

Understanding senior abuse



A toolkit for community champions

This toolkit belongs to

The Government of Nova Scotia thanks the Centre for Research & Education on Violence Against Women and Children at the University of Western Ontario for permission to adapt material from their public education campaign, “It’s Not Right! Neighbours, Friends and Families for Older Adults” (www.neighboursfriendsandfamilies.ca). The original campaign was supported by the Public Health Agency of Canada through the Federal Elder Abuse Initiative.

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Project lead: Jocelyn Yerxa

Writer: Joanne Wise

Designer: Chris Bennett

This toolkit is available online at gov.ns.ca/seniors/stopabuse

Understanding senior abuse: A toolkit for community champions

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Master copies

Pocket 1: Booklet

Understanding Senior Abuse: Facts, Tips, Contacts

Pocket 2: Quick studies

Quick study A
Quick study B
Quick study C

Pocket 3: Longer cases

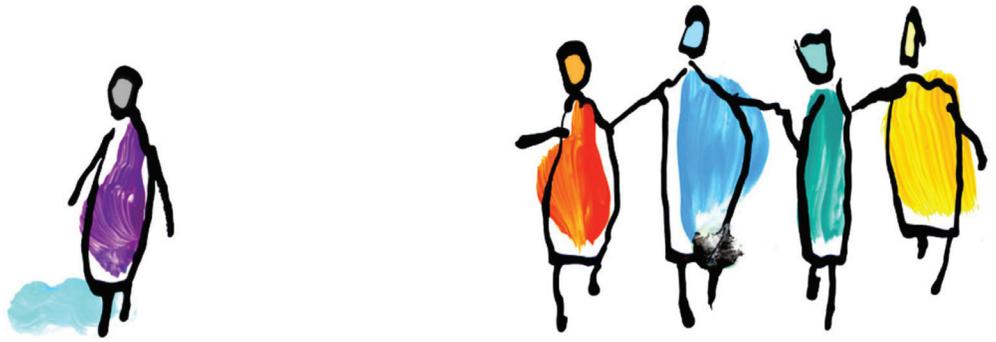
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Flyer
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1. About this toolkit

Goals and audience

This toolkit has been developed by the Department of Seniors to help Nova Scotians understand and prevent senior abuse. We call it a toolkit because it's packed with tools you can use to make your community a safer, more respectful place for older adults.

Senior abuse is a community issue. Everyone has a role in preventing and stopping it. This toolkit can help you become a community champion for senior safety. A community champion is someone who is committed to making their community a better place to live. You don't have to be an expert in seniors' safety to be a community champion. You just have to be willing to learn about and discuss the issue. The toolkit won't give you all the answers for every situation. What it *can* give you is information and ideas to spark good conversations.

TOGETHER, WE CAN

- Help seniors to know their rights and protect their safety.
 - Help neighbours, friends, and family members to recognize the warning signs of abuse and to offer support—safely and respectfully.
-

Guiding principles

When we talk about senior abuse in our communities, it's important to name what we want to stop; but it's also important to name the good things we want to achieve.

The *Strategy for Positive Aging in Nova Scotia* offers eight guiding principles to help build caring communities that support the wellbeing of seniors. All of the principles are important for the prevention of senior abuse, but these three principles stand out:

- **Respect** – Promote a culture of respect across generations and recognize the contributions of seniors to family, friends, community, and society.
- **Safety** – Enable seniors to live in safe and supportive living environments, free from danger, fear, and exploitation.
- **Self-determination** – Respect the right of seniors to manage their affairs and participate as fully as possible in decisions affecting their health and security.

Promoting respect, safety, and self-determination (freedom to choose) for seniors is really what this toolkit is all about. Keep these positive messages in mind as you learn about and talk about ways to end senior abuse.

The words we use

Senior describes an age range. In this toolkit it means adults who are 65 years or older. There is nothing magical about that age: it's just a point of reference. The guiding principles of this toolkit—safety, respect, and self-determination—apply to adults of all ages.

In this toolkit, the terms **senior**, **older adult**, and **elder** all mean the same thing. Different communities may have a preference for one term or another. Use the term that is familiar to you and respectful in your community.

The term **abuse** has different meanings to different people. All abuse is an abuse of power and a violation of trust in a relationship. The harm can be physical, emotional, financial, sexual, or involve some other breach of a person's rights and freedoms. Neglect is also a form of abuse. This toolkit does not make a distinction between "minor" abuse and "major" abuse. All abuse is harmful.

The term **abuser** is loaded and dangerous. It shows up in this toolkit, but not often. More often, the message refers to *people who are abusive*. It is important to hold people accountable for their actions, but it is also important to remember that they are more than what they do or don't do. People who are abusive need help.

What's inside

The toolkit is designed to be flexible and easy to use. The purpose of the toolkit is to help you understand and talk about senior abuse. It can also help you to organize a learning event for people in your community.

Here's what you'll find inside:

- tips for organizing an event in your community (section 2)
- speaker's notes and slides for a lively presentation about senior abuse (section 3)
- case studies for discussion (section 4)
- additional information to help you learn more (sections 5 to 7)
- the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*

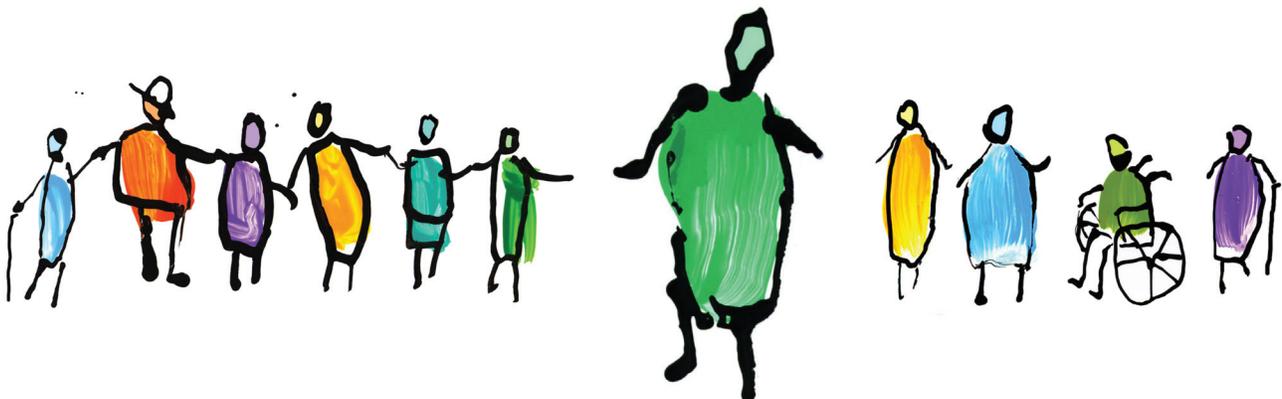
The pockets in this toolkit contain master copies of all the handouts. Everything in the kit is also available online at gov.ns.ca/seniors/stopabuse. Go to the website for the latest handouts, and for news about changes in legislation, policies, programs, and more.

Please note

This toolkit offers general information about senior abuse. It is not a substitute for professional legal advice, counselling, or other supports. Remember that senior abuse is very complex. A response that is helpful in one situation might be harmful in another. If you have any doubts about what to do in a particular situation, talk to a professional.



Figure 1.





2. Tips for community champions

Your role

Community champions are people in the community who take on an issue or project and are fearless in raising awareness and support for it. In this case, the issue is senior abuse awareness and prevention.

You do not have to be an expert or a highly skilled presenter to be a community champion. But you should feel comfortable leading a group conversation about senior abuse, and be willing to use the messages in this toolkit to guide the conversation.

Community champions come from a variety of backgrounds. They represent a range of ages, cultures, genders, and professions (see Figure 1). The unique qualities you bring to your role will enrich the program and reflect the diversity of Nova Scotians.

What is the commitment?

This is a volunteer position, so you have control over your level of commitment. Ideally, you will be available to participate in conversations and lead presentations on senior abuse when you are needed in your community. But you are not obligated to make a presentation if you are unavailable. The Department of Seniors or your local Seniors' Safety Program may be able to arrange another presenter if you are unavailable.

