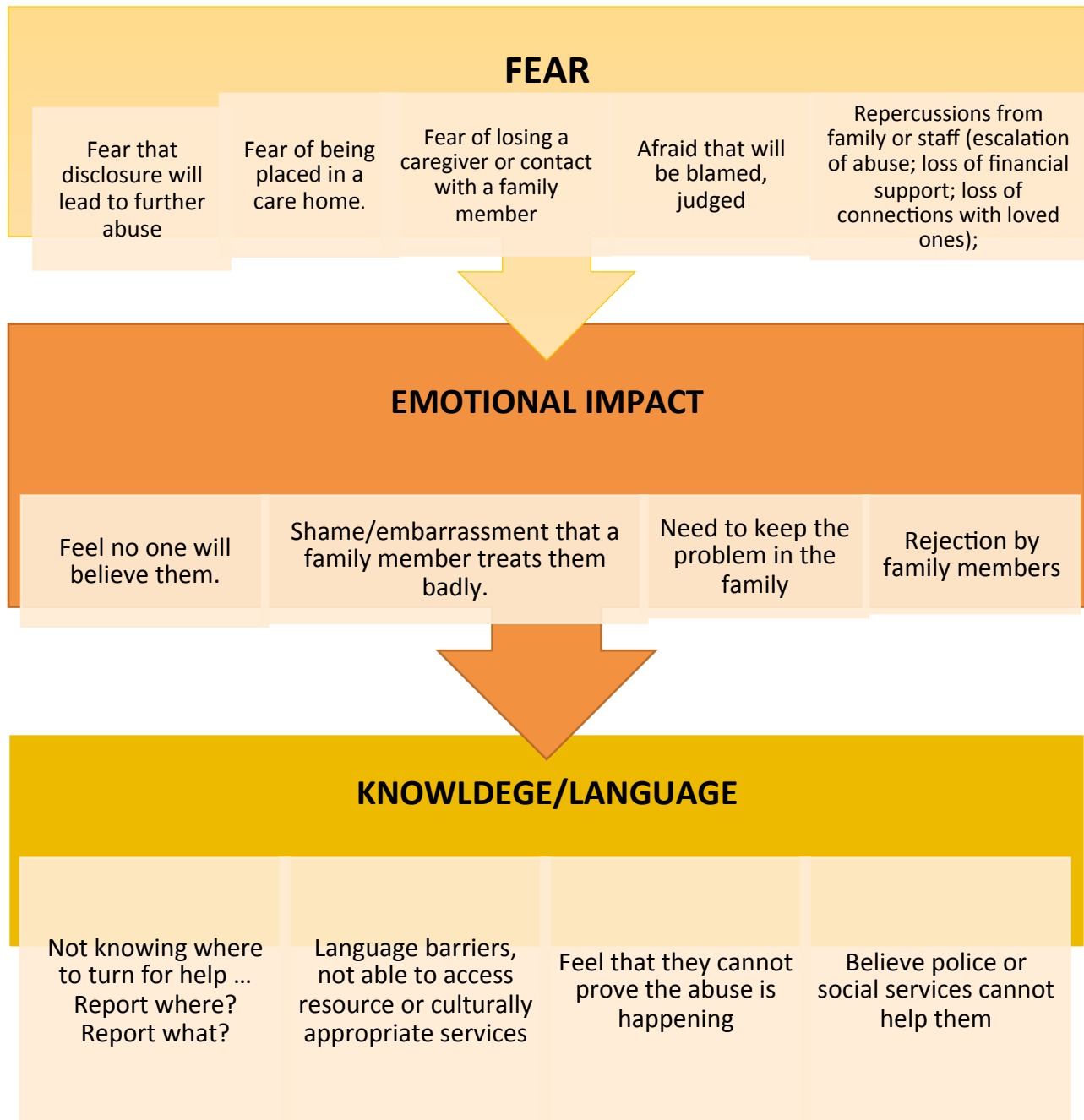
- Fear, discomfort or nervousness around family members, friends, caregiver or other persons.
- Unusual withdrawal from family and friends- lack of interest in social contacts
- Passivity, or increasing depression without any apparent reason
- Unexplained feelings of helplessness, hopelessness or anxiety, low self-esteem
- Heightened levels of upset or agitation
- Contradictory statements or other ambivalence not resulting from mental confusion.
- Reluctance to talk openly, may wait for caregiver to respond to questions asked of them.
- Uncommunicative and unresponsive
- Avoidance of physical, eye or verbal contact with caregiver and/or health care providers.
- Difficulty with normal life transitions (i.e., Retirement)
- Extreme passivity and (possible rocking, sucking, biting) commonly associated with dementia (and therefore may be misdiagnosed as dementia patients)
- Change in eating patterns - sudden loss of appetite unrelated to physical disease or aging
- Sleep problems (insomnia).
- Substance abuse (in particular, alcohol)
- Self-harming

Caregiver

- Appears tired or stressed.
- Seems excessively concerned or unconcerned.
- Blames the older person for acts such as incontinence.
- Behaves aggressively, caregiver treats the older person like a child or in a dehumanized way
- Has a history of substance abuse or abusing others.
- Does not want the older person to be interviewed alone.
- Responds defensively when questioned; may be hostile or evasive.
- Has been providing care to the older person for a long period of time.

Barriers to Reporting

It is important to consider the barriers older adults face ,in reporting or disclosing abuse and why they may not seek help. Cases of emotional abuse are often not disclosed or the person is not 'believed' because it may be seen as a case of "he said: she said." There are numerous reasons why older victims may choose not to report their victimization to the police.^{2,11}



Having the Conversation

Emotional abuse can be very difficult to determine, but it is important to be aware of sudden changes in the older adult's behavior. Conducting a thorough assessment to detect, and identify signs of tactics abusers may be using as well as behavioral changes will help guide an intervention to support the older adult. Asking the older adult "questions" to **start the conversation** and get a better understanding of their situation and feelings.

Persons working with older people in potentially abusive situations need to be sensitive to cultural differences and intervene accordingly. Formulating culturally sensitive prevention and intervention efforts requires an understanding of roles and responsibilities within the family and help-seeking behaviors.⁶ Certain cultural values, beliefs and traditions influence family dynamics, intergenerational relationships and ways in which families define their roles and responsibilities and respond to daily challenges. These differences make some situations difficult to distinguish from abuse or neglect.

Assessment Questions

(Older Adult Residing in a Long-term Care or Retirement Home)

- Does the resident have a limited social network?
- Is the resident isolated?
- Has anyone yelled, insulted or made the resident feel bad about themselves?
- Does the resident feel afraid of anyone in particular?
- Is the resident withdrawing from participating in activities or socializing?
- Does the resident have any serious illnesses/physical impairments?
- Does the resident have a cognitive impairment?

ASSESSMENT QUESTIONS

- Is there anyone close to you that makes you feel uncomfortable?
- Is there anyone that you fear being left alone with?
- Are you afraid of family members and/or caregivers?
- How do family members behave towards you? Are they verbally abusive?
- Do your caregiver and/or family member(s) always answer questions that are asked of you?
- Can you tell me about a time recently when someone talked to or yelled at you in a way that made you feel bad about yourself?
- Does anyone ever scold or threaten you? Can you give me an example?
- Does anyone ever tell you that you're sick when you know you aren't? Can you give me an example?
- When was the last time you got to see relatives or friends?
- Do you have any access to a telephone? If not, why not?
- Are you by yourself a lot?

If the older adult answered yes:

- Did you receive any services or support to help you through the abuse?

EMOTIONAL ABUSE - Formulating Questions for Suspected Abuser

- Are you and ____ (senior's name) aware of the kinds of help available in the community?
- How do you and ____ (senior's name) handle disagreements?
- What expectations does ____ (senior's name) have of you?
- Most caregivers find their role stressful. I sense caring for _____ (senior's name) is stressful for you. Is this recent or has this been this way for some time?
- How do you react under stress?
- Do you tell people you care about when you are feeling stressed?
- When you are angry/resentful/frustrated with ____ (senior's name) have you ever felt out of control? What did you do?
- Do you feel able to ask for help from others when you feel you need a break?
- Is caring for ____ (senior's name) different than you thought it would be?
- How do you feel you are managing the present situation?
- How is ____ (senior's name) involved in decisions and determining his/her care?
- What does _____ (senior's name) need help with every day?

Adapted from¹⁰: Seniors Resource Centre Association of Newfoundland and Labrador, 2006

Note: Working with a suspected abuser is a very delicate situation and should only be undertaken by a qualified professional possessing the appropriate skills and training.

EMOTIONAL ABUSE

CASE STUDY



I feel like people are avoiding me. One man asked me if I was happy to use an indoor toilet. I wonder what they are saying about me?

Anna, 84, has spent most of her life living in her remote fly-in First Nation community. Anna was a residential school survivor. She was taken away from her family and forced to attend school at an early age. She learned how to speak English and only completed grade 8. Anna moved back to her community, got married and raised 5 children. Anna mostly spoke Cree at home. Anna vowed she would always stay at home and never leave her community again. Anna's husband passed away six months ago. She fell and had to have an operation on her hip. She has mobility issues. Her family was unable to care for her in her community. With no other options for care, Anna reluctantly agreed to move to the city to live in a Long Term Care Home.

