



# ABUSE OF OLDER ADULTS:

Guidelines For Developing Coordinated  
Community Response Models



Alberta Council  
of Women's Shelters  
320, 10310 Jasper Avenue  
Edmonton, AB T5J 2W4  
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*Jamie Evans, Public Education and Awareness Co-ordinator, Medicine Hat Women's Shelter Society*

*Pat Power, Community Social Worker, Elder Abuse Intervention Team, City of Edmonton*

*Bernice Sewell, Director of Operations, Seniors Association of Greater Edmonton (SAGE)*

*Luanne Whitmarsh, Chief Executive Officer, Kerby Centre, Calgary and*

*Sandra LeBlanc, Researcher, Project Manager and Principal Author*

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<sup>1</sup> Formerly known as Edmonton Seniors' Safe House

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# Introduction



For many years, Alberta has been at the forefront of addressing the abuse of older adults.<sup>1</sup> In Edmonton the Elderly Adult Resource Services Program (EARS), SAGE Seniors' Safe House and the Elder Abuse Intervention Team (a partnership between Catholic Social Services, the City, the Police Service and the Victorian Order of Nurses) have contributed to building a safe community for abused seniors. In Calgary, the Action Group on Elder Abuse (AGEA) developed an elder abuse protocol and resource manual and Kerby Rotary House, a shelter for abused senior men and women, was Canada's first purpose-built shelter for abused older adults. In Medicine Hat, the Community Response to the Abuse and Neglect of Elders (CRANE) has forged a strong community response in the areas of education, advocacy and response to the abuse of older adults. See Appendix C for a full listing of current programs.

In 2003, Alberta was one of the first provinces to conduct a provincial awareness campaign on this issue. A broad range of stakeholders including justice, police, service providers, funders and government representatives continue to diligently hone and enhance a collaborative response to the abuse of older adults.

By combining our expertise, we hoped to strengthen community responses to the abuse of older adults in Alberta through a three stage process:

1. **A Literature and Stakeholder Review:** this preliminary background report is available on the ACWS website at [www.acws.ca](http://www.acws.ca).
2. **Identify the Essential Elements of a Comprehensive Community Response to the abuse of older adults:** project partners evaluated the effectiveness and appropriateness of community resources and approaches. Using assessment criteria, the partners identified the range of services that need to be available to all Alberta communities. These elements can be found in Appendix B.
3. **Develop a Draft Community Development Model:** project partners developed a draft community development model to assist communities in designing a community based, collaborative approach to the abuse of older adults.

This project is part of the Alberta Council of Women's Shelters ongoing effort to promote and disseminate knowledge and research on the prevention and intervention in the abuse of older adults.

<sup>2</sup> We use the term abuse of older adults in this document rather than elder abuse as the term "elder" has a special significance in Aboriginal, ethnic and church communities.

# Overview



*Canada's population is getting older. As the number of seniors increases, the demand for services for seniors experiencing abuse will also increase. By 2031, it is projected that about one in five Albertans will be a senior.*







## Scope of the Problem



**A**buse of older adults, commonly known as 'elder abuse', is defined as any action or inaction by self or others that jeopardizes the health or well-being of an older person. An act of harm or the neglect resulting from a failure to act is especially detrimental when inflicted by those in a position of trust, power or responsibility.<sup>3</sup> (For more details, see Appendix A, Definitions and Context of Abuse.)

We all know that Canada's population is getting older. As the number of seniors increases, the demand for services for seniors experiencing abuse will also increase.

It is projected that the senior population will continue to increase to close to 13% of the total population by 2016, and to more than 20% by 2030.<sup>4</sup>

Different cities and towns are aging at different paces depending upon their individual characteristics. Lethbridge, for example, is aging faster than Fort McMurray.

Urban centers tend to have a higher concentration of seniors and more seniors' resources than rural and remote areas.

Seniors belong to families, religious and societal structures that are heavily influenced

by pre-existing and sometimes firmly entrenched attitudes and ideologies.<sup>5</sup> When designing effective response strategies to the abuse of older adults, it is important to take a multi-layered approach, understanding their background; the cultural, ethnic and religious factors that may come into play, as well as the risk factors and theories that address the abuse of older adults. And, in our increasingly diverse society, more emphasis needs to be placed on immigration, ethnicity, status and language when creating effective strategies to support our aging population.

In 1999, Statistics Canada interviewed approximately 4,000 seniors to obtain information about their experiences with abuse. About 7% experienced some form of financial or emotional abuse from a spouse, adult child, or caregiver within the five years prior to the interview. Consider that these statistics are based on reported abuse only. Since a lot of abuse is unreported, these figures represent **only a portion** of a much larger problem.

### Some Quick Facts

- Between 1998 and 2005, police in Canada reported that family violence against seniors increased by 20%. Abuse of seniors

<sup>3</sup> From the Alberta Elder Abuse Awareness Network, [www.albertaelderabuse.ca](http://www.albertaelderabuse.ca)

<sup>4</sup> Statistics Canada, 2010, Projected population, by projection scenario, sex and age group as of July 1, Canada, provinces and territories, annual 2009 to 2036

<sup>5</sup> Ageism, patriarchy, sexism, colonialism, racism, power, authority, paternalism, dominance, privilege, autonomy and empowerment are all important factors to consider in connection to the abuse of older adults and family violence

is most often committed by an adult child and related homicides are most likely committed by an adult male child.<sup>6</sup>

- 18% of 800 Albertans surveyed by telephone in 2003 indicated that they knew a senior who had experienced abuse.<sup>7</sup>
- Research indicates that older women (2 out of 3 victims) are more likely to experience abuse than older men.<sup>8</sup>
- Older women are more likely to experience abuse and neglect by their spouse or adult children, whereas older men tend to be abused by adult children or friends.<sup>9</sup>
- Women are more likely to be victims of neglect, while men are more likely to be victims of physical abuse.<sup>10</sup>

There are a number of ways to look at the abuse of older adults: it can be seen as a human rights issue, a health issue, a criminal justice issue, a housing issue, a social issue, an economic issue and a gender issue (since women comprise the majority of the older population in virtually all nations across the globe).<sup>11</sup> Most importantly, it should be a key consideration in any active aging strategy.

If nothing is done, the number of seniors who experience one or more types of abuse is more than likely to increase as the senior population grows. Coordinated community responses based on awareness, education and increased resources and supports are urgently required.

*By 2025 almost 25% of Canadians will be age 65 and over (Statistics Canada).<sup>12</sup>*

*In Alberta, the number of seniors is projected to increase from approximately 398,000 in 2010 to over 1 million in 2036.<sup>13</sup>*

*Currently:*

- Nearly 1/3 of Alberta seniors (28.2%) aged 65 years or older were born outside of Canada, compared with 16% of the total population.<sup>14</sup>
- Of the 7.2% of seniors belonging to a visible minority, the largest group (39%) were Chinese.<sup>15</sup>

*Emotional abuse was reported the most frequently (7%), followed by financial abuse (1%), and physical or sexual violence (1%). Almost 2% of those interviewed reported that they had experienced more than one form of abuse.<sup>16</sup>*

A coordinated community response brings together partners in the community to provide comprehensive options for abused seniors in their justice and human service delivery systems. Partners will vary depending upon community needs, resources and awareness.

<sup>6</sup> Statistics Canada, Canadian Centre for Justice Statistics, Family Violence in Canada: A Statistical Profile 2007, Statistics Canada Cat. # 85 – 224 XE, page 33.

<sup>7</sup> Alberta Elder Abuse Awareness Network Omnibus Survey, 2003.

<sup>8</sup> Canadian Network for the Prevention of Elder Abuse, [www.cnpea.ca/abuse\\_of\\_older\\_women.htm](http://www.cnpea.ca/abuse_of_older_women.htm)

<sup>9</sup> Action Group on Elder Abuse, Lets Talk About It, page 8, Toolkit to Hosting An Awareness Cafe, 2007.

<sup>10</sup> Boyak, Virginia (1997) Golden Years Hidden Fears, Elder Abuse, A Handbook for Front-Line Helpers Working With Seniors, Kerby Centre, Calgary, Alberta.

<sup>11</sup> World Health Organization, 2002: 2-3

<sup>12</sup> Statistics Canada, 2010, Population Projections: Canada, the Provinces and Territories 2005-2031.

<sup>13</sup> Government of Alberta, A Profile of Alberta Seniors, 2010 page 5.

<sup>14</sup> Ibid.

<sup>15</sup> Statistics Canada, 2006, A Portrait of Seniors in Canada, page 25.

<sup>16</sup> Statistics Canada, Family Violence in Canada: A Statistical Profile, Catalogue no. 85-224. Released June 26, 2002. p. 27.



# The Challenge



**A**s the abuse of older adults is a very complex issue, no one organization has the scope and capacity to fully address the problem. An effective community response will involve many stakeholders working in collaboration, with each group contributing and building on its own strengths.

Abuse of older adults often occurs within the broader context of family violence and bullying. Community-based programs and services need to continually evolve to ensure they are meeting the needs of individuals and families, including an aging and increasingly diverse population. Improving the coordination of existing programs and services, from prevention to intervention and follow-up, make the system more accessible to a wide range of Albertans, regardless of their age, cultural background, or sexual orientation.

Alberta communities range from remote and secluded to cosmopolitan metropolises. Therefore, community response to the abuse and neglect of seniors, should be equally as diverse. Programs, services, and supports have to be adapted to meet the needs of each

distinctive community. Different approaches in rural, Aboriginal, and immigrant communities are required. Accessibility is a key factor, as those who need services the most may be the least able to find or use them. An atmosphere where seniors are comfortable in speaking about their situation, with services designed or adapted to meet their express needs, is critical for success.

When addressing the abuse of older adults, it is recognized that certain supports and services need to be in place within or near Alberta communities. A check list has been developed to assist communities in identifying possible service enhancements to better meet the needs of abused seniors. This Checklist can be found in Appendix B.

In addition, existing programs and initiatives range from specific services for abused seniors to community groups that are working toward increasing education and awareness. Appendix C, Existing Programs and Initiatives Addressing the Abuse of Older Adults, provides you with a wealth of examples and contacts.<sup>15</sup>


<sup>15</sup> This list was compiled during the early part of 2010 and every effort was made to ensure its comprehensiveness and accuracy; however, the availability of programs, services, and contact information, etc. may vary over time, or perhaps change altogether. The services listed are those specifically addressing the abuse of older adults rather than general services that may or may not be available for seniors.



# A Plan Of Action: Community Development Model

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*Now that you know about the problem, some of its causes, and the requirements that need to be in place to support the success of a senior-specific program, what follows is the Community Development Model we've created that can be applied in your community.*





## Community Development Model



Community development is a process in which community members come together to take action and generate solutions to common problems. A community development model provides a framework to help communities tackle those issues of common concern. By identifying and working with existing human and material resources in your community, there is the ability to enhance supports, identify and address gaps, leverage resources and develop more flexible systems that improve the overall quality of life. What follows is a Community Development Model we have created to help you design or enhance your community's response to the abuse of older adults, from prevention to intervention.

With the exception of emergency situations, response to the abuse of older adults requires a multidisciplinary approach, where workers from various disciplines form community-based teams to coordinate interventions and services. This coordinated response can include representatives from family violence service providers, Victim Services, "health, social and volunteer services, law enforcement, faith communities, and legal and financial services. This team works together to make comprehensive assessments, review cases, and establish appropriate interventions for

complex situations of abuse. The integrated model allows service providers to get to know one another, to organize and disperse services in a single initiative and produce more comprehensive care plans".<sup>16</sup>

*When abuse of an older adult occurs in a care-giving situation, it is often a continuation of a pattern of family violence: "spouse abuse grown old." Using violence or neglect to solve problems may be a long-term family pattern.<sup>17</sup>*

The elements described in the following pages are designed as a guideline for Alberta communities to address the abuse of older adults. The various stages and points sometimes overlap within the model, and it is likely that a back-and-forth process may develop from one stage to the next. It is not necessary to follow the model in order although that may occur.

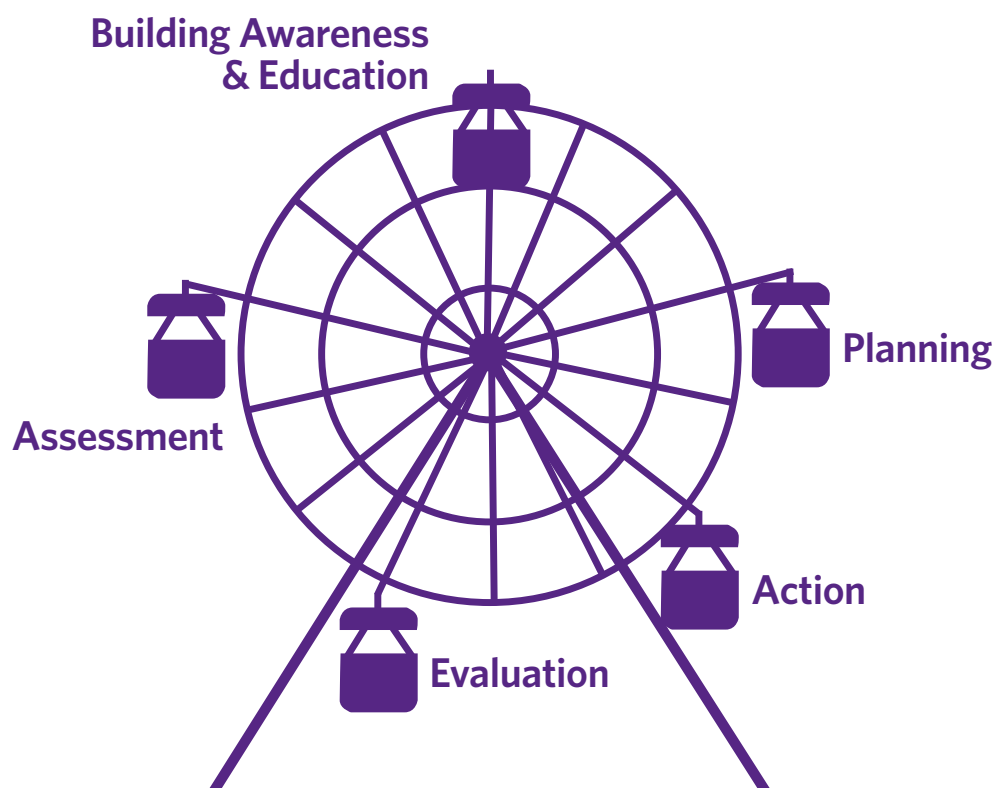
Build in ways to check your progress. It is important to plan how you'll 'take stock' of your progress. Ongoing monitoring and evaluation are important to both maintain and enhance your community's response.

<sup>16</sup> Podnieks, Elizabeth. 2008. Elder Abuse: The Canadian Experience, in *Journal of Elder Abuse & Neglect*, Vol. 20(2), page 134.

<sup>17</sup> Health Canada. Mental Health Division and National Clearinghouse on Family Violence. 1994. Abuse and Neglect of Older Adults: Awareness Information for People in the Workplace.



Since communities vary, each community's entry point will vary, as will the level and degree of adaptation. Communities can adapt the model in whole or in part, depending on the particular needs of a community and availability of resources. Since smaller communities generally have fewer resources than larger communities, some parts of the model may be unattainable locally – you may need to tap into a larger network. Larger communities with certain services in place may find themselves picking and choosing certain elements or ideas for implementation. Therefore, the model can be visualised as a Ferris wheel – always revolving and evolving, where people can get on and off whenever they need to.



# Assessment



## Stakeholder and Community Meetings

Call stakeholder meetings. Invite community groups and local businesses, including representatives from faith, aboriginal and immigrant serving organizations. A community can be proactive (to explore the issue of the abuse of older adults) or reactive (to a known abusive event that has already occurred in the community).