We hope this toolkit will inspire you to promote respect, safety, and freedom of choice for all older adults. Talk about the issue whenever you have the chance. You can make a difference by challenging the assumptions people make and the stereotypes we accept.

What are the rewards?

As with other volunteer positions, the rewards of the work are both practical and personal. You will meet people, learn new things, use your strengths, and develop your skills. You will be helping to make your community safer and healthier. And that can make you feel safer and healthier, too.

Getting ready

You do not have to organize and plan a presentation on your own. You can let people know that you are available to talk to their groups about senior abuse. Ask them to invite you. Many community groups will be interested in having presentations and will take care of booking a space, inviting participants, copying materials, and providing refreshments. Build on existing networks by attending gatherings where people already come together to address similar topics. This could include seniors' groups, caregiver groups, professional groups, service clubs, churches, schools, and other organizations.

Here are some things you will need to do to get ready for a presentation:

- Provide information** to the host group before the session. Let them know what to expect. Explain that the session will include a presentation, discussion, and opportunities to practice with case studies.

- Know your audience.** Ask the host group:
 - What is the purpose of the group?
 - How many people will be attending?
 - What does the audience expect?

- Will I be the only presenter? If not, will I be following or followed by another presenter? If so, what is their topic?
- How much time do I have?

- Order enough copies of the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*.** These are available from the Department of Seniors. See page 56 for contact information.
- Know your material.** Reread the presentation (section 3) and the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*.
- Choose cases for discussion** (section 4). Prepare enough copies for the participants, or ask the host group to make the copies. See the master copies in pockets 2 and 3.
- Decide how you will gather feedback.** If you plan to use the evaluation form provided in pocket 4, prepare enough copies for the participants, or ask the host group to make the copies.

These are some things you might ask the host group to organize:

- Book the meeting space.** Ideally this will have enough room for the group to divide into smaller groups for discussion. Movable chairs and small tables are helpful. It could be in a community room at your local library, residence, school, hospital, church, or community centre.
- Announce the event.** Here are some possible ways to spread the word:
 - Post flyers in the community. See the sample in Pocket 4.
 - Put a notice in the community newspaper or bulletin.
 - Send an e-mail to your contacts.
- Organize resources.**
 - If the session will include a slide presentation, make sure you have a projector, computer, and power cords. Locate the power outlets in the room. Test the equipment to ensure that it works.
 - Provide pens or pencils for participants to take notes.
- Think about and prepare for people's needs.** For example, is there room for wheelchairs and walkers?

Supporting the conversation

The focus of each session is on starting a meaningful conversation. Your role is to facilitate the conversation so the wisdom in the room can be revealed and can grow. Remember that everyone has something valuable to bring to the conversation.

Opinions may vary, and that's okay. Some participants may make statements that contradict the guiding principles of this toolkit (respect, safety, and freedom to choose for older adults). People are entitled to their opinions and your role is not to change their minds. You can ask questions about how their position promotes respect, safety, and freedom to choose for older adults. Ask for feedback and support from the group. You will find that the group can be your greatest ally and has the greatest wisdom.

The more you allow the group to have lively, respectful, and safe conversations, the more likely you are to have a positive impact on people. They may not agree or change their minds, but you will have given them something to think about and resources to help them continue the conversation when they leave the session.

Remember this about confidentiality! People may want to share their own stories or stories about people they know. Remind the group that personal stories are confidential. Ask people to respect confidentiality, both during and after the session. You can also ask people to feel free to speak with you after the session about personal stories or concerns they may have. Remember that you may be presenting in a small community and you want to respect everyone's privacy, including the privacy of those not in the room.



Keeping the focus

Design the session to achieve the agreed-on purpose. Develop an agenda to support and assess the goals of the session. Stay on topic so you don't lose people's interest.

Figure 2 shows a sample agenda for a session. The time for each item will depend on the size of the group. The suggested timeframe is 60 to 90 minutes, including time for people to settle in their seats.

Figure 2. Sample agenda

1. Introductions (5-10 minutes)

- Tell participants about you and your role.
- Invite them to introduce themselves.

2. Presentation (15-20 minutes)

- Distribute the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*, before the presentation so that participants can look at it and take notes if they like.
- Present the key messages, using the speaker's notes and optional slides in section 3 of this toolkit.

3. Case discussions (20-30 minutes)

- Hand out copies of the cases you will use. Encourage people to write notes.
- Facilitate a discussion of the cases. For more ideas about case discussions, see section 4.

4. Wrap-up and closing (5-10 minutes)

- Thank the group for their attention and willingness to share.
- Invite them to contact their local Seniors' Safety Program or the Department of Seniors if they are interested in more information or would like to become a community champion.

5. Evaluation (5-10 minutes)

- Ask the group to complete an evaluation. This will help you to continually improve and grow as a community champion.
-

Stick to your purpose and timeframe. Respect that people made a decision to attend based on the information you provided, so try as much as possible to stick to the time you were given. This may be difficult: once people start talking about the issue they can have a lot to say. There is a fine balance between providing enough time for discussion and not so much time that you feel you aren't able to say everything you would like to say. You can always check with the group about how they feel about going a little longer. You can also offer to come back to continue the conversation.

Make people comfortable. Take notice of things such as temperature, seating, and sound quality. Speak clearly and use plain language. The words that people understand and use every day are the words with the greatest power.

Respecting diversity

*“The world in which you were born
is just one model of reality. Other cultures
are not failed attempts at being you; they are
unique manifestations of the human spirit.”*

~ Wade Davis

Human societies are diverse, and different cultures emphasize different values. Most cultures consider it unacceptable to neglect older adults or treat them disrespectfully. But specific behaviours that are acceptable in one culture might be considered a violation of rights or duties in another. In some cultures, abuse is not discussed.

In any group you work with, there will likely be people with different cultural beliefs, practices, and understandings about aging and abuse. As a community champion, it is important to be considerate about other points of view. During any presentation, allow everyone to freely share their beliefs and perspectives **without judgement**. As the person guiding the discussion, it is your role to create an environment where people can speak without being judged. You have an ideal opportunity to demonstrate respect, safety, and freedom to choose for the group. You also have the opportunity to get people thinking about ways to talk and listen respectfully with an older adult from a different culture. By your example, you can show that other cultural views are not wrong, but different.

Evaluating and following up

Evaluation is key to knowing whether you have accomplished what you set out to do. You might worry about being evaluated, but without it you won't know how you or the materials are reaching people. So ask for feedback and share it with the Department of Seniors. It will help you improve and help us ensure our materials are effective.

Remember: Feedback offers you insight into how others experienced the session. It's different from a discussion and is not a debate. Give people privacy to write freely. Don't read or comment on the feedback forms or evaluation sheets while the participants are present. If you don't understand feedback that people give you directly in conversation, it's okay to ask for clarification. If you disagree with the feedback, resist the urge to explain, justify, or defend what you did. Consider the comments respectfully—not as criticism but as information to improve future presentations.

Figure 3 shows a sample evaluation form. See pocket 4 for a master copy.

As an alternative, you might prefer to put your own questions on a flip chart or slide and invite people to write their responses on blank paper. For example, you could ask the following three questions:

1. What was most useful to you today?
2. What was least useful to you today?
3. What would you suggest to improve the workshop?



Figure 3. Sample evaluation form

Understanding Senior Abuse

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Presenter:

Date:

Things I liked about today...

Things I didn't like about today...

I would like more information on...

Other comments...

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Thank you!

