UNDERSTANDING AND RESPONDING TO Elder Abuse
Acknowledgments

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A. Elder Abuse and Neglect

A.1 What is Abuse and Neglect of Older People?
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A.1 What is Abuse and Neglect of Older People?

The terms “seniors” or “older adults” or “older people” are used to describe people from as young as 55 years of age, however, the most common definition of seniors in Canada is those aged 65 or older.

Abuse and neglect of older adults means any action or inaction by any person that causes harm or risk of harm to an older person. When there is an expectation of trust, the consequences can be particularly harmful. Elder Abuse includes physical, mental or emotional harm, or damage or loss in respect of financial affairs (i.e. financial abuse). Examples include intimidation, humiliation, physical assault, sexual assault, overmedication, withholding needed medication, censoring mail, invasion or denial of privacy or denial of access to visitors, neglect and self neglect. Neglect is the failure to provide the necessities of life, including adequate food, shelter, health care, personal care, protection, emotional care, and other attentions necessary for a reasonable quality of life. Many types of abuse, and some types of neglect, are criminal offences. All types of abuse and neglect are harmful.

Acts of abuse or neglect can be a one-time occurrence or a number of acts or behaviours that start in small ways and escalates over a period of time into more overt or violent behaviours. These acts may, or may not, constitute criminal offences.

Police-reported family violence against seniors, 2009

Police reported nearly 7,900 senior victims of violent crime in 2009. Of those where the accused-victim relationship was known, over 2,400 or about one-third (35%) were committed by a member of the victim’s family. Another 35% were committed by a friend or acquaintance and 29% by a stranger. (Family Violence in Canada, A Statistical Profile. Statistics Canada – Catalogue no. 85-224-X, page 27)

Although senior men were more likely than senior women to be the victim of overall violent crime, family-related violent crime was more often perpetrated against senior women than senior men. In 2009, family members committed 41% of all victimizations against senior women compared to 23% of victimizations against senior men. Senior men were more likely to be victimized by an acquaintance or a stranger than a family member. Family-related victimizations against senior men were most often committed by grown children in 2009. Senior women were almost equally likely to be victimized by their spouse as their grown child. Common assault, the category of least serious physical harm to victims, was the most common violent offence committed by family members against seniors in 2009. This offence accounted for more than half (53%) of all family violence. Another 21% of family-related violence involved uttering threats, 13% were major assaults (levels 2 and 3) and 4% were criminal harassment. The remaining 9% involved a variety of violent offences including sexual assault, robbery and extortion. These proportions were similar for both male and female senior victims. (Family Violence in Canada, A Statistical Profile. Statistics Canada – Catalogue no. 85-224-X, page 28).
Abuse of older people is similar in terms of dynamics to violence in other relationships. Abusers are usually people already in a relationship with or known to the victim, and use power in a way to get what they want. Whatever else is happening in the situation, older people tend to have far less power than the person who is mistreating them.

But there are also differences in the forms and dynamics of abuse of older people. For example:

- A pattern of abuse and neglect may begin with restriction of an older person’s choices and undermining of the older person’s dignity and respect. Abusive or neglectful behaviours may be rationalized by the need to “care for” the older person.

- The exercise of control on the part of an abuser may lead to a range of abusive behaviours. These early stages of abuse and neglect of an older person may be enabled by the person’s separation from supportive family or friends, as isolation is one of the most dangerous risk factors for older adults.

- The people abusing are often emotionally or financially dependent in some way on the persons they are victimizing and therefore feel a greater investment in maintaining control.

The consequences of abusive tactics are profound for older people, including loss of control over resources and actions; loss of dignity, confidence and self-esteem; loss of strength and ability to assert themselves; anxiety, confusion and depression that can be mistaken for loss of capability; and separation from other people who could potentially offer support and help.

While the vast majority of older adults who are experiencing abuse are mentally capable, a few are not.

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A.2 Types of Abuse and Neglect

There are many types of elder abuse. Older people may experience more than one type of abuse at the same time.

**Physical Abuse**

Any act of violence or rough treatment causing injury or physical discomfort. Physical abuse can range from slapping or shoving to severe beatings. Examples include: pushing, hitting, rough handling, shoving, kicking, pinching, burning or biting. It also includes the inappropriate use of medications and physical restraints and physical punishment of any kind. Physical abuse may result in injuries in various stages of healing, limb and skull fractures, bruises, sores, cuts, punctures, sprains, internal injuries/bleeding, dislocations, black eyes, welts and bondage marks (signs of being restrained). The intentional application of force, directly or indirectly, without that person’s consent is considered “assault” in the *Criminal Code*.

**Emotional and/or Psychological Abuse**

Psychological or emotional abuse consists of the intentional infliction of mental harm and/or psychological distress upon the older adult. Verbal and emotional abuse can include yelling, swearing and making insulting or disrespectful comments. Psychological abuse involves any type of coercive or threatening behavior that sets up a power differential between the older adult and his or her family member or caregiver. Psychological abuse includes any act, including confinement, isolation, verbal assault, humiliation, intimidation, infantilization, or any other treatment which may diminish the sense of identity, dignity, and self-worth of the older adult.

When a family member, a caregiver or another person behaves in a way that causes fear, mental anguish or emotional pain or distress, the behavior can be regarded as abusive. It can also include treating the older person like a child and isolating the person from family, friends and regular activities through force, threats or manipulative behavior. Examples include: threatening the older adult, insulting the older adult, excluding the older adult.
adult from decision making when the person is capable.

Often psychological or emotional abuse is used in combination with other types of abuse or neglect to control the behaviour and the life of the older person. Many forms of psychological or emotional abuse may constitute a criminal offence, including criminal harassment, threats, or intimidation.

**Sexual Abuse**

Sexual abuse consists of a wide spectrum of behaviors including any sexual behaviour directed toward an older adult without that person’s full knowledge and consent. Examples include: sexual assault and sexual harassment.

As for people of any age, any sexual activity with someone without that person’s consent is a crime. Even when they are married, it is a crime to force any sexual conduct on another person. This includes unwanted kissing, fondling or sexual intercourse, continuing sexual contact when asked to stop, and being forced to commit unsafe or degrading sexual acts.

Older people are especially vulnerable to this type of abuse since it may not always be clear whether an older person has the capacity to consent or whether their consent has been voluntarily given. Capacity to consent may be affected by cognitive impairments that accompany age-related medical conditions (such as Alzheimer’s), difficulties in communicating (after a stroke for example) and/or medications that may temporarily compromise a person’s ability to make a free and informed decision. Further, consent may be vitiated where the older person has been pressured, coerced or threatened – consent is considered voluntary only in the absence of pressure or duress.

Older people’s vulnerabilities are also increased by their reluctance to report such abuse. Older people with developmental or cognitive disabilities may have difficulty distinguishing between normal physical caregiving and sexual assault. Others do not trust their own feelings of having been assaulted or may feel overwhelming shame or guilt so will not report the abuse. Some fear negative reactions from those to whom they might report or fear that they will not be believed. Many fear retaliation by the abuser – since the abuser is usually someone they rely on for care, it can be very dangerous to report the assault. Furthermore, the stereotype that older adults are not sexual or sexually attractive is a barrier to the detection of sexual abuse in this population.

**Financial/Material Abuse**

Financial and material abuse is the misuse, misappropriation, and/or exploitation of an older adult’s funds and assets without that person’s knowledge and/or full consent, or in the case of an older adult who is not mentally capable, not in that person’s best interests; or the misuse of an Enduring Power of Attorney. Examples include: use of an older adult’s money for purposes other than what was intended by the older adult, cashing pension or other cheques without authorization, forgery, purchasing expensive items with the older person’s money without that person’s knowledge or permission, or denying the older person access to his or her own funds or home.

Financial/material abuse includes the improper use of powers of attorney, representation agreements, trusts, or guardianships. It also includes a variety of Internet, telephone and face-to-face scams perpetrated by sales people—or even by so-called friends—for health-related services, home repair services, mortgage companies and financial services. In some cases, coercion of the person is used so that the older person agrees to give
someone money but only because they are placed under pressure to do so by someone.

Consumer fraud is more likely to be initiated by strangers who may try to establish a relationship with the person they are victimizing. Repeated victimization of older people is considered to be the cornerstone for illegal telemarketing. As older people are likely to have a regular monthly income in the form of benefit or pension cheques, or to have accumulated assets, they become targets for consumer scams by strangers.

