

Elder abuse

If you work in a residential aged care home, you may see signs of older people being abused. It is important you know what abuse is, how to recognise if someone is being abused, and what to do about it.

If you work in home care, you need to consider the possibility of abuse by family members or friends who have contact with the care recipient outside of care hours. The care recipient may be more vulnerable to all forms of abuse, which could easily go unnoticed. In addition to signs exhibited by the older person, the home surroundings may be suggestive of potential abuse and should also be considered.



What is elder abuse?

Abuse can be any harm to someone caused by another person in a position of trust or authority, whether a single or repeated act, or omission to act. The abuser could be a spouse or family member, another resident or a worker, and is often a person in a position of trust. Examples include:

Physical – hitting, slapping, kicking, pushing, rough handling, restrictive practices etc;
Psychological/emotional – verbal intimidation, humiliation, harassment, shouting and threats, treating the person like a child, repeatedly telling a person they have dementia, socially isolating the person etc;

Financial – misuse of the person's money, valuables or property, forced changes to legal documents and denying access to or taking control of personal funds, incurring bills for which the person is responsible etc;

Sexual – indecent exposure or assault, sexual harassment or rape and other unwanted sexual context, inappropriate touching, the use of sexually explicit language etc; and/or

Neglect – the failure to provide basic life necessities (intentional or unintentional), such as food, medical care, fundamental comforts.



The Older Persons Advocacy Network (OPAN) is available to support older people and their families who are at risk of, or may experience, elder abuse.

You may also like to get help from an aged care advocate. The service is a free, independent and confidential service supported by funding from the Australian Government Department of Health.

OPAN can be contacted on 1800 700 600 Monday to Friday, 8am to 8pm nationally, or visit the Older Persons Advocacy Network (OPAN) website to find out more about advocacy services.

The National Elder Abuse Helpline is also available for information and advice - 1800 ELDERHelp.



Prepared by Aged & Community Services Australia (ACSA) in consultation with Russell Kennedy Lawyers.

PROTECTING OUR RESIDENTS & CLIENTS

How to recognise and respond to elder abuse



“Abuse is an individual experience – it affects everyone differently and there is no single response to its causes or effects.”

– National Plan to Respond to the Abuse of Older Australians (Elder Abuse) 2019–2023.

What are the warning signs of abuse?

Apart from physical signs of abuse, a person experiencing abuse may be:

- Fearful, hesitant or show strong ambivalence around a particular person or people;
- Worried and anxious for no obvious reason, or fearful of being touched;
- Attempting to direct staff to the alleged perpetrator;
- Irritable and overly emotional; Appearing helpless, hopeless and sad;
- Using contradictory statements, not as a result of mental confusion;
- Reluctant to talk openly, or displaying signs of shame; and/or
- Avoiding physical, eye or verbal contact.

In addition, for older people at home, look for environmental warning signs such as:

- A consistently empty pantry, or food that has gone 'off'; and/or
- Misuse of property (e.g. exploitation of the person's home, or failure to return 'borrowed' items).

These signs can be particularly important to identify in older people who have limited communication or cognitive impairments.

What should I do if I think someone is being abused?

Don't jump to conclusions, but if any of these signs are present there is cause for concern which you should report to your supervisor.

Report a potentially abusive situation if:

- An older person in your care shows a change in behaviour or mood or any of the signs mentioned; You observe someone behaving towards a resident or client in a way that makes you feel uncomfortable;
- A person tells you they are being abused;
- A resident, client, staff member or visitor tells you they have observed abusive acts; and/or
- You observe an action or inaction that may be considered abusive.

Note: Don't dismiss what a person with dementia tells you as mere 'dementia talk' and treat them in the same way as any other resident or client.



How to respond to an abusive situation

If there is a witnessed threat to an older person in your care:

- Remain calm and consider whether you can safely take immediate action to stop the abuse occurring, without endangering the person, yourself or other people;
- If necessary, alert other staff (in residential care you could use the call bell or alarm systems). Ensure safety is re-established as soon as possible;
- Report to, or get someone else to contact, your supervisor immediately. Act on mandatory reporting obligations;
- Offer emotional support, medical services etc and protect the person from any and all unsupervised contact with the alleged offender; and
- Consider accessing any specialist units (these vary between states and territories) to provide dedicated services to support older people who experience abuse.

After taking the necessary immediate action:

- If a sexual assault has taken place, try to prevent the person from washing or showering before medical or police officers attend the scene (provided this is reasonable and does not cause additional distress); Do not disturb the area or remove any items involved in the incident, or allow others to enter the area; Record your observations or discussions with (or about) the resident or client that might indicate abuse has occurred or complete an incident form; Don't ask extra questions or investigate in any way – that's not your job;
- Tell your supervisor of any additional changes or concerns that you think of later;
- Be aware that older people from certain communities may confide in someone they know and trust from their own family, community or cultural organisation;
- Prevent contact between the victim and alleged perpetrator;
- Continue to reassure and support the victim; Discourage feelings of blame and guilt on the part of the victim and make it clear to them that they are not responsible for what happened but reassure them their reaction to the alleged contact is completely normal;
- Encourage them to seek help and support in whatever way they think is right for them; and Offer medical and psychological assistance/assessment, if they consent. If they do not consent, ensure their wellbeing is regularly followed up or monitored.