Under Reporting of Abuse of Older Adults in the Prairie Provinces: A Summary Report of Findings

Kerstin Roger[1], Donna Goodridge[2], Michelle Ranville[3], Christine A. Walsh[4], Cewick, M[5]., Hall, K. [6] , Liepert, C. [7] , Songose, L. [8] , Anjorin-Ohu, K. [9] , PausJenssen, E. [10]

[1] Corresponding Author: Professor, Department of Community Health Sciences, Rady Faculty of Health Sciences, College of Medicine, University of Manitoba, Winnipeg, Manitoba, Canada; Kerstin.Roger@umanitoba.ca
[2] Co-Investigator, Professor, College of Medicine, University of Saskatchewan, Saskatoon, Saskatchewan
[3] Co-Investigator, Manager Community Services, A&O: Support Services for Older Adults, Winnipeg, Manitoba
[4] Co-Investigator, Professor, Faculty of Social Work, University of Calgary, Calgary, Alberta
[5] Research Assistant, University of Manitoba, Winnipeg, Manitoba
[6] Research Assistant, PhD. Student, College of Kinesiology, University of Saskatchewan, Saskatoon, Saskatchewan
[7] Research Assistant, BSW, MSW, RSW, Alberta
[8] Research Assistant, University of Manitoba, Winnipeg, Manitoba
[9] Community Outreach Caseworker, Kerby Centre, Calgary, Alberta
[10] Community Liaison, Saskatoon Council on Aging, Saskatoon, Saskatchewan

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Objectives of the Study

The objective of this tri-provincial (Alberta, Saskatchewan, Manitoba) research study funded by the PrairieAction Foundation was to explore the reasons for under-reporting in cases of abuse against older adults living in the community. Because reporting abuse of older adults living in the community is not mandatory, the use of the word 'reporting' in this study encompassed a wide range of communications. For example, reporting was understood to include broadly seeking help from a neighbour, disclosing to a friend or family member but asking it not be reported officially, discussing concerns with a social worker in a community organization and seeking help in regards to personal coping strategies, or also, reporting more formally to the police or RCMP. Understanding the barriers and facilitators of abuse disclosure is critical to better inform the development of recommendations designed to improve disclosure activities, to facilitate help-seeking behaviours, to benefit service development, and when required, to inform practices related to formal reporting. *Abuse of older adults* is the term used in this study, rather than 'elder abuse', which may be confused with the title 'elder' used for Indigenous spiritual leaders and guides. This distinction originated in discussions with the community in Manitoba over the years. However, where a formal organization uses 'elder abuse', this phrase will be used.

Background

According to 2019 Canadian population data, 17 per cent of our population – or 6.5 million Canadians – are older than 65 (Statistics Canada, 2020). With unprecedented growth in Canada's older population (Novak & Campbell, 2014), the abuse of older adults is increasingly recognized as a public health crisis (Castle, Ferguson-Rome, & Teresi, 2015; Roger, Brownridge, & Ursel, 2015; Walsh, D'Aoust, & Beamer, 2011; Walsh & Yon, 2012; Wang,

Brisbin, Loo, & Straus, 2015). The term abuse of older adults includes psychological, physical, financial, and sexual abuse as well as neglect (Castle, Ferguson-Rome & Teresi, 2015; Miszkurka, Steensma, & Phillips, 2016; Souto, Guruge, Merighi, & Pinto de Jesus, 2016; Wang et al., 2015; Walsh & Yon, 2012; Yon, Mikton, Gassoumis, & Wilber, 2017). According to the World Health Organization (2018),

> Elder abuse is 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. This type of violence constitutes a violation of human rights and includes physical, sexual, psychological, and emotional abuse; financial and material abuse; abandonment; neglect; and serious loss of dignity and respect.

Although precedence estimates vary, the best available evidence from 52 studies in 28 countries from diverse regions, estimated that, over the past year, 15.7% of people aged 60 years and older were subjected to some form of abuse (Yon et al., 2017). The World Health Organization (2018) explains that some risk factors may increase the potential for abuse and "are identified at individual, relationship, community and socio-cultural levels." Risk factors include stress related to caregiving, increasing dependency, social isolation, limited cognitive ability, mental illness, shared living accommodations, poverty, ageism, and the overuse or abuse of illicit drugs and/or alcohol, commonly identified (Peterson et al., 2014; Roger et al., 2015). Perpetrators of abuse of older adults are most often adult family members of the older adult, but can include acquaintances, service providers, and strangers, including financial abuse perpetrated via online and telephone scams, as examples (Spencer & Gutman, 2008).