Although not an inclusive list, and appearing in no particular order, the following are some potential stakeholders you may wish to contact:

- Seniors
- Police
- Victim Services
- Family and Community Support Services
- Women's Shelters
- Alberta Children and Youth Services (Prevention of Family Violence and Bullying)
- Alberta Health Services
- Community Health Services
- Aboriginal Services
- Immigration Services
- Legal Services
- Financial Services
- Income Support Services
- Home Care
- Sexual Assault Centres
- Alberta Seniors and Community Supports
- Alberta Council on Aging
- Alberta Alcohol and Drug Abuse Commission
- Crisis Line Workers
- Senior Citizens Groups
- Seniors' Recreation Centres
- Victorian Order of Nurses
- Office of the Public Guardian
- Veteran Affairs
- Community Housing Services
- Seniors' Outreach
- Mental Health Association
- Faith Communities
- University Affiliates
- Policy Makers

Hold a series of community meetings or workshops to discuss and define the magnitude of the problem. Look at how to develop a comprehensive, coordinated, community-specific response. Identify strengths, limitations, how each participant can contribute and gaps.

### Identify and Assess Community Resources

Be realistic about what can be accomplished in your particular community and then build on your successes. How does your community respond when a senior comes to you saying they have experienced abuse or know someone who has? What processes are currently in place? Every case is different. The victim could be a man or a woman from any socio-economic or cultural background. They may have a disability or special health care needs. One agency might not be able to respond to all their needs. Mapping out how your community might respond to specific issues around the abuse of older adults can help your community plan comprehensive and integrated responses for different scenarios and identify potential gaps and how to fill them. You may wish to refer to the checklist in Appendix B as you work to identify potential gaps or needs for enhanced services. Assess your community's resources and begin working with whatever is available.

### Build Upon Existing Community Resources

A community's response to the abuse of older adults can be enhanced by better use of existing services. Begin by evaluating each service to see what changes or additions might be required to increase effectiveness. Kinnon suggests, "[t]o build on existing services, examine how individual services may be adapted to respond to the needs of older people. Although many services do

not have a specific mandate to respond to the abuse and neglect of older people, they may be able to offer what is required by modifying what they currently do. For example, transition houses could make at least one ground floor bedroom available for older women and adapt bathrooms and other daily living facilities for people with disabilities."<sup>18</sup> The Alberta Council on Aging's Senior Friendly Program™ and the Canadian Standards Association, Design for Aging (B659-01) offer useful information in designing services for older adults.

Another approach to enhancing current approaches might include training a local police officer about the abuse of older adults, how to recognize signs of abuse, and how to respond. If possible, assign a social worker to respond with a police officer to specific cases. If your community has a women's shelter, perhaps an outreach group could be formed, such as Older Women Living Safely (OWLS) in Calgary (see Appendix C).

Anne McGregor (in the *Abuse and Neglect of Older Adults*) "proposes the following roles for community nurses, which could be applied to other service providers such as social workers."

- a) **Support and counselling** to encourage disclosure and the expression of emotions, to provide emotional support and 'respectful confrontation' if the older adult is self-blaming, and to aid in the decision-making process.
- b) **Education** to dispel mistaken beliefs and provide accurate information about human/civil rights and available options.
- c) **Assessment** of both the physical ability to cope with the situation and the mental capacity to cope and make decisions.

<sup>18</sup> Kinnon, Dianne. 2002. Abuse and Neglect of Older Adults: Community Awareness and Response. Public Health Agency of Canada, Family Violence Prevention Unit (P.59)

- d) **Medical intervention** to assess, treat and follow up on physical injuries and psychological trauma.
- e) **Resource linkage** to provide home-based services, protective services if available, and alternative housing if desired.
- f) **Development of a plan of care** with the older adult that addresses the abuse or neglect, improves the quality of life without any increased risk, and involves the health care team.

A community should try to ensure that culturally appropriate services and models of service delivery are integrated in all community agencies. Each community has to adapt existing resources to reflect its unique cultural character. Service needs in a large multicultural community are different from those in a small village where people may be quite similar in background (pp. 59-60)."<sup>19</sup>

The Alberta Government's *Cultural Competency: A Self-Assessment Guide for Human Services Organizations* provides a guide to plan and implement culturally competent practices (see Appendix C).

Anyone experiencing abuse is unlikely to disclose their abuse in front of their abuser. Protocols are needed to ensure that service providers provide the opportunity for private interviews.

### **Ongoing Public and Professional Awareness**

Keeping current, continuing education and skill development are integral to professional development. It is also important to sustain and update your public awareness campaign and training programs to ensure their effectiveness. Increase community, agency, and professional awareness of services, resources, supports, or programs available in or near the community. There are several training toolkits available on the internet (see Appendix D).

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<sup>19</sup> *Ibid.* Pages 59-60

# Building Awareness & Education

## Identify Allies

Begin by initiating discussion among agencies and service providers within the community and among community members. Find individuals or groups in your community who have an interest in the issue and have them help identify and approach others who may want to become involved. Develop criteria and procedures for involvement. You may be able to draw upon existing networks, either formal or informal, like social workers, police officers, seniors' organizations, women's shelters or health professionals who are dealing with the abuse of older adults. You can then work together to address the issue, as well as drawing in other concerned individuals.

## Define and Identify the Abuse of Older Adults in Your Community

Profile your community by contacting involved members of the public and professionals already working on the abuse of older adults. Define the problem. Get the facts. Verify the need. Set priorities. Encourage everyone in the community to become involved.

### *Profile your community*

- *Invite community members to participate*
- *Define the problem*
- *Agree upon common values and goals*
- *Identify resources and barriers in developing a response to abuse of older adults*
- *Strategize on how to optimally use current resources*
- *Identify limitations and gaps in resources*
- *Evaluate your progress*

## Agency Interaction

Hold a general discussion with agencies in order to create awareness and network. Continue to define and identify what the abuse of older adults is and how you can work together to prevent and address it. Sharing common goals and values is critical to ongoing collaboration. Invite participation from Aboriginal and immigrant serving agencies. Discuss who is going to take the lead. Define guiding principles. Set goals.

## Community Interaction

Hold a community meeting to increase awareness of the abuse of older adults. Broadcast the message that the abuse of older adults exists in the community, and it is all right to talk about it. Defining and identifying the abuse of older adults; raising public awareness and education; and identifying how you might work together to prevent it are among the first steps to building an effective community response. Get seniors involved. Establish goals.

## Public Awareness and Education

Educating and motivating the public are key factors in enacting social change. Arrange a public education event among agencies. Bring in another community that has already addressed this issue to learn from their experiences. See Appendix C for potential contacts and Appendix D for possible resources (e.g., the step-by-step guide, Abuse and Neglect of Older Adults, Awareness Information for People in the Workplace).



# Planning: Objectives, Strategies, & Resources

## Identify and Involve Stakeholders

Once you have discussed and defined the magnitude of the problem in your community, you will want to continue to involve stakeholders in your planning activities and, indeed, through all stages of this model. Stakeholder involvement is fundamental to an effective approach and may vary depending upon the issue at hand. As you begin to plan, establish a working committee. Motivated stakeholders will also come forward on their own accord. Find out who is involved in existing initiatives; then determine who you want to work with. As you identify stakeholders you will also learn what is already being done in the community and what needs still exist. This helps inform the planning process. While not all stakeholders will have the same level of passion and interest at each stage, it is important to ensure community stakeholders are regularly invited to participate. Refer to the listing on Page 14 as a possible checklist and add to it as you identify other stakeholders on an ongoing basis.

For examples of comprehensive participation models please refer to the following:

- Alberta Culture and Community Spirit: "Working in Partnership – Recipes for Success" at <http://culture.alberta.ca/voluntarysector/partnershipkit/default.aspx>
- Service Canada: The Community Development Handbook, [www.servicecanada.gc.ca/eng/epb/sid/cia/comm\\_deve/handbook.shtml](http://www.servicecanada.gc.ca/eng/epb/sid/cia/comm_deve/handbook.shtml)

## Form a Multidisciplinary Team

Your group will need to establish objectives, decide who will lead the process, and form a multidisciplinary team. The specific needs of diverse and unique communities should be reflected on the team and culturally appropriate services and service delivery methods developed accordingly. Goals for a multidisciplinary team include:

1. "Provide a forum for detailed case presentations and the formulation of plans for intervention;
2. Ensure that intervention protocols are followed;
3. Assign responsibility for specific tasks to certain team members, and provide support and advice to them;
4. Refer cases to other appropriate intervention teams if necessary; and
5. Evaluate the effectiveness of particular interventions and jointly decide on different courses of action."<sup>20</sup>

Clearly articulate your group's goals and objectives. This is a critical step as you will want to be able to effectively evaluate the group's progress. Goals are general statements of what a project is trying to do and objectives are specific, measurable statements of the desired change(s) that your community wants to accomplish within a certain timeframe (see Evaluation Section, Appendix C).

<sup>20</sup> Ibid. Page 58.

## Identify a Committee Leader

Appoint someone to take the lead. This is a very important step and, therefore, must be done carefully. Experience, commitment, leadership abilities, and time are all important considerations. Some communities may be able to have an agency social worker take the lead, or, a community development worker may be able to assist. Approaches will vary from community to community.

The Community Development area with Alberta Culture and Community Spirit provides customized services to enhance the capacity of community leaders, organizations, communities and networks. For more information go to <http://culture.alberta.ca/communitydevelopment>.

Family and Community Support Services (FCSS) may be able to help either with leadership resources or through funding services that “enhance the quality of life of the retired and semi-retired” (see [www.child.alberta.ca/home/818.cfm](http://www.child.alberta.ca/home/818.cfm) for some examples of programs and services offered through FCSS).

A local agency may have the resources to take the lead, or you may need to identify potential funding resources (government, service groups, foundations, etc.) and request funding to hire someone to lead your community based initiative.

## Train Service Providers

Ongoing, current training for frontline workers and anyone involved with older adults is key to an effective response. When service providers become educated and sensitized to the abuse and neglect of older adults, identification of abuse will increase and cases will be handled more effectively. In addition to training social workers, physicians, seniors’ recreation staff,

and caregivers, Kinnon (2002, p. 52) suggests training home care workers, community care workers, Meals on Wheels volunteers, housing managers, postal carriers, grocery store staff, home maintenance workers, and others who could play a role in responding to the abuse of older adults. These individuals can identify the abuse of older adults and alert their own agencies or other community organizations. According to Kinnon, objectives of the training might include:

- "Becoming sensitive to the aging process;
- Understanding the social context of abuse and neglect in order to identify high-risk factors and avoid blaming the victim;
- Ensuring a culturally appropriate response by being sensitive to ethnocultural minority, racial and religious communities, and working in collaboration with them;
- Learning about appropriate interventions and available community resources; and
- Developing the ability to assess family dynamics and stay involved with abused or neglected adults.

## Training activities can include:

- Identifying groups requiring training and devising strategies to reach these groups;
- Making trainers available to community groups;
- Preparing older adults to work as advocates within their local communities;
- Developing manuals for service providers; and
- Changing curricula in professional schools to include courses in gerontology, family violence, and abuse and neglect of older adults.

### Tips for successful training:

- Begin by assessing what trainees know and want to learn about abuse and neglect of older adults.
- Consider the level of education and the learning experiences of participants.
- Use adult learning principles to design training sessions (e.g., involve the adult learner in setting goals and viewing the trainer as a resource).
- Be flexible and prepared to interact with participants who present their own experiences for discussion.
- Make sure to include discussion of actual abuse situations in order to make the material "real."
- Try to create a balance between providing information and exploring attitudes.
- Draw on both professional resources and knowledgeable community members."<sup>21</sup>

There are several training toolkits available on the internet, as indicated in Appendix D. As well, many professionals have the option for continuing education credits. Encourage them to include modules on the abuse of older adults.

### Build or Strengthen Networks Among Agencies and Service Providers

Strengthen your network by training and meeting with other related agencies. When agencies are working together and building on each other's strengths, it supports the achievement of common goals and avoids duplicating services. Cross-sectoral training such as training social workers and police officers together about responses to the abuse of older adults can be very effective. Create scenarios: take a case involving the abuse of older adults and brainstorm about how to solve it. Attempt to establish an intervention team and/or consultation team, using the Edmonton models as potential guides (see Appendix C).

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<sup>21</sup> Ibid. Page 51 – 53.

## Action



### Develop Preventative Strategies

Preventative strategies involve **empowering older adults**. This includes educating seniors about abuse and what to do if it occurs. When you empower older adults you assist them in taking control of their lives and making decisions that reflect their own personal interests. Education, support and abuse-prevention strategies contribute to the autonomy of older adults and enhance their quality of life. Encourage their personal development through discussions about communicating, boundary-setting, and their human rights. Knowing their rights can help immigrant, Aboriginal, and indeed all seniors.<sup>22</sup> Empowering older adults “is more about *how* help is offered rather than *what* is done. Empowerment can be fostered by:

- a) Providing support and information in a respectful, non-controlling way.
- b) Encouraging feelings of power and ability to affect one’s situation.

- c) Teaching skills related to self-protection and assertiveness.
- d) Sharing knowledge about rights and problem-solving strategies.

Service providers play an essential role in abuse prevention. Professionals can help by paying attention to dysfunctional family relationships and assisting families to improve communication patterns, maintain affection and develop problem-solving skills. One of the most effective ways to prevent abuse and neglect is to decrease social isolation through a variety of home-based services such as friendly visitors, Meals on Wheels, home support, professional services and homemakers. Another strategy is to increase the number of activities older adults can attend outside the home, such as adult day centres or special events at public libraries and community centres. Access to transportation services (public transit passes, special transport services and volunteer drivers) is critical.”<sup>23</sup>

<sup>22</sup> Elizabeth Podnieks (1998) developed a model for education on the prevention of elder abuse.

<sup>23</sup> Kinnon, Dianne, 2002. Abuse and Neglect of Older Adults: Community Awareness and Response. Public Health Agency of Canada, Family Violence Prevention Unit (Page 59-60).



## Develop Intervention Strategies

Basic intervention may include training, education, crisis lines, an information referral number, protocols, screening tools, case management, providing shelters or a safe place, developing a multidisciplinary team, public awareness programs, and group work with seniors. Other intervention strategies include risk assessment, safety planning and decreasing seniors' isolation. If intervention strategies are ineffective, then engage in harm reduction.

The following provides greater detail with respect to various intervention strategies:

### a) Crisis Line

Collaborate with local services to ensure that seniors have access to a telephone line when they are in need of immediate help, or in a crisis situation. This might be accomplished with police services, victim services, a local women's shelter and so on. Some communities have established specific crisis lines for seniors, where a skilled professional can provide support and counsel to someone who is experiencing, or at risk for abuse while other communities have lines that serve the population more generally. These crisis lines help individuals develop a safety plan and may also offer a follow up call. It is critical that those responding to these calls have specialized training both in working with seniors and on the abuse of older adults.

### b) Safe Shelter and Housing

Victims of abuse must have a safe place to go. A shelter specifically for abused seniors is, ideally, the best option, but not possible for every community. Options include working with local women's shelters, long-term care facilities, seniors' residences,

or hotels to establish safe housing options. For example, in Cochrane two local hotels provide rooms for seniors fleeing an abusive situation. The Kerby Centre then provides transportation to Calgary. Be aware that there are safety issues for anyone providing shelter that must be continually assessed. Another option for abused seniors is to access a nearby women's shelter.<sup>24</sup> Abused men typically cannot stay at a women's shelters, but they can phone the shelter for help.

