



RIGHT NOW

**A Community Strategy to Prevent
and Address Elder Abuse**





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A Message from Safe Brantford

Seniors, 65 years and older, are the fastest growing age group in Ontario. By 2041, it is projected that in the City of Brantford and the County of Brant, 25%-30% of residents will be age 65 and older. With this rapid change in population, it is increasingly important to prioritize the safety and well-being of older adults.

Across Canada it is estimated that 8.2% of older adults are impacted by elder abuse during their lifetime.^{viii} Mistreatment of older adults can be physical, sexual, financial or emotional and can have devastating consequences for individuals and families.

A strategy can be an effective tool to bring together experts and stakeholders to identify how an issue is impacting the community – and create solutions. It encourages a better understanding of the issue, generates new partnerships, and can be catalyst for funding, advocacy, and most importantly, change.

Right Now: A Community Strategy to Prevent and Address Elder Abuse contains **13 Key Recommendations** and **42 Actions** based on extensive consultations with older adults, caregivers, and service providers across the City of Brantford and the County of Brant.

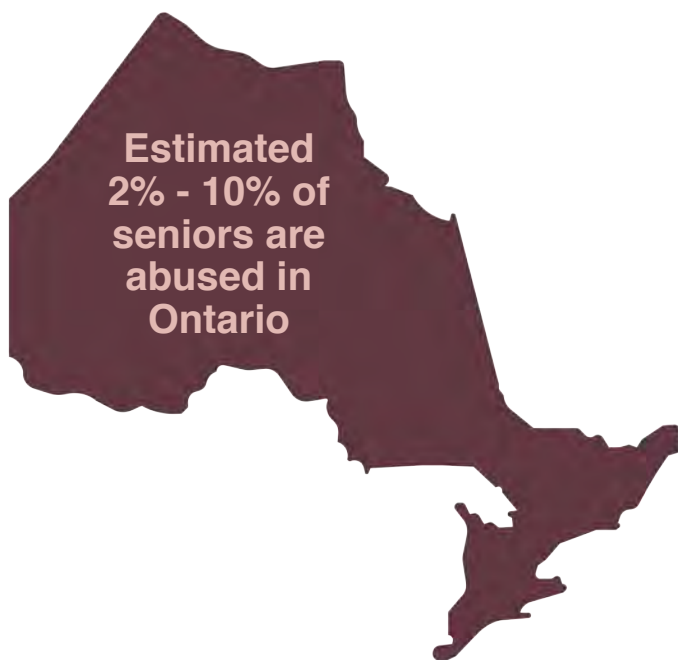
Although this Strategy primarily focuses on the City of Brantford and the County of Brant, important work is underway in Six Nations of the Grand River, where the community is developing ‘Elders Journey’, a project to explore the needs and strengths of Elders living on Six Nations. Local communities are committed to sharing learnings and opportunities as we work towards a common vision of respect and inclusion for all older adults.

We are incredibly grateful to the over 200 community partners, caregivers, service providers, and residents of all ages who contributed their time and their passion to this Strategy. Additionally, we would like to give a special note of gratitude to the Brant Elder Abuse Awareness Committee who has provided community leadership on elder abuse issue for years, and provided invaluable guidance in the development of this Strategy.

What is Elder Abuse?

Elder abuse is a serious and complex problem that affects many older adults in the City Brantford and the County of Brant. Elder abuse happens when someone abuses their power over an older adult, exploiting their sense of safety and well-being. It 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.”ⁱ

Elder abuse can happen to people from all walks of life and from any background, religion, race, gender, culture, or ability.



There are between

**40,000 to
200,000**

seniors living in Ontario who have experienced or are experiencing elder abuse.ⁱ

Types of Abuse

Mistreatment of older adults can take many forms:

Physical

Physical abuse is when somebody hits an older adult or handles the person roughly, even if there is no injury. Giving a person too much or too little medication or physically restraining a person are also forms of physical abuse.

Neglect

Neglect occurs when somebody fails to provide the necessities of life, such as food, clothing, safe shelter, medical attention, personal care, and necessary supervision. Neglect may be intentional or unintentional.

Emotional / Psychological

Emotional abuse is when somebody threatens, insults, intimidates, or humiliates an older adult, treats the person like a child, or does not allow them to see their family and friends. Emotional abuse can devastate a person's sense of identity, dignity, or self-worth.

Financial / Material

It is financial abuse if somebody tricks, threatens, or persuades older adults out of their money, property, or possessions. Misusing power of attorney is a common form of financial abuse. Financial fraud, such as telephone scams, is also considered financial abuse.

Sexual

Sexual abuse is when somebody forces an older adult to engage in sexual activity.

This may include verbal or suggestive behaviour, not respecting personal privacy, sexual touching, or sex without the person's consent.

Where Does Elder Abuse Happen?

Older adults can face abuse in a number of different settings. Due to the challenging nature of aging and managing changing family dynamics, elder abuse is more likely to occur in the family setting. However, older adults may also experience abuse in the community from an acquaintance or care provider. Mistreatment of older adults can also occur in an institutional setting such as a hospital, long term care facility, or retirement home.



