

Taking a Closer Look at the Link between Elder Abuse and the Substance Abuse Epidemic

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The impact of opiate abuse is far reaching regardless of income, gender or age. This week I would like to bring focus to an article published by the [Boston Globe](#) in May 2016 about the rising surge of elder abuse in Massachusetts and its direct relation to the ongoing opiate epidemic this country is facing.

According to the article, 24,978 cases of elder abuse were reported last year in Massachusetts. Over the past five years, elder abuse in Massachusetts rapidly increased and law enforcement as well as government officials believe the opioid crisis is behind it.

As those suffering from substance abuse disorders become more addicted, they begin to lose financial and emotional support. It is then that these individuals exploit parents and other relatives, especially those who are retired and receive monthly Social Security and pension checks, for money to use to buy drugs. This causes emotional and mental distress in numerous families across the country and is currently happening in New Jersey households.

In April 2016, I appeared in a television segment titled "[Aging Insights](#)" for the New Jersey Foundation for Aging and discussed the importance of safe medicine disposal. By following the five easy steps of our American Medicine Chest Challenge (AMCC), we can safely dispose of unused, unwanted, and expired medications so our elderly neighbors no longer fear themselves as targets for manipulation or exploitation.

For an AMCC drop-off box near you and for further information about the challenge visit americanmedicinechest.com

from bostonglobe.com:



Oxycodone pain pills prescribed for a patient with chronic pain. On March 15, the U.S. Centers for Disease Control (CDC) announced guidelines for doctors to reduce the amount of opioid painkillers prescribed.

By **Kay Lazar** GLOBE STAFF MAY 14, 2016

Reports of suspected elder abuse in Massachusetts have surged over the past five years, according to state figures — a troubling increase that law enforcement and elder advocates say is fueled in part by the opioid crisis and addicted adult children exploiting parents and other relatives.

Since 2011, abuse reports have climbed 37 percent, with more than 1,000 additional cases reported each of the past five years to protective services offices. The Executive Office of Elder Affairs, the agency that tracks and investigates abuse, recorded nearly 25,000 cases last year, but the state's numbers do not delineate how many involved opioids.

As those drugs tighten their grip on Massachusetts, more adult children addicted to opioids are moving back in with their elderly parents, Middlesex District Attorney Marian T. Ryan said. Retired

parents, with their monthly Social Security and pension checks, become easy targets for financial, physical, and emotional abuse.

As an example, Ryan said that in the past month, her office has handled about 10 cases involving grandchildren who allegedly stole money, jewelry, and silver from unsuspecting elders. Often, the items “were pawned by grandkids to buy drugs,” she said.

Ryan is advising police, firefighters, and emergency medical service crews responding to calls to look for unusual bruising on elders’ wrists and forearms, often signs of a struggle. Checking the refrigerator may also yield clues about whether there is sufficient food in the house, she said. And a quick survey of other rooms may reveal dark secrets.



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Ryan’s office recently prosecuted a case that stemmed from an alert visiting nurse inquiring about holes in a bedroom ceiling. It turned out they were bullet holes. An older woman, bed-bound because of a leg injury, was subjected to terror — and plaster raining down on her — when her grown son would fly into rages and shoot a gun into the ceiling above her.

Opioid addiction has cut a wide path through Massachusetts, often inflicting harm on the very young and old. Those on the front lines — doctors, judges, and drug counselors — have increasingly

reported opioid-addicted parents so focused on their next score that they neglect or abuse the children in their care.

Elder abuse can take many forms, but is legally defined in Massachusetts as physical, emotional, sexual, or financial exploitation of residents age 60 and older. It also includes neglect by a caretaker for failing to provide essentials such as food, clothing, and shelter.

Specialists say the number of abuse reports is rising as the population ages and more elders, particularly those who are frail, remain at home instead of moving to a nursing facility.

The true extent of abuse in Massachusetts and nationwide is difficult to pinpoint, but a recent New England Journal of Medicine review estimated that 10 percent of the elder population has suffered abuse. Abusers are most likely to be adult children or spouses who struggle with substance abuse and mental or physical health problems, the review concluded.

Michael Woronka, chief executive of Action Ambulance Service in Wilmington, said emergency medical service workers typically have not been trained to hunt for signs of trouble in a household when responding to calls. Woronka, a 30-year veteran of the industry, operates ambulance services in a large swath of Eastern Massachusetts, including Essex, Middlesex, and Suffolk counties, and in Berkshire County in the western part of the state.

“This training [by Ryan] is causing us to pause now,’ he said, “and forcing us to say we need to be open to the more social and psychological side of the situation.”

Concerned that the scope of elder abuse and neglect may be larger than reported — specialists say fear and shame often keep elders from speaking up — Ryan recently increased training sessions for EMTs, police, and firefighters to help them spot signs of trouble.

Too often, Ryan said, her office has found that emergency calls for injuries from seemingly routine trip-and-fall accidents turn out to be cases of elder abuse perpetrated by a family member.

“When you peel back what happened,” Ryan said, “the fall happened when they were punched, kicked, or pushed.”

Often elders feel trapped in such dangerous situations, said Betsey Crimmins, a senior attorney at Greater Boston Legal Services, who specializes in elder abuse cases. Crimmins said elders may be afraid to speak up for fear their son or daughter, who might take them to medical appointments, will be prosecuted, and the parent will end up in a nursing home.

Crimmins launched an elder abuse prevention task force in 2014. She and other specialists assumed elders would most urgently seek rescue from financial exploitation.

“When we asked the elders in the meeting [about what they needed help with], they all said opioids, and my eyebrows shot up,” Crimmins said. “They identified an issue no one in the room thought to touch.”

Over and over, they heard about adult children who were addicted to opioids moving back with their parents and dealing drugs out of the house.

Crimmins said several groups in Massachusetts, including local councils on aging and law enforcement, are working on creative approaches to address elder abuse. But she said the services are too fragmented and lack a central entry point to connect them.

Alice Bonner, secretary of the state’s Executive Office of Elder Affairs, said her agency is working to address that issue.

The agency is “proactively taking steps to prevent and reduce elder abuse by partnering with protective service agencies and other partners in law enforcement, health care, elder services, financial services, and other sectors to protect vulnerable elders who are living in the community,” she said in a prepared statement.

The agency recently hired a new regional manager for its protective services program to upgrade and standardize training for workers, according to elder affairs officials. It also is working to reduce the length of time it takes to investigate suspected abuse cases, a source of chronic complaints, and to improve the hot line for the public to report abuse.