Anna was abused in a residential school, English is Anna's second language. She uses a walker therefore has some physical difficulties. Anna is not adjusting to the Long-Term Care Home, the other residents are ignoring her and she often overhears them talking about her. The staff don't seem to take the time to listen to her or respect any of her cultural traditions or foods. Anna does not have any family living in the city she just moved to and her other family members rarely visit, but when they do they are always asking for money. Staff have seen her crying and withdrawn. Anna says she wants to move back home.



What would you recommend Long-Term Care staff do to help Anna?

FACT BOX

Type of Abuse: Emotional

Warning Signs or Risk Factors: abuse survivor, loneliness, language not spoken well, dependency for care, widow, lacks social supports

For the Victim: family does not visit Anna, residents are ignoring her and talking about her, staff not listening, withdrawn, crying, dependent on staff for care services, loneliness, language barrier, financial requests from family

For the Abuser: possible lack of understanding of cultural background, ageism, racism, financial problems for family

Assessment Questions:

- Does the older adult appear fearful of family and/or caregivers?
- How do family members behave toward the older adult? Are they verbally abusive?

Ask the older adult:

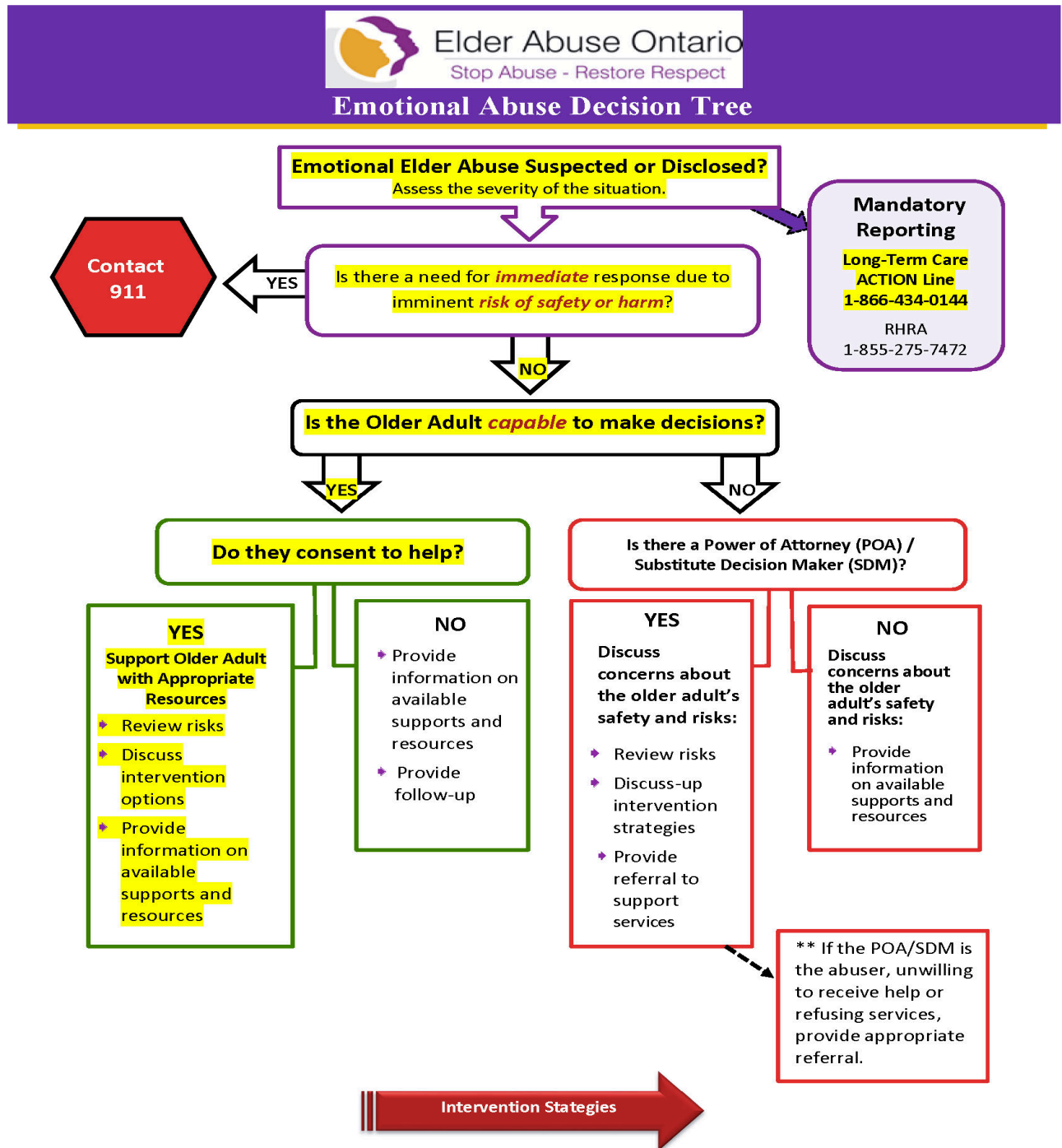
- Can you tell me about a time recently when someone talked to or yelled at you in a way that made you feel bad about yourself?
- When was the last time you got to see relatives or friends?
- Do you have access to a telephone? If not, why not?
- Is there anyone close to you that makes you feel uncomfortable?

If the older adult answered YES:

Did you receive any services or support to help you through the abuse?

SUPPORTING ANNA

The example below illustrates how a service provider can use the decision tree to support Anna.





Emotional Abuse Decision Tree

Assessment Questions



- Does the older adult appear fearful of family and/or caregivers?
- Have you noticed sudden changes in the older adult's behaviour (e.g. depressed rather than content)?
- How do family members behave toward the older adult? Are they verbally abusive? Do they always speak for the older person?

ASK the Older Adult

- Can you tell me about a time recently when someone talked to or yelled at you in a way that made you feel bad about yourself?
- Does anyone ever scold or threaten you? Can you give me an example?
- Does anyone ever tell you that you're sick when you know you aren't? Can you give me an example?
- When was the last time you got to see relatives or friends?
- Do you have any access to a telephone? If not why not?
- Are you by yourself a lot?

Resources and Community Support

| | |
|---|-----------------|
| Alzheimer Society of Ontario | 1-800-879-4226 |
| Assaulted Women's Helpline | 1-866-863-9511 |
| Community Care Access Centre | 310-2222 (CCAC) |
| Law Society Referral Service | 1-855-947-5255 |
| Mental Health Helpline | 1-866-531-2600 |
| Office of the Public Guardian and Trustee | 1-800-366-0335 |
| Ontario Provincial Police | 1-888-310-1122 |
| Ontario Human Rights Commission | 1-800-387-9080 |
| Seniors Safety Line | 1-866-299-1011 |
| Retirement Homes Regulatory Authority | 1-855-275-7472 |
| Victim Support Line | 1-888-579-2888 |
| Welcome Centre Immigrant Services | 1-877-761-1155 |

For more resources visit: www.elderabuseontario.com

Intervention Strategies



Develop Safety Plan

Police Wellness Check

Provide Seniors Safety Line Information

Follow-up with Victim Services

Contact shelter services safe bed program



Support access to crisis intervention

Provide counselling services for caregiver/POA

Discuss options for protecting finances

Refer for legal support

Arrange appointment with Family Physician/Family Health Team/Geriatric Assessment Services

Link caregiver with support programs



Document actions

Ensure linked to support

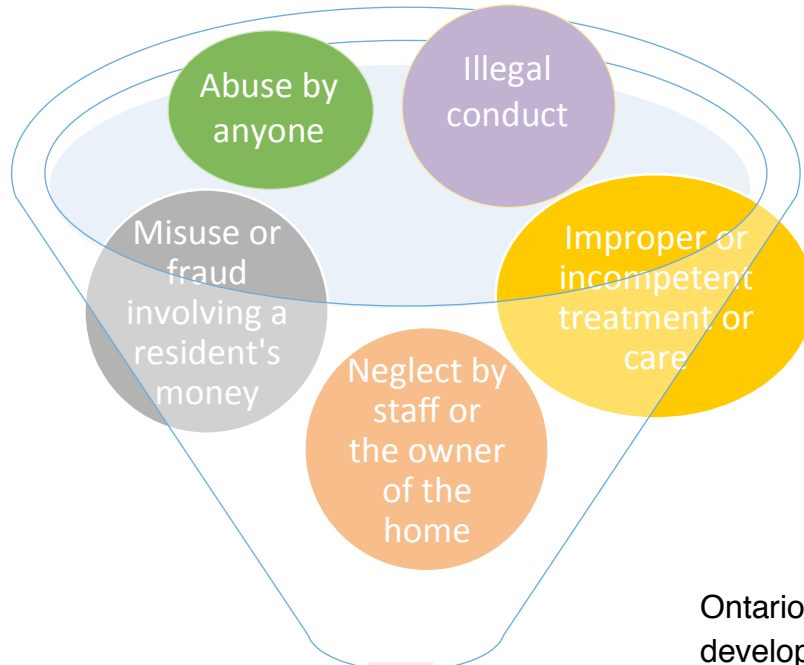
Monitor situation

Follow-up with senior

Know the Law

In Ontario, the law states that the abuse of an older adult living in a Long-term Care or Retirement Home must be **reported immediately** by anyone who has reasonable grounds to suspect that a resident has been harmed or will be harmed.

