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Elder Abuse — Myths and Misconceptions

Our perceptions about elder abuse are often misguided. Unfortunately, our misconceptions affect our ability to recognize the signs of abuse and our sense of urgency about stopping it. Here are some of the myths:

- 1. Elder abuse only occurs in nursing homes.** Even though elder abuse does occur in nursing homes, most of the time it happens at home, behind closed doors. It affects every community and crosses all religions, races and socioeconomic strata.
- 2. Strangers and paid caregivers prey on the elderly.** Most vulnerable adults are abused by someone they know and trust, often a family member. Because it happens behind closed doors and is kept secret, detection is very difficult.
- 3. If there are no physical signs of abuse, there is nothing to worry about.** Bruises and broken bones are not the only indicators of abuse. Neglect, emotional abuse and financial abuse are quite prevalent and just as devastating for the victim, if not more so.
- 4. Caregiver stress causes elder abuse.** Caregiving can be stressful – but stress doesn't cause elder abuse. Most stressed caregivers do not harm the person for whom they are caring. Caregiver stress does not justify inexcusable behavior.
- 5. Elder abuse happens to men and women equally.** More women are victims of elder abuse than men. However, those with cognitive impairment bear the greatest risk, regardless of gender.
- 6. It's not a big problem.** Elder abuse is one of the most overlooked public health hazards in the United States. Victims are more likely to die prematurely than those who aren't mistreated. The National Center on Elder Abuse estimates that between two and five million elderly Americans experience some form of abuse each year. For every case of elder abuse, neglect or exploitation reported to authorities, many more go unreported.

Observing signs of abuse. Since a victim may not be able to report abuse, it's up to others to observe the signs and intervene. Look for physical indicators, such as injuries that are inconsistent with the explanation for their cause. If a loved one is suddenly sporting bruises, welts, cuts, burns or is dehydrated or losing weight without illness,

investigate why. Behavioral signs may also indicate abuse. While unexplained fear, anxiety, agitation, anger, depression, or a hesitation to speak openly or in the presence of a particular individual may be consistent with your loved one's diagnosis of dementia, do not ignore these behaviors if they seem to have arisen suddenly.

Be wary of caretakers. It goes without saying that caretakers who have a history of substance abuse, mental illness, criminal behavior or family violence are more likely to abuse elderly loved ones. But there are other behaviors that may signal problems: if the caretaker prevents the victim from speaking to or seeing visitors, if he or she exhibits indifference or aggressive behavior toward the victim, if conflicting accounts of incidents or injuries are given, investigation is appropriate.

Signs of financial exploitation. Unusual activity in bank accounts or sudden changes in spending patterns might be the first indication of a problem. Frequent or unexplained checks made out to "cash" or the addition of the caretaker's name to the account are signs of a potential problem. A "new best friend" who seems to be ever-present or one who receives expensive gifts from the victim should trigger inquiry. And, of course, if the victim is suddenly drafting new legal documents, such as a new will or power of attorney, it may be appropriate to intervene.

What if you identify someone at risk? If you are concerned about a vulnerable adult to whom you are not related or with whom you have no special relationship, call 911 or your local adult protective services agency and report what you have seen or suspect. If your concern is about a family member or loved one, call Berwitz & DiTata LLP. We can help develop a safe plan of care or act as an advocate for the victim.