Financial abuse of older people in New Zealand

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In June 2011, the Institute of Policy Studies at Victoria University of Wellington held a round table discussion on financial elder abuse. This paper drew on that discussion and on previous work by the authors. A draft of the paper was circulated to the participants for their comment. The authors would like to thank all those who took part in the round table, especially those who offered comments, and also members of the staff of Age Concern New Zealand, who made their contribution.
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Synopsis

Work to prevent and combat financial elder abuse (FEA) is fraught with difficulty, but work to ensure that older people are free from abuse in all its form is a vital issue now and for the future. FEA has serious impacts on the health and wellbeing of older people, but it is under-reported and under-recognised. There are definitional issues around what range of behaviours should be included in FEA, around the types of relationship in which it can occur, and the concepts of ‘trust’ and ‘vulnerability’ in relation to older people. FEA may occur in a range of different circumstances and has been explained in different ways, underlining the complexity of the problem and the varying ways in which it can be approached. It has dimensions related to family functioning, to the care of vulnerable adults and to the operation of services for older people, especially financial services. Intertwined are issues of responsibility and entitlement, ethics and opportunity.

Added to definitional difficulties are measurement problems. Prevalence rates for FEA are extremely difficult to establish. Fear, shame and stigma may prevent older people from reporting abuse. Physical and cognitive disabilities add another barrier. We know from New Zealand data that FEA and, often associated, psychological abuse, are probably the most common forms of elder abuse and neglect. Its incidence appears to be increasing, associated with the ageing of the population and increased longevity. Evidence from New Zealand and overseas reveals that close family members are the most common perpetrators of FEA. Their victims are often very old people in poor health and especially women.

Challenging ageism and negative attitudes to older people is a key means to prevent FEA. This calls for public education and awareness campaigns among carers, professionals and service providers. Financial literacy, social connectedness and access to support will protect older people. Strategies to help families understand their roles vis-à-vis older people in managing their assets safely and respectfully can also help to prevent FEA. Service providers from all sectors can play their part in looking for warning signs of abuse and knowing how to take appropriate action when these are apparent. Other government action in the preventive sphere includes policies on consumer protection and legal measures, such as enduring power of attorney procedures.

How to deal with FEA once it has occurred depends on how the problem is conceptualised. Measures may include mandatory reporting, but its effectiveness is contentious. Banks and other financial institutions have to grapple with obligations of privacy for their customers and have yet to initiate robust measures against FEA. FEA may be seen as a social services issue, suggesting measures such as helplines and multidisciplinary approaches. In New Zealand elder abuse and neglect prevention services have both preventive and remedial functions but lack of funding precludes full coverage. Seeing FEA as a justice issue brings in legal and quasi legal responses – criminal law, civil law and alternative dispute resolution. But, as well as the cost of legal action, the deep seated nature of abuse may mean that these do not offer sure solutions. They may also be too detrimental to family relationships for older people to pursue. Many instances of FEA may be improper rather than illegal. The act may be one of omission or ignorance rather than malice. Dependence and family feelings may cloud the question of consent on the part of an older person.

No single response will tackle the complex issue of FEA. Numerous questions about the nature of the problem, causes, effective prevention and response, remain unanswered. More
discussion is needed, but also more evaluation of possible responses in the New Zealand context and a clear commitment to the elimination of FEA in this country.

Acknowledgements

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The authors welcome further comment on the paper, especially suggestions on how work to prevent and combat financial elder abuse in New Zealand can make progress. Please send your comments to –

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Introduction

There is no single internationally accepted definition of elder abuse. This inhibits meaningful comparison of data. New Zealand generally uses the definition adopted by the World Health Organisation:

“A single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person”. ³

Within this definition, financial elder abuse (FEA) is defined as the “illegal or improper exploitation or use of funds or resources of the older person” (Wolf, Daichman and Bennett, 2002, p. 127).