Retirement Home Act s.75.(1) and Long-Term Care Homes Act, 2007 s.24(1)



This reporting obligation under the *Regulated Health Professions Act*, includes family members of residents, staff, owners of the homes, doctors, nurses and other health care professionals, drugless practitioners and social workers.

REPORT

It is against the law for anyone to punish someone for reporting abuse of a resident in a LTC or Retirement Home.

Ontario has also developed a province-wide Seniors Crime Stoppers Program, to allow anyone, to anonymously report incidents of elder abuse. This information will be forwarded to the Police without fear of the caller being identified.

**Senior Crime Stoppers
1-800-222-TIPS**

Is Emotional Abuse A Criminal Offence?

In Canada, certain forms of elder abuse are considered crimes under the [Canadian Criminal Code of Canada](#). Elder abuse is not a separate offence but some abusive actions are covered by the Code. Although all forms of abuse are wrong, not all actions or tactics used by perpetrators toward an older adult (such as insulting, isolating, and ignoring behaviours) are necessarily recognized as a crime. They can however be signs that the abuse might get worse in the future.

Under criminal law, abusers can be held accountable for certain emotional abusive tactics (stalking, verbal threats, harassing telephone calls, deliberate intimidation and counselling (advising) suicide) when the behaviour is considered an offence under the *Criminal Code of Canada*.^{3,10,11} Actions that are Criminal offences do not cease to be an offence because the person is a senior. Police can lay Criminal charges if they have reasonable grounds to believe a crime has been committed. **Some of the Criminal Code provisions that may apply in cases of emotional elder abuse include:**

Assault s. 265-268

Can be committed by attempting or threatening to apply force to another person if the other person believes that the abuser has the ability to carry out the act. Most people think of assault only as the intentional use of force against somebody without his or her consent.

However, attempting or threatening by an act or gesture to use force may also be assault. If the victim has reason to believe that the perpetrator

Uttering Threats (s. 64.1)

When someone knowingly utters or conveys a threat to cause death or bodily harm to another person. It is also an offence to threaten another's property (to burn, destroy, or damage) or threaten to kill, poison or injure his or her animal or bird. Since many abusers maintain control by threatening to kill their partners or destroy their pets or property, this provision in the Code may be able to deal with such threats..

Intimidation (s. 423)

To be criminal, this behaviour must be overtly threatening or must happen repeatedly and must have made the victim fear for his or her personal safety. This offence includes stalking.

Given that the behaviour often happens repeatedly the psychological damage may be considerable.

Harassing telephone calls (s. 372.2 & .3)

Where do I report Emotional Abuse?

Legal Resolutions

There is both a criminal and civil recourse, available to victims of emotional/psychological abuse. In addition to those noted above, the John Howard Society and the Elizabeth Fry Society provide information about the criminal process and explain what is involved for the victim or witnesses. They are able to explain the criminal justice system and what one might expect to occur during the process. Agencies such as Victim Services will assist victims throughout the court process or if the abused older adult is asked to testify, the **Victim/Witness Assistance Program** will provide support throughout the court proceedings. The police can be helpful in connecting the abused senior with these important supports¹¹.

There are several means by which an individual can report emotional abuse including but not limited to:

- Police
- Victim Services Programs
- Community agencies
- Health clinics
- Hospitals
- Someone trusted (ie. Family members, friend, health care provider)

If the abuser is charged: the victim may wish to request a **no contact order** as a condition of his/her release. If the offender is found guilty, conditions not to contact the victim may be part of a sentence imposed.

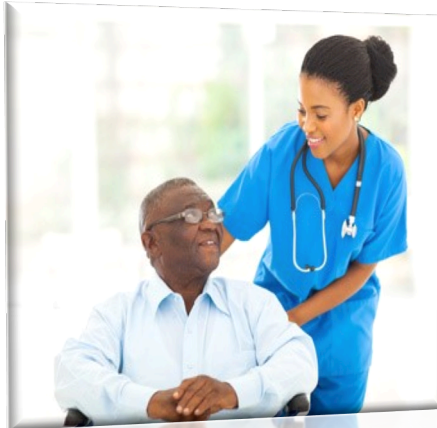
Civil law solutions may help victims, by having the courts grant **protection or restraining orders**, prohibiting the abuser from further harassing the victim. The court can make specific orders for the abuser - to get counselling, the removal and/or no access to firearms, or to order the abuser to compensate the victim for monetary losses¹¹.

A peace bond can also be obtained for older adults experiencing intimidation and harassment. A **peace bond** is an agreement that a person makes with the Court, promising to “keep the peace and be of good behaviour”.¹¹

Many police departments have officers who specialize in seniors issues, sometimes referred to as **Seniors Support Officers**, who are well informed about abuse. Seniors and the general public are encouraged to call these officers, to talk about their concerns and be provided with valuable information, like connecting the older adult to various **community resources** and/or making **referrals** to other agencies as needed.

EMOTIONAL ABUSE

CASE STUDY



I feel like I don't have a voice anymore. My daughter does all the talking and I am getting very angry.

A Health Care professional is assessing Fred for Home Care needs. They are asking questions but Norma (Fred's daughter) is answering for him. Fred remains quiet. Norma does not leave her father alone with the professional.



What would you suggest that the worker do?

FACT BOX

Type of Abuse: Emotional

Warning Signs or Risk Factors:

For the Victim: daughter does not leave Fred alone with health care professional; daughter always answers for him; dependent on daughter; requires home care services

For the Abuser: always answers for Fred; possible relationship problems from the past, possible care-giver burnout

Assessment Questions:

- Does the older adult appear fearful of family and/or caregivers?
- How do family members behave toward the older adult? Are they verbally abusive? Do they always speak for the older adult?

Ask the older adult:

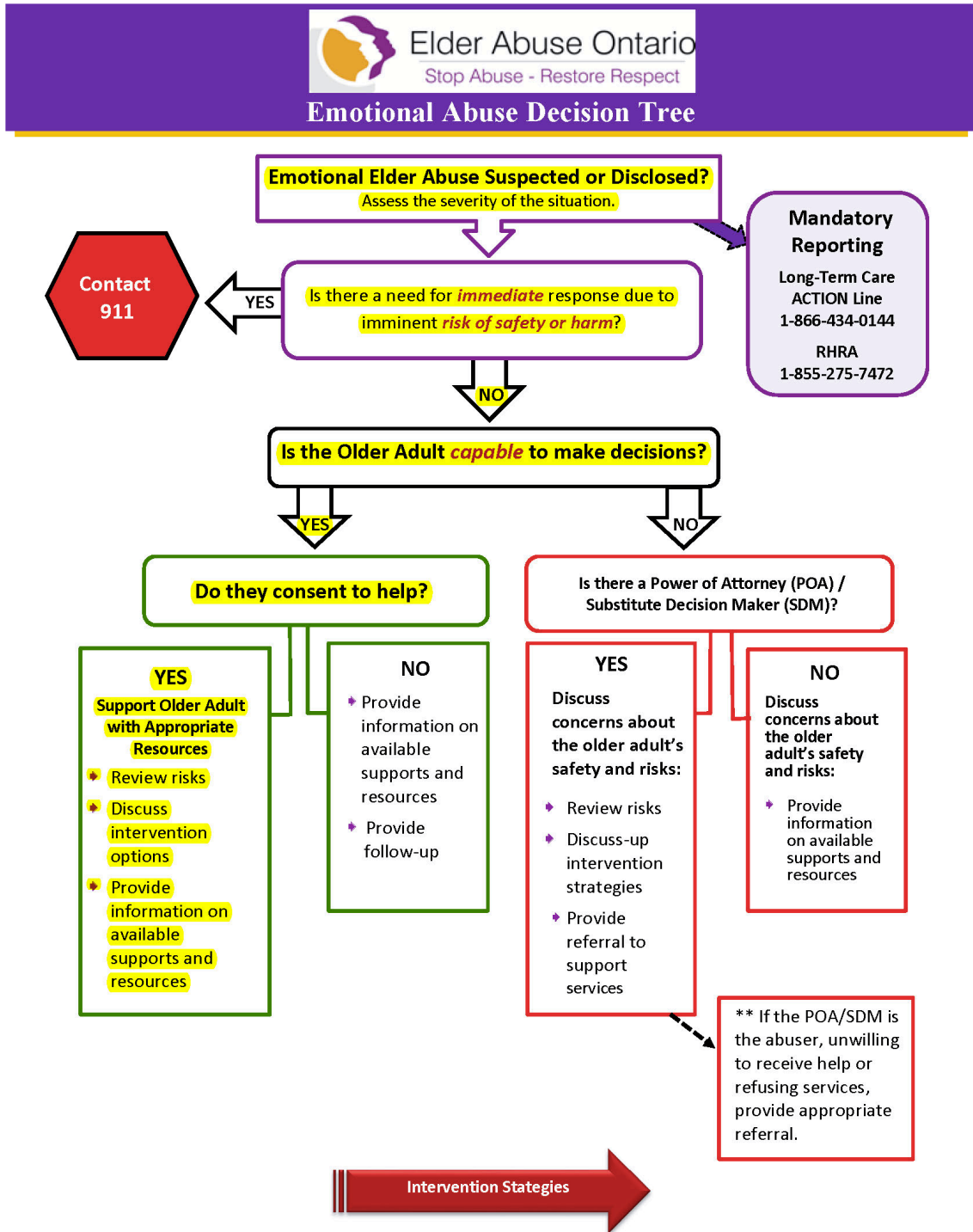
- Can you tell me about a time recently when someone talked to or yelled at you in a way that made you feel bad about yourself?
- Does anyone ever scold or threaten you? Can you give me an example?
- When was the last time you got to see relatives or friends?
- Do you have access to a telephone? If not, why not?
- Are you by yourself a lot?

