

INPEA

Newsletter



INTERNATIONAL NETWORK FOR THE PREVENTION OF ELDER ABUSE



President's Address

Special points of interest:

- INPEA undergoes a Board of Directors Restructuring
- Cuban Declaration
- White House Conference on Aging
- Research Agenda
- Environmental Scan Update
- Updated Contact List

Where to start at the end of 2004? As the INPEA President there are probably many ways of introducing one's perspectives, but I shall try to use *"imagination, creativity and direction"* as mine.

First, I will take a brief look back... I came into this position by succeeding Rosalie Wolf... What a task... we had nearly 4 previous years working together and Rosalie crammed a lot into that time. I must say how grateful I am for it. Every piece of information was passed on in a totally professional manner. However, suddenly I was there with a incredible amount of work to

be done, a pile of undone papers and bylaws to review, new regulations to be filled and decisions to be made as INPEA started to grow rapidly worldwide, at all levels. But, I was blessed to inherit the most professional, dedicated unconditional and reliable people that anybody could ask for -- Dr. Elizabeth Podnieks (my unique Vice President and permanent teacher) and my dearest friend, Gerry Bennett who was our General Secretary and my counterpart.

Now I can look forward. During those initial hectic days I questioned myself "if we really had a plan"... Now I realize that we had one, but it was ready for a timely review and update. We are ready to recognize that Network plans may still need some rewriting, but there is a tremendous amount of careful and creative work being done at present as the organization now finds itself in a very different position and functioning within a bigger and more demanding framework.

Many valid concepts are espoused in "the INPEA Project", yet there are areas where not much seems to have happened. Elizabeth Podnieks, clever and gracious Susan Somers who became our General Secretary, and I spent many hours brainstorming with a blank sheet of paper and set about laying down some new ideas, trying to identify a good number of pressing situations and activities to address, and priorities to be taking into account... Not an easy task.

It is our intention to use the Newsletter and the Website to inform you, our Network members about how progress is being made in relation to this, and the results of the thousand of e-mails which we keep sending to each other and to all of you. I personally hope to be able to focus attention on small number of achievable targets at time, rather than attacking everything at once. We are also looking internally for better operational management to ensure INPEA's objectives are protected and improved as necessary.



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President's Address

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“...I believe it is important to have a sound relationship with as many partners as possible and look forward to working with them...”

This will mean listening to the Network's National and Regional Representatives as they come up with ideas on how to improve their respective areas of responsibility, taking a view of their proposals and taking them forward to the Board for approval.

One of the main objectives of INPEA Executive body is to provide members and colleagues with a permanent and seamless background service and be a reference point when they need one. "With a bit more time and a fair wind", we might be able to produce an improved Website in the near future. Looking outward presents more challenging issues. This is where more strategies come into play. Where is INPEA aligned on policy matters affecting the elders, and how are we going to keep playing a leading role on doing it? Striking up stronger relationships with other Organizations is another high priority. *I believe it is rather important to have a sound relationship with as many partners as possible and look forward to working with them*, so that we get to know what others are thinking, planning and doing, and we might add our own weight and influence where appropriate and get their support for our projects when it is needed. Indeed, we must do that, as the world ageing population rapidly expands and exerts even more pressure on resources in both developed and developing countries.

I intend the list of relationships to grow in such a way that people in general, including the media, will actively seek the International Network for the Prevention of Elder Abuse's viewpoint and listen to us, regarding Health and Human Right Issues related to Elder Abuse and Neglect, as the learned International NGO with UN Consultative Status that we undoubtedly are. So if one looks at different positions, one can see nothing but outstanding opportunities and new challenges waiting for us to be brought to life.

I am looking forward to continue working with all of you, and to seeing as much good work on abuse issues as possible carried through to a successful conclusion. I have been fortunate in having the support of all my INPEA colleagues. Whatever I have achieved, it is as much their success as mine, as nothing could have been done without them. I am much and permanently in their debt.

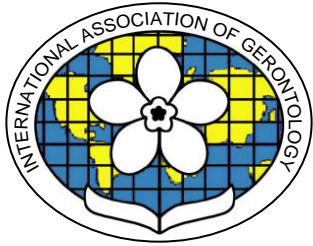
Wishing you all a prosperous and peaceful 2005.

Lia Daichman

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Dr Lia Susana Daichman, President
International Network
for the Prevention of Elder Abuse





INPEA



INTERNATIONAL NETWORK FOR THE PREVENTION OF ELDER ABUSE

Board Restructuring

An executive meeting of INPEA was held in Washington, D.C. as an adjunct to the Annual General Meeting on November 19th, 2004. Given the rapid expansion of the network and the developing research agenda and other initiatives, the need for fundraising was identified as a major challenge. In order to address this, the executive has requested Susan Aziz to assume responsibility for the development of Grant Proposals to support the work of INPEA. Susan has demonstrated skills in the area of communication and we are confident that she is the right person to assist us in this important role. A new North American Representative will be announced early in 2005.

There are other changes in the works: the INPEA website is being relocated to the United States. Ariela Lowenstein has been appointed as transitory European Board Member until INPEA's June 2005 meeting in Rio de Janeiro. She is assisting and supporting Bridget Penhale, INPEA's European Regional Representative, who had been temporarily on sick leave. INPEA President, Lia Daichman had the opportunity to meet with several potential new Board Members and Advisors who expressed their interest in INPEA. Memberships will be apprised about other impending changes.

INPEA

Newsflash

Congratulations

Betty Malks!!!

As INPEA's National Representative for the USA, Betty masterfully and successfully sought designation of the 10th International Family Violence and Sexual Assault Conference as an Official 2005 White House Conference on Aging (WHCoA) event. The International Conference is being held in San Diego, California, USA on September 18th and 19th, 2005. An Elder Abuse Tract was established at this annual conference through the efforts of INPEA and NCPEA in 2002.



Publication Announcement

The Prague Papers, a special double issue of the Journal of Elder Abuse and Neglect, Volume 15, Numbers 3 and 4, 2005 was released in the spring and is now available.

It is titled:

ELDER ABUSE: Selected Papers from the World Congress on Family Violence

The journal and subsequent book is edited by Elizabeth Podnieks (Canada), Jordan Kosberg –(USA) and Ariela Lowenstein (USA). Terry Fulmer's efforts to arrange to have these papers published as a bittersweet celebration of Gerry Bennett's contribution to the knowledge in the field of mistreatment are much appreciated.



INPEA



INTERNATIONAL NETWORK FOR THE PREVENTION OF ELDER ABUSE

Betty Malks

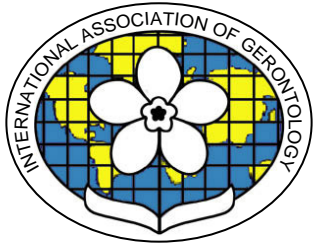
2005 White House Conference on Aging (WHCoA)

The White House Conference on Aging (WHCoA) occurs once a decade in Washington, DC, USA to make aging policy recommendations to the President and Congress, and to assist the public and private sectors in promoting dignity, health, independence and economic security of current and future generations of older persons. The 2005 WHCoA Conference will be held in Washington, D.C. on December 11–14, 2005.

This major conference occurs as the first wave of the baby boom generation prepares for retirement, creating an important opportunity to creatively assess aging in America and improve the lives of older Americans. The White House Conferences on Aging convene every 10 years and have served as catalysts to develop and define aging policy over the past 40 years. The conferences have contributed to the establishment of many of the key aging programs such as Medicare and Medicaid, the Older Americans Act, the Supplemental Security Income program and the National Institute on Aging.

The 2005 WHCoA Conference is intended to produce policy recommendations to guide national aging policy over the next decade through 2015. The leading edge of the baby boomers will begin to turn 60 within two years, and for the next three to four decades, the 60+ population will be significantly larger than today. The 2005 Conference will focus on opportunities and challenges presented by the "new" 60+ population of 78 million, as well as consider issues that impact the mature older population.

In order to involve as many individuals, organizations and corporations as possible in the Conference deliberations and recommendations, events and meetings held prior to the Conference may request Official Designation as a WHCoA event. The WHCoA designation lends credibility to the event and its focus on aging policy development. INPEA received official designation for a 2005 WHCoA event at the Annual International Conference on Family Violence which will be held in September in San Diego, CA, USA.



INPEA



INTERNATIONAL NETWORK FOR THE PREVENTION OF ELDER ABUSE

Betty Malks

Elder Justice Act S. 333

Senator John Breaux of Louisiana sponsored the *Elder Justice Act of 2004*, S. 333, which aims to bring a comprehensive approach to preventing and combating elder abuse, neglect, and exploitation in the United States. This is a long invisible problem that afflicts the most vulnerable among the aging population of the United States.

The purposes of the Act are: to raise the issue of elder abuse, neglect, and exploitation to national attention, and to create the infrastructure at the Federal, State, and local levels; and to assure that individuals and organizations on the front lines have the resources and information needed to carry out their work. Many are trying to address elder abuse, neglect, and exploitation with scarce resources and within fragmented systems. The Act also aims to create a short-and long-term strategic plan for the development and coordination of elder justice research, programs, studies, training, and other efforts nationwide.

Some of the proposed efforts of this bill will be creation of an Office of Elder Justice of the Department of Health and Human Services, Washington, DC, under the Assistant Secretary for Aging; establishment of an Intra-Agency Elder Justice Steering Committee to coordinate the elder justice programs and policy of the Department of Health and Human Services, and establishment of an Elder Justice Coordinating Council.

Status Update:

Despite the bill's strong bipartisan support, the *Elder Justice Act* remains pending and has not passed either the Senate or the House. There are 45 co-sponsors from the Senate, and 89 co-sponsors from the House. The Elder Justice Coalition currently has 357 members, and continues advocacy efforts to influence passage of the Bill. For additional information, their website address is <http://www.elderjusticecoalition.com>

December 10th, 2004

Congress FAILED to pass the Elder Justice Act



MEMBERS IN THE NEWS

Kristine J. Ajrouch, Ph.D., Assistant Professor of Sociology at Eastern Michigan University was presented with the Top Poster Award (International Category) at the INPEA sponsored "Train the Trainer" seminar entitled "Health and Human Rights Issues Related to Elder Abuse and Neglect". The INPEA sponsored seminar was held in Havana and Cienfuegos, Cuba. Dr. Ajrouch's poster, entitled "Arab-American Elders: Immigrant/U.S. Born Perceptions of Relationship Quality" examined in what circumstances, and how social relations may be problematic for Arab-American elders.



You can read her article in the Regional Reports Section.

Georgia J. Anetzberger, PhD, is the editor of "The Clinical Management of Elder Abuse". This publication was recently released by Haworth Press (<http://www.haworthpress.com>) as a monograph and as a special issue of *Clinical Gerontologist* (Volume 28, Nos. 1/2).

Intended to help professionals in varied disciplines better understand elder abuse and develop strategies for addressing the problem, the publication provides an overview of elder abuse from researchers', victims', and practitioners' perspectives. General considerations for clinical management are offered. Three case studies are analyzed individually by an attorney, physician, nurse, and social worker/adult protective services worker. They then analyze the case studies again as a multidisciplinary team.





UPCOMING & RECENT



CONFERENCES

World Conference on Family Violence

October 23—27, 2005
Banff, Alberta Canada

www.wcpfv2005.ca/en_home.cfm

2005 World Congress 18th IAG World Congress of Gerontology

June 26—30, 2005
Rio de Janeiro, Brazil

www.gerontology2005.org

10th International Conference on Family Violence

Working together to End Abuse
September 16—21, 2005
San Diego, California USA

www.fvsai.org



Regional Reports

- | | | | |
|-------------|------------|--------------|------------------|
| S AFRICA | S CUBA | S JAPAN | S SWEDEN |
| S ARGENTINA | S EUROPEAN | S MOZAMBIQUE | S UNITED KINGDOM |
| S BRAZIL | S FRANCE | S OCEANIA | S UNITED NATIONS |
| S CANADA | S GERMANY | S PERU | S UNITED STATES |
| S CHILE | S ISRAEL | S SPAIN | S URUGUAY |

AFRICA South Africa Report

The good

South Africa has a constitutional and legal framework to protect and enhance citizens' human rights. Instruments which focus specifically on the rights and protection of older persons include: the Aged Persons Act (1967), the Aged Persons Amendment Act (1998), the Domestic Violence Act (1998), the Rental Housing Act (1999), and the draft South African Policy for Older Persons and the Older Persons Bill (2003). The policy, in its eleventh version, and the bill are still being subjected to consultation among stakeholder groups. The Joint Forum for Policy on Ageing (JFPA), and Elder Abuse South Africa (AEASA) recently arranged a two-day workshop with stakeholders to attend to shortcomings in the Bill, including issues related to elder abuse. A Task Team elected in this meeting will take the process further, including meeting with the Minister of Social Development to discuss concerns. Other

instruments which the country has to deal with or prevent elder abuse, directly or indirectly, are: the Human Rights Charter; the Patients' Charter; the Protocol on Victim Empowerment; the National Guideline on Prevention, Early Detection and Intervention of Physical Abuse of Older Persons at Primary Level; and the National Strategy on Elder Abuse. AEASA's toll-free Halt Elder Abuse Helpline (HEAL) is an important additional mechanism in this regard. The implementation of the national strategy and the guidelines is monitored regularly by government officials through assessment of situations and practices at community health centers, clinics and old age homes. South Africa is also party to the United National Principles for Older Persons and the Madrid International Plan of Action, with their principles and objectives relating to the prevention and combating of elder abuse and neglect.