Many assets acquired earlier in life, even modest homes, have greatly increased in value, making older adults a target for financial exploitation. It is believed that, when the financial abuse is perpetrated by someone known to the victim, financial and emotional abuse are frequently linked. A common example is family members who do not wait for a death. They take over assets with the excuse that the current owner “doesn’t really need it” or under the pretense of safekeeping. In other situations older people are pressured to share or give away assets and money and then left without the basic necessities of life. Financial abuse is a crime, some examples of Criminal Code offences include fraud, forgery, theft and extortion.

Passive and Active Neglect

With passive and active neglect the caregiver fails to meet the physical, social, and/or emotional needs of the older person. The difference between active and passive neglect lies in the intent of the caregiver. With active neglect, the caregiver intentionally fails to meet his/her obligations towards the older person. With passive neglect, the failure is unintentional; often the result of caregiver overload or lack of information concerning appropriate caregiving strategies.

Examples of active neglect include: denying the older person food/water, denying visits from family or friends. Examples of passive neglect include: caregivers may be unaware of the full needs of the older person; unable to psychologically adjust to the older person’s changing abilities; unable to give care because of their own advancing age; or too stressed or exhausted to meet those needs.

Self Neglect

Sometimes older adults harm themselves through self-neglect (e.g. not eating, not going to the doctor for needed care), compulsive hoarding or alcohol or drug abuse. In this E-book, the focus is on elder abuse perpetrated by others. However, one of the most difficult problems family members face is achieving a balance between respecting an older adult’s autonomy and intervening before self-neglect becomes dangerous.
A.3 Risk Factors of Elder Abuse

There is no clear reason for abuse. Its causes are both complex and concealed. There are various factors, often overlapping, that contribute to the risk of abuse or neglect of an older adult. Some key risk factors for abuse include: dependency, family conflict, isolation, psychological problems and addictive behaviours, and caregiver (sometimes called carer) stress.

Dependency

Older people are at risk of abuse from people with whom they live and share a relationship of dependency. This dependency may be due to physical impairments such as physical frailty, disability, or cognitive impairments such as dementia. These impairments may hinder the person leaving the abusive situation or reporting the situation. Some abusers who are dependent on the person they care for may feel trapped or powerless, and perpetrate abuse because of frustration or fear. Whilst older people who are abused are often dependent on others for all or part of their day-to-day care, the abuser may also be dependent on the person in order to meet their own physical, psychological, social, emotional or financial needs.

Family conflict

Abuse can be a continuation of domestic violence or family violence that re-emerges as abuse in the caring situation. Similarly, a child who was previously abused may now be a primary caregiver and repeat the cycle of abuse to a dependent parent or child. In some families violence is considered the normal reaction to stress, and it may continue from generation to generation. People are also at risk when two or more generations live together and intergenerational conflict exists. In cross-cultural situations where two or more generations hold different cultural values or roles, tension and conflict can place dependent people at risk of abuse.

Isolation

Abuse and neglect thrive on secrecy and isolation. Anyone can be abused or neglected - but the risk is far greater if people are separated from others with whom they can communicate openly and who would support them and keep them safe. Abuse and neglect are less likely to happen in a caring and supportive environment. Ultimately, our welfare and security depend on the people most closely involved in our lives.

The older person or caregiver may be isolated and lack social contacts or support. The following are the different types of isolation:

- Physical isolation - for example, leaving an older adult who requires care alone for significant periods of time.
- Social isolation – for example, not allowing an older adult to see friends or engage in social activities such as attending community centre events.
- Emotional isolation – for example, not engaging with the older adult or responding to their emotional needs.

Medical/psychological conditions

In many cases of physical and psychological abuse, the mental health of the abuser is implicated as the major contributory factor.
Abuse may occur when either party has:

- a period of mental illness
- a history of mental problems
- difficulty in controlling anger and/or frustration
- low self esteem or feelings of low self worth

An older person may also be considered to be at risk when they suffer from cognitive decline, for example, an older person experiencing dementia.

**Addictive behaviours**
Where the caregiver or family member has a dependency on drugs, both prescription and illicit, alcohol or a gambling problem, an older person can be considered to be at risk of abuse.

**Financial abuse transition points**
Risk factors for financial abuse include transition points in an older person's life, such as:

- widowhood for a woman with little or no experience with financial matters
- when an older person's health is changing and he/she begins relying on new-found women or men friends
- when cognitive capacity is starting to decrease
- when a person becomes dependent on others to aid with banking or shopping

**Cultural and socioeconomic factors**
There are cultural and socioeconomic factors that may affect the risk of elder abuse including:

- the depiction of older people as frail, weak and dependent
- erosion of the bonds between generations of a family
- restructuring of the basic support networks for older people
- systems of inheritance and land rights, affecting the distribution of power and material goods within families

- migration of young couples to other areas, leaving elderly parents alone, in families where older people were traditionally cared for by their offspring

**Caregiver stress**
Caring for a person who is frail or who has special needs is stressful. In many cases, other contributory factors are also present and this additional stress on the caregiver appears to be the factor that triggers the abuse. The following factors may contribute to an abusive relationship:

- financial difficulties
- lack of respite care
- inadequate support to give high quality care
- heavy physical or emotional costs of being a caregiver
- lack of recognition for the role of caregivers takes a heavy toll on the health and well-being of the caregiver
- personal stress, the caregiver may be looking after two generations, his or her own children and a dependent parent. (This “sandwich” effect can create extreme stress)
- unfamiliarity with the caring role and its responsibilities
A.4 Identifying Elder Abuse and Neglect

Vancouver Coastal Health’s ReACT program has created material that describes elder abuse, neglect and self neglect. Their website lists the indicators for abuse. These indicators are for Vancouver Coastal Health employees but are a good reference for all support workers.

The lists are categorized by the various types of abuse including:
1. Physical abuse
2. Mental or emotional abuse
3. Financial or material abuse
4. Other abuse indicators

1. Possible indicators of physical abuse

Unwanted physical and/or sexual contact or acts of violence or rough treatment:
- bruises
- burns
- bumps
- falls
- cuts, lacerations
- fractures, broken bones
- marks
- infections
- internal injuries
- pain
- fearfulness
- bed sores
- scars
- punctured ear drums
- tenderness
- black eye
- broken teeth
- scratches
- bite marks
- confusion
- grip marks
- swelling
- torn, stained, bloody clothing
- difficulty walking or sitting
- hypothermia (lowered body temperature, blue lips, cold hands, shivering)
- Any unusual pattern or location of injury such as clustered bruises or welts, or bruising along the inner arm or thigh, or any other soft body parts such as abdomen, buttocks.

2. Possible indicators of mental or emotional abuse

Any behaviour which provokes fear of violence or isolation, emotional stress or mental anguish. Any behaviour which diminishes a person’s sense of identity, dignity, or self-worth. This includes: threatening, name calling, humiliating, withholding affection, social isolation, removal of decision making rights, insulting, harassment, intimidation, and coercion.