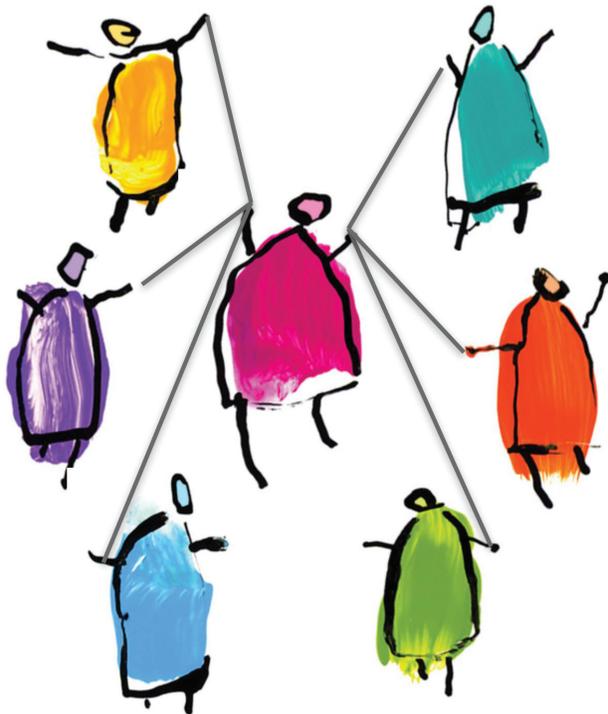

NOVA SCOTIA
gov.ns.ca/seniors/stopabuse

Expanding the circle of care and spreading the message

Circle of care is a way to describe the connections among people that make a community stronger. In healthy and safe communities, people care for each other, respect each other, and support each other's right to make their own decisions.

Take time to reach out and expand your own circle of care and the circles in your community. Continue to look for organizations that can provide support to older adults. Are support organizations meeting the needs of seniors in your community? Do they know what those needs are? Talk with those agencies and tell them what you know. Ask them to participate in creating a healthier and safer community for everyone.

Look for opportunities where the generations can learn from each other. This will help combat ageism—discrimination against people because of their age. The more we understand and respect each other as human beings, the less likely we are to be abusive or to tolerate abuse around us. Encourage healthy relationships.



My notes:

A series of horizontal dotted lines for writing notes.



3. Speaker's notes

This section introduces you to the subject of senior abuse. It is formatted as a presentation for community groups. The material is adapted from a public education campaign that was developed by the Centre for Research & Education on Violence Against Women and Children at the University of Western Ontario, with funding from the Public Health Agency of Canada through the Federal Elder Abuse Initiative. The original campaign is called “It’s Not Right! Neighbours, Friends, and Families for Older Adults.” The developers have given us permission to adapt their material.

To download the slides for this presentation, go to gov.ns.ca/seniors/stopabuse.

If you are a community champion, do learn the ideas, but don’t feel you have to use the slides and speaking notes exactly as they appear here. For tips on getting ready for your presentation, see section 2, Tips for Community Champions.

The presentation takes about 15 minutes, not including case studies or discussion.

"It's Not Right!"

Neighbours, Friends and Families for Older Adults

How You Can Identify Abuse and Help Older Adults at Risk



#1

"It's Not Right!" Neighbours, Friends and Families for Older Adults

Agenda

- Welcome
- Presentation (15-20 minutes)
- Case discussions
- Wrap-up and questions
- Your feedback



#2

About this presentation

The goal of this presentation is to teach you the warning signs of senior abuse and to show how you can reach out and offer support in safe and respectful ways. At the end of the presentation, we will practice what we have learned by reviewing some case studies and talking about warning signs and ways to help.

The presentation uses the term "abuse of older adults." The Nova Scotia Department of Seniors calls it "senior abuse." These terms mean the same thing.

My notes:

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Here's the agenda we will follow.

Because of our topic, it's natural to want to share personal stories. Please treat these stories as confidential, both during this session and after. Also respect the confidential stories of people who are not here in the room.

My notes:

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

Everyone has the right to be **safe and free** from abuse or neglect.

We have a shared responsibility to create **safe, strong, healthy communities.**



#3

"It's Not Right!" Neighbours, Friends and Families for Older Adults

People who are abused need support. People who are abusive need help.

Neighbours, friends and family members can make a difference.



#4

The heart of the message

A key message of this presentation is that everyone has the right to be safe and free from abuse or neglect. No one should experience abuse. **It's Not Right!**

We have a shared responsibility to promote respect for all people and to work together to create safe, strong, healthy communities.

Everyone has a role to play.

My notes:

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People who are abused need support. People who are abusive need help. The bystanders—neighbours, friends, and family members—need to know what they can do to make a positive difference. Bystanders often know that abuse is happening but don't know what to do about it.

If you are the bystander, you don't have to "fix" the problem. But you can make a difference. Caring about the people around you and paying attention when there are signs of trouble are important steps. Small actions can make a big difference.

The overall strategy is to interrupt the isolation that exists in all abusive relationships.

There are two things everyone can do: **SEE it! CHECK it!** We will learn more about these steps later in the presentation and have an opportunity to practice them together.

My notes:

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

What Is Abuse of Older Adults?



Harm caused to older adults by someone who *limits or controls* their rights and freedoms.

The older adults are *unable to freely make choices* because they are afraid of being hurt, humiliated, or left alone, or of the relationship ending.

#5

"It's Not Right!" Neighbours, Friends and Families for Older Adults

What Is Abuse of Older Adults?



Abuse is **NOT** just impolite or rude behaviour.

It **IS** abuse when one person uses power or influence to take advantage of, or to control, the older adult.

Neglect of older adults who cannot manage on their own is also abuse.

#6

What is senior abuse?

Abuse can be a hard word to accept. But recognizing abuse and naming it are essential steps toward healing it.

Different experts define abuse in different ways. For example, the Nova Scotia Elder Abuse Strategy (2005) describes senior abuse broadly as “the infliction of harm on an older person.” The strategy emphasizes that the abuse is especially harmful when it happens within a relationship where there is an expectation of trust.

This presentation focuses on **harm caused to older adults by someone who limits or controls their rights and freedoms.** The older adults are unable to freely make choices because they are afraid of being hurt, humiliated, or left alone, or afraid the relationship will end.

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Impolite behaviour or rudeness is not abuse. Arguments and conflicts are not abuse either. If both people have power in the relationship and can make choices about what happens next, then it is not necessarily an abusive situation. People may need help and support in these situations, but they are not necessarily being abused.

It is abuse when one person uses their power or influence to take advantage of, or to control, the older adult. It is also abuse when an older adult cannot manage on their own and the person responsible to care for them does not provide the necessities of life.

My notes:

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

Who Are the Abusers?



Not monsters but people we know...

#9

"It's Not Right!" Neighbours, Friends and Families for Older Adults

Who Are the Abusers?



Most often, abusers are family members—adult children or grandchildren.

Abusers can also be other relatives or friends, paid/unpaid caregivers, landlords, financial advisors, or anyone in a position of power, authority or trust.

#10

Who are the abusers?

People who are abusive can be charming, well-liked leaders of the community in public, and very different behind closed doors. Their abusive behaviour is targeted at a specific person—the older adult. The abuse can happen infrequently or every day.

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Most situations of abuse involve family members or others who are known and trusted by the senior. Often the abusive person is an adult child or grandchild. Research shows that when adult children are abusive, it is most often a son who abuses. Family members who are accused of violence are more often men than women.

However, the abusive person might be male or female, a distant relative, a friend, a neighbour, a paid or unpaid caregiver, a landlord, a financial advisor, or any individual in a position of power, trust, or authority.

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Understanding senior abuse

"It's Not Right!" Neighbours, Friends and Families for Older Adults

Why Are Some People More at Risk?

People who are abused are often isolated.



"It's Not Right!" Neighbours, Friends and Families for Older Adults

There Are Other Risk Factors Too...



There are a number of factors that increase the risk of abuse. Isolation is often a factor. Everyone in and around an abusive relationship can feel isolated.

As bystanders, we can feel isolated, unsure about what to do, and afraid of making a mistake. We may feel alone with our fears and concerns.

For the people caught in an abusive relationship, as the violence escalates—which it often does—the isolation becomes deeper and more profound.

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Other risk factors include:

- a history of family violence
- shared living arrangements—for example, when an older adult lives with a caregiver or a friend
- addictions, such as drugs, alcohol, or gambling—involving the abused or the abuser
- dependency on the older adult for shelter or financial help
- depression and other mental health issues—in the abused or the abuser
- cognitive impairment—confusion, memory loss, or dementia—in the abused or the abuser

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

Emotional Abuse



"It's Not Right!" Neighbours, Friends and Families for Older Adults

Violation of Rights and Freedoms



Emotional abuse

It is emotional abuse if somebody threatens, insults, intimidates, or humiliates an older adult, treats the person like a child, or does not allow them to see their family and friends.

