Tools to Enhance Conversation and Planning

These tools were designed to help tribes and villages begin conversations on how to respond to abuse in later life. The first step may be to identify what you want to accomplish and set some specific, manageable goals, such as forming a workgroup on elder abuse and getting agreements from key people to participate. Next decide what types of information you want to collect to attain your goals. Then consider the process you want to use to gather information and build a community response. Determine who to invite to participate in the dialog.

This section contains information on how to conduct a listening session and a coordinated community response meeting. A listening session is an opportunity for participants to share various perspectives during a single session. Coordinated community response meetings are a series of meeting among key responders and leaders to identity the strengths and challenges of the current response to abuse in later life and to create and implement a plan to move forward.

Printable PDFs of these tools are also available at: www.ncall.us

Various tools can be used to guide the conversations. Tools in this document include:

- **A questionnaire:** This short questionnaire provides an opportunity for individual reflection prior to discussing abuse in later life.

- **Short scenarios:** These 1-2 sentence examples of elder abuse can be used with any group. Consider using multiple scenarios to engage participants in a rich discussion of the various forms of elder abuse.

- **Sample stories:** These stories can be used in any forum to initiate conversations about different forms of elder abuse.

- **Case examples tailored for key responders:** These scenarios are designed to help multi-disciplinary groups (advocates, social services, government representatives, law enforcement, healthcare providers, attorneys, judges, elders, housing representatives, etc.) discuss abuse later in life and current responses. The case examples reflect differences in jurisdictional authority.

- **Abuse in Later Life Power and Control Wheel:** The wheel was created by NCALL based on feedback from older victims of abuse throughout the country. The wheel can be used to help frame conversations about what is considered abuse. Note for facilitators: The circle is sacred in Native communities. When you use the Abuse in Later in Life Wheel, it may be important to explain that it was adapted from a well-known tool developed by the Domestic Abuse Intervention Project in Duluth, Minnesota. The original power and control wheel was created based on stories heard from victims of domestic violence of the terror and violence they experienced. This educational tool makes visible the pattern, intent, and impact of abuse.
Conducting a Tribal Listening Session

Listening sessions can create a safe space for people to share their stories, ideas, and experiences without fear of judgement. They can be used to gather information or to check-in after new policies or services have been developed. Multiple listening sessions can be conducted with different configurations of people. Consider inviting elders, tribal council members, those who hold the cultural and spiritual history, and services and system providers who are already responding in some way to elder abuse or intimate partner violence.

Planning Tips

- Make listening sessions completely voluntary.
- Keep the group rather small – no more than 10, so that everyone has sufficient time to participate.
- Invite a strong facilitator who knows the subject matter (or at minimum understands the culture), has experience facilitating and preferably is not related to listening session participants.
- Select a positive, safe space for the listening session. Make sure that no historical or current mistreatment is associated with the location.
- Select a location that people who use assistive devices such as wheelchairs, walkers and canes can access.
- Consider arranging for transportation assistance to and from the listening session to aid elders and those that may have geographical barriers to participating.
- Select a time that is convenient to hold the listening session based on participants’ schedules. For example, if you are meeting with elders, maybe late morning or early afternoon; where holding a listening session for responders to elder abuse may work best in early evening, after work, or during an extended lunch period.
- Limit sessions to no more than 90 minutes.
- If possible, arrange for childcare if there is a chance that people will bring children and grandchildren.
- Explain the goals of the listening session to potential participants in advance so that people can freely elect whether they want to participate.

Facilitation Tips

- Respect the time that people are giving to participate in the listening session. Offer food and other items to help make people feel welcome and comfortable.
- Open the session with introductions. Facilitators should introduce themselves. Ask people to share their first names while they are in the group.
• Consider opening with a poem, ritual, traditional blessing or an elder abuse story to set the tone for the conversation.
• Address participants who might be nervous by being welcoming and friendly. Describe the purpose of the listening session and what process will be used during opening remarks.
• Ask participants to set agreements about confidentiality before any information is shared. For example, ask participants to honor each participant’s privacy and not share any information learned.
• Consider spending some time discussing what the term elder abuse or abuse in later life means to the group. The sample stories and scenarios in this document can help facilitate discussions about what abuse in later life means to participants and the community. Think though how to focus the conversation on specific behaviors (e.g., isolates an older adult; threatens to put an older person in a facility) rather than using jargon or broad definitions.
• Acknowledge that all viewpoints are important. Every person’s life experience is valued, so encourage everyone to share. It is okay to have different opinions. There are no “right” or “wrong” answers to the questions that will be asked.
• Keep the group informal so that people naturally build upon the dialog.
• Be prepared for participants to share a personal family stories or to disclose that they are being harmed. Consider having an advocate or social worker available to meet with anyone who may need support during or after the discussion. Keep mandatory reporting laws in mind.