Community

EXAMPLE:

A tradesperson has befriended an older adult and asked the senior for gifts and money beyond the cost of service provided.



Family

Example:

An adult child may be isolating their older parent by not allowing them to leave the house or engage with others via phone or email.



Institution

EXAMPLE:

Long term care staff may overmedicate a senior to change their behaviour.



What is Financial Fraud?

“You need a new water heater.” “You’ve won a free trip to Jamaica!” “Your family member is in danger!” These are some of the phrases that individuals who commit scams may use when speaking to older adults, or other vulnerable populations, to commit financial fraud.

Financial fraud is one of the most common forms of financial abuse. Perpetrators may falsify financial opportunity or emergency situations, and may ask the individual to send their financial information to claim the prize, pay for the service, or help their loved one. The perpetrator will then use the victim’s financial information to steal or launder money. ^{ii iii iv}

Frauds can include:



**Door-to-Door
Scams**



**Telephone
Fraud**



**Email & Mail
Fraud**



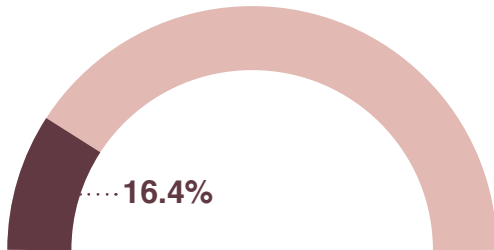
**Health Care &
Insurance Fraud**



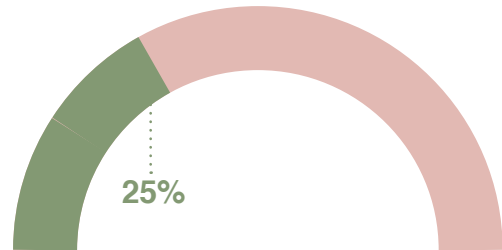
**Romance
Fraud**

The Population is Aging

Seniors, 65 years and older, are the fastest growing age group in Ontario.



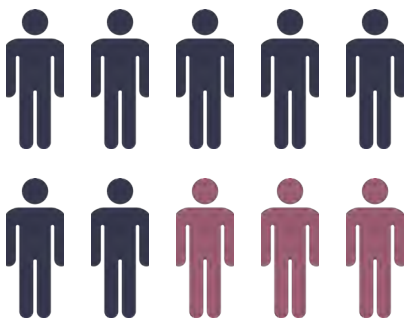
In 2016, 16.4% of Ontario's population was 65 years or older.



By 2041, it is projected that 25% of Ontario's population will be 65 years of age or older.^{vi}



Almost doubling from 3 million seniors in 2016 to 4.6 million seniors in 2041.^{vi}



25% to 30%

of the population in the Brant Census Metropolitan Area (inclusive of the City of Brantford and County of Brant) will be 65 years of age or older in 2041.^{vi}

Prevalence of Elder Abuse

In 2015, the National Initiative for the Care of the Elderly commissioned one of the largest national studies to estimate and measure the prevalence of elder abuse across Canada. Through a population-weighted sample, over 8,000 Canadian residents 55 years of age and older were surveyed.^{vii}

Overall Prevalence of Elder Abuse

8.2%

representing 766,247 older Canadian adults.

Psychological Abuse

2.7%

representing 251,157 older Canadian adults.

Sexual Abuse

1.6%

representing 146,649 older Canadian adults.

Physical Abuse

2.2%

representing 207,889 older Canadian adults.

Financial Abuse

2.6%

representing 244,176 older Canadian adults.

