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EST. 1974

Elder Abuse Prevention Guidebook for Caregivers





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INTRODUCTION

Lumacare¹ recognizes that older adults are at times vulnerable to abuse and has pledged to work as an advocate and build its expertise in creating awareness. This includes educating the community on recognizing the signs and symptoms of elder abuse, and streamlining access to resources and supports since 2008.

Lumacare's Elder Abuse Committee has been operational since 2014. It seeks to further the knowledge of staff, our community and our clients through training, workshops, speaking engagements and events. Elder Abuse is now embedded as mandatory training for all new employees through our New Employee Orientation.

Lumacare provides support, consultation and resource navigation to our North York and Etobicoke York communities but has, at times, also heard from concerned individuals from across the province.

If you are a caregiver to an older adult and suspect they may be a victim of elder abuse, please use this guide for support and reach out to the experts at Lumacare for further assistance.

Lumacare will continue to develop and advocate for a greater ability to respond to the need!



Lumacare's **Elder Abuse Prevention Guidebook for Caregivers** has been created to provide you with the tools to develop awareness, assess risk, and respond effectively to elder abuse. By putting this guide into action, gaps in services and barriers to support can be addressed to eradicate elder abuse in our community and help older adults live with the highest quality of life possible.

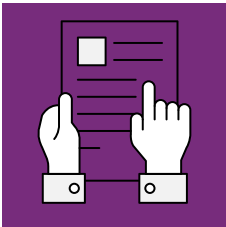
GUIDE LANGUAGE

This guide uses the words "seniors", "elderly" and "older adults" to reflect the population that is aged 55+, regardless of gender, sexual orientation, race, culture or religion.

GUIDE SECTIONS

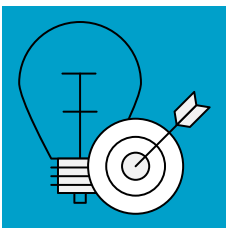
This guide begins with general information to help readers understand elder abuse, and gain context and empathy for both victims and abusers. It then provides practical tools to recognize, assess, and respond to possible concerns.

GUIDE TOOLS



The Knowledge Tool:

Provides the user with knowledge and awareness



The Practical Tool:

Provides practical recommendations

WHAT IS ELDER ABUSE?

Elder abuse is defined by the World Health Organization as “a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person.” Elder abuse can take various forms such as physical, psychological/emotional, sexual or financial. It can also be the result of intentional or unintentional neglect.²

TYPES OF ELDER ABUSE

1) Physical Abuse

Any act of violence or rough handling that may or may not result in physical injury but causes physical discomfort, upset or pain.

2) Sexual Abuse

Any sexual behaviour directed towards an older adult without that person's full knowledge and consent.

3) Psychological/Emotional Abuse

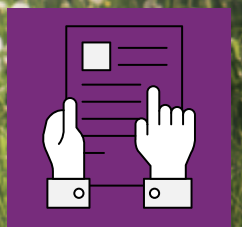
Any act which diminishes an older person's identity, dignity or self-worth (e.g., paternalism, which is treating an older adult as a child).

4) Neglect

The deliberate or thoughtless failure to meet the needs necessary for the older person's physical and mental well-being. It may be passive neglect due to lack of experience, information, resources or ability.

5) Financial Abuse

Any improper conduct done with or without the informed consent of the older adult that results in a monetary or personal gain for the abuser and/or monetary or personal loss for the older adult.