- appears ashamed
- low self-esteem
- withdrawn, passive
- appears to recoil (flinching, cringing)
- fearful, anxious
- feels guilty without cause
- excluded from family gatherings
- loss of self determination
- does not make decisions
- “baby talk”
- depressed, hopeless, helpless
- agitated
- difficulty sleeping or needs excessive sleep
- tearfulness
- restricted access to: telephone, food, bathroom facilities, family, service providers...
- not permitted to have friends, visitors, go to church or outings

3. Possible indicators of financial or materials abuse

Any situation involving the dishonest or illegal use of an adult’s personal money or property and/or possessions. This includes: fraud, force, misrepresentation, theft, “conning”, extortion, withholding, forced changes of will or property titles, misuse of power of attorney:
- signed over power of attorney against own will
- forced to change will or sell house
- used as a babysitter/house sitter
- inadequate living environment
- unable to afford social activities
- possessions disappear such as artwork, jewelry, furs, silverware, vehicles, equipment
- unexplained or sudden withdrawal of money from accounts
- unexplained or sudden inability to pay bills
- lack of money for food, appropriate clothing, glasses, hearing aid, cane or other walking aids, dentures, or other necessities when income appears potentially adequate
- indicates papers were signed but doesn’t know what for
- rent or mortgage in arrears
- bills unpaid (particularly if paying these bills is the responsibility of the alleged abuser)
- pension cheque withheld

4. Other abuse indicators

In addition to the indicators already mentioned the abused adult may exhibit any of the following:
- history of repeated incidents of unexplained accidents or injuries
- medical history does not coincide with presenting injuries
- seek medical attention from a variety of doctors - “doctor shopping”
- postpone seeking medical attention
- frequent use of Emergency Department
- prolonged delay between time of injury and presentation for treatment
- has physical/mental limitations affecting ability for self-care
- gives information reluctantly: waits for caregiver to answer
- avoids physical, verbal, eye contact with caregiver or professional
- hesitant, inaudible, loud, rapid, slow speech
- agitated, anxious, excited, discouraged, fearful, humiliated, overly quiet, resigned, unresponsive, passive
- clenched hands
- rigid
- rocking
- suicidal thoughts or attempts
- crying
- complaints of insomnia
- cringing, flinching
- may indicate a fear of being left alone with the alleged abuser
- drug/alcohol abuse
Any checklist of indicators has limitations and should be used only as a general guide. Remember to:

- Look at the conduct of the people involved and the nature of the relationship between the older person and suspected abuser – for example, the older person is fearful, withdrawn, depressed, and isolated; the suspected abuser answers for the older person and/or is reluctant to leave the person alone with professionals.

- Look for a pattern of controlling behaviours. Ask yourself: are these actions or inactions being used to control and dominate the thoughts, beliefs, or behaviours of another person?

- Watch for patterns of harm and the potential for abusive behaviours to escalate – for example, if another person has recently moved into the house and the older person’s standard of living and well-being has since deteriorated.

- Consider that abusive behaviours have a cumulative effect. One act or failure to act may appear relatively minor when looked at by itself but, when viewed in context with other behaviours in a relationship, can be much more serious.

- Be alert to infantilization. Treating older people like children and taking away control over their affairs is a common theme in abusive relationships. Older people who depend on others for care frequently describe feeling quite demeaned as a result of the way they are treated but it can be very difficult for them to complain.

- Acts of abuse and neglect may be complicated by illness, disability, or advanced age. For example, it is more difficult to assert oneself or withdraw from a harmful relationship or the control of a person providing care or essential services.

- Ask the question - the best source of information about abuse and neglect is the individual who has experienced it. Most people can, and will, offer information about their situation if they feel safe and trust the person who is helping them.

### A.5 The Abuser: Characteristics and their Rationalization of their Behaviour

Many abusers who dominate and intimidate other people are not entirely in control of their own behaviour. Abusers may feel powerless in some aspects of their own lives; they often feel more in control of their own lives when they can control other people. Many have unrealistic expectations of themselves and/or of the person they are abusing. Greed motivates many who financially abuse. Some will rationalize their unethical behaviour by saying that the money would eventually come to them in any case.\(^1\)

People who abuse or neglect may resent expectations to provide care or support; be dependent on the older person for assistance, housing, money, or self-esteem; have substance abuse problems; have a history of mental illness or emotional problems; or be unable to cope with the stresses or demands of their own life.

- Spousal abuse, with its dynamics of power and control, continues to be one of the most common forms of violence against older people.

- Grown children exercise significant psychological – and often physical - control over their parents and are statistically frequent abusers of older people.

- Older people who are abused are not always dependent older people. They are often providing care or support to their abuser, such as a spouse or adult child.

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Abusers might rationalize their behaviour with beliefs or thoughts such as the following:

- This person (who is different from me) does not have the same needs and desires and may not even feel pain or loss
- He doesn’t need much because what does he do but sit around all day?
- She has more than her share and I have nothing
- He won’t even know or understand that I’m taking his money
- No one is going to care if I...

A.6 Why Older Adults May be Unlikely to Ask for Help

Many of the barriers older people face in asking for help are the same that people of any age would experience. For example, they will commonly feel shame, guilt, embarrassment, self-blame, or a sense of worthlessness. People who are caught in an abusive dynamic of power and control will be silenced by threats, fear, and isolation.

Like many people who are abused, older people are often trapped in abusive relationships because no one knows about the abuse and the older person is afraid to report it, does not know that what is happening to them is unlawful, or is not aware that they have any other options.

Some other factors why older adults may be unlikely to ask for help include:

- Many older people grew up at a time when a stoic “grin and bear it” attitude prevailed. Attitudes of denial or the need to endure hardship without complaining were common.
- Women in long-standing violent relationships may consider some acts of abuse to be “too minor” or a consequence of their own behaviour. In reported incidents of violence, it is not uncommon to learn that an older woman was abused throughout her marriage by her husband and then, subsequently, by her adult children.
- A belief in responsibility and loyalty first to family, not to oneself, may result in a view that some behaviours are normal or to be expected. For example, some believe that their home or money should be used by family members or that they should provide care for a spouse or family member even when it is having a negative effect on their own health.
- Older people who are blamed for “being a burden” may internalize those feelings and believe that they are responsible for the abuse or neglect because they cause stress and hardship to the person providing care.
- Older people often refuse to report crimes against them out of concern and feelings of responsibility for abusers who may be a family
member, close friend, or neighbour. This may be especially true if the abuser is emotionally or materially dependent on them or has an addiction or mental health condition.

- Historically in Canada, and still commonly in other countries, family property was passed down through the family. Older people who are influenced by this tradition might be reluctant to take action to recover goods and property taken illegally by someone who claims rights as an heir.
- Many older people grew up with a strong ethic of privacy – the belief that what occurred within the family was private.
- Many older people were raised with a strong belief that sexual matters are private and not to be discussed in public. This belief may make it very difficult for an older person to disclose anything of a sexual nature, including assault.
- There are many emotions that influence whether an older adult will recognize abuse or report it, including denial that abuse is occurring. There may be feelings of shame, embarrassment and humiliation, especially if an abuser is an adult child. This can have a strong cultural component. Older Aboriginal people and immigrants may feel a strong need to protect their cultural community from any negative exposure.
- There may be fear of an escalation of the abuse if they anger their abuser by reporting. Fear of punishment by the abuser.
- There is often fear that they will be left without anyone to care for them, sent to an institution, or cut off from people they care about.
- There can be anxiety about the stress of reporting and having to deal with authorities.
- Inability to communicate clearly because of a hearing or speech impairment or lack of fluency in English.
- They may be controlled by restraints and unable to contact relatives or friends or to communicate because of being physically restrained or sedated.
- They may be controlled by fear with no opportunity to report abuse or neglect.

A.7 Possible Reactions by Friends and Family

Non-abusive family members or friends may believe the abuser’s rationale or be confused about how to react. They may think:

- The situation is not so serious; there is no danger.
- Yes, there is abuse or neglect, but if we do something about it, then they will be all alone with no one to care for them.
- It is up to the people who are being abused to make their own decisions and they are choosing to stay there.
- The people who are being victimized will recant anyway because they won’t want to see a loved one in jail.
- Friends or family may also feel reluctant to be drawn into the situation because they fear the abuser or they themselves feel discomfort, guilt, or shame.
- We cannot be sure of exactly what is happening because they are very forgetful or confused or don’t understand.
A.8 Family Stressors and Elder Abuse

When an older adult’s care needs increase or go beyond the types of help family members typically provide, their relatives may find themselves in an unfamiliar situation and not know how to offer proper care and support. Family members may unintentionally fail to ensure that the older adult has adequate and appropriate food, clothing, medical care, supervision or social stimulation. Although the overwhelming majority of family caregivers provide appropriate care and a supportive environment for their older relatives, caregiving creates stressors that affect both caregivers and care recipients and these stressors may trigger potentially harmful caregiver behaviors that place dependent elders at risk for abuse.

It is important to distinguish between caregivers who are doing what they can to help and those who have other motives for assuming a caregiving role or describing themselves as a caregiver when, in truth, they are exactly the opposite.
B. BC Government Programs and Community Services Available for Older Adults who Have Been Abused or Neglected

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B.1 Ministry of Public Safety and Solicitor General Programs for Victims of Crime

There are numerous services available across the province for victims of crime. These services are funded by or operate out of the Victim Services and Crime Prevention Division:

- The BC Government funds more than 160 victim service programs across BC that provide information, referrals, emotional support, safety planning, and practical assistance to victims of crime. Police-based victim service programs provide services to victims of all crimes. Community-based victim service programs provide services primarily to victims of family and sexual violence.