Neglect

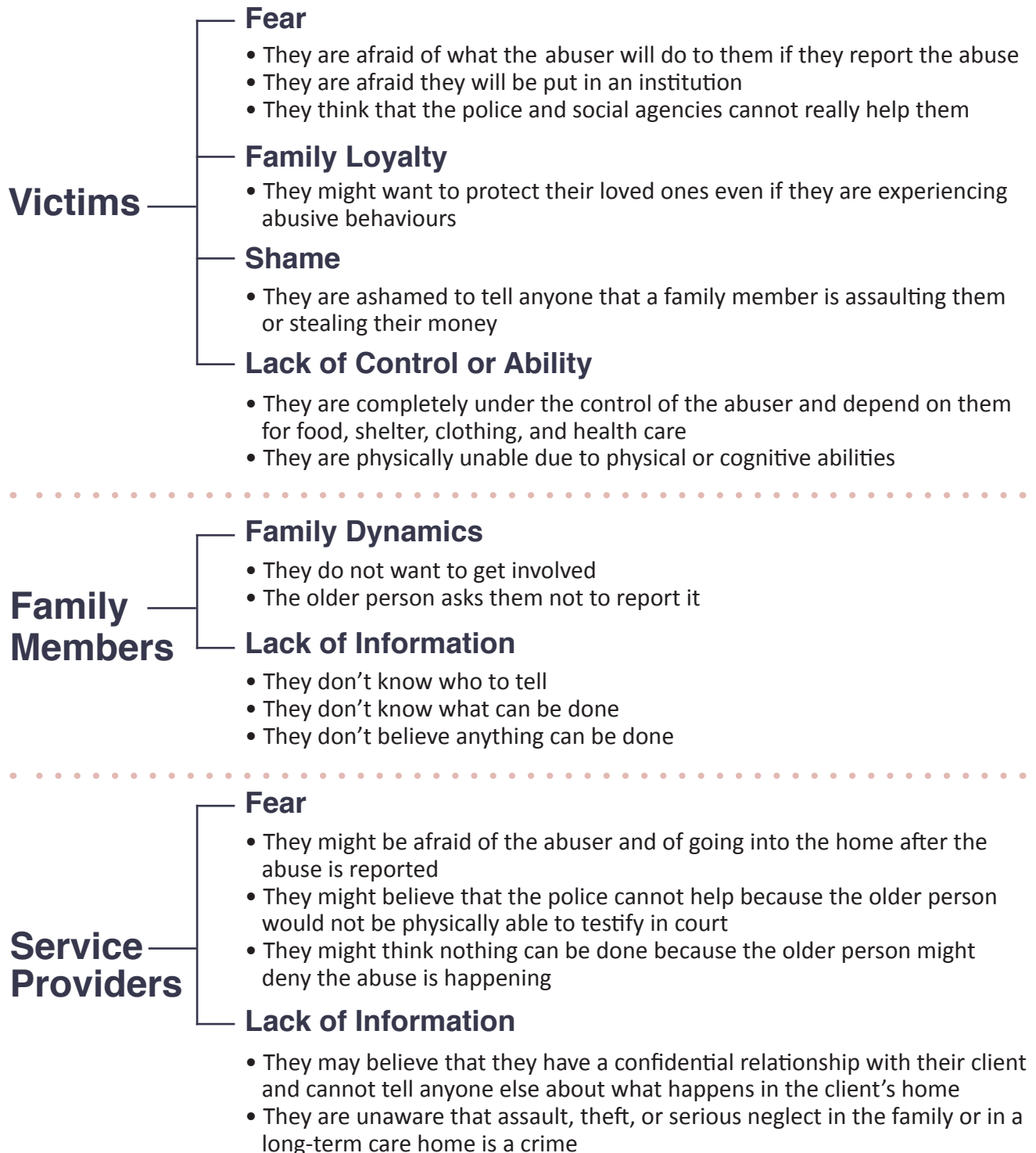
1.2%

representing 116,256 older Canadian adults.

The Hidden Issue

There are significant challenges to understanding the prevalence and scope of elder abuse. The mistreatment of older adults is grossly underreported due to a variety of barriers. There are also inconsistencies in the way that elder abuse is coded through police services and other organizations in Ontario, presenting significant challenges to data collection and monitoring. Although gerontology is becoming an increasingly important field of study, there is a severe lack of research on elder abuse.

Examples of the barriers to reporting elder abuse are outlined below. ^{vii ix}



Is Elder Abuse a Crime?

There is no specific crime of “elder abuse” but many forms of elder abuse are criminal. The following is a list of offences under the Criminal Code which may apply if an older adult is being abused.^x



Financial Abuse

- Theft
- Theft by holding power of attorney
- Stopping mail with intent
- Extortion
- Forgery
- Fraud



Physical Abuse

- Assault
- Assault with a weapon or causing bodily harm
- Aggravated assault
- Sexual assault with a weapon, threats to a third party or causing bodily harm
- Aggravated sexual assault
- Forcible confinement
- Murder
- Manslaughter



Psychological (Emotional) Abuse

- Intimidation
- Uttering threats
- Harassing telephone calls



Active Neglect

- Criminal negligence causing bodily harm or death
- Breach of duty to provide necessities

Risk Factors

There are certain attributes, characteristics, and experiences that can make individuals more at risk of being a victim of abuse or of perpetrating abuse. ^{xi xii xiii}

Victim

- Social isolation
- Mental health
- Cognitive Impairment
- Poor physical health
- Low income
- Dependency/relationship with perpetrator
- Living situation
- History of abuse/trauma earlier in life

Perpetrator

- Mental illness
- Substance use dependency
- Dependency / relationship with victim
- Lack of support from other potential caregivers
- Burden or stress
- Inability to cope with stress
- History of domestic abuse

History of Trauma

Research suggests that a history of childhood abuse is a significant risk factor for abuse later in life. Evidence also suggests that the impacts of abuse can be cumulative across the lifespan.

“

I think that in some cases, [abuse] was the norm, [you] grew up with, and you don't know any different. We had generations of abuse.

”

– Focus group participant

There are also community and societal factors that contribute to the risk of elder abuse: ^{xiii}

Community Level

- Low levels of social support
- Low levels of co-habitation
- Social services are inaccessible

A 2016 Canadian study shows that ageism is the most tolerated form of social prejudice. One in four Canadians admits they have treated someone differently because of their age.