It is a mistake to think that if there is no physical violence, there is no abuse. People who experience emotional abuse will tell you that having someone yell at you and tell you that you are worthless can be just as devastating as being punched or kicked.

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Violation of rights and freedoms

It is abuse when somebody prevents an older adult from enjoying the rights and freedoms normally available to adults. This may include a wide range of unlawful or unreasonable violations, such as:

- interfering with spiritual practices, customs, or traditions
- withholding information
- preventing visitors
- opening, tampering, or redirecting mail
- keeping someone in a hospital or institution without a legitimate reason

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

Physical Abuse

It is abuse if you hit me or handle me roughly—even if there is no injury.

A threat to hurt me is also abuse.



#21

Physical abuse

It is physical abuse if somebody hits an older adult or handles the person roughly, even if there is no injury. Giving a person too much or too little medication, or physically restraining a person, are also forms of physical abuse.

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

Warning Signs

I become depressed and withdrawn or fearful.

Signs of neglect such as no food in the house.

My phone is cut off, or things start disappearing from my house.

If I tell you I am being abused—believe me.

I stop attending social events or church.

Someone suddenly moves in with me.

I have injuries I can't explain

#22

Warning signs

If an older adult tells you they are being abused, believe them!

Some warning signs might be big and disturbing, like physical injuries. Other warning signs might be harder to read—for example, when an older adult becomes anxious or withdrawn, or stops visiting with friends. The booklet *Understanding Senior Abuse: Facts, Tips, Contacts* includes some signs and symptoms to watch for.

It can be tempting to ignore warning signs and tell yourself that you must be mistaken or that it's not that bad because it's "only" one warning sign. Remember that a warning sign is like seeing the tip of an iceberg. There is likely much more going on below the surface.

Trust your instincts when something makes you feel uncomfortable. But don't jump to conclusions.

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

Two Things Everyone Can Do



1. SEE it! "It's not right!"

- Learn about abuse
- Recognize the warning signs
- Overcome your hesitation to help



#25

"It's Not Right!" Neighbours, Friends and Families for Older Adults

Two Things Everyone Can Do



2. CHECK it!

"Is it abuse? What can I do to help?"

- Ask questions
- Check with a professional
- Check for danger
- Suggest safety planning



#26

1. SEE it!

Pay attention when something makes you uncomfortable. Learn the warning signs so that you can say, **"It's not right!"**

Overcome your hesitation. You may feel uncertain about becoming involved. That's understandable, but it's not the end of the story. Remember that abuse causes great harm and suffering and will not go away without help. It's everyone's business.

If you need support or guidance, you can talk to someone you trust about what to do next. You can also talk to a professional, a service provider, or a trusted friend.

My notes:

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2. CHECK it!

Don't jump to conclusions. A warning sign does not automatically mean that abuse is happening. Check it out.

Before you take any action, stop and ask yourself:

- What are the safety issues?
- Am I being respectful to the older adult?

Your next step will depend on the situation.

If the situation is dangerous, don't hesitate. Call the police or 911. Trust your instincts. It is always better to be safe than sorry.

If the situation is not dangerous, asking questions is the best way to find out if abuse is happening. If possible, talk privately with the person you are concerned about.

If you are uncertain about what to do, check with the Senior Abuse Information and Referral Line (1-877-833-3377), or with local professionals.

They may be able to point you to resources in the community, and may advise you about safety planning.

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"It's Not Right!" Neighbours, Friends and Families for Older Adults

How to Talk to the Older Adult

Find a time when the abusive person is not present.

Describe what you heard or saw—stick to the facts.

Listen carefully—ask how you can help.

Respect if he/she doesn't want to talk about it—leave the door open.



#27

"It's Not Right!" Neighbours, Friends and Families for Older Adults

Finding Help

Emergencies: **911**

Senior Abuse Information and Referral Line:
1-877-833-3377

Adult Protection: **1-800-225-7225**

Legal information: **1-800-665-9779**
(455-3135 in Halifax)

Other help lines and websites

Your neighbours, friends, and family members

#28

If it is safe, talk to the person who you think is being abused. Remember these tips:

- Wait for a time when you are alone and not likely to be interrupted.
- Describe what you saw and heard. Stick to the facts.
- Ask caring questions. *Are you okay? Is someone hurting you? What do you want to do? How can I help?*
- Be supportive and listen. Let them know that whatever is happening is not their fault.
- Encourage them to be their own advocate. Support them to make their own informed decisions.
- Respect their decisions, even when you don't agree. If you are concerned that they are unable to make informed decisions, ask for advice from a professional.
- Be patient. Leave the door open.

For more information, see the booklet ***Understanding Senior Abuse: Facts, Tips, Contacts.***

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How to find help

Whoever you are—a concerned bystander, an overwhelmed caregiver, or a person experiencing abuse—it is important that you find help and that you feel supported. There are many ways to find help.

If you make a phone call and the line is no longer in service, or if you reach someone who isn't helpful, don't give up. Try again. Try another number. Look for someone else to talk to. Only you can decide what really helps and what kind of support feels right. You shouldn't feel pressured by anyone to do something you aren't ready or willing to do.

These contacts and others are in the booklet ***Understanding Senior Abuse: Facts, Tips, Contacts.***

My notes:

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4. Case studies

About the cases

Case studies offer a lively way to get people talking about senior abuse. The case studies in this toolkit are not real-life examples, but they are based on situations that people often hear about when they are working with seniors. Most of the cases involve more than one issue and many possible responses. Some of the issues raised in some cases are complex and troubling. Choose the cases that you feel comfortable and confident discussing.

You can use the cases in different ways, depending on your own comfort with the material, the size of the group you are working with, and how much time you have. For example:

- Do a quick study when you have limited time or space for discussion, or if you prefer the shorter stories.
- Use the longer cases when you have more time, when there is space to break into small groups for deeper discussions, and when you want more details in the stories.
- Feel free to experiment with your own ways to use these resources.

Getting ready

Decide ahead of time whether you will do a quick study or a combination of the longer cases. Then decide how you will involve the participants. Will you work as one large group or break into smaller groups?

If you want to distribute handouts, choose the handouts and decide how many copies you will need. Use the master copies in pockets 2 and 3 for photocopying. Copies are also available online at gov.ns.ca/seniors/stopabuse. If you need a new master copy and don't have access to the internet, the Department of Seniors will send you a reprint. See the contact information on page 56.

Doing a quick study

There are three quick study handouts: A, B, and C. Each handout includes six brief stories—one for each of the six types of abuse.

Choose one of the three handouts for your event.

Do one of the following:

- Photocopy the handout for each participant or each small group; *or*
- Plan to read each story aloud from your copy; *or*
- Create a slide for each story so that you can project the stories one at a time onto a screen.

Whichever method you use, be sure to read each story aloud. Better yet, invite a participant to read the story to the group. After each story, briefly discuss the questions on the handout.

Using the longer cases

Here is one way to use the longer cases.

- Divide into small groups and assign a different case to each group. Allow the groups time to read the cases aloud, do the steps, and discuss the issues.
- Circulate through the room and check in with each group to get a sense of their discussion.
- Ask the small groups to report back to the large group. Allow time for the large group to share their ideas and offer any suggestions they might have.

Guiding the discussion

The people who participate in your event might have very different ideas about the issues and what to do about them. Encourage them to say what they think. Be respectful of diverse viewpoints, but remember these tips:

- Be prepared to bring the focus of the discussion back to the three guiding principles of safety, respect, and self-determination. Ask the participants: *What information or support could you offer to the older adult to help them make an informed decision?*
- Keep the group focused on the facts presented in the cases. Remind them not to jump to conclusions. It is not their role to “fix” the situation, but to think about how they could support the older adult to make their own informed decision.

Participants may say there isn’t enough information to judge the cases. That’s true. The goal of the discussion isn’t to make a judgement. It’s an opportunity to practice the two steps outlined in the presentation: SEE it! CHECK it!





Here are some questions that may help you support the discussion. Always ask the group to share their ideas before offering any of your own.

1. **SEE it!** Ask the group to underline the warning signs in the case—for example, look for signs of dependence, manipulation, fear, misuses of power, or addiction.