Following the Listening Session

• Maintain confidentiality. No one except the facilitator should know who participated in the group.
• Do not disseminate any identifying information from any of the listening sessions. The facilitator should be the only person to see notes taken during the discussion.
• Report themes, not individual experiences, when sharing information with tribal leadership, collaborative partners or others that are working on addressing elder abuse.
Potential Listening Session Questions

Determine the purpose of the listening session. Craft questions to guide the discussion to meet your tribe’s or village’s goals. Below are some sample questions that can be posed.

For elders and community members:

- What role do older adults play in the family? In the community?
- What are the tribal beliefs and customs that have helped you in your life?
- In your experience, who is harming older adults in this community?
- How are they harming older adults (e.g. neglect, physical abuse, domestic violence, spiritual abuse, financial abuse, etc.)?
- If you or someone you knew was being mistreated, how would you want people to help?
- Who, within the family, do members turn to in times of conflict or strife?
- What/who are the trusted sources of information in the community?
- How can the community work with an elder to address what has occurred?
- Or how has the tribe responded to elder abuse, if at all?
  - What works about this response? What doesn’t work?
- When speaking about abuse in later life, what words or terminology would be most meaningful in your community and why?
- How are older adults’ wants and wishes taken into consideration when there are family issues or elder abuse?
- What resources are needed in this community to help end abuse in later life?
- What suggestions do you have to make people more aware of the problem?

Additional questions for first responders and systems:

- How are you connected to the tribe? or What is your role in providing safety for tribal elders?
- Is there a common understanding about elder abuse in the community? Among first responders?
- How frequently are you receiving calls about elder abuse?
- Where do victims of elder abuse make their first contact/point of assistance? Does the response vary depending upon where contact is initiated?
- How much autonomy should elders have to make their own decisions?
- How have you trained non-Native responders about tribal/village culture and needs?
- What has worked in responding to elder abuse in this community? Ask about formal and informal responses that help elders and restore harmony to families, etc.
- How does your community reach the most isolated and vulnerable older adults?
- What challenges remain when responding to elder abuse in this community?
• How can families and community members be included in a response where the safety of the elder is not compromised (i.e. so there is no further collusion or tactics used towards the elder)?
• What is the history of collaboration within the tribe? With non-Native entities?
• How is sovereignty honored? Not honored?
• If not yet discussed, is there a tribal code applying to abuse in later life? If so, what is effective/not effective about it?

Additional questions for tribal governments:
• How significant of a problem is abuse in later life for your tribe or village?
• Do you have written laws? Resolutions?
  o If yes, do you have codes/resolutions about elder abuse? What works about them? What remains challenging? Are there laws or policies that can be modified or used as an interim protection for the elderly?
  o If no, was there a decision not to have one? How are you responding to human rights violations without codes?
• How does your tribe or village currently deal with negative behaviors or acts by your People?
• Ideally, how would you deal with such acts?
• What mechanisms does your tribe use to help restore safety, dignity, and harmony to families?
• What are the components (infrastructure) that need to be in place for your tribe to create an ideal response to elder abuse?
• What are your nation’s principles about sovereignty?
• What is the history of collaboration within the tribe? With non-Native entities?
• How is sovereignty honored? Not honored?
• Has your tribe ever accessed funding to address violence in the community? What worked? What didn’t work?
Coordinated Community Response Conversations to Address Abuse in Later Life

To achieve your goals, you may decide to hold regular conversations or meetings with key responders, elders and tribal leaders. Initially these meetings may focus on identifying what is happening in the tribe or village. How are elders being harmed? What are the current responses? What is working? Where are the gaps and challenges? What are the results of the listening sessions and other methods of gathering information?

