Neglect and Abuse in LTC

Gloria M. Gutman PhD ARRCBC Webinar April 10, 2024



Popular Press re LTC facilities

- Peter Townsend (1964) The last refuge. A survey of residential institutions and homes for the aged in England and Wales.
 Routledge.
- Atul Gawande (2014) Being mortal: Illness, medicine and what matters in the end. Profile Books Ltd.

About Elder Abuse

"Mistreatment of older adults refers to actions/behaviors or lack of actions/behaviors that cause harm or risk of harm within a trust relationship"

National Initiative for Care of the Elderly (NICE), 2015

Where Elder Abuse Occurs

- In **private households**, where 92% of Canada's seniors live (Statistics Canada, 2011a). Perpetrator may be spouse, lover, sibling, child, friend, neighbour, or paid caregiver
- In **institutional settings** (such as assisted living, licensed care facilities, hospitals) where perpetrators may include
 - Staff
 - Visitors
 - Other residents



TYPES OF ELDER ABUSE AND WHERE IT OCCURS

Internationally recognized types are:

- Physical
- Psychological
- Financial
- Sexual
- Neglect

BC also recognizes self neglect

Psychological and financial are the most common

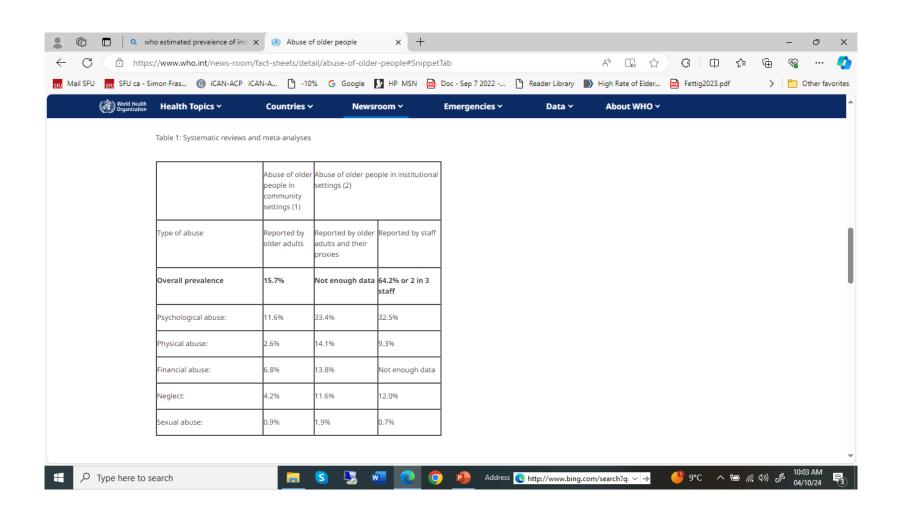
Source: Podnieks, Pillemer, Nicholson, et al. 1990; Boldy, Horner, Crouchley, et al, 2005; Ockleford, Barnes-Holmes, Morichellim et al, 2003)

- Poly-victimization may occur
 - Multiple forms victims may experience more than one type, concurrently or sequentially

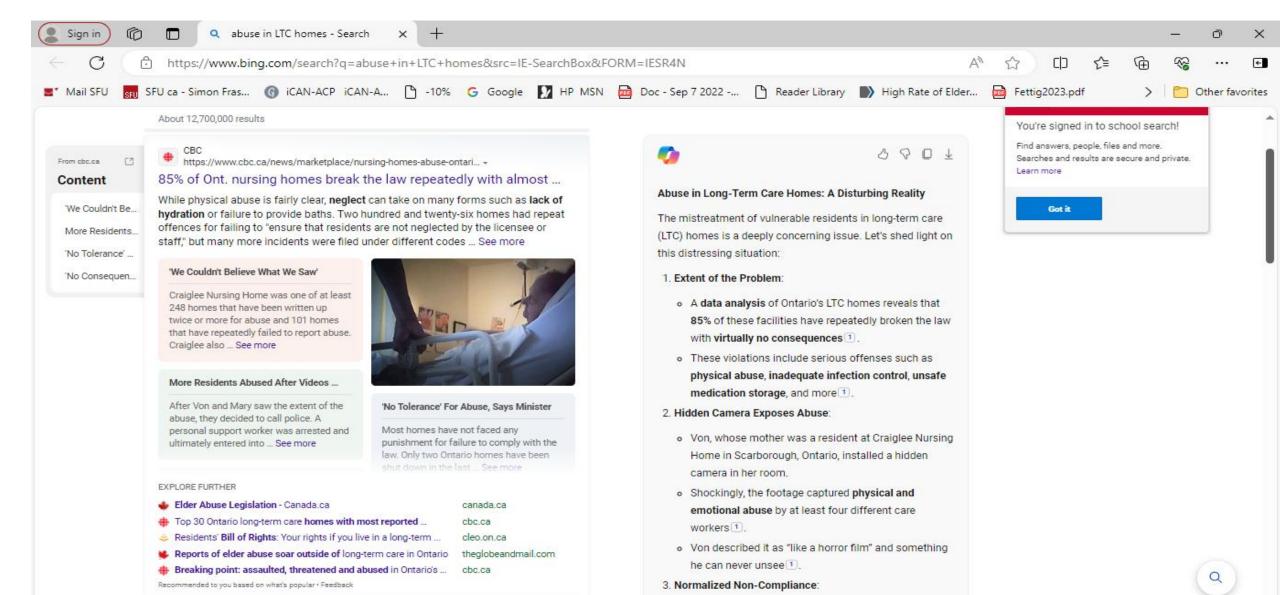
Source: Anme & Tatara, 2005: Boldy, Horner, Crouchley et al. 2005: Vida & Des Rosiers, 200

- Multiple perpetrators
- Gutman, Karbakhsh, Stewart (2024)

Estimated prevalence



NEGLECT



Resident-resident aggression



"Negative, aggressive, and intrusive verbal, physical, sexual, and material interactions between LTC residents that <u>in a community</u> setting would likely be unwelcome and potentially cause physical or psychological distress in the recipient."