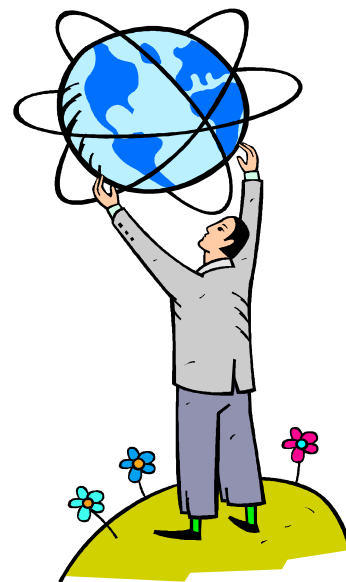
Jane Joubert & Pat Lindgren

The bad

Although various national and international instruments are thus in place to protect the rights and safety of older persons, research findings, thousands of telephone calls to HEAL, and media reports continue to suggest that elder abuse and neglect are widespread, if not extensive, in the country.

The ugly

Of particular concern is the increasing number of newspaper articles reporting on violent conduct, including homicide, of older persons. In an independent newspaper of 19 October 2004, for example, a High Court reporter wrote about a "dozen murder cases in the High Court this year", stating examples of extreme violence, including rape, bludgeoning, strangulation, stabbing and suffocation enacted to older persons in their homes. A crime writer's article in the same among other cases, to an attack on a 90-year-old woman who was



raped and killed in her home — the 12th incident in the same suburb in the same year. A poster presentation at the International Federation on Ageing conference in Singapore in September 2004 showed that in 2000, mortality rates due to homicide in South African men aged 60+ were five times the rate in older men 60+ globally; the rate for South African older women was 3.9 times the rate for older women globally. Data from selected mortuaries have indicated that firearms, blunt and sharp objects and suffocation or strangulation were the leading external causes of homicide deaths in older persons during 2001 and 2002.



Argentina Report

Susanna Aguas



"At the moment, we are working in the elaboration of the First National "Train the Trainer" seminar ... and hope to cover all Argentinean provinces..."

The year 2004 has seen considerable movement for Argentina in its national work and with the International Network for the Prevention of Elder Abuse. The first months of the year, we worked intensely in the organization of the first "Train the Trainer" seminar on "Health and Human Rights Issues Related to Elder Abuse and Neglect", which was held in Cuba during April. Susana Aguas was chosen as Vice-President of the Scientific Committee of the Seminar and was an active participant at the seminar.

At the moment, we are working in the elaboration of the First National "Train the Trainer" seminar for about 70 people (policy-makers, health professionals and front line community workers) and hope to cover all Argentinean provinces. This event is working together with the Argentinean National Public Policies for the Aged (Ministry of Social Development), the Argentinean INPEA, and AGEBA (Gerontological Society of Buenos Aires).

During 2004, Lia Daichman (President of INPEA), Patricia Guido (Board of INPEA) and Susana Aguas (an Argentinean National Representative of INPEA) maintained interviews with the Boss of Cabinet of the Human Rights Secretary. This is a public body that depends on the National Government. The three introduced him to materials on abuse and mistreatment of the elders, with the aim of presenting an INPEA-like organization in Argentina for 2005, and to aid INPEA's collaboration with this State Secretary.

Other important efforts of the year included the decision by the Government of the City of Buenos Aires to maintain and expand programs such as: "Program Proteger" (to Protect) [this program has been presented in previous reports] and Program "Cuidando a los que Cuidan" (Taking the Burden of Care). This program was established in Buenos Aires D.C, by the City Government of Buenos Aires since 2001. The program was mainly designed for families who are looking

after their elders. The **main objective** of the program is to give emotional and moral support to families in difficult caregiving situations or crisis, trying also to help them to work out "the cost and negative effects" of caregiving.

The program aims to: Increase social support to families in caregiving situations; to minimize stress at a family level as a consequence of the "Burden of Care"; and prevent acts of negligence and mistreatment. The Argentinean National Public Policies for the Aged (Minister of Social Development) is developing an integral program in defense of the rights and of the quality of life of the adults in Argentina. The aims of this program are to articulate all public policies for the elderly in an integrative perspective and design programs for prevention, promotion of health, social integration and elderly disabled with different levels of capacities.

Some of their related relevant programs include promoting a voluntary network organized and sustained by the elders; home care and domiciliary attention for the elders; providing training courses for institutional administrators and managers (day care and long term care). In the area of institutional care and long term care, the focus is mainly on nine homes for the aged with social problems (416 residents). Its main objective is to offer a better quality of life by facilitating social integration, participation, and trying to avoid social exclusion.



Brazil Report

Laura Machado

In Brazil, INPEA has been represented in all actions regarding elder abuse around the country, in round tables and symposia in the All Congress of Older People and Ageing, as this issue is now been considered a major challenge. However, the most important act developed in Brazil in 2004, was the implementation of the "Elderly Statute" (10.741), the first law signed by the President of Brazil, Luiz Inácio Lula da Silva especially to fight against elder abuse.

This Act represents a basic constitution for the elderly as it establishes all the Principles, Rules, Laws and Precepts to assure rights and obligations to elder people. Focusing on a wide range of aspects, this Statute gives priority to elderly life, health, nutrition, education, culture, sports, leisure, work, citizenship, liberty, dignity, respect, family and community life that the Brazilian society is obliged to fulfill. There are financial penalties, as well as provision for imprisonment of 6 months to 12 years if the law is disrespected. Another



important article makes it mandatory for every citizen (and especially health professionals) to denounce any kind of elder abuse. Until now in our country, this was only an obligation for child abuse.

So, what we have seen along the year of 2004 is the whole Brazilian society being sensitized to adapt private and public services to the new Law, such as priority to assistance in all services, an obligation to have special lines for older persons, a guarantee of accessibility in any service for those with handicaps, priority in the justice processes, etc. As a Brazilian and a gerontologist committed to the rights of older people, I must admit my satisfaction in seeing Brazilian society and government becoming interested and mobilized, finding it important to provide adequate services such as banking, transportation as well as the social and health assistance to old people. As National Representative of Latin America of INPEA, I must say that this is an example to be followed by all the other countries. According to an investigation made in 2003 by CEPAL in collaboration with INPEA, most countries in Latin America still don't have a special law for elder abuse. There is no doubt that it will take time to bring into practice all of the articles of this Act, but it is already visible with the support of television and the press, professionals and associations involved with gerontology, non-governmental organizations, the civil society and the elderly themselves. All are becoming aware of their rights and their duties.

Canada Report

Charmaine Spencer



"Canada continues to explore the dynamics and diverse factors associated with abuse and neglect in later life..."



CNPEA's Launch

The Canadian Network for the Prevention of Elder Abuse (CNPEA) / Réseau canadien pour la prévention du mauvais traitement des aîné(e)s was formally established as a legal entity in 2000. Although still a fledgling network, CNPEA has been able to achieve Board and member representation from across the country, provide a diversity of perspectives and build national understanding on key issues in this area. It actively encourages the development of local and provincial networks.

Over the past year, the Board and its supporters have focused on teambuilding and setting strategic directions for the network, including raising the visibility of the issue across Canada. To date, the Network has been supported primarily by in-kind and volunteer contributions, and the Board has sought funding to help it further the Network's efforts. On September 3, 2004, CNPEA officially launched its website, (<http://www.cnpea.ca>), and currently carries more than 39 topics on abuse in later life from a Canadian perspective, covering a range of legal, health and social aspects. New topics are added monthly. We encourage you to visit the site.

Recent Initiatives

a. Prevention and Awareness: Increasing the public's awareness of senior abuse issues is a common starting point for many communities throughout Canada. On October 19, 2004, the province of Ontario marked its first "Elder Abuse Awareness Day". The social issue was recognized throughout

the province with activities such as open houses, information lectures and educational video screenings. Three other Canadian provinces and territories have now established a special day, month or large scale event to recognize abuse issues affecting older adults and to promote respect of older adults.

b. New Directions in Research: From 1999-2001 Canada began exploring the societal implications of abuse and neglect in later life, including the social costs of abuse. Abuse not only affects individuals' health, psychological, financial and social well-being, it also has tangible and intangible negative impacts on families and friends, communities, government and private industry. Canada currently does not have sufficient reliable data on which to assess the costs of abuse and neglect in later life. However, in 2004, a federal/provincial territorial working group commissioned further analysis on where some of the social costs may be arising.

c. Continuing Efforts: Canada continues to explore the dynamics and diverse factors associated with abuse and neglect in later life. This has included looking at gender differences in key areas such as within the justice system, the impact of abuse, and resource needs. In 1995 Canada made a formal commitment at the Fourth United Nations World Conference on Women in Beijing to achieve gender equality in the justice system. This included a promise to incorporate an analysis of future legislation and policies for any potential unequal impact on women and men.

In the Canadian criminal justice system, criminal law is enacted by the federal government, but the administration of justice is the responsibility of the provinces. Older women are the victims in two thirds of the abuse cases coming to the attention of authorities. Older women are also the primary caregivers, live longer and are more likely than men to reside in collective settings such as nursing homes.

At the same time, older men may experience abuse or neglect in somewhat different circumstances than older women. As most Canadian family violence resources are framed from a "violence against women" perspective, this may leave abused or neglected older men without adequate community resources.

Canadian communities often struggle to see that the needs of both women and men are being met in an appropriate manner; services for seniors continue to be under resourced. Government assumptions about familial support; changes in policies or cutbacks to services such as community health and home support, affordable housing, or to poverty law or victim services; as well as policies that move from providing direct services to seniors to "self help" (e.g., primarily providing information on the Internet) can leave either women and men without viable options, but may have a disproportionate negative impact on abused or neglected older women seeking help.

Chile Report

Laura Machado



Activities we have accomplished in Chile this year.

1. Elderly abuse has been included as a very important chapter in the program of the 6th edition of the Postgraduate course of Geriatric and Gerontology at the University of Concepción.
2. We have started a new research project about elderly abuse in La Serena, with a sample of 200 community elderly. La Serena is the third most important city of Chile, located north from Santiago in the 4th Region of our country.
3. Nelson Garcá has published a book on elderly abuse containing the conferences and the research work presented at the First Chilean Congress on Elderly Abuse,
4. We have ten new individual members (psychologists, medical doctors and social workers).

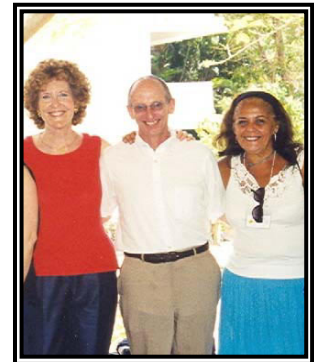
Some photos from Cuba



Toni Antonucci
USA



"To the world you might just be somebody, but to somebody you might just be the world."
anonymous



Susan Aziz-USA
Larry Barker-USA
Susanne Agua-Argentina



Lia & Various Cuban Professors

Train the Trainer Seminar in Elder Abuse Held in Cuba

Susan B. Somers

Thanks to the dedication and far-reaching vision of Lia Daichman, M.D. (President of INPEA), and the leadership of Emilio Zayas Somosa of the Cuban Gerontological Society, INPEA held the first Latin American "Train the Trainer" Seminar on Elder Abuse in Cuba in 2004. Attending were numerous professionals from medicine, health care, law and caregiving and the social services from numerous countries in Latin America.

The opening ceremony, held in Havana, drew a number of government officials, the Foreign Emissary and leaders in Cuba's medical professions. Several dozen elders ranging to age 84 privileged us with a special "Tai Chi" demonstration. The following day, the seminar continued with the backdrop of the historic town of Cienfuegos, known as the "Pearl of the Caribbean". There, we were honored to have Toni Antonucci of the University of Michigan, USA, and former President of the International Gerontology Association, deliver the Keynote at the Faculty of Medicine, Ceinfuegos University.

Elizabeth Podnieks (INPEA Vice-President) of Toronto, Canada followed, setting the stage for the three days of presentations, with her overview of the Determinants of Ageing. Later in the program, Elizabeth Podnieks addressed the necessity of multi-disciplinary training in recognizing and responding to abuse.

Participants were also exposed to a detailed description of a very successful, and easily replicable, caregivers support program developed and run by Susanna Aquas, of Argentina. She was also integral in the successful planning of this groundbreaking event.

Juan Miguel Guzman, presented his research on the aging demographics in Latin America and also graciously volunteered with the daunting task of translating for a number of speakers; giving our scheduled translator a much-deserved respite. Dr. Emilio Zayas Somosa eloquently spoke of the medical profession's responsibility, especially in the light of today's longevity, to understand and seek to identify elder abuse. He admonished his colleagues that prescribing drugs is not the end of their responsibility. He passionately urged the physician delegates to treat their elderly patients holistically, and to involve the family for the ultimate wellness of their patients.