Although abuse of older adults is relatively common, estimates suggest that less than one-third of the cases get reported (Pickering & Rempusheski, 2014). The nature of disclosure of abuse against older adults living in the community, and the focus of this report, has been subjected to limited research attention (Roger et al., 2015). The under-reporting of abuse of older adults living in the community has been linked to how families and communities understand abuse against older adults, and the role that ageism plays in our society (Podnieks, 1993; Roger & Ursel, 2009). Research on the abuse of older adults and disclosure more specifically, is particularly limited in the Canadian Prairie provinces. This situation is further impacted by the existing context of low levels of funding directed at abuse prevention and intervention, resulting in limited formal support systems in some communities, including those directed towards advocating for additional resources.

As reporting abuse is key to accessing appropriate services, understanding the many reasons why older adults, service providers, and family or friends may not report abuse against older adults living in the community, is imperative. One barrier to disclosure of abuse is the lack of awareness regarding abuse of older adults among the general public (Roger et al., 2015), which results in little support and attention directed at ending abuse (Castle et al., 2015; Wang et al., 2015). Further, and concerning, is that our research has revealed that abuse of older adults in the community has not been considered a priority, except for those working directly with older adults or their families. This is a global issue, evidenced by the fact that none of the recently adopted targets by the United Nations to reduce interpersonal violence have explicitly addressed the abuse of older adults (Yon et al., 2017). Most recent events related to COVID-19 have drawn greater attention to the plight of older adults living in the community in Canada (Roger, Cewick,

Songose, Goodridge, Ranville, & Walsh, 2020), but this is very recent and more work has yet to be done.

Impact of COVID-19

Since this study was conducted prior to COVID-19 and we were preparing community reports and academic papers prior to self-isolation and quarantine, it is highly relevant to make some links between abuse of older adults pre- and post- COVID-19. None of the previous risk factors themselves change due to COVID-19 environments, but we can perceive that each risk factor can exponentially be increased given the new requirements of self-isolation and quarantine. The resources to deal with older adults at risk are slim to begin with, as this study has shown, and due to a heightened response to COVID-19, would be even more restricted. According to Sajan (2020) the vast majority of those dying from COVID-19 are those aged 80 or older, but advocates say the pandemic also puts them at risk of abuse. While we have heard much in the news about nursing homes, seniors living in the community – either already in abusive situations or now in new abusive relationships – have remained largely invisible from the media and the public eye. If this was a vulnerable population before COVID-19, it will be even more so now. A possible silver lining in a terrible situation is that more attention to seniors seems to be resulting – and this study recommends that such attention be paid also to seniors living in the community. The themes of abuse are not new, and not different, but they will be heightened (Roger et al., 2020).

Research Methods

This mixed-methods study was conducted using qualitative and quantitative research methods. Ethics was obtained from the relevant institutions in each province. Recruitment of a convince sample for the qualitative component was conducted by word of mouth, emails, and community-based websites using study posters distributed by community organizations, senior centre public newsletters, health regions/authorities, older adult resource centres/seniors centres from August 2019 to February 2020. Participants sought were from two groups: older adults (55+) who had experienced abuse in the last ten years, and service providers working with older adults in any capacity. The cut off age of 55 was chosen to reflect services offered by community partner, *A&O: Support Services to Older Adults Inc*. In some cases, family member came forward, as well as older adults. After providing written consent, semi-structured individual interviews with participants lasting between 1-2 hours, and these were conducted by a researcher or trained research assistant. Participants included older adults, family members of older adults, and service providers (e.g. social workers, nurses, police). Interviews were held in people's homes, by phone/skype, or in an office in a community organization in a private space chosen by the participant.

Interviews were audio-recorded and transcribed. Study participants were assigned or chose pseudonyms to ensure anonymity, and any identifying information was removed from the transcripts.