For general warning signs, see page 5 in the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*.

Ask the group for their perspective:

- Is it abuse?
- Is it clearly one kind of abuse or possibly a combination?
- Would anyone hesitate to name the abuse? If so, why?

Encourage the participants to name their reasons. Ask them to look at those reasons from another point of view. What would make them overcome their hesitation to help?

If the discussion stalls, see page 6 in the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*.



Remind the participants that small steps count. Encourage them to imagine small steps they could take.

2. **CHECK it!** What could a bystander ask the older adult? For example:

- What's happening?
- How can I help?
- I'm concerned about your rights and options.
- Do you know about...(supports in the community, such as Alcoholics Anonymous, job help, credit counselling)?
- Do you know about safety planning? Do you know where to get help to create a safety plan?

For tips on safety planning, see page 9 in the booklet, *Understanding Senior Abuse: Facts, Tips, Contacts*.



Quick Study A

SEE it!

Underline the warning signs in the following cases.
Check off the type(s) of abuse that could be happening.

CHECK it!

What questions could you ask? What help might be available?

	Financial	Emotional	Rights & Freedoms	Sexual	Neglect	Physical
<p>A1. My granddaughter moved in with me some time ago. I asked her to leave because she used my bank card to take money from my account a couple of times. She said she has no place to go. I feel guilty and let her stay, but I am afraid she will do it again.</p>						
<p>A2. I don't have a big family and have outlived most of my friends. My niece is the only family member I see regularly. She says I'm lazy and should be thankful that she takes time to visit me.</p>						
<p>A3. I used to get lots of mail when I lived on my own. But it stopped when I moved in with my son. I asked him about it. He said that hardly any mail comes for me, and when something does come, he opens and takes care of it.</p>						
<p>A4. My husband has always been very controlling. He has never hit me, but lately he pressures me for sex. He won't let me sleep until I give in.</p>						
<p>A5. My son suffered a brain injury when he was young and he has lived with me his whole life. He does help more now that I am no longer able to get around very well, but my daughter expects him to do everything and he just can't. She lives nearby but is very busy. I haven't been able to get out for groceries for over a week this time.</p>						
<p>A6. My younger brother and I live together. He has always had a temper. Recently when he was drinking, he pushed me against the wall a couple of times.</p>						

The Government of Nova Scotia thanks the Centre for Research & Education on Violence Against Women and Children at the University of Western Ontario for permission to adapt material from their public education campaign, "It's Not Right! Neighbours, Friends and Families for Older Adults" (www.neighboursfriendsandfamilies.ca). The original campaign was supported by the Public Health Agency of Canada through the Federal Elder Abuse Initiative.



Quick Study B

SEE it!

Underline the warning signs in the following cases.
Check off the type(s) of abuse that could be happening.

CHECK it!
What questions could you ask? What help might be available?

	Financial	Emotional	Rights & Freedoms	Sexual	Neglect	Physical
<p>B1. Last week, my son-in-law asked me to sign a power of attorney so that he could help with my affairs. He disagrees with the way I manage my money, and I have heard him tell my daughter that he thinks I am getting senile. I am a little afraid of him.</p>						
<p>B2. My wife laughs at me in front of people because I can't manage zippers and buttons without her help. She tells people that I am "worse than a child" and that she would never let herself be so helpless.</p>						
<p>B3. My children are angry that I have made some large donations to a religious organization I support. I have overheard them say that they should "do something" to keep me away from the "religious fanatics." These people are not fanatics—they are my friends.</p>						
<p>B4. My neighbour is a widower who brings my groceries because we both live so far out of town. Since my husband died he has started hugging and touching me even though I ask him not to. He calls it his "delivery fee."</p>						
<p>B5. I live in the basement of my brother's house. He is very successful and travels a lot. When he goes away he locks me in. He says he is afraid that I will wander off. Even though he leaves food and things to read, I get very depressed if he is gone for more than a couple of days.</p>						
<p>B6. Mr. K has dementia and sometimes gets upset in the evening. He lives in a nursing home where workers are under a lot of pressure to get everything done for everyone on the floor. Mr. K will often follow the staff around, asking for them to take him home. He is given medication to calm him down so that the workers can tend to everyone else.</p>						

The Government of Nova Scotia thanks the Centre for Research & Education on Violence Against Women and Children at the University of Western Ontario for permission to adapt material from their public education campaign, "It's Not Right! Neighbours, Friends and Families for Older Adults" (www.neighboursfriendsandfamilies.ca). The original campaign was supported by the Public Health Agency of Canada through the Federal Elder Abuse Initiative.

Quick Study C



SEE it!

Underline the warning signs in the following cases.
Check off the type(s) of abuse that could be happening.

CHECK it!

What questions could you ask? What help might be available?

	Financial	Emotional	Rights & Freedoms	Sexual	Neglect	Physical
<p>C1. My younger sister lives with me since her husband died. I have worked hard and saved money for many years. She has threatened to end our relationship if I don't write a new will that leaves all of my savings to her.</p>						
<p>C2. My husband controls my every move. He tells me I am "too stupid" to make decisions or handle money. He won't let me see my friends anymore.</p>						
<p>C3. My health is getting worse, and so I decided to move to a nursing home. I thought I had asked all the right questions to be sure this was right for me. I didn't know the schedule was so strict. I can't sleep in, or eat a little later, or say no to a bath, or stay up to watch a show.</p>						
<p>C4. My nephew and his girlfriend live with me. They have sex anywhere they please and don't close the door even when I am home. I have asked them repeatedly to be more private, but they laugh at me and call me a prude.</p>						
<p>C5. My friend and I have lived together for ten years. My knees are bad and I haven't been able to share the chores recently. She is angry about this and refuses to clean my part of the house or prepare food for me. She hasn't spoken to me in three weeks. I don't speak English very well and have no one else to talk to.</p>						
<p>C6. I am not as independent as I used to be. I need help with certain tasks. My son helps me, but I am ashamed to admit that sometimes he shakes me and even hits me.</p>						

The Government of Nova Scotia thanks the Centre for Research & Education on Violence Against Women and Children at the University of Western Ontario for permission to adapt material from their public education campaign, "It's Not Right! Neighbours, Friends and Families for Older Adults" (www.neighboursfriendsandfamilies.ca). The original campaign was supported by the Public Health Agency of Canada through the Federal Elder Abuse Initiative.

Case 1:

Mrs. Scott

The following case is not a true story, but is based on situations that people often hear about when they are working with senior abuse cases.

Mrs. Scott (75 years old) lives in rural Nova Scotia. Her oldest daughter, Joyce (54 years old), moved back home five years ago, after Mrs. Scott's husband died. Over the past year, Joyce lost her job and started drinking more than usual. Mrs. Scott is very worried about her daughter. She depends on her to go to the grocery store, her doctor's appointments, and card night at the local recreation centre.

When Joyce's car broke down and couldn't be repaired, she asked her mother to co-sign a loan for her new car. Joyce convinced her mother that it was the only way she could get a car. And without a car, Joyce wouldn't be able to continue to help her with her errands. Joyce also convinced Mrs. Scott to apply for credit cards to help her through this rough time without work. Mrs. Scott pays the credit card bills, but it is becoming a financial burden on her to continue to pay her daughter's debts.

Mrs. Scott doesn't want Joyce to be angry with her or to stop helping her, so she feels like she has to continue to support Joyce through this difficult time.

**Before you act,
ask yourself:**
What are the safety issues?
Am I being respectful?



1. SEE it!

*Do you see possible signs of abuse?
If so, what are the signs?*

What might be happening?

- Financial abuse
- Emotional abuse
- Violation of rights
- Sexual abuse
- Neglect
- Physical abuse

*Would you hesitate to name it? If so, why?
What would help you overcome your hesitation?*

2. CHECK it!

How could you check this situation? What might you ask? Who might you ask? What other help is available?

Case 2:

Mr. McInnis

The following case is not a true story, but is based on situations that people often hear about when they are working with senior abuse cases.

Mr. McInnis (79 years old) has been living in a nursing home for the past five years. He was a coal miner until the mine closed. He has emphysema and needs oxygen on a regular basis. His daughter Joan (59 years old) visits him weekly.