- The BC Government also funds more than 250 programs that provide assistance to women and children impacted by violence including Stopping the Violence Counselling, Children Who Witness Abuse Counselling, Outreach Services, and Multicultural Outreach Services programs.

- VictimLink BC is a toll-free, confidential, multilingual telephone service available across BC and Yukon 24 hours a day, 7 days a week at 1-800-563-0808 (www.victimlinkbc.ca). It provides information and referral services to all victims of crime and immediate crisis support to victims of family and sexual violence.

- The Crime Victim Assistance Program (CVAP) provides financial assistance to eligible victims of violent crime, immediate family members, and some witnesses to assist them in recovering from the effects of crime.

- The Victim Safety Unit (VSU) provides two main services:
  - **Victim notification** – Information to victims about the status of accused persons, offenders, or their court file. The VSU provides information to victims and victim service workers when the accused or offender is supervised by BC Corrections, either in jail or in the community. Some information may also be provided to persons protected by a civil protection order.
  - **Administration of the Victim Travel Fund** – Providing funds, up to a maximum amount per victim, for travel to criminal court proceedings in BC for victims who have suffered significant physical or emotional trauma as a result of a serious criminal offence. It also provides travel funds for one support person required by the victim in order to attend and participate in the justice proceeding, and immediate family members of deceased victims who are not eligible for travel assistance through CVAP.

In addition, the VSU works with local victim service programs to ensure that victims are aware of and have access to services for their safety and support.

The Protection Order Registry (POR) is designed to enable police to access information on registered protection orders 24 hours a day, seven days a week through a dedicated 1-800 number. The POR includes all orders containing a condition that affords safety and security to a specific (named) person. This includes peace bonds, civil restraining orders, judicial interim release (bail) orders, conditional sentence orders, psychiatric assessment orders, disposition orders, and officer-in-charge releases. Protected parties named in an order can confirm at anytime, through VictimLink BC, that the order is registered in the POR. The protected party can obtain copies of the order, if needed, through the Victim Safety Unit (VSU) during regular business hours Monday-Friday, 8:30am – 4:30pm.
B.2 BC Association of Community Response Networks

The BC Association of Community Response Networks (BCCRN) works at the local community level with service providers, agencies, and committed community members to build a coordinated community response to the abuse, neglect and self-neglect of vulnerable adults.

A Community Response Network (CRN) is comprised of individuals, groups and agencies that work together at a community level to promote a coordinated community response to adult abuse and neglect. CRN members can be anyone in the community concerned about adult abuse and neglect including designated agencies, police, community organizations serving specific groups, faith communities, financial institutions, advocacy organizations and concerned citizens.

Key purposes of the Association are:

- to promote safe communities, through the development of community networks where individuals and private and public sector organizations can participate in activities to prevent abuse, neglect and self-neglect of adults
- to support communities in their responses to adults who are experiencing or at risk of experiencing abuse, neglect or self-neglect
- to sustain these community networks by establishing a diversified funding base for their activities to support other initiatives that benefit adults experiencing or at risk of experiencing abuse, neglect or self-neglect

B.3 BC Centre for Elder Advocacy and Support

The BC Centre for Elder Advocacy and Support (BC CEAS) is a non-profit, charitable organization committed to protecting the legal rights of older adults; increasing access to justice for older adults; informing the public about elder abuse; and providing supportive programs for older adults who have been abused.

BC CEAS has several programs which focus on helping older adults access the justice system or understand their legal rights, including:

- Seniors Abuse & Information Line
- Victim Services Program
- Legal Programs

BC CEAS raises awareness about elder abuse and educates the public about the rights of seniors through several publications and resources available online and educational programs, including:

- The Seniors Reaching Out to Seniors Program;
- Various community workshops and presentations and;
- Forums and other events.

It is difficult to generalize about what older victims of abuse and neglect most need because of the wide range of circumstances of these older victims. Older victims of abuse or neglect may be in robust mental and physical health or living with degrees of frailty and incapability. The abuse may have been going on for many years or it may have begun only recently.
B.4 Designated Agencies

Under Part 3 of the Adult Guardianship Act, anyone who believes that an adult, (a person 19 years of age or older) is being abused or neglected and unable to seek support and assistance due to:

- **a)** physical restraint,
- **b)** a physical handicap that limits their ability to seek help, or
- **c)** an illness, disease, injury or other condition that affects their ability to make decisions about the abuse and neglect can make a report to a designating agency.

**Designating Agencies** are:

- The five regional health authorities (Vancouver Island, Vancouver Coastal, Fraser Health, Interior Health, Northern Health) and Providence Health Care
- Community Living BC for adults with a developmental disability who are eligible for their services

Designated agencies have identified and trained staff to conduct abuse and neglect investigations. Contact the designated agency involved with the adult to determine who the designated responder is or to make a report.

When a designated agency receives information about possible abuse, neglect, or self-neglect of an adult who is vulnerable due to the conditions above, it must:

- **Look into the situation.** Designated agencies have the mandate to investigate situations of suspected abuse and neglect even if the adult isn’t currently a client or patient of the agency. They have authority under the Adult Guardianship Act to enter the premises for this purpose. Police may be asked to accompany staff of designated agencies to check on the health or safety of an adult when staff has reason to believe that they or the adult could be in danger.

- **Involve the adult as much as possible.** Designated agency staff are required to consult with the adult to determine if abuse or neglect is occurring and what form of support or assistance is needed. If staff are denied access, they may make an application for a court order to enter. If the court application involves a delay that could result in harm to the adult, a justice of the peace may issue a warrant authorizing someone from the designated agency to enter to interview the adult. In emergencies, designated agencies may take immediate action to save a life or prevent serious harm to an adult or the adult’s assets.

- **Report criminal offences.** The Act requires designated agency staff to report suspected criminal offences against an adult (someone aged 19 or older who is unable to seek support and assistance) to the police. Many of the protocols between designated agencies and police provide for these reports to be made to a senior officer. In many communities, designated agency staff will telephone their local police contacts to consult about troubling situations.

After talking to the adult and making some inquiries about a suspected situation of abuse and neglect, designated agency staff may:

- Take no further action
- Refer the adult to other services or involve another agency
- Assist the adult in obtaining a representative under a Power of Attorney or representation agreement
- Apply to the court for an interim order under the Adult Guardianship Act (for a period of up to 90 days) requiring a person:
  - to stop residing at and stay away from the premises where an adult lives, unless the person is the owner or legal occupant of the premises
• not to visit, communicate with, harass, or interfere with the adult
• not to have any contact or association with the adult or the adult’s assets or financial affairs, or
• to comply with any other restriction of relations with the adult

• Apply to the court for an order for the adult’s maintenance
• Prepare a support and assistance plan that specifies any services needed by the adult, including health care, accommodation, social, legal, or financial services

The role of the designated agency is to determine what supports and assistance are required to make the adult safe while respecting the adult’s rights to live at risk and to autonomy. Staff may prepare a support and assistance plan that offers services and supports to vulnerable adults, but they will only make an application to court to impose this plan on an adult who is refusing offers of help if:

• there are no other options to address the abuse or neglect, and
• the adult is incapable

In practice, designated agencies will work with the adult and anyone supporting the adult to find ways to resolve the abuse or neglect before resorting to an application to the court for one of the orders described above.

While the Adult Guardianship Act does provide for an interim type of restraining order, it is often more effective to collaborate with police to obtain “no contact” or “no go” orders through the criminal justice system.

B5. Public Guardian and Trustee

The Public Guardian and Trustee (PGT) mandate is to serve:

• Children and youth under the age of 19 by protecting their legal and financial interests;
• Adults who require assistance in decision making through protection of their legal rights, financial interests and personal care interests; and
• Heirs and beneficiaries of deceased persons when there is no one willing or able to administer their estates, the estates of missing persons, and the beneficiaries of personal trusts.

The PGT’s Services to Adults Division has three main functions including the Assessment and Investigations Service in Services to Adults which investigates adult financial abuse and neglect where there is reason to believe the adult is mentally incapable.