Societal Level

- High tolerance and acceptance of aggressive behaviour
- Caregivers given greater freedom in routine care and decision making
- Ageism or negative attitudes give rise to prejudice, hostility or social isolation. The experience of abuse may be discredited, and concerns or disclosures related to abuse may not be taken seriously. ^{xiv}

Protective Factors

There are a number of environmental, behavioural, and systemic factors that keep older adults safer and reduce the risk of abuse. Some of the protective factors include: ^{xi xii xiii}



Individual Level

- Supportive family / friends / peer networks
- Access to information on abuse
- Educated about their rights
- Development of coping strategies
- Assertive personality



Community Level

- Coordination of resources and services among community agencies and organizations that serve the elderly population and their caregivers
- A strong sense of community or community identity

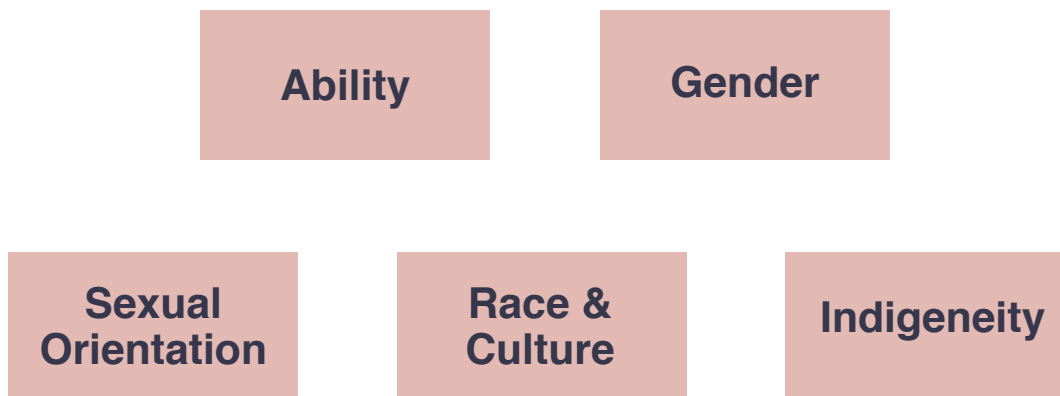


Institutional Level

- Effective monitoring systems
- Solid institutional policies and procedures
- Regular training on elder abuse and neglect for employees
- Education and clear guidance on power of attorney and how it is to be used
- Regular visits by family members, volunteers, and social workers

The Role of ‘Social Position’

Abuse can happen to anyone, but the impact of abuse may be experienced differently. There are compounding social factors that can make an individual more vulnerable to abuse, including one’s social position or identity. Considering of a variety of social positions and identities is a crucial step to ensure that community interventions and education efforts are tailored and appropriate for a diversity of populations.



Gender

One’s gender has a significant impact on the experience and incidence of abuse. Gender refers to the socially constructed roles, behaviours, and identities of girls, women, boys, men and gender fluid and diverse people.

- Intimate partner violence is more likely to be experienced by women and committed by men ^{xii xv xiii}
- Women are more likely to experience physical forms of abuse and to be victims of family violence ^{xv}
- Men still experience elder abuse, but experience physical abuse less often ^{xv}
- Abused older men are less likely to report incidents of abuse; and much less likely to seek out services
- Trans and gender non-conforming adults experience marginalization and disparities including double the rates of violence and abuse
- Many trans people have unique geriatric medical needs; for example older adults using hormone therapy have to look out for possible drug interactions ^{xvi}
- Many trans adults may fear being misgendered after death ^{xvi}

“

I worry about people that are completely isolated, they may not be able to care for themselves, and the system may not be able to care for them. Caring about your appearance really reduces the harassment and abuse.

”

– Focus group participant shares concerns about personal care for seniors who are trans or gender non-conforming

14 Sexual Orientation • LGBTQ2S



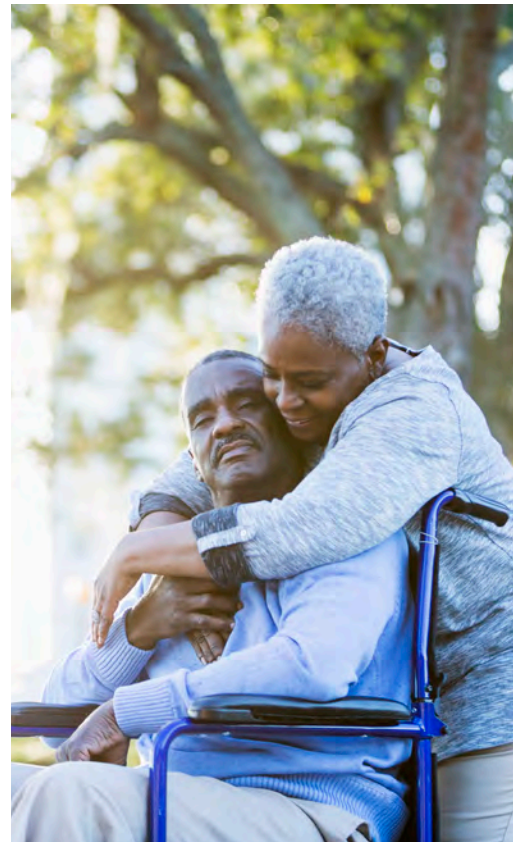
Societal understanding of seniors' sexuality can have a serious effect on mental health, and well-being, especially if the individual identifies as lesbian, gay, bisexual, trans, queer, or two-spirited.