This working paper is linked to a workshop hosted by the Institute of Policy Studies, Victoria University of Wellington, in June 2011. Following discussion of definitional issues and exploration of what we know about FEA, we identify strategies to prevent and reduce FEA in New Zealand. Our purpose is to promote discussion and development of policies which ensure a multi-faceted response to this issue. This will help to ensure that older people are free from elder abuse in all its forms.

Why is FEA important?

The impacts of financial elder abuse may lead to permanent loss of financial security and may even be life-threatening. Older people may not have the ability or opportunity to recoup income and assets. There are also few services which allow victims to reduce risk and recover assets, for example in the form of restitution advocacy, legal assistance and crisis counselling.

The authors of the Protecting Elders’ Assets Study (PEAS) in South Australia (Darzins et al. 2009) link FEA to depression, psychological harm and declining physical health. It can result in higher levels of dependence and an increased need for care services. In psychological terms FEA may engender fear and lack of trust on the part of older people and lead to loss of faith in all family members or service providers. The first MetLife study (2009) suggests that FEA “invariably results in losses of human rights and dignity”. The update of this study (MetLife 2011) concludes:

Elder financial abuse continues to decimate incomes both great and small, engenders health care inequities, fractures families, reduces available health care options, and increases rates of mental health issues among elders. Elder financial abuse invariably results in losses of human rights and dignity. Despite growing public awareness from a parade of high-profile financial abuse victims, it remains under-reported, under-recognized, and under-prosecuted.

Scope and Definition

Darzins et al. 2009 note that “operationalising the definition [of FEA] has been a major stumbling block for both researchers and the legal fraternity. The issue becomes pertinent when researchers investigate … prevalence and risk factors for FEA” (p.9. See also Dixon et al. 2010).

Areas of debate in defining FEA include:
1. determining what relationships include an ‘expectation of trust’, and whether FEA should be restricted to such relationships
2. the range of behaviours the term encompasses
3. whether 'abuse' is the most useful term to use
4. the definition of ‘elder’
5. whether or not vulnerability of the 'victim' should be considered.

Relationship between perpetrator and victim
In their study of older people who had experienced elder abuse in the UK, Dixon et al. (2010) found that an older person’s perception of who should be trusted may differ from that of a service provider, or society in general. They argue: “It is particularly important to distinguish between trust in affective relationships and ‘positions of trust’ (as of paid carers), and to articulate the concept in terms that engage with older people’s experiences…” (p. 403). It can be argued that it is not the relationship between the perpetrator and the victim that is important but the impact of the behaviour on the older person. Given that FEA “causes harm and distress to an older person”, should it include all financial crime against older persons, as is the situation in Californian law? The “Elder Abuse and Dependent Adult Civil Protection Act defines “financial abuse” as occurring when a person or entity takes, hides, appropriates, or retains real or personal property of an elder or dependent adult for wrongful use and/or with the intent to defraud, or assists in doing so” (Bessolo 2009, p.23 citing California Welfare and Institutions Code section 15610.30), thus no restriction is placed on who the perpetrator may be.

The range of behaviours included and the term ‘abuse’
Much FEA is straightforward - for example a care worker stealing from an older person's purse, or a son stealing from his mother’s bank account to fund his drug habit. Other situations are less clear; for example when assessing the actions of one acting on an older person’s behalf. Does unwise or poor financial management by a family member constitute abuse? If a person acting as enduring power of attorney maintains charitable giving previously established by the older person, but in so doing depletes the older person's assets, is this abuse? Darzins et al. 2009 question whether ‘abuse’ is the right word to use as many people, older people included, do not associate the term with financial exploitation or misuse of assets. Similarly, difficulty may arise when assessing behaviour within the values and norms of differing cultures.

Age and vulnerability
Age and vulnerability are separate concepts which are often entwined in debate. Enacting laws and policies aimed specifically at older people suggests that they are, indeed, vulnerable, and therefore in need of special protection. It could be viewed as paternalistic and discriminatory (Darzins et al. 2009). Even the term, ‘elder’ is under scrutiny. At what age does a person become an elder? Is it simply a function of chronological age (usually 65
plus)? Given that the term has a special meaning in some cultural communities, for example, among Maori, Pacific peoples and indigenous Australians, how useful is it in an operational context?