Next the group may want to consider how to move forward to enhance the safety and quality of life of older victims of abuse. Consider starting with small, achievable goals so that the group can build on some successes.

Planning Tips

- Identify key leaders or respected individuals to invite as participants.
- Consider whether to keep the group small or large – depending on the goals and interest.
- Invite a strong facilitator who knows the subject matter (or at minimum understands the culture) and has experience facilitating.
- Select a positive, safe space for the meetings. Make sure that there is no historical or current mistreatment associated with the location.
- Select a location that people who use assistive devices such as wheelchairs, walkers and canes can access.
- Select a time that is convenient for participants.
- Explain the goals of the meeting and the agenda to potential participants in advance so that people can freely elect whether they want to participate.

Facilitation Tips

- Consider opening with a poem, ritual, traditional blessing or an elder abuse story to set the tone for the conversation.
- Describe the purpose of the CCR meetings and what process will be used during opening remarks.
- Ask participants to set agreements about confidentiality before any information is shared. For example, ask participants to honor each participant’s privacy and not share any information learned.
• Consider spending some time discussing what the term elder abuse or abuse in later life means to the group. The sample stories and scenarios in this document can help facilitate discussions about what abuse in later life means to participants and the community. Think though how to focus the conversation on specific behaviors (e.g., isolates an older adult; threatens to put an older person in a facility) rather than using jargon or broad definitions.

• Acknowledge that all viewpoints are important. Every person’s life experience is valued, so encourage everyone to share. It is okay to have different opinions. There are no “right” or “wrong” answers.
Building a Coordinated Community Response: Potential Questions

The following list of questions can help tribes discuss what is currently happening in their community and some potential next steps. This broad checklist is not intended to be all inclusive. Select areas of focus that seem most relevant to your tribe’s current situation and vision for the future. Each community is encouraged to add their own considerations and use other resources that exist on abuse in later life.

History and Values

- What are the cultural values and traditional norms of the tribe?
- What diversities exist within the tribe that may affect their understanding of elder abuse or acceptance of help? For example, do people speak different languages, have various religious/spiritual practices, identify with more than one tribe or race, etc.?
- How is “old age” defined?
- Is there a common understanding or definition about elder abuse in the community? Among first responders? If yes, what is it?
- Is there a common understanding of what safety means? If so, what is it?

Data

- Do you have data relating to the age, health, and living conditions of tribal members? For example, where do people reside, what is the average lifespan, do people have access to clean water, food, heat and housing?
- What statistics exist in your community pertaining to elder abuse (e.g. police calls, arrests, criminal prosecutions, filings for protection orders, accessing tribal health services, social services, adult protection agency investigations, allegations made in probate proceedings, etc.)?

The Role of Elders

- How active is the tribe or village in addressing the needs of elders?
- Is there an elder council?

Current Response to Elder Abuse

Overview

- In the past 5 years, has your tribe or village conducted a community assessment or engaged in resource mapping around domestic violence, sexual assault or elder abuse? If so, what information can be used from that assessment to inform this effort?
- Have you collected information from elders, first responders, spiritual and tribal leaders and community members about elder abuse? This can be accomplished through listening sessions, surveys, tribal council meetings or other forums.
- How are responders maintaining victim confidentiality?
• Who, if anyone, are mandated reporters?
• What tools will be used to determine mental capacity of elders? Have these tools been developed by the tribe or village or adapted to account for the culture?
• What training and resources do first responders and service providers have to support them in their role?

Services
• What resources exist in your community for seniors experiencing abuse later in life? What are the short-term supports? Long-term supports?
• How are elders accessing these services?
• What gaps or barriers are there to help elders to remain safe and achieve well-being?
• What is the ability of the tribe or village to financially sustain services to elders?
• Are there mechanisms in place to provide an elder emergency and timely assistance, no matter where they reside in the tribe or village?
• Does your tribe or village have a dedicated elder abuse advocate?
• Does your tribe or village have a local domestic/sexual violence service provider? Adult protective services agency?
• Are there culturally relevant short-term/respite housing options available in the community or ones that are easily accessible?
• Are there culturally relevant healthcare providers and facilities located on tribal lands or ones that are easily accessible?
• Is there a protocol that accounts for reporting elder abuse?
• Investigating a report? Training of responders? Monitoring services?
• What culturally accepted practices and programs are integrated into case resolution and other decisions?
• How is the elder’s autonomy supported in current responses?
• What happens when an elder is not interested in receiving services?
• What trends are occurring in your community that may affect service delivery or system response?

