



RED FLAGS OF ABUSE



Does someone you know—a senior or adult with a disability—display any warning signs of mistreatment?

» Neglect

- Lack of basic hygiene, adequate food, or clean and appropriate clothing
- Lack of medical aids (glasses, walker, teeth, hearing aid, medications)
- Person with dementia left unsupervised
- Person confined to bed is left without care
- Home cluttered, filthy, in disrepair, or having fire and safety hazards
- Home without adequate facilities (stove, refrigerator, heat, cooling, working plumbing, and electricity)
- Untreated pressure “bed” sores (pressure ulcers)

» Financial Abuse/Exploitation

- Lack of amenities victim could afford
- Vulnerable elder/adult “voluntarily” giving uncharacteristically excessive financial reimbursement/gifts for needed care and companionship
- Caregiver has control of elder’s money but is failing to provide for elder’s needs
- Vulnerable elder/adult has signed property transfers (Power of Attorney, new will, etc.) but is unable to comprehend the transaction or what it means

» Psychological/Emotional Abuse

- Unexplained or uncharacteristic changes in behavior, such as withdrawal from normal activities, unexplained changes in alertness, other
- Caregiver isolates elder (doesn’t let anyone into the home or speak to the elder)
- Caregiver is verbally aggressive or demeaning, controlling, overly concerned about spending money, or uncaring

» Physical/Sexual Abuse

- Inadequately explained fractures, bruises, welts, cuts, sores or burns
- Unexplained sexually transmitted diseases



If you or someone you know is in a life threatening situation or immediate danger, call 911 or the local police or sheriff.

WHAT IS ELDER ABUSE?

In general, elder abuse refers to intentional or neglectful acts by a caregiver or “trusted” individual that lead to, or may lead to, harm of a vulnerable elder. *In many states, younger adults with disabilities may qualify for the same services and protections.* **Physical abuse; neglect; emotional or psychological abuse; financial abuse and exploitation; sexual abuse;** and **abandonment** are considered forms of elder abuse. In many states, **self-neglect** is also considered mistreatment.

WHO IS AT RISK?

Elder abuse can occur *anywhere* – in the home, in nursing homes, or other institutions. It affects seniors across all socio-economic groups, cultures, and races.

Based on available information, women and “older” elders are more likely to be victimized. Dementia is a significant risk factor. Mental health and substance abuse issues – of both abusers and victims – are risk factors. Isolation can also contribute to risk.

WHAT SHOULD I DO IF I SUSPECT ABUSE?

Report your concerns.

Most cases of elder abuse go undetected. Don’t assume that someone has already reported a suspicious situation. The agency receiving the report will ask what you observed, who was involved, and who they can contact to learn more.

You do not need to prove that abuse is occurring; it is up to the professionals to investigate the suspicions.

» **To report suspected abuse in the community,** contact your local Adult Protective Services agency. For state reporting numbers, visit www.apsnetwork.org, visit the NCEA website at www.ncea.aoa.gov or call the *Eldercare Locator* at **1-800-677-1116 (eldercare.gov)**.

» **To report suspected abuse in a nursing home or long-term care facility,** contact your local Long-Term Care Ombudsman. For reporting numbers, visit www.ltombudsman.org, visit the NCEA website at www.ncea.aoa.gov or call the *Eldercare Locator* at **1-800-677-1116 (eldercare.gov)**.



The National Center on Elder Abuse (NCEA) directed by the U.S. Administration on Aging, helps communities, agencies and organizations ensure that elders and adults with disabilities can live with dignity, and without abuse, neglect, and exploitation. NCEA is the place to turn for **education, research, and promising practices in stopping abuse.**

Visit us online for more resources!

www.ncea.aoa.gov

Find us on Facebook and Twitter!

Keck School of
Medicine of **USC**

This document was completed for the National Center on Elder Abuse and is supported in part by a grant (No. 90AB0002/01) to the UCI Center of Excellence on Elder Abuse and Neglect from the Administration on Aging, U.S. Department of Health and Human Services (DHHS). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official Administration on Aging or DHHS policy.

The Center of Excellence is grateful to its generous supporters: the Archstone Foundation, the National Institute of Justice, the National Institute on Aging, UniHealth Foundation, and individual donors.