‘Vulnerability’ is a concept incorporated into some definitions, legislation and service practices internationally, as a means of identifying people who need support or intervention to protect them from harm. Such categorisation raises similar issues as does the use of age. Some highlight the dangers of perceiving vulnerability to be “an inherent characteristic of a person” and not recognising “that it might be the context, the setting or the place which makes a person vulnerable” (The Law Commission 2011, paragraph 9.21, p. 114). Others point out that the term vulnerable “appears to locate the cause of abuse with the victim, rather than placing responsibility with the actions or omissions of others” (ibid.). These arguments have prompted the UK Law Commission to recommend use of the term ‘adult at risk’, with the definition:

“Recommendation 40: Adults at risk should be those who appear to:
(1) have health or social care needs, including carers (irrespective of whether or not those needs are being met by services);
(2) be at risk of harm; and
(3) be unable to safeguard themselves as a result of their health or social care needs” (p. 120).

Their recommended definition of harm explicitly includes financial abuse.

‘Vulnerability’ as a defining factor for adults in need of protection now appears in New Zealand legislation. The Crimes Amendment Act (No 3) 2011, passed on September 19 2011, defines a vulnerable adult as “a person unable, by reason of detention, age, sickness, mental impairment, or any other cause, to withdraw himself or herself from the care or charge of another person” (s 4 (1)). While this legislation does not explicitly refer to FEA, the provisions are sufficiently broad that some cases could fall within its ambit. It will be important to see how this law is applied in New Zealand, alongside the international context.

Why does FEA occur?

Consistent with the complex nature of the problem, FEA has been explained in different ways. Many abusers simply do not recognise that older people are entitled to control their own money and assets and to use them as they choose, even if others think that choice is unwise. Elder abuse of all types has been associated with older people’s relatively low status in society and lack of economic power (Wolf et al. 2002; Peri et al. 2008).

Cultural differences and views on inheritance have a bearing on whether FEA occurs or is recognised - for example whether a child should return money borrowed from a parent (Darzins et al. 2009). Approaches to financial management within families also vary depending on cultural background, as was found in PEAS (Wainer et al. 2010b, 2010c). The

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4 A similar definition appears in the Adult Support and Protection (Scotland) Act 2007.
Greek community in Australia emphasise self-reliance, the need to plan for old age and to live independently as long as possible. In other cultures (in this case exemplified by the Vietnamese), the family unit is given a higher value than the individual and the way in which assets and responsibilities are allocated is a family matter. Wainer et al. conclude that what in some cultures is a reflection of tradition and established practice is, in others, deemed to be financial abuse. Urban English speaking respondents said they used professionals for help with money and asset management, while all other groups in the study relied on their children. The study showed that measures to promote financial safety require responsiveness to variations in cultural values about money and ageing and recognition of the fact that culture frames intergenerational responsibilities.

Setterlund et al (2007) see FEA as an opportunistic crime and use the ‘routine activities theory’ to explain why it occurs in families and care-giving situations in the context of everyday activities. These may include the management of older people’s financial affairs, from everyday shopping to substantial investments, which is common within families. Abuse may occur when family members are unable to adapt to changing roles, and imbalances develop in previously equitable relationships.

Added to these opportunities is a possible sense of entitlement on the part of family members. This is based on the abusers’ belief that, as they will or should inherit an asset eventually, they might as well get the benefit sooner rather than later – so-called ‘inheritance impatience’. There may be a fine line between coercion and genuine willingness on the part of older people to help out family members. Family members may also seek to protect a perceived inheritance by not incurring expenses (for example residential care or home maintenance) even though these are necessary for the health and well-being of the older person.