If the older adult answered YES:

Did you receive any services or support to help you through the abuse?

SUPPORTING FRED

The example below illustrates of how a service provider can use the decision tree to support Fred.





Emotional Abuse Decision Tree

Assessment Questions



- Does the older adult appear fearful of family and/or caregivers?
- Have you noticed sudden changes in the older adult's behaviour (e.g. depressed rather than content)?
- How do family members behave toward the older adult?
Are they verbally abusive? Do they always speak for the older person?

ASK the Older Adult

- Can you tell me about a time recently when someone talked to or yelled at you in a way that made you feel bad about yourself?
- Does anyone ever scold or threaten you? Can you give me an example?
- Does anyone ever tell you that you're sick when you know you aren't? Can you give me an example?
- When was the last time you got to see relatives or friends?
- Do you have any access to a telephone? If not why not?
- Are you by yourself a lot?

Resources and Community Support

| | |
|---|-----------------|
| Alzheimer Society of Ontario | 1-800-879-4226 |
| Assaulted Women's Helpline | 1-866-863-9511 |
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For more resources visit: www.elderabuseontario.com

Intervention Strategies



Develop Safety Plan

Police Wellness Check

Provide Seniors Safety Line Information

Follow-up with Victim Services

Contact shelter services safe bed program



Support access to crisis intervention

Provide counselling services for caregiver/POA

Discuss options for protecting finances

Refer for legal support

Arrange appointment with Family Physician/Family Health Team/Geriatric Assessment Services

Link caregiver with support programs



Document actions

Ensure linked to support

Monitor situation

Follow-up with senior

EMOTIONAL ABUSE

CASE STUDY



I don't like when my niece hurts my feelings and makes me feel bad all of the time. She says I am lucky that she cares for me because no one else wanted to.

Martha is a 78 year old woman with mobility issues and also has a hearing impairment. Her niece, Bethany, is her caregiver. She lives in Martha's home so that she can help out.

Bethany has been seen changing the TV Channel on Martha saying that her "program is stupid and only a bored, dumb person" would like the show. When Martha has not understood what someone has said and asks for clarification and to repeat the question, Bethany tells her that "she is just too stupid to listen properly".

What should the PSW do next?



FACT BOX

Type of Abuse: Emotional, verbal

Warning Signs or Risk Factors:

For the Victim: Mobility issues; hearing impairment; living with her niece

For the Abuser: Living with Martha; possible caregiver burnout,

Assessment Questions:

- Have you noticed sudden changes in the older adult's behavior (e.g. depressed rather than content?)
- How do family members behave toward the older adult? Are they verbally abusive?

Ask the older adult:

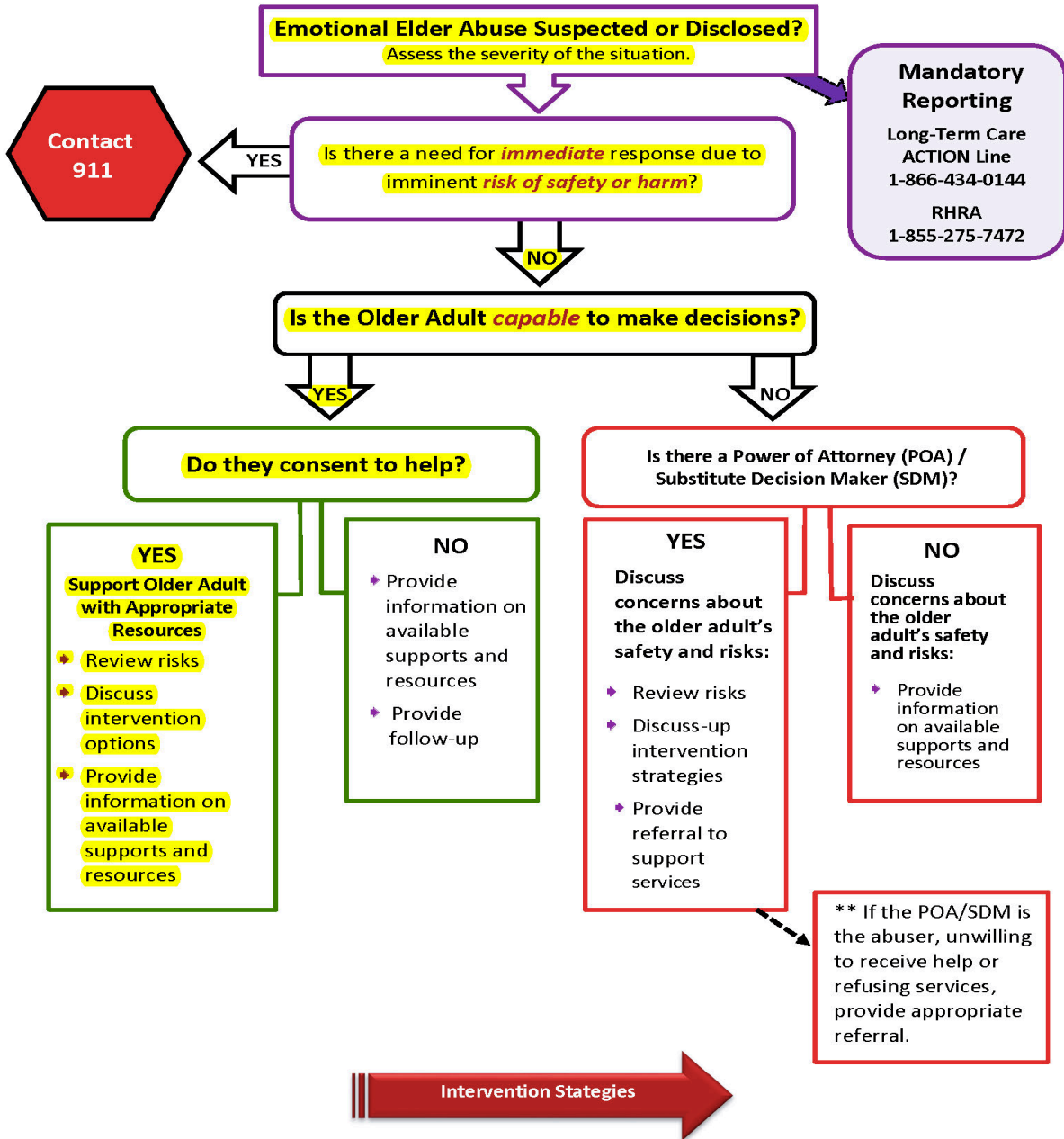
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- Do you have access to a telephone? If not, why not?

If the older adult answered YES:

Did you receive any services or support to help you through the abuse?

SUPPORTING MARTHA

The example below illustrates of how a service provider can use the decision tree to support Martha.



Emotional Abuse Decision Tree

Assessment Questions



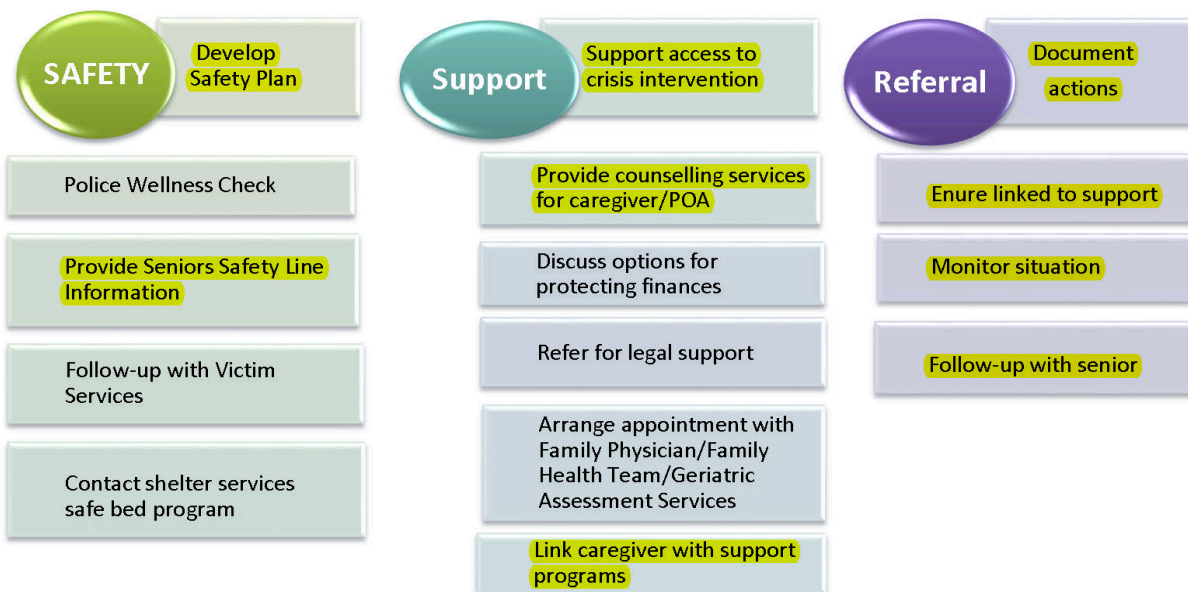
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Intervention Strategies



EMOTIONAL ABUSE

CASE STUDY



I feel so helpless and don't know who can help me. I don't feel safe in my own home and I feel like everyone is stealing from me.

