**Neglect**

- Lack of basic hygiene, adequate food, or clean and appropriate clothing
- Lack of medical aids (glasses, walker, teeth, hearing aid, medications)
- Person with dementia left unsupervised
- Person confined to bed is left without care
- Home cluttered, filthy, in disrepair, or having fire and safety hazards
- Home without adequate facilities (stove, refrigerator, heat, cooling, working plumbing, and electricity)
- Untreated pressure “bed” sores (pressure ulcers)

**Financial Abuse/Exploitation**

- Lack of amenities victim could afford
- Vulnerable elder/adult “voluntarily” giving uncharacteristically excessive financial reimbursement/gifts for needed care and companionship
- Caregiver has control of elder’s money but is failing to provide for elder’s needs
- Vulnerable elder/adult has signed property transfers (Power of Attorney, new will, etc.) but is unable to comprehend the transaction or what it means

**Psychological/Emotional Abuse**

- Unexplained or uncharacteristic changes in behavior, such as withdrawal from normal activities, unexplained changes in alertness, other
- Caregiver isolates elder (doesn’t let anyone into the home or speak to the elder)
- Caregiver is verbally aggressive or demeaning, controlling, overly concerned about spending money, or uncaring

**Physical/Sexual Abuse**

- Inadequately explained fractures, bruises, welts, cuts, sores or burns
- Unexplained sexually transmitted diseases
WHAT IS ELDER ABUSE?

In general, elder abuse refers to intentional or neglectful acts by a caregiver or “trusted” individual that lead to, or may lead to, harm of a vulnerable elder. In many states, younger adults with disabilities may qualify for the same services and protections. Physical abuse; neglect; emotional or psychological abuse; financial abuse and exploitation; sexual abuse; and abandonment are considered forms of elder abuse. In many states, self-neglect is also considered mistreatment.

WHO IS AT RISK?

Elder abuse can occur anywhere – in the home, in nursing homes, or other institutions. It affects seniors across all socio-economic groups, cultures, and races.

Based on available information, women and “older” elders are more likely to be victimized. Dementia is a significant risk factor. Mental health and substance abuse issues – of both abusers and victims – are risk factors. Isolation can also contribute to risk.

WHAT SHOULD I DO IF I SUSPECT ABUSE?

Report your concerns.

Most cases of elder abuse go undetected. Don’t assume that someone has already reported a suspicious situation. The agency receiving the report will ask what you observed, who was involved, and who they can contact to learn more.

You do not need to prove that abuse is occurring; it is up to the professionals to investigate the suspicions.

To report suspected abuse or neglect of adults, call the 24-hour reporting line at 240-777-3000.

To report suspected abuse in a nursing home or long-term care facility, contact the Montgomery County Long-Term Care Ombudsman office at 240-777-3369.

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For more information, visit www.montgomerycountymd.gov/hhs

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Language translation and alternative formats of this document are available upon request.