Justice System
• What legal mechanisms are in place to address elder abuse? For example, does the tribe or village have a code or law about elder abuse? Are people able to obtain protection orders? If so, how are those enforced?
• Is there a process or protocol for developing and enacting a code?
• Will you need a tribal resolution to begin this process?
• Are there short-term modifications of legal procedures that can address abuse in later life without fully developing an elder protection code?
• Does the tribe have sole or shared jurisdiction over matters related to elder abuse?
• Does your tribe or village have a court? Prosecutor? Police?
• What types of restorative justice efforts have been the most successful in your tribe or village and can any of those be incorporated into an elder abuse response?
• If the tribe or village relies on state or federal law enforcement, what is the quality of their relationship with the community?
• How attuned are law enforcement to intimate partner violence and elder abuse?
• How are responders working with perpetrators to ensure accountability in a way that reflects tribal values and traditions?

Collaboration, Partnership and Leadership
• Is there a core group of individuals who represent the community and who are committed to working on elder abuse?
• Are there champions in the community that can successfully advocate for elders and services to address abuse in later life?
• What is the most effective method of obtaining buy-in and interest from tribal leaders?
• Has there been any confusion about jurisdiction? If so, was it or can it be resolved and agreed upon?
• Has your tribe previously collaborated with state or federal responders and service providers? If so, what are their reputations? What are the experiences of elders that have accessed services?
• What is the current relationship between the tribe and the state? With federal authorities?
• Is there a past or existing conflict that could prevent an effort moving forward if not resolved?
• In what ways has tribal sovereignty been respected by non-Native organizations and governments?
• Which non-Native entities might be supportive to approach for partnerships?
• How will partnerships be formed to ensure sovereignty is not eroded?

Preparing the Community
• Have you educated the community about abuse in later life?
• How would you address multi-generational trauma when educating the community about these issues?
• How have elders been engaged in the process?
• How does the tribe inform its members about laws, polices, or proclamations?
Questionnaire

Some people prefer to process information by writing rather than talking. A questionnaire can provide an opportunity for participants to reflect on their experiences individually. A questionnaire can be used on its own to gather information or in addition to listening sessions and conversations.

Some tips to consider:

- Every person should complete his/her own questionnaire.
- If you use the sample questionnaire on the next page, give everyone a copy of the Abuse in Later Life Wheel.
- Allow at least 15 minutes to complete the questionnaire.
- Reassure people that no one will see their written responses unless you plan to collect them. If you collect the questionnaires, suggest that no one put their names or identifying information on the form.
- After everyone has completed their questionnaires, participants can share some of their responses in groups of 2-3 people, or engage in a larger discussion. Encourage participants to share only what they feel comfortable discussing.

Supplies needed: copies of the questionnaire, pens and copies of Abuse in Later Life Wheel (found at the end of this document or at: www.ncall.us)

Alternate Use: Tribes and villages may want to adapt the questionnaire as a way of collecting information from service providers and community members at different gatherings.
Questionnaire: Examining Elder Abuse in My Community

1. Take a few minutes to look over the Abuse in Later Life Wheel. Think about families/people you encounter and list the types of elder abuse that you have seen in your tribe or village.

2. What does safety mean to you?

3. What is your role in providing safety to older tribal members?

4. What resources do you have to help promote safety?

5. What strengths, values and concepts exist in this tribe that can support ending the abuse, neglect, and exploitation of elders?

6. What challenges exist in this tribe that can be barriers to ending abuse in later life?

7. Other thoughts?
Short Scenarios for Discussion

To raise awareness and expose differing viewpoints about abuse in later life, feel free to use one or more of these short scenarios to initiate conversations. These short scenarios provide a range of victims of diverse ages as well as various relationships between the victim and potential abuser and forms of abuse. After reading each scenario, consider discussing some or all of the following questions in small or large groups.

1. Is this elder safe?
2. What other information would you need to make a determination if this elder is being abused or neglected?
3. What would help this elder?
4. How could the community’s current response help support this elder?