Table I – Summary of the Sample

	Alberta	Manitoba	Saskatchewan
Number of Older Adults/Family Interviewed	10	4	0
Number of Service Providers /Professionals Interviewed	10	7	6

The quantitative component of the study used secondary data, annual reports from 2005-2010 and 2014–2019, provided by our three community partners, organizations and shelters in Alberta and Manitoba. Saskatchewan did not have data to share. Annual reports contained information about gender and the age of clients 65 years and older seeking services for abuse. The data were analyzed for trends in reporting abuse of older adults over that time frame.

We also conducted environmental scans beginning in the summer of 2019. As of March 15, 2020, an additional environmental scan was conducted examining media reports on the impact of COVID-19 on community-residing seniors (Roger, Cewick, Songose, Goodridge, Ranville, Walsh, 2020). The global pandemic, while hazardous to seniors in general, was particularly harmful to seniors living in care settings. The media attention we found identified the invisibility of seniors living in the community, and illustrated the lack of services and supports, that we know in COVID-19 was exacerbated by isolation requirements.

This report presents preliminary findings. Academic papers are being prepared which will expand on the data as it relates to deeply embedded ageism in our society, and we understand ageism to underpin local and global events as they unfolded during this study.

Analysis

First, a sample of the transcribed interviews were independently reviewed, conducting a line by line coding to determine initial emerging themes, by three research team members. After reviewing and discussing the initial themes with research team members, and subsequently the entire research team, a comprehensive coding scheme was developed and used to code the complete set of transcripts. Braun & Clarke's (2006) guidelines for conducting quality research was applied – this refers to common concepts of quality in qualitative research, reflecting traditional concepts of rigor and validity. A final document was prepared with themes and illustrative quotes drawn from the transcripts reviewed and discussed by the whole research team and used in preparing reports and academic papers.

The quantitative component of the study used secondary data provided from our three community partners, organizations and shelters in Alberta and Manitoba. Saskatchewan did not have data to share. The data comprised annual reports from 2005-2010 and 2014 - 2019 from community organizations in Alberta and Manitoba. The annual reports contained information about gender and the age of clients 65 years and older seeking services for abuse. This data was analyzed for trends in reporting abuse of older adults over that time frame.

Results

Qualitative

Two broad themes emerged in the analysis related to positive and negative experiences of the disclosure. The following provides descriptions and perceptions of the two major themes with the related sub-themes.

Table II: Primary Selected Themes from Interviews

When Reporting Goes Well	When Reporting Does Not Go Well
Word abuse not used	Punished for reporting
Small steps matter	Unclear what should be reported
Police are considered/involved	Reliance on perpetrator
Individuals forgive after talking about it	Fear / pride / shame

When Reporting Goes Well

The Word 'Abuse' is Not Used. One of the themes identified through analysis was the fact that many older adults did not use the word 'abuse' when talking about abusive types of events in their lives, and several service providers corroborated that many older adults do not use this word. While service providers do use this term amongst themselves, they cautioned about its use when entering into conversations with older adults. One service provider from Manitoba described:

> Like, I think elder abuse is a pretty standard term that we use between us. I'm not going to tell my client you're going through elder abuse, like I'm not going to say that to a

> client. I would be like – sounds like there may be some issues here Or sounds like someone's taking advantage of you. Or, sounds like someone might not be treating you right, asking the question, like 'do you feel everything is ok with you, is your son treating you the way he should be?' Or, you know that kind of thing. We're not going to, we never say, are you 'elder abused', or are you being abused? I feel like the abuse is such a harsh word for people to hear that they don't like. They might just shy away from that word like, 'No way is my son abusing me! (Manitoba Service Provider)

Here, our participants are telling us that the phrase 'elder abuse' was not viewed as useful to deepening discussions about abuse with older adults.

Small Steps Matter. Many older adults want very little to do with the legal system, law enforcement, and the police, according to our findings. Older adults and their caregivers expressed wanting assistance with small steps that might work for them (e.g., not reporting to police). An older adult describes this:

> I think if the other person is in a situation like me, the most important thing is that you do not make such a big deal of things because it just brings trouble to our lives. So, try to find something that is happy and comfortable – the kind of least embarrassing moments. Also, maybe they have different ideas as to what has happened before, which could change your situation very easily (Alberta Older Adult).