- Research shows that people who identify as LGBTQ are more likely to experience child abuse and neglect, bullying, sexual harassment from peers, dating violence, and violence in a marriage or common-law relationship^{xi}
- There is a fear of discrimination in long term care and those who find themselves in long term care may find themselves going back into the closet
- Older LGBTQ individuals fear not only being neglected and/ or abused by healthcare providers, but they also fear being rejected and not respected by their peers or other facility residents^{xvii}
- Older LGBTQ2S adults may have a lack of family connections^{xvii}

Race and Culture

One's cultural, racial, and/or ethnic background has a serious impact on their experience of abuse.

- Some immigrant and refugee women may experience increased isolation, a risk factor for abuse. Isolation may be increased for older women who may not have Canadian citizenship and may be very dependent on their husband and children. Laws in Canada may be very different from laws in their respective countries^{xiii xviii}
- Research shows that culture and ethnicity can be factor in the experience of elder abuse
- A lack of culturally accessible services and financial resources are significant barriers to accessing services
- Family pride and privacy is also a barrier to accessing outside services
- Older LGBTQ people of color will often endure more stress which often leads to negative mental health and physical health outcomes, including depression, anxiety and more advanced forms of illnesses^{xvii}





Indigeneity

The City of Brantford and County of Brant have a high percentage of urban Indigenous residents. Indigenous seniors are impacted in a variety of unique ways and may be more at risk for abuse or experience abuse in different ways.

- Experiences of colonization, feelings of devaluation among Indigenous people, destruction of traditional ways of life, and a history of abuse in residential schools may contribute to an increased risk of violence or abuse ^{xvii}
- Many older Indigenous people experience the long-lasting effects of physical, sexual, and emotional abuse in residential schools and were denied the opportunity to be exposed to examples of positive parenting. This may contribute to higher rates of violence in Indigenous communities across generations ^{xii xix}
- Disruption of intergeneration roles within the community was also identified as a theme related to violence ^{xii}
- Elder abuse is made worse by secrecy within family structures and communities, interfering with accurate reporting

“

It depends on their lives, it depends if they have intergenerational trauma that’s not been dealt with”. “There needs to be more visibility so people can learn what abuse looks like for different populations” and “We need to make the vulnerable sector more aware of their own rights. Focus on empowerment and give seniors more education about their own rights and boundaries”

”

– During consultations, one Indigenous service provider highlighted how Indigenous Elders may be more at risk for experiencing mistreatment, and what can be done to address it

What are the signs of elder abuse and neglect?

Recognizing elder abuse and neglect is often difficult, but there are important warning signs to look out for. It is also important to note that individuals who are being abused may not think of their situation or experience as abuse.

Similarly, abusers may not see their behavior as abusive. Below are some of the warning signs that might indicate that an older adult is experiencing abuse or neglect:^{xx}



**Fear, anxiety,
depression**



**Passiveness in relation
to a family member or
care provider**



**Poor hygiene /
Lack of self-care**



Lack of money



**Confusion about
legal documents
or finances**



**Unexplained
physical injuries**



**Absence from
programming or
social activities**



**Isolated, reclusive,
and reluctant to speak
about the situation**

Recommendations



Public Education and Training

The issue of elder abuse is often referred to as a hidden issue largely due to its unreported and stigmatized nature. This both causes and perpetuates a lack of awareness around this issue. These recommendations seek to raise the profile of elder abuse. Abuse can be hard to detect, and in some cases, a person may not recognize that their behavior is abuse. Increased awareness will help to prevent elder abuse from occurring, ensure the signs of abuse are more easily recognized, and encourage more support and resources in this field.

Recommendation 1

Increase Public Education

Action 1.1: Host awareness workshops and presentations, such as “It’s Not Right”, through municipal and community venues, including the library, housing sites and community centres

Action 1.2: Ensure local organizations, businesses, and institutions have access to information that helps identify and prevent elder abuse

Action 1.3: Increase education opportunities for older adults in apartments, long term care facilities, and retirement homes

Action 1.4: Increase understanding of different topics related to seniors vulnerability (e.g. Dementias, Power of Attorney, Wills, Capacity Assessments, etc.)

Action 1.5: Support the activities of local elder abuse networks and community planning groups that promote the safety and social inclusion of older adults

“

There should be more education, like ‘It’s Not Right’ and Power of Attorney workshops once or twice a month, bringing the workshops directly to people where they are at.