Emma is 81 and lives alone in her home in a rural area that is a small close knit community. Someone in Emma's family has been stealing her pain medication. and she is in constant pain. She feels very stressed, angry, frustrated and helpless that someone is stealing from her. She has tried everything to hide her medication, yet it still gets stolen. She doesn't know who to trust and this is the third time Emma has had to report her medication stolen.

Emma has had addiction issues in the past, but has been clean for over 10 years. There are rumours circulating that Emma is selling her own medication. This hurts Emma very much. She begins withdrawing from attending community functions and visits with friends.



What should you do?

FACT BOX

Type of Abuse: Emotional, verbal abuse

Warning Signs: Emma is isolating herself from other people, missing medication, believes someone is stealing from her, gossiping about Emma by other family members.

Risk Factors for the Victim: Past history with addiction, she lives alone

Risk Factors for the Abusers: past history of gossiping about other residents or being the subject of rumors and gossip.

Assessment Questions:

- Is there anyone that makes you feel uncomfortable?
- Have you noticed sudden changes in the older adult's behaviour (e.g. depressed rather than content)?
- Can you tell me about a time recently when someone talked to or yelled at you in a way that made you feel bad about yourself?
- Does anyone ever scold or threaten you? Can you give me an example?
- When was the last time you got to see relatives or friends?
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If the older adult answered YES:

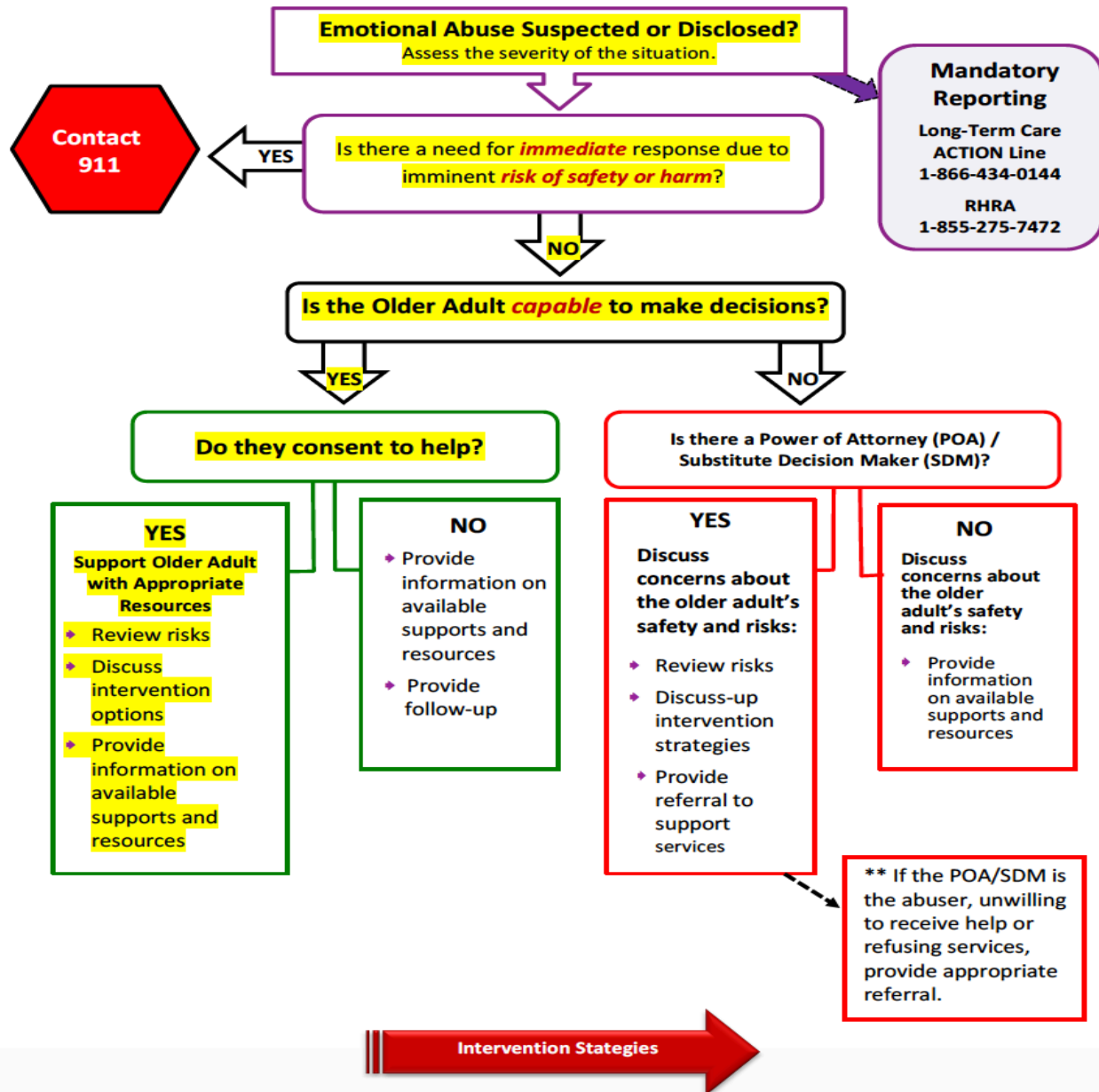
Did you receive any services or support to help you through the abuse?

SUPPORTING EMMA

The example below illustrates of how a service provider can use the decision tree to support Emma.



Emotional Abuse Decision Tree





Emotional Abuse Decision Tree

Assessment Questions



- Does the older adult appear fearful of family and/or caregivers?
- Have you noticed sudden changes in the older adult's behaviour (e.g. depressed rather than content)?
- How do family members behave toward the older adult? Are they verbally abusive? Do they always speak for the older person?

ASK the Older Adult

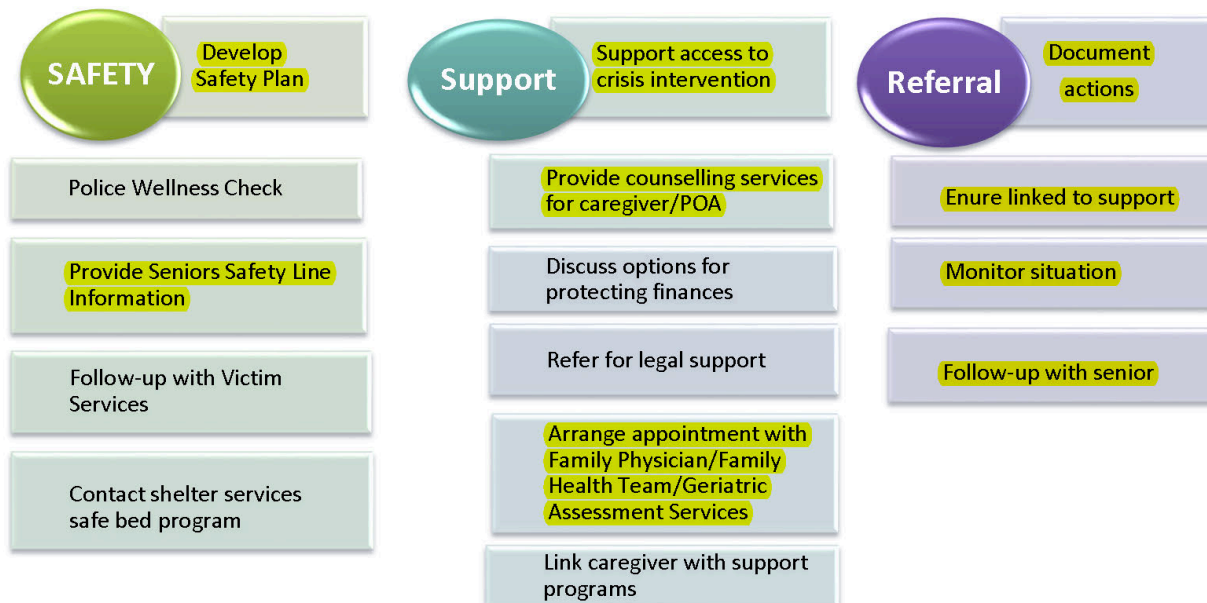
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Intervention Strategies



EMOTIONAL ABUSE

CASE STUDY



“When my partner moved into a Long-Term Care Home I know he would receive good care, but I didn’t think I would be treated unfairly when I moved to a retirement home close by”



What should Tom’s son do?