To make a referral about an abused or neglected adult who may be mentally incapable of making financial and legal decisions, contact the appropriate regional office and ask to speak with the Regional Consultant who serves the community where the adult lives.

Depending on the details of any given situation Regional Consultants can:

• consult on complex abuse/neglect situations where there are concerns about a substitute decision maker’s actions or where a substitute decision maker may be needed
• investigate actions of trustees, representatives, or attorneys when the adult may be incapable
and there are concerns about financial mismanagement

- use protective measures like temporarily restricting access to bank accounts or preventing property transfers during an investigation
- get an accounting of how the adult’s funds are being spent
- collaborate with designated agencies to address other forms of abuse that may be co-occurring with the alleged financial mismanagement
C. Working with Older Adults who Have Been Abused and/or Neglected

C.1 What to do if an Older Person is Being Abused

C.2 Working with Older Adults
   C.2.1 Sensitivity to Cultural Factors

C.3 Communication Techniques for Working with Older Adults
   C.3.1 Common Neutralization Techniques and Strategies for Addressing Them

C.4 Assisting Older People to Take Action
   C.4.1 Safety Planning
   C.4.2 Assisting Older Victims Through the Criminal Justice System
C.1 What to do if an Older Person is Being Abused

The best source of information is usually the older people themselves. If you think an older person is being abused or neglected, ask them respectfully but directly, in plain language, if they are being abused or neglected. Once a relationship of trust has been established, older people may answer direct questions about their situation with candour. You will not usually get all the relevant information at once. Sometimes, of course, older people cannot talk about what is happening to them because it is not safe to do so.

As acts of abuse or neglect tend to escalate or get worse, if a situation has been undetected for some time it may be necessary to act quickly. A very dangerous time for victims in an abusive relationship is when they try to get help or make a change, because this is when abusers feel most threatened with the possible loss of control that could result from the disclosure.

If an older person indicates to you that they are being abused, consider the following suggestions:

- Consider the need for urgency or emergency action to protect the older person’s safety or property.
- Obtain the older person’s permission to involve other people if needed.
- Contact the Office of the Public Guardian and Trustee or a designated agency if necessary.
- Remember that the problem and the solution both belong to the person you are helping, as he/she must live with the consequences of any action taken.
- If you ask older people being victimized what would make life better for them, you might be surprised by the answer. People frequently come up with their own solutions.
- Have a discussion about safety planning with the older person.
- Familiarize yourself with resources in your community, such as the Community Response Networks which consist of local people and organizations who coordinate support and assistance for adults who are at risk or already experiencing abuse, neglect, or self-neglect.
- Contact the Seniors Abuse and Information Line, operated by the BC Centre for Elder Advocacy and Support.
- Many communities have senior counsellors or senior peer counsellors who are knowledgeable about resources for older people and can often help with application forms for pensions and benefits. These volunteers, usually seniors themselves, are often well known and active in their communities.
- Transition houses and/or women’s shelters provide temporary shelter and are also able to provide support services such as crisis intervention, emotional support, information, referrals and safety planning.
- Telephone directories in each area of the province list a number of local services under the heading “Services for Seniors”. Government contact numbers, both federal and provincial, are listed in the Blue Pages of telephone directories or online for the federal and provincial governments.
- Be the objective voice. There is no justification for abuse. Give older people permission to stop the bad behaviour of people close to them.
C.2 Working with Older Adults

Be aware that the needs of older people may differ from those of other age groups. For example:

- Older people may have different fears and values than younger people.
- Valuable assets, such as their homes, may make older people more of a target for exploitation.
- Pensions and other entitlements for older adults may make it financially possible for them to leave an abusive situation. However, learning about the benefits that are available and gaining access to them requires a certain amount of skill and perseverance. To learn more about benefits available to seniors, read *When I’m 64: Benefits*.
- Some older people have low literacy, which can be even lower among those whose first language is other than English.
- Some older people might have difficulty in reading and understanding complex matters or in understanding how to utilize technology.
- It is not uncommon for someone who is traumatized, depressed, or grieving to have difficulty remembering or making decisions. It may take longer or require medical treatment before someone who has been abused or neglected will be able to recall or to process information.
- An older person living with physical and mental disabilities or serious illness will likely need ongoing assistance. With the permission of the older person, it may be advisable to involve supportive relatives, neighbours, friends and caregivers.
C.2.1 Sensitivity to Cultural Factors

Culture and family history play a large part in shaping the attitudes and expectations of all people, including older people. These same factors also impact whether or not older people will turn to people outside the family for assistance when there is a conflict or problem. Being sensitive to cultural diversity in these situations includes:

- Making interpretation available to enable victims to communicate in their own language; be cautious about using family members as interpreters.
- Being sensitive to cultural values and beliefs including addressing concerns older people may have about protecting family members.
- Working with appropriate culturally-specific organizations to help prevent and resolve situations when necessary, and
- Ensuring that older people have knowledge about their rights and the Canadian justice system to clarify what is considered a crime and what is illegal in Canada.
C.3 Communication Techniques for Working with Older Adults

An older person’s confusion, stress, fear, or impaired communication abilities can sometimes make communication with an abused or neglected older person difficult.

Many communication barriers can be effectively overcome with the following suggestions:

- Ask permission of those who have been abused to talk with them.
- Eliminate other distractions and sounds; create a calm space in which to talk. Avoid noisy rooms or confusing environments, especially when talking to someone with a hearing or other sensory impairment.
- Position yourself so you can be seen clearly. Sit facing the person but no closer than three feet and no further than six feet.
- Establish eye contact before you begin to speak. Speak clearly and use short simple sentences. Pause frequently to encourage questions or comments. If the person does not appear to understand, repeat key words and phrases or rephrase the statement.
- Speak in a normal tone. Do not raise your voice unless hearing is an obvious problem.
- Be alert to body language and other signals and follow the lead of the person you are speaking to.
- Be sure to speak directly to the older person, if someone else in the room speaks to you, include the older person in the conversation.
- When appropriate, use open-ended questions, not questions that require a “yes” or “no” answer.
- Speak slowly; deal with one topic at a time; wait for a response.
- Watch for reactions (emotions may tell you more than words).
- Work from a presumption of capability. If you cannot make eye contact or do not receive a response right away, the older person may be concentrating.
- If someone is having difficulty remembering, use memory cues. For example, if an older person cannot remember when an incident occurred, ask questions like: “Were you watching television at the time? What was the program?” Or: “Did this happen before the mail came this morning?” Remember, though, that you are not conducting an investigative interview. You are trying to find out what happened so that you can assist victims to get the assistance they need.
- If you are advised that the person you are talking with has been diagnosed with a dementia, remember that many people with dementia can still give reliable information. Check with a health provider or someone who knows the person. Ask if there are times of the day when the older person is more alert and oriented.
- Watch for signs of fatigue.
- The presence of another supportive person in the older adult’s life may help in many circumstances, but be alert to the possibility that this person may also be abusing or neglecting the older adult.
C.3.1 Common Neutralization Techniques and Strategies for Addressing them

Many situations of abuse and neglect are deeply embedded in longstanding behaviours and relationships. Sometimes abusers try to justify and excuse their behaviour, or blame the victim in some way for what is happening:

1. **Denying the abuser’s responsibility**: the victim supports the abuser’s explanation that the abusive act was an accident or caused by stress, alcohol or another reason, or may even assume responsibility and blame themselves.  
   **Strategy**: Address the victims’ feelings of responsibility for the abuser or the abuse by assuring victims that the abuse is not their fault.

2. **Denying injury or wrongdoing**: The victim agrees with the abuser’s argument that the mistreatment did not cause significant pain, e.g. no medical treatment required; wealth will be inherited anyway; older person doesn’t need all the assets or income; or the abuse or neglect is “normal”.  
   **Strategy**: Point out to the victim the evidence that counteracts the denial of injury or wrongdoing.

3. **Blaming the victim**: Victims explicitly or implicitly agree with the abuser’s view that they are to blame.  
   **Strategy**: Help the victim to understand that what is happening is not acceptable behaviour nor their fault.

4. **Blaming those who would intervene**: The victim joins with the abuser in blaming critics, or the victim passively allows the abuser’s responses to go unchallenged.  
   **Strategy**: Be aware that the victim’s actions are a way to deny what is going on or defend the abuser.