As well as entitlement to inheritance, family abusers may feel that they are entitled to reimbursement for care-giving. In some cases there may even be an element of ‘settling old scores’, where family members have been abused in the past by people who are now vulnerable themselves (BFSo 2007). An element of blackmail may be present. Examples are quoted in the Families Commission report (Peri et al. 2008) where older people were threatened with not seeing their grandchildren if they did not provide money or property. In other cases companionship or assistance may be withheld.

In some families one member making unilateral financial decisions may be a long established pattern and satisfactory to all, but this can easily evolve into abuse. When is it reasonable to influence another’s decisions and when does this become undue influence?

FEA may be triggered by the perpetrator’s problems, such as financial or social stress, gambling problems and drug and alcohol abuse. Sometimes abusers may simply not understand their obligations. For example under a Power of Attorney they are required to act in the best interests of the donor and not for personal benefit; and to keep the donor’s funds and property separate from their own. Often the motive is simply greed (Peri et al. 2007, p.40):

“It was just greed. I had been giving her $50 each week for a lot of years and then when I came in here [residential care] she took everything. She robbed me of my money and sold all my possessions. (Abused female, age group 75–85)”
How does FEA differ from other forms of EA and family violence?

Some commentators suggest that FEA is more opportunistic than other forms of elder abuse, while others argue the opposite, that it is more often planned. Some say that it is motivated by greed, rather than being a result of the interpersonal or situational dynamics that promote other kinds of abuse. Tilse et al. (2005) conceptualise financial elder abuse as at one end of a continuum of familial asset-management practices.

Unlike most other forms of abuse, FEA can be perpetrated remotely as it often requires access only to the assets, not the person (McCawley et al. 2006). FEA may, in some ways, be potentially easier to detect than other forms of elder abuse because financial transactions are often recorded, for example in bank records (Darzins et al. 2009).

On the other hand, there are some analogies with domestic violence (BFSO 2007). Some FEA occurs within relationships characterised by abuse of power and control, as in other forms of domestic violence. When FEA occurs, an older person may fear that telling someone else will lead to the loss of the relationship, possible retaliation, or further loss of independence. They may be reluctant to believe that a trusted person is exploiting them. When the perpetrator is their son or daughter, they may feel shamed by the behaviour. They may not want the abuser to get into trouble, although they do want the abuse to stop. As with other abuse victims, they may fear that they will not be believed.

Incidence of FEA

Differences in definition make it hard to assess the incidence of FEA. It is also clear that FEA, like all other types of elder abuse, is under-recognised and under-reported. There are many reasons for this. Older people may not want to admit that they are being abused by family members, especially if they are dependent on them. They may fear a loss of financial independence, or stigma, or consider that somehow they are themselves to blame. Older people, even without cognitive disability, may be unaware that they are being abused (or do not recognise the actions as abuse).

Some data suggest that FEA is the most commonly reported type of elder abuse, alongside, and often associated with, psychological abuse. Darzins et al. (2009), examining a range of sources, found estimates that FEA may affect up 18% of older people. Most population based assessments of prevalence are lower. O'Keefe et al. (2007) found 0.7% of older people in the UK had experienced FEA during the past year. Prevalence rates of financial abuse experienced since age 65 increased to 1.2% (pp.4-5). A similar study in Ireland (Naughton et al. 2010) found that 1.3% of people aged over 65 had experienced FEA in the previous year.

Although, for the reasons stated, it is extremely difficult to detect or validate trends, it appears that FEA is increasing (MetLife 2011, using material collected through a database of media articles on elder abuse, which included scams and theft). Contextual factors support this, including growth in the older age groups, especially people aged 85 plus, as well as growing numbers of people affected by dementia. It is also clear that, while disparities in income and wealth are increasing, a high proportion of financial assets are held by older people. This is especially the case for mortgage-free home ownership, at a time when
younger people are finding this harder to achieve. At the same time, increased longevity means that inheritance is often delayed.