• Nina is 72. She is taking care of her husband who has dementia. He often gets lost. As a way of trying to manage the situation, she keeps him tied to a chair when she showers or run errands.
• L.P. was never around when his children were growing up. When he did come around the house, he was drunk and abusive. His two adult sons are now taking care of him. They do not live with him but stop by on occasion to make sure he is not dead. They are often overheard yelling at L.P.
• Ted is 70 and lives in a remote village on the road system. A young man has offered to take him into town to use the telephone and check his mail. Even though it costs the young man about $30 for gas, he charges Ted $75 for every ride.
• Due to a lack of facilities in the region, an elder was sent to a hospital more than 100 miles from his home. He spent several weeks there, where he subsequently died.
• Freda, age 58, has a protection order against her husband Larry. Everyone in the community is aware that Larry still lives in the house with Freda.
• Little Johnny cares for his 88 year old mother who only speaks her native language. She has never lived away from tribal lands. Little Johnny is exhausted. His mother needs 24/7 care. One day he is mad at her for not eating. He slaps her and forces food into her mouth.
• An elder was brought to the emergency room with bruises and a fractured limb. The family stated that the elder had fallen. Malnutrition and dehydration were noted on her medical assessment as well.
• An adult son who moved away from the tribe comes home to visit his father who is now 62. He finds the house in disarray and rotting food in the refrigerator. His father seems okay but refuses to have his son arrange for any help.
• Tina, age 52, lived away from the reservation for many years. She was involved with a non-Native boyfriend. She moved back after their breakup. He keeps coming to her house and place of work. He calls her friends to check up on her. He tells her he loves her. Tina believes he slashed the tires on her car and is following her.
• Jane, age 87, has her three adult children and five grandchildren living with her. Everyone contributes as they can, but they primarily live off of Jane’s Social Security. Jane has cut her food intake in half and refuses to buy personal items for herself to ensure everyone else has what they need.
• Rachel goes to visit a respected spiritual healer. She is 75 years old. In order to be completely restored, the healer indicates she has to take off her clothes.
• Natalie was found wandering around the town. Her adult daughter stole and sold her medications that were prescribed to treat Natalie’s chronic illness.
• An elderly woman was removed from her nursing home so that her family could take advantage of her income checks.
• Cynthia hired a caregiver to take care of her father, Dave. Everyone agrees that Dave is an angry, stubborn person. He fights the caregiver on everything. In order to teach him a lesson, the caregiver refuses to take Dave to the pow wow.
• Janice’s grandson moved into her house to help take care of the ranch since she can no longer handle it alone. They agreed that she would give him the ranch after she passed. Six months ago, he forced her to sign the title to avoid future family arguments. He evicted her three months later.
Sample Stories for Group Discussion

Sometimes listening to examples of what may be happening to elders can provide an opportunity for thought and reflection before asking people to share their experiences. On the following pages you will find several scenarios to select from that can be used to spark conversations and reactions. Each story is on a separate page so you can make copies for participants. After reading a story, consider leading a discussion asking whether or not these stories are considered elder abuse. Discuss how your tribe or village currently responds to similar situations.
Tate and Wanetta

Tate and Wanetta (both age 66) have four children, 10 grandchildren, and one great
grandchild. They always say how blessed they are and that family is their bounty.
Economically, times are difficult. Their tribe does not have a casino. The tribe also
closed enrollment. Many indigenous families are not able to access housing and other
benefits of tribal membership, including members of their own family. Their children
rely on them to be the primary caregivers for the grandchildren and great
grandchild. Tate has some limitations because he developed cataracts and has a
pacemaker. Wanetta cooks, cleans, and tries to maintain order in the household. There
is only one bathroom and three bedrooms. Most weeks, at least 8 people are staying at
their house. Their children work off the reservation and often don’t pick up their kids
until the weekend. Wanetta and Tate receive no financial assistance from their
children. They do not want to worry anyone but they are struggling to pay their bills
and keep food on the table for everyone. Their household expenses have increased
and they are even buying the kids clothes, school supplies and other necessities.
Yuma and Marlene have been married for 35 years. They have five children, one died as an infant. Only one child still resides in the village. Yuma has been a member of tribal council for the past ten years. People in the community are aware that Yuma disrespects Marlene. They have heard him speak down to her and have seen Marlene with bruises. In fact, 15 years ago she had to go to the hospital because Yuma broke her arm. Recently, Marlene has not been attending potlatch or participating in other village events. Her kids have not heard from her. One of her daughters called the Village Public Safety Officer and asked him to do a welfare check. When the officer arrived, Yuma tried to refuse to let him in the house or to speak directly to Marlene. When the officer talked to Marlene, he noted that she had been crying, appeared very thin and was barely clothed.
Nadine is 55. She lives alone. She moved back to the community about 20 years ago after a painful divorce. She has no children. After returning, the only housing she could find was in the remote far west corner of the reservation. She has to travel 40 miles to get to town. Visitors are rare. She has no electricity and no telephone.