Older adults want to talk about how service providers can support them. They express that they want options, but nothing forced upon their situation. For example, one service provider from Saskatchewan explains:

> ….what resources would help them? I think being able to sort of talk to someone in a non-judgmental way with the promise that nothing happens unless they're comfortable with it happening, would be important. (Saskatchewan Service Provider)

Police Involvement. Even though many older adults are reluctant to contact the police, some family members do consider calling the police. They, however, weigh the potential benefits and harms with having the police involved, as one family member in Manitoba explained:

> So, I did consider the police. I have a key to their [parents] house. I considered entering their home, with police, but- but the more I thought about it, the more that was just to appease me, and to know that I'm doing something to help, versus is this the help that she wants or needs. And I just- the conclusion I came to, mostly from speaking to that psychiatrist, is unless they ask for your help, are you really helping them? Or are they really going to change? (Manitoba Family Member)

Forgive and Carry On. For some, their religious background, expressed by one participant as living the "path of God" or belief in forgiveness, meant that they forgave the abuse and continued their daily life. One family member quoted their mother saying she had said, 'this is la vida'. The service providers concurred and said that in many cases staying connected to the older adult, and following what the family member or the older adult wanted (e.g., forgiveness) was key to future interventions or worked together. As follows, here is one service provider's view:

> …the most important thing is just staying connected with the individual. Or making sure that there are some supports. Well, I guess they can get in touch with probably SCOA. Get in touch with any other kinds of support networks that they can have, whether it's in

> their church, whether it's with their community association, whether it's in an exercise class. It's just breaking that isolation and then getting the information that they need, directing them to information where they can find help. Even places where they can get a definition of what abuse is. (Saskatchewan Service Provider)

When Reporting Does Not Go Well

Punished for Reporting. Clearly, many family members, older adults and service providers made this very clear – fear of reprisal was first and foremost a reason not to disclose or report. While this seems self-apparent and not a very original theme, the need to continue to document this theme as a key finding suggests that it remains one of the key barriers to disclosure, despite the work we know has been done in this area over time. Here, one service provider states:

> Absolutely. In my seven years, I think the power of um, the relationship say between our client and the individual that might be decent but primarily it's a spouse, or the adult son or daughter - a trusted individual really is significant. So I think that at times, that is probably one of the most significant barriers that we have to overcome, right? Because the individual is considering the 30-50 years of the relationship, the fear of the retaliation, being isolated, losing connections through that individual, and at the end of the day, not wanting that individual to be in trouble I find is by far one of the biggest things that we have to work through with clients. They may also have bad experiences previously with the court systems in place for their adult son and daughter, and there hasn't been either an outcome that has been desirable or at times it may be viewed that

> this is a mental health consideration - and not something that's like punishable, if you will, right? (Alberta Service Provider)

It is Unclear What Should be Reported. A second reason why family or older adults may not report or disclose is, according to our findings, that many older adults themselves do not know exactly what they ought to say, they do not identify with the word abuse, and they define it in many ways which do not reflect themselves. Abuse was thought of a different experience - something else, a different event than what was happening to them. And indeed, that 'different event' happened to other people – one might describe this as a kind of disassociation with the reality, perhaps a way to survive in the abusive situation by reframing it, or perhaps having culturally specific or other ways of understanding what 'abuse' is.

Reliance on Perpetrator. In many cases, family situations are very complex, and older adults depend on their abuser for many different things. This might include medical appointments, grocery shopping, or basic housekeeping tasks. We did not find older adults in this study were dependent on their perpetrator for finances, in fact, the opposite was true. The reasons for being reliant are described here as follows:

> One of the other barriers, too, per se, is around dependence, or being worried that they may lose connection to family, right? That one person is the only one that they have left to meet their needs. Like you might talk to people, and they may say that that's one of the reasons why they chose not to report, or they've reached a point where they know they could go somewhere else such as a shelter or a hospital. And, um, there would be no risk to them as well. (Alberta Service Provider)

Fear, Pride and Shame. Well known to researchers and practitioners alike on abuse across the lifespan, the theme of fear and pride emerged in not wanting to let others know that the older adult (oneself) was in an abusive situation. In one very complex family situation, where psychological threats, finances, physical bullying had all been present, nonetheless, the older adult did not want to reveal what was going on – or call it abuse. One older adult describes the shame he feels, as someone who has experienced abuse as a man:

> Well you know being a man is very difficult for men. Because we don′t like to show emotion, we don′t like to, uh, let others think that we are weaker than they are. We don′t like to cause trouble, like I don′t anyways. (Alberta Older Adult)

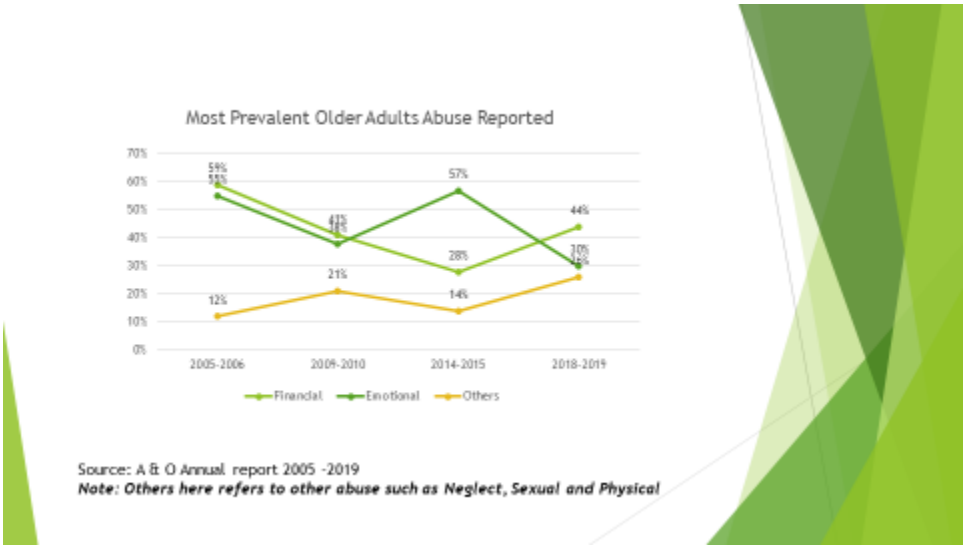
Quantitative

Given the data analyzed in this study, females tend to report the abuse of older adults more often than men. Females make up approximately three-quarters (75.5%) of those who reported abuse from 2005-2010. In 2014-2019, females again made up about 80% of older adults who reported abuse during that period. This was also reflected in the use of the Safe Suite program by older adults in Manitoba. In Manitoba, given the data reviewed, women were reported using the Safe Suite program more often than men.

The most prevalent type of abuse reported from 2005-2019 was financial and psychological (emotional) abuse. For instance, in 2005-2006, financial abuse was recorded as 59%, and psychological abuse was recorded as 55% of recorded abuses. In 2018-2019, financial abuse recorded 44%, and psychological abuse was recorded as 30% of the entire abuse reported that period.

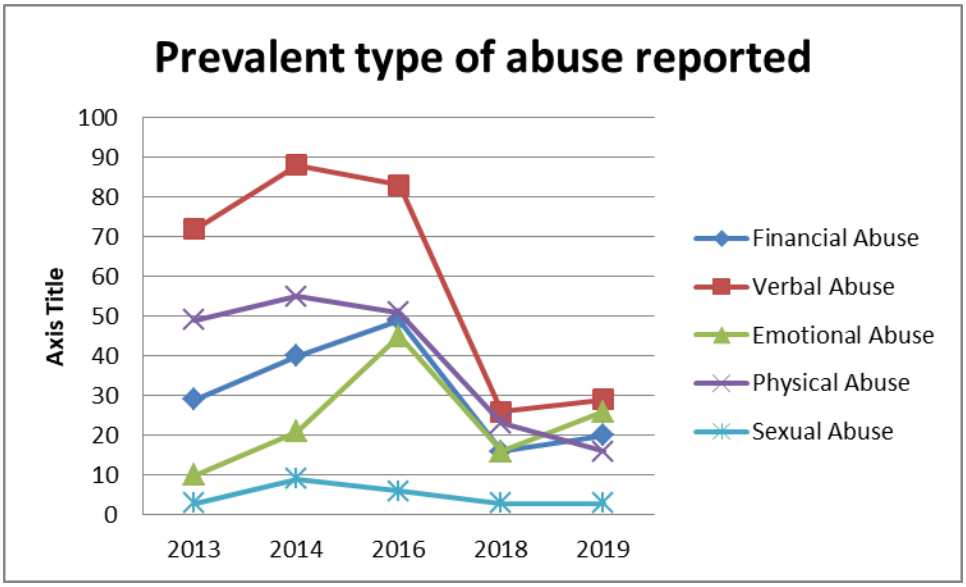
The most prevalent perpetrators of abuse of older adults, according to this data, were adult children (e.g., sons and daughters). However, adult sons tend to be the more frequent abusers of older adult abuse. In 2014-2015, 41% of victims lived with perpetrators, and 39% lived alone. However, in 2018-2019, 41% of victims lived with perpetrators, and 46% lived alone. Reports of abuse of older adults most frequently came from urban centers; information on reports of abuse was less available in rural/remote areas. Rural areas may hold higher levels of stigma regarding reporting and abuse, or they may have fewer resources available, even for those who might be willing to report.

