Many older adults who need assistance and are living in the community receive help from family members. Most family members provide kind and supportive care; they create loving and nurturing relationships. Even if the older individual has challenging or aggressive behaviors due to a medical or mental health condition, family members generally come together to support one another and find resources. Most caregiver support materials and services have been designed for these families.

Unfortunately, not all families exhibit love and compassion. In some families, controlling behaviors, neglect, abuse and physical and sexual violence have occurred in the past and are continuing today. This fact sheet answers some frequently asked questions for persons who either are currently providing care or are in the process of making decisions about the care of a family member in the following situations:

- A spouse or partner who has been abused throughout the relationship and the abuse is continuing while care is being provided.
- A spouse or partner who is providing care to a previously abusive person and may be angry or resentful of the current arrangement.
- An adult family member providing care to an elderly parent who was abusive to the other parent in the past.
- An adult child who was a victim of child abuse or witnessed domestic violence and is now providing care for an elderly parent who is no longer abusive.
- An adult child who was a victim of child abuse or witnessed domestic violence and is now providing care for an elderly parent who is currently abusive.
- An incest survivor now providing care for the perpetrator.
- An incest survivor now providing care for the non-offending parent. The relationship between a victim and non-offending parent is often complex and victims may have a range of feelings toward this parent.

Any of these situations requires a thorough assessment of family dynamics. Evaluate whether you have the physical and emotional ability to provide appropriate care. Can you set up a support system to protect yourself both emotionally and physically if you decide to provide care? Give yourself permission to say no or to establish boundaries if you feel you are unable to provide care.
Defining Abuse

What is abuse?

Generally, abuse involves a pattern of tactics that are used by an abuser to control a victim's behavior. Some abusers want to set the rules of the household, such as insisting that dinner be on the table at 5:30 p.m. or regulating which television shows are watched. Other abusers may use emotional or physical abuse and may steal money or possessions. Commonly used tactics include isolation, threats, intimidation, manipulation, lying, controlling the use of household funds, and physical and sexual abuse.

You may have experienced or witnessed abuse in your family. It may still be occurring today, even though the abuser is now older and requires care. You may have feelings, such as anger or resentment, about abuse that occurred in the past.

I feel so stressed. Does stress cause a person to become abusive?

NO. Stress does not cause a person to become abusive. People react differently to the responsibility of providing care. Most caregivers provide loving, nurturing care to older persons. Others find that caregiving is very stressful, but do not harm older adults. You have a choice in the type of care that you provide because you have control over your own behaviors. Most stressed individuals do not harm the person they are caring for.

It is more likely that caregivers will experience physical or emotional stress that affects their own bodies and health rather than harming the older individual. This can be described as caregiver distress. Symptoms could include:

- Overeating/not eating
- Self medication/substance abuse
- Depression
- Anxiety disorders
- Social isolation
- Chronic medical or mental health problems

If you are feeling overwhelmed, it is okay to ask for help. If you are concerned that your behaviors are harming your health or that you are not providing good care for the older individual, seek help.

Your Role: Caregiver or Not?

Am I obligated to provide care if I really don't want to be involved with my spouse, partner, parent or other family member?

In Wisconsin, you are not required to provide care. However, if you did assume this responsibility but no longer wish to serve in the role of a caregiver, you should inform your county elder adult-at-risk agency of the circumstances and the person's need for care.

My abuser needs a caregiver and has turned "nice" in later life and is no longer mean to me, but I am so angry I don't want to resume any contact. What should I do?

There is no obligation to resume contact with someone who was abusive to you in the past. It is important that you identify your true feelings and recognize that it is okay to make the decision to not have contact. If care is necessary, contact your local elder adult-at-risk or aging agency for information on available services. Likewise, if you did assume the responsibility of caregiving but no longer can serve in this role you should inform your county elder adult-at-risk agency of the circumstances and the person's need for care. In addition, you may want to contact a local domestic abuse or sexual assault program, a counselor or therapist, or find a support group if you would like supportive services for yourself.

Understanding the Older Individual’s Behavior

If the abuser has always been controlling or abusive and now has developed dementia symptoms, how can I tell if this person's behavior is an act of intentional aggression or the result of the person's medical condition?

Domestic violence is a pattern of behaviors used to gain and maintain power and control over another person. Abusers’ tendencies for domestic violence can be a part of their personality and learned behavior. In the early stages of Alzheimer's disease and related non-reversible types of dementia, these...
tendencies can actually worsen due to the increase in anxiety people with dementia can feel. A diminishing ability to control what is happening to them can result in an increase or escalation in behavior as abusers seek to regain control and power over the situation or their partners. They want to assure themselves that they still have control over their lives.

Because there are so many types of dementia and symptoms can fluctuate daily, it is impossible to generalize about how dementia will affect different individuals. If there have been long-standing patterns of abuse in their lives, it is difficult to determine if the abuser's behavior is an intentional act or caused by the progression of dementia.