### c) Community Co-ordinated Response and Resources

Building strong alliances among agencies is necessary to build an effective, community coordinated response to the abuse of older adults. Some of the services you want to connect with when developing a coordinated community response include:

- legal services and systems
- social service agencies
- seniors' organizations, service providers, and groups
- health services (i.e., physicians, community nurses, home care)
- counselling services
- police
- Aboriginal organizations
- immigrant serving organizations
- mental health services
- seniors' housing services
- government services
- women's shelters and domestic violence service providers
- victim services

Communities, agencies, and organizations can work together to develop an abuse of older adults community response protocol to help ensure that adequate intervention, referral, follow-up, and after care is

<sup>24</sup> Research indicates that abused older women are a largely invisible group who fall into the gap between two forms of family violence: domestic violence and elder abuse. These older women remain invisible because society assumes that domestic violence is not a significant problem for older couples, and that domestic violence is primarily a problem of women in their teens to 30s. Women's shelters remain the primary location in which women receive help when fleeing domestic violence and the shelter network holds great potential for adapting to meet the needs of abused older women, given the appropriate resources (Straka and Montminy, 2006).



provided. It is also important to establish criteria for assessing resources that work effectively in the community. For instance, agencies might want to work together to develop standardized risk assessments, processes, and intake forms, etc.

#### d) Develop and Use Protocols

Protocols provide a framework of service accountability between agencies by:

- Setting out guidelines to promote service quality and local innovations to address specific local needs.
- Assisting workers to identify and refer cases of suspected abuse.
- Outlining procedures to follow when they suspect abuse.
- Promoting cooperation among partnering agencies.
- Educating all partners about their respective roles and responsibilities.
- Identifying areas of collaboration.

Community protocols in health centres, hospitals, police services, home care, mental health facilities, seniors' centres, government agencies, women's shelters and in the public at large increase the effectiveness of the response to the abuse of older adults. Protocol development begins with a community needs assessment to demonstrate the complexity of the issue. This is usually performed by representatives from interested agencies who determine what is required in a specific protocol. For examples, see Appendix D.

Kinnon (2002) outlines possible questions to address when developing a protocol:

- a) "What **principles** will guide interventions? Shared values and principles are critical to the success of any collaborative effort.
- b) What are the **policies** of the organization or inter-agency group related to client

services, inter-agency collaboration, reporting and documenting situations, family violence, abuse and neglect, and how will these affect action on abuse and neglect of older adults?

- c) What **definitions** will the protocol include?
- d) What **reporting structure** will be used (inside and outside the agency, including any mandatory requirements for reporting)?
- e) What **roles** will different staff assume, and how will they work with each other?
- f) How will **emergency and/or criminal situations** be handled?
- g) Who has the **authority to investigate** alleged abuse and what steps will be taken to ensure a thorough but sensitive assessment/investigation?
- h) What **intake/documentation** procedures are needed?
- i) What **interventions** will be made in different situations?
- j) What **referrals** will be made to other organizations and services?
- k) How will situations be **followed up**?
- l) What **case review** process will be used?
- m) What **appeal process** will be used if needed?"<sup>25</sup> An appeal process will help identify how concerns identified by a senior, family member(s) or another agency are addressed.

#### e) Transportation

Seniors fleeing abusive situations must have access to transportation. This may be especially difficult in rural and remote communities. The following list gives you

<sup>25</sup> Ibid. Page 55, 56.

some strategies to consider when you address a lack of transportation:

- Identify who in your network of community services provides transportation and for what purposes. They may be able to assist with some of the transportation gaps identified in your community.
- Use local Community Coordinating Committees to identify ways to work together and make services more accessible.
- Strategize with service clubs and community organizations to find transportation options, such as car pools and volunteer driver programs.
- Coordinate services and improve communications between service providers to minimize transportation challenges (e.g., reduce the trips rural victims need to take by scheduling appointments on the same day).
- Create partnerships to establish access points for video conferencing in different communities, instead of having victims travel for meetings and appointments.
- Instead of seniors having to travel to search out information, provide information about the abuse of older adults and relevant services to those service providers who go into rural homes (for example, public health nurses and home care workers).
- Share office space with other service providers in the outlying communities. In this way, you may be able to lessen travel distances for seniors and their families to access services.<sup>26</sup>

#### f) Police Response

Officers who have received specialized training on the abuse of older adults can play a pivotal role in responding to victims and dealing with the perpetrator. An effective response to any call regarding abuse of older adults involves dispatching a specially trained police officer – and if possible, a social worker.<sup>27</sup> When distance and staffing levels are a challenge, specialized training for police and Victim Services as well as informational resources on community supports is critical. The Screening and Assessment tools outlined below can also provide guidance. See in particular, the Elder Abuse Assessment and Intervention Reference Guide ([www.nicenet.ca/files/U\\_of\\_T\\_Nice\\_Police\\_Tool\\_W.PDF](http://www.nicenet.ca/files/U_of_T_Nice_Police_Tool_W.PDF)).

#### g) Medical Response

Educate medical staff in detecting the abuse of older adults. See Appendix B for resources. Encourage the use of screening tools as outlined in the following section.

#### h) Screening and Assessment Tools

The following evidence-based tools for social workers, health care providers, caregivers and the police can assist in the detection, intervention and prevention of elder abuse.

- Elder Abuse Suspicion Index (EASI).<sup>28</sup>  
The EASI was developed to raise a medical doctor's suspicion about the abuse of older adults to a level where a referral for further evaluation is proposed. It was developed out of concern that family physicians are ideally positioned within the community to detect and report elder abuse, yet ranked tenth among professionals who do so. (See [www.mcgill.ca/files/familymed/EASI\\_Web.pdf](http://www.mcgill.ca/files/familymed/EASI_Web.pdf)).

<sup>26</sup> *Serving Victims of Violence in Rural Communities: Challenges and Best Practices* Deborah Kasdorff Barbara Erb, 2010

<sup>27</sup> Not all cases of elder abuse are illegal, of course, however, officers respond when called and decide whether or not to intervene/apprehend, etc. at the scene.

<sup>28</sup> Yaffe, Lithwicz and Wolfson, 2004, cited in E. Podnieks, 2008: 137

- Brief Abuse Screen for the Elderly (BASE).<sup>29</sup> The BASE screens through a consensus of intervener opinions; and consists of a series of 5 questions to assist practitioners in assessing the likelihood of abuse; (See [www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/brief.pdf](http://www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/brief.pdf)).
- Caregiver Abuse Screen (CASE).<sup>30</sup> The CASE screens through the caregivers' responses to a set of questions; and was designed for community use to screen for abuse and neglect by primary or other unpaid caregivers. (See [www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/caregiver.pdf](http://www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/caregiver.pdf)).
- Indicators of Abuse (IOA).<sup>31</sup> The IOA checklist alerts interveners to important risk factors of abusers and victims, as well as screening for abuse. (See [www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/indicators.pdf](http://www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/indicators.pdf)).
- Abuse Intervention Description (AID).<sup>32</sup> The AID form establishes a written intervention plan that clearly states and prioritizes problem, and is useful in documenting and evaluating abuse intervention strategies, while helping to track and evaluate. (See [www.bccrns.ca/resources/cacc/englishCD/membersonly/abuseofseniors/trainingmanuals/interventionmodels.html](http://www.bccrns.ca/resources/cacc/englishCD/membersonly/abuseofseniors/trainingmanuals/interventionmodels.html)).
- Elder Assessment Instrument (EAI).<sup>33</sup> The EAI has been used since the early 1980s and is a 41-item

Likert scale assessment appropriate in all clinical settings for the screening of elder abuse. (See [www.medscape.com/viewarticle/493951](http://www.medscape.com/viewarticle/493951)).

See also the document, *Discussing Screening for Elder Abuse at Primary Health Care Level* by Silvia Perel-Levin ([www.who.int/ageing/publications/Discussing\\_Elder\\_Abuseweb.pdf](http://www.who.int/ageing/publications/Discussing_Elder_Abuseweb.pdf)) and the *Elder Abuse Assessment and Intervention Reference Guide* ([www.nicenet.ca/files/U\\_of\\_T\\_Nice\\_Police\\_Tool\\_W.PDF](http://www.nicenet.ca/files/U_of_T_Nice_Police_Tool_W.PDF)).

#### i) Safety Planning

If risk and abuse are identified, steps can be taken to enhance safety. The safety plan outlines what can be done to increase the victim's safety from the different types of abuse they are experiencing. While those experiencing abuse will often have help from service providers to develop and implement a safety plan, that plan belongs to the senior experiencing abuse. It might include such things as keeping copies of key documents at someone else's house. Safety support factors identify the supports needed to implement the plan. For an example of a safety plan, see [www.albertaelderabuse.ca/page.cfm?pgID=28](http://www.albertaelderabuse.ca/page.cfm?pgID=28). Each safety plan needs to be tailored to the person's particular situation.

#### j) Senior-Specific Services

Implement and maintain services specifically to address the unique needs of seniors. This can be done through stand alone services, adapting existing services and by training staff specifically on seniors' needs. If your community does not have supports specific to the abuse of older adults, assess what you can do with what is available. Consider whether you have the ability to apply for grant money, additional staffing, funds to improve physical access,

etc. As noted in earlier sections, there are a number of tools and resources available to assist businesses and organizations to better meet the needs of seniors. Work closely with your local seniors organizations to assess current services.

- k) **Abuse of Older Adults Intervention Team**  
Implementing and maintaining an intervention team is an effective response to cases involving the abuse of older adults. The Edmonton Elder Abuse Intervention Team, for example, is a partnership between the City of Edmonton, Edmonton Police Service, Catholic Social Services, and the Victorian Order of Nurses. This team provides intervention, support, education, and referral services for seniors in Edmonton who are experiencing abuse (see Appendix C).

- l) **Elder Abuse Consultation Team**  
An Elder Abuse Consultation Team is a community initiative comprised of professionals representing community and government agencies. Regular team meetings provide a forum for those who work directly or indirectly with issues regarding elder abuse enabling them to consult with each other on difficult, multi-faceted cases of abuse, and identify options and resolutions. Team members network, share experiences, analyze cases, problem solve, expedite the referral process, identify gaps in services, and develop strategies for making the abuse of older adults a public issue rather than a private family matter (See Appendix C).

- m) **Advocacy**  
Advocating on behalf of abused seniors involves providing information and direction to appropriate services, follow-up, and support in court. Advocacy also involves working toward identifying and

addressing gaps in services and calling for more effective service coordination and community response.

- n) **Peer Advocacy**

Individuals who have been in abusive relationships and who have gone through a healing process may want to advocate for other abused seniors. This may take place in a variety of ways, one of which is outreach groups. One example is the Kerby Centre's program, Money Matters, where a woman travels around Alberta to educate other seniors regarding finances and financial abuse. The feedback from this is excellent. She is highly valued because she is a senior herself and is therefore seen as a peer. It is important that only seniors with proper support and training to reduce or prevent re-victimization should engage in peer advocacy.

- o) **Initiate or Strengthen Informal Social Networks**

Support networks can be recognized and strengthened by family, friends, neighbours, and anyone who comes into regular contact with abused seniors. These individuals may have the opportunity to offer assistance, support, information, and referral. Support networks can be strengthened both informally in the community and in organized peer-support groups. Individuals in the community need to know where they can call to report the abuse and what resources are available. SeniorConnect in Calgary for instance works with the police, fire department, meter readers, letter carriers, taxi drivers to recognize the signs and symptoms that might indicate a senior is at risk (see Appendix C).



# Evaluation is Vital



## What is Evaluation?

Evaluation is a systematic and ongoing process that objectively assesses the impact, efficiency, and sustainability of your initiative, strategy or program in meeting established goals and objectives. More specifically, evaluation can help you answer vital questions such as:

- What is the intent of the program? What are the program's goals and objectives?
- Are the outcomes, goals and objectives being met?
- Are the goals and objectives being met in an efficient and effective manner?
- Are the needs of clients being met and are there any gaps between these needs and the services or supports being provided?

## Why Evaluate?

Evaluation benefits agencies, service providers, decision-makers, and most importantly, clients. It helps:

- ensure that your program provides the best possible services to the clients; determines when a program is on track or where changes are required; and tests emerging and promising practices;
- identify the most valuable and efficient use of resources and provides the necessary data to effectively allocate or re-allocate resources where needed;
- your organization be accountable to funders and the community by showing a well thought out program that is committed to ongoing improvement and demonstrates program benefits; and,



- advocate on behalf of the clients you serve with current and potential funders as well as the broader community by explaining and clarifying the situation and needs of the clients in your program.

### **Milestones**

Evaluate the progress that you have made. Document your events and note how many people participated and what was accomplished to address the abuse of older adults in your community. Surveys, questionnaires, interviews, focus groups, observations and file reviews can all help you to measure the progress you have made in meeting your goals and objectives.

### **Celebrate!**

All successes should be celebrated, from major to minor.

### **Evolve**

Build on your successes! Look at new situations, if necessary.<sup>34</sup>

For a selected list of community toolkits, screening tools, assessment tools, protocols, informative websites, and research, (see Appendix D, Selected Resources). Begin with these approaches and hold an exercise to put these into the proper order for your community. Take a scenario, a test case, early on in the process of community collaboration and then look at it later on in the process to see where you are at now, and where you want to go in the future. You can also refer to the Community Checklist (Appendix B) to identify future projects.

Refer to Appendix E beginning on page 68 for a detailed description of the evaluation process including how, who and when to conduct an evaluation of your program.

## **Encourage Ongoing Participation**

Keep people involved through regular contact. Continually invite people to participate even though they may not have been part of your original initiative. Modify plans as necessary based on community feedback and evaluation results.

<sup>34</sup> Adapted in part from Kinnon, 2002.



# Appendix A:

## Definitions & Context of Abuse





## Appendix A: Definitions & Context of Abuse



### Defining Abuse of Older Adults

Abuse of older adults, commonly known as 'elder abuse', is defined as any action or inaction by self or others that jeopardizes the health or well-being of an older person. An act of harm or the neglect resulting from a failure to act is especially detrimental when inflicted by those in a position of trust, power or responsibility.<sup>35</sup> A specific definition of the abuse of older adults is sometimes difficult as a result of varying situational and cultural contexts; however, this is the definition used throughout this guide.<sup>36</sup>

*Elder Abuse is a violation of Human Rights and a significant cause of injuries, illness, lost productivity, isolation and despair.<sup>37</sup>*

### Types of Abuse

Abuse of older adults can take several forms, often with more than one type of abuse

occurring at the same time. National and provincial statistics indicate that the two most identified and reported types of abuse are financial and psychological.<sup>38</sup>

*Note that while abuse is always wrong and can have serious consequences, not all forms of abuse are criminal.*

The Alberta Elder Abuse Network has identified the various forms of abuse as follows:

**Financial/Material Abuse:** This is the misuse of an older person's funds or property through fraud, trickery, theft or force.

It can include:

- frauds
- scams
- the misuse of money or property
- convincing an older person to buy a product or give away money
- stealing money or possessions
- misusing bank or credit cards
- misusing joint banking accounts

<sup>35</sup> From the Alberta Elder Abuse Awareness Network, [www.albertaelderabuse.ca](http://www.albertaelderabuse.ca)

<sup>36</sup> Cultural contexts and other diverse situational factors must be recognized and understood in the wider context of abuse of older adults (WHO, 2002: 3).

<sup>37</sup> World Health Organization, Active Ageing Policy Framework, 2002, Page 29 [http://whqlibdoc.who.int/hq/2002/WHO\\_NMH\\_NPH\\_02.8.pdf](http://whqlibdoc.who.int/hq/2002/WHO_NMH_NPH_02.8.pdf)

<sup>38</sup> Ibid



- forging a signature on pension cheques or legal documents
- misusing a power of attorney

Also be watchful for trickery, interference with a senior's financial decisions, persistent requests for money, pressuring or forcing a senior to sign documents, abuse of Guardianship responsibilities, and all other dishonest actions involving taking an older person's money or property;

**Psychological/Emotional Abuse:** This may take the form of verbal aggression, humiliation, isolation, intimidation, threats and inappropriate control of activities. In all cases, it diminishes the identity and self-worth of older people. It can also provoke intense fear, anxiety or debilitating stress.