She has Ahote come to her house once every two weeks to bring her supplies. A few months ago, John showed up at her door selling vacuum cleaners. Nadine and John had an instant spark. John is non-Native and 20 years her junior. John moved in with her. They live off Nadine’s small pension. John still tries to sell vacuum cleaners but is looking into other opportunities.

One day Ahote is approaching Nadine’s home and hears a gun shot. John had killed Nadine’s dog after an argument. Ahote also noticed that Nadine had red marks around her neck. Nadine said the marks were an allergic reaction to something she touched when she was out picking berries.
Isi is 67. She and her husband, until his recent passing, held honored positions in the tribe. Her husband was involved in tribal council. She is part of the tribe’s effort to reclaim its heritage. One way she does this is by making beads, a craft passed down from her ancestors that she and the other elders are trying to preserve. She has also been entrusted with regalia and tools that date back many years. Isi has three children. Her children rarely come around, but when they do, it is usually to ask her for money. Isi’s daughter is addicted to pain pills, one son is unemployed and the other is usually too busy to spend time with family. Isi has two grandchildren who bring her much joy. She is always excited when she gets to spend time with them. Isi has noticed that some of her beads and tools are no longer in the house. She suspects her children have been stealing and pawning them. Yesterday, her daughter demanded that Isi give her all the beads she makes. If Isi does not agree, her daughter will not let the grandchildren visit.
LeRoy is 65 and an enrolled member of the tribe. He has lived his entire life in the pueblo, except for when he served in the military. He has two adult sons who were raised by their respective mothers. He suffers from diabetes, gout and high blood pressure. Five years ago LeRoy’s left leg was amputated because he failed to seek medical attention for these conditions. Since that time, his sons have been his primary caretakers. LeRoy gave his sons full access to his house, car and financial affairs. They are responsible for getting him to and from his doctor appointments, buying his groceries and medication, cashing his veteran and per capita checks and paying his bills. LeRoy has always been a saver. He recently became aware that in the past few months his bank account balance has been reduced by $10,000. His sons told him that they needed money to cover all their expenses since they can’t hold jobs because they are taking care of him. They warned him that if he made a big deal about the money they wouldn’t help him anymore and they would cut off contact with him. After LeRoy missed a few medical appointments, a caseworker from the Veterans Affairs came to his house. She found LeRoy in a wheelchair, wearing clothes soaked in his urine and feces. There was no food in the house. LeRoy appeared cognitively alert. He said that his sons were dealing with other family emergencies and that is why he missed his medical appointments. He reassured the caseworker that it would not happen again.
Sarah is very well known and well-liked. At age 90, she is one of the oldest living members of her tribe. For the most part, the community accepts that they will find Sarah passed out in any one of several locations. Alcohol is her primary form of nutrition. Any time she has any money it goes to purchasing beer or whatever she can find to become intoxicated. Her drinking has resulted in liver damage leading to several hospitalizations. Sarah always checks herself out of the hospital as soon as she can, typically against medical advice. Doctors believe she has been sexually assaulted more than once. Lately, she has been falling a lot. She has contusions and open wounds on her head, legs, and hands. She seems confused but it is difficult to tell if her disorientation is from the alcohol or something more. Sarah receives her food from a home delivered meals program. The driver noticed that Sarah had left the food untouched for more than a week. The driver made a report to the state adult protective services. A social worker conducted an investigation. Sarah indicated she was fine and was not interested in any help.
Case Examples Tailored for Key Responders

These scenarios are designed to help multi-disciplinary groups of key responders (e.g., advocates, social service case workers, government representatives, law enforcement, healthcare providers, attorneys, judges, elders, housing representatives, etc.) discuss abuse later in life and current community responses.