A discussion on medical ethics was lead by Dr. Lia Daichman, as part of a four-person panel, Dr. Daichman's, insight drew upon her years of experience as a gerontologist in Argentina, and her many experiences in numerous foreign countries where she studied and collaborated for the welfare of the elderly. The panel also included John Gray, of Canada representing the International Association on Gerontology, Susan B. Somers (Secretary-General of INPEA), and an Attorney from New York State. The Panel was chaired by Mary Blanca Lopez, INPEA's Cuban specialist, who also worked tirelessly to bring this first "Train the Trainer" to fruition.

Our Cuban hosts arranged a tremendous closing celebratory party following the awards ceremony. Abstract submissions were judged and awards were presented. Dr. Daichman and Dr. Zayas received the highest praise and gratitude of the participants for this important training addressing humanitarian issues of respect and protection for our elders.



Susan
B.
Somers
USA



Cuba Report

Mary Blanca López

Eventos III Congreso Centroamericano y del Caribe de Gerontología y Geriatría. Octubre 4 al 8 2004.

Póster. Maltrato en Ancianos. Autora: Mará Teresa Rodríguez Tema

Libre: Estigmas hacia la vejez. Calidad del Maltrato. Autora: Mary Blanca López.

Seminario Internacional "Formador e Formadores" de la Región de INPEA Latinoamericana. 27 al 30 de Abril 2004.

Temas presentados por cubanos en el evento.

Panel: Programas de prevención e intervención en las diferentes áreas. Lo que hay y lo que falta. Coordinadora: Lic. Mary Blanca López.

Mesa Redonda: "Otra Mirada del Maltrato"

Coordinador: Dr. Miguel Valdés Mier.

Conferencia: "Servicios Protectores de Adultos Mayores"

Autor: Dr. Humberto Arencibia.

Taller Interactivo: Manejo de Demencia y Depresión.

Coordinadora: Lic. Mary Blanca López

Mesa Redonda: Aspectos Multiculturales Sociales y económicos relacionados con el Adulto Mayor en la vejez.

Coordinador: Dr. Humberto Arencibia.

Taller: Problemas y respuestas para los que deciden y diseñan Políticas Nacionales y locales para adultos mayores.

Coordinador: Dr. Salvador Tamayo.

10 Póster. Relacionados con la temática del Maltrato.

Taller provincial sobre violencia. Julio 2004.

Conferencia. Maltrato en Ancianos. Lic. Carlos Gómez.

Investigaciones

2 Tesis para optar por el título de especialista en Medicina General Integral Estudios Epidemiológicos sobre Maltrato en ancianos.

Docencia

Conferencia en la Universidad del Adulto Mayor.

Maltrato en Ancianos. Conceptos y Tipos. Lic. Mary Blanca López

Curso. Lo esencial en Gerontología y Geriatría Impartido a médicos, psicólogos, trabajadoras sociales y enfermeras.

Conferencia: Maltrato en Ancianos. Una visión del problema.

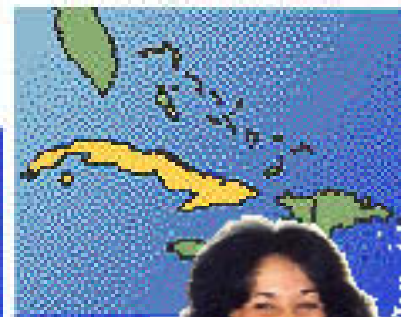
Programas

Existe en el País un Plan de Medidas para abordar el Maltrato en Ancianos que utiliza los Medios de Comunicación Social para su prevención y promoción.

Existe también un Programa de prevención del alcoholismo como problema que genera violencia.

Los Consejos Populares mediante los Equipos Médicos de Atención Gerontológica (EMAG) tienen una plena identificación de todos los problemas sociales que en la comunidad pueden generar Maltrato (ancianos solos, encamados, con disfunciones familiares, etc.) Se trabaja en la solución y ayuda a estas personas.

Una nueva modalidad de atención es que en los Mercados Agropecuarios, se confeccionan alimentos para los ancianos y se les brindan actividades recreativas y culturales, coordinadas con el Ministerio de Cultura y el Instituto de Deportes y Recreación. Esta alternativa brinda ayuda a ancianos solos en su domicilio o autovalidismo, o a los que permanecen solos porque sus familiares trabajan, pero que pueden desplazarse a estos lugares.



Lic. Mary Blanca López
Representativa nacional de INPEA Cuba

The Havana Declaration on the Prevention, Detection and Eradication of Elder Abuse

Cienfuegos, Cuba, April 30th, 2001

* 1 *



This declaration is a Call for Action aimed at the prevention, detection, and eradication of abuse against older persons.

Points to consider:

- S Elder Abuse is a universal problem. Research conducted so far shows that it is prevalent in both the developed world and in countries within our Region. Abuse can occur in any context, but most frequently it is familial, institutional and social.
- S Prevention of elder abuse requires the involvement of multiple sectors of society.
- S Legal frameworks are missing. Cases of elder abuse, when identified, are frequently not addressed, for lack of proper legal instruments to respond to them.
- S Primary health care workers have a particularly important role to play as they deal with cases of elder abuse regularly – although they often fail to recognize the abuse as such. (Primary health care workers are not the only ones; it includes everyone in the community who has contact with older persons).
- S Education and dissemination of information are vital – both in the formal sector (professional education) and throughout the media (combating the stigma, tackling the taboos, helping to not stereotype older people), and the cultural preponderance to overemphasize youth and adolescence.

The Havana Declaration on the Prevention, Detection and Eradication of Elder Abuse

Cienfuegos, Cuba, April 30th, 2001

* 2 *



- S It is fundamental to the proposals for prevention, intervention, and eradication of Elder Abuse in our Region, to consider the following:
- The cultural context of each country, and particularly communities within each country, in order to fully understand the phenomenon of elder abuse.
 - A gender perspective. Understanding the existing complex social constructs helps identify the form of abuse inflicted on the elderly and by whom.
 - The socio-demographic characteristics and the functional capacity of the older population. The older population is a heterogeneous population with sub-groups that are particularly vulnerable to elder abuse (the very old, those with limited functional capacity, women, and those who are poor).
- S It is not sufficient to identify the cases of elder abuse. We must develop the social structures that will allow the provision of services (i.e., social, health, legal protection, policemen, etc.) to appropriately respond, and prevent and eradicate abuse from countries of the Region.
- S Elder Abuse will be successfully prevented only if we develop a culture that fosters intergenerational solidarity and rejects violence.

The Regional Strategy in Latin America and the Caribbean for the implementation of the International Plan of Action on Ageing, adopted in Madrid, clearly recognizes the importance and the extent of Elder Abuse. The prevention, detection, and eradication of elder abuse are social, human rights, and health problems that concern us all.

Nonetheless, prevention and eradication of elder abuse will not be achieved if we excluded this generation from the context of Comprehensive Care and Prioritized Programs with respect to health policies of the countries of the region.

European Report

Bridget Penhale

Although elder abuse and neglect were initially recognized by English doctors in the mid 1970s, it was not until the late 1980s that the issue was really concentrated on in the UK. The amount of research and material published about the subject in the UK has been increasing fairly steadily since the 1990s.

Whilst a number of Western European countries such as Sweden, the Netherlands and France similarly recognized the existence of abuse at about the same time as the UK, there are others such as Spain, Italy and Belgium where the existence of abuse has only been acknowledged in recent years. Others still (Iceland, Czech Republic, Slovenia) are only now beginning to consider issues relating to elder abuse. Of course there are yet other countries (Denmark and some of the accession countries) that do not appear to have recognized elder abuse up until this time.

This article for the newsletter provides brief information concerning a selection of European countries. My thanks are due to a number of contacts that I have established in Europe, through INPEA, who have provided information concerning the situation in their countries.

In **Sweden**, there was early research work concerning elder abuse and caregiving in the late 1980s and 90s. There is a research group based at the University of Kalmar (School of Nursing), but little appears to have so far developed in relation to responses at a national level (see also report from Sweden).

*"In Sweden,
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and 90s..."*

The situation in **Finland** appears to be somewhat similar. There is a small amount of elder abuse research currently taking place; earlier research took place in the late 1980s and 1990s and included a prevalence study based in the University of Oulu. There are currently two doctoral theses in process at that university. One is on elder abuse and the other is on physically forced actions (restraint) in elder care institutions. Both theses are in their initial stages. There is one small project which has recently been established in Finland through the auspices of the Finnish Association for Shelters for Elders (although there are no shelters yet established). The Prevention of Senior Abuse project will run from 2003-2005. The aim is to create different action models for identifying, responding and preventing abuse. One of the most important aims is to raise awareness (public and professional) concerning abuse; training for health and social care professionals, volunteers and students will be developed and provided during the project.

Norway has been concerned about the issue of elder abuse since the mid-late 1980s. Early research work in Oslo led to the development of pilot projects to test out interventions and responses to elder abuse. These were based on an action-research methodology, which meant that the projects could change and develop as necessary. At the end of the 1990s, it was determined that the model of intervention teams of specialist social workers, which had developed through the pilot projects would be established throughout Oslo and then progressively but incrementally throughout the country. This is now in process, with recent teams established adjacent to Oslo. The Ministries of Justice, Health and Social Affairs and

Children and Families provided funding in the mid-1990s to establish the Norwegian Resource Centre for Information and Studies on Violence, based in Oslo. This centre was unique in that it considered child abuse (and protection), sexual violence and violence towards young women and elder abuse and protection. The model has been successful and as from January 2004, it has been combined with three other institutions within Oslo University to form the National Centre for Knowledge about Violence and Traumatic Stress. The results of the intervention projects on elder abuse will continue to feed into the work of the centre.

In **Italy**, there are as yet, no national projects concerned with elder abuse. There are, however, some local regionally based initiatives, which have been developing since the late 1990s. These include helpline and educational programs for professionals in Milan and Udine, based on the French ALMA model and help-lines in Rome and Turin. In the autumn of 2002, there was the first national conference on elder abuse, held in Treviso and work is continuing in the Veneto region to try to obtain funding for some research and to establish a telephone helpline. AUSER (the national NGO linked to older people) has been involved in this initiative.

Despite a number of attempts throughout the 1990s by gerontologists to raise awareness and concern about elder abuse, **Spain** has effectively only begun serious work in this area in the last 5 years. Small research projects, including the development of an assessment tool by a group in Palma, which is ongoing, are to be supplemented by a national survey of elder abuse.

(Continued on page 19)

European Report - *continued*

Work is also taking place through the Spanish Association of Gerontology together with the Institute for Migration and Social Services on the development of a screening tool, guidance for professionals and a comparative analysis of European legal provisions on elder abuse. In September 2003, the Queen Sofia Centre for Studies on Violence in Valencia based its annual international conference on elder abuse. This attracted national media attention and was highlighted by Queen Sofia, who opened the proceedings as an issue of increasing global concern and one that Spain needed to concentrate on in the future. Several INPEA representatives, including the Chair, presented at this conference. Further developments in Spain are considered likely to be forthcoming in future.

Gerontologists in **Austria** have been concerned about the issue of elder abuse since the mid 1990s and some developments have occurred but these have been rather limited. During 2003, several elder abuse and neglect cases in Vienna's largest nursing home (2000 residents) came to light through the legal custodian (guardian) of one of the residents. The cases included neglect and verbal abuse, but no deaths. As a result of this, the role of a special ombudsman has been established in Vienna, this person is able to visit institutional care settings for older people throughout the city without any advance notice. It is hoped that further developments will continue following this.

In **Israel**, researchers and practitioners have been developing connections with their European counterparts on abuse issues. Israel has an established history of research and work in this area, dating back to the late 1980s. Work has taken place in a number of different areas since that time. In some of the larger municipalities special units to deal with elder abuse have been established and the Ministry of Welfare, together with ESHEL (the Association of Planning and Development of Services for the Aged in Israel) now run annual training courses for welfare officers. A large-scale national survey on elder abuse is in process, co-ordinated by the University of Haifa. This includes a qualitative study of families involved in abuse. Work also continues on violence between couples/partners in later life and developing the training of professionals.

In **Belgium**, there has been consistent work since the 1990s, comprising both research and service development. A branch of the French organization ALMA has been developed (ALMA Wallonie-Bruxelles) and a number of help-lines have developed over the past 5 years. A number of conferences and symposia have been held to assist in the training of professionals, students and volunteers and in 2003 a training program for frontline doctors was established. Also in 2003, a pilot project, Librage was established by 3 different organizations (CAPAM, URGEDES and E.M.P.AGE) to provide a specialist service in each province.



This consists of a telephone helpline, training program for professionals and also campaigns concerning prevention of elder abuse. Despite the lack of any specific legislation in relation to elder abuse, certain laws are useful at times. These include laws in relation to well-being and also those relating to competence and mental health. Attention is also paid to institutional settings through regulation, complaints procedures and organizations to assist elders in choosing a residential home which also link with residents.

