

ABUSE IN FINNISH ELDERLY CARE

*Abuse and maltreatment of the elderly in
institutional settings*

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CONTENTS

- Prevalence
- Occurrence
- Risk factors
- Preventative and interventive measures



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Prevalence

How often does it occur?

- 8-10% of family members report of maltreatment of their elderly loved ones in care facilities. This appears in the processes of silencing and passivation as well as in neglect of necessary care. (Isola & Voutilainen, 1998; Rissanen et. al., 1999)
- The staff of care facilities in Finland reports daily or weekly abuse or neglect occurring as: neglecting oral and other hygiene (34 %), lack of respecting privacy (62 %), ignoring personal hopes and wishes of the elderly (24 %), disregarding self-determination (22 %), child-like treatment (21 %) and heavy-handed treatment (13 %) (Sipiläinen, 2012)



Prevalence

The prevalence of abuse among residents in care facilities and sheltered housing (Sipiläinen H, Kankkunen P, Kvist T, 2009) A survey among elderly care staff (n=697).

The most common forms of physical or social abuse were:

- entering resident's room without knocking or using the doorbell (94 % answered it has happened at least once during last year)
- violating resident's self determination (77 %)
- treating residents like children (75 %)
- rough handling (64 %)
- using sedatives unnecessarily (43 %)



Prevalence

The most common forms of neglect were:

- neglecting oral hygiene (80 %)
- neglecting resident's hygiene (69 %)
- not giving enough food or beverages (31 %)

Staff who found work environment poor thought that residents were often:

- treated like children ($p=0,009$)
- left unnecessarily alone ($p=0,001$)
- not given enough food or beverages ($p<0,001$)
- left untreated with pain ($p=0,001$)



Types of abuse

- In most cases maltreatment of the elderly exercised by the staff in Finnish care facilities is **psychological** or **social**. Maltreatment of the elderly is in most cases **unintentional**, not intentional. (Sipiläinen, 2008)
- Physical or economical abuse in long-term care facilities in Finland is rare. However, **neglect of health care** and actions that show lack of respect for the human dignity of the elderly are more common. (Isola et.al., 1997)''