It can include:

- removal of decision-making power while the person is competent
- withholding affection for manipulative purposes
- refusing access to grandchildren
- denying privacy in institutions
- forcing older people to do degrading things
- controlling activities
- treating them like children
- attacking their self-esteem
- intentionally frightening them

Any actions or words that cause emotional pain, fear, decreased self-esteem or dignity, such as verbal threats, yelling, insults, humiliation, degradation, blackmail, confining the older person to a chair, bed, room, or residence, disrespect for privacy, belongings, or pets are some further examples of psychological and emotional abuse;

**Physical Abuse:** Physical abuse is the use of physical force causing discomfort which may or may not result in bodily injury, physical pain, or impairment. Older persons who are

subjected to rough handling or mistreatment are the victims of physical abuse.

It can include:

- slapping
- shaking
- pushing
- kicking
- punching
- striking with an object or weapon
- deliberate exposure to severe weather
- unnecessary physical restraint
- forced confinement
- failure to provide adequate health care

The use of physical force, which also includes hitting, grabbing, strangulation<sup>39</sup>, coercion, and personal attacks, may cause broken bones, fractures, dislocations, bruising, abrasions, burns, or even death;

**Sexual Abuse:** All unwanted forms of sexual activity, behaviour, assault or harassment to older persons is elder sexual abuse.

It can include:

- verbal or suggestive behavior
- fondling
- sexual intercourse
- lack of personal privacy
- being forced to commit degrading acts
- unnecessary help with dressing/hygiene

It may also include exploitive use of pornography, and any indecent exposure or acts by the abuser;

**Medical Abuse:** Withholding or withdrawing food, water, medicine, or prescriptions, over-administering prescribed medication causing bodily harm, sedation, or other negative effects, improper refilling of prescriptions, theft of medications for the purpose of resale, refusing to act upon possible side effects of medications, failure to seek medical assistance;

<sup>39</sup> The VON has developed an excellent Strangulation Protocol. See Appendix B, Selected Resources.

**Legal Abuse:** Any violation of human rights and/or freedoms, being forced or tricked into changing a will, denying or restricting access to public services such as nursing, therapeutic, and home care;

**Spiritual Abuse:** Any act of denying or ridiculing religious or spiritual beliefs or participation in religious services;

**Cultural Abuse:** Any act of denying the ability or opportunity to participate in cultural practices;

**Systemic Abuse:** Abuse suffered by the victim, often causing feelings of re-victimization, stemming from within the health care system, legal system, and so on. Examples include over-prescribing or unnecessary prescribing of medication by a medical doctor, and discrimination of Aboriginal peoples by the criminal justice system;

**Neglect:** This is the intentional or unintentional failure to provide for the needs of someone.

It can include:

- failure to provide a safe, warm and comfortable place to live
- denial of social contacts
- failure to provide personal hygiene
- failure to provide proper water, food or clean clothing
- failure to provide aids for daily living, (hearing aids, walkers, canes, wheelchairs, etc.)
- failure to prevent physical harm
- abandonment or desertion

Failure to attend to personal needs such as exercise, attention, supervision if necessary, and health care are a few other examples. Neglect can be active (intentional) or passive (unintentional) and has the effect of failing to provide older persons with basic necessities or care.

- **Active Neglect:** Intentional failure of the caregiver to fulfill caregiving duties;
- **Passive Neglect:** Unintentional failure of a caregiver to fulfill caregiving responsibilities due to lack of knowledge, skill, illness, infirmity, or lack of awareness of community supports and resources;
- **Self-Neglect:** It involves cases whereby, older adults, by choice or ignorance, live in ways that disregard their health or safety needs and can in some cases pose a hazard to others. An individual's inability to provide for his or her own needs;

**Self-Abuse:** An individual causing harm to his or her self, such as through the over-use of alcohol or other drugs/prescription medications;

**Abandonment:** Desertion by an individual who held physical and/or legal custody, and/or held a moral responsibility to provide care for an elderly person; and

**Murder and Manslaughter.**<sup>40</sup>

<sup>40</sup> The above definitions were largely drawn from the Alberta Elder Abuse Network and can be found at [www.albertaelderabuse.ca/page.cfm?pgID=6](http://www.albertaelderabuse.ca/page.cfm?pgID=6); with their source identified as Health Canada, Abuse and Neglect of Older Adults: Resource and Training Kit for Service Providers, 1994.

## Barriers to Disclosing Abuse

The abuse of older adults is often hidden, as seniors are reluctant to speak out. They may be protective of the abusive individual, fearful of not being believed, afraid of revenge, fearful of being left alone or put in an institution, or believe that they cannot do anything about their situation. Older adults often experience negative psychological effects such as a deep sense of loss of power and rejection, loss of dignity and self-esteem, or depression.<sup>41</sup>

The Alberta Elder Abuse Network identifies the following barriers for seniors to report abuse:

1. Fear of being punished, of institutionalization, of rejection or abandonment by family members, of losing their caregiver and of losing access to family members, including grandchildren.
2. Love for the abuser.
3. Lack of understanding or impairment.
4. Shame and/or guilt. Victims of abuse may blame themselves for the violence and feel ashamed of what has happened to them.
5. Unaware of resources and options.
6. Acceptance of abuse or neglect as normal.<sup>42</sup>

## Theories Regarding the Abuse of Older Adults

(Alberta Elder Abuse Awareness Network).

Research in the area of abuse of older adults is relatively new, but a few theories have emerged that address the cause. These include:

- **Learning Theory:** Learning theory, or transgenerational violence theory, is based on the belief that violence is a learned behaviour. Based on this theory, a child

observes violence and learns that violence is an acceptable reaction to stress, and internalizes this as an acceptable behaviour. The abused child becomes the adult abuser of the parent.

- **Physical/Mental Dependence:** This theory is based on the belief that older persons who have a severe mental or physical impairment are most vulnerable to being abused. In relationships where one individual is dependent on another for care, there is a potential for misuse of power by the caregiver.
- **Pathologic Abuser:** This theory suggests that abusers have personality flaws that cause the abuse. Caregivers with substance abuse issues, or mental illness or disabilities, are more likely to be abusive.
- **Stressed Caregiver:** This theory proposes that the stress associated with caring for older persons can result in violence.
- **Societal Attitudes:** Negative societal attitudes toward older persons may make it easier for abuse to occur without remorse on the part of the caregiver. Societal attitudes can result in devaluation and lack of respect for seniors, as they are often stereotyped as frail, incompetent and powerless.

## Risk Factors

There are a number of risk factors that contribute to the abuse of older adults, including:

- **A history of spousal abuse:** In some situations there has been long-term abuse present in the relationship, and it continues as the couple ages.
- **Family dynamics:** The family's method of dealing with issues perhaps always

<sup>41</sup> *Let's Talk About It: Tool Kit to Hosting an Awareness Café, 2007*

<sup>42</sup> *The Alberta Elder Abuse Network, [www.albertaelderabuse.ca/page.cfm?pgID=10](http://www.albertaelderabuse.ca/page.cfm?pgID=10)*

included forms of abusive behaviour.

The family values and ways of managing stress and differences may result in adult children acting abusively towards their aging parents.

- **Social isolation:** If an older person or couple tend to be isolated and have few supports, the risk of abuse is greater.
- **Caregiver stress:** Troubled caregivers may not have the resources and capability to properly care for an older person.
- **Ageism and lack of knowledge about the aging process:** A caregiver may lack knowledge about the aging process and be intolerant of the behaviours and attitudes of an aging person in their care.
- **Societal acceptance of violence.**<sup>43</sup>

### **Some Points to Consider**

*Older adults may have been in long-term partner relationships and struggle with issues of separation and being on their own.*

*When interviewing an older person, be aware that s/he may have challenges with hearing or vision impairment that need to be accommodated. Ensure that you check for any immediate physical needs such as a need to obtain medications or eye glasses.*

*Be aware that an older person may require more of your time when completing an intake/and or during a counselling session.*<sup>44</sup>

<sup>43</sup> Health Canada, Abuse and Neglect of Older Adults: Resource and Training Kit for Service Providers, 1994.

<sup>44</sup> Plesuk, Susan, LeBlanc, Sandra, ACWS Shelter Practice Orientation Manual, Alberta Council of Women's Shelters, 2010, Module 12, page 4.  
<http://www.acws.ca/documents/Module12Elderadults.pdf>





# Appendix B:

## What Needs to be in Place?

### A Community Checklist





## Appendix B: What Needs To Be In Place?



The project team, consulting with various stakeholders throughout the province, set out to determine the services, supports, resources, and responses needed **within or near** each Alberta community to address the abuse of older adults. This does not imply that each community must offer all services. Through collaboration amongst agencies and communities, programs and services can either be adapted or specifically designed to meet the needs of seniors.

As you move forward to address the abuse of older adults in your community, use the following checklist of services, supports, resources, and responses to assist in identifying community needs and gaps. Individual communities are in the best position to identify their own priorities. Some organizations, particularly those in rural areas, can benefit from connecting through regional networks in order to offer a wider array of programs and services. While different communities have different requirements and responses, the following checklist provides the

common elements that comprise a response to the abuse of older adults:

- ✓ **Public Awareness** It is important to convey the message that the abuse of seniors occurs more than is expected and that it is okay to talk about it. Informing seniors about what constitutes abuse and what they can do about it is critical. Seniors need clear, concise, realistic and practical information on what to do and who to call. A greater understanding of the dynamics of intergenerational family relationships is needed. Many different services and systems come into contact with older adults; they need to be aware of the issue so they can help to make a difference. This includes those providing housing, transportation, health care, and financial services. Given that there is a significant need for public awareness, your community will be able to identify an extensive list and will therefore need to prioritize areas for attention. Victims, service providers, and the community at large all need to be aware

of available resources and supports in order to respond effectively to the abuse of older adults.

✓ **Skilled Service Providers** As people become more aware of the issue, they will want to know what they can do. Through public education, community members must become more educated on the abuse of older adults and appropriate prevention and intervention strategies. Since a large percentage of abused seniors first go to medical staff for information and help,<sup>45</sup> it is important to train physicians, nurses and other health care providers to identify possible abuse and ask the right questions. In addition to medical staff, educating police, government authorities, social workers, mental health workers, addiction counsellors, and financial personnel such as bank employees is necessary, as well as educating those involved in seniors' centers and community agencies. Building positive relationships between seniors and service providers, health care professionals, clergy, and the community in general will help decrease negative attitudes towards seniors, rectify misconceptions, thereby increasing disclosures and appropriate responses.

✓ **Community Coordinated Response** Building strong connections among agencies is necessary for an effective community coordinated response to the abuse of older adults. Communities can develop a community response protocol, working collaboratively with other agencies, organizations, and neighbouring communities to ensure there is adequate referral, follow-up, and after care.

✓ **Advocacy** Individuals and community groups can work together to advocate on behalf

of individual seniors at risk by connecting abused seniors and their families with existing resources and services. They may also wish to advocate on a broader scale by promoting more easily accessible resources and services when service delivery gaps are identified.

✓ **Resources** Establish criteria for assessing resources that are at work in the community. This can range from agencies working together on collaborative responses, to intake forms, risk assessments, safety planning, crisis lines and so on. Identify gaps and work toward securing adequate community resources to address them.

✓ **Services Designed Specifically For Seniors** Service providers and seniors across the province have identified senior-specific services for both women and men as an urgent need. This does not necessarily mean stand alone services, but rather that services are accessible to seniors and that service providers have a strong understanding of seniors' issues or needs.<sup>46</sup> As an example, older abused women do not access women's shelters in large numbers because they have different needs than younger women fleeing abuse. Detering factors for older women include high noise levels exacerbated by the challenges of communal living, accessibility and special needs. However, older abused women (and men) regularly arrive at the Edmonton's SAGE Seniors' Safe House and Kerby Centre in Calgary, shelters that are specifically for seniors.

Seniors report that they feel most comfortable reaching out to services that are designed specifically for them, and speaking with people from their own generation, peers and service providers.

<sup>45</sup> Human Resources and Social Development Canada, *Awareness and Perceptions of Canadians Toward Elder Abuse*, August 2008; (Page 5) website . [http://epe.lac-bac.gc.ca/100/200/301/pwgsc-tpsgc/por-ef/human\\_resources\\_social\\_development\\_canada/2008/001-08-e/report.pdf](http://epe.lac-bac.gc.ca/100/200/301/pwgsc-tpsgc/por-ef/human_resources_social_development_canada/2008/001-08-e/report.pdf)

<sup>46</sup> The Alberta Council on Aging's Senior Friendly™ Program provides tools to assist organizations to gear their services to seniors' needs.

These services must also be adequately staffed in order to remain effective. Beginning with the need to access safe spaces for seniors, the committee identified the following needed services:

- **Safe Spaces and Access to Safety**

When older adults are at risk of abuse, they need a safe place to go, such as the designated seniors' shelters offered by SAGE and Kerby. Increasing the number of safe spaces designed specifically for seniors is necessary. There are a variety of ways that a community may work together to meet this need.

In smaller communities, it may be possible to work with a local women's shelter to create and maintain specialized shelter and outreach programs. The majority of Alberta communities have facilities such as seniors' complexes or apartment buildings, lodges, care facilities, hospitals, hotels, and so on, where one or two rooms could be modified in order to become safe and secure for abused seniors to access. Appropriate community supports and outreach programs must also be implemented as an imperative part of follow-up to the safe housing process.

While the majority of abuse is suffered by women at the hands of both men and women, men are also victims of elder abuse. Consistently, 30% of the abuse victims who come to the SAGE Seniors' Safe House are men. This statistic is significant when addressing the abuse of older adults and requires special attention in the design of services.

- **Abuse of Older Adults Intervention Teams**

By working in partnership, police, social workers and other service providers can effectively prevent and respond to the abuse of older adults. Good communication and information sharing supported by protocols across disciplines and agencies are essential. Locating services together may assist in building information sharing practices for the benefit of the abused senior and their family. The Edmonton Elder Abuse Intervention Team (EEAIT) is based on a proven model that has been adapted in other communities in Canada, such as in Waterloo, Ontario. For more information on EEAIT (see Appendix C, Existing Programs and Initiatives Addressing the Abuse of Older Adults). Other communities across Alberta have started intervention teams by assigning a social worker to accompany the police when responding to a call concerning the abuse of older adults. Communities such as Hobbema are in the process of applying for the funding for a social worker to work in this capacity. More work could be done to establish elder abuse intervention teams across the province. See Form a Multidisciplinary Team (page 17) for a few pointers.

- **Crisis Lines**

In addition to 911 for emergencies, crisis lines provide a skilled person who can support and counsel an abused senior through a difficult situation; help them develop a safety plan, and offer a follow up call. There is a need for both crisis and non-emergency information lines, such as the Seniors Abuse Helpline in Edmonton and the Alberta Family Violence Information line. Communities may wish to augment an existing crisis



line by providing specialized training for staff or volunteers on responding to the abuse of older adults and possibly adding a dedicated number.

- **Sexual Assault Centres**

It must be recognized that sexual abuse occurs among seniors. Strengthening the capacity of sexual assault centres to respond to sexual assault involving seniors must be part of the response.

- **Police Response**

Officers trained in the area of seniors' abuse are able to respond effectively to assist the victim and deal with the perpetrator. A police officer and a social worker responding together to a call concerning the abuse of older adults is an effective minimum response. It must be noted that responding to a crisis/ high-risk situation is different from responding to someone who is seeking information. The Alberta Elder Abuse Network developed an information package and training video for police officers that is available on their website.

- **Health Care**

The World Health Organization recommends training primary care workers on what to watch for and how to play an active role in the prevention of abuse and neglect, given that a systematic review revealed that most professionals underestimate the prevalence of some abuse and neglect of seniors.<sup>47</sup> All health care providers can benefit from training opportunities that cover a broad range of abuse issues (such as financial, physical and emotional abuse)<sup>48</sup> and inform them of resources that are currently available in the broader community.

- **Transportation**

Abused seniors need transportation to access safety, services and supports. This can be especially challenging in rural and remote areas of the province and remains a key area to address.