In **Ireland** there have been a number of developments since the late 1980s. This has included short articles in professional journals, some media attentions including reporting of fatal cases and also some enabling legislation (Enduring Power of Attorney Act, 1996; Domestic Violence Act, 1996; 1990 Health (Nursing Homes) Act). In 1996 the Minister for Health requested the National Council on

*"In Belgium,
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development..."*

(Continued on page 20)

European Report - *continued*

Ageing and Older People (Ministerial advisory body) to provide a report on elder abuse. This report was produced in 1998 and included a literature review, survey of professionals and service providers, review of policy and legal framework and recommendations for a way forward. The major recommendation was for the setting up of a Working Party on Elder Abuse at the Department of Health. A Working Group on elder abuse was established by the Department of Health in 1999 and this reported in 2002.

"...countries such as the Czech Republic, Slovenia and Iceland have recently been involved in developing work in this area, particularly in relation to awareness raising and professional responses..."

Recommendations included: establishment of a national implementation group at the Department of Health to oversee the implementation of the recommendations of the Working Group; formulation of national policy on elder abuse; development by each health board of a strategy to implement policy; setting up of a steering group in each health board with a dedicated officer responsible for policy development and implementation; recruitment of a Senior Case Worker in each community care area to respond to all referrals; law reform, the establishment of a National Centre for research and training on elder abuse and a campaign in relation to financial abuse and a public awareness program.

So far the main development has been the establishment of the national implementation group at the Department of Health and Children in December 2003 (one year after publication of the report). One Health Board has developed a draft policy on adult abuse and another has appointed a person to develop policy in relation to this area. However, this report was launched at a time of serious cutbacks in the health service including a ban on recruitment and therefore little has happened to date.

A number of other countries, such as **Greece, Poland, the Netherlands and Portugal** were involved in initiatives during the 1990s but no recent news has been forthcoming about subsequent developments. Other countries such as the **Czech Republic, Slovenia and Iceland** have recently been involved in developing work in this area, particularly in relation to awareness raising and professional responses. For example, the first national conference on elder abuse was held in Iceland in November 2003, whilst the production of guidance for professionals is underway in Slovenia. As is apparent from the information provided above, different levels of development occur throughout countries in Europe and there are undoubtedly some countries, which have yet to begin to tackle the issue of elder abuse and neglect. Whilst a number of committed individuals and organizations have been working in this area to develop knowledge, information and assistance concerning abuse and neglect since the late 1980s, there is no room for complacency. Effective guidance at strategic and national levels is yet to be fully seen in many countries. Much remains to be achieved for and on behalf of elders who experience or at risk of experiencing abuse, no matter where it occurs.

Bridget Penhale
European Regional Representative

France Report

Francoise BUSBY

ALMA France (ALlô MALtraïtance) was created in 1994 by Professor Robert Hughnot, a retired professor of geriatrics. ALMA France has several objectives:

- Develop a national elder abuse help line network.
- Support and protect the isolated, excluded and vulnerable elderly.
- Recruit and train help line listeners/counsellors among the community and from the students and professionals of its institutions.
- Evaluate and document the work in the form of statistics, research, and publications.
- Inform the general and professional press, radio and TV networks.

ALMA France is developing a national network of ALMA help line centres, with the aim of having one in each of the 98 French départements. So far, 40 ALMA help line centres have been opened, and each functions according to its specific local needs.

(Continued on page 21)



France Report - *continued*

ALMA France helps professionals and volunteers build an entirely autonomous and self-governing local ALMA centre. Before the centre opens, ALMA France provides specialist training to all listeners/counsellors and some administrators, and afterwards provides free running support and advice. Each ALMA centre is represented on the national Board of Directors.

Once established, each ALMA centre trains its own volunteer listeners/counsellors. It keeps in contact with local medical professionals, and informs the press through publications. It encourages training and research in schools, institutes and universities.

An ALMA centre involves four groups of people who each play a well-defined part. They are the administrators, the helpline listeners, the counsellors (a multidisciplinary group that collectively formulate the best advice by cross referencing their knowledge and specific techniques), and finally, an advisory committee which is made up of representatives from the local medical, social and judicial services.

In each ALMA centre there are three operational groups – the listeners, the counsellors, and the Technical Steering committee. To cover two helpline duty sessions per week, a team of six or eight listeners is necessary. Two listeners are present at each session so that they can both listen to the call and take notes. Listeners are often retired people, but this is by no means a requirement. We usually recruit people with good

availability and regular habits who are concerned by the problems of elder abuse. Listeners tend to have a professional background – social, medical or civil service. It's essential to know how to be a sensitive and receptive listener – we can never over-emphasise this point. It's also a good idea to designate one or two volunteer listeners to be responsible for the paperwork (logging calls and creating case files). There's a mix of skills, but a good team spirit is indispensable. Listeners are supported and advised by the counsellors. To the helpline callers, listeners and counsellors must remain anonymous.

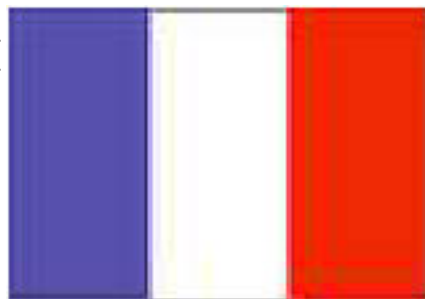
Counsellors are professionals delegated by their department for a few hours a week or are retired volunteers. They must have experience of older people and their problems and a good understanding of the role of the social and medical services and the local network of gerontologists. In a team of four counsellors (sometimes more), contrasting and complementary professional profiles will give the best results. After a group discussion of a new case, one of the counsellors takes individual responsibility for its handling. The counsellor decides how to handle the case and discusses any proposed course of action with the caller. This ensures that the caller is aware of and in full agreement with the proposal. While the case is open, its counsellor can at any time consult the others or the Technical Steering Committee on specific points.

The Technical Steering Committee consists of representatives of all of the health, social and judicial professions who are aware of the difficulties of older people, either at home or in an institution. Included are the DHSS professionals, home help and carers, both urban and rural, lawyers, solicitors, psychologists, psychiatrists, and related volunteer organizations.

It's important that these individuals cooperate and coordinate their efforts to deal with and prevent elder abuse. There are typically four meetings a year between the listeners, the counsellors, and representatives of the Technical Steering Committee. Each meeting chooses a particular theme; judicial protection, a case involving an institution, a psychiatric case, etc. The Technical Steering Committee has four essential roles:

- advise the listeners and counsellors on how to approach each case,
- be advised of the difficulties of older people, their families, and the working professionals,
- identify and analyze elder abuse and its risk factors both in the home and in institutions,
- use ALMA's database to put into place the means of abuse prevention.

The ambition of ALMA France is to be formally recognized as an organization dedicated to the public good (Reconnaissance d'Utilité Publique). The work done



since 1995 has borne fruit and ALMA France continues to develop and extend its network of helpline centres in the spirit of its founding charter:

- the right to be listened to,
- the right to privacy and a guarantee of confidentiality,
- the right to dignity and personal choice,
- the right to be informed,
- the right to make an informed choice, and
- the duty of strict impartiality on all members of ALMA.

ALMA's efficient method brought the topic "elder abuse" into the open. Now ALMA France receives substantial funding from the French government. In 2002 several official texts and laws were passed to fight elder abuse. A "Comité de Vigilance" was created by the "Secrétariat d'Etat des Personnes Agées" (State Secretariat for the Elderly) in December 2002 (see: <http://www.handicap.gouv.fr>).

ALMA France's overall goal is to find ways to uncover the risk factors in institutions and in the home which lead to elder abuse and to prevent it from happening.

Germany Report

Thomas Görgen

An overview of some current elder abuse-related activities in Germany



“...complaint offices for problems in elder care”, which are funded by local authorities...”

There are no laws which specifically and explicitly deal with the topic of elder abuse. However, there have been recent changes and improvements in laws pertaining to elder care and quality of care. (Pflegequalitätssicherungsgesetz - Law on Quality Assurance in Nursing Care; Heimbewohnerschutzgesetz - Law for the Protection of Nursing Home Residents). So, for example, residents' family members can now become members of residents' councils in long-term care institutions.

Although, at the level of federal policy, elder abuse is not a dominant topic, there are some activities which specifically address the problem of elder abuse. The Federal Ministry for Family, Senior Citizens, Women, and Youth (BMFSFJ) funded a model project on "Violence against elderly people in domestic settings" (1998-2001); and a study on "Crime and violence in old people's lives" started in 2004.

There are a number of activities aiming at improvements in elder care. BMFSFJ and the Federal Ministry for Health have started a "Round Table on Elder Care" (Runder Tisch Pflege) where experts from different institutions and disciplines meet regularly. A "Charter of rights of care recipients" is expected to be issued in 2005. The "Round Table on Elder Care" also deals with steps to improve in-home care and institutional long-term care; further, there is a working group on "debureaucratization" of nursing.

In the (northern) federal state of Schleswig-Holstein a so-called "Pflegenottelefon" (nursing care emergency line) has been successfully operating for a couple of years. One of its outstanding features is interagency cooperation and referral of clients to services independent of the advisor's institutional affiliation. Now, a process of handing down services from the central institution in Kiel (the capital of Schleswig-Holstein) to eight local services is under way.

In a couple of larger cities, especially in the south of Germany (e.g. Munich, Stuttgart, Nuremberg) there are so called "complaint offices for problems in elder care", which are funded by local authorities. These complaint offices work quite efficiently, though they depend upon nursing homes' cooperation and do not have the authority to impose any sanctions.

There are a number of NGO helplines, most of them at a local level. Probably the helpline run by "Handeln statt Misshandeln" (virtually untranslatable; the literal meaning would be "action [Handeln] instead of maltreatment [Misshandeln]" in Bonn is the most important one. Most elder abuse helplines focus explicitly or factually on problems with elder care, mainly in residential settings. Problems with legal guardians and with guardianship are an emerging topic in German discourse on elder abuse (embezzlement, misuse of power, neglect etc.). Other contexts, in which elderly people are victimized, remain a bit out of sight (e.g. domestic violence in old age).

In 1999, a coalition called "Aktion gegen Gewalt in der Pflege" (Action against violence in nursing care- AGP) has been established, connecting a number of NGO's in their effort to improve the quality of elder care in Germany and to reduce the frequency and intensity of elder abuse and neglect. The aforementioned helplines have established a national network (called "Bundesarbeitsgemeinschaft der Krisentelefone, Beratungs- und Beschwerdestellen für alte Menschen").

Domestic violence activities in Germany mostly have young and middle-aged women as target groups. The need to explicitly and actively "widen the circle" for elderly victims of domestic violence has not yet been fully recognized.



(Continued on page 23)

Germany Report - *continued*

There now seems to be a shift away from the very strong focus on elder care towards linking the topic of elder abuse with broader concepts and activities in the fields of crime prevention and violence prevention. The German Forum on Crime Prevention (Deutsches Forum für Kriminalprävention - DFK) has taken up the issue, so has the Prevention Council of the federal state of North Rhine-Westphalia (LPR-NRW). DFK hosted a workshop on elder abuse prevention in October 2003. LPR-NRW will organize an international expert meeting on elder abuse in Cologne in February 2005.

In Germany, there is a long tradition of police crime prevention targeted at the elderly. Traditionally, these programs covered offences like burglary, fraud, and robbery of handbags. Increasingly, the police "discover" other areas of elder abuse and neglect. Up to now, most police statistics lack data on victims of property offences.

As far as violent crime is concerned, German federal police crime statistics (Polizeiliche Kriminalstatistik - PKS) consistently show people above age 60 to be at a lower risk of victimization than younger adults. However, purse/handbag robbery, maltreatment of a person for whom the offender has a special responsibility, negligent homicide, and homicide in connection with robbery offences constitute exceptions to this rule. Police crime statistics usually present aggregated data for broad age groups (21-59 years old, 60 years +) which permit no differential analysis of victimization risks in more specific stages of life.

There are still only a couple of German studies on elder abuse, most of them either from the field of caring science or from criminology – each with their own topical focus, terminology, methodology and theoretical background. The new federally funded study on elder victimization ("Crime and violence in old people's lives") is done by the Criminological Research Institute of Lower Saxony (Kriminologisches Forschungsinstitut Niedersachsen - KFN, Hanover) in cooperation with the University of Hildesheim and the German Centre of Gerontology (Deutsches Zentrum für Altersfragen - DZA, Berlin). Further, a study on "Older people as victims of sexual offences" is currently conducted by KFN and will be finished by the end of 2004. It addresses sexual victimization beyond age 60. First results of the study show that for police as well as for women's shelters and other institutions, older victims of sexual offences are only a very small minority. Whereas police mainly get in contact with elderly victims of exhibitionism or of sexual violence by strangers, women's shelters report severe cases of "intimate terrorism" against elderly females, sometimes lasting for decades. Although there is no evidence of a hitherto hidden "mass epidemic" of elder sexual abuse, the study points at circumstances leading to a special risk of undetected (and untreated) cases of sexual victimization among older women.





*"...When you row
another person
across the river,
you get there
yourself..."*

anonymous



Israel Report

In Israel, awareness of elder abuse and neglect began being slowly raised at the end of the 1980s, after the enactment of Amendment No. 26 to the criminal law, *Protecting the Helpless* (1989). This Act regards abuse and neglect as a criminal offense and it includes the elderly as a target population among other helpless persons. Furthermore, the Act introduced mandatory reporting for anyone, especially for professionals. At that time, most of the attention was drawn to family violence and child abuse, thus dealing with elder abuse was delayed.

