As a social work student encountering older clients, you will be in a unique position to help prevent and detect elder abuse.

What is elder mistreatment?

Elder mistreatment is an intentional act or failure to act that causes or creates a risk of harm to an older adult. Common types of elder mistreatment include physical, sexual, emotional/psychological, or financial abuse, neglect, or self-neglect. Multiple forms of mistreatment can co-occur.

Did you know?

1 in 10 community-dwelling older adults experiences abuse every year.

1 in 3 older adults with cognitive impairment experiences abuse.

Only 1 in 24 cases of elder abuse is reported.

Elder abuse has significant medical, mental health, financial, and social impacts.

Elder abuse occurs across all cultures, contexts, and communities.

Older adults who are abused have a 3x higher risk of death compared to those who have not been mistreated.
Signs of Elder Abuse

Since individuals experience harm in different ways, look for atypical changes in the following domains.

**Physical**
- Malnutrition, dehydration, or unexplained weight loss
- Sudden mental status changes unrelated to advancing dementia
- Uncontrolled pain despite pharmacological treatment
- Uncontrolled conditions such as hypertension, heart failure, asthma, or diabetes
- Inadequately explained bruises, lacerations, abrasions, fractures, or pressure ulcers
- Trauma to genital area or unexplained sexually transmitted infections

**Psychological/Emotional**
- Unusual changes in behavior or sleep
- Increased fear or anxiety
- Isolation from friends or family or withdrawal from normal activities

**Financial**
- Unpaid bills and fraudulent signatures on financial documents
- Unusual or sudden changes in spending patterns, will, or other financial documents

**Social**
- Client discomfort in the presence of family member/caregiver
- Caregiver resistance to the client being seen alone
- Caregiver is disengaged, inattentive, overly anxious, or hovering
- Caregiver expresses frustration, anger, or burden related to caregiving

**Environmental**
- Unsanitary living conditions or unsafe environment
- Evidence of self-neglect, including poor diet, poor hygiene, and unattended medical needs

Risk Factors of Elder Abuse

**Older adult**
- Medical or mental health conditions and/or cognitive changes
- Frailty and/or functional limitations
- Social isolation
- Stress and limited coping mechanisms

**Trusted other**
- Economic and/or emotional dependency
- Substance abuse
- Stress and limited coping mechanisms

**Context**
- Lack of social support, connectedness, or access to community resources
- Cultural norms
- Quality of relationship
Approaches to Working with Older Adults

- Provide environmental and communication accommodations to enable clients to access services
- Foster a safe environment and build rapport and trust
- Meet clients where they are
- Use active listening to elicit and affirm each client's concerns, preferences, values, needs, and goals
- Use a strengths-based approach to support clients' self-efficacy
- Seek to understand each client in the context of their unique biopsychosocial environment
- Educate yourself about ageism and continually work to identify and eliminate your own biases
- Provide person-centered, trauma-informed, and culturally responsive services

Mandated Reporting

Social workers may be legally required to report known or suspected abuse. Know your state's requirements and how to make a report.

Screening

Screening instruments may assist social workers in identifying the risk or presence of abuse. Screening must be tailored to the practice setting and client population and used in conjunction with biopsychosocial assessment. For example, the Elder Mistreatment Screening and Response Tool (EM-SART) is a brief tool used in emergency departments, and includes the following questions:

- Has anyone close to you harmed you?
- Has anyone close to you failed to give you the care that you need?
- Has anyone tried to force you to sign papers or use your money against your will?

Documentation of Elder Abuse

- Physical markers of maltreatment
- Social, contextual, psychological, and financial signs of abuse and neglect
- Communications, conduct, or attitudes that signal suspected abuse
Intervention Strategies

• Conduct comprehensive risk and safety assessment
• Conduct biopsychosocial assessment
• Ascertain client preferences, values, and goals for resolution
• Identify potential strategies for intervention
• Collaborate with client to develop strategy for safety planning and other immediate needs
• Engage in interdisciplinary planning and facilitate cross agency intervention
• Help client obtain tangible support such as financial assistance, clothes, and shelter
• If desired by client, facilitate access to peer support, self help groups, community services and other resources
• Be cognizant of stressors experienced by family caregivers and link them with community supports
• Educate your client and members of their support system about steps they can take to prevent elder abuse or respond if it occurs

Reporting Resources

In cases of imminent harm, report to law enforcement. Report abuse in the community to Adult Protective Services. Report concerns in facilities to the Long-Term Care Ombudsman. Local reporting and community resources can be accessed through Eldercare Locator at 1-800-677-1116 or visit eldercare.acl.gov.

Additional Steps You Can Take

• Read professional literature and/or conduct research regarding elder abuse
• Determine your organization’s protocol for identifying and responding to potential situations of elder abuse
• Develop relationships with individuals and organizations that focus on elder abuse
• Participate in a local elder abuse multidisciplinary team or in a local, state, or Tribal coalition or network addressing elder abuse
• Participate in or organize activities to raise awareness of elder abuse

Don’t stand by, stand up to elder abuse. You can make a difference.

For more information, visit ncea.acl.gov.