



Respect to Prevent
- A whole system approach in
the prevention of elder abuse in
care settings

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Context

- ▶ By 2060, 1 in 8 people will be aged 80 or more
- ▶ Older old more vulnerable to mistreatment
 - poor physical health over three times more likely to report mistreatment
 - poor mental health over six times more likely (Naughton et al, 2010)
- ▶ Prevalence of neglect and mistreatment in residential settings
 - Approximately 57 per cent of staff reported they had observed one or more neglectful acts (Drennan et al. 2012)

Respect to Prevent Educational Programme

An integrated care approach to the prevention of elder abuse.

Provide new learning opportunities in the field of human rights and ageism to prevent elder abuse

To empower older people through human rights awareness education + the exploration of ways of safe-guarding well-being

To build capacity amongst formal carers to 'walk in the older person's shoes' and challenge ageism

To develop/input into the elder abuse policy of care settings

Generational Intelligence

- ▶ The ability to reflect and act, drawing on an understanding of one's own and others life position (Biggs and Lowenstein, 2011)
- ▶ Without this awareness, one cannot see beyond one's own priorities, lack of empathy towards priorities and needs of older people
- ▶ Ageism - negative social attitudes create a context and social space that makes abuse possible
- ▶ Older persons comes to see themselves as being of less value, without the same rights, loose their confidence, their voice.