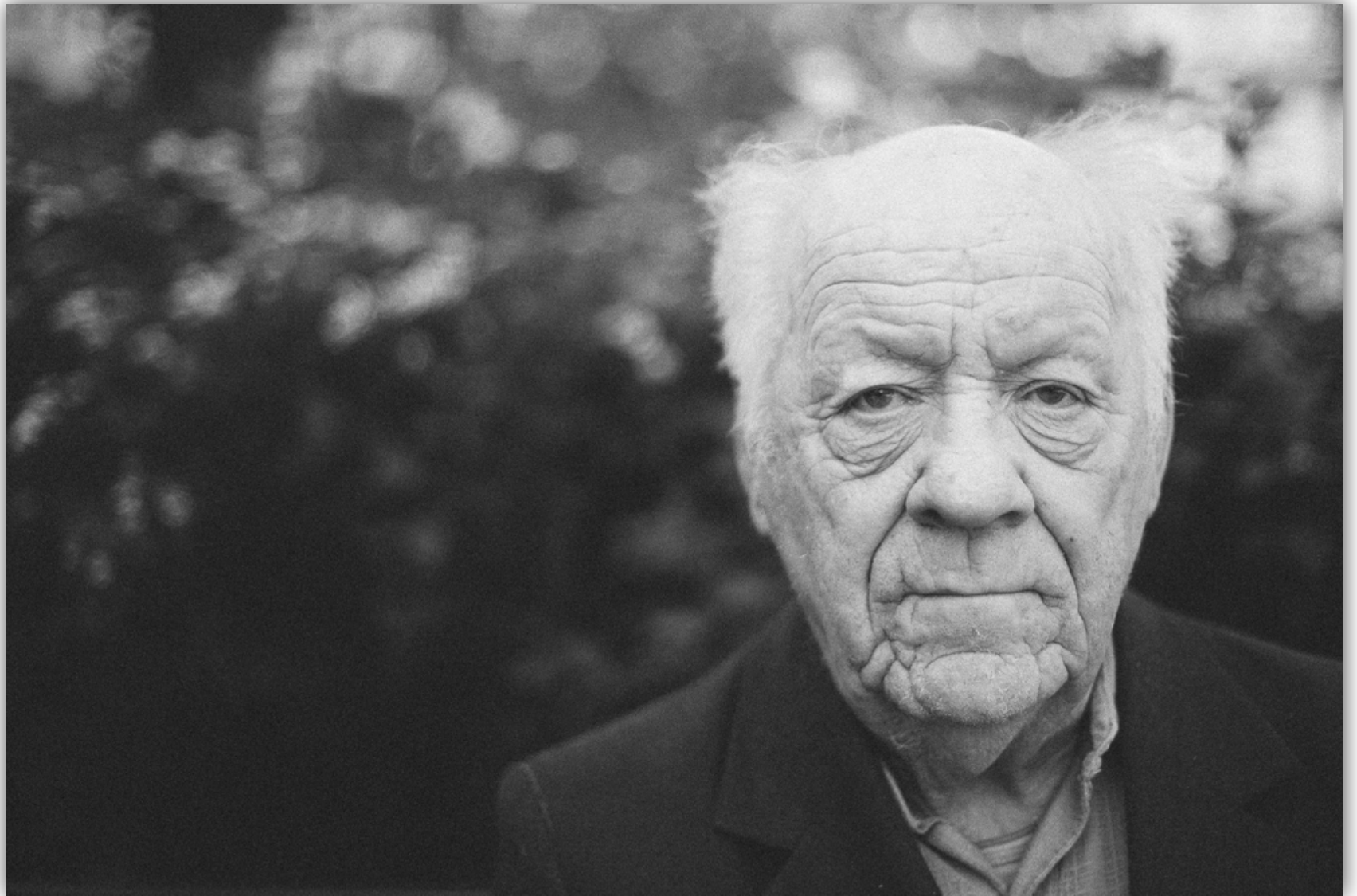
How does it occur to us in Suvanto?

Typical calls on Suvanto help line regarding elder abuse in institutional level or settings concern...

- Nurses worried about the behavior of their colleagues
- Head nurses or managers asking help for dealing with cases of elder abuse perpetrated by their employees
- Family members worried about the behavior of an employee/ injuries observed on their elderly loved ones
- Family members having disagreement about the care plan of their loved ones
- Elderly people with experiences of being neglected by municipal health and social care services
- Elderly people with experiences of helplessness due to the diverse and dispersed network of services



Risk factors



Types of abuse	Risk factors	Preventative factors
Physical	<u>a) Elderly people:</u>	Sufficient informing and briefing
Psychological	Poor physical condition	Education and training
Social	Memory loss	Instructions
Sexual	Behavioral symptoms	Open discussion
Economical	"Challenging" family members	Good management
Professional	<u>b) Personnel and care facilities:</u>	
	Stress, rush, exhaustion	
	Professional deficiencies	
	Perfunctory working culture	

(Sipiläinen, 2008)

Preventive and interventive measures in Finland

- 1) Laws and regulations
 - a) **Constitution:** The right to life, personal liberty and integrity as well as to social security.
 - b) **Legislation defining the duties of authorities** (The Act on the Status and Rights of Patients; Primary Health Care Act; Personal Data Act; Act on Supporting the Functional Capacity of the Ageing Population and on Social and Health Care Services for Older Persons - came into force in 2013 and includes compulsory reporting if safety of an elderly person is endangered.)
 - National and regional supervisory authorities for welfare and health (VALVIRA, AVI)
 - c) **Criminal Code** (physical, sexual and financial crimes)
- 2) National quality recommendations (Quality recommendation to guarantee a good quality of life and improved services for older persons; National Framework for High-Quality Services for Older People)
- 3) Ethical principles for health and social care professionals (several publications)

Thank
you!



More information on Suvanto:

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