The elderly population has been growing rapidly in the last two decades. The proportion of the elderly people in the general population in Israel is 10% (of whom 45% are aged 75+ and 23% are aged 80+). Women comprise 57% of the elderly population. The number of disabled elders who need assistance in activities of daily living (ADL) has reached more than 15%. Life expectancy for males at birth is 76.7 years and 80.9 years for females. Only 4.1% of the elderly people reside in long term care institutions. The above data indicate the increasing numbers of elderly require help either from their family members or community services. It was found by the research community that age, impairment and dependency are some of the imminent risk factors for abuse and neglect. Therefore, it is reasonable to assume an

increase in the incidents of elder abuse and neglect in the near future.

So far, no national survey has been conducted regarding the incidence and prevalence of the phenomenon in Israel. According to criteria used in international studies, Lowenstein & Ron (2000), estimated that 25,000 -50,000 elderly in Israel are subjected to abuse and neglect (or 4-10% of the country's elderly population). ESHEL - The Association for the Planning and Development of Services for the Aged in Israel, has determined that involvement in the prevention and treatment of abuse and neglect towards the elderly is important and necessary. It has been decided to establish an ad-hoc multi-disciplinary committee in order to map the existing areas of activity, the needs and responses already in operation and to formulate recommendations for preferred strategies of action.

Setting up the National Committee

Following the 5-year plan of ESHEL (2001-2005), where the issue of elder abuse received high priority for action, ESHEL established a national committee aimed at the inquiry into the situation of elder abuse in Israel. The committee began working on June, 2001. It consisted of a variety of organizations and professions such as: government ministries (Welfare Ministry, Health Ministry, Ministry for Internal Security and the

Sara Alon and Dror Rotem

National Social Security Institute), local councils, universities, voluntary organizations and representatives of pensioners. The professions represented on the committee were social work, geriatric medicine, nursing and law. The committee split into five sub-committees dedicated to community services, legislation and economic abuse, maltreatment of elderly in long term institutions, preventing abuse in general hospitals, training and raising public awareness. The final report along with recommendations was published in December 2002.

Recommendations

The committee submitted 47 recommendations including:

- † Conduct a national survey on elder abuse.
- † Implement a pilot program in at least three cities where specialized units will be established that will address the prevention and care for elder abuse.
- † Establish emergency shelters for elder abuse victims.
- † Provide elderly victims with legal representation and consultation for free.
- † Develop a national telephone hotline for abused elderly and their families.
- † Develop and expand professional training with the emphasis on potential "agents for change".
- † Raise awareness among the elderly and their family members.

General hospitals and long term care institutions will set up an interdisciplinary board to focus on abuse

(Continued on page 21)

Israel Report - continued

and neglect. It is also recommended to develop a procedure for standardized identification and reporting cases of abuse and neglect. The board will be responsible for adopting and assimilating the procedure. This procedure should be integrated into the daily routine of the organization.

The Committee has also recommended developing an educational and informative program to increase awareness of the legal tools that the elderly population have at their disposal. To raise the awareness of professionals in the legal field, it recommends including the subject in their professional training.

Implementation

National Survey on Elder Abuse and Neglect

The national survey on elder abuse, conducted by the Haifa University, began in January 2003, and is aimed at identifying the prevalence of the phenomenon and the types of elder abuse. Data was being gathered through face-to-face interviews of a representative sample of 1200 elderly people and in depth interviews with 50 victims and abusers. The first stage of the survey is expected to be completed at the end of 2004.

Development of a Pilot Project for Community Intervention

JDC-ESHEL has developed a pilot program to identify and intervene in cases of

elder abuse. The model is implemented in three cities along with 12 additional municipalities, funded by the Welfare Ministry. The program includes intervention methods, establishing multi-disciplinary teams (e.g., police, the legal system, voluntary organizations) and working with hospitals and homes for the aged.

Coping with Elder Abuse in Hospitals, Long-Term Care Institutions, and Community Health Services

In November 2003, new regulations on elder abuse were announced by the Director General of the Ministry of Health. JDC-ESHEL will help to introduce and implement these regulations in the health system nation-wide. A pilot project in three districts of the Ministry of Health has begun. It includes staff training phase and implementation in health care organizations over one year.

Help Line for Victims of Elder Abuse and Family Members

The help line will become operational on November 15, 2004 and will be run by ERAN (an organization with 1,000 volunteers that maintains a crisis hot line). It will enable elderly victims of abuse to call anonymously and get advice and practical information. JDC-ESHEL has trained 200 of these volunteers to deal specifically with issues of elder abuse and neglect.

Education and Training

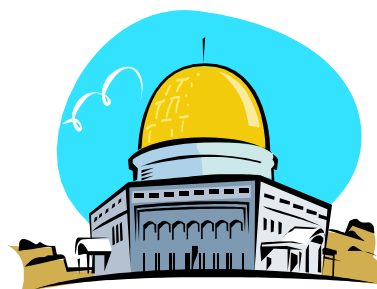
ESHEL'S training center, in conjunction with the Welfare Ministry and the Health Ministry, are performing during 2004 and 2005, workshops and training programs. These programs are "tailor made" to fit specific roles of target populations such as: social workers, welfare officers for the court, professional staff in general hospitals and long term care institutions.

Case Material for Field Workers

A manual for professionals is being prepared. The manual will consist of case materials and topics concerning elder abuse. Case materials are based on the work of an inter-disciplinary team in Tel Aviv, which advises municipal social workers on elder abuse cases.

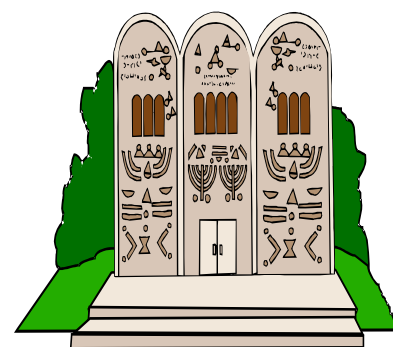
Law Amendments

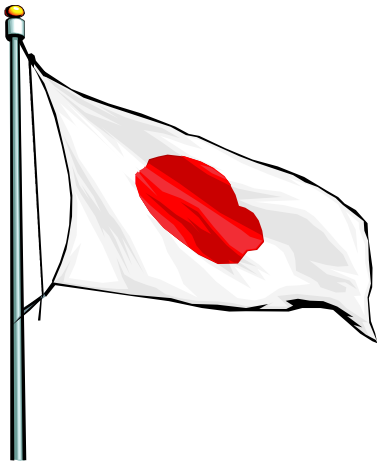
Recommendations for law amendments (laws dealing with domestic violence and protective laws), were submitted to the Justice Ministry. It is also recommended to encourage and support legal research in this area.



*"You can't
build a
reputation on
what you are
going to do."*

Henry Ford





Japan Report

Japan Completed National Study of Elder Abuse

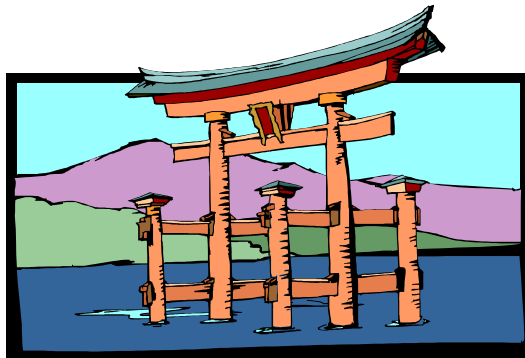
With a grant from the Japanese Ministry of Health, Labour, and Welfare, the Institute for Health Economics and Policy and UFJ Institute conducted its first national study of elder abuse in domestic settings from April 2003 to May 2004. Although the study lasted for about a year, the data collection phase was only three months long, and within this short period of time, a national survey of 16,802 sampled agencies and a survey of local governments in Japan's

all 3,204 municipalities were carried out. The response rates were 39.9% for the agency survey and 80.1% for the local governments survey. Impressed by some of the study findings that were released in May 2004, national policymakers are now drafting legislation to prevent and treat elder abuse in the home. Among the key findings: in contrast to many previous studies, the most frequently reported abusers of the older people were sons, not daughters-in-law. Approximately 10% of the victims of abuse were left

in a life-threatening situation; and nearly one-half of the victims of abuse were sending some kind of sign for help. Approximately one-half of the abusers did not have any awareness that they were abusing older people; and many abusers were refusing to accept intervention. Toshio Tataru, a Professor of Sociology at Shukutoku University and the Chair of the Advisory Committee for the two think tanks that conducted the study, presented a summary of the study at the GSA conference in Washington, D.C. in November 2004.

Toshio Tataru

"...within this short period of time, a national survey of 16,802 sampled agencies ..."



JAPEA Held Its First National Conference

Researchers, advocates, and practicing professionals in the aging field established the Japanese Academy for the Prevention of Elder Abuse (JAPEA) in the summer of 2003, and JAPEA held its first national conference in Tokyo on July 3, 2004. The organizers are pleased

with the fact that their conference was attended by several hundred people and many of them have become members of the organization. JAPEA's Research Committee is now conducting meetings and surveys of the organization's members to listen to their opinions for the purpose of developing an action

agenda for elder abuse research. The Publications Committee is busy preparing for the publication of the first issue of the JAPEA Journal of Elder Abuse. It is expected that both the research agenda and the journal will be published in the early spring of 2005.

Mozambique Report

Terezinha da Silva

The INE (National Institute of Statistics) projects that in 2000 in Mozambique, the elderly population comprised 4.4% of total population (52% women and 48% men). In a country with an average life expectancy of 44 years, we have to be concerned about support of the elderly.

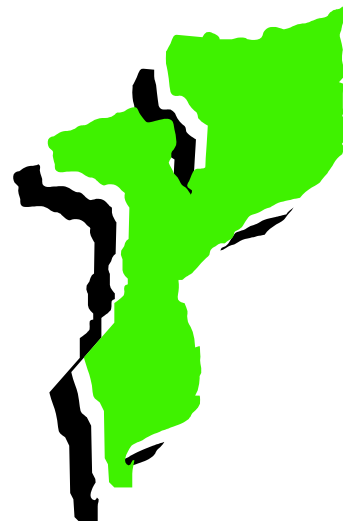
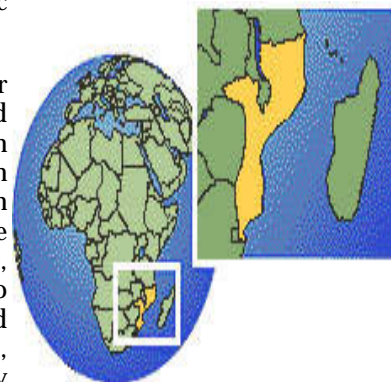
Fourteen percent (14%) of the population has HIV/AIDS, and in many communities there are only two generations, children and the elderly. This significantly affects the older members in terms of workload. Economic adjustment policies, migrations and HIV/AIDS affect the traditional social mechanisms of family support, marginalizing the elderly and diminishing the family social obligations.

On the other hand, the economic changes and the market economy brought the new dimension of the new role of the elderly, but without any additional support by the Government. In addition the majority of the rural elderly live alone, without any support from their relatives.

There are some positive aspects which are worthwhile to note. In 2002, the Cabinet approved the NATIONAL POLICY ON ELDERLY to promote and defend the rights of the country's aging population. The content covers the following multisectoral areas: preparation for retirement; health and nutrition; education and training; social action and protection; economic security (access to credit and income generation activities); housing; transportation; culture; external affairs and cooperation. The policy recognizes abuse of the elderly, particularly forms affecting older women such as accusation of witchcraft, sexual abuse, and lack of

access to resources for basic needs.

The strategies for implementation approved in 2002 include protection to elderly women prisoners, legal reform in order to protect the age retirement, access to justice, civic education related to elderly people, increased intergenerational links, increased social security (primarily related to implementing correctly the Land Law which protects elderly peasant's lands. The policy follows the Declaration and recommendations of the world NGO Forum on Ageing concerning to the development and rights of older persons.



The new proposal of the Mozambican Constitution expresses in the article 121 :

The elderly have rights for especial protection from the family, from the society and from the State, mainly in establishment of housing, family and community integration and to get access to public and private institutions for older persons, and, so to prevent their marginalization. The State promotes a policy for the third age which integrates multidisciplinary actions in order to facilitate opportunities for personnel achievements through their involvement in the community life.





*"... In November 2003,
I participated in a
community forum on
elder abuse in
New Plymouth,
New Zealand. This
forum was organised
by Age Concern
New Zealand..."*
-susan kurrle-

Oceania Report

Susan Kurrle

I have had a busy and interesting past year with time in New Zealand, Japan and Singapore in my role as the local regional representative for INPEA.