- Select the scenario from this section that best describes your tribe or village’s jurisdiction.
- The scenarios and questions are on separate pages so you can easily make copies for participants.
- Consider using a facilitator to help the group process the questions from all angles so that diverse viewpoints are heard.
The Peaceful Nation is a federally-recognized tribe. It has 8,000 enrolled members. Tribal lands are spread over a span of 200 miles. A traveler would cross into state territory a total of 25 times if one drove from one end of the reservation to the other. Peaceful has a tribal court. They have their own small police department that is cross-deputized with the state sheriff’s department. There is no tribal-run adult protective services (APS). The state APS is assigned to respond to calls about elder abuse allegations of Peaceful Nation citizens. There is a tribal domestic violence advocate who is often contacted when there is any family issue. She is liked by the community. She is also the granddaughter of one of the tribal council members.

Sarah is 67. She has multiple sclerosis. She receives care from a home care aide a few hours a week through the state. The aide is non-Native. One day the aide reported to her supervisor that she does not want to return to Sarah’s house. She is afraid of Thomas, Sarah’s husband. Thomas has used profanity and yelled at Sarah and the aide. Thomas seems very frustrated that Sarah is unable to cook and clean like she did in the past. Sarah told the aide that he is someone who needs a gentle touch and not to worry. During this last visit, the aide noticed that Sarah had bruises on both of her upper arms and one on her breast. Thomas refused to let the aide speak to Sarah alone. The supervisor called the tribal domestic violence advocate.

Discussion Questions:

• Using the Abuse in Later Life Wheel, what possible tactics might Thomas be using?
• What safety concerns do you have for Sarah?
• What would the current response be in your tribe to this situation? Potential outcomes?
• Would the response be any different if Thomas was non-Native?
• Would the response be any different if instead of bruises Sarah had cigarette burns on her body?
• What assistance does Sarah potentially need? Thomas?
• Are these services available in the community? If they are available, how would Sarah and Thomas access them? If they are not available, what needs to take place to make them available?
**Non-P.L. 280 State**

Big Sky is federally recognized. It has 5,000 members, half of which live on the reservation. The reservation covers 60,000 acres. Big Sky has an elder protection code that applies to individuals 60 and older with the intent to prevent their abuse and neglect. Big Sky has a part-time judge and prosecutor. There are two security officers that patrol the reservation. The tribe cannot afford a police force. There is no elder or domestic violence advocate, and no adult protective services (APS). Indian Health Services (IHS) is a core service provider for the tribe and conducts regular elder health and engagement activities.

Sarah is 67. She has multiple sclerosis. She receives care from a home care aide for a few hours each week through IHS. The aide is non-Native and has been helping Sarah. One day the aide reported to her supervisor that she does not want to return to Sarah’s house. She is afraid of Thomas, Sarah’s husband. Thomas has used profanity and yelled at Sarah and the aide. Thomas seems very frustrated that Sarah is unable to cook and clean like she did in the past. Sarah told the aide that he is someone who needs a gentle touch and not to worry. During this last visit, the aide noticed that Sarah had bruises on both of her upper arms and one on her breast. Thomas refused to let the aide speak to Sarah alone. The supervisor called the tribal domestic violence advocate.

**Discussion Questions:**

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- What safety concerns do you have for Sarah?
- What would the current response be in your tribe to this situation? Potential outcomes?
- Would the response be any different if Thomas was non-Native?
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- What assistance does Sarah potentially need? Thomas?
- Are these services available in the community? If they are available, how would Sarah and Thomas access them? If they are not available, what needs to take place to make them available?
Alaska
Selma has lived in a village on the Tundra all her life. The village is made up of a clan of 30 families. The clan survives off of the bounty of the four seasons and the occasional tourist. Life is not easy but the strength pulled from the ancestors and Creator gets her through. Like many other women of the Tundra she has been mistreated. She was first raped at the age of 8. She has been married for a long time. At age 62, she is tired. She no longer participates in the gathering and hunting and relies on the others in the clan to help provide her necessities. When she is able, she cooks and watches after children. Selma’s husband ChuChu has taken to drinking. When he is drunk, sometimes he becomes aggressive with her. She never knows what “mood” he will be in when he comes home. ChuChu was arrested a long time ago for breaking Selma’s arm and eye socket. Yesterday, ChuChu came home and tried to have sex with her. Selma’s body hurt from her arthritis and she said no. ChuChu forced Selma to take an overdose of medication so he could have sex with her. ChuChu found her unconscious in the morning.