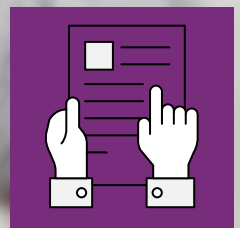
HISTORY AND CONTEXT

As the baby boom generation ages, Canada is becoming an older country. According to Statistics Canada, eight million or 25% of the population will be over the age of 65 by 2031 and a growing number of those in this age bracket are reporting that they are the victims of abuse.³

To this day there are no specific laws addressing elder abuse; however, the Canadian Association for Retired Persons (CARP) wants changes to the Canadian Criminal Code to punish elder abuse and add hotlines to make it easier for seniors to self-report problems.⁴

Elder abuse is a seriously underreported crime with more unknown than known victims. Those in unreported cases are locked in the abuse and suffer the effects in silence. According to Statistics Canada, approximately seven in ten crimes against older Canadians are never reported to police because the victims did not believe the incident was important enough to seek help or because the victim dealt with the issue personally. Underreporting is often attributed to shame, fear, the lack of resources and not knowing where to turn.⁴

In early 2012, Justice Minister Rob Nicholson hoisted the issue of elder abuse into the media spotlight with his bill to increase sentencing for elder abuse convictions, which passed in December 2012. Having a senior minister of the Crown tell Canadians that a largely hidden crime is a public offence put the issue on the front burner of public policy and started the conversation across the country about what needed to be done to eradicate the abuse. More importantly, it highlighted what individuals can and should do if they or people close to them are facing abuse.⁴



QUICK FACTS

- Approximately 10% of older Canadians experience some form of abuse, which is consistent with academic and Statistics Canada research. Based on the current population of 5.2 million Canadians aged 65 and over, there are potentially 520,000 people confronting elder abuse in Canada. In 10 years, it is estimated that the 65+ population will grow to eight million and, if nothing is done to reduce the incidence of abuse, 800,000 seniors may become victims of elder abuse.
- In 32% of reported elder abuse cases, the offender is a family member (e.g., adult child, current or former spouse).
- Seniors are the least likely demographic to suffer violent crime, but they are most at risk of suffering violence at the hands of a family member.
- The biggest perpetrators of violence against seniors are adult children (15 per 100,000 cases) or a current or former spouse (13 per 100,000).
- Most provinces and territories already offer some form of a seniors' helpline but there is no national, 24-hour hotline dedicated to helping seniors who are the victims of abuse.
- Financial abuse is the most prevalent type of abuse affecting 60,000 Canadian elders.^{3, 5}



PREVALENCE



- Seven percent of older adults report some form of emotional and financial abuse by an adult child, spouse or caregiver.
- Seven percent report emotional abuse, one percent financial abuse and one percent physical or sexual abuse.
- For those over the age of 65, 47 out of every 100,000 women were violently assaulted by a family member, according to 2005 statistics. For men over the age of 65, the figure was 36 cases per 100,000 population.
- Approximately four percent of elders (98,000) in Canadian private dwellings reported being abused.
- Chronic verbal aggression affects approximately 34,000 elderly Canadians.
- More than 18,000 elderly persons in Canada are subjected to more than one type of abuse.
- Approximately 12,000 seniors in Canada experience physical abuse.
- Female victims of abuse outnumber male victims by approximately 5:3.⁵

WHY DOES ELDER ABUSE HAPPEN?

- The burden of responsibility on caregivers, which is growing more complex and as older people live longer, can lead to elder abuse. This is especially true in cases where caregivers have to take care of physical needs such as bathing, feeding and toileting.
- Economic problems such as high unemployment can increase the stress experienced by caregivers, as well as the potential for financial abuse. In addition, economic recessions often mean that fewer resources are available to assist relatives in caring for the elderly.
- Cultural changes that lower the status of the elderly can lead to less respect from younger people and increase the likelihood of abuse.
- Personal problems of relatives or caregivers, such as substance abuse or mental or emotional impairments, can cause neglect and abuse of elders.
- An increasing number of socially isolated older adults means that more older people are lonely and vulnerable.
- A lack of adequate housing can contribute to abuse, especially if family members feel forced to cohabit with elders.
- The extent to which society tolerates aggression and crime is thought to be related to the incidence of elder abuse.
- Violence may be seen as a normal and acceptable way to respond to stress in families with a history of such behaviour.
- Within institutions, elderly residents may be powerless and vulnerable, and staff may be underpaid, underqualified and overworked. These factors create a climate that can contribute to elder abuse.²