In November 2003, I participated in a community forum on elder abuse in New Plymouth, New Zealand. This forum was organised by Age Concern New Zealand through their local Age Concern Protection Service He Whakaruruhau Pakeke. It was evident from this forum that there is a lot of community commitment and involvement in addressing issues around elder abuse. I also spoke at the New Zealand Geriatrics Society annual meeting on the medical professions' response to elder abuse. It is good to see that geriatricians and general practitioners are becoming much more aware of the issues around elder abuse, and are happy to play a role in its identification and management.

In Tokyo I participated in the INPEA symposium organised by Professor Toshio Tatara at the Asia Oceania Congress of Gerontology, speaking on developments in Australia with regard to prevention and management of abuse. This was an excellent opportunity to network with many others from round the world and to understand the different situation in their countries. It was also very good to see so many of the INPEA representatives together.

In Australia there have been two useful developments in 2004. The first was the dissemination of the results of a questionnaire on elder abuse sent to all Aged Care Assessment Teams in the state of New South Wales. This indicated the need for more advice,

particularly legal advice, to be available for aged care workers dealing with cases of abuse. The difficulties around management of abuse cases were clearly identified and more support for staff was recommended. It is hoped that the new federal government in Australia will take note of the results and provide further resources. Also in 2004 we completed the revision of the Elder Abuse Position Statement for the Australian Society for Geriatric Medicine, and this was published in the Australasian Journal on Ageing in June. This resulted in a burst of interest in elder abuse, and the updating of policies and procedures by a number of agencies.

In September 2004 I spent a few days in Singapore and spoke at the scientific meeting of the Society for Geriatric Medicine Singapore on elder abuse. I was also able to spend time meeting with the SAGE (Singapore Action Group of Elders) Counselling group who have been instrumental in the development of awareness of elder abuse in Singapore. SAGE has played an important role in the Golden Life Workgroup on Elder Abuse Prevention. This interdisciplinary Workgroup, under the directorship of Dr Chiang Hai Ding, has produced an excellent report "Say "No!" to Elder Abuse" which was published in August 2004 (available at <http://www.sage.org.sg>). This report contains recommendations for policy makers, and indicates that the Workgroup plans to be involved in education and training of professionals, and in raising community awareness about elder abuse.



Peru Report

The INPEA Peru group continues to have meetings in order to organize actions promoting awareness of elder abuse. We have developed a paper (hoja informativa), reporting on INPEA activities and identifying what we have done as a group in the last two years. We organized a Conference with Lia Daichman with support of the Ricardo Palma University and the participation of OPS,

University of Trujillo, Anamper (a national network of older people) and INABIF (the National Institute for Families). We have approximately 150 members, especially young people. We have made presentations in the Gerontology National Congress and in the International Seminar organized by the Instituto Peruano de Seguridad Social (IPSS) National Security Institute.

Luz Barreto

Lia Daichman and I have given interviews on Radio Maria. We have many plans for the future in research, seminars, etc.



Spanish Report

Despite the lack of widespread awareness of elder abuse as a social problem in Spain, some steps are nevertheless being taken to address this issue. Some institutions, such as social Foundations and universities, are increasingly adopting different initiatives in order to promote knowledge and awareness, as well as to involve politicians in the eradication of such a problem. I have been invited to participate in most of those initiatives as a speaker and in order to present the results of my own research on Spain, the results of which were published in 2001 and 2003. The events mentioned above include the following: in May I gave a conference in Zaragoza about elder abuse in Spain, invited by the Fundación Ibercaja; in June I gave the concluding lecture at University of Valencia at a course in Gerontology for postgraduates, where I

spoke about elder abuse as an unveiled problem in Spain and in other countries, as well as on the relationship between this fact and the undermined status of the elderly in modern societies. Also in June, I was invited to talk about elder abuse as an emergent factor of exclusion at a Conference on Social Exclusion organised in Santiago de Compostela by the Autonomous Government of Galicia and the University of Coruña. Finally, I took part in a 30-hour Summer Course held in San Sebastian during July on elder mistreatment from an interdisciplinary perspective. The course was organized by the University of the Basque Country. Various experts and students took part in the event, as well as numerous professionals from different fields, including health, social work and law. I focused on aspects including incidence at a course in Gerontology for postgraduates, where I

and prevalence, and instruments for detection. The Spanish Association of Gerontology is developing a research about social perceptions of elder abuse among the elderly and the professionals, and some of the results have been published in the Journal of the Association. This rising interest on this matter among professionals and within society could have been influenced by the social relevance of the special event that took place in Valencia last year, organised by the Centre Queen Sofia for the Study of Violence. Many of the main experts in the world were invited, included Lia Daichman. The Queen attended the opening of the Conference and it attracted the interest of the media across the country. All participants were introduced individually to the Queen, who showed herself extremely interested in the different issues about Elder Abuse.

MARIA-TERESA BAZO

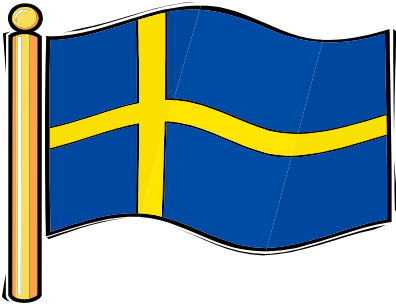


"...The Spanish Association of Gerontology is developing a research about social perceptions of elder abuse among the elderly and the professionals, and some of the results have been published in the Journal of the Association. ..."



Swedish Report

Christen Erlingsson



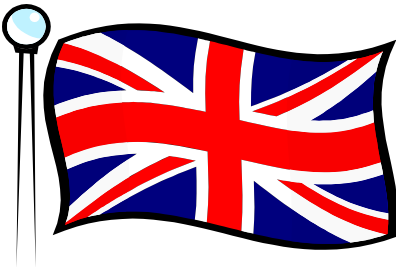
Elder abuse is becoming more and more of a public issue in Sweden and is now recognized as a problem that needs to be dealt with. The Crime Victim Authority in Sweden, County Adult Education programs, Crime Victim Hotline volunteers, and caregiver support groups have been organizing meetings on elder abuse in several cities in Sweden. INPEA members Britt-Inger Saveman and Christen Erlingsson have been contributing to these meetings by lecturing and giving talks.

On the academic/research front, it is now ten years since Britt-Inger Saveman wrote her doctoral thesis on health care personal witnessing elder abuse in the home. Unfortunately Britt-Inger has remained the lonely pioneer of elder abuse research in Sweden. That situation is on its way to be remedied by two upcoming doctoral theses. Åsa Sandvide is exploring violence in institutional situations. Christen Erlingsson is focusing her research on perceptions of elder abuse

in the community and perceptions of family members involved in an abusive situation. We are excited here about the upcoming Elder Abuse Awareness Day. Kudos to you all who have worked so hard to push this through!!! We are hoping we will be able to arrange for some "awareness raising" here in Sweden!!

United Kingdom Report

Bridget Penhale



Throughout 2004 there have been a number of developments relating to elder abuse. These commenced with an announcement by government in November 2003 that there would be a Health Select Committee hearing on elder abuse. The Hearing was held over two days in December and January. Written submissions were also made to the committee as part of this process. Submissions included testimonies from individuals about abusive situations. A report was issued at the end of March 2004, containing a number of recommendations. The main emphasis was that elder abuse is a serious, multi-faceted problem and that much more needs to be done on a number of different levels in the coming years. Although elder abuse has been increasingly acknowledged in the UK, this is the first time that there has been significant attention by government to the issue. We look forward to promoting this further in future.

Also at the beginning of 2004, a major funded research project concerning adult protection started. Funding for this 3-year project has been obtained from the Department of Health, (another first in terms of major funding and from the specific funding stream). The study is considering partnership working and the impact of regulation within adult protection, and obviously elder abuse will be a central component within the project. More details to follow as the project progresses.

At the end of July, the government introduced new regulations for new employees commencing work in social care positions. Employers must now check if the applicant is on the Protection of Vulnerable Adults (or POVA) List. Care providers are also required by law to identify any persons for the POVA List who in their view, have been guilty of misconduct which harmed a vulnerable adult or placed them at risk of harm. It is also a criminal offence for an individual to apply for a social care position involving vulnerable adults if their name appears on the list.

It has recently been announced that funding for a national prevalence study of elder abuse in the UK may be forthcoming. This was one of the recommendations of the Select Committee Hearing and if this takes place, is likely to be a major initiative and undertaking. We hope to have more details about this in forthcoming newsletters.

These are just a few of the developments that have occurred in the UK in the last 12 months. Progress has also been continuing at local and regional levels. For further details about any of the above initiatives, please contact either Paul Kingston, UK representative, or Bridget Penhale, European regional representative.

"...When we accept tough jobs as a challenge and wade into them with joy and enthusiasm, miracles can happen..."

* Arland Gilbert *

United Nations Report

The Sub-Committee on Elder Abuse of the United Nations NGO Committee on Ageing in New York City is co-chaired by Dr. Pat Brownell, Representative, International Network for the Prevention of Elder Abuse (INPEA) and Dr. Margot Nadien, Representative, International Council of Psychologists. The Sub-Committee is charged with the responsibility for reporting to the full committee on the implementation of the section on Elder Abuse, Neglect, and Exploitation identified in the Madrid 2002 International Plan of Action on Ageing; framing elder abuse as a human rights issue; and planning an annual program on abuse of older women from an international perspective. The Sub-Committee is currently planning a

program on older battered women for the March 3, 2005 meeting of the NGO Committee on Ageing. This program is also a side event of the United Nations Commission on the Status of Women (CSW) hearings on the Convention for the Elimination of Discrimination against Women (CEDAW).

The title of the March 3, 2005 event is: *Older Women and Abuse from an International Perspective: Presentations by Developing Scholars and their Mentors*. Graduate students in social work, nursing and psychology will present findings on policy development related to prevention of abuse of older women in Israel, Japan, Latin America

and the United States. Mentors will include Dr. Tazuko Shibusawa, Professor of Social Work, Columbia University, and Representative, International Association of Gerontology (IAG); Dr. Jaquelin Berman, Director of Research, New York City Department for the Aging, and Representative, INPEA; Dr. Terry Fulmer, Director, New York University Division of Nursing and Representative, INPEA; and Dr. Pat Brownell. Dr. Margot Nadien will moderate the panel presentation and relate the presentations to the implementation of the Madrid 2002 Plan of Action on Ageing. For further information on the program, please contact Dr. Pat Brownell at brownell@fordham.edu.

Pat Brownell



“...The title of the March 3, 2005, event is: Older Women and Abuse from an International Perspective: Presentations by Developing Scholars and their Mentors...”



“Human rights are our common heritage and their realization depends on the contributions that each and everyone of us is willing to make, individually and collectively, now and in the future.”

—Louise Arbour



United States of America Report Betty Malks

Since appointment as the U.S. representative to the International Network for the Prevention of Elder Abuse (INPEA), I have been busy on several fronts. As part of my role, I presented at the 9th Annual International Family Violence Conference in San Diego in September 2004 with Susan Somers, INPEA Secretary General, on Financial Exploitation. I also coordinated both the INPEA Rosalie Wolf Memorial Keynote Panel and Plenary sessions. The chair for the plenary was INPEA Vice President Elizabeth Podnieks and speakers for the plenary entitled "Pioneers in the Field - The last 20 years" included the INPEA President Lia Daichman, Maria Therese Connolly, Georgia Anetzberger, and Laura Mosqueda. The Rosalie Wolf Memorial Keynote Panel entitled "The Way Forward: Recommendations for Worldwide Action on Elder Abuse" included speakers Susan Somers and Lia Daichman, as well as a paper from Dr. Ariela Lowenstein of Israel which I presented in her absence. Elizabeth Podnieks was the discussant for this session.

I also presented at the National Adult Protective Services Association 15th Annual Conference in September 2004 in Portland, Maine. During this conference I conducted a presentation on the Financial Institutions Team (FIT), a project which brought together local banks and financial institutions to create the FIT team and to develop a comprehensive training plan and protocol to address financial abuse issues in our community. Sharing information on this innovative partnership will allow others to replicate this model in their own communities.

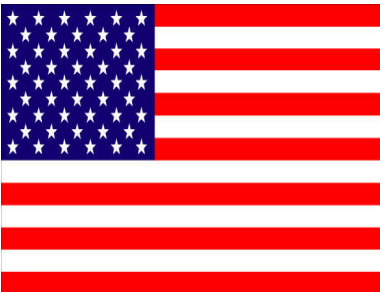
I also co-chaired the California Social Work Education Center (CALSWEC) Aging Summit held in October 2004 at the California State University Long Beach. My role as Summit Co-Chair included working with the CALSWEC ageing initiative committee, garnering keynote speakers and recruiting legislators for the California Legislative Panel as well as chairing regular summit work group conference calls. I worked with academicians, national funders, and the schools of social work in California, policy makers, practitioners and elected officials.

The Adult Protective Services (APS) Program Manager, Chair of the California Welfare Directors Association Protective Services Operations Committee and I spearheaded a statewide survey of all reports of abuse and neglect on a given day. This project grew out of a larger goal to educate Californians about the types of clients who are at risk, give a snapshot of the variety of calls received and the complexity of the issues involved in each case. It was also an effort to find a proactive way to deal with possible budget cuts and help legislators understand what elder abuse is. The objective of this project was to give "a face" to APS clients by capturing and analyzing all the abuse reports received in California on one day. All 58 county APS programs in California provided demographic information and a short summary of the allegations for each of the 327 reports of alleged abuse/neglect received in California on March 5th, 2004. The report is available online at <http://www.cwda.org>. In addition, I recruited members such as the Santa Clara County Board of Supervisors in California, who are our newest members.