Tom is 75 years old and has just moved into a retirement home. Tom’s partner, Omar, lives in a Long-Term Care Home only a five minute walk away from Tom’s place. Tom plans to visit Omar daily in the mornings and afternoons and go back to his home for lunches and spend his evenings relaxing.

When Tom moved into his new residence, he noticed a group of men who were always together in the courtyard. He also noticed them eating together during meals and always laughing and joking around with each other and the other residents.

One day, when Tom was returning to his suite walking through the courtyard he noticed a few men in a group talking. As he walked by, one of the men called him a derogatory name while another men laughed and began taunting him. Tom quickly returned to his suite. He was so shocked and upset. The teasing brought back traumatic childhood memories that Tom had worked hard to erase. Those familiar feelings of dread and fear returned.

The men would tease Tom whenever he ate meals or participated in activities and sometimes throw things at him during lunch. They would also taunt anyone who was friendly with Tom. He felt like an outcast.

Tom soon found himself avoiding any confrontations with the men at all costs. He began missing visits with Omar and meals. He stopped participating in any of the Home’s activities. Tom’s son began to get concerned when Omar informed him about what was happening and that Tom was missing more and more visits.

FACT BOX

Type of Abuse: Emotional, verbal, psychological abuse and physical abuse

Warning Signs – Feelings of dread and fear, has stop participating in activities, does not visit Omar anymore and is missing meals

Risk Factors For The Victim –Lives alone in the retirement residence, past experiences with being bullied, is living away from his partner.

Risk Factors For The Abusers –Possible mental health issues, past history of abusive behaviour, past criminal history

Assessment Questions:

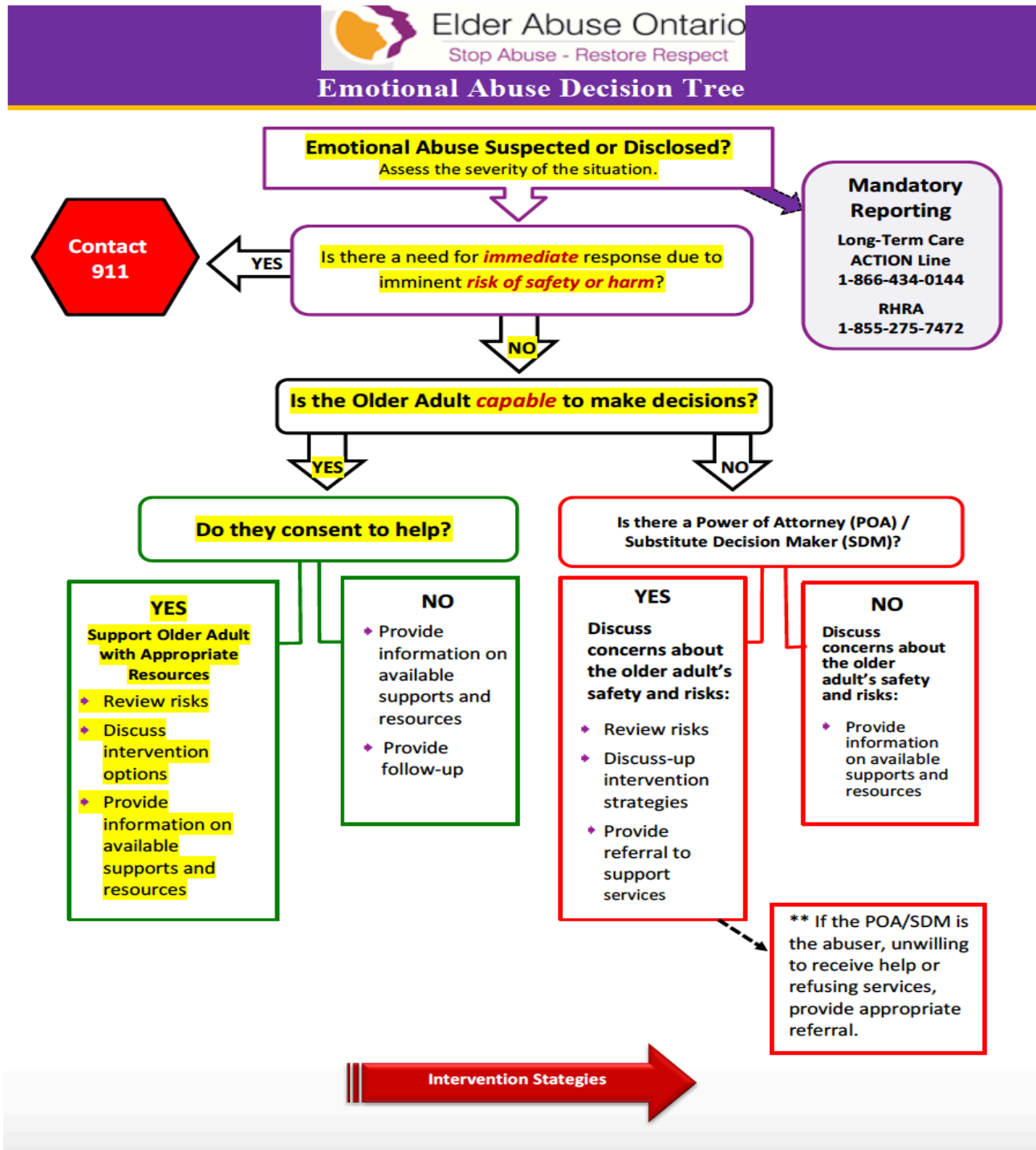
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- Does anyone ever scold or threaten you? Can you give me an example?
- Do you have any access to a telephone? If not why not?
- Are you by yourself a lot?
- Does the older adult appear fearful of anyone in the retirement residence?

If the older adult answered YES:

Did you receive any services or support to help you through the abuse?

SUPPORTING TOM

The following example illustrates how a service provider can use the decision tree to support Tom.





Elder Abuse Ontario

Stop Abuse - Restore Respect

Emotional Abuse Decision Tree

Assessment Questions



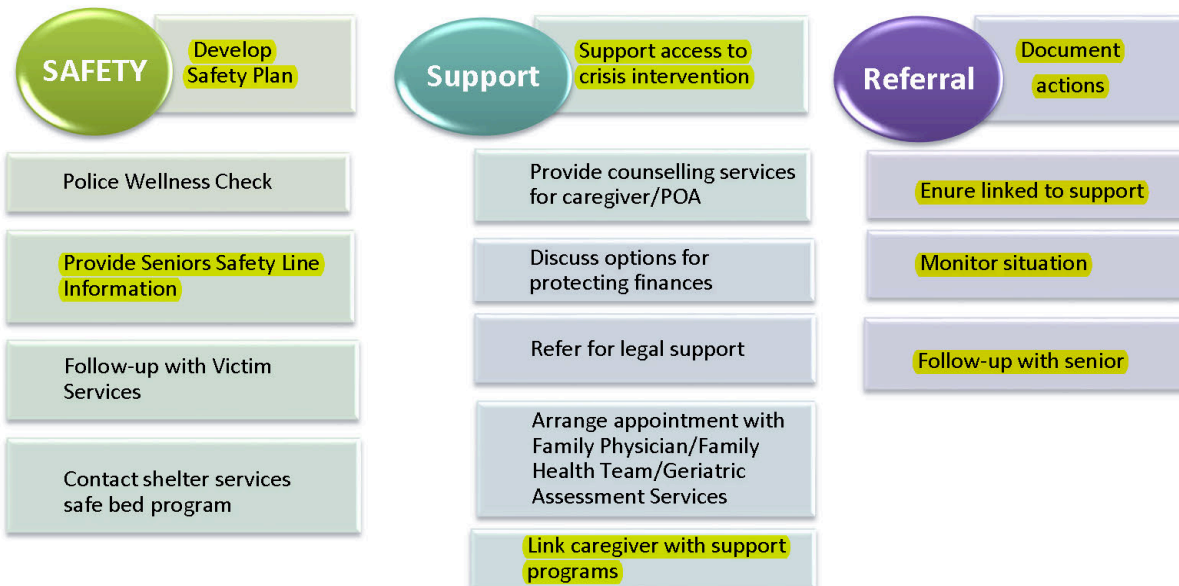
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Intervention Strategies



Tel: 416-916-6728

Elder Abuse Ontario
www.elderabuseontario.com

admin@elderabuseontario.com

EMOTIONAL ABUSE

CASE STUDY

“My love my son but I don’t understand why is so angry all the time and yells at me.”