- **Protocols**

Community protocols provide guidelines to assist in understanding and guiding collaborative response to the abuse of older adults. They can be particularly effective in areas such as hospitals, health centers, police authorities, home care, mental health facilities, addiction facilities, seniors' centers, government agencies, women's shelters, and the general public. Protocols are developed based on local needs, systems and resources. When roles are clearly identified and responses planned in advance of a crisis, you can have the best possible response. For examples, see Edmonton's Northeast Health Center protocol ([www.edmonton.ca/city\\_government/news/healthcareprofessionals-taugh.aspx](http://www.edmonton.ca/city_government/news/healthcareprofessionals-taugh.aspx) for contact information) and the healthy aging model in the Yukon Territories ([www.hss.gov.yk.ca/seniorservices\\_aging.php](http://www.hss.gov.yk.ca/seniorservices_aging.php)). Calgary's Action Group Against Elder Abuse created a resource manual which provides a useful listing of various protocols (see [www.albertaelderabuse.ca/resourceDocs/ResourceManual-Final.pdf](http://www.albertaelderabuse.ca/resourceDocs/ResourceManual-Final.pdf)).

### ☒ **Legislative and Policy Frameworks**

In developing any strategy relating to the abuse of older adults, it is important to understand the requirements and remedies outlined in legislation. The governments of Alberta and Canada have enacted legislation to help prevent and address

<sup>47</sup> World Health Organization. (n.d.). Elder Abuse. Retrieved on March 16, 2010, from [www.who.int/ageing/projects/elder\\_abuse/en/](http://www.who.int/ageing/projects/elder_abuse/en/)

<sup>47</sup> Cooper, C., Selwood, A., & Livingston, G. (2009). Knowledge, Detection, and Reporting of Abuse by Health and Social Care Professionals: A Systematic Review. *American Journal of Geriatric Psychiatry*, 17(10), 826-838.

<sup>48</sup> The National Seniors Council. (2007). *Report of the National Seniors Council on Elder Abuse*.

elder abuse. This includes legislation relating to personal and financial decision-making, such as the *Adult Guardianship and Trusteeship Act*, the *Personal Directives Act* and the *Powers of Attorney Act* and legislation designed to protect and safeguard persons under the care of others, such as the *Mental Health Act* and the *Protection for Persons in Care Act*. In addition, the *Protection Against Family Violence Act* provides for the protection and support of victims of family violence, including the abuse of older adults. The federal government's *Criminal Code of Canada* addresses criminal aspects of elder abuse.<sup>49</sup> Community stakeholders see, at the grassroots level, how legislation and policies

are implemented and their result. They are therefore in a good position to review, discuss, and make recommendations on legislative and policy frameworks.

Data collection and program evaluation pertaining specifically to the abuse of older adults is imperative in order to facilitate understanding of key policy issues (see Appendix E, the Evaluation Process). In some cases, policy change may be more appropriate than a legislative change. Individual organizations should also review their policy and operational frameworks as they relate to the abuse of older adults to ensure that they are in keeping with good practice.

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<sup>49</sup> Addressing Elder Abuse in Alberta: A Strategy for Collective Action [www.seniors.alberta.ca/services\\_resources/elderabuse/AddressingElderAbuse.pdf](http://www.seniors.alberta.ca/services_resources/elderabuse/AddressingElderAbuse.pdf)



# Appendix C:

## Existing Programs and Initiatives Addressing the Abuse of Older Adults







## Appendix C: Existing Programs and Initiatives Addressing the Abuse of Older Adults

*This list was compiled during the early part of 2010. Every effort was made to ensure its comprehensiveness and accuracy; however, the availability of programs, services, and contact information, etc. may vary over time, or perhaps change altogether. The services, listed in alphabetical order by municipality, specifically address the abuse of older adults and does not include services of a general nature that may or may not be available for seniors.*

### CALGARY

#### Coordinated Community Response Model

##### 1. Action Group on Elder Abuse (AGEA)

The Action Group on Elder Abuse (AGEA) was an initiative of Calgary's Alliance to End Violence, whose mission was to enhance and coordinate the response to the abuse of older adults. The group began as a result of informal conversations among a few agencies concerned about the lack of a coordinated response.

A community consultation in the fall of 2003 recognized the necessity for a multi-agency group. A part-time Community Development coordinator was hired to focus on the mapping of resources, identifying gaps, establishing protocols, training, and organizational development. The AGEA began the *Pulling Back the Curtain* workshop series in March, 2008. Community stakeholders agreed to participate in future sessions concerning the development of a comprehensive, coordinated community response model. In 2009, a broad range of stakeholders addressed how to implement

the model and needed resources.

Since its inception in January 2004, the Action Group has accomplished a strategic plan, resource mapping, a tool kit on hosting an awareness café, identification of service gaps, protocol and resource manuals, development and implementation of a comprehensive education strategy and public awareness campaign on the abuse of older adults.

Website: [www.endviolence.ca/resourcesolder-adults](http://www.endviolence.ca/resourcesolder-adults)

#### Victim-Focused Services

##### 2. Calgary Police Service Senior Liaison Program

The primary role of the Senior Liaison Officer is to assist seniors with issues that fall between criminal matters and the civil law, such as home renovation scams, door-to-door sales, bogus lotteries, and others attempting to gain access to or take control of seniors' financial affairs for their own benefit. The Officer works with communities and seniors' organizations by responding to questions and concerns pertaining to issues of safety, security, and fraud prevention, and delivers informative and preventative seminars at seniors' centres, seniors' apartments, and community organizations. This Officer also serves as a resource for community professionals such as nurses and social workers, acting as a public guardian and public trustee.

Senior Liaison Officer

Telephone: 403-428-8311  
 Website: [www.calgarypolice.ca/sectionsandunits.html#seniors](http://www.calgarypolice.ca/sectionsandunits.html#seniors)

### 3. Calgary Seniors' Resource Society

The Calgary Seniors' Resource Society offers the SeniorConnect Program which helps seniors who might be at risk connect to community support services that assist them in living safely and independently in their homes. SeniorConnect is a three-part program consisting of;

- a) Education: citizens are offered a free half-hour session on how to recognize the signs and symptoms that a senior might be at risk. Letter carriers, taxi drivers, on call pharmacists, meter readers and members of the City of Calgary Police, Emergency Medical Services, Fire Department, Enmax, and various community associations have been trained in this program.
- b) A 24-Hour Seniors' Help Line: answers calls from concerned citizens who have identified seniors that they believe to be at risk or could use some help and then refers them to the SeniorConnect Social Worker. This line is operated by a partner organization, the Calgary Distress Centre.
- c) Access to Support: the SeniorConnect Social Worker contacts seniors who have been identified as being at risk through the Help Line and then connects them with the community support services that they need.

SeniorConnect Social Worker  
 Telephone: 403-266-6200  
 Education Awareness: 403-264-7700  
 Website: [www.calgaryseniors.org](http://www.calgaryseniors.org)

### 4. Kerby Centre

Kerby Centre is a centre for people 55 years of age and older, and offers an

extensive list of activities, programs, and services. Services include: Adult Day Support Program, Centre of Excellence, Food Services, Fund Development, Grocery Delivery, Housing, Information/Advocacy, Kerby News, a Wellness Centre, and the Kerby Rotary House Shelter for abused seniors.

Another important program at Kerby is the Money Matters for Seniors Program, which is a program that Kerby delivers throughout the province of Alberta. This program is aimed at helping seniors become more aware of financial abuse and how to prevent it.

Telephone: 403-265-0661  
 Fax: 403-705-3211  
 Email: [information@kerbycentre.com](mailto:information@kerbycentre.com)  
 Website: [www.kerbycentre.com/index.php](http://www.kerbycentre.com/index.php)

### 5. Kerby Rotary House Shelter

Kerby Centre operates the first purpose-built shelter in North America for abused senior men and women. This unique shelter offers safe, secure shelter to abused seniors over the age of 55 in Calgary and area. Kerby provides crisis intervention, a 24-hour crisis line, support, advocacy, referral, short-term housing, and the necessities of daily life. Kerby also offers education, recreation, life skills and arts programs, risk assessment, specialized programming for Aboriginal clients and other cultures, training opportunities for staff, computer programs, clothing bank, a cook on staff, supportive counselling and case management, personal incidentals, legal services in partnership with lawyers, a collective kitchen, transport to emergency medical/dental care, follow up services, housing support and advocacy, volunteer programs, and support groups.

Six transitional beds were opened to provide safe housing for older adults in unstable housing situations or facing homelessness. Transitional housing is provided with a goal of achieving stable, independent living in the community.

24-Hour Crisis Line: 403-705-3250  
 Telephone (information): 403-265-0661  
 Website: [www.kerbycentre.com/shelter\\_abused\\_seniors.php](http://www.kerbycentre.com/shelter_abused_seniors.php)

## 6. Older Women's Long-term Survival (OWLS)

The Older Women's Long-term Survival (OWLS) program is run by the Calgary Emergency Women's Shelter and offers four different group options to women who are age 50 and older in order to assist them in dealing with the long-term effects of domestic violence, whether that violence is related to an ongoing situation or abuse that occurred previously in their lives. The OWLS program also has a 24-hour crisis line.

24-Hour Crisis Line and Family Violence Helpline: 403-234-7233 (SAFE)  
 Toll Free: 1-866-606-7233  
 Website: [www.calgarywomensshelter.com/page/Programs/CommunityBasedPrograms/OWLS](http://www.calgarywomensshelter.com/page/Programs/CommunityBasedPrograms/OWLS)

## 7. Seniors' Crisis Line: Distress Centre

Operated by the Distress Centre, the Seniors' Crisis Line offers support, professional, no-fee counselling, and community referrals for seniors and their caregivers regarding elder care, the abuse of older adults, and the SeniorConnect program.

24-Hour Seniors' Crisis Line: 403-264-7700  
 Information: 403-266-1601

## Edmonton

### Coordinated Community Response Model

Concerned individuals in Edmonton began working toward a coordinated community response to the abuse of older adults in the 1980s.

- In 1986, Edmonton social service agencies began to discuss the abuse of older adults. Later that year, the Abuse of the Elderly Committee connected with the Edmonton Women's Shelter and assisted the Senior Citizens Bureau with an information booklet as well as a letter writing campaign to MLA's. A conference entitled "A Look at Elder Abuse" was organized and held, facilitating networks. A survey on current services guided future steps.
- In 1988, the Elderly Adult Resource Services (EARS) program began operating a 24-hour telephone service.
- By 1996, the Capital Health Authority had formed the Elder Abuse Subcommittee
- In April of 1998, the Elder Abuse Intervention Team was established and The Elder Abuse Consultation Team was established in June of 1998.
- Also in June of 1998, the Community Action Committee on Elder Abuse was established with three focused efforts targeted at public relations and community education, peer support, and housing and shelters. As a result, the Edmonton Seniors' Safe House was established. The Edmonton Elder Abuse Peer Support Program matched senior volunteers to seniors who have been impacted by abuse. Peer supporters assisted in developing a healthy support system, provided emotional support, provided practical assistance and

accompaniment, and provided information and assistance in connecting with services.

- In April, 2003 both the Seniors' Abuse Helpline and the Older Adult Knowledge Network (Oak-Net, [www.oaknet.ca](http://www.oaknet.ca)) were launched. Oak-Net, developed by the University of Alberta Faculty of Extension, Legal Studies Program provides fictional stories about the types of abuse, accompanied by a guide to definitions, legal processes, legal action, prevention measures and a listing of resources.

The Edmonton Community Response Model has evolved over the years and now supports abused seniors through the Elder Abuse Community Action Committee, the Elder Abuse Intervention Team, the Seniors' Abuse Helpline, Police Services, the Victorian Order of Nurses, the Seniors' Safe House, the Elder Abuse Consultation Team, and through various community agencies. Ongoing activities include building awareness through education, serving culturally diverse populations, addressing gaps in legislation, the strengthening of intervention strategies, documenting and sharing learnings and information, and promoting a province-wide response to the abuse of older adults. A community development worker is involved with the Elder Abuse Intervention Team and works with the community to identify gaps in dealing with the abuse of older adults.

## Victim-Focused Services

### 1. Elder Abuse Intervention Team (EAIT)

The Elder Abuse Intervention Team is a partnership between the City of Edmonton, Catholic Social Services, Edmonton Police Service, and the Victorian Order of Nurses. The team provides intervention, education, support, and referral services for seniors over the age of 65 residing in Edmonton

who are at risk of or are experiencing abuse. Consultation is provided to others working with seniors experiencing abuse. The team also focuses on prevention by way of raising awareness, community development, and education to professionals and student bodies. The team has also compiled a list of other resources available in Edmonton. The Elderly Adult Resource Service works closely with EAIT and handles the phone line. Calls regarding the abuse of older adults may come in via the intake line or from the police. The EAIT was formed in 1998 and all team members are co-housed in the same building, which is crucial to their success. The team assesses the situation then intervenes with the greatest amount of respect and the least amount of intrusion, in the most effective way possible. The team responds to all abuse of older adults concerns. The majority of the calls (75%) are related to financial, psychological/emotional, or physical abuse of seniors, with a son, daughter, grandchild, other family member, or unrelated caregiver identified as the abuser. The spouse is identified as the abuser less than 25% of the time. Mental health concerns, alcohol and drug abuse, low income, and housing needs are consistent contributing factors to the abuse of older adults. In fact, each contributing factor is cited in 20% to 30% of the cases, and sometimes higher. Caregiver stress is seen as a contributing factor anywhere from 6% to 18% of the time.

Intake Line: 780-477-2929

Alberta Elder Abuse Network website:  
[www.albertaelderabuse.ca/page.cfm?pgID=30](http://www.albertaelderabuse.ca/page.cfm?pgID=30)

City of Edmonton website: [www.edmonton.ca/for\\_residents/resident\\_services\\_programs/stop-elder-abuse.aspx](http://www.edmonton.ca/for_residents/resident_services_programs/stop-elder-abuse.aspx)



Edmonton Police Service website: [www.edmontonpolice.ca/communitypolicing/familyprotection/elderabuse.aspx](http://www.edmontonpolice.ca/communitypolicing/familyprotection/elderabuse.aspx)

## 2. Elderly Adult Resource Service (EARS)

Catholic Social Services in collaboration with Edmonton Police Services, the Today Centre for Family Violence, Victorian Order of Nurses and Edmonton Community Services offers the Elderly Adult Resource Service (EARS) and provides client assessment, emotional support, and referrals to community resources, as well as providing information to the community regarding seniors.

Telephone: 780-455-6880 or  
780-477-2929

## 3. Seniors' Abuse Helpline

The Seniors' Abuse Helpline is a program operated by the Support Network, in partnership with the City of Edmonton Community Services, the Elder Abuse Intervention Team, and the Seniors Association of the Greater Edmonton Area (SAGE). This help line is answered 24 hours a day by Support Network volunteers who have taken part in a comprehensive 64-hour training program that teaches them basic communication and crisis management skills with special emphasis on assessing various risks, including seniors' abuse. These volunteers also provide confidential and anonymous support, referrals, and information regarding seniors' abuse. Callers may be seniors who are experiencing abuse or those who are concerned about an older person. The help line receives between 1,000 and 1,200 calls each year, and the top concern reported on the line is seniors' abuse. Recent statistics indicate that 31% of calls came directly from seniors concerned about living in an abusive situation, and

35% of calls came from concerned third parties. The other 34% of calls typically involve supportive listening around health issues, legal issues, and seniors struggling to meet their basic needs. Those tend to be the most common issues behind first and third party senior's abuse.

Telephone: 780-454-8888  
Website: [www.thesupportnetwork.com.ws026.alentus.com/crisispreventionprograms/seniorabuse.php](http://www.thesupportnetwork.com.ws026.alentus.com/crisispreventionprograms/seniorabuse.php)

## 4. SAGE (Seniors Association of Greater Edmonton)

SAGE is a full service, not-for-profit seniors' organization whose mandate is to build and maintain a broad range of programs and services that enhance the quality of life for seniors and their families in the greater Edmonton area. With over 37 years of experience, SAGE is regarded as a major provider of innovative seniors' services in the Edmonton region. With community support, SAGE provides a wide variety of programs and services to seniors, including guardianship services, health services, home services, income tax program, member services, multicultural seniors outreach, Seniors' Safe House, social work services, This Full House for seniors who hoard, the Sunshine Cafe, and SAGELink newsletter.