Goals for 2005:

- S Recruitment of additional members from the California Welfare Directors Association (CWDA) which encompasses 58 Counties and would add 100 new members.
- S More marketing and outreach activities to be conducted at all conferences and meetings, especially preparatory planning for the World Elder Abuse Awareness Day in 2006.
- S Continue to increase public awareness through brochure distribution and advocacy activities and presence and presentations at seminars and conferences.
- S Development of a Senior Forum in Spring/Summer 2005 where we will market and perform outreach activities on behalf of INPEA.

"...The Rosalie Wolf Memorial Keynote Panel entitled "The Way Forward: Recommendations for World wide Action on Elder Abuse" included speakers Susan Somers and Lia Daichman..."



Uruguay Report

Laura Machado

In recognition of our vast multicultural unities this report shall remain untranslated

Actividades de la Sociedad Uruguaya de Gerontología y Geriátría, vinculadas con la defensa de los derechos del Adulto Mayor:

13 de abril de 2004: Reunión de los integrantes de la Comisión Directiva con la Comisión de salud de la Cámara de Representantes del Poder Legislativo para manifestar la necesidad de que sea aprobada la Ley 17.796, de Promoción Integral del adulto Mayor. El 18 de agosto es promulgada por el Poder Ejecutivo, luego de cumplir los trámites en ambas cámaras.

II Congreso Uruguayo de GG.

4 de setiembre: 1ras. Jornadas sobre "Envejecimiento saludable y Calidad de vida Derechos del adulto Mayor".

10 de octubre: 1ra. Travesía por un "Envejecimiento activo", donde se repartió material escrito a los Adultos Mayores sobre los derechos consagrados en la Ley 17.796.

16 de noviembre: solicitud de entrevista a representantes del

gobierno electo, para tratar la problemática del adulto mayor en nuestro país, y solicitar formar parte de la comisión que reglamente la Ley 17.796.

18 de noviembre: comienzo del Curso para personal de Hogares y Residencias, en conjunto con el Ministerio de Salud Pública, para mejorar asistencia y promover el derecho del anciano a una asistencia digna.



Elizabeth Podnieks
Pat Spadafora



Jim Collins
USA
Alex Kalache
WHO
Gloria Gutman
Canada
Martha Paelg
PAHO

Invited Articles



Arab American Elders: U.S./Immigrant Perceptions of Relationship Quality

Kristine J. Ajrouch, Ph.D.

Being an elder and caring for elders presents a somewhat new situation for Arab Americans who have for the most part been a relatively young cohort of immigrants to the United States. Identity and responsibility are determined by family affiliation, and Arab Americans look to family in times of sickness or crisis, often becoming distressed if family members are not present. Social networks and social relations represent indicators of isolation and point to areas where Arab American elders may be vulnerable, at risk for elder abuse.



The following information summarizes recent findings from a study entitled “Social Influences on the Health of Aging Arab Americans” funded by the National Institute of Aging, presented at the recently convened INPEA Workshop/Conference entitled “Training the Trainers: Related Health and Human Rights Issues in Elder Abuse and Neglect.” One hundred face-to-face interviews were conducted with both immigrant and U.S. Arab American elders fifty-six years and older. Findings highlight where and how social relationships may be problematic. Social network characteristics are compared between those who are U.S. born and those who are immigrants, revealing that immigrants report smaller, denser networks. Quality and type of social relationships are also compared; results demonstrate that immigrants are less likely to report that their relationship with their child and best friends are good, but more likely to perceive the ability to confide in their spouse. U.S. born elders are more likely to report the spouse gets on their nerves and makes too many demands, as well as to report experiencing ethnic discrimination. Immigrant elders seem protected in one sense as they perceive emotional support available from their spouse, and do not perceive discrimination as widely as their U.S. born counterparts. On the other hand, they are less likely to perceive that relationships are good with their child and their best friend, and also report smaller, denser personal networks, which may put them at risk for elder abuse.

Immigrant elders may be more vulnerable to abuse because of more economic strain, cultural tensions, and increased dependency. Family or a long-time friend are often perpetrators of elder abuse, yet reporting abuse often causes shame and embarrassment, particularly within cultures that are stigmatized. Detecting and combating abuse involves recognizing strengths of Arab American culture (strong family ties), and using those strengths to empower elders, families, and communities through outreach and efforts to effectively incorporate immigrants into mainstream activities and ensure access to resources.

**Invited
Articles**



PRESENT NEEDS AND CHALLENGES: A NEW COMPREHENSIVE UNDERSTANDING TO THE PROCESS OF AGEING AND OLD AGE

Emilio Zayas

For more than a century, the behavior and understanding towards the elderly has suffered a process of change characterized by little support, poor attention, isolation, marginalization, and no doubt negligence, abuse and mistreatment.

These sensitive matters do not exempt our legal, social and community responsibilities -- they exist for all -- from the common citizen to the most sophisticated scientist, and others including teachers, policemen, sociologists, judges, law enforcement officers, health professionals, policy and decision makers.

Global historical events, which we human beings have been building for quite a long time, have lead to radical and inadequate changes. As a consequence they have often produced fatal results, which are definitely necessary to modify.

We had watched the loss of veneration and cultural regard for the elders, which for centuries was the fundamental basis of many different societies. This approach included the respect of wisdom accumulated through years of living; the necessity to obtain experience as a direct means of learning; the transmission of ethical concepts and principles as necessary parts of education, cultural patterns, sciences, arts, politics, and the family as a unit.

Even life seems to have suffered a level of decay that only a few societies are able to avoid, such as the Hindi, some other Asian and Arabian countries; the rest are isolated cases and only to a certain extent....

What has happened to us all? It is because the teaching of these matters is scarce? Is thinking about these problems not enough?

In putting the individualism principle first, does that mean people must suffer cruel selfishness over the communal interest and over collectivism? Is it the reason why Governments have not been able to establish coherent and humanitarian social policies and take on the responsibility for this so important and vulnerable growing sector of people!

Today the world's population increases year by year, by months, weeks, days, minutes, seconds. When the number of inhabitants of our planet is more than six millions, there is a tendency in developed and some developing countries to decrease birth rates. In Cuba, for example, life expectancy is increasing, leading to rapid growth in the number of elder males and females. We know already that the future means an aged "grey" population... Still, we don't take care enough to encourage the needed research, to teach, educate, transmit and sensitize about the need of love and respect, to create vital social networks, adequate services, and disseminate information regarding real needs which are growing daily and problems to be solved and try to change negative images and stereotypes over the aging population.

HERE and NOW, this is the CHALLENGE!

Within this framework, Elder Abuse and Neglect reaches a dimension as a "proper right" which encompasses domestic, institutional and community settings.

The issue cannot be seen worldwide as only limited to negative actions of trust, lack of confidence in relatives, peers, or caregivers. This CONCEPT is also applicable to Governments' Policies and their Health and Social Services; it is in their "unacceptable lack of action and neglect" of preventing the deaths of thousands of elderly people, as happened in France last summer during the heat wave...it is in the pensioner's economical crisis in Argentina, the old peasants in Bolivia, the non-satisfactory Health Old Age Insurance for the North Americans, Costa Ricans, or the total African Population.

It is even in the despicable examples of genocide and fratricide wars in Afghani, Iraqi and some other Arabs countries, where fragile and helpless elderly people cannot escape. Similar situations have in the past been imposed on many Indo-Asian and Central Americans.

(Continued on page 36)

Invited Articles



(Continued from page 35)

It is with great shame that we have to admit how little has been done so far at the beginning of the 21st century on these issues.

Nevertheless even if reality is hard, we still have to face it. We have to commit ourselves and fight with honor till victory will finally arrive...

A group of serious, dignified, humanitarian, committed and responsible professionals had been working together for the welfare of elders during the last few years as an **International Network**. INPEA is an NGO with UN Consultative Status. It works in partnership with the **WHO, Help Age International** and the **International Association of Gerontology (IAG)**, among some other important related Organizations.

The Latin American Region of the International Network for the Prevention of Elder Abuse, and the Cuban Society of Geriatrics and Gerontology, Cuban Academic and Health Institutions, backed by the Cuban Government and with the main objective to improve the quality of elders' lives, organized the **“Train-the-Trainer” Seminar on “Health and Human Right Issues Related to Elder Abuse and Neglect” held in Havana and Cienfuegos, Cuba from April 27-30, 2004.**

This is a modest but committed effort, by a poor developing country that has been “economically blockaded” for a long time by the most powerful empire of modern age.

We are not “perfect”, far from this, but we are truly using all possible and accessible resources to provide reasonable Health and Social Services, by means of prioritized programs to Old Age.

This is Cuba, where life expectancy has reached 78 years old. Of the total of 11 million inhabitants, two million (13-13.5%) are already 60 years or more.

So we invite you all, with great pleasure and a real opened mind and soul; with interest in interchange and sharing life experiences, research knowledge, interactive workshops and innovative and creative programs.

We hope to be able to show you, how hard we are trying with a better sense of unity, to defeat our daily problems, independently of religions, races or a political system.

If you are able to attend, you will be able to appreciate the "world famous beauty of Cuba“, our country's friendly people and to enjoy our summer climate and beaches... We shall take you around and share with you the tourist experience, and hope you will join us on this successful and ambitious enterprise, the INPEA-CUBAN LA SEMINAR in the colonial Havana and the Cienfuegos Bay.

Dr. Emilio Manuel Zayas Somoza
Seminar Organizing Committee
President
INPEA LA Board Member
University Hospital “Dr Joaquin Albarrán Domínguez”
Vicedirector
Havana-Cuba
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INPEA

Research Agenda

WORLDVIEW ON ELDER ABUSE



World Elder Abuse Awareness Day

The International Network for the Prevention of Elder Abuse (INPEA) was founded in 1997 and is dedicated to global dissemination of information as part of its commitment to worldwide prevention of elder abuse. The United Nations International Plan of Action adopted by all countries in Madrid, April 2002, clearly recognizes the importance of elder abuse and puts it in the framework of Universal Human Rights. INPEA is dedicated to supporting the plan of action.

As part of INPEA's research agenda, we are launching a World Elder Abuse Awareness Day to be held on June 15, 2006. This project will be in partnership and collaboration with interested individuals, agencies, organizations, NGO's, governments and corporations. Among those who have offered support are: the International Association of Gerontology (IAG), The World Health Organization (WHO), The International Federation of Aging (IFA), Help Age International, Pan American Health Organization (PAHO), the Subcommittee on Elder Abuse of the UN NGO Committee on Ageing, International Longevity Center (ILC - USA), American Association of Retired Persons (AARP), Canadian Network for the Prevention of Elder Abuse (CNPEA) and the Ontario Seniors Secretariat/Government of Ontario. Many more are expected to participate. The day will focus efforts across the globe to raise awareness of elder abuse in a coordinated fashion for the first time. Dr. Emilio Moriguchi, Chair of the Scientific Committee of the 2005 IAG World Congress in Brazil is not only supporting us, but providing us with a booth at the Congress. Although the project is in the early stages of development now, by the time of the IAG World Congress of Gerontology in June 2005 we will be in an excellent position to present and promote activities related to the World Elder Abuse Awareness Day. This will be an exceptional opportunity to share information and resources and to encourage international participation. An official statement to mark the day will reflect messaging around abuse of older persons and will stress the need for people to understand what elder abuse is and how it can be prevented as well as initiatives around the world to reach this goal.

Communities and municipalities will make proclamations declaring World Elder Abuse Awareness Day and hold events designed to raise their communities' awareness of elder abuse. A planning committee comprised of national and regional representatives has been established. The planning committee will recommend priorities and innovative approaches to promoting the World Elder Abuse Awareness Day and ensure that linkages are made with governments, organizations and communities across the world. As the project develops, suggested activities designed to help people of all ages and from all sectors of our communities to recognize World Elder Abuse Awareness Day will be provided. INPEA will design a Resources Kit to assist regions in planning the event. Concrete, usable tools and techniques will enable individuals/groups to participate in this global event. These materials will be presented at the IAG World Congress in Brazil (June 2005). Expert consultation will explore and promote the theme of elder abuse awareness. Promotional events may include cultural, educational, art and social activities, as well as the launching of posters and calendars with the Day's logo. All activities will bring to the Day a global relevance that will sustain and move elder abuse awareness forward throughout the day, the year and years to come. It will involve national and international activities developed by countries, communities, neighborhoods and organizations collaborating in multi-generational initiatives that span information technology, cultural and art events, volunteer and educational programmes aiming to create an awareness of elder abuse and its consequences.



Environmental Scan

The WorldView on Elder Abuse and Neglect consists of many components. The following is a brief outline of a few of these.