New Zealand data
Knowledge about FEA in this country relies mainly on service data published by Age Concern New Zealand. As with other forms of elder abuse, lack of consistent collection and reporting of data inhibits the understanding of FEA. Collaboration across government and non-government service providers is vital to improve knowledge and effective responses. Other potential sources of FEA information include Police, Ministry of Justice (the Family Court), the five non-Age Concern EANP Services (listed on page 13), health professionals, Public Trust and other trustee companies.

The 19 Age Concern Elder Abuse and Neglect Prevention (EANP) Services receive up to 1500 referrals a year, of which 500-600 are confirmed as abuse by persons in a relationship of trust with the victim. FEA is the second most frequently reported form of abuse, with up to 50% of cases involving financial abuse, either as the main form, or occurring with another form of abuse. This been a consistent trend since data collection began in 1997.

Table 1: Number of cases where financial abuse is the main form of abuse

<table>
<thead>
<tr>
<th>Year</th>
<th>Financial abuse cases (main form of abuse only)</th>
<th>Total cases confirmed</th>
<th>Financial abuse (main form of abuse only) as % of total cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006/07</td>
<td>138</td>
<td>515</td>
<td>27%</td>
</tr>
<tr>
<td>2007/08</td>
<td>134</td>
<td>518</td>
<td>26%</td>
</tr>
<tr>
<td>2008/09</td>
<td>200</td>
<td>517</td>
<td>39%</td>
</tr>
<tr>
<td>2009/10</td>
<td>194</td>
<td>576</td>
<td>34%</td>
</tr>
<tr>
<td>2010/11</td>
<td>202</td>
<td>583</td>
<td>35%</td>
</tr>
</tbody>
</table>

Table 1 gives data on cases where financial abuse was the main form recorded. Analysing all forms of abuse reported in cases between 2004-2006 (944 cases) reveals the following information (Age Concern New Zealand 2007, p. 31):

- where financial abuse was identified as the main form of abuse, over half of these cases (54%) also included psychological abuse
- where psychological abuse was identified as the main form of abuse, 31% of these cases also included financial abuse
- where physical abuse was identified as the main form of abuse, 22% also included financial abuse
- where active neglect was identified as the main form of abuse, 11% also included financial abuse.

Who are the perpetrators and who are the victims?

Perpetrators
Age Concern data reveals that family members, primarily adult sons and daughters, are the most frequent perpetrators of FEA, as they are for all forms of elder abuse. Recent studies in
the United Kingdom (O'Keefe et al. 2007) and Ireland (McNaughton et al. 2010) give similar findings, also noting that other relatives (excluding spouses), neighbours and acquaintances are more often responsible for FEA than for other forms of elder abuse. The same conclusions appear in Darzins et al.´s extensive review (2009).

**Victims**

Analysis of Age Concern cases from 2004-2006 (944 cases) shows that FEA accounts for an increasing percentage of cases with age for women, peaking at 31% of cases involving women aged 85 plus. Financial abuse is the most prevalent form of abuse for women aged over 90. The trend is less clear for men. The highest percentages of cases involving FEA are in the age group 75-79 (41%) followed by 65-69 (38%). Financial abuse is more common where older people are living with family members (Age Concern New Zealand 2007, pp. 32-34).

The latter finding is inconsistent with international reports. The aforementioned UK and Irish studies found increased incidence of FEA among older people living alone and in poor health. In Ireland, people living in rural locations also reported higher levels of FEA.

Findings on gender differ slightly from the New Zealand situation. Men aged over 80 in the UK and in Ireland experienced FEA more frequently than younger age groups. In Ireland, as in New Zealand, this is also true for women of the same age group. In their review, Darzins et al. (2009) found mixed results on gender. Sometimes women predominated among victims of FEA and sometimes men. Older people who are disabled, socially isolated and dependent appear to be especially susceptible to FEA (Darzins et al. 2009).