Discussion Questions:
• Using the abuse in later life wheel, what types of tactics is ChuChu using?
• What safety concerns do you have for Selma?
• What would the current response be in your village to this situation? Potential outcomes?
• Would the response be any different if ChuChu was non-Native?
• What assistance does Selma potentially need? ChuChu?
• Are these services available in the community? If they are available, how would Selma and ChuChu access them? If they are not available, what needs to take place to make them available?
Second Scenario for Any Jurisdiction

Paul is 83 years old. The police found him wandering down a main road, off the reservation. He seemed a bit confused and the officer called an ambulance to take him to the local county hospital. The hospital determines that Paul is suffering from dehydration, has a urinary tract infection, and pneumonia. He asks the hospital to contact his son Junior who is living with him. Paul is responding well to an IV and seems to have no cognitive impairment although he does not seem to know how to use the TV remote and cannot answer questions about current events. The nurse overhears Junior telling his father that he needs to sign over his financial affairs to him otherwise he will not take care of him. The nurse contacts the hospital’s social worker. The social worker speaks to Paul. Paul indicates that sometimes his son is gruff but he believes he is trying to protect Paul from future harm. He says he is not afraid of living with his son and wants to return home. The social worker also speaks to Junior who tells her to stay out of their private family business.

Discussion Questions:

• What concerns, if any, do you have about Paul?
• From your professional perspective, what should the response be to Paul and who should be involved?
• What are the potential risks of that response? Of not moving forward with that response?
• How will the response honor Paul’s wishes?
In 2005, staff from the National Clearinghouse on Abuse in Later Life (NCALL) asked facilitators of older abused women’s support groups to have participants review the Duluth Domestic Abuse Intervention Project’s Power and Control Wheel. Over 50 survivors from eight states responded. NCALL created this Abuse in Later Life Wheel from their input.
Tactics Used by Abusers

During 2005, NCALL staff asked facilitators of older abused women’s support groups to have participants review the Duluth Domestic Abuse Intervention Project’s Power and Control Wheel. Over 50 survivors from eight states responded. NCALL created this Abuse in Later Life Wheel from their input. In addition to the tactics on the wheel, many offenders justify or minimize the abuse and deny that they are abusive. Perpetrators of abuse in later life may make comments like “she’s just too difficult to care for” or “he abused me as a child” to blame the victim, or try to minimize the abuse by stating the victim bruises easily or injuries are the incidental result of providing care. The list below provides additional examples of some of the behaviors victims might experience under each tactic included on the wheel.

Physical Abuse
- Hits, chokes, burns, pinches, throws things, restrains

Sexual Abuse
- Sexually harms during care giving
- Forces sex acts
- Forces elder to watch pornography

Psychological Abuse
- Engages in crazy-making behavior
- Publicly humiliates

Emotional Abuse
- Yells, insults, calls names
- Degrades, blames

Targets Vulnerabilities & Neglects
- Takes or denies access to items needed for daily living
- Refuses transportation
- Denies food, heat, care, or medication
- Does not follow medical recommendations
- Refuses to dress or dresses inappropriately

Denies Access to Spiritual & Traditional Events
- Refuses transportation or access
- Destroys spiritual or traditional items of importance

Ridicules Personal & Cultural Values
- Disrespectful of cultural practices
- Ignores values when making decisions

Uses Family Members
- Misleads family members regarding condition of elder
- Excludes or denies access to family

Isolates
- Controls what elder does, who they see and what they do
- Denies access to phone or mail

Uses Privilege
- Speaks for elder at financial and medical appointments
- Makes all major decisions

Exploits Financially
- Steals money, titles, or possessions
- Abuses a power of attorney or guardianship

Threatens
- Threatens to leave or commit suicide
- Threatens to institutionalize
- Abuses or kills pet or prized livestock
- Displays or threatens with weapons