”

– Focus group participant



Recommendation 2

Increase Availability of Print and Web-based Information

Action 2.1: Regularly update and increase the distribution of the *The Seniors' Toolkit*

Action 2.2: Support the establishment of an inventory of updated tools and resources from Provincial and National organizations, such as Elder Abuse Ontario, Canadian Network for the Prevention of Elder Abuse, and the National Initiative for the Care of the Elderly

Action 2.3: Develop a resource presentation toolkit and identify community leaders to support peer-to-peer education sessions

Action 2.4: Develop a local media campaign and share information through newspapers, public spaces, and digital media

Recommendation 3

Target a Broader Stakeholder Group in Elder Abuse Education and Awareness Activities

Action 3.1: Ensure key messages and materials reflect and reach diverse target audiences (e.g. the translation of materials into multiple languages and circulation of materials that reflect LGBTQ2S, Indigenous, and racialized older adults)

Action 3.2: Engage multi-sectoral community partners such as bank employees, taxi-drivers, hearing clinics, meals on wheels, and pharmacists

Action 3.3: Increase opportunities for children and youth to learn about the impacts and prevention of elder abuse (e.g. explore credited courses through public and post-secondary school systems)

Action 3.4: Organize community events in support of World Elder Abuse Awareness Day on June 15th

“

We need more frontline partnerships – grocery stores, bank tellers, [retailers], coffee shops, malls and taxis to be trained [on elder abuse].

”

– Focus group participant

Recommendation 4

Increase Training Opportunities for Professionals

Action 4.1: Host “It’s Not Right” facilitator training for service providers

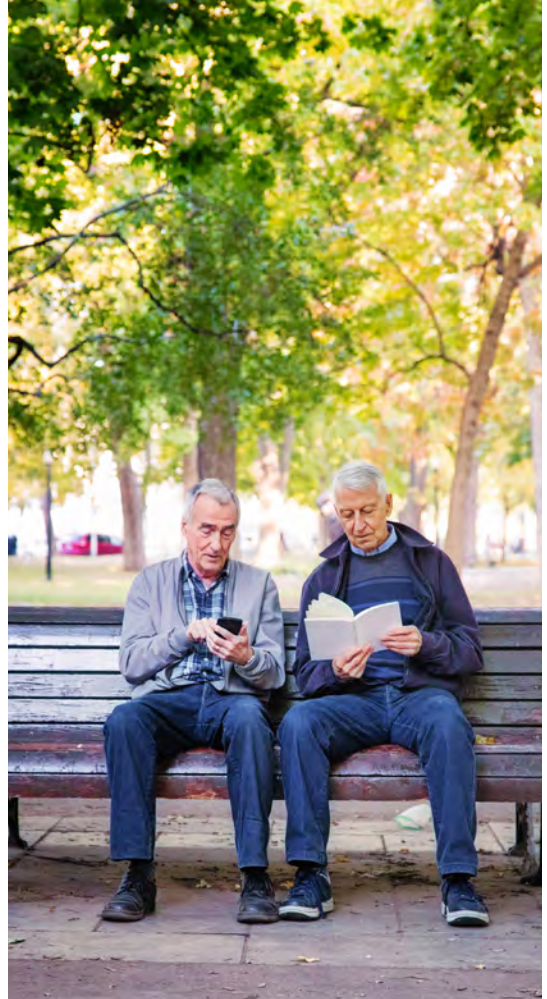
Action 4.2: Encourage health and human services, businesses, and institutions to train all of their staff on elder abuse as a best practice

Action 4.3: Explore mandatory training for Personal Support Workers and other home-care based organizations that may be uniquely positioned to identify at-risk or victimized older adults

Action 4.4: Increase opportunities for specialized training for police and other professionals within the criminal justice system

Action 4.5: Ensure senior-serving organizations and institutions receive ‘Safer Spaces’ training to promote inclusivity, and safer, more supportive environments for LGBTQ2S+ older adults

Action 4.6: Provide Mental Health First Aid for Seniors Certification courses



Preventative Supports

Prevention of elder abuse means supporting the well-being and rights of older adults. Contributing to an age-friendly community supports and recognizes the unique needs and assets of older adults. These recommendations aim to reduce the risk factors and bolster the protective factors associated with elder abuse.

“

We need to focus on resilience – we think about it with kids, and we need to think about it with older adults too. How can we foster this?

”

– Focus group participant

Recommendation 5

Reduce Seniors’ Social Isolation

Action 5.1: Support community initiatives that aim to reduce isolation through leisure programming, visitor programs, or phone check-ins

Action 5.2: Increase volunteer, employment and other civic engagement opportunities for older adults

Action 5.3: Support and increase intergenerational activities

Action 5.4: Target older adults living in more rural communities and those who live in single-dwelling households



Recommendation 6

Support an Age-Friendly Community

Action 6.1: Support the recommendations from the Age-Friendly Community Impact Report and *Healthy Aging: City of Brantford Age-Friendly Strategy*

Action 6.2: Increase access to free or low-cost transportation for seniors, including affordable and accessible taxi services and improve public transit systems

Recommendation 7

Increase Supports for Caregivers

Action 7.1: Increase access to information and resources for caregivers about aging and caregiving

Action 7.2: Increase awareness and availability of support groups for caregivers (e.g. Day and Stay program at John Noble Home; Adult Recreation Therapy Centre [ARTC] programs). Ensure programs are low-barrier and accessible.