**What strategies can help prevent and reduce FEA?**

At the very broadest primary prevention level, much more needs to be done to challenge ageism and negative attitudes to older people and their assets. Primary prevention also includes measures to produce informed and responsive communities through community education programmes and informal services. Policy responses in the form of both public education and specific training for carers, professionals and service providers are also needed. However, while public awareness campaigns may deter some perpetrators, they may be less successful in removing barriers to reporting by older people (Darzins et al. 2009, p. 28).

**Education and awareness**

*Older people themselves*

Older people can protect themselves against FEA by organising their financial affairs well and taking responsibility for them as much as possible; staying informed and knowing where to go for help.

Increasing financial literacy for older people could be a very useful preventive strategy especially if it improves confidence in asset management. The use of internet banking and other online financial transactions highlights the importance of computer literacy as well. There would be limitations, of course, for people who are losing cognitive capacity. In Victoria, a financial literacy training package based on empowerment is available through the Office for Senior Victorians (Wainer et al. 2010a, p.28). In New Zealand, financial literacy
community education resources and workshops appear to prioritise the needs of younger people with few, if any, services tailored specifically to the needs of older people.

Age Concern preventing FEA material reminds older people that they have the right to decide how to spend their money, and that they should not have to go without because of the demands of others. It is not unusual for EANP services to receive referrals about older people whose family members regularly empty their bank account the day payment of national superannuation (NZS) is made (also refer p.10 regarding similar abuse of older people living in residential care). This highlights advantages and disadvantages of NZS. On the positive side is a regular income to prevent poverty. However, this also means that any person seeking to exploit an older person knows full well there is a regular income stream from which they can secure funds for their own use, potentially over many years. There is a simple means to prevent such abuse, notwithstanding interpersonal dynamics: older people could be encouraged not to allow other people to access their bank accounts, and, if this is required for support reasons, to put safeguards in place. As previously noted, increasing financial literacy will also act as a preventive measure.

Knowing where to go for help does not necessarily guarantee access to that help. Reporting abuse may be difficult for older people with limited mobility or cognitive impairment, those whose English is limited, and those who are entirely dependent on family members for support and access to services. It is also possible that older people may not realise that financial abuse is taking place, particularly if information is being withheld from them or bank statements and other mail have been redirected (BFSO 2007).

Role of Families
There is a clear need for educational programmes to increase knowledge of the obligations inherent in managing the finances of older people. This concerns family members, but also service providers.6 The emphasis in such programmes should be that older people are assisted, not just that their finances are managed.

Financial awareness, skills and probity are needed for all who help older people to manage their financial assets. Families can be alert for any signs of financial abuse, such as unexplained cash withdrawals, unusual signatures or missing belongings. Family agreements can be used to set out arrangements between older people and their adult children about sharing property, loaning or gifting money, and sometimes about care in return for these. But these are mainly informal and/or verbal and without legal advice, which may limit their usefulness. A Queensland study showed 1 in 4 people had assisted older people in the management of their assets in the past year (Tilse et al. 2002), but that a minority had some kind of formal arrangement; 1.4% had a guardianship order and 15.4% an Enduring Power of Attorney (EPA). Nominee arrangements, where family members are authorised to manage payments and receipts (of pensions, investment income and so on) may be useful with suitable safeguards in place. The PEAS study (Wainer et al. 2010c, p.7) concludes that “supported asset management is a common experience for family members and there is much work to be done to understand the dynamics of this form of care, particularly in multi-cultural societies”.

6The PEAS study points out that, in Australia, police checks relating to murder and assault are instituted for people working with older people, but these do not extend to fraud, extortion, blackmail and robbery.
In the context of family management of the income and assets of older people, there are steps which could be taken to reduce the opportunities for and temptations to perpetrate FEA. Establishing an EPA-property is one important safeguard. The Wellington Community Law Centre and Age Concern New Zealand suggest that appointing two individuals to act jointly in this role may offer greater protection (p. 9). Other steps that can be taken include:

- keeping full records of all transactions and making sure they are accessible
- ensuring that family members understand their responsibilities, including acting under EPAs
- ensuring that family members are aware of the potential for and know about the signs of FEA
- ‘peer mentoring’ schemes in which older people have access to advice from peers trained in financial management so that family asset management can be monitored
- support for family members. Financial management for older people, especially those with cognitive impairment, can be onerous and time-consuming.