Table III: Summary of Annual Reports, A&O: Support Services, 2005-2019



Tables IV and V demonstrate the trends of reporting that have occurred at A&O: Support Services and Kerby Centre over time. Trends may be impacted by the kinds of funding provincial and federal governments make available, whether there were education campaigns on abuse of older adults, or whether staff was able to devote more time and resources to this issue.

Table IV: Summary Themes, Kerby Centre, Annual Report 2013-2019



Community Resources in Three Participating Sites

This study revealed the levels of support and resources in each province (see Appendix I). For example, Alberta is the most resource-rich in this area, while Manitoba has many good resources available. Saskatchewan has, despite years of effort, not been able to secure the same kind of stakeholder support and funding. This study and report will hopefully help to change that.

Conclusion and Recommendations

Based on the findings of this study, there is a noted need to create community awareness about the abuse of older adults living in the community**.** Creating community awareness will create opportunities for older adults to talk about what is going on in their lives. Talking about what is going on, in whatever way and to whom older adults or their family members would like to do, is a key finding of this study. Reporting to police was not seen as a priority in all cases.

One recommendation includes providing housing for seniors facing abuse in all prairie provinces. By way of example in Manitoba, the Safe Suite is temporary housing and is well used. However, since it was found that adult sons and daughters who are abusive, are also found to move in with their aging parents, and they appear to be unemployed and lacking their own housing; one suggestion was providing housing and developing employment opportunities for those adult children.

All three provinces require funding to better support community centres and service provision, improved laws, and greater awareness in all sectors (e.g. police) so that they can focus on the issue of abuse of older adults living in the community. Developing a more integral team approach was lauded by many as valuable, but not possible due to the funding available in communities.

Finally, this study has revealed the paucity of data collected in all community organizations and by provincial bodies on the prevalence of abuse of older adults living in the community. One key recommendation includes the need to establish a central organization in charge of investigating older adult abuse, collecting data, and following up on open cases. This would subsequently include developing an outcome protocol for older adults and their abusers.

This does not necessarily mean support for mandatory reporting, it suggests however, the need for a more organized and cohesive national body be developed on this issue. If more people talk about abuse of older adults, this will be reflected in how we can collect data and how we can better understand the issue.

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APPENDIX I

Selected Community Resources in Manitoba, Saskatchewan, Alberta

Manitoba

A&O: Support Services for Seniors, Inc.

Safe Suite Program, Winnipeg Police Service: Vulnerable Persons Unit

Klinic Community Health, Prevent Elder Abuse Manitoba, 5 Health Authorities

Saskatchewan

Saskatoon Council Older Adults, Saskatoon Crisis Centre, Saskatchewan Seniors Mechanism, Saskatoon City Police, 12 Health Authorities.

Alberta

Calgary: Calgary Police Service Senior Liaison Program, Calgary Senior's Resource Society, Kerby Centre, Kerby Rotary House Shelter, Older Women's Long-term Survival, Seniors' Crisis Line

Edmonton: Elder Abuse Intervention Team, Elder Adult Resource Service, Senior Abuse Help Line, SAGE

Lethbridge: Elder Abuse Awareness Program

Medicine Hat: Community Response to Abuse and Neglect of Elders, Veiner Centre, Wise Owl Program, Red Deer: S.O.A.R