Working Together to Effectively Address Abuse in Later Life



Abuse in Later Life

Abuse in later life (ALL) refers to willful abuse, neglect, or financial exploitation of an older adult that occurs within an ongoing relationship where there is an expectation of trust. Power and control dynamics, similar to those seen in typical domestic violence and sexual assault cases, are often present in these deeply personal and painful cases and thus present unique challenges that require a specialized response. For more information, please see the information sheet, *An Overview of Abuse in Later Life*, located at: www.ncall.us/content/ALL.

These cases are often complicated. The abuser may be a spouse, intimate partner, family member, or caregiver. The older victim may want to maintain a relationship with or protect the abuser. Older victims may be healthy and active or they may have physical or cognitive limitations. These victims may be in contact with the justice system, social services, health care, faith communities, and the aging services network.

The Benefits of Working Together

Given the complexity of abuse in later life cases, a multidisciplinary response is often the most effective approach. The benefits of working together include:

- Gaining a more complete picture of victims' needs by hearing from professionals with various perspectives
- Creating a more complete list of options for victims by raising awareness among professionals of remedies and services that are available or highlighting gaps in available services
- Leveraging additional resources
- Reducing the duplication of services

Engaging Community Partners

An effective collaborative response includes engaging key partners who hold integral roles in addressing abuse in later life. Some of these partners include, but are not limited to, professionals and volunteers who work in organizations that specialize in: aging services, adult protective services (APS), criminal justice systems-based advocacy, civil law, criminal and civil justice systems, culturally-specific services, disability rights, domestic violence, faith, finances, health care, law enforcement, long-term care, mental health, regulatory compliance, sexual assault, and substance abuse.





Key Partners

Domestic violence and sexual assault advocacy programs are communitybased and criminal justice systems-based programs that may offer individual and peer counseling, support groups, emergency and transitional housing, economic and legal advocacy, and medical and court accompaniment to older victims.

The criminal justice system professionals investigate, prosecute, and adjudicate cases of abuse in later life where the conduct may be criminal to hold offenders accountable. With an awareness of available legal remedies and resources, professionals such as law enforcement officers, prosecutors, judges, probation and parole officers, and victim-witness advocates are critical partners in developing effective intervention strategies to end abuse of older adults, hold perpetrators accountable, and prevent further harm.

When a Crime Has Been Committed Although many states do not have criminal elder abuse statutes, several forms of abuse against older adults are crimes. Assault, battery, homicide, stalking, harassment, sexual assault, violation of a restraining/protective order, theft, forgery, and disorderly conduct are examples of crimes that can be charged in some elder abuse cases. In addition, many states have laws allowing for enhanced penalties upon conviction for crimes involving victims who are older or cognitively or physically disabled.

The civil justice system may also play a crucial role in responding to cases of abuse in later life. Civil remedies such as protection orders, wills, guardianships, and powers of attorney may help victims and potential victims.

The aging services network includes professionals and volunteers who lend ongoing support and services to older adults. These services may include, but are not limited to: transportation assistance, in-home care, nutrition services, and health, prevention, and wellness programs. Because these individuals often work with older adults on a daily or weekly basis, they may witness injuries or hear descriptions or allegations of abuse, neglect, exploitation, or fear.



Adult Protective Services (APS) are investigatory, protective, and social services provided to abused, neglected, or exploited older and/or vulnerable or at-risk adults. APS is typically administered by state or county human services or aging agencies. In almost all states, a broad array of professionals, including doctors, nurses, law enforcement officers, social workers, and aging and disabilities services providers are mandated to report any suspicion of vulnerable adult abuse, neglect, or exploitation to APS.

Culturally specific programs provide services and support to individuals within given communities. Some older victims may be reluctant to contact law enforcement, social services, or mainstream domestic violence or sexual assault (DV/SA) advocacy programs. These victims may, however, reach out for assistance from culturally specific DV/SA programs or other organizations and programs that advocate for the communities with which they identify.

Faith-based organizations are important because faith holds a central place in the lives of many older adults. It can be a critical resource, a pillar of identity and community, and an essential element in decision-making and healing. Spiritual leaders are trusted supports and faith communities may often be the first place victims and family members turn for help.

Long-Term Care Ombudsmen are advocates for residents of nursing homes, board and care homes, and assisted living facilities. Under the federal Older Americans Act, every state is required to have an Ombudsman Program that addresses or investigates individuals' complaints and advocates for improvements in the long-term care system.





Working Together: Developing a Coordinated Community Response (CCR)

Professionals from various agencies and organizations may work together informally on abuse in later life case consultations or specific projects. In some communities, task forces or groups have been formed that meet regularly to address abuse in later life. Examples of multidisciplinary teams include: a Multidisciplinary Case Review Team (M-team), a domestic violence Coordinated Community Response (CCR), or a Sexual Assault Response Team (SART) with a focus on abuse in later life, an Elder Abuse Fatality Review Team (EA-FRT), or a Financial Abuse Specialist Team (FAST). Abuse in Later Life Coordinated Community Response (ALL-CCR) teams include professionals and community partners from various disciplines who share a broad vision of their community's responsibility for enhancing services and safety for older victims and improving the criminal justice system's response to perpetrators. ALL-CCRs identify current systems' responses and service gaps and coordinate members' efforts in order to create a seamless response to the needs of victims of abuse in later life. For more information on ALL-CCRs, please visit:

www.ncall.us/community/collaboration.

66 Since its inception, the Merrimack County Abuse in Later Life CCR team has met monthly to work toward its goals. From an initial membership of 12 community organizations, the collaboration has grown to a diverse group of 22 organizational partners and four representatives of the community-at-large—two of whom are victims/survivors. Team members are working together to educate one another, build supportive inter-agency relationships, and assess and expand community outreach and accessible services for older victims/survivors.

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Additional information sheets may be found at: www.ncall.us/content/ALL.

The National Clearinghouse on Abuse in Later Life (NCALL) focuses on program and policy development, technical assistance, and training on abuse in later life: the nexus between domestic violence, sexual assault, and elder abuse, neglect, and exploitation. For more information please visit: www.ncall.us or call: 608-255-0539.

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