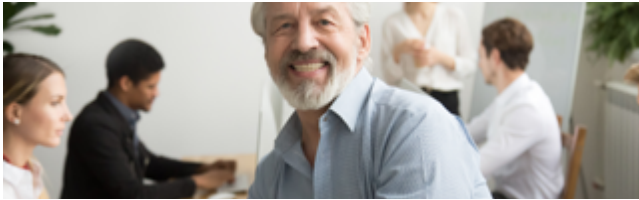


WHAT CAN BE DONE ABOUT ELDER ABUSE?



PUBLIC EDUCATION:

Both elders and the public at large need to understand more clearly what elder abuse is, why it happens, how to recognize it and what can be done about it.



ENCOURAGE ELDERS TO RETAIN AS MUCH CONTROL OVER THEIR OWN LIVES AS POSSIBLE:

Knowledge is empowering, so it is important that older people know their rights. Ensuring the elderly have the power to make everyday life choices may reduce the prevalence of abuse.



ADDRESS SYSTEMIC ISSUES:

Ageism creates a social environment which makes it easier for elder abuse to occur. Abusers with stereotyped views of the elderly as frail or senile, or who feel that the elderly have less inherent worth than younger people, may rationalize their abusive behaviour.



PROACTIVE INVESTIGATION:

Proactive investigation and successful prosecution may lead to a significant reduction in elder abuse. Even when elder abuse cases are discovered, they are notoriously difficult to prosecute and often result in what many see as insufficient deterrence.



INCREASED RESOURCES:

Victim services and prevention programs are not readily or uniformly available. Many organizations believe there needs to be a national hotline to report abuse, some obligation on the part of frontline service providers to report any abuse they see, and specialized training and resources for investigators and prosecutors to arrive at a conviction more effectively.



FUNDING TOWARDS PREVENTION:

Preventing the abuse in the first place is recommended. Important initiatives are scattered across the country but suffer from perennial underfunding and lack of public awareness.⁴

LEGISLATION AND REPORTING

In Canada, certain categories of abuse such as fraud, assault, sexual assault, uttering threats and criminal harassment are crimes under the Canadian Criminal Code. Elder abuse is not an offence in itself but is covered under the current code. Something that is a Criminal Code offence does not cease to be an offence because the person is a senior.

Some of the Criminal Code provisions that may apply in cases of elder abuse include⁶:

FINANCIAL ABUSE

- Theft (s. 322, 328-332, 334)
- Theft by holding power of attorney (s. 331)
- Stopping mail with intent (s. 345)
- Criminal breach of trust (s. 336)
- Extortion (s. 346)
- Forgery (s. 366)
- Fraud (s. 380)

PHYSICAL ABUSE

- Murder (s. 229-231, 235)
- Manslaughter (s. 234, 236)
- Assault (s. 265-268)
- Assault with a weapon or causing bodily harm (s. 267)
- Unlawfully causing bodily harm (s. 269)

SEXUAL ABUSE

- Sexual assault (s. 271-273)
- Sexual assault with a weapon, threats to a third party or causing bodily harm (s. 272)
- Forcible confinement (s. 279.2)

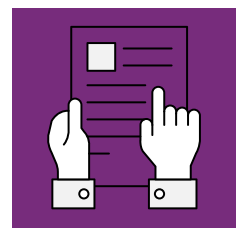
PSYCHOLOGICAL ABUSE

- Intimidation (s. 423)
- Uttering threats (s. 264.1)
- Harassing telephone calls (s. 372.2 and 372.3)
- Criminal harassment (s. 264)

ACTIVE NEGLECT

- Criminal negligence causing bodily harm or death (s. 220-221)
- Breach of duty to provide necessities (s. 215)

The Criminal Code also includes a provision (s. 718.2) that requires the court, when imposing a sentence, to take into account aggravating factors such as evidence that the offence was motivated by age- or disability-based bias, prejudice or hate.