Telephone: 780-423-5510  
Website: [www.mysage.ca/safehousing.cfm?ts=14](http://www.mysage.ca/safehousing.cfm?ts=14)

## 5. SAGE Seniors' Safe House

The SAGE Seniors' Safe House provides temporary housing for men and women who are approximately 60 years of age and older and need a safe haven from an abusive environment. The Safe House offers a safe and secure furnished suite on a locked floor

for up to 60 days, sometimes longer, free of charge. Services are provided as needed to the senior. All meals and snacks are provided by the Sunshine Cafe, as well as cleaning service, emotional support from staff members, professional counselling from a social worker, connections to community resources, transportation, advocacy, hands-on assistance with finances, locating secondary or permanent housing, life skills, referrals to legal and other services, and so on.

Health services are provided by the Victorian Order of Nurses. It is reported that abused seniors seeking shelter at the Safe House are approximately 30% male and 70% female. About 50% of the seniors who escape have experienced spousal abuse (97% of the time it is the male who is the abuser), and 50% as a result of victimization by a child, grandchild, or caregiver. Men most often seek shelter from an abusive child or grandchild, but occasionally because of spousal abuse. Women most often seek shelter because of spousal abuse. The lethality risk is also higher in cases of spousal abuse. There are two full-time staff members who care for the abused seniors in the Safe House, and there is a life line for after hours. Follow-up services are provided once a senior leaves the shelter.

SAGE has guiding principles for working with abused seniors, a care plan, an eco-map, senior intake forms, an exit survey form, and a seniors' shelter logic model. The SAGE Seniors' Safe House was established out of a need identified by the Edmonton Elder Abuse Intervention Team.

Telephone: 780-702-1520  
Website: [www.mysage.ca/safehousing.cfm?ts=14](http://www.mysage.ca/safehousing.cfm?ts=14)

## 6. Elder Abuse Consultation Team

The Elder Abuse Consultation Team is another result of the community development efforts of the Elder Abuse Intervention Team. The consultation team is a community initiative committee of approximately 31 professionals representing 28 community and government agencies. The consultation team was formed in 1999 and any organization/agency can apply to become a member of the team. The objective of the team is to provide a forum for those who work directly or indirectly with the abuse of older adults. On a monthly basis, the team members bring a specific case before the committee, and the committee then engages in consultation with one another to reach resolutions. Team members network, share experience, discuss cases, facilitate problem solving, expedite the referral process, identify gaps in service and develop strategies to move the abuse of older adults from the realm of "private troubles" to the broader issue of creating social change. Membership is wide-ranging but includes representation from the Elder Abuse Intervention team, SAGE, Capital Health, Alberta Hospice, Primary Care Network, CHOICE (Comprehensive Home Option of Integrated Care for the Elderly), Public Trustees Office, Guardianship Office, Veteran Affairs, Day Programs for Seniors, and others.

Telephone: 780-392-3267

## 7. Relationship With Your Adult Children Group

Offered by the City of Edmonton Community Services, this group meets twice per month on a drop-in basis for support, education, and information concerning older adults' relationships with their adult children.

Telephone: 780-496-4777



## LETHBRIDGE

### Community Response Model

#### 1. Elder Abuse Awareness Program

The Elder Abuse Awareness Program (Let's Talk About It) is a partnership between the Lethbridge Senior Citizens Organization and Lethbridge Regional Police Service. The goal of this program is to raise awareness and knowledge about the abuse of older adults in the community of Lethbridge and surrounding areas. The Lethbridge Senior Citizens Organization and its volunteers, in partnership with the Lethbridge Regional Police Services, is proactive in the prevention of the abuse of older adults. They bring awareness to the community, provide opportunities for the participants to identify the different types of abuse and provide a plan of action so that people will know what to do if ever involved in a suspected case of abuse of older adults. The program is delivered to seniors' facilities, community groups and service organizations, as well as educational facilities at all levels, post secondary, secondary, and elementary schools, in an attempt to disrupt the cycle of family violence.

Lethbridge Senior Citizens Organization  
Telephone: 403-320-2222

Lethbridge Regional Police Service  
Community Diversity Officer  
Telephone: 403-330-5133  
Website: [www.albertaelderabuse.ca/page.cfm?pgID=39](http://www.albertaelderabuse.ca/page.cfm?pgID=39)

## MEDICINE HAT

### Coordinated Community Response Model

#### Community Response to Abuse and Neglect of Elders (CRANE)

As part of the Alberta Elder Abuse Awareness Network, this community response program strives to prevent abuse of older adults, neglect, and self-neglect through EAR – Education, Advocacy, and Response. CRANE's goal is to reduce the abuse of older adults and neglect by way of a coordinated, collaborative community response to situations of financial, emotional, physical or sexual abuse and neglect or self neglect of seniors in the community.

In order to address the alarming number of local enquiries and disclosures about abuse, neglect, and self-neglect the Senior Citizens Advisory Committee and Senior Services at the Veiner Centre promoted the concept of a coordinated community response in conjunction with Alberta Elder Abuse Awareness Network's public education campaign (November, 2003).

More than 40 stakeholders representing the well-being of seniors and their families met on several occasions to develop a service delivery model.

The Edmonton Elder Abuse Intervention Team members shared their service delivery models, success stories, and best practices. CRANE was officially launched in June 2004. The CRANE logo is based on the origami crane as a symbol of honour, loyalty, and hope for a happy ending.

The Veiner Centre successfully employs a community-based wellness model to address gaps and overlaps in local 54 healthy aging initiatives. The EAR component was added to the Veiner Centre's multidisciplinary

service delivery model for clarity, and was complemented by the Edmonton Edder Abuse Intervention Team's Flow Chart and Intervention Indicator. CRANE's multidisciplinary collaboration connects a wide variety of community resources and all levels of government to enhance services to seniors and families through:

"Education" is designed to:

- increase public awareness on the abuse of older adults, neglect, and self-neglect by developing a "train the trainer" model of seniors speaking to seniors,
- developing training programs for professionals and caregivers
- promoting the CRANE community response
- promoting the safety and well-being of seniors,
- promoting public awareness regarding the availability of resources to seniors
- delivering public awareness presentations to the community
- delivering one-on-one interviews, assessments, and referrals;

"Advocacy":

- by working with other community groups to advocate on behalf of seniors at risk
- by assessing and addressing service delivery gaps,
- by promoting the need for sufficient, timely, and easily accessible resources and services
- by connecting seniors and their families with resources to help them through difficult times

"Response":

- by developing a community response protocol, and ensuring adequate referral, follow-up, and after care is conducted and accomplished.

The Veiner Centre in Medicine Hat is the main contact point. CRANE Champions deliver public awareness sessions which include slide show presentations, a table top display, along with posters, and origami cranes which provide the CRANE contact number.

Telephone: 403-529-4798 Monday to Friday 8:00 a.m. to 4:00 p.m. with voice mail for after hours messages.

Website: [www.city.medicine-hat.ab.ca/veiner/crane.html](http://www.city.medicine-hat.ab.ca/veiner/crane.html)

### **1. Veiner Centre – Seniors' Centre - Seniors Community Outreach**

Seniors Outreach is a service offered at Veiner Centre to all citizens of Medicine Hat. Working closely with the Senior Citizens Advisory Committee they serve:

- Older persons, families, and friends;
- Formal and informal caregivers;
- Representatives from: all orders of government, financial institutions; health care; home care; referral agents; law firms; social service agencies; advocacy groups; or, volunteer organizations; and
- Anyone interested in the well-being of older persons.

Seniors Outreach helps families connect with the community resources that best suit the situation. Their strong network of community partners work together to problem-solve and educate on issues about; Crime Prevention; Family Matters; Housing or Lodging; Income Support; Mental Health; Nutrition; Physical Well-being; Recreation; and, Transportation.

Contact information:  
Senior's Outreach Officer  
403-502-8718 or 403-529-8368

## 2. Wise Owl Program

This program has been developed in partnership with the Edmonton Wise Owl Program, Medicine Hat Police Services and the City of Medicine Hat Senior Services. This program provides awareness and education on telemarketing, phony bank inspectors and home renovations scams. The target population is seniors. Volunteer trained facilitators present workshops on what these scams are, how to identify them, what to do and not to do, and who to telephone if this occurs to you. This program is free.

Contact information:  
403-527-5173

## RED DEER

### Victim Focused Program

#### 1. S.O.A.R. (Seniors Outreach Abuse Resources)

SOAR is a new program established through the Golden Circle Senior Resource Centre in Red Deer. SOAR's mission is to inform, refer, assist, and coordinate responses for victims of abuse of older adults age 65 and over (although service is not refused to persons of any age from Central Alberta and beyond). At present, this program deals specifically with Red Deer; however, as the project grows, the program will include much of Central Alberta.

SOAR's goal is to advocate on behalf of seniors who have experienced any form of abuse and reduce the number of abuse incidents in Red Deer by maintaining a 24-hour Seniors Abuse Resource telephone information line answered by specially trained advocates. The SOAR Management Committee, which is a sub-committee of the Golden Circle Board of Directors,

developed an initiative to provide 24-hour services in the areas of outreach, emergency housing, education, and referrals through the 24-hour Seniors Abuse Resource Information Line.

Telephone: 403-341-1641

Toll Free: 1-877-544-1641

Golden Circle Senior Resource Centre:  
403-343-6074

Website: [www.goldencircle.ca/soar.htm](http://www.goldencircle.ca/soar.htm)

## ST. ALBERT

St. Albert is in the process of developing a program entitled "A Community for ALL Ages". It includes an integrated, community-based protocol to address the abuse of older adults. Key initiatives involve: an inventory of current services, developing community and interagency abuse of older adults protocol, determining if funding is needed to support successful implementation, educating professionals on the protocol, building on existing community education programs and educating the general public. Note that this project has not been formally evaluated to determine effectiveness. To see what St. Albert has been doing with regard to abuse of older adults in the community and the development of a protocol, go to [www.stalbert.ca/st-albert-strategy-and-mobilization-committee](http://www.stalbert.ca/st-albert-strategy-and-mobilization-committee).

Telephone: 780-459-1574



# Appendix D: Selected Resources







## Appendix D: Selected Resources

**Agencies:** *The following agencies have information resources or provide specific assistance in response to the abuse of older adults.*

Alberta Health Services,  
[www.albertahealthservices.ca](http://www.albertahealthservices.ca)

Alberta Health Services, Alberta Health Link, [www.healthlinkalberta.ca/default.htm](http://www.healthlinkalberta.ca/default.htm) or call Toll-Free 1-866-408-LINK (5465) or 780-408-LINK (Edmonton area) or 403-943-LINK (Calgary area) where nurses are available 24-7 to provide health advice and information.

Alberta Association of Sexual Assault Centres.  
[www.aasac.ca](http://www.aasac.ca)

Alberta Caregivers Association.  
[www.albertacaregiversassociation.org](http://www.albertacaregiversassociation.org)

Alberta Council of Women's Shelters.  
[www.acws.ca](http://www.acws.ca)

Alberta Culture and Community Spirit, Community Development <http://culture.alberta.ca/communitydevelopment>

Alberta Elder Abuse Awareness Network.  
[www.albertaelderabuse.ca](http://www.albertaelderabuse.ca).

Alberta Police Based Victim Services.  
[www.apbvsa.com](http://www.apbvsa.com)

Calgary Chinese Elderly Citizens' Association.  
[www.cceca.ca/](http://www.cceca.ca/)

Calgary Immigrant Women's Association.  
[www.ciwa-online.com](http://www.ciwa-online.com)

Calgary Police Service Senior Liaison Program.  
[www.calgarypolice.ca/sectionsandunits.html#seniors](http://www.calgarypolice.ca/sectionsandunits.html#seniors)

Calgary Seniors' Resource Society.  
[www.calgaryseniors.org](http://www.calgaryseniors.org)

Canadian Network for the Prevention of Elder Abuse [www.cnpea.ca](http://www.cnpea.ca)

Community Response to Abuse and Neglect of Elders (CRANE). [www.albertaelderabuse.ca/page.cfm?pgID=33](http://www.albertaelderabuse.ca/page.cfm?pgID=33)

Elder Abuse Intervention Team (Edmonton).  
[www.police.edmonton.ab.ca/Pages/Elder/ElderAbuse.htm](http://www.police.edmonton.ab.ca/Pages/Elder/ElderAbuse.htm)

Edmonton Seniors' Safe Housing.  
<http://web3.userinstinct.com/48973912-edmonton-seniors-safe-housing.htm>

Elder Advocates of Alberta.  
<http://elderadvocates.ca>

Elder Abuse Awareness Program (Lethbridge).  
[www.albertaelderabuse.ca/page.cfm?pgID=39](http://www.albertaelderabuse.ca/page.cfm?pgID=39)

Elder Care of Edmonton.  
[www.eldercareedmonton.ca](http://www.eldercareedmonton.ca)

Family and Community Support Services Association of Alberta. [www.fcssaa.ab.ca](http://www.fcssaa.ab.ca)

Family Service Toronto.  
[www.familyserVICEToronto.org](http://www.familyserVICEToronto.org)

Health Canada. [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

International Network for the Prevention of Elder Abuse (INPEA).  
[www.inpea.net/weaad.html](http://www.inpea.net/weaad.html)

Kerby Centre. [www.kerbycentre.com](http://www.kerbycentre.com)

Kerby Rotary House Shelter (Calgary).  
[www.kerbycentre.com/shelter\\_abused\\_seniors.php](http://www.kerbycentre.com/shelter_abused_seniors.php)

Meals On Wheels. [www.mealcall.org/canada/alberta/index.htm](http://www.mealcall.org/canada/alberta/index.htm)

National Initiative for the Care of the Elderly (NICE). [www.nicenet.ca](http://www.nicenet.ca)

Office of the Public Guardian.  
[www.seniors.gov.ab.ca/opg](http://www.seniors.gov.ab.ca/opg)

Office of the Public Trustee. [http://justice.alberta.ca/programs\\_services/public\\_trustee/Pages/default.aspx](http://justice.alberta.ca/programs_services/public_trustee/Pages/default.aspx)

Older Women's Long-term Survival (OWLS).  
[www.calgarywomensshelter.com/page/Programs/Community%20Based%20Programs/OWLS](http://www.calgarywomensshelter.com/page/Programs/Community%20Based%20Programs/OWLS)

Police Services. Royal Canadian Mounted Police. <http://www.rcmp-grc.gc.ca/ab/detach/index-eng.htm>

Primary Care Networks. [www.albertapci.ca/AboutPCNs/PCNsInAlberta/Pages?ProvincialPCNDetails.aspx](http://www.albertapci.ca/AboutPCNs/PCNsInAlberta/Pages?ProvincialPCNDetails.aspx)

Public Health Agency of Canada.  
[www.publichealth.gc.ca](http://www.publichealth.gc.ca)

St. Albert Seniors' Working Group.  
[www.stalbert.ca/st-albert-strategy-and-mobilization-committee](http://www.stalbert.ca/st-albert-strategy-and-mobilization-committee)

Seniors Association of Greater Edmonton (SAGE). [www.mysage.ca/safehousing.cfm?ts=14](http://www.mysage.ca/safehousing.cfm?ts=14)

Seniors' Abuse Helpline. <http://www.thesupportnetwork.com.ws026.alentus.com/crisispreventionprograms/seniorabuse.php>

SeniorConnect. [www.calgaryseniors.org](http://www.calgaryseniors.org)

Seniors Outreach Abuse Resources (S.O.A.R.).  
[www.goldencircle.ca/soar.htm](http://www.goldencircle.ca/soar.htm)

