



DEFINING ABUSE

Physical abuse- inflicting physical pain or injury upon an adult.

Sexual abuse- touching, fondling or any other sexual activity with an adult, when the person is unable to understand, unwilling to consent, threatened or physically forced.

Emotional abuse- verbal assaults, threats of maltreatment, harassment or intimidation. Emotional abuse is often coupled with other forms of abuse.

Confinement- restraining or isolating an adult, other than for medical reasons.

Passive neglect- the caregiver's failure to provide an adult with life's necessities, including, but not limited to, food, clothing, shelter or medical care. No new affirmative duty of care is created.

Willful deprivation- deliberately denying an adult medication, medical care, shelter, food, a therapeutic device or other physical assistance, and thereby exposing that person to the risk of physical, mental or emotional harm — except when the dependent person has expressed an intent to forego such care.

Financial exploitation- the misuse or withholding of an adult's resources by another, to the disadvantage of the adult and/or for the profit or advantage of someone else.

Self Neglect- A condition that is the result of an eligible adult's inability, due to physical or mental impairments, or both, or a diminished capacity, to perform essential self-care tasks that substantially threaten his or her own health, including: providing essential food, clothing shelter, and health care; and obtaining goods and services necessary to maintain physical health, mental health, emotional well-being, and general safety. This can include compulsive hoarding which significantly impairs the performance of essential self-care tasks or otherwise substantially threatens life or safety.

Abandonment- the desertion or willful forsaking of an eligible adult by an individual responsible for the care and custody of that eligible adult when a reasonable person would continue to provide care and custody

The Illinois Department on Aging does not discriminate in admission to programs or treatment of employment in programs or activities in compliance with appropriate State and Federal statutes. If you feel you have been discriminated against, call the Senior HelpLine at 1-800-252-8966; 711 (TRS).

This material was developed by the Illinois Department on Aging and is partially based on Elder Abuse and Neglect: Causes, Diagnosis and Intervention, by Mary Joy Quinn, R.N., and Susan I. Tomita, M.S.W., and Inadequate Care of the Elderly by Terry T. Fulmer, Ph.D., R.N., and Terrance A. O'Malley, M.D.



HEALTHCARE PROFESSIONAL



REPORTING ABUSE

Many adults who live at home are at risk of abuse, neglect and financial exploitation by family members and others close to them. Victims of abuse are often isolated and may be afraid or unable to seek help for themselves. In some cases, the only person outside the family who may be aware of abuse or neglect is a healthcare professional; therefore it is critical that healthcare professionals know the signs of abuse and neglect and make reports as needed.

Under the authority of the Illinois Adult Protective Services Act (Public Act 98- 0049), the Illinois Department on Aging administers a statewide intervention program to respond to reports of alleged abuse, neglect, and financial exploitation. Program components include investigation, case planning, advocacy, and referral.

The program places an emphasis on an individual's right to self-determination; no decisions are made about an adult with capacity without that adult's involvement and consent. Every effort is made to respect an individual's choices including where to live. On some occasions, when an individual is unable to participate in decision making, APS will work in the best interest of the individual to reduce their risk of abuse, neglect, and/or exploitation.

To make a report, call 1-866- 800-1409 or the local Adult Protective Services provider agency. Reporting is voluntary for most financial professionals. .

Reporting is mandatory for most healthcare professionals. Mandated reporters are encouraged to report abuse, neglect and/or exploitation for any suspected case. However, mandatory reporting is only required for those individuals who cannot report themselves and for cases of suspicious deaths. If any individual's death is suspected to be related to abuse, neglect, and/or exploitation, a mandated reporter must report the death as they would a suspected case of abuse.

BEHAVIORAL INDICATORS

The following behaviors of an individual may be cause for further questioning:

Fear, withdrawal, depression, helplessness, resignation, hesitation to talk openly, or implausible stories; confusion, disorientation or contradictory statements not due to mental dysfunction; aggression, anger, denial, non-responsiveness, agitation or anxiety; sudden or any unexplained change in appearance or behavior.

FAMILY/CAREGIVER INDICATORS

- ▶ Individual does not allow adult to speak for himself or herself, or to see others without the caregiver or relative present.
- ▶ Family or caregiver fail to provide assistance, or they demonstrate attitudes of indifference or anger toward the adult.
- ▶ Conflicting information received from family, caregivers, and victim.

INDICATORS OF SELF-NEGLECT

- ▶ The adult may be lacking essential food, clothing, shelter and healthcare; is unable to obtain goods and services necessary to maintain physical and mental health, emotional well-being, and general safety; may compulsively hoard large quantities of items and materials that impairs their ability to care for themselves or substantially threatens their life and safety.
- ▶ Indicators of Financial Exploitation
- ▶ A caregiver or family member with access to an adult's money appears to use the funds for personal gain rather than for the adult, resulting in many unpaid bills or overdue rent, for example.
- ▶ An adult does not have adequate food, clothing or personal care items when there appears to be enough money to obtain them.
- ▶ An adult is grossly overcharged for residence or services.
- ▶ An adult loans large sums of money with no arrangement for repayment.
- ▶ An adult reports of deception or theft of property or funds.
- ▶ An adult suddenly changes will or other financial documents.

PROGRAM PROFILE

When a report is received, a trained Adult Protective Services caseworker responds within a specified time period depending on the severity of the case: within 24 hours for life threatening situations, within 72 hours for most neglect and non-threatening physical abuse situations and up to seven days for most emotional abuse or financial exploitation reports.

Depending on the adult's resources, needs and wishes, interventions may include:

- ▶ Health care services
- ▶ Home care services
- ▶ Nutrition services
- ▶ Adult day services
- ▶ Respite care and support groups for the caregiver
- ▶ Housing assistance
- ▶ Counseling referral for the victim and/or the abuser
- ▶ Review for surrogate decision maker
- ▶ Review of placement needs
- ▶ Emergency responses for housing, food, physical and/or mental health services
- ▶ Financial or legal assistance and protections, such as representative payee, direct deposit, trusts, order of protection, civil suit and/or criminal charges.

For more information, please contact

Aging.APS.Training@illinois.gov.

You may also visit:

<https://ilaging.illinois.gov/engage.html>

to learn more about Adult Protective Services and the Illinois Department on Aging.

**Adult Protective Services Hotline:
1-866-800-1409, 24-hour, toll-free**

