



Who is a “Vulnerable Adult?”

Things aren't always as they seem. We have learned much about “domestic violence” in recent years, but 50 years ago it was a family's “dirty little secret.”

When mom got smacked around, she, for the most part, didn't complain or even want people to know because she was often emotionally and/or financially dependent upon to her abuser.

Today, we are unfortunately seeing an increase in the number of cases of “elder abuse.” And, like spousal abuse, it either goes unrecognized or is denied by the receiver. Elder abuse can take on many forms - it can be physical, but can also be mental, emotional or financial. Also not unlike many instances of spousal abuse, elder abuse flourishes because the abused party is dependent, in some respect, on his/her abuser.

A “vulnerable adult” is a person of accumulated years who, because of health issues, frailty or memory loss need to be dependent on others. Many times, they seem capable so it is easy for a lay person to miss what may be obvious signs to a professional. Some of the abuses are devious, subliminal and occur over time. Some can be vicious and brutal. It is the subliminal abuses that the “vulnerable adult” is most likely to encounter.

Case Study: Undue influence

John is an 87-year-old widower. His wife had been ill for several months prior to her passing and he hired a private caregiver to help with her care. The caregiver insinuated herself into every aspect of the grieving widower's life until he began to feel that only she could fill the void left by the death of his wife of 62 years. When John's daughter wanted to visit, the caregiver convinced John that “this wasn't a good time.” Each time one of his old buddies called to speak to him, they were told that he was napping. Pretty soon, most people stopped calling. When his daughter made a surprise visit, it was truly a surprise. The caregiver answered the door wearing her mother's jewelry. John's daughter wanted to take him shopping for new clothes. When she asked him if he had his checkbook with him, she noted that it was now a joint account with the caregiver.

Financial abuse

Mary wasn't a wealthy woman. She had her husband's Social Security and a small pension which should have allowed her to live comfortably in the little house they had purchased with his GI loan. Neighbors were noticing that the home was showing signs of neglect, but they chalked it up to her getting older and less able

to get things done. Mary only had one child. Her son whom she adores lives out of state. Every month around the 3rd day of the month (right after her Social Security check comes) her son calls her with some drastic emergency (his car broke down, the hot water heater went out, etc.) and asks for a loan of “a few hundred dollars to tide him over.” As time goes by, the needs became greater and the amounts larger. Pretty soon Mary is tapping into her meager savings and scrimping on her own needs. Mary loves her son and has helped him out financially for many years. Why would this be different?

Abuse .. or not?

Ethel is 75 and lives in a lovely home. She suffers from Parkinson's disease and needs some help. Her tax accountant has offered to assist her. He has made himself her Power of Attorney and his wife has The Durable Power of Attorney for Health Care. They have hired a caregiver for Ethel. They have informed the caregiver that Ethel only seems mentally alert, but that she really isn't and that the caregiver works for them. The tax man and his wife have planned a two-week cruise and to make sure that all is stable while they are gone, they have Ethel placed in a geriatric psychiatric unit for 13 days of observation. Ethel is very frightened by this and all of her protestations are read as paranoia (a symptom her benefactors claim is the reason for her stay). When they return from their trip, they move Ethel into their home and put her home up for sale. Fortunately for Ethel, the social worker assigned to her case at the hospital was uncomfortable with the situation and reported it to Adult Protective Services.

Ethel now has a court appointed conservator and a geriatric care manager. She is back living in her own home with a LivHOME caregiver who is employed and supervised by the Care Manager.

In each of these scenarios, the difference between abuse and lifestyle or “life practice” can be difficult to determine. This is why hiring a Geriatric Care Manager to assess the situation makes so much sense. You wouldn't leave your children's care to chance... why take chances with regard to your parent's welfare? **HB**

For more information, call LivHome at (949) 794-9470 to speak with a professional.