- MacDonald et al. (2015)

More than 10,000 Canadians abused annually by fellow nursing home residents

Toronto's Frank Piccolo was among the 10,000 Canadians abused by fellow residents in long-term care every year, a crime for which no one pays a penalty.

By Sandie Rinaldo Special to the Star

▲ Saturday, February 9, 2013 | Ō 7 min to read

Toronto Star (2013): https://tinyurl.com/ynfdrnfa



Frank Piccolo

https://tinyurl.com/2u7a3km8

Resident-to-Resident Abuse: A Scoping Review*

Lynn McDonald, 1,2 Christine Sheppard, 1 Sander L. Hitzig, 2 Tal Spalter, 2 Avantika Mathur, 2 and Jason Singh Mukhi²

"One-third of reported abuse cases"

McDonald et al. (2015) https://pubmed.ncbi.nlm.nih.gov/25752919/

1st Study on Fatal RRI in Canada and U.S.

JOURNAL OF ELDER ABUSE & NEGLECT 2018, VOL. 30, NO. 4, 284-308 https://doi.org/10.1080/08946566.2018.1474515





The circumstances surrounding the death of 105 elders as a result of resident-to-resident incidents in dementia in long-term care homes

School of Nursing, Adult and Gerontological Health and Cooperative Unit, University of Minnesota, Eilon Caspi, PhD Minneapolis, MN, USA



Common triggers

- Invasion of personal space
- Unwanted entries into one's bedroom
- Taking personal belongings from others
- Reaching a breaking point
- Conflicts between roommates.

Underlying theme:

Unmet needs / situational frustrations Intersecting with residents' cognitive processing disabilities

- Behavioral Expressions labeled as "Aggressive" in people with dementia are mostly...
- Expressions of unmet human needs
- Have **meaning**, **purpose** & **function** *to the person...*
- Attempts at communication that need be explored with validation Judy Berry
- Attempts at **gaining control** over unwanted, frustrating, frightening or threatening situations
- Attempts at preserving identity & dignity

Source: Caspi (2013; 2023)

WHO infographic



 Risk of abuse and fear of retaliation may be greater among marginalized groups e.g.
 LGBT+ residents, indigenous older adults or those from ethnic minorities in a particular facility. International Perspectives on Aging 37

Claire Robson - Jen Marchbank - Gloria Gutman - Makaela Prentice Elder Abuse in the LGBTQ2SA+ Community

The Impact of Homophobia and Transphobia

This book describes and analyzes the lived experience of elder abuse from the queer community. It discusses the experiences by transwomen, gay men and lesbians of financial abuse, physical and sexual abuse, homophobic abuse, and neglect within partner relationships, residential care, in home care, and religious organizations. Queer and trans elders have been described as 'The Silent Generation,' since they have lived through times when their sexual and gender identities were criminalized and pathologized. The book shows that they are far more at risk to suffer abuse and neglect by those they should be able to trust, since they are more likely to have encountered all key risk factors, such as isolation, previous abuse and trauma, and mistrust of the health care system. Their vulnerability has been overlooked and this book addresses that gap. As such, this book provides a great resource to anyone working with elders, including medical professionals, care providers, police, counsellors, and policy makers.

Robson · Marchbank · Gutman · Prentice

International Perspectives on Aging 37
Series Editors: Jason L. Powell, Sheying Chen

Claire Robson Jen Marchbank Gloria Gutman Makaela Prentice



Elder Abuse in the LGBTQ2SA+ Community

Elder Abuse in the LGBTQ2SA+Community

The Impact of Homophobia and Transphobia

ISBN 978-3-031-33316-3

▶ springer.com

Context and type of abuse covered in the study on which book is based

Zoe

In-home care

Inappropriate touching & neglect

Trudy

 Neglect & failure to recognize her lesbian widowhood (neglect or psychological abuse?)

Faith based organizations

Ostracism and spiritual abuse
 Grace

Residential care

Neglect, over medication, harassment & physical abuse
 Neglect
 Donald

Within Romantic Relationship

Financial abuse, emotional abuse (death threats)
 Financial abuse, emotional/psychological abuse

Pam

Within Lesbian Community

Financial abuse, theft

"A Sense of Learned Helplessness"

Among staff

- GLTCRC (2020)

Resident A: 72 y/o man in severe stage of Alzheimer's disease

Resident B: 77 y/o man with vascular dementia & severe cognitive impairment

Resident B repeatedly entered other residents' bedrooms over 3 months

Resident A <u>pushed</u> him <u>b/c</u> "he <u>came into his bedroom</u> and took his cookies"

Multiple rib fractures & subdural hematoma → Died 2 weeks later

"The **GLTCRC** was **struck by the normalization** of violent behaviours and the level of resident-on-resident, and resident-on-staff violence in the Responsive Behavior Unit"

Zero tolerance for abuse of children and for domestic abuse. Why not for elder abuse?

- A way forward: Promising approaches to abuse prevention in institutional settings (Macdonald et al. 2008)
- Reviewed law and regulation across Canada
 Indicated (page 6) in report to PHAC that the language of "zero tolerance" was beginning to surface in the law and regulation in some jurisdictions.
- What evidence is there that this trend has continued and that the CSA environmental standards and the HSO operational standards reviewed and updated in 2021-22 and discussed at the Friesen conference have in fact improved the situation?

Who is asking? When will have some answers? from whom?

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