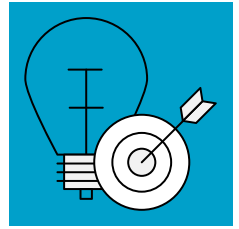


Elder abuse is underreported for a number of reasons.

The following are the most identified reasons²:

- Communicating abuse or neglect can be difficult. Victims may be mentally or cognitively impaired, or have physical disabilities, or literacy and language problems that severely limit their ability to understand or report the crime.
- Dependence on the abuser as a caregiver, friend or family member can cause fear of retaliation from the abuser.
- Abused individuals may have limited options to seek help, especially when dependence is coupled with isolation. In some cultures, interfering in other people's families is discouraged, leading family, friends and authorities to often err on the side of privacy rather than action or investigation in suspected cases of elder abuse.

ELDER ABUSE TOOL



RECOGNIZE AND ASSESS ELDER ABUSE TOOL

The following checklist and tool will allow you to recognize red flags that will bring you to a set of questions for both you and the older adult you are supporting. Asking the right questions can be difficult, particularly if the older adult you are supporting has a cognitive impairment or disability that has rendered them in need of a Substitute Decision-Maker (SDM), or if they have a Power of Attorney (POA) and you suspect that the SDM or POA is the potential abuser. Knowing if you can/should ask the caregiver/SDM/POA is part of the assessment before you begin to ask questions. Knowing the signs and symptoms of potential abuse ahead of time will allow you to be proactive in taking steps to end the abuse.

Financial Abuse

- ☐ Change in senior's appearance
- ☐ Appears confused about his/her banking
- ☐ Banking occurs with a relative/caregiver/stranger who may be getting money from the senior

Questions:

1. Does the senior appear to live by a lower standard than others living in the home?
2. Has there been a sudden change in standard of living, residence or living arrangement?
3. Does the senior refuse to spend money without consulting someone?
4. Is there an unexplained or sudden establishment of a POA, disappearance of possessions or inability to pay bills? Are there unexplained or sudden account withdrawals or changes in the senior's will?

Questions for the older adult, if appropriate:

1. Have you ever been asked to sign papers you didn't understand? Tell me about it.
2. Does anyone ever take anything from you or use your money without your permission? Can you give me an example?
3. Who handles your finances? Are you comfortable with how they handle them?
4. Do you have any close family members who abuse drugs/alcohol or have a psychiatric or mental illness?

Notes if financial abuse is present:

Physical Abuse

- ☐ Change in hygiene, grooming
- ☐ Inappropriately dresses for the season
- ☐ Skin shows signs of dehydration, lacerations, burns, bites
- ☐ Bruises in unusual locations; patterns of injury; bruises distant from the site of injury
- ☐ Presence of abrasions
- ☐ Multiple hospital admissions for fractures, unexplained injuries, history of "accidents"

Questions:

1. Is the senior anxious around the family member/other caregiver?
2. Is the senior physically isolated from everyone with no access to a phone or lifeline?
3. Is there evidence of poor hygiene or lack of medical aids?
4. Are there unexplained injuries (for instance, grip marks on the forearms?)

Questions for the older adult, if appropriate:

1. Does anyone ever touch you without your consent?
2. Can you tell me about a time recently when someone made you do something you didn't want to do?
3. Does anyone close to you ever try to hurt you?

Notes if physical abuse is present:

ELDER ABUSE TOOL

Sexual Abuse

- ☐ Difficulty sitting or walking
- ☐ Bloody or stained clothing
- ☐ Bruising and swelling in vaginal/rectal area
- ☐ Unexplained venereal disease or genital infections
- ☐ Reddened, itchy, painful genital area
- ☐ Behavioural changes

Questions:

1. Is there evidence of other types of abuse?
2. Have you asked the senior about the nature and quality of their relationship with the other caregiver and the conditions of the home?
3. Have you spoken to the senior about safety planning and community resources?

