

General Section - 2011

D14 Detection and Prevention of Elder Abuse: A Pilot Study in Italy

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The goal of this presentation is to inform attendees about an emerging phenomenon of human dominance, the so called "elder abuse."

This presentation will impact the forensic science community by demonstrating an inadequate awareness of detecting and preventing violence against elderly people, primarily among health professionals, in Italy.

It is estimated that people over the age of 80 will be the fastest- growing group in Europe over the next decades, rising from 4% today to 11% in 2050 (V. Turkulov et al., 2007). Even though elder abuse in institutional and domestic settings is increasingly being recognized as a major social problem, it is still underestimated in Italy.

The abuse against elderly people includes several types of damages and situations. The most typical victims are those carrying particular risk factors such as poor general health, disabilities, dependence on others. Abuse may take many different forms: physical, psychological/emotional, neglect, financial, legal, or sexual. Elder abuse is often the result of a lack of adequate knowledge, overburdening, and stress on the part of professional and family caregivers alike.

The supposed lack of appropriate measures to protect elderly people particularly vulnerable to abuse led to a project with the goal of giving a better estimation of the phenomenon and consequently acting in order to prevent it.

Purposes of this study were to assess the significance of this social problem in Emilia Romagna and Liguria (the "oldest" Italian Region) and to understand the level awareness of juridical or medico-legal measures to be adopted in the case of elder abuse or neglect. This has been performed by distributing an anonymous questionnaire to health operators and other professionals dealing with elderly patients (geriatrists, E.R. doctors, general practitioners, nurses, physiotherapists, social service operators, professional caregivers).

The results of the study conducted in these two Italian regions showed the little emphasis given to this significant problem in Italian society. For improving legal and medical protection, a more specific medico-legal and clinical definition of the elder and a higher awareness and alertness of medical personnel involved in old people care are mandatory. A preventive action for the subjects with high risk factors could be carried out to stop repeated violence and chronic abuse.

The first step to prevent violence against elder people should be fostering the ability of recognizing forensic markers of elder abuse such as bruises, deficient nutritional status, dehydration, bad hygienic conditions, decubitus ulcers, broken bones, sharp wounds, and skin tears. These markers, right now, are too often ignored or underestimated. In this sense, the purpose of the study is to overcome the low level of knowledge through new multidisciplinary screening

tools as well as uniform and validated guidelines. Such an approach could be extremely helpful not only for doctors, but also for all professional care workers and generally for people in contact with elderly people.

Moreover, the evaluation and comparison of other legal systems that provide a definition and a specific protection of the elderly in different European countries are fundamental.

In conclusion, elder abuse is a widespread serious problem. It is recommended that both forensic and health operators become familiar with this phenomenon, especially those who are involved in old people care. A widespread training of health professionals, justice and social sectors is the only mean to increase the awareness of elder abuse and to create multidisciplinary teams, developing research in this field. **Elder Abuse, Multidisciplinary Approach, Forensic Markers**