Responding to the Epidemic: The Nation’s First Elder Abuse Forensic Center

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Areas of focus:

- Direct service
- Education & Training
- Research
- Advocacy
- Public Awareness
- Technical Assistance
- Local Laboratory
Elder abuse

- Physical, sexual or psychological abuse, as well as neglect, abandonment and financial exploitation of an older person by another person or entity,
- That occurs in any setting (e.g., home, community or facility),
- Either:
  - In a relationship where there is an expectation of trust; and/or
  - When an older person is targeted based on age or disability.
Elder Abuse is . . .
Types of Elder Abuse

- Physical Abuse
- Financial Abuse
- Emotional Abuse
- Sexual Abuse
- Self-Neglect
- Neglect
Elder Abuse in the United States

1 in 10 Americans age 60+

experienced abuse over one year,

and many experienced it in multiple forms.
Negative Consequences

- Are twice as likely to be hospitalized than other seniors
- Are four times more likely than non-abused older adults to go into nursing homes
- Can be exploited to the extent that they turn to Medicaid as a result of their losses
- Have a mortality rate three times greater than others in their age group
Who Abuses?

- 75–90% of perpetrators are relatives
  - Often these family members suffer from a substance abuse or untreated mental health disorder
- Of these, nearly half are adult children
- 52% are men
- 30% are themselves over 60 years old
Fo·ren·sic

- Of, relating to, or denoting the application of scientific methods and techniques to the investigation of crime.
Why an Elder Abuse Forensic Center?

Social workers, law enforcement and prosecutors require information from a medical source in order to substantiate a report of elder abuse. This is common especially in cases involving neglect, self-neglect or physical/sexual abuse.

These professionals also need expert assessment of client’s cognition and capacity to make decisions.
The model builds upon an adaptation of Wagner's Chronic Care Model designed to interpret the chronic care services established by the Care Advocate Model (Alkema, Wilber, Shannon, & Allen, 2007).
What does the Forensic Center do?

- Formal case review meetings occur weekly at APS
- In home visits for medical and/or psychological assessments. Reports submitted to requesting FC member. House calls made with APS workers, law enforcement, Ombudsman, etc.
- Review medical records, photos, medication lists
- Contact client’s treating physicians
- Testify in court
Financial and In-Kind Support

- Made possible through a grant from the Archstone Foundation and in-kind contribution from the 10 agencies involved.

- SSA currently provides 5000 square feet of space in the Adult Protective Services building for weekly meetings.

- SSA also provides $50,000/year for medical/psychological staff on team.
Implications

- An elder abuse multidisciplinary team increases rates of prosecution for financial exploitation.
- The strongest predictor of criminal filing and conviction was whether the case was presented at the Forensic Center, with 10 times greater odds of submission to the District Attorney.
- The elder abuse forensic center model facilitates cooperation and group problem solving among key professionals, and provides additional resources such as neuropsychological testing, medical record review, and direct access to the Office of the Public Guardian.
Conclusions

1. Abuse of vulnerable adults cannot be addressed without collaboration;
2. Effective collaboration is possible with strong leadership, sensitivity to “cultural” differences (i.e., between medical, social service and law enforcement professionals)
3. Collaboration makes for more effective response to elder abuse for FC team members and for victims of elder abuse
Further Reading

- **Elder Abuse Forensic Centers.** Schneider DC, Mosqueda L, Falk E, Huba GJ. J Elder Abuse Negl, 22: (3-4);255-274.
- **Creating an Elder Abuse Forensic Center: Philosophy into Action.** [dvd and manual] Mosqueda L, Twomey M, Chen E, Odom I. Learn more, Order from Terra Nova Films.
- **Do We Really Need Another Meeting? Lessons From the Los Angeles County Elder Abuse Forensic Center.** Navarro, A, Wilber, K, Yonashiro, J, Homeier, D. The Gerontologist 2010. doi:10.1093/geront/gnq018
- **The Clinical and Medical Forensics of Elder Abuse and Neglect.** Dyer, C, Connolly, MT and McFeeley, P. in Elder Mistreatment: Abuse, Neglect, and Exploitation in an Aging America, National Academies Press (US); 2003.
Resources

- National Center on Elder Abuse – www.ncea.aoa.gov
- Orange County Elder Abuse Forensic Center, Center of Excellence on Elder Abuse and Neglect, UCI www.centeronelderabuse.org
- Los Angeles Elder Abuse Forensic Center – www.lacelderabuse.org/
- NYC Elder Abuse Center – http://nyceac.com/