Questions for the older adult, if appropriate:

1. Does anyone ever touch you without your consent?
2. Can you tell me about a time recently when someone made you do something you didn't want to?
3. Are you alone a lot?
4. Does anyone close to you ever try to hurt you?

Notes if sexual abuse is present:

Psychological Abuse

- ☐ Caregiver communication (negative, angry, aggressive, etc.)
- ☐ Depression, fear, anxiety or withdrawal
- ☐ Behavioural changes when caregiver enters/leaves the room

Questions:

1. Have you noticed sudden changes in the older adult's behaviour (e.g., depressed rather than content?)
2. Does the senior appear fearful of family and/or other caregivers?
3. How do family members behave toward the older adult? Are they verbally abusive? Do they always speak for the older person?

Questions for the older adult, if appropriate:

1. Can you tell me about a time recently when someone talked to you or yelled at you in a way that made you feel bad about yourself?
2. Does anyone ever scold or threaten you? Can you give me an example?
3. Does anyone ever tell you that you're sick when you know you aren't? Can you give me an example?
4. When was the last time you got to see relatives or friends?
5. Do you have access to a telephone? if no, why not?

Notes if psychological abuse is present:

ELDER ABUSE TOOL

Neglect

- ☐ Inadequate staffing in institutions, improper feeding techniques
- ☐ Poor nutritional status; burns
- ☐ Prescriptions not filled appropriately
- ☐ Doctor shopping, pattern of missed/cancelled appointments
- ☐ Lack of privacy
- ☐ Needed medical/health aids not obtained
- ☐ Untreated medical conditions

Questions:

1. Does the family/other caregiver appear indifferent to the needs of the senior?
2. Is there evidence of no one visiting the senior?
3. Is the senior left alone for long periods of time with no stimulation?
4. Does someone else always answer questions on behalf of the senior?
5. Does the senior live in the basement while the rest of the family lives upstairs? Is the senior physically able to climb the stairs to get to the rest of the house?
6. Is the senior living in unsafe living conditions such as filth, fire hazards, with hoarding or without heat?

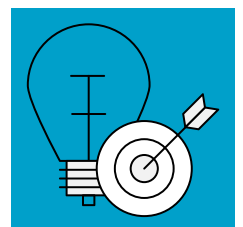
Questions for the older adult, if appropriate:

1. Are you getting all the help you need?
2. Are you having any problems getting to your doctor's office, pharmacy, etc.?
3. Are you alone a lot?
4. Does anyone ever let you down when you need help?
5. Do you feel that your food, clothing and medications are available to you at all times?
6. When was the last time you got to see relatives/and or friends?
7. Do you have access to a telephone? If no, why not?
8. Do you have the glasses/dentures/cane that you need? If no, why not?

Notes if neglect is present:

RISK ASSESSMENT TOOL

There are many forms of elder abuse, and there is not one single response to every incident. If reporting abuse is required, it does not necessarily stop the abuse or resolve the problem leading to the abuse. The obligations of the person making the report do not necessarily end when the report is made as the reporter may still have other obligations (i.e., to give assistance to the alleged victim).