(A) Needs Assessment-Environmental Scan: Through this "snapshot of where things currently stand", we hope to reveal where there are gaps in regional, national and international effort or networks, and help countries begin to use resources more efficiently. The scan will also help inform the INPEA research agenda, helping us determine what research countries have at their disposal, and where are the existing gaps, by asking, What approaches are being taken to this issue in your country/ region? Who is doing what, where and when? What are the current available resources?

(B) Database: A major outcome of the project will be the mounting of a world wide database of resources, research, and efforts. This database site will be a place where people and organizations can link together and build networks. It will include information on incidence, existing programs, healthcare structures, legislation, demographic data and cultural data. Demographic data will include but is not limited to: education, literacy level, age ratios in population, and poverty levels. To help provide cultural context for the issues, cultural data focuses around subjects such as superstitions, traditional gender and age roles, expectations in trans-generational interaction. The worldwide database will also include an on-line education/training/awareness sections that will be geared towards older persons, professional, students/youth and volunteers. Visit our website, <http://www.inpea.net> for ongoing information.

2004 Recipient of the Rosalie Wolf Memorial Elder Abuse Prevention Award (National Category)

Marie–Therese (MT) Connolly

The National Committee for the Prevention of Elder Abuse (NCPEA), the International Network for the Prevention of Elder Abuse (INPEA), and the Family Violence & Sexual Assault Institute (FVSAI) are pleased to announce that Marie-Therese (MT) Connolly is the 2004 recipient of the Rosalie Wolf Memorial Elder Abuse Prevention award in the national category. The award, established in 2002, commemorates the achievements of Dr. Rosalie Wolf, a driving force in the field of elder abuse prevention, who founded and presided over NCPEA and INPEA, edited the *Journal of Elder Abuse & Neglect*, and conducted groundbreaking research on elder abuse. The award is given to an individual or organization that has demonstrated an exceptional commitment to Dr. Wolf's ideals by promoting research, education, policy and interdisciplinary exchange.

MT Connolly is Senior Trial Counsel in the Civil Division of the Department of Justice (DOJ). She joined DOJ in 1986, following a clerkship with the Honorable Paul H. Roney of the US Court of Appeals for the Eleventh Circuit. During her tenure with DOJ, Ms. Connolly has brought elder justice and abuse prevention to national prominence. She was appointed by Attorney General Reno to coordinate DOJ's Nursing Home and Elder Justice Initiatives and continues to spearhead activities under the Bush administration, working closely with the Department of Health and Human Services and other national, state and local healthcare, public safety, regulatory, social service and law enforcement entities. She is a leading expert in prosecuting abuse in nursing homes.

In the area of advocacy, MT was the guiding force behind state and federal work groups, which were created to develop comprehensive responses to abuse and neglect. She served as a resource person to the Senate Special Committee on Aging in the drafting of the Elder Justice Act, the first comprehensive federal legislation to combat elder abuse, soliciting input from experts in diverse disciplines. The Elder Justice Act exists, in large part, due to her energy, imagination and commitment.

MT has also single-handedly pushed forward research and clinical practice agendas. She spearheaded efforts to expand knowledge and expertise into elder abuse and neglect forensics, organizing and convening roundtable discussions of leading researchers, practitioners and policy makers to generate new initiatives, collaborations and expertise in this emergent field. She increased funding for research projects and innovative programs and continues to work with grantees to promote exchange and collaboration.

MT is highly-praised and admired by her colleagues for her grasp of the issues, superb intelligence, passion, leadership, enthusiasm, sense of humor, and energy. She has been described as “a leader in every sense of the term.” Another colleague dubs her “the older American's best friend,” who is remarkable for her ability to transcend barriers and accomplish the impossible.

An NCPEA committee selected MT Connolly for the award, which was presented at the 9th International Conference on Family Violence in San Diego, California on September 21, 2004. For conference details, visit FVSAI's website, <http://www.fvsai.org>

**MT Connolly Accepting Award
Bob Blancato – USA**



2004 Recipient of the Rosalie Wolf Memorial Elder Abuse Prevention Award (International Category)

Dr. Lia Daichman

It is with the utmost pleasure that INPEA is pleased to name Dr. Lia Daichman as this year's recipient of the Rosalie Wolf Memorial Award. The award is presented annually, to "an individual who has demonstrated dedication and commitment to the ideals of Rosalie Wolf to prevent and reduce elder abuse and promote awareness through one or more of the following: research, education, policy, practice." Lia Daichman exceeds all of these criteria.

Following the untimely death of Rosalie Wolf in 2002, Dr. Lia Daichman became the President of the International Network for the Prevention of Elder Abuse. Since that time there has been amazing growth within the Network and its position in the global context of human rights. Under Lia's leadership the Network has become a Standing Committee of the International Association of Gerontology (IAG), and more recently, obtained official status as an NGO on the Economic and Social Council of the United Nations. Membership has increased to 525 people including 35 National Representatives.

Lia faced a great challenge with the heart-breaking passing of her dear friend and colleague Dr Gerry Bennett, Secretary General of INPEA in 2003. Her devotion to him over his long period of illness was further testimony to her strength and resilience.

Lia is a practicing Geriatrician and Professor of Medicine at both the University of Belgrano and National University of Buenos Aires in Argentina. She has successfully combined a brilliant medical career with the far reaching and numerous activities of INPEA. She is a pioneer in examining the relationship of self-neglect to elder abuse. Lia reminds us all of the ongoing need to evaluate ethical tensions in working with older abused persons and their perpetrators. The esteem with which Lia is held within the medical profession is seen by her frequent invitations to deliver keynote and guest lectures within Argentina and elsewhere.

Few are aware of Lia's personal philanthropy. She has donated funds, computers, books, and other materials to needy hospitals and organizations around the world. And, on many occasions, she has generously sponsored INPEA members and other NGO's to attend important elder abuse conferences.

Lia is passionate about the issue of elder abuse prevention. Her loyalty to her friends is legendary, her love for her children is boundless. No matter where she is in the world, they are always in her heart and on her cell phone!

Lia's most amazing accomplishment took place this past month in Cuba. She and Dr. Emilio Zayas successfully launched the first ever "Train-the-Trainer" seminar on "Health and Human Rights Issues Related to Elder Abuse and Neglect" in partnership with the Cuban Society of Geriatrics and Gerontology.

The Executive is proud and honored to present Dr. Lia Daichman as the 2004 recipient of the Rosalie Wolf Memorial Award. She has taken INPEA to new heights. With her dazzling smile she lights up a room and is easily the most recognizable champion of elder abuse and human rights within the international community.



Elizabeth Podnieks, Vice President
Susan Somers, Secretary General
May 11, 2004

Dr. Ariela Lowenstein made a wonderful presentation to honour Lia Daichman for having received the Rosalie Wolf Memorial Award 2004. At the general membership meeting held at GSA in November 2004, in a moving tribute, Ariela praised Lia and her many accomplishments.

International Network for the Prevention of Elder Abuse



The North American Regional Meeting
Thank you to all who attended!

Keynote Speaker:

Dr. Toni Antonucci –University of Michigan
“Elder Abuse: From Recognition to Research”

Special Guest:

Dr. Ariela Lowenstein –Israel

Held: Friday, November 19th, 2004

Time: 3:00 ~ 5:00 p.m.

*Venue: Marriott Wardman Park Hotel –
Washington, DC USA*

Room: The South Carolina

Dr. Lia Daichman
Dr. Elizabeth Podnieks

lidaichman@fibertel.com.ar
Elizabeth.podnieks@utoronto.ca

Europe
North America

Minutes on page 42-43

Calling ALL Artists

*** Students**

*** Seniors**

*** Struggling
Artists**

We are in need of a LOGO to ...

GENERATE ? DEMONSTRATE ?
ILLUSTRATE ? IDENTIFY ?

World Elder Abuse Awareness Day on June 15th, 2006.

Competition details will be posted on our website.

<http://www.inpea.net>

Enquiries:

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North American Regional Meeting

INTERNATIONAL NETWORK FOR
THE PREVENTION OF ELDER ABUSE MEETING

Minutes, November 18, 2004, 3-5 PM
Gerontological Society of America, Washington, D.C.

The meeting was called to order by Susan Somers, Esq., Secretary General, INPEA
Agenda was approved to include a discussion of membership as part of a fundraising effort
Remember Dr. Rosalie Wolf, Gerry Bennett, and Ann Abbot
Introduce President Dr. Lia Daichman.

Attending INPEA officers recognized:
Dr. Lia Daichman, President
Dr. Elizabeth Podnieks, Vice-President
Susan Somers, Secretary General.

Environmental Scan
Investigators for the Environmental Scan recognized:
Elizabeth Podnieks -Canada
Pam Teaster -USA
Paula Mixon -USA
Charmaine Spencer -Canada

Vice-President Elizabeth Podnieks presented information on the environmental scan project and passed out the draft data collection instrument. Pam presented on proposal to do the scan. She asked those present to look at the questions and give feedback. The study is intended to look at persons providing information, abuse services, policies and programs, resources, education and training. Examining "what exists" is a beginning step. Pam also invited participants to give suggestions on contacts who should be receiving it. It is important to find out about ourselves and other countries as well. This is also important for the work of the UN NGO Committee on Ageing.

Results of the global scan will be presented at the IAG conference in Rio July 2005. All INPEA members must be involved in helping to contribute to this effort. According to Elizabeth, one of the biggest challenges is that of dissemination: who should complete it: national and regional members of the network, as well agencies, lawmakers, practitioners, and others. The environmental scan team has already received some responses to the draft. Ailee Moon identified some challenges that include consistent definitions, validations in other languages, qualifications of informants, wording of abuse (does this include neglect?), use of legal definitions of "older person", which might differ, and does respondent country have a legal mandate to serve "older adults". There is also the question of laws and procedures at the national, and local levels, and not-for-profit versus government entities. The distinction between laws on the books and those that are implemented should be made, so that countries may not be able to "showcase" non-implemented laws. Jim Sykes (IFA) asked how we could identify people in China since we don't have a formal national representative there. Participants agreed that we could use our own networks to inform about possible respondents. He also noted that it would take a lot of work to validate the qualifications of respondents, answers, and to ensure that responses include not only abuse, but also neglect, which is more prevalent but more difficult to quantify.

Ariela Lowenstein, Israel representative, remarked that if we are talking about distribution and discussions between countries, we need guidelines regarding policy level, grassroots, and more specificity so representatives could know to whom to send to ensure inter-reliability. Researchers like Ailee Moon, Jim Sykes and Ariela Lowenstein are resources for the environmental scan team.

Dr. Gloria Gutman

A vote of thanks is due to Elizabeth Podnieks who has this in mind and sparked our enthusiasm. We are now getting more formalized through establishing a planning committee, building on the resources of the international NGOs. Large international organizations will come together in Rio that have national and regional organizations (69 organizations in 63 countries). The IAG wants to support INPEA and is prepared to give back-up assistance. The IAG webmaster will be assigned to assist INPEA in the continued development of its website. The webmaster is linked to the Gerontology Research Centre at Simon Fraser University.

Regional Reports

Two reports presented by Laura Machado from the Latin American Region and Toshio Tataru from the Asia-Oceania Regions.

Dr. Toni Antonucci: Special Guest Speaker: Elder Abuse from Recognition to Research

Toni shared some thoughts from her perspective as a social gerontologist and psychologist how to move forward and presented a research model that could be used. The completed text will be posted on our website once it has been transferred to the USA. A few key points are highlighted below:

Elder Abuse - The Past

Where We Were...

Elder Abuse was: Often Ignored
 Often Denied
 Nevertheless Prevalent

Elder Abuse - Future

Where We Need to Be...

We need to be proactive, as well as reactive
 We need prevention research & programs
 We need intervention research & intervention programs

Research Agenda Must be Multi-Disciplinary & Multidimensional

For example, it should include:

Academics: behavioral, social & health sciences
 Administration: institutions, social services, community programs
 Clinicians/Practitioners: Physical, Social Workers
 Policy Makers; National-urban policy, Staffers, Legislators

The Future

A Wish/Goal

A program that is common as seat belts
 A world with a universal prevention program
 A readily implemental intervention program
 With a no tolerance policy that is little used

Final Thoughts

Pragmatic Strategies:

Prevention is optimal
 Intervention if possible
 Removal if necessary

Dr. Ariela Lowenstein

Ariela Lowenstein is the Israeli INPEA representative. She gives a tribute to Rosalie Wolf. In 1989 Rosalie went to Israel and inspired research on elder abuse. Lia Daichman is one of the rare individuals who has a comprehensive viewpoint of people, not only the medical aspect. The work that Lia has done in pushing the organization and the issue forward made such a difference in working on the issue of elder abuse. Lia is a great professional and also a warm, wonderful caring person working with people to push the issue forward. Her work is exemplified by the achievements in Cuba.

The meeting ended at 5 PM.

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INPEA

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Membership Criteria (please indicate one)

- Organization that represents more than one nation
- National organization
- Organization within a part of a country
- Smaller city/town/area organization
- Group, coalition, task force, etc.
- Individual Student
- Affiliates (organizations/groups/individuals)
supportive of aims but not directly involved in elder abuse



Name: _____

Organization: _____

Country/region/area/other: _____

Number of Members: _____ (Specific)

Interests/Expertise: _____

Contact Individual

Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Next Issue...

...Summer 2005

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