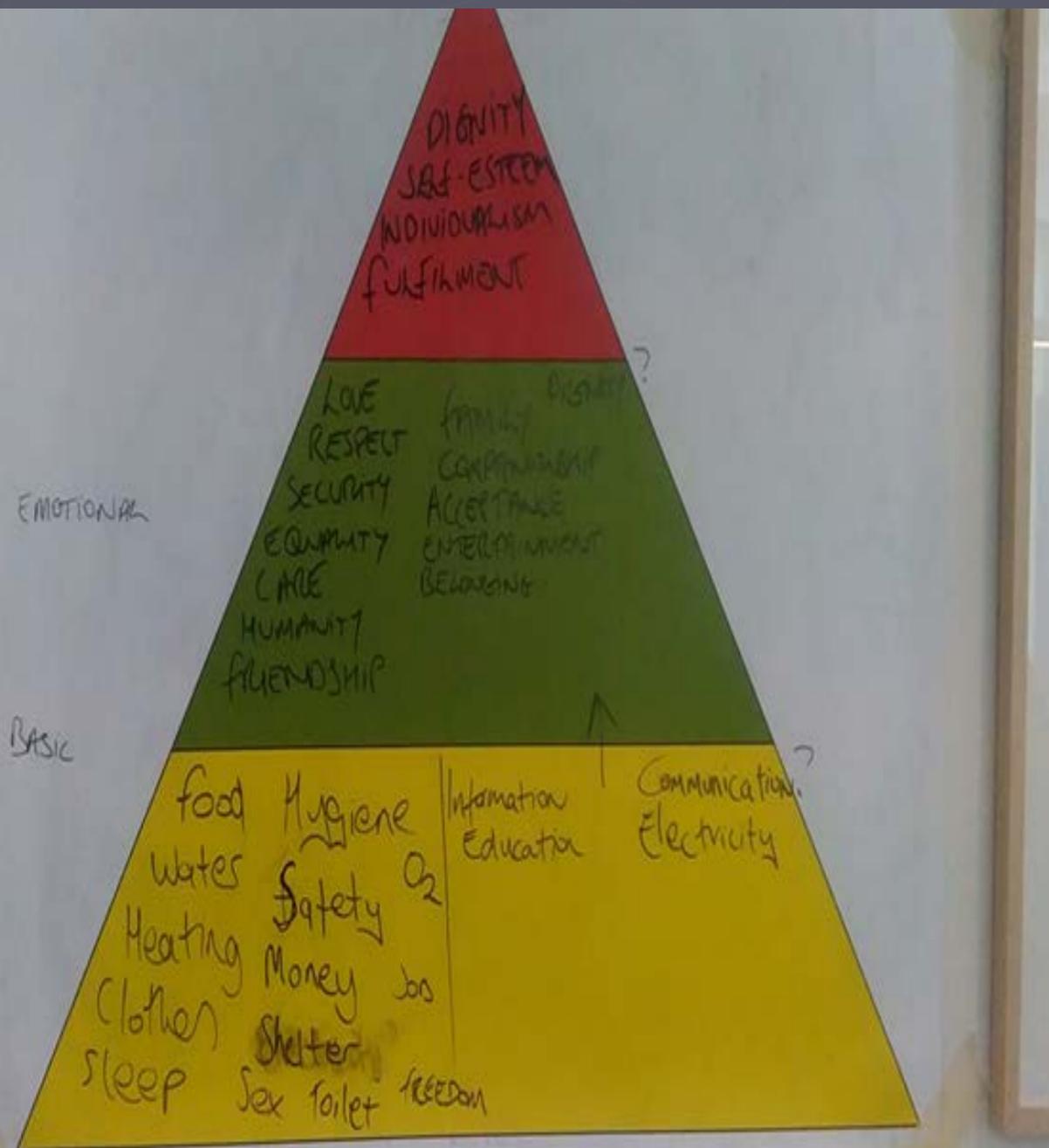
Walking in the older person's shoes

- ▶ Experiential - learning through reflection on experiences
- ▶ Commonalities
- ▶ Priorities – my work, the resident's home
- ▶ What does it feel like to be excluded, to have no control, be dependent