5. **Appeal to higher loyalties**: The victim denies the abuse because of love or “higher” loyalty to the abuser.  
   **Strategy**: Focus on expression and management of the victim’s feelings, for example, “I believe you when you say you love your son. Even when he hurts you.”

6. **“It just happened once”**: Victims agree with abusers’ suggestions that it “just happened once”.  
   **Strategy**: When abuse or neglect is just a “slip” or one-time occurrence, emphasize the damage that resulted, or that might have resulted, by this action. Also, increase the victim’s awareness that even one incident/act is not acceptable.

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C.4 Assisting Older People to Take Action

Many of the ways in which you can assist older victims are similar to the ways in which you can help any victim. Remember that family members or other people who have contributed to the abuse will continue to exert control and influence. A support worker can offer an objective viewpoint and counter some of the pressure by:

- Taking a non-judgmental, respectful and empathic approach
- Empowering victims by helping them understand and sort through their options
- Helping victims come to a decision that is right for them (follow through on their choices or decisions)
- Giving victims factual information about what is going to happen next, what choices they have, what they may be required to do, or where they have no choice (for instance, if someone is subpoenaed to appear in court, they must attend)
- Assisting victims to rebuild healthy relationships and reconnect with the community

C.4.1 Safety Planning

A safety plan is a strategy that involves identifying the steps one can take to increase safety. Safety planning helps to prepare for the possibility of further abuse and neglect and provides guidelines to follow if one's safety is at risk. It is a process of discussions and putting together strategies, tools, and other resources for the purpose of enhancing the safety of the victim and reducing future harm.

Safety planning is undertaken with, rather than for, older people who have experienced abuse and neglect, except in the situations where an adult cannot seek support and assistance on their own and are in need of protection. It focuses on the expressed needs and circumstances of the victims and supplements this with the knowledge and experience of support workers.

It is a fluid process that takes place over the whole span of your relationship with an older person; responding to the risk factors that may affect their safety and to changes in their circumstances as they occur. It is important to note that safety planning cannot make older people who have been abused or neglected completely safe — it can only try to make them safer. No matter how thorough safety planning is, risk factors related to the abuser are inherently unpredictable. Therefore, no safety plan can guarantee safety.

Safety planning is neither static nor a formula for safety. It is not a prescription that meets everyone’s needs in the same way. Safety planning is important because it aims to enhance the safety of older people who experience abuse and neglect, to instill some control over their own lives and increase their ability to keep themselves safe. It gives an older person practical information and safety strategies tailored to their circumstances. Safety planning may also reduce isolation by connecting older people to community resources.

Some questions and points to assist you in the safety planning process include:

- What would they be able to do if there is an immediate danger or crisis? Can they leave or get help? How?
• Do they have access to their own money and/or legal papers?

• Is there someone who can stay at the home with them? Ask them “Who are the people you can count on for support?”

• Be guided by the strengths of the people you are helping. What strategies have they been using over the years to try and manage the situation and keep themselves safe? Be affirming about these strengths as this can be a tremendous boost to the confidence of the older person you are helping.

• Determine if an older person living at home already has a monitoring system or emergency response service for health reasons. For instance, many older people with serious health conditions are subscribers to Lifeline or Med-Alert programs.

• Work with other people to build or rebuild a support group for the older person who is being abused or neglected.

• Keep notes about occurrences, particularly if there is a possibility that medical conditions will make communication or the provision of information impossible at a later date. Follow your agencies guidelines with respect to record keeping.

• If an older person is hesitant to talk about the abuse and neglect, help the older person to recall other incidents. There is a tendency to see each event as isolated and think “it will never happen again”, rather than looking at it as one act in a pattern of behaviours that commonly escalate in severity.

• If police and/or designated agency staff are involved, work with other people involved to respect as much as possible the wishes of the older person.

C.4.2 Assisting Older Victims Through the Criminal Justice System

Some support workers such as victim service workers are mandated to assist with criminal justice processes. Older victims’ primary concern is often not for themselves but for the abuser who may be a loved one or someone for whom they feel responsibility. Older people who are victimized by people they know are often more willing to report offences when they think their abuser will get assistance or access to treatment.

Some tips on assisting older victims through the criminal justice process include:

• Provide general information about the criminal justice system, what to expect, and the rights and responsibilities as a victim and witness.

• Provide specific information about the progress of the case, including information that is essential in order to help keep themselves safe.

• Support and accompany the older adult as they proceed through the system.

• Provide strategies to meet the older adult’s special needs, including needs for physical access and language interpretation, whether the victim/witness is an immigrant or someone with communication disabilities.

• Liaise with criminal justice system personnel and provide information that will support the older person’s interactions and involvement in the process. For example, older people with disabilities may require additional support, including transportation, assistance communicating, or more time to understand information.

• Consider safety issues, for example, the potential for intimidation or violence by the accused in court or other criminal justice settings.

• Be aware that the debilitating effects of abuse and victimization can lead to feelings of guilt or self-blame, loss of self-esteem, feelings of powerlessness, and a tendency to minimize the behaviour of the accused.

• Keep in mind that there may be many reasons for a victim’s reluctance to participate in the criminal justice system including fear or threat.
D. Resources for Working with Older People Who are Victims of Abuse or Neglect

Government Services
- Government of BC
- Government of Canada

National, Provincial, and Regional Organizations
- Assistance for Adults who Cannot Seek Help
- Community Agency Assistance
- Complaints

General Information
GOVERNMENT SERVICES

Government of BC

Service BC (Enquiry BC)
Telephone:  604-660-2421 (Lower Mainland)
           250-387-6121 (Greater Victoria)
           1-800-663-7867 (toll-free outside Lower Mainland)
TTY/TDD for hearing impaired:
           604-775-0303 (Vancouver)
           1-800-661-8773 (Elsewhere in BC)
Web: http://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/technology-innovation-and-citizens-services/servicebc

Can be used to call toll-free to provincial government offices and services throughout BC during regular office hours, 8:30 am – 4:30 pm.

Ministry of Public Safety and Solicitor General
Web: http://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/public-safety-solicitor-general

• Victim Services and Crime Prevention Division
Telephone:  604-660-5199
Fax:  604-660-5340
E-mail:  victimservices@gov.bc.ca
Web: http://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/understanding-criminal-justice/key-parts/victim-services

To view Victim Services and Crime Prevention Division publications, including forms, go to:
http://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/if-you-are-a-victim-of-a-crime/publications-for-victims-of-crime
For a list of all victim services in BC, go to:

• VictimLink BC
Telephone:  1-800-563-0808
TTY:  604-875-0885
Text:  604-836-6381
To call TTY/TDD collect, call the Telus Relay Service (TRS) at 711.
Web: www.victimlinkbc.ca
VictimLink BC provides services in more than 110 languages.
• **Victim Safety Unit**  
  Telephone: 604-660-0316 (Lower Mainland)  
  1-877-315-8822 (toll-free from anywhere in Canada)  
  Fax: 604-660-0335  
  Web: [http://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/if-you-are-a-victim-of-a-crime/victim-of-crime/victim-notification](http://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/if-you-are-a-victim-of-a-crime/victim-of-crime/victim-notification)  
  
  To register for victim notification, go to:  
  [http://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/if-you-are-a-victim-of-a-crime/victim-of-crime/victim-notification](http://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/if-you-are-a-victim-of-a-crime/victim-of-crime/victim-notification)

• **Crime Victim Assistance Program**  
  Telephone: 604-660-3888 (Lower Mainland)  
  1-866-660-3888 (toll-free outside Lower Mainland)  
  Email: cvap@gov.bc.ca  
  
  To access CVAP Counselling Guidelines and Application Forms, go to:  

• **Protection Order Registry**  
  Victims can call VictimLink BC at 1-800-563-0808 to verify the status of their order.  
  Web: [http://www2.gov.bc.ca/gov/content/safety/crime-prevention/protection-order-registry](http://www2.gov.bc.ca/gov/content/safety/crime-prevention/protection-order-registry)

• **Corrections Branch**  

• **BC Prosecution Services (Criminal Justice Branch)**  
  Telephone: 250-387-3840  
  Fax: 250-387-0090  
  Regional: 1 800 455-8813 (Fraser)  
  1 888 249-9333 (Interior)  
  1 800 292-6833 (Northern)  
  1 888 339-1188 (Vancouver Island (Powell River))  
  1 800 661-2279 (Vancouver)  
  Web: [www.ag.gov.bc.ca/prosecution-service/](http://www.ag.gov.bc.ca/prosecution-service/)

This website provides access to the Crown Counsel Policy Manual:  
**Ministry of Health**

Web: [http://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/health](http://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/health)

Or call HealthLinkBC – 811

Hearing Impaired – 711

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**Seniors’ Directorate (SeniorsBC)**

Web: [http://www2.gov.bc.ca/gov/content/family-social-supports/ seniors](http://www2.gov.bc.ca/gov/content/family-social-supports/ seniors)

This website provides information about government programs and services for older adults. Includes links to information on elder abuse, advance care planning, financial programs, transportation, etc.