Strategies which assist in developing strong and respectful families, alongside support for family caregivers, may also act as a preventive factor for FEA (Peri et al. 2008).

**Service providers**

There is some evidence that educational programmes for health and financial professionals are beneficial. Measures to increase awareness of FEA can help build professional knowledge and capability among case managers, GPs, police, residential care workers, solicitors, social workers and nurses. This also applies to the staff of banks, legal firms, insurance, loan and investment companies. 7

Banks and other financial services are well placed to contribute to the prevention of FEA by educating their clients, formulating policies to respond to suspected FEA, training their personnel, and working with other disciplines such as police, social work and health services. Since 2007, banks, trust companies and other financial institutions in California have been required by law to report suspected elder financial abuse to Adult Protective Services, the state agency responsible for investigating and intervening in abuse of vulnerable adults. New Zealand banks often deal with older customers on a regular basis and get to know them well. They are in a position to track ‘unusual’ activity in accounts and to prevent or intervene in such instances. The challenge here is to balance the bank’s ability to monitor and intervene when fraud is apparent against the individual's right to privacy and self-determination. The New Zealand Bankers Association has developed voluntary guidelines to assist banks to meet the needs of older and disabled customers. 8 These guidelines recommend banks ensure staff training includes “the ability to recognise signs of potential financial abuse while being sensitive to customers’ situations and wishes” (5.1 (d)) and “develop internal procedures to deal with possible financial abuse of older and disabled customers” (5.2).

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7 The New Dynamics of Ageing programme in the U.K. includes a study led by Mary Gilhooly which examines decision making in detecting and preventing FEA by managers and professionals in health, social care and banking. This is reported on in NDA Findings, no.7. August 2011.

These types of protection should, of course, be extended to all bank customers. If this were the case and guidelines for customer protection were widely adopted across all age groups, then this could lead to FEA being taken more seriously.

Some residential care facilities in New Zealand offer residents a managed account in which Work and Income can deposit their personal allowance from NZ Superannuation so as to protect it from abuse by family members or others. A project aimed at extending this service throughout the residential care sector is currently underway. To prevent FEA by their staff, residential care facilities could require prospective staff to complete police checks for offences of a financial nature, and ensure induction training includes an understanding of what constitutes ethical conduct.

Service providers who are well known to older people and/or who work in their homes (home support providers and befriending services, GPs and pharmacists for example) also have opportunities to notice possible FEA. These providers could be encouraged to look for warning signs and take appropriate action when these are apparent.9 Signs of potential FEA that a visitor to an older person's home may notice include:

- lack of food, clothing or utilities
- recent, new acquaintances, who may take up residence with the older person
- the older person is not cared for or the residence is unkempt when arrangements have been made for providing personal care or home maintenance services
- the older person expresses fear of eviction or institutionalisation if they do not acquiesce to others’ demands
- mail doesn’t appear to be arriving
- services have been paid for but haven’t been received
- prescriptions are unfilled.

**Better consumer protection**

Instances of financial abuse against older people show that some have been taken in by professional advisers. This emphasises the importance of moves to improve consumer protection in addition to consumer education. Older people may be vulnerable to ‘hard sell’ and bemused by technical complexity. Their values, such as respect for ‘authority’, may hold them back from asking questions and asserting their rights as consumers.

In addition to preventing FEA by educating their staff, legal and financial service organisations can take steps to improve the quality of information provided to investors and their understanding of financial products and services. These include (Ministry of Economic Development 2009):

- addressing information asymmetries between advisers and their clients
- providing information which will allow consumers to compare advisers and the services they are offering
- checking that consumers understand the products and processes being offered
- keeping full records of all transactions and making sure they are accessible

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9 The Home and Community Support