This week, Mr. McInnis told his daughter that Sally (24 years old), the night staff person, is very mean to him. He said that Sally yells at him if he asks for help to get to the washroom at night. Mr. McInnis told his daughter he is afraid to go to the washroom alone because he has to take the oxygen tank with him. He doesn't feel stable enough to get himself and the oxygen tank to the washroom without a fall.

Joan asked him if he has talked to the supervisor about Sally. He said he hasn't because he knows Sally is a single mother and needs this job to support her two small children. He said that he and Sally used to be very friendly, but that things have changed over the past few months. He's afraid if he says something that Sally might lose her job or, even worse, that things might get worse instead of better for him. He also told Joan that he is now having trouble sleeping. Joan is worried and not sure what to do.

**Before you act,
ask yourself:**

What are the safety issues?
Am I being respectful?



1. SEE it!

*Do you see possible signs of abuse?
If so, what are the signs?*

What might be happening?

- Financial abuse
- Emotional abuse
- Violation of rights
- Sexual abuse
- Neglect
- Physical abuse

*Would you hesitate to name it? If so, why?
What would help you overcome your hesitation?*

2. CHECK it!

How could you check this situation? What might you ask? Who might you ask? What other help is available?

Case 3:

John

The following case is not a true story, but is based on situations that people often hear about when they are working with senior abuse cases.

After experiencing a number of health problems, John (83 years old) has recently moved in with his son Pete and daughter-in-law Emily in an up-and-coming subdivision just outside of Halifax. In recent months, John has experienced a number of health concerns, including some falls and frequent problems remembering things. Doctors think John may be showing signs of dementia.

Lately, John has noticed that he has not been receiving his mail as he did when he lived by himself. John asked Pete if he has noticed anything about the missing mail. Pete assures John that when the mail is delivered to the mailbox at the end of their road, he makes sure to collect and open all of John's mail to ensure it is handled promptly. This makes John uneasy. He feels he is completely capable of dealing with his own mail and does not feel that Pete needs to do it for him. However, since he has recently moved in with Pete and is relying on Pete to help him with some of his day-to-day tasks, John is fearful of confronting his son and hurting his new living arrangement.

**Before you act,
ask yourself:**
What are the safety issues?
Am I being respectful?



1. SEE it!

*Do you see possible signs of abuse?
If so, what are the signs?*

What might be happening?

- Financial abuse
- Emotional abuse
- Violation of rights
- Sexual abuse
- Neglect
- Physical abuse

*Would you hesitate to name it? If so, why?
What would help you overcome your hesitation?*

2. CHECK it!

How could you check this situation? What might you ask? Who might you ask? What other help is available?

Case 4:

Jane

The following case is not a true story, but is based on situations that people often hear about when they are working with senior abuse cases.

Jane (72 years old) is a widow who is still very active in her community. She often takes part in social dinners and cards with the local seniors' group. Since her husband died, Billy (69 years old) has given her a lot of attention. He often asks her to travel to the events with him and sit with him. Jane misses the companionship of a man and would like to start dating again, but feels Billy is coming on too strong.

At the last dinner dance, Billy grabbed Jane's bottom and made a lewd comment. Jane was shocked and told him to leave her alone. Sandy (76 years old), Jane's friend, was standing right beside her when Billy grabbed her bottom. Sandy told Jane she was overreacting and that Billy didn't mean any harm. He was just having a good time. Jane left the event. She now feels embarrassed and doesn't want to attend any more events if Sandy or Billy will be there.



1. SEE it!

*Do you see possible signs of abuse?
If so, what are the signs?*

What might be happening?

- Financial abuse
- Emotional abuse
- Violation of rights
- Sexual abuse
- Neglect
- Physical abuse

*Would you hesitate to name it? If so, why?
What would help you overcome your hesitation?*

2. CHECK it!

How could you check this situation? What might you ask? Who might you ask? What other help is available?

**Before you act,
ask yourself:**
What are the safety issues?
Am I being respectful?

Case 5:

Mr. Russell

The following case is not a true story, but is based on situations that people often hear about when they are working with senior abuse cases.

Mr. Russell (92 years old) lives with his friend Ted (72 years old) in a small, run-down house in Porter's Lake. They rarely leave the house and are fairly isolated. They don't have many close friends or neighbours nearby. Their 12 stray cats keep them company. Ted feeds the cats regularly and allows them to roam freely throughout the home.

The house is cluttered. The kitchen counters are covered with dirty dishes and unfinished food. The sink is always filled with dirty dishes.

Mr. Russell used to get regular visits from nurses who work for a local care provider. Recently however, the agency has refused to continue sending nurses to the property because they have deemed it unsanitary and unsafe for their nurses. The agency has contacted Public Health with their concerns.

Ted has made some attempts to clean up the house by purchasing two litter boxes, but they are rarely cleaned and often over full.

**Before you act,
ask yourself:**
What are the safety issues?
Am I being respectful?



1. SEE it!

*Do you see possible signs of abuse?
If so, what are the signs?*

What might be happening?

- Financial abuse
- Emotional abuse
- Violation of rights
- Sexual abuse
- Neglect
- Physical abuse

*Would you hesitate to name it? If so, why?
What would help you overcome your hesitation?*

2. CHECK it!

How could you check this situation? What might you ask? Who might you ask? What other help is available?

Case 6:

Margaret

The following case is not a true story, but is based on situations that people often hear about when they are working with senior abuse cases.

Margaret (68 years old) is a very active member of her community and participates in many groups and clubs. She has lots of friends and close neighbours. Her husband, Bob (68 years old), has been retired for three years, and was a well respected member of the business community throughout his career.

Since his retirement, Bob has had difficulty finding things to keep him busy. He can often be found at the Legion or golf club having a few drinks with friends. He regularly comes home drunk, starts a fight and hits Margaret for no reason. He always apologizes the next day and tells her that he loves her. He says if it weren't for her mistakes, he wouldn't have hit her.

Margaret has not disclosed this to anyone close to her. But last week at cards, her bridge partner, Pat, noticed a bruise on her wrist and asked Margaret what happened. Margaret said she was clumsy and banged her arm on the door. Pat is not sure she believes Margaret, but doesn't want to push for more information.