“

Some people don't realize [their actions] are abuse. They think that they are taking care of you and they are entitled, they think they know best.

”

– Focus group participant

Recommendation 8

Empower Seniors and Further the Rights of Older People

Action 8.1: Assist seniors in proactive planning around healthy aging and aging in place, considering the emotional, spiritual, physical, and financial domains of life

Action 8.2: Support advocacy efforts of senior-focused community planning groups

Action 8.3: Increase programs for seniors that build resiliency and confidence, specifically senior-led programs (e.g. the tea and talk toolkit developed by the Kawartha Sexual Assault Centre and later adapted by Elder Abuse Ontario)

Action 8.4: Support activities that address stigma around aging and abuse

Action 8.5: Develop a campaign addressing ageism and challenging ageist attitudes

“

As mothers, we've always looked after our children, and we are always going to give them support, but sometimes it can go too far. Sometimes I think we care too much.

”

– Focus group participant

Response Protocols and Interventions

When incidents of elder abuse are suspected, disclosed, or confirmed, it is crucial that the older adult is supported and responded to appropriately. These recommendations call for a coordinated community response, and effective and appropriate protocols to be implemented.

Recommendation 9

Coordinate and Standardize Community Responses to Elder Abuse

Action 9.1: Develop community response protocols to respond to different forms of elder abuse

Action 9.2: Develop and host community response protocol trainings targeted to different audiences including service providers and business

“

The person may not even see it yet, they just accept it, they might just think that is how their family runs.

”

– Focus group participant

“

If children or even animals are being abused, we all know who to go to, but with seniors, what do you do?

”

– Focus group participant

Recommendation 10

Improve Awareness of Existing Referral Agencies Resources

Action 10.1: Enhance public awareness of existing resources and services such as the Seniors Safety Line, Nova Vita, and Victim Services of Brant

Action 10.2: Develop a resource sheet outlining existing services that organizations can use when making referrals for individuals who have been abused

Recommendation 11

Increase Human Resources Dedicated to Supporting Seniors

Action 11.1: Support the establishment of a community-based ‘Seniors-at-Risk Coordinator’

Action 11.2 Support the establishment of a coordinator to support local elder abuse networks and age-friendly initiatives





Monitoring and Research

There is a significant lack of research on elder abuse and limited local statistics. These recommendations encourage better monitoring, tracking and research of elder abuse.

Recommendation 12

Improve Local Monitoring

Action 12.1: Establish indicators to measure and track elder abuse locally and establish baseline measurements for evaluation

Action 12.2: Work with local agencies to ensure that elder abuse continues to be consistently tracked and statistics are shared with local planning committees

Recommendation 13

Encourage More Research about Elder Abuse

Action 13.1: Work with local academic institutions to conduct local, elder abuse focused research

Action 13.2: Work with organizations, such as the Canadian Association of Retired Persons (CARP), for evaluative and research purposes

Conclusion and Next Steps

With an aging population and increased pressure on the health care and social services systems to support older adults, proactive social planning is an important tool in reducing the incidence and impact of elder abuse. This Strategy serves as a call to action for coordinated action on elder abuse.

Proposed Next Steps Include:



Develop a work plan to coordinate awareness activities with the Brant Elder Abuse Awareness Committee



Develop statistical tracking and evaluation methods



Secure funding and in-kind contributions to implement recommendations

Resources and Support

If you are concerned for yourself or someone you know, the following resources can support you. If you are concerned about an older adult who is at significant risk of harm, is being abused, requires urgent care or it is an emergency - Call 911.

For Immediate Support:

Seniors Safety Line

1-866-299-1011

The Seniors Safety Line provides contact and referral information for local agencies across the province that can assist in cases of elder abuse. Trained counsellors also provide safety planning and supportive counselling for older adults who are being abused or at risk of abuse. Family members and service providers can also call for information about community services.

Nova Vita 24/7 Crisis Line

519-752-4357 TTY: 519-752-2403

St. Leonard's Community Services Mental Health Crisis Line

519-759-7188 Toll Free 1-866-811-7188

Sexual Assault Centre of Brant 24/7 Crisis Line

519-751-3471

Victim Services of Brant

519-752-3140 - Business Hours 519-756-7050 - After Hours

Six Nations Crisis Services

1-866-445-2204

Reporting Elder Abuse:

Police Services: if you suspect abuse, or know someone is at risk of being harmed, call 911.

Brantford Police Services Non-Emergency Line

If you require Police assistance, but are not in an emergency situation (e.g. reporting thefts, vandalism, fraud) or for other situations where no person or property is in immediate danger. 519-756-0113 or 519-756-7050

Ontario Provincial Police Non-Emergency Line

1-888-310-1122

Long Term Care ACTION Line

If you suspect or have evidence that elder abuse is taking place in a Long-Term Care Home. 1-866-434-0144 7 days a week, 8:30a.m.-7:00 p.m.

Retirement Home Regulatory Authority

You must report elder abuse immediately to the RHRA if you see or suspect harm or risk of harm to a resident.