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**BC Seniors Guide**

In hard copy booklet and online pdf form, a compilation of information on provincial and federal programs, with sections on benefits, health, lifestyle, housing, transportation, finances, safety and security, and other services.

[www2.gov.bc.ca/gov/topic.page?id=442A501304294470A793668B377B32C3](http://www2.gov.bc.ca/gov/topic.page?id=442A501304294470A793668B377B32C3)

Also available in French, Chinese and Punjabi.

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**BC Mental Health and Substance Use Services**

An agency of the Provincial Health Services Authority, it provides a range of mental health services to people across BC, including:

- Specialized tertiary mental health treatment services for adults and children;
- Forensic psychiatric services;
- Research & knowledge exchange;
- Mental health promotion;
- [Mindcheck.ca](http://mindcheck.ca)
- [Healthy Living Toolkits for Professionals and Families](http://www.bcmhas.ca)
- [The Provincial Suicide Clinical Framework](http://www.bcmhas.ca)
- [Anti-Depressant Skills at Work self-care guide](http://www.bcmhas.ca)
- Free information and resources

Website: [www.bcmhas.ca](http://www.bcmhas.ca)
Ministry of Social Development and Social Innovation
Income assistance, information for persons with disabilities.
Web: http://www2.gov.bc.ca/gov/content/governments/organizational-structure/ministries-organizations/ministries/social-development-and-social-innovation

BC Housing
BC Housing’s role is to assist British Columbians in greatest need of affordable and appropriate housing by providing options along the continuum. The housing continuum extends from emergency shelter and housing for the homeless through to affordable rental housing and homeownership. Where there are gaps in the housing continuum, they are addressed through the creation of new housing options or by adapting existing housing.

Web: http://www.bchousing.org/Options/Home_Renovations

Operates programs to renovate or adapt homes for people with disabilities and to help seniors to live independently – Home Adaptations for Independence (HAFI):

For BC Housing programs for seniors see:
Web: www.bchousing.org/Find/Senior
Government of Canada

Canada Benefits – Seniors Page
web: www.canadabenefits.gc.ca/f.1.2cl.3st@.jsp?lang=eng&catid=11&geo=1

Provides a listing for all benefits programs for seniors in BC, including both federal and provincial programs.

- Benefits Finder:
There is also a ‘Benefits Finder’ page at Canada Benefits where you answer a number of questions, and a customized list of benefit programs is provided for you:
www.canadabenefits.gc.ca/f.1.2cw.3zardq.5esti.4ns@.jsp?lang=eng

There is also a useful online publication produced by the People’s Law school and written by the BC Centre for Elder Advocacy and Support that explains government benefits.
http://www.publiclegaled.vcn.bc.ca/uploads/aa/ef/aaef05bdfdc031f702baca5bc299a87/English-When-I’m-64-Benefits.pdf

Canada Mortgage and Housing Corporation
Telephone: 1-800-668-2642
Web: www.cmhc-schl.gc.ca/en/

Canada Revenue Agency - Registered Charities Listing
Telephone: 1-877-442-2899 (toll-free)
Web: www.cra-arc.gc.ca/chrts-gvng/lstngs/menu-eng.html

Provides free information on registered charities.

Department of Justice Canada
Web: www.canada.justice.gc.ca
Human Resources and Skills Development Canada

Telephone: 1-800-277-9914 (toll-free)

TDD/TTY for people with hearing or speech impairments:
1-800-255-4786

Web: www.hrsdc.gc.ca/eng/home.shtml

Service Canada:
1-800-OCanada (622-6232)

Administers pensions and other financial benefits for those over 65.

Royal Canadian Mounted Police – Scams and Frauds

Web: www.rcmp-grc.gc.ca/scams-fraudes/index-eng.htm

Provides information about scams and frauds, how to prevent them and how to report them.
National, Provincial, and Regional Organizations

Assistance for adults who cannot seek help

Public Guardian and Trustee
Web: http://www.trustee.bc.ca/Pages/default.aspx
Email: mail@trustee.bc.ca

Has offices located in Vancouver, Kelowna, and Victoria.

Telephone: 604-660-4444 (General Inquiries)
Fax:
   604-660-0374 (Greater Vancouver Regional Office)
   604-775-1001 (Lower Mainland Regional Office)
   250-356-8160 (Vancouver Island Regional Office)
   250-712-7576 (Interior North Regional Office)

Assessment and Investigation Services (AIS) can investigate financial abuse/mismanagement in which there is a reason to believe the adult in incapable, their assets are at risk and there is no one else to assist. The AIS referral form is online - http://www.trustee.bc.ca/Documents/STA/AIS%20Referral%20Form.pdf

Designated Agencies
Designated Agencies have a provincial legal mandate to investigate reports of abuse and neglect of vulnerable adults that they receive or become aware of. DA staff have legal tools to gain access and obtain restraining orders.

• Fraser Health
   1-877-REACT-08 (1-877-732-2808)

• Interior Health
For direct community numbers visit:
www.interiorhealth.ca/ReportAbuse

• Northern Health
Prince George Adult Protection Line: 250.565.7414
• Vancouver Coastal Health Providence Health Care:
  1-877-REACT.99 (1-877-732-2899)

Re:Act Response Resource
  1-877-REACT-99 (1-877-732-2899)

For more direct community numbers visit:
www.vchreact.ca/report.htm

• Vancouver Island Health Authority:
  South Island  1-888-533-2273
  Central Island  1-877-734-4101
  North Island  1-866-928-4988

Web:  www.viha.ca/abuse

• Community Living BC (CLBC):

  CLBC is the Designated Agency for all individuals with a developmental disability who are eligible for CLBC services.
  Telephone:  1-877-660-2522
  Web:  www.communitylivingbc.ca

Community Agency Assistance

BC Association of Community Response Networks
Fax:  604-531-9498
Email:  info@bccrns.ca
Web:  www.bccrns.ca

Supports communities in their responses to adults who are experiencing or are at risk of abuse, neglect, or self-neglect. Their website provides a list of agencies across BC.

BC Centre for Elder Advocacy and Support (BC CEAS)
Telephone:  604-688-1927 (business number)
Seniors Abuse and Information (SAIL) Line:
  604-437-1940 (Lower Mainland)
  1-866-437-1940 (toll-free outside Lower Mainland)
TTY:  604-428-3385 and 1-855-306-1443
Fax:  604-437-1929
Web:  www.bcceas.ca

The SAIL line provides information about elder abuse, emotional support, and referrals to outside agencies or to BCCEAS legal services, and to seniors facing elder abuse. The service operates seven days a week, from 8 am to 8 pm.
Disability Alliance BC

Telephone: 604-875-0188
1-800-663-1278 (toll-free)
TTY: 604-875-8835
Fax: 604-875-9227
Web: http://www.disabilityalliancebc.org
Email: feedback@disabilityalliancebc.org

Provides advocacy to raise public and political awareness of issues of concern to people with disabilities. NOTE – DABC does not provide assistance in accessing benefits for seniors aged 65+ however contact the BC Centre for Elder Advocacy Support (listed above) for assistance in accessing government benefits.

Lawyer Referral Service

Telephone: 604-687-3221 (Lower Mainland)
1-800-663-1919 (toll-free outside Lower Mainland)
Email: lawyerreferral@bccba.org

Provides referrals to lawyers who will give an initial interview of up to 30 minutes for a fee of $25 plus taxes to determine whether or not the client has a legal problem and assistance in finding a lawyer at the lawyer’s regular rate.