**Before you act,
ask yourself:**
What are the safety issues?
Am I being respectful?



1. SEE it!

*Do you see possible signs of abuse?
If so, what are the signs?*

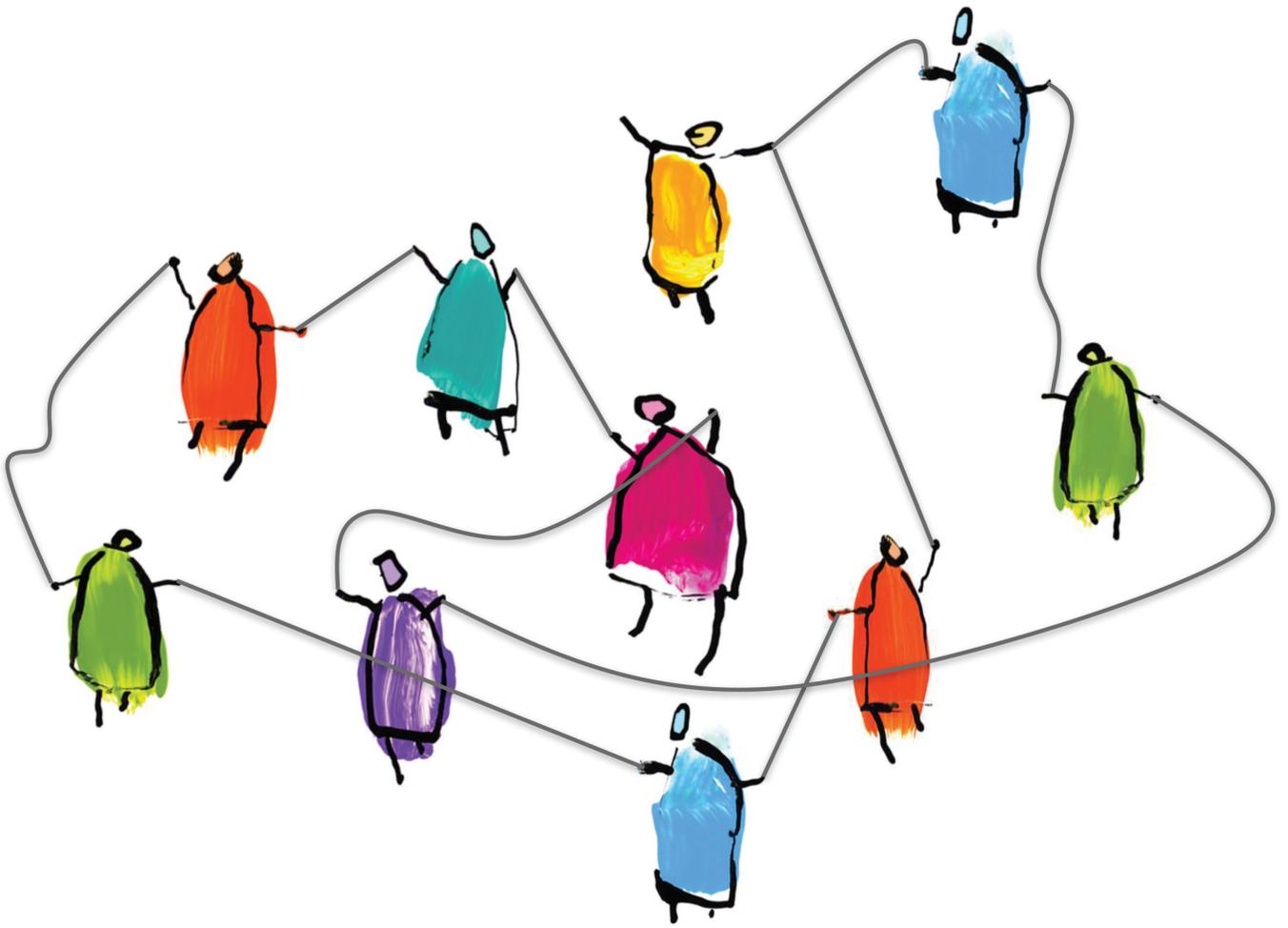
What might be happening?

- Financial abuse
- Emotional abuse
- Violation of rights
- Sexual abuse
- Neglect
- Physical abuse

*Would you hesitate to name it? If so, why?
What would help you overcome your hesitation?*

2. CHECK it!

How could you check this situation? What might you ask? Who might you ask? What other help is available?





5. Seniors in Nova Scotia

Overview

The demographic profile of Nova Scotia is changing, and seniors are representing a bigger part of the population. Between 2007 and 2033, the seniors' population (65 years and older) is projected to increase by 86 per cent, from approximately 15 per cent to 29 per cent of the total population.

When focusing on the serious issue of senior abuse, it is important to remember that seniors are active, contributing members of society. Although abuse can happen to anyone, the risks are lower for those who are connected and involved in their community. The following statistics show some of the ways that Nova Scotia's seniors are involved in their communities—through employment, physical activity, generosity, and more.¹

¹ Unless otherwise noted, the information in this section of the toolkit comes from the *Seniors' Statistical Profile, 2009*, Nova Scotia, 2009.

Finding and using demographic information

Community groups may need demographic information to plan projects, develop proposals, or for other purposes. There are several key sources of demographic and other information about seniors at gov.ns.ca/seniors/publications.asp.

Nova Scotia Community Counts is another excellent source of statistical information. It's at gov.ns.ca/finance/communitycounts/. Community Counts presents socio-economic and other data for 286 communities in Nova Scotia. It includes features to let you compare community resources at the regional, provincial, and national levels, and see the comparisons in charts, graphs, and maps. These comparisons can help you get a more complete picture of your community in relation to other communities. The Map Centre offers over 40,000 maps at thirteen levels of geography for population characteristics (such as age, education, and income) and community assets (such as seniors' centres and senior safety programs). Free training is available for users of Community Counts. Check the website for details.

Life expectancy

The life expectancy of Nova Scotians has been steadily increasing. People born in 1920 lived an average of 59 years. People born in 2005 can expect to live 79 years—an increase of 20 years. Much of this gain can be attributed to better medical care and better living conditions.

Physical activity

Physical activity is one of the best ways to promote better health and prevent illness.² A physically active person has a lower risk of heart disease, stroke, osteoporosis, depression, and premature disability.³ In 2005, 28 per cent of those 65+ were considered to be moderately active or physically active, and 46 per cent of those 55–64 were considered to be moderately active or physically active. While males tended to be more physically active than females (across all age groups), physical activity between males and females in the 55–64 age range was nearly the same (19 per cent for males and 18 per cent for females).

² gov.ns.ca/hpp/pasr/physical-activity.asp. Department of Health and Wellness, Physical Activity Sport and Recreation. Retrieved July 26, 2011.

³ gov.ns.ca/hpp/pasr/physical-activity.asp. Department of Health and Wellness, Physical Activity Sport and Recreation. Retrieved July 26, 2011.

Living arrangements

In 2006, a large majority of seniors who lived in a private household lived with their family (a spouse or other relatives), while only one-third (29 per cent) lived alone. Complex family relationships and dependencies can make a senior more vulnerable to abuse. However, seniors who are isolated—those who have few connections outside their homes—are at greater risk of being abused. This is one reason why it is important for seniors to stay connected and involved in their community.

Housing

The majority of Nova Scotia seniors own or rent their homes. In 2006, 77.5 per cent of seniors owned their home and 22.3 per cent rented. A small portion (0.2 per cent) lived in Band housing.

The percentage of renters includes seniors living in public housing (4 per cent), licensed nursing homes (3.6 per cent), and licensed residential care facilities (0.8 per cent).

Household income

Seniors tend to have lower incomes than younger Nova Scotians. The following table compares the average incomes for households headed by adults in three different age groups.

Head of household	Household income (2006)
Under 65	\$61,532
65–74 years old	\$44,371
75+	\$36,858

In 2006, two-thirds of seniors living in poverty were women living by themselves.

Employment

The number of older workers increased dramatically between 2001 and 2006. For example:

- Employment among 55–64 year-olds jumped 52 per cent. The number of workers in this age group was substantially higher in 2006 than at any point in the previous 25 years.
- Employment of seniors (65+) jumped 60 per cent—from 6,350 in 2001 to 10,175 in 2006.

Generosity

In 2006, in households headed by older seniors (75+), almost 8 percent of household spending went to charity—almost five times the rate of those under 65. In the 75+ age group, 95 per cent of households donated to charity.

In 2007, nearly 44 per cent of seniors (65+) volunteered their time. Their contribution represented 22 per cent of total volunteer hours that year. Their average volunteer time in one year was 298 hours. In comparison, youth (15–24 years old) volunteered at a higher rate, but contributed fewer hours per year. See the following table for the comparison.⁴

	Percentage who volunteered in 2007	Average volunteer hours in 2007
Older seniors (75+)	43.9 per cent	298 hours
Youth (15–24)	64.7 per cent	132 hours

Senior abuse

It is difficult to say how many older people are abused, neglected, or exploited. Situations of abuse are often not reported and so the problem remains hidden. The best information available indicates that between 4 per cent and 10 per cent of older adults in Canada experience abuse. **This means that in Nova Scotia today, approximately 5,000 to 13,500 older people are victims of senior abuse.** Because abuse is severely under-reported, the real number is likely higher. As our population ages, the number of reported and unreported cases is likely to increase.

Because women live longer, there are more older women than there are older men. Therefore, senior abuse is and will continue to be a significant women's issue. It is also a women's issue because women are more likely to be abused than men. The number of reported cases of abuse is higher for older women than for older men, even when the numbers are adjusted to account for the greater number of women. (See the sidebar, "Some issues and facts about abused older women.")

Adult protection

During 2008–2009, Adult Protection Services in the Department of Health and Wellness intervened on behalf of 926 seniors and 182 adults aged 50–64 who met the definition of "an adult in need of

⁴ *Caring Canadians, Involved Canadians: Highlights from the 2007 Canada Survey of Giving, Volunteering and Participating*. Statistics Canada, 2009, Catalogue no. 71-542-XIE

protection” according to the Adult Protection Act. Seventy-one percent of the cases involved self-neglect and 11 per cent of the cases involved caregiver neglect.