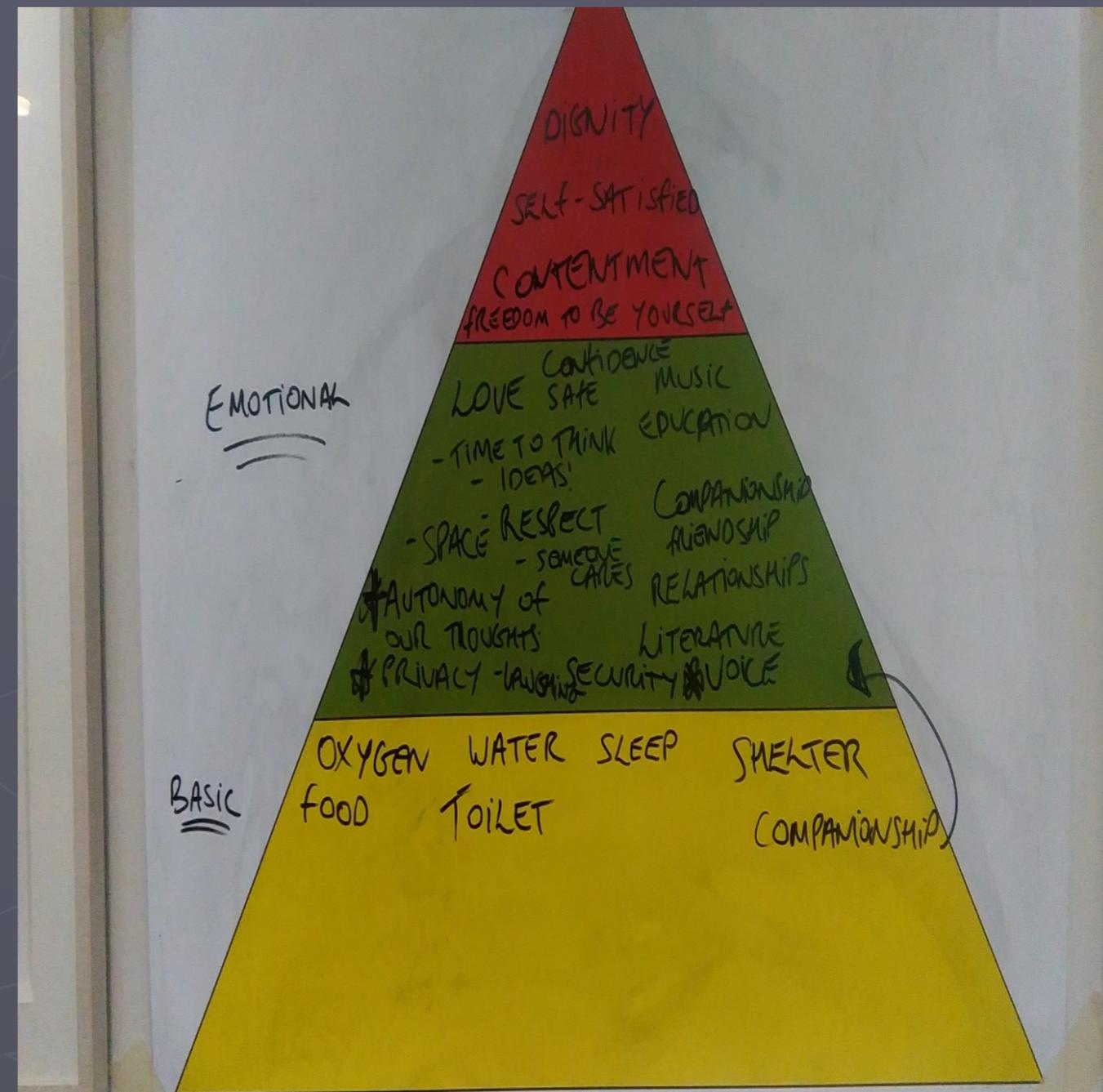


Human Rights Awareness

Staff



Residents



Change the attitude

Change the behaviour

- ▶ Socio- drama - Exploring the older person's right to autonomy, privacy, choice, voice and identifying the behaviour and attitudes that violate these rights
- ▶ What needs to change within the scene if human rights are to be realised?



Impact and Outcomes

Piloted in 13 facilities

- ▶ 128 staff participated
- ▶ 103 care recipients
- ▶ 78 completed pre and post Fraboni Scale of Ageism
- ▶ Control Group = 111



Recruited Participants

Randomization

Experimental group

Control group

Fraboni Scale of ageism

Fraboni Scale of Ageism*

- ▶ Measures the affective component of ageist attitude, includes 3 subscale measures
 - Separation and avoidance
 - Stereotypes ,
 - Affective attitudes and discrimination
- ▶ Post-intervention vs Control Group - Significant difference in Affective attitudes and discrimination, [F(1,179) = 7.12, $p = 0.008$]

**Fraboni, M., Saltstone, R., Hughes, S, 1990*

Staff Workshop Evaluation

- ▶ End of workshop, staff working in centres responded to 9 evaluation items
- ▶ Most positive evaluation being the reported satisfaction with the workshop
- ▶ Least positive concerned perceived ability to help the older person change things in way they want
- ▶ Uncertainty as to human rights in practice, not a general aspect to elderly care or elder abuse in the different countries e.g. Finland

A Space To Reflect on Human Rights in my Workplace

"I go to bed when I want, they do not, we decide it for them, we get them up without even asking, to go to the bathroom they have to wait" (Italian staff participant)

"they have to accept the services offered in the institution:Pampers could be changed more often. They would need indeed group activities, relaxation, going out for walks. Those who can walk, and who live on the ground floor of the facility, go in the park/garden of the facility ... Those who have limited mobility live on first floor and do not go outside at all, but they do not need it, as there is a large terrace on the first floor where they can go out, there is also a TV"

(Romanian staff participant)

Older People's Workshop Evaluation

- ▶ End of workshop, responded to 12 evaluation items
- ▶ Raising awareness of human rights important
- ▶ Reported better able to recognise incorrect behaviour and could talk to someone if rights being violated

Learning from workshop

Irish participants said

- ▶ *"I learned about my human rights"*
- ▶ *"to stand up for yourself"*
- ▶ *"you should be treated as an individual"*
- ▶ *"that I can ask if I don't feel good about something"*
- ▶ *"could speak straight" "felt I was heard"*

A Space to Reflect on Human Rights in My Home

- ▶ Dignity *"do it on the diaper"*

- ▶ Autonomy and freedom

"I want to smoke some cigarettes and I have to do it secretly in the bathroom, but they should let me do it",

"It would be nice to have a garden instead of always stay here imprisoned "

- ▶ Voice

"it is difficult to complain or to ask to be treated differently....fear to be a burden, or to find me alone and no one to help me"

Conclusion

- ▶ Staff and residents take for granted that ageing means losing your rights to freedom, autonomy, choice, voice
- ▶ Staff and residents' acceptance of rules in 'best interest

Respect to Prevent Integrated approach to elder abuse prevention

- ▶ Staff and Residents develop common language around human rights, become aware of human rights in real life, in my home/my workplace
- ▶ Move Human rights from the intangible to tangible

Acknowledgement

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