Veiner Centre. [www.medicinehat.ca/veiner/crane.html](http://www.medicinehat.ca/veiner/crane.html)

Veteran Affairs Canada. Veterans Independence Program (VIP). [www.vac-acc.gc.ca/CLIENTS/sub.cfm?source=services/vip](http://www.vac-acc.gc.ca/CLIENTS/sub.cfm?source=services/vip)

**Alberta Legislation and Policy:** *The following lists some key government of Alberta documents for your reference:*

Addressing Elder Abuse in Alberta: A Strategy for Collective Action, November 2010, Alberta Community Development [www.seniors.alberta.ca/services\\_resources/elderabuse/AddressingElderAbuse.pdf](http://www.seniors.alberta.ca/services_resources/elderabuse/AddressingElderAbuse.pdf)

Aging Population Policy Framework, November, 2010, Alberta Seniors and Community Development, [www.seniors.alberta.ca/Seniors/AgingPopulation/docs/AgingPopulationFramework.pdf](http://www.seniors.alberta.ca/Seniors/AgingPopulation/docs/AgingPopulationFramework.pdf)

A Profile of Alberta Seniors, 2010. Alberta Seniors and Community Supports.  
[www.seniors.alberta.ca/policy\\_planning](http://www.seniors.alberta.ca/policy_planning)

Alberta Seniors and Community Supports. Adult Guardianship and Trusteeship.  
[www.seniors.gov.ab.ca/opg/guardianship/](http://www.seniors.gov.ab.ca/opg/guardianship/)

Alberta Seniors and Community Supports. AGTA Frequently Asked Questions.  
[www.seniors.gov.ab.ca/opg/guardianship/FAQ.asp#07](http://www.seniors.gov.ab.ca/opg/guardianship/FAQ.asp#07)

Alberta Seniors and Community Supports. Personal Directives Registry.  
[www.seniors.gov.ab.ca/opg/registry](http://www.seniors.gov.ab.ca/opg/registry)

Alberta Seniors and Community Supports. *Seniors Programs and Services Information Guide*. Government of Alberta. *Seniors Programs and Services Information Guide*. Government of Alberta. [www.seniors.alberta.ca/services\\_resources/programs\\_services/booklet/ProgramsServices\\_InfoGuide.pdf](http://www.seniors.alberta.ca/services_resources/programs_services/booklet/ProgramsServices_InfoGuide.pdf)

Government of Alberta. Protection Against Family Violence Act. [www.child.alberta.ca/home/528.cfm](http://www.child.alberta.ca/home/528.cfm)

**Multiple Resources:** *The following contacts offer a wide range of resources including reading materials, resource kits, brochures and PowerPoint presentations.*

Alberta Elder Abuse Awareness Network. *Community Resource Kit*. 2005.  
[www.albertaelderabuse.ca](http://www.albertaelderabuse.ca)

Alliance to End Violence has a number of resources on abuse of older adults ranging from Help Cards to evaluation  
[www.endviolence.ca/resources-older-adults/](http://www.endviolence.ca/resources-older-adults/)

British Columbia's Community Response Network (CRN). [www.bccrns.ca](http://www.bccrns.ca)

Elder Abuse: A listing of materials available at the Justice Institute of BC Library. [www.jibc.ca/library/Bibliographies/Elder\\_Abuse\\_-\\_JIBC\\_Library.pdf](http://www.jibc.ca/library/Bibliographies/Elder_Abuse_-_JIBC_Library.pdf)

Edmonton Police Service. "Who is Involved in Elder Abuse." from [www.edmontonpolice.ca/CommunityPolicing/FamilyProtection/ElderAbuse/WhoisinvolvedinElderAbuse.aspx](http://www.edmontonpolice.ca/CommunityPolicing/FamilyProtection/ElderAbuse/WhoisinvolvedinElderAbuse.aspx) (includes Adult Counselling, Elder Abuse Booklet, Elder Abuse Flowchart and Elder Abuse Resource List)

Elder Abuse and Neglect. Information available from the Information Resource Centre, NS Department of Seniors. September 2007. [www.gov.ns.ca/seniors/senior\\_abuse\\_prevention.asp](http://www.gov.ns.ca/seniors/senior_abuse_prevention.asp) (television spots in English and French. and Financial Planning & Protection Fact Sheets)

Elder Abuse: A listing of materials available at the Justice Institute of BC Library. [www.jibc.ca/library/Bibliographies/Elder\\_Abuse\\_-\\_JIBC\\_Library.pdf](http://www.jibc.ca/library/Bibliographies/Elder_Abuse_-_JIBC_Library.pdf)

Government of Canada – Seniors. <http://www.seniors.gc.ca> for brochures, fact sheets, publications and reports

International Network for the Prevention of Elder Abuse (INPEA). [www.inpea.net/weaad.html](http://www.inpea.net/weaad.html) (international resources and links)

Ontario Network for the Prevention of Elder Abuse. [www.onpea.org](http://www.onpea.org)

## Specific Resources

### Books

Baskin, Cyndy. 2006. "Systemic Oppression, Violence, and Healing in Aboriginal Families and Communities," in *Cruel but not unusual: Violence in Canadian Families*. Ramona Alaggia and Cathy Vine (editors). Waterloo, Ontario, Canada: Wilfrid Laurier University Press, pp. 15-20.(book)

Boyak, Virginia. 1997. *Golden Years – Hidden Fears: A Handbook for Front-line Helpers Working with Seniors*. Calgary: Kerby Centre.

Boyak, Virginia, L. M. McKenzie, and E. K. Hansell. 1995. *Synergy II: A Demonstration Project to Address the Issues of Violence in Older Families*. Calgary: Kerby Centre.

Reis, Myrna and Daphne Nahmiash. 1995. *When Seniors Are Abused: A Guide to Intervention.* York University, Ontario: Captus Press Inc.

### Community Development

Community Development Models and Language. 2007. Retrieved on April 21, 2010 from [www.mapl.com.au/ComDevModel.pdf](http://www.mapl.com.au/ComDevModel.pdf)

Government of Canada. Treasury Board of Canada Secretariat. Community Development Model. [www.tbs-sct.gc.ca/tbs-sct/index-eng.asp](http://www.tbs-sct.gc.ca/tbs-sct/index-eng.asp)

Participation Model. Retrieved on April 21, 2010 from [www.wrha.mb.ca/community/commdev/files/CommDev\\_ParticipationModel.pdf](http://www.wrha.mb.ca/community/commdev/files/CommDev_ParticipationModel.pdf)

Service Canada. The Community Development Handbook, [www.servicecanada.gc.ca/eng/epb/sid/cia/comm\\_deve/handbook.shtml](http://www.servicecanada.gc.ca/eng/epb/sid/cia/comm_deve/handbook.shtml)

## Cultural Competency

*Cultural Competency: A Self-Assessment Guide for Human Services Organizations* <http://culture.alberta.ca/humanrights/publications/competency/default.aspx>

## Evaluation

Alberta Seniors and Community Supports. *The Seniors' Policy Handbook: A Guide for Developing and Evaluating Policies and Programs for Seniors*. Retrieved on January 7, 2010 from [www.seniors.gov.ab.ca/publications/](http://www.seniors.gov.ab.ca/publications/).

[www.seniors.alberta.ca/services\\_resources/programs\\_services/booklet/ProgramsServices\\_InfoGuide.pdf](http://www.seniors.alberta.ca/services_resources/programs_services/booklet/ProgramsServices_InfoGuide.pdf)

*Basic Guide to Program Evaluation* [http://managementhelp.org/evaluatn/fnl\\_eval.htm](http://managementhelp.org/evaluatn/fnl_eval.htm).

Basic Guide to Out-Comes Based Evaluation for Non-profit Organizations [www.managementhelp.org/evaluatn/outcomes.htm](http://www.managementhelp.org/evaluatn/outcomes.htm).

Public Health Agency of Canada: Program Evaluation Toolkit [www.phac-aspc.gc.ca/php-ppsp/toolkit-eng.php](http://www.phac-aspc.gc.ca/php-ppsp/toolkit-eng.php)

Evaluation Management Resource, Version 1.0 by Howard Research & Management Consulting Inc., prepared for Government of Alberta, February, 2008

Monitoring and Evaluation of Initiatives on Violence Against Women and Girls [www.endvawnow.org/pampa/v0.1/library/filemanager/v1/files/ME\\_Asset\\_Feb2010\\_en.pdf](http://www.endvawnow.org/pampa/v0.1/library/filemanager/v1/files/ME_Asset_Feb2010_en.pdf)

Preventing intimate partner and sexual violence against women: Taking action and generating evidence. By World Health Organization, 2010 [http://whqlibdoc.who.int/publications/2010/9789241564007\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241564007_eng.pdf)

Boris Volkov on What (Internal) Evaluators Can do to Advance Evaluation Capacity Building, June 2010. <http://aea365.org/blog/?p=967>

## Manuals And Informational Resources

Action Group on Elder Abuse. *Elder Abuse Resource Manual*. Action Committee Against Violence. May 2006. [www.albertaelderabuse.ca/resourceDocs/Resource%20Manual%20-%20Final.pdf](http://www.albertaelderabuse.ca/resourceDocs/Resource%20Manual%20-%20Final.pdf)

Alberta Children's Services. 2008. *Preventing Abuse of Older Adults*. [www.child.alberta.ca/home/documents/familyviolence/doc\\_opfvb\\_booklet\\_older\\_adults\\_colour.pdf](http://www.child.alberta.ca/home/documents/familyviolence/doc_opfvb_booklet_older_adults_colour.pdf)

Alberta Council on Aging. *Helping Hands: A Service Provider's Resource Manual for Elder Abuse in Alberta*. [www.acaging.ca/](http://www.acaging.ca/)

"Are You Afraid in Your Own Home?" An Information Booklet for Older Women. BC/Yukon Society of Transition Houses.

BC/Yukon Society of Transition Houses, 2005, *How to Establish Specialized Refuge and Support Services for Older Abused Women and Developing Support Groups for Older Abused Women, A Resource Manual*

Canadian Association for Community Care. "Taking Action Against Abuse of Seniors." [www.coaottawa.ca/library/publications/fpr\\_aos.pdf](http://www.coaottawa.ca/library/publications/fpr_aos.pdf)

Canadian Association for Community Care. Training Manuals. [www.bccrns.ca/resources/cacc/englishCD/membersonly/abuseofseniors/caregiverinfo/staff.html](http://www.bccrns.ca/resources/cacc/englishCD/membersonly/abuseofseniors/caregiverinfo/staff.html)

Dauvergne, Mia. 2003. "Family Violence Against Seniors," in *Canadian Social Trends*. Spring 2003, 10-14. (Statistics Canada, Catalogue No. 11-008).



- Dimah, Keren Patricia and Agber Dimah. 2003. "Abuse of older adults and Neglect Among Rural and Urban Women," in *Journal of Abuse of older adults & Neglect*, Apr. 2003, Vol. 15, Issue 1, pp. 75-93.
- Domestic Violence Handbook for Police and Crown Prosecutors in Alberta. 2005. Alberta Justice Department. Government of Alberta. ISBN 0-7785-4152-5. [https://www.solgps.alberta.ca/safe\\_communities/community\\_awareness/family\\_violence/Publications/DomesticViolenceHandbook.pdf](https://www.solgps.alberta.ca/safe_communities/community_awareness/family_violence/Publications/DomesticViolenceHandbook.pdf)
- Dumont-Smith, Claudette. 2002. "Aboriginal Abuse of older adults in Canada." Retrieved on December 1, 2009 from [ahfresearchelderabuse\\_eng-1.pdf](http://ahfresearchelderabuse_eng-1.pdf) located on [www.uoguelph.ca/cfww/elderabuse/reports.cfm](http://www.uoguelph.ca/cfww/elderabuse/reports.cfm)
- "Elder Abuse Education Project: When the Line is Crossed, Elder Abuse – How Does it Start – What Can We Do To Stop It"? Lethbridge Community College.
- Elder Abuse E-Bulletin. [www.phac-aspc.gc.ca/ea-ma/EB/eb-Feb-2010-eng.php#article](http://www.phac-aspc.gc.ca/ea-ma/EB/eb-Feb-2010-eng.php#article)
- Fort McMurray and the Regional Municipality of Wood Buffalo. *Elder Abuse: It's Your Business*.
- Fraud Cent\$ Toolkit for Seniors. [www.skseniorsmechanism.ca/html/fraud\\_cent\\_toolkit\\_.html](http://www.skseniorsmechanism.ca/html/fraud_cent_toolkit_.html)
- Health Canada. Mental Health Division and National Clearinghouse on Family Violence. 1994. *Abuse and Neglect of Older Adults: Awareness Information for People in the Workplace*. Ottawa: Minister of Supply and Services Canada. <http://dsp-psd.pwgsc.gc.ca/Collection/H72-21-120-1994E.pdf>
- Human Resources and Skills Development Canada. Elder Abuse Awareness Information Materials. Abuse of older adults Awareness Resource Guide. [www.hrsdc.gc.ca/eng/community\\_partnerships/seniors/nhsp/ea/info\\_guide/guide.shtml#s](http://www.hrsdc.gc.ca/eng/community_partnerships/seniors/nhsp/ea/info_guide/guide.shtml#s)
- Kasdorff, Deborah and Erb, Barbara, 2010, "Serving Victims of Violence in Rural Communities: Challenges and Best Practices
- Kinnon, Dianne. 2002. "Abuse and Neglect of Older Adults: Community Awareness and Response." Public Health Agency of Canada. Family Violence Prevention Unit [www.phac-aspc.gc.ca/ncfv-cnivf/publications/agecommuni-eng.php](http://www.phac-aspc.gc.ca/ncfv-cnivf/publications/agecommuni-eng.php)
- Legal Resource Centre of Alberta. 2008. *Abuse of Older Adults (3rd Edition): Frequently Asked Questions*. [www.law-faqs.org/docs/AbuseThirdEdAugFINAL.pdf](http://www.law-faqs.org/docs/AbuseThirdEdAugFINAL.pdf)
- Legal Resource Centre (Canadian Legal FAQs). [www.law-faqs.org/wiki/index.php/Abuse\\_of\\_Older\\_Adults](http://www.law-faqs.org/wiki/index.php/Abuse_of_Older_Adults)
- Lundy, Marta and Susan Grossman. 2004. "Abuse of older adults: Spouse/Intimate Partner Abuse and Family Violence Among Elders," in *Journal of Abuse of older adults & Neglect*, Vol. 16(1), 2004, pp. 85-102.
- Older Adult Knowledge Network. [www.oak-net.org/](http://www.oak-net.org/)
- Outlook 2007: Promising Approaches in the Prevention of Abuse and Neglect of Older Adults in Community Settings in Canada. November 2007. Project funded by the Public Health Agency of Canada and prepared by the Canadian Network for the Prevention of Abuse of older adults (CNPEA). [www.cnpea.ca/PromisingApproachesFinal2007.pdf](http://www.cnpea.ca/PromisingApproachesFinal2007.pdf)

Plesuk, Susan, LeBlanc, Sandra, ACWS Shelter Practice Orientation Manual, Alberta Council of Women's Shelters, 2010, Module 12 and PowerPoint presentation [www.acws.ca/documents/Module12Elderadults.pdf](http://www.acws.ca/documents/Module12Elderadults.pdf)  
[www.acws.ca/documents/Module12ShelterPracticeOrientationManualPresentation.pptx](http://www.acws.ca/documents/Module12ShelterPracticeOrientationManualPresentation.pptx)

Podnieks, Elizabeth. 2008. "Elder Abuse: The Canadian Experience," in *Journal of Abuse of older adults & Neglect*, Vol. 20(2), 126-150.