A son and daughter-in-law place their father in a respite bed at a nursing home while they go to Florida for a month. Upon return, the son calls to say that his father will be staying at the nursing home permanently. The son is the Power of Attorney for personal care. His father does not meet the eligibility requirements for nursing homes on a permanent basis but is capable of making his own decisions. The father is fairly independent and acts more like a volunteer than a resident at the nursing home. The father does not feel he “fits in”, and does not want to stay. He wants to return home to his apartment. The son has given up his father’s apartment and therefore the father cannot return. The son agrees to meet with staff to discuss a plan of action and becomes verbally abusive to both staff and family. At one point, the son stands up and with his finger in the managers’ face telling her “to shut up and listen, my dad is staying at the nursing home and that’s final”. The son controls the rest of the discussion and hushes his wife on several occasions, reminding her that she should keep her “mouth shut if she knows what is good for her”. The son states that his father has given away a large sum of money to various charities over the last 3 years and therefore can’t be trusted alone at home. The son walks out and his father has nowhere to go.



What should you do ?

FACT BOX

Type of Abuse Emotional abuse

Warning Signs

Risk Factors For The Victim – isolation, dependency on son, no living accommodations, lack of supports,

Risk Factors For The Abuser – anger, controlling behaviours, possible caregiver burnout, stress, possible mental health issues, past history of abusive behaviour,

Assessment Questions

- Does the older adult appear fearful of family and/or caregivers?
- How do family members behave toward the older adult? Are they verbally abusive? Do they always speak for the older adult?

Ask the older adult:

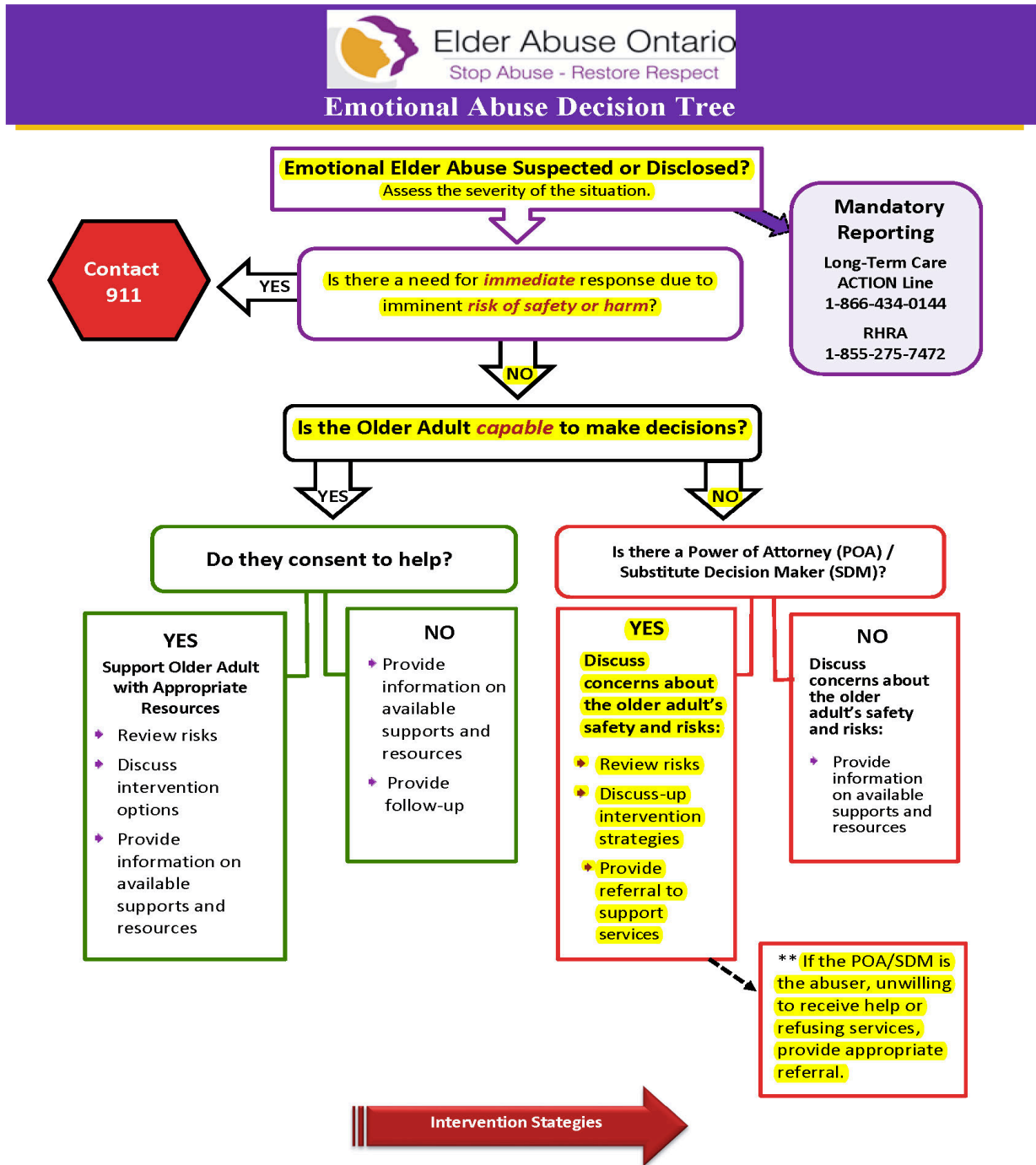
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- Does anyone ever scold or threaten you? Can you give me an example?
- When was the last time you got to see relatives or friends?
- Do you have access to a telephone? If not, why not?
- Are you by yourself a lot?

If the older adult answered YES:

- Did you receive any services or support to help you through the abuse?

SUPPORTING THE OLDER MAN

The following example illustrates how a service provider can use the decision tree to support the older man.





Elder Abuse Ontario

Stop Abuse - Restore Respect

Emotional Abuse Decision Tree

Assessment Questions



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- How do family members behave toward the older adult? Are they verbally abusive? Do they always speak for the older person?

ASK the Older Adult

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Intervention Strategies

SAFETY

Develop Safety Plan

Police Wellness Check

Provide Seniors Safety Line Information

Follow-up with Victim Services

Contact shelter services safe bed program

Support

Support access to crisis intervention

Provide counselling services for caregiver/POA

Discuss options for protecting finances

Refer for legal support

Arrange appointment with Family Physician/Family Health Team/Geriatric Assessment Services

Link caregiver with support programs

Referral

Document actions

Ensure linked to support

Monitor situation

Follow-up with senior

Tel: 416-916-6728

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admin@elderabuseontario.com

EMOTIONAL ABUSE

CASE STUDY



“I’m starting to think that I am being a burden to my boys. They have no patience for me anymore”

For 35 years Ned enjoyed teaching high school students. His students loved and appreciated him for his care and understanding of them.

Ned raised his three boys with the same love and understanding. Ned, since his retirement, found that two of his three adult sons were treating him like a child. They scolded him if he forgot to shave or had not dressed himself properly to their satisfaction. The boys yelled at him and constantly told him what to do. His sons never listened to what Ned was saying. Ned could not understand what he had done to make them treat him like this. He did not know what to do or how to deal with his on-going problem.



What should the worker do?

FACT BOX

Type of Abuse: Emotional

Warning Signs – Feelings of fear, confusion on how being treated, lonely, recent retirement, loose of identity, disrespected, self-care questionable

Risk Factors For The Victim –Lives alone, possible lack of ability to care for self, insight lacking,

Risk Factors For The Abusers –Possible mental health issues, ageism, anger issues,

Assessment Questions:

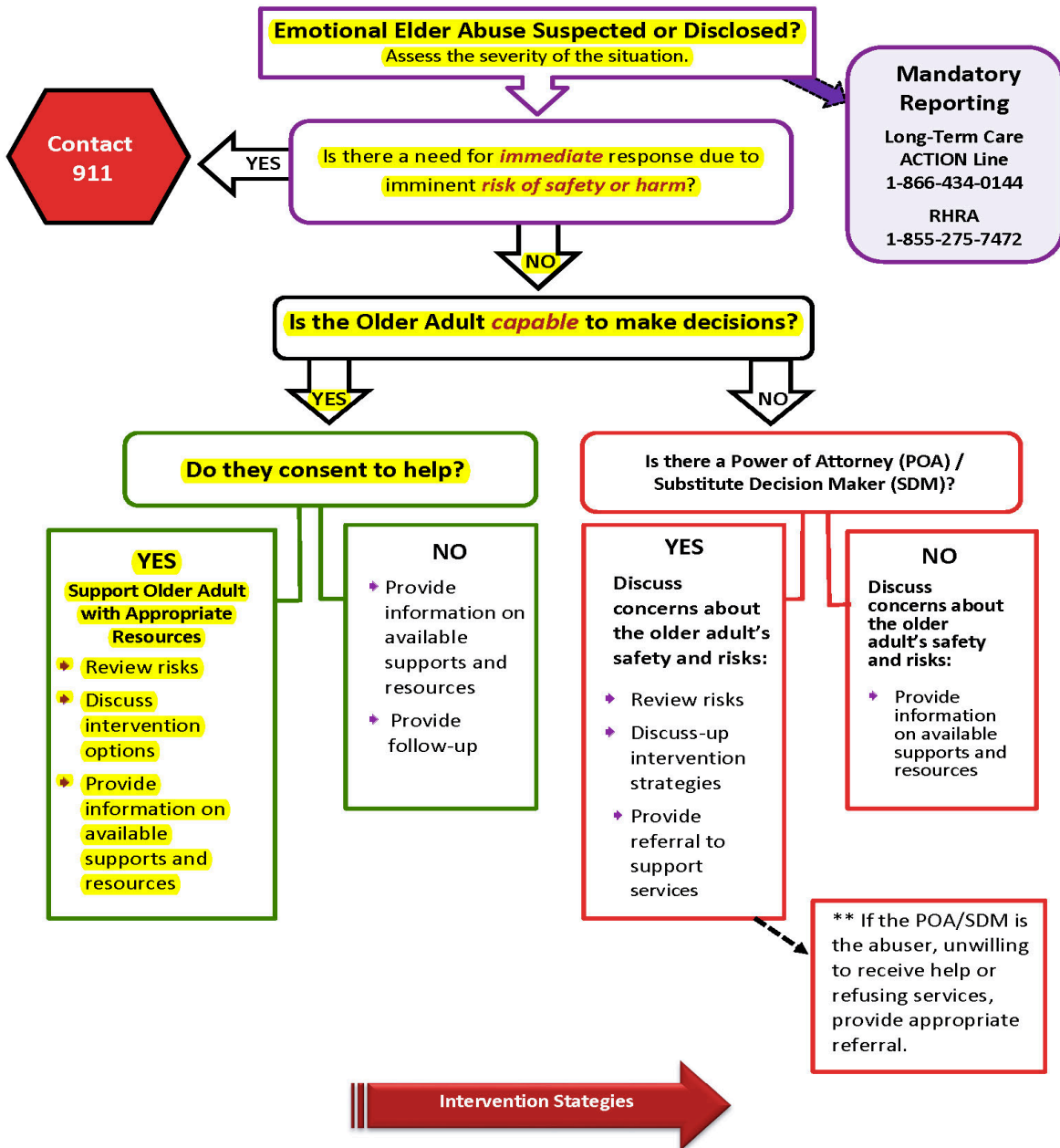
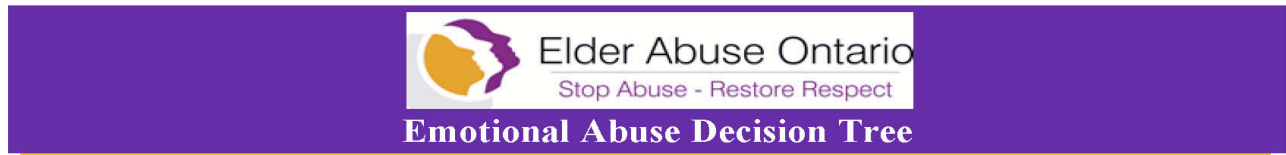
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- Do you have any access to a telephone? If not why not?
- Are you by yourself a lot?
- Does the older adult appear fearful of anyone in the retirement residence?

If the older adult answered YES:

Did you receive any services or support to help you through the abuse

SUPPORTING NED

The following example illustrates how a service provider can use the decision tree to support Ned





Elder Abuse Ontario

Stop Abuse - Restore Respect

Emotional Abuse Decision Tree

Assessment Questions



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ASK the Older Adult

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How to Support Older Adults

- If a family member is being cared for at home by paid caregivers or in a facility, remain involved and observant to be assured he/ she is receiving quality care and that there are no signs of abuse.
- Watch for changes in the older adult's mood or appearance.
- Be especially vigilant for signs of abuse if the older adult has a cognitive impairment.
- Offer or inform older adult about counselling and support services that can help them cope with their situation.
- Promote increased social contact and supports. Older adults who have the opportunity to talk to others is an important part of relieving stress and tensions.
- If you suspect an older adult may be a victim of emotional elder abuse, discuss your concerns with the person and encourage him/ her to open up with you if he/ she has concerns now or at any time in the future. Reassure the older adult that you are there to listen and assist in whatever way possible.
- Believe them. Never blame them for causing the abuse. Suggest community organizations or faith communities and other practical sources of help, and provide needed assistance if their disability prevents them from helping themselves.

If a family member is dealing with stress and conflict:

- Encourage the person who is using abusive strategies to seek counselling or group support to help deal with and alleviate family stress.
- Inquire about the availability of respite care to arrange a health care worker to provide family member/older adult for a few hours a week hours can help reduce caregiver stress.
- Contact the [Community Care Access Centre](#) to inquire about access to respite care, health care services within the home to assist with care such as bathing, dressing or cooking.
- Engage in social activities and communication with family members/friends. Families can work together to share solutions and provide informal respite for each other.

“Counseling for behavioral or personal problems in the family or for the individual with mental health and/or substance abuse problems can play a significant role in helping people change lifelong patterns of behavior or find solutions to problems emerging from current stresses. If there is a substance abuse problem in the family, treatment is the first step in preventing violence against the older family member.”⁶

Adapted from: Facts on psychological and emotional abuse of seniors. Government of Canada
American Psychological Association (2012). Elder Abuse & Neglect In Search of Solutions. Washington, DC

Actions Older Adults Can Take to Manage Emotional Abuse

- Seniors are entitled to being treated with respect.
- Seniors have a right to live free from psychological and emotional abuse.
- Seniors have every right to live in safety and security.

Actions:^{2,3,4,6}:

- Talk to someone you trust about the abuse such as a friend, doctor or other health care provider, or spiritual leader.
- Talk to a social worker, a counsellor or someone you trust. They can help you understand more about emotional abuse.
- Tell the abusive person that you don't like his/her behaviour and that it is not acceptable.
- Call your local distress centre for supportive telephone or in-person support.
- Change locations if necessary. Contact a shelter for a safe place to stay. Staff can also help with safety planning and refer you to programs and services to help you overcome barriers such as poverty or accessible housing.
- Maintain contact with loved ones and connections with friends, family and support networks.
- Ask for help when you need it.
- Try not to let the abuse silence you.
- Stay informed and know your rights.
- Write down what is happening to you. Keep your notes in a safe place.
- If you are afraid, call the police.
- Call 911 in an emergency.

Abusers can't always change, but sometimes there are ways to restore and improve intimate and family relationships. You do not have to face this alone.

There are many different kinds of abuse, and it's a good idea to know what they are so that you can protect yourself and your family and friends.

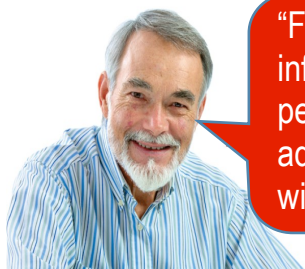


“Physical abuse is any physical contact that causes injury or not to the older adult. When my nephew hit me, that was **PHYSICAL ABUSE**. I know that I can reach out and get help.”

“ Psychological or Emotional abuse is when someone says or does something that causes anguish or fear . When my daughter threatened to leave and never visit me again, that was **EMOTIONAL ABUSE**.”



“Financial Abuse is any improper conduct, done with or without the informed consent of the older adult that results in monetary and/or personal gain to the abuser and/or monetary/personal loss to the older adult. “When my son stole my bank card and took \$500 to pay his bills without my consent, that was financial abuse.”



“Neglect is when my needs fail to be met. Sometimes this is intentional, and sometimes it isn't. When my nurse at the hospital didn't give me the right medication for several days, that was **NEGLECT**.”



Often times other forms of abuse are present with emotional abuse.

There are many signs and symptoms of abuse, and you can learn more about these on our website at www.elderabuseontario.com

If I have more questions or would like general information about staying safe, what should I do?



You can learn lots of great tips for staying safe at

www.elderabuseontario.com

Access the **Seniors Safety Line**

in 150 languages, 24 hours a day, 7 days a week,

1-866-299-1011

Helpful Resources

Elder Abuse Ontario

www.elderabuseontario.com

416-916-6728

Advocacy Centre for the Elderly

www.advocacycentreelderly.org

1-855-598-2656

Alzheimer Society of Ontario

www.alzheimer.ca/en/on

1-800-879-4226

Assaulted Women's Help Line

www.awhl.org

416-364-4144

Community Care Access Centre

www.healthcareathome.ca

310-2222 (CCAC)

Legal Aid Ontario

You can find a legal clinic in your area by going online

www.legalaid.on.ca

1-800-668-8258

Long-Term Care ACTION Line

www.ontario.ca/page/long-term-care-home-complaint-process

1-866-434-0144

Ontario Human Rights Commission

Human Rights Legal Support Centre

www.hrlsc.on.ca

1-800-387-9080

Office of the Public Guardian and Trustee

www.attorneygeneral.jus.gov.on.ca/english/family/pgt/

1-800-366-0335

Ontario Provincial Police

<http://www.opp.ca>

1-800-310-1122

*Various local/municipal contact information depending on location

Retirement Homes Regulatory Authority

www.rhra.ca

1-855-275-7472

Senior Crime Stoppers

www.ontariocrimestoppers.ca

1-800-222-TIPS (8477)

Seniors Safety Line

1-866-299-1011

Talk 4 Healing

A helpline for Aboriginal women

www.talk4healing.com/

1-855-554-HEAL (4325)

Victim Support Line

www.attorneygeneral.jus.gov.on.ca/english/ovss/programs.php

1-888-579-2888

Supporting References

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