It is important to remember that many seniors do not meet the definition of “an adult in need of protection” under the Adult Protection Act. If they are able to care for themselves, they must navigate the healthcare system and rely on community supports in order to protect themselves from abuse. For more information, see section 6, Senior Abuse and the Law.

Some issues and facts about abused older women*

- Senior abuse is often hidden, taking place within family relationships that have been shaped by the experiences of each generation. Sometimes an older woman may not recognize that what is happening to her is abuse.
- Older women may be less willing to report abuse by adult children or their spouse for fear of losing those relationships. Older women also have a very large emotional and financial stake in their relationships, home, and community.
- It is common for abused older women to feel protective towards their children. Society also makes older women feel guilty or blames them if their adult child becomes abusive, by assuming it reflects something the mother did wrong.
- Older women tend to have fewer financial resources and therefore can be more greatly affected by financial abuse.
- Women are more likely to have disabling conditions than men as they age, and are therefore at a high risk of injury. They are also more likely to be caregivers to husbands with dementia.
- Spousal abuse happens to older women in three main ways:
 - It may start when a couple is young and “grow old” with the couple.
 - It may start with retirement or at the onset of illness.
 - It may start in a new relationship that a woman enters when she is older.

*Adapted from *Making Changes: A Book for Women in Abusive Relationships*, 8th edition (2012). Available at women.gov.ns.ca/violence.html





6. Senior abuse and the law

Overview

Laws are complex. There are laws that protect seniors from abuse; however, not all abusive actions are covered by those laws. Even in cases where laws do apply, there may be complicating factors that make it difficult to enforce the laws. For example, it might be difficult to collect evidence; the evidence could be contradictory; or it might be difficult to determine a person's competence to make their own decisions.

This section of the toolkit offers a basic overview of three laws that directly apply to senior abuse in Nova Scotia. It also points you to places where you can learn more. Doing your own research can be helpful, but it won't tell you what might happen in a specific case. If you suspect abuse, talk to a professional. Only a professional looking at the facts of the case can tell you which laws may apply.

Criminal Code of Canada

The Criminal Code of Canada outlines criminal offences and procedures for all of Canada. Many forms of senior abuse are offences under the Criminal Code. For example:

- Physical abuse could be an offence under sections 265 and 268 for assault and aggravated assault.

- Emotional abuse could be an offence under section 423 for threats or intimidation.

For a more detailed description of the possible offences and the sections of the Criminal Code that apply, see Abuse as Criminal Matters, produced by the Canadian Network for the Prevention of Elder Abuse (www.cnpea.ca/abuse_crimes.htm).

Because senior abuse happens within relationships of trust, the people affected may be reluctant to contact the police or follow through with a criminal proceeding. They might not want to see their loved one go to court or to jail. If they are dependent on that loved one, they might be afraid of the impact on their own lives if that person is punished. There might also be health issues that make it difficult for the police to collect reliable evidence. In some cases, the senior may be unable to provide evidence when the matter finally gets to court, which could be years later.

The law in Nova Scotia

Nova Scotia has two laws that relate directly to preventing and responding to the abuse of adults:

- Adult Protection Act
- Protection for Persons in Care Act

Adult Protection Act

The Adult Protection Act aims to protect people aged 16 years or older who live in the community and are experiencing abuse, neglect, or self-neglect, and who cannot physically or mentally protect themselves.

For an adult to be considered “in need of protection,” there must be significant risk of serious physical or psychological harm. About 75 per cent of people who are helped under the act are seniors.

Nova Scotia’s Department of Health and Wellness administers Adult Protection Services. Adults who are found to be in need of protection are referred for help that will address their risks. Priority is given to the most serious cases.

Under this law, you **must** report cases where you know of or suspect that a vulnerable adult is being abused, neglected, or is suffering self-neglect.

If you know or suspect an adult is in need of protection, call Adult Protection Services at **1-800-225-7225**.

Note about financial abuse: The Adult Protection Act addresses physical, emotional, and sexual abuse. It does not address financial abuse. Contact the police if you suspect a vulnerable adult is experiencing financial abuse.

Protection for Persons in Care Act

The Protection for Persons in Care Act (PPCA) applies to patients or residents (over the age of 16) in health facilities. It creates a duty for administrators and service providers in those facilities to report abuse or situations that would likely lead to abuse. Health facilities include

- hospitals
- residential care facilities
- nursing homes or homes for the aged or disabled
- certain homes that provide supervisory or personal care under terms set by the Department of Community Services and the Department of Health and Wellness

Under this act, the Department of Health and Wellness and the Department of Community Services will investigate allegations of abuse and will issue directives to the health facilities in order to protect patients and residents from further harm.

Members of the public may also report known or suspected cases of abuse in health facilities by phoning **1-800-225-7225**.

Legal information resources

To learn more about senior abuse and the law, contact the Legal Information Society of Nova Scotia (LISNS). Their Legal Information Line can give you general legal information. If you want specific legal advice, a LISNS telephone counsellor can give you the name of a lawyer in your area who will meet with you for 30 minutes for a small fee to discuss your case and suggest your next steps. Call 1-800-665-9779 (toll-free in Nova Scotia) or 902-455-3135 (in Halifax).

Also see these practical guides:

- *It's In Your Hands: Legal Information for Seniors and Their Families*. This user-friendly guide to financial and legal planning is available from the Legal Information Society of Nova Scotia (www.legalinfo.org/seniors/index.html).
- *A Practical Guide to Elder Abuse and Neglect Law in Canada*. This guide offers an overview of Canadian laws related to senior abuse. It is published by the Canadian Centre for Elder Law (www.bcli.org/ccel/projects/practical-guide-elder-abuse-and-neglect-law-canada).

When a spouse
is abusive, it is called
domestic violence.

See nsdomesticviolence.ca





7. About us

The Nova Scotia Department of Seniors helps to plan and coordinate policies, programs, and services for seniors in the province. We serve the public by

- providing information on programs and services for seniors
- listening and responding to the issues and concerns of seniors and others

The department offers the following services:

- a toll-free information line (1-800-670-0065)
- a toll-free Senior Abuse Information and Referral Line (1-877-833-3377)
- a resource library
- regular consultations
- various publications and directories, such as the annual *Positive Aging* directory of programs

The department also supports the Seniors' Secretariat, a government cabinet committee made up of six ministers:

- Minister of Seniors (Chair of the Secretariat)
- Minister of Community Services
- Minister of Health and Wellness
- Minister of Justice
- Minister of Labour and Advanced Education
- Minister of Service Nova Scotia and Municipal Relations

Contact Us

We want to hear from you. Tell us what you think of this toolkit; what you would like us to add, change, or remove; and how we can make it easier to use.

Toll-free: 1-800-670-0065

In Halifax: 902-424-0065

E-mail: seniors@gov.ns.ca

Website: gov.ns.ca/seniors/

Nova Scotia Department of Seniors

1740 Granville Street
PO Box 2065, Halifax
Nova Scotia B3J 2Z1





Thank you

The Government of Nova Scotia thanks the Centre for Research & Education on Violence Against Women and Children at the University of Western Ontario for permission to adapt material from their public education campaign, “It’s Not Right! Neighbours, Friends and Families for Older Adults” (www.neighboursfriendsandfamilies.ca). The original campaign was supported by the Public Health Agency of Canada through the Federal Elder Abuse Initiative.

Nova Scotia’s Senior Abuse Strategy and the Strategy for Positive Aging are guiding documents for the government on seniors’ issues. Therefore, the toolkit has been adapted to align with the goals and core messages of these two strategies.

Thank you to all those who took time out of their busy schedules to participate in field testing in the Annapolis Valley region and Pictou/Antigonish region. These community members provided valuable feedback on the content and design of the toolkit to make sure we were communicating our messages clearly. Without your feedback this toolkit would not be what it is today.

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Most of all, thank you to all the community champions who use the toolkit. Tools are meant for making things. With every presentation you give and every discussion you lead, you help to make your community a better place to live.





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My notes:

A series of horizontal dotted lines for writing notes.



gov.ns.ca/seniors/stopabuse