Population Health Improvement Research Network. "How Elder Care can Become Elder Abuse and Neglect." Fireside Chat February 5, 2010. [www.chnet-works.ca](http://www.chnet-works.ca)

Reis, Myrna and Daphne Nahmiash. 1995. *When Seniors Are Abused: A Guide to Intervention*. York University, Ontario: Captus Press Inc. <http://tiny.cc/lvpkk>

Research Institute for Law and the Family. Retrieved on December 9, 2006 from [www.ucalgary.ca/~crilf/publications/ElderAbuseFinalReport-June2006.pdf](http://www.ucalgary.ca/~crilf/publications/ElderAbuseFinalReport-June2006.pdf).

*The Response to Elder Abuse in Alberta: Legislation and Victim Focused Services Final Report*. May 2006. Prepared for the Department of Justice Canada Family Violence Initiative and the Alberta Solicitor General Victims of Crime Fund by Monica Pauls and Leslie MacRae. Canadian Research Institute for Law and the Family. Retrieved on December 9, 2006 from [www.ucalgary.ca/~crilf/publications/ElderAbuseFinalReport-June2006.pdf](http://www.ucalgary.ca/~crilf/publications/ElderAbuseFinalReport-June2006.pdf)

St. Albert Seniors' Working Group. A Community for ALL Ages 2009-2011. [www.stalbert.ca/st-albert-strategy-and-mobilization-committee](http://www.stalbert.ca/st-albert-strategy-and-mobilization-committee)

*The Way Forward*. November 17, 2009 News Release. "New Programs Support Albertans Affected by Family Violence." Government of Alberta. Retrieved on November 25, 2009 from <http://alberta.ca/ACN/200911/27336FF1DBBBA-017A-CBEB-65765D3DAA6E7863.html>

*The Way Forward*. October 30, 2009 Information Bulletin. "Adult Guardianship and Trusteeship Act Proclaimed." Government of Alberta. Retrieved on February 16, 2010 from <http://alberta.ca>

Violence Against Rural Women: What Is Different. Retrieved on May 19, 2009 from [www.ruralwomen.net/rural\\_violence\\_difference.html](http://www.ruralwomen.net/rural_violence_difference.html)

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World Health Organization (WHO) and the International Network for the Prevention of Elder Abuse (INPEA). 2002. "Missing Voices: Views of Older Persons on Elder Abuse." Geneva, Switzerland.

World Health Organization (WHO). 2002. "The Toronto Declaration on the Global Prevention of Elder Abuse." [www.who.int/ageing/projects/elder\\_abuse/alc\\_toronto\\_declaration\\_en.pdf](http://www.who.int/ageing/projects/elder_abuse/alc_toronto_declaration_en.pdf)

World Elder Abuse Awareness Day. [www.albertaelderabuse.ca/blogDetails.cfm?bID=216](http://www.albertaelderabuse.ca/blogDetails.cfm?bID=216)

Yukon Health and Social Services, Information Sheets on the Abuse of Older Adults [www.hss.gov.yk.ca/seniorabuse.php](http://www.hss.gov.yk.ca/seniorabuse.php)



## Protocols

Action Group on Elder Abuse. *Elder Abuse Protocol*. Action Committee Against Violence. May 2007.

Adult Victims of Abuse Protocols, Government of New Brunswick, 2005. [www2.gnb.ca/content/dam/gnb/Departments/sd-ds/pdf/Protection/Adult/AdultProtocol-e.pdf](http://www2.gnb.ca/content/dam/gnb/Departments/sd-ds/pdf/Protection/Adult/AdultProtocol-e.pdf)

Interdepartmental Working Group on Elder Abuse and Manitoba Seniors Directorate, Winnipeg. 1993. "Abuse of the Elderly: A Guide for the Development of Protocols."

## Screening Tools

Brief Abuse Screen for the Elderly (BASE). [www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/brief.pdf](http://www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/brief.pdf)

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Indicators of Abuse (IOA). [www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/indicators.pdf](http://www.uihealthcare.com/depts/med/familymedicine/research/eldermistreatment/screeninginstruments/indicators.pdf)

## Videos

"What's Age Got To Do With It? Judith Blackwell (2003) BC/Yukon Society of Transitional Houses. A video about the abuse of older women.

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# Appendix E: What is Evaluation?





## Appendix E: What is Evaluation?

### When to Evaluate?

Evaluation is an integral part of policy and program activities and should be conducted as part of these processes. Ideally, an evaluation framework should be established as early as possible. Evaluation involves continuous monitoring and collection of information to gauge whether initiatives and strategies are seeing their desired results and if barriers or challenges need to be addressed. Effective evaluation will also support responses to key questions related to performance and can be carried out to support staff or funder decision-making about program improvements, which activities to continue/discontinue and program expansion.

There are many types of evaluations which can be applied, depending on the focus and circumstances; these include needs assessments, cost/benefit analyses, effectiveness, efficiency, formative, summative, goal-based, process, outcome, etc. The type of evaluation used will largely depend on the requirements and resources of the organization. (Please refer to the list of supplementary resources for further information about evaluation).

### Who Should Carry Out the Evaluation?

Evaluations can be carried out using internal or external resources depending on the requirements and resources of the program. Research has shown that internal evaluation can be very useful when internal evaluators are able to systematically:

- engage leadership in evaluation;
- demonstrate value and use of evaluation;

- seek to integrate evaluation into organizational culture;
- develop organizational evaluation strategy;
- expand the social network of evaluation champions;
- promote staff development in evaluation;
- engage staff in evaluation activities (learning by doing);
- share their experiences and resources with staff; and,
- build a meaningful organizational database.

Although many organizations would be able to evaluate their services internally, external resources can support the development of methodology, and may be particularly helpful if a complex data analysis is required. When evaluations are used for reporting to funders or donors, the use of external resources can help to bring objectivity to the results.

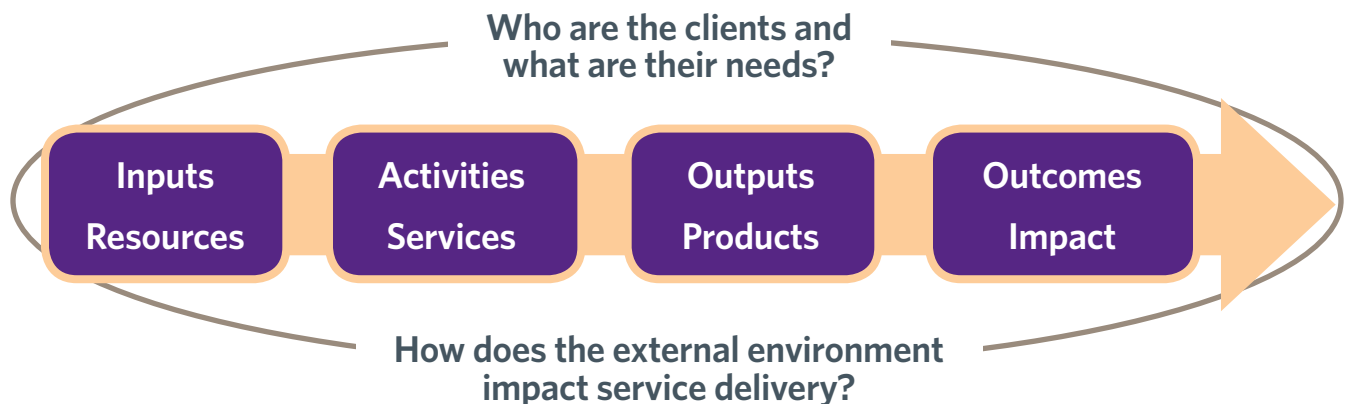
### Developing Program Goals and Objectives

Evaluation begins with the development of goals and objectives, and continues throughout the life of the project. Goals and objectives describe what the project intends to accomplish and provides the overall context for the evaluation processes. Goals are usually broad statements which identify the key intentions of a project and objectives are specific, measurable statements of the desired change(s) that the initiative or project intends to accomplish by a given time.

### Developing a Conceptual Framework

Program information is often summarized in a conceptual framework that identifies and illustrates the relationships between outcomes/goals, activities, resources and external factors that may influence the provision of services. There are different types of frameworks that can be used (e.g., change theory of change, results frameworks, logical frameworks, developmental evaluation frameworks and others) but there are usually common elements which support evaluation. An example of a conceptual evaluation framework is included below.

- **Inputs** refer to the financial, human and material resources used for implementation of an initiative or program. These typically include funding sources and amounts, and physical resources such as facilities, staffing and supplies.
- **Activities** are the services and supports that the initiative or program provides and may include: descriptions of how these services are provided (e.g., community outreach, counselling, telephone advocacy, etc.); models or approaches utilized (e.g., harm reduction, psycho-educational); and frequency of intervention (e.g., once a week for an hour, or as required by the client).
- **Outputs** are “products” of the initiative/program’s activities or “goods and services” produced by the program. Outputs represent tangible “counts” of program activities, such as number of counselling sessions in time period; number of clients served; number of reports produced; etc.
- **Outcomes** are benefits to clients that result from their participation in the program. They can be short-term, medium-term or long-term depending on when the change is expected to occur. Outcomes can be





measured in terms of enhanced learning (e.g., knowledge, perceptions, attitudes or skills) or conditions (e.g., increased literacy, self-reliance, etc). Impacts are related to outcomes in that they also measure change, but this change is usually on a larger, societal scale.

## Developing a Measurement Framework and Collecting Data

A measurement framework identifies the specific activities needed to implement your conceptual evaluation plan. The chart below identifies key elements in developing a measurement framework.

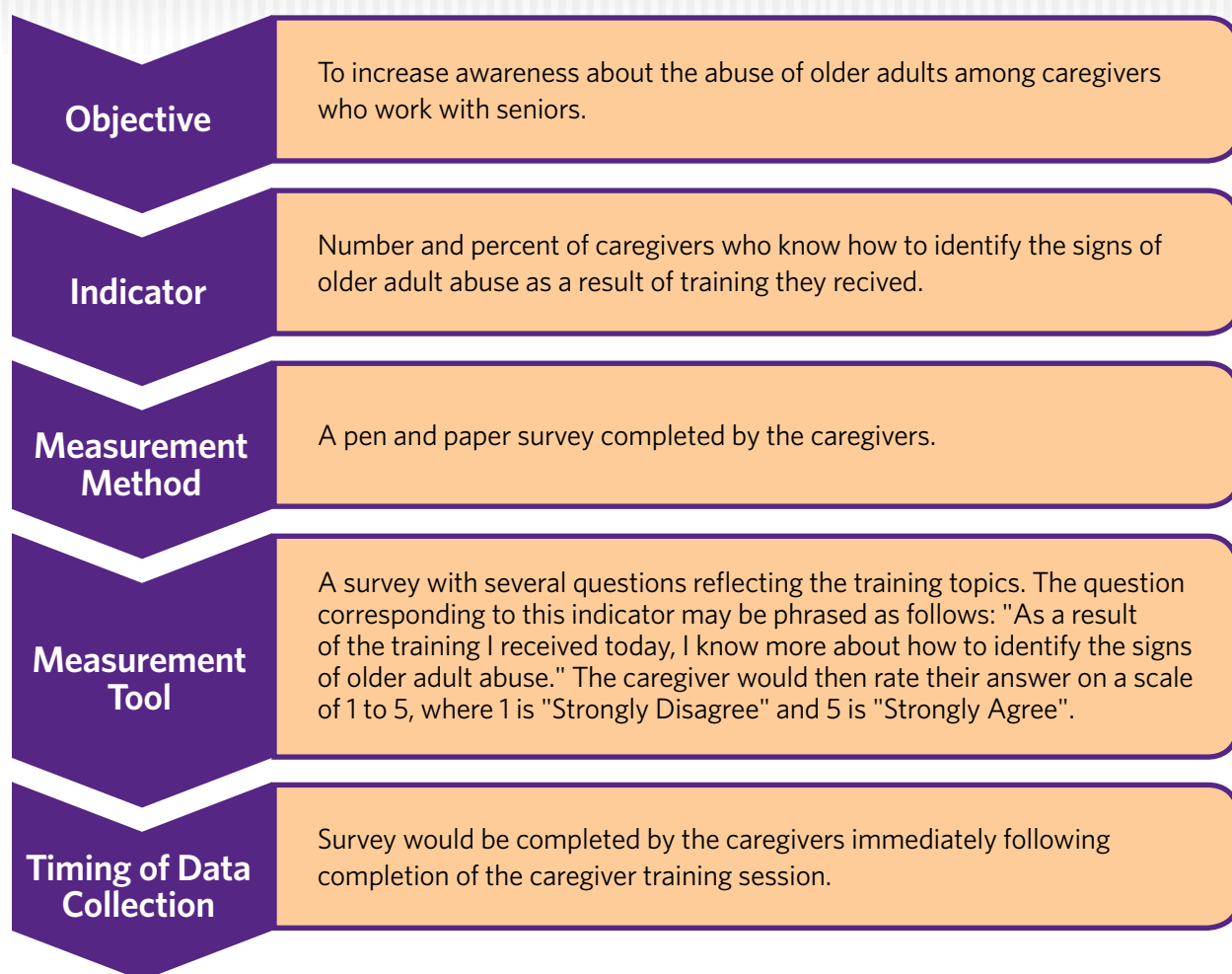
An indicator is a specific, observable and measurable characteristic that is used to help determine whether an initiative or program is on its way to achieving its outcomes. Ideally, there should be at least one indicator for each outcome. Indicators are measured using a specific methods, such as surveys or questionnaires, interviews (or focus groups), observations and file/document reviews. Method(s) are typically selected based on the type of information needed, the resources available, and the number of clients involved. Please refer to the supplementary resources for further information about data collection methods. The figure below illustrates an example of a measurement framework for a hypothetical Education Program on the Abuse of Older Adults. Note that the example shows only one indicator and how it would be measured. In a real situation there would be several indicators each with a corresponding question on a survey.

## Analyzing the Information

Different types of approaches are utilized to analyze quantitative and qualitative information. Quantitative information is usually collected using surveys, questionnaires or program forms and is recorded in numbers. Such information is best analyzed using some kind of software (e.g.,



Excel, SPSS or SAS). Qualitative information is typically obtained from interviews or focus groups and can be analyzed by organizing comments in themes or similar categories of responses.



## Communicating the Results

Evaluation results should be made available to all key stakeholders and decision-makers and often community members. Results are typically documented in a report. The scope, degree of detail and method of reporting evaluation results will vary depending on the interest and needs of the various audiences.

Ideally, evaluation results are communicated as broadly as possible. This can facilitate wider support among decision-makers and the community. The sharing of results can also contribute to increased capacity among stakeholder and partners, as well as improvements in policy and practices.

## Supplementary Resources

- *Basic Guide to Program Evaluation*  
[http://managementhelp.org/evaluatn/fnl\\_eval.htm](http://managementhelp.org/evaluatn/fnl_eval.htm).
- Basic Guide to Out-Comes Based Evaluation for Non-profit Organizations  
[www.managementhelp.org/evaluatn/outcomes.htm](http://www.managementhelp.org/evaluatn/outcomes.htm).
- Public Health Agency of Canada: Program Evaluation Toolkit [www.phac-aspc.gc.ca/php-psp/toolkit-eng.php](http://www.phac-aspc.gc.ca/php-psp/toolkit-eng.php)
- Evaluation Management Resource, Version 1.0 by Howard Research & Management Consulting Inc., prepared for Government of Alberta, February, 2008

- Monitoring and Evaluation of Initiatives on Violence Against Women and Girls  
[www.endvawnow.org/pampa/v0.1/library/filemanager/v1/files/ME\\_Asset\\_Feb2010\\_en.pdf](http://www.endvawnow.org/pampa/v0.1/library/filemanager/v1/files/ME_Asset_Feb2010_en.pdf)
- Preventing intimate partner and sexual violence against women: Taking action and generating evidence. By World Health Organization, 2010 [http://whqlibdoc.who.int/publications/2010/9789241564007\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241564007_eng.pdf)
- Boris Volkov on What (Internal) Evaluators Can do to Advance Evaluation Capacity Building, June 2010. <http://aea365.org/blog/?p=967>



# Appendix F:

## References







## Appendix F: References

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