Legal Services Society

Telephone: 604-601-6000 (Administration)
Fax: 604-682-7967
Web: www.lss.bc.ca

- **Family LawLINE**

  Telephone: 604-408-2172 (Lower Mainland)
  1-866-577-2525 (toll-free outside Lower Mainland)
  Web: www.lss.bc.ca/legal_aid/FamilyLawLINE.php

  A free legal advice and legal information telephone service for anyone with a low income experiencing a family law issue. Lawyers give brief ‘next step’ advice. Weekdays 9:30 am- 3:00 pm (2:30 on Wednesdays).

- **Legal Aid**

  Telephone: 604-408-2172 (Lower Mainland)
  1-866-577-2525 (toll-free outside Lower Mainland)
  Web: www.lss.bc.ca/general/provincialCallCentre.php

  This site has information about legal aid eligibility and coverage. It also contains many useful legal information resources. Victims can apply for legal aid by phone by calling the Legal Services Society Call Centre above. To apply in person, victims can visit the LSS website or look in the white pages of the phone book under “Legal Aid – Legal Services Society” to find the office closest to them.
MOSAIC Multicultural Victim Services Program

Telephone: 604-254-9626  
Web: www.mosaicbc.com/family-programs/family-programs/multicultural-victim-services-program

This Victim Services Program provides services to multicultural people who are victims of crime in the Vancouver area. The free and confidential services are delivered with cultural sensitivity and can be in the client’s mother tongue.

Social Supports

Neighbourhood houses, community centres, recreation centres, service clubs, and seniors serving organizations. These organizations provide activities and direct supports for older adults. Older adults who are socially isolated are more vulnerable to abuse. Social supports are an important component in helping the older adult taking control of their lives. The contact numbers for these organizations can be accessed through the telephone book in each area.

Vancouver & Lower Mainland Multicultural Family Support Services Society

Telephone: 604-436-1025  
Fax: 604-436-3267  
Web: www.vlmfss.ca

A non-profit organization offering free, confidential, and culturally sensitive services in over 20 languages. VLMFSS assists immigrant, refugee and visible minority women, children and families experiencing family violence through culturally sensitive support, counselling and advocacy within a safe, secure and confidential setting.

Complaints

Better Business Bureau

Telephone: 604-682-2711 (Lower Mainland)  
1-888-803-1BBB (1222) (toll-free outside Lower Mainland)  
Fax: 604-681-1544  
Email: contactus@mbc.bbb.org  
Web: www.mbc.bbb.org

Is a non-profit association of businesses that gives free consumer information, and receives and resolves written-only complaints about businesses. Look in the white pages of the phone book for the office nearest you. Their website has information on consumer and email scams. They also produce an annual online consumer guide: www.mbc.bbb.org/consumerguide.
Canadian Anti-Fraud Centre
Telephone: 1-888-495-8501
Fax: 1-888-654-9426
Email: info@antifraudcentre.ca
Web: http://www.antifraudcentre-centreantifraude.ca/index-eng.htm

An anti-fraud program with a national call centre, sponsored by the RCMP, the Ontario Provincial Police, and the Competition Bureau of Canada.

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Canadian Marketing Association
Telephone: 416-391-2362
Address: #607 - 1 Concord Gate, Don Mills, Ontario M3C 3N6

Will inform all of its members that a person does not wish to receive mail promotions and is to be removed from their new-contact marketing lists. This is a free service that lasts for a period of three years. This request must be made in writing, and takes 6 weeks to take effect. Note that this service cannot stop flyers and other unaddressed advertising mail. Online form is available here: www.cornerstonewebmedia.com/cma/submit.asp

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Ombudsman for Banking Services and Investments
The Canadian Ombudsman for Banking Services and Investments resolves disputes between participating banking services and investment firms and their customers if they can’t solve them on their own. Services are free to consumers, whom must first complain to the bank or investment firm involved.

Telephone: 1-888-451-4519
www.obsi.ca/en/ehome

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General information

Advocacy Centre for the Elderly (Ontario)
Telephone: 416-598-2656
Web: www.advocacycentreelderly.org

Is a community-based legal clinic in Ontario for low income seniors, funded through Legal Aid Ontario. Although ACE provides legal services only in Ontario, it provides useful information about elder abuse on its website.
Alzheimer Society
The leading source of education and support in B.C. for people impacted by dementia, through resource centres located around the province and the province-wide toll-free Dementia Helpline (1-800-936-6033).

Web:  www.alzheimerbc.org

Canadian Centre for Elder Law Studies (CCELS)
Telephone:  604-822-0564  
Fax:   604-822-0144  
Email:  ccels@bcli.org
Web:  www.bcli.org/ccel
Contact Form: www.bcli.org/ccel/contact

Produces legal reports, scholarly articles, public legal education materials, workshops, and annually organizes the Canadian Conference on Elder Law. The CCELS is a division of the British Columbia Law Institute.

Canadian Network for the Prevention of Elder Abuse
Web:  www.cnpea.ca

Is a national non-profit organization providing information to raise awareness of abuse and neglect in later life.

ClickLaw
Web:  www.clicklaw.bc.ca

Operated by the courthouse libraries of BC. It features legal information and education, but it is not a site of laws. Instead, Clicklaw features legal information and education designed for the public.

Dial-A-Law
Web:  www.cba.org/bc/public_media/dal

The Canadian Bar Association maintains legal information on various legal topics. Free, and available in English, Chinese and Punjabi by telephone (604.687.4680 - Lower Mainland; 1.800.565.5297 toll free in the rest of BC) and on the Internet.
Here to Help (Mental Health and Addictions)
Web: www.heretohelp.bc.ca

HeretoHelp is a project of the BC Partners for Mental Health and Addictions Information, a group of seven leading mental health and addictions non-profit agencies: Anxiety BC; BC Schizophrenia Society; Canadian Mental health Association BC (CMHA BC); UVic Centre for Addictions Research BC; The FORCE: Families Organized for Recognition and Care Equality; Family Services North Shore; and, Mood Disorders Association of BC. They help people better prevent and manage mental health and substance use problems.

Justice Education Society
Telephone: 604-660-9870
Fax: 604-775-3476
Email: info@justiceeducation.ca
Web: www.justiceeducation.ca

Provides educational programs, services, and resources about the justice system through eight Regional Offices to help the public understand how the justice system works and help those people working within the system to better understand justice-related issues that different people face.

National Initiative for the Care of the Elderly
Phone: 416-978-0545
Fax: 416-978-4771
Email: nicenetadmin@utoronto.ca
Website: www.nicenet.ca
Online Contact: www.nicenet.ca/contact.aspx?type=add&menu=22&app=95

NICE is an international network of researchers, practitioners and students dedicated to improving the care of older adults, both in Canada and abroad.

Nidus Personal Planning Resource Centre
Telephone: 604-408-7414
Toll Free: 1.877.267.5552
Fax: 604-801-5506
Email: info@nidus.ca
Web: www.nidus.ca

A non-profit, non-government centre that provides people in BC with information on personal planning, and assistance to make and use effective Representation Agreements. It publishes self-help kits, various legal information sheets, and offers legal clinics in Vancouver. It also has a Registry for personal planning documents.
Prekston Society British Columbia

Telephone: 1-800-668-3330
Web: www.parkinson.bc.ca

Provides information about Parkinson’s. Helps people with Parkinson’s and the people who care for them.

People’s Law School E-book publications (“When I’m 64”)

Three e-books that provide information that is useful for older adults in British Columbia. One booklet discusses government Benefits, a second describes health, housing and transportation Services, and the third is about powers of attorney, representation agreements, frauds and scams and protecting oneself against elder abuse by Controlling Your Affairs.

Website: www.publiclegaled.bc.ca

Benefits: http://www.publiclegaled.vcn.bc.ca/uploads/aa/ef/aaef05bdfdc031f702baca5bc299a87/English-When-Im-64-Benefits.pdf

Services: http://www.publiclegaled.vcn.bc.ca/uploads/9c/49/9c493fccbebe502c1f49b06b04a2085c/English-When-Im-64-Services.pdf

Controlling Your Affairs: http://www.publiclegaled.vcn.bc.ca/uploads/0f/e7/0fe7d4212074620eb647615eb8bf401a/English-When-Im-64-Controlling-Your-Affairs.pdf