1-855-ASK-RHRA (1-855-275-7472)

Crime Stoppers

If you suspect an older adult is being abused and/or a criminal act has taken place you can report anonymously to the police through Crime Stoppers.

1-800-222-TIPS (8477)

Office of the Public Guardian and Trustee (OPGT)

In cases of financial or personal abuse, the OPGT may be able to investigate. The Guardian Investigation Unit can be reached at:

1-800-366-0335 or 416-327-6348





For More Information on Elder Abuse:

Brant Elder Abuse Awareness Committee (BEAAC)

The BEAAC acts as a public educator on issues related to elder abuse as well as a resource facilitator for those choosing to help prevent abuse or rebuild non-abusive lifestyles. The Committee is made up of agencies and volunteers in the community who work together to run workshops and provide advice on resources. Victim Services of Brant provides the administrative support:

519-752-3140

Elder Abuse Ontario (EAO)

Elder Abuse Ontario (EAO) is dedicated to raising awareness of elder abuse and neglect, through public education, professional training, advocacy, research and evidence, and service coordination.

www.elderabuseontario.com

National Initiative for the Care of the Elderly (NICE)

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

www.nicenet.ca

Canadian Network for the Prevention of Elder Abuse (CNPEA)

CNPEA connects people and organizations, foster the exchange of reliable information, and advance program and policy development on issues related to preventing the abuse of older adults. CNPEA does this work at the local, regional, provincial/territorial, and national levels.

www.cnpea.ca

Glossary of Terms

ACE (Advocacy Centre for the Elderly)

The Advocacy Centre for the Elderly is a community based legal clinic for low income senior citizens. ACE is managed by a volunteer board of directors at least half of whom are seniors. ACE is funded through Legal Aid Ontario and is the first legal clinic in Canada to specialize in the legal problems of seniors.

Aging in Place

Aging in Place is a term that is used to describe a person living in the residence of their choice for as long as they are able to. This includes being able to have access to services or other support they may need over time. If a person is planning on Aging in Place, they should also be planning for any problems they think may occur in the future such as financial, health, or personal problems.

Age-Friendly

Age-Friendly is a term used to describe communities, policies, services, or structures that have and social environments that support older people, and allow them to live in security, enjoy good health, and continue to participate fully in life.

CAO (Capacity Assessment Office)

The Capacity Assessment Office trains doctors, nurses, social workers and therapists to become capacity assessors. A capacity assessor is a person who is trained and qualified to determine if a person is or is not capable of making some types of decisions as outlined in the Substitute Decisions Act.

CCB (Consent and Capacity Board)

The Consent and Capacity Board is an independent board created by the provincial government of Ontario under the Health Care Consent Act. The board's mission is to provide fair and accessible legal hearings on consent and capacity issues. These issues either regard a person's ability to make choices about their health and property.

CCAC (Community Care Access Center)

In Ontario, Community Care Access Center's provide free care services to eligible people. There are 14 CCACs in Ontario. Anyone who wants home care must apply to the CCAC in the area where they live. CCACs are funded by the Ontario government's Ministry of Health and Long-Term Care.

CPNEA (Canadian Network for the Prevention of Elder Abuse)

The CPNEA connects people with organizations, works to improve the sharing of information and improve programs and policies about stopping elder abuse. Their work is done from the local level all the way to the national level.

EAO (Elder Abuse Ontario)

Elder Abuse Ontario is an organization that aims to end Elder Abuse in Ontario. The EAO have resources for older adults about elder abuse and provide education to nurses, doctors, social workers and the public. Overall the group works to raise awareness about elder abuse.

NICE (National Initiative for the Care of the Elderly)

NICE is an international network of researchers, practitioners and students dedicated to improving the care of older adults, both in Canada and abroad. NICE works to improve policy and training for workers to improve the care that is provided.

OPGT (Office of the Public Guardian and Trustee)

The Office of the Public Guardian and Trustee is a government office that provides services that can help people protect their legal, personal and financial interests. The office works to protect the rights of adults who are not mentally capable and are at risk for being taken advantage of legally or financially. Some of the services the office provides include managing finances, reviewing accounts and making sure that the person has legal representation.

POA (Power of Attorney)

A Power of Attorney is a legal document in which you give someone you trust (called your “attorney”) the right to make decisions for you if something happens and you are no longer able to look after matters on your own. You don’t have to create a power of attorney. But if something happens to you and you don’t have one, other arrangements will have to be made. A family member may have the right to make certain personal care decisions, and can apply to become the guardian of your property. Alternatively, someone else — like a close friend — could apply to the court to be authorized to act for you.

There are two types of Power of Attorney:

- Power of Attorney for Personal Care – for decisions about health, housing and other aspects of personal life
- Power of Attorney for Property – for decisions about financial affairs

SDA (Substitute Decisions Act)

The Substitute Decisions Act covers what should happen when someone is considered to be “not mentally capable” of making decisions about their property or personal care. The law is meant to expand the rights of adults who are mentally incapable, provide protection to the person, and clarify the responsibilities of substitute decision makers.



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