ELDER ABUSE DECISION DIAGRAM

Symbol



Meaning

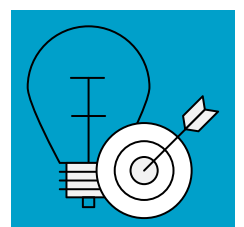
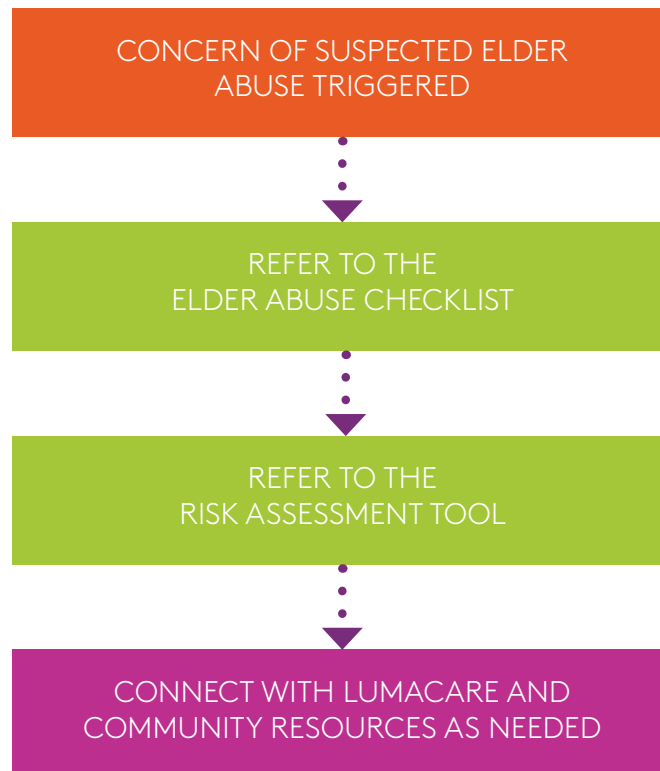
Start of Process



Task for steps in progress



Stop or end point

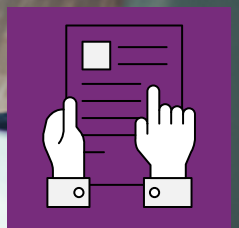


We know you care about the confidentiality of the person you are serving; however, caregivers are to disclose information only when required or allowed by law to do so or when clients have consented to disclosure.⁷

WHEN TO BREACH CONFIDENTIALITY

Examples of when you are required by law to breach confidentiality:

1. When an individual is a danger to him or herself
2. When an individual is a danger to others
3. When a child is involved (Children's Aid Society must be informed)



TIPS

Elder abuse by a caregiver is sometimes attributed to caregiver stress. Although stress is never an excuse to abuse an elder, it may be a good idea to address this and help the caregiver find respite options. To assess caregiver stress, consider completing the Caregiver Abuse Screen (CASE) which is intended for use with caregivers of seniors, whether or not abuse is suspected. The "Yes" responses on each of the eight CASE items may stimulate discussion and reveal abuse and/or neglect that might otherwise have gone undetected (see Appendix B).⁴

Try to shed light on abuse. If you think you are speaking with a potential victim, try using it as an educational moment rather than an investigatory conversation.

Be mindful of the abused person's gender or sexual orientation and comfort level, remembering that they may have ambivalent feelings about speaking out.

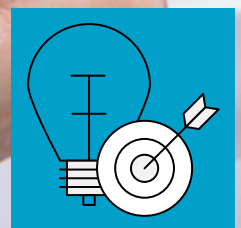
It is best to ask questions away from the location where you suspect the abuse is taking place as the person may be afraid to speak up if there is a chance of being overheard by the abuser or someone who will relay the information.

Avoid leading questions. Instead of questions that begin with "why", try using open-ended questions that are based on previous disclosures and observations. For example, you could ask "When was the last time you saw your doctor?"

If the victim denies the assault, it is very important to remain calm. Do not express judgment, anger or other emotions towards either the victim or the offender. Tell the victim you are concerned about their safety. If the victim becomes angry or overly anxious, ask if you can come back another day.

If the potential victim has speech and/or language limitations, ask "Yes", "No" or "Pass" questions using large cards. Ask the person to point to the answer (if they can) or nod. Anatomical drawings can be used to elicit details for nonverbal answers.

Educate yourself. In addition to this toolkit, there are many other resources to help you further your knowledge and skills. Please refer to additional resources available in Appendix A.



CONCLUSION

Elder abuse is an underreported yet real issue that can affect not only the victim but their entire family structure. Currently, it is woefully misunderstood, but can be treated and prevented.

CARP has called for more services to support families that are facing the physical and mental challenges of elder abuse, and to help prevent tragedies of abuse through an increase in intervention. Appropriate agencies and services can provide a comprehensive response to this significant social problem. Furthermore, the organization asserts that the legal system must step up by invoking laws and making legislative changes to deter perpetrators and encourage them to seek support before it is too late.⁴

Lumacare is an advocate for changes and improvements that would see an end to elder abuse, including:

- The addition of the “duty to report” provision to the Criminal Code (similar to the requirement to report suspected cases of child or spousal abuse).
- A provision in the Criminal Code for crimes against the elderly that can result in heavy penalties, similar to tough penalties that can be imposed for hate crimes.
- A new criminal office for elder abuse victims.
- Support services and increased elder shelters.
- A comprehensive strategy to eradicate elder abuse with: adequate financial and legal resources; training and support for law enforcement; caregiver support; and policies and laws that protect older Canadians from abuse.
- The introduction of an elder abuse hotline.
- Specialized investigative support for existing criminal offences.



Please join us in our efforts to

END
ELDER ABUSE.

APPENDIX A

ELDER ABUSE RESOURCES

NOTES

GENERAL

Lumacare

416.398.5511 or
stopelderabuse@lumacare.caResponse time within
48 business hoursHome and Community Care
(HCC)416.222.2241
www.health.gov.on.ca/
en/public/programs/lhin

CRISIS LINES

Distress Centres of
Greater Toronto

416.408.HELP (4357)

Seniors Crisis Access Line

416.619.5001

Seniors Safety Line

1.866.299.1011

Toronto Crime Stoppers

416.222.TIPS (8477)

Toronto Police Service

416.808.2222

INFORMATION LINES

Public Health Agency of Canada

416.973.0003

Division of Aging and Seniors

Seniors Canada

1.800.622.6232 (toll free)

Seniors Information Line

1.888.910.1999 (toll free)

Ontario programs and benefits

416.314.7511
1.866.299.1011 (toll free)

LEGAL ADVICE

Advocacy Centre for the Elderly

416.598.2656
<http://www.advocacycentreelderly.org>Information for Community
Resources

COUNSELLING

Family Service Toronto

416.595.9230
<https://familyserVICEToronto.org>

TRAINING RESOURCES

Elder Abuse Ontario

www.elderabuseontario.comRegistered Nurses' Association of
Ontario (RNAO)www.RNAO.ca/elder-abuse

APPENDIX B

CAREGIVER ABUSE SCREEN TEST (CASE)¹¹*Please answer the following questions as a helper or caregiver:*

YES NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Do you sometimes have trouble making _____ control his/her temper or aggression? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Do you often feel you are being forced to act out of character or do things you feel badly about? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Do you find it difficult to manage _____ 's behaviour? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Do you sometimes feel that you are forced to be rough with _____ ? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Do you sometimes feel that you can't do what is really necessary or what should be done for _____ ? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Do you often feel you have to reject or ignore _____ ? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Do you often feel so tired and exhausted that you cannot meet _____ 's needs? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Do you often feel you have to yell at _____ ? |

Interpretation:

After a caregiver completes the entire screen, the "Yes" responses are tallied. The more "Yes" responses, the more likely the presence of abuse. Each "Yes" response should also be probed for clinical information. To further assess the situation, the worker should ask the caregiver to explain his or her answer.

In addition to indicating current abuse by caregivers, caregiver responses to CASE may be indicative of tendencies and stresses that could lead to possible abuse in the future. In such cases, a proactive approach to intervention may help prevent the development of abuse.

**Screen provided by the National Institute for the Care of the Elderly (NICE) and validated¹²*

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NOTES

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