Assessing the person and diagnosing the dementia is important; it can be a complicated process involving evaluations, interviews, observations and historical information. A good assessment involves both experts in diagnosing dementia and professionals knowledgeable about domestic violence patterns.

Because of the unpredictability of an abuser’s dementia symptoms, developing a plan for your safety and support must be a priority. Contact your local domestic violence program for safety planning information. Research proves that those who care for people with dementia, in general, are at great risk for serious illness due to stress and isolation. Combining this with domestic violence increases your risk. For dementia information, support, resources, information on working with aggressive behavior, and contacts for dementia diagnosis (which may help manage aggressive behavior), contact your local or national Alzheimer's Association Chapter.

**Taking Care of Yourself**

**Do I have to tolerate sexually inappropriate or abusive behaviors?**

No. You have the right to be treated with respect and to be safe. You have the right to decide who to have sexual contact with and to consent or say no to any sexual activity. Spouses or partners do not have the legal right to demand sexual activity. If you are being forced to participate in sexual activities against your will, contact the police if you are in immediate danger. If you are feeling pressured to engage in sexual activities that make you uncomfortable or are demeaning or painful, consider talking with an advocate at a sexual assault program. The advocate can provide both information and support.

In some cases, inappropriate sexual contact is a result of a medical condition like dementia. Professionals knowledgeable in dementia diagnosis can help a great deal. Contact the national or local Alzheimer's Association to learn where to locate a diagnostic clinic. Ask for information on how to redirect behavior and get support. Regardless of the intent of the perpetrator with dementia, a victim may be traumatized by the experience and want or need supportive services. A local domestic abuse or sexual assault program can help you develop a plan for your safety and offer support.

**Should I worry about being harmed by the person I am caring for, especially if the elder is older and/or frail? If yes, at what point should I call the police and get help?**

Yes, even a frail older person can be dangerous, particularly if there are weapons available. As for calling law enforcement, there is no easy answer.
You need to trust your instincts and call 911 immediately if you feel threatened or afraid for your safety. Contact your local domestic violence or sexual assault agency to get information on safety planning and local resources.

**What You Can Do**

**How do I deal with being hit or hurt by the person I'm caring for?**

If you are being hurt, you may be afraid to tell anyone this is happening or concerned about whether friends, family or professionals will believe you or be able to help you. If you are being hurt, you are not alone. Other care providers are hurt by older adults. You can do the following:

- Call 911 or law enforcement if you are being physically hurt or are afraid.
- Contact a domestic violence program for information about the dynamics of abuse and local services.
- Contact your county elder adult-at-risk agency for information and services.
- Talk to professionals from the faith community, health care or other friends or family for support.
- If possible, get involved with others in the community for support.

**How do I deal with manipulative or controlling behaviors, threats, coercion and isolating tactics, especially when I feel overwhelmed and exhausted?**

You cannot control another person's behavior. You can take steps to protect yourself both physically and emotionally. Seek help from others including domestic violence and sexual assault agencies, social workers, counselors or therapists.

**How can I remain compassionate when those around me are not?**

Caring for an aging parent or other family member may be one of the most important roles you will undertake in your lifetime. It is also some of the most demanding work to perform. This role becomes even more difficult when you are providing care for someone who is or has been abusive toward you.

If you choose to take on this role it is important to care for yourself. Set up a support system that includes emotional support as well as providing for your physical safety. Stay connected and keep yourself involved with friends, family, and others who are safe to talk to about your feelings.

Learn about aging and social services available in your community and ask for help if you need it. Seek out supportive services for yourself.

It is important to take care of yourself, so you will be able to care for the others in your life.

- Take time out if you are feeling angry or distressed.
- Get adequate rest and exercise.
- Do not ignore your own health.
- Take time for your own needs and interests.
- Spend social time with friends.
- Do not try to do everything yourself; ask for help if needed.
- Learn about services and programs available in your community.
- Consider joining a support group. These groups provide a safe place to share personal experiences and feelings with others who are in similar circumstances.

**For more information:**

- Wisconsin Bureau of Aging and Disability Resources (608) 266-2536 or www.dhs.wisconsin.gov/aging/elderabuse/
- Wisconsin Coalition Against Domestic Violence (608) 255-0539 voice or (608) 255-3560 TTY or www.wcadv.org
- Wisconsin Coalition Against Sexual Assault (608) 257-1516 voice/TTY or www.wcasa.org
- National Domestic Violence Hotline (800) 799-SAFE (7233) or (800) 787-3224 TTY or www.ndvh.org
- Rape, Abuse and Incest National Network (800) 656-HOPE or www.rainn.org
- National Center on Elder Abuse (202) 898-2586 or www.ncea.aoa.gov/ncearoot/
- National Clearinghouse on Abuse in Later Life (608) 255-0539 or www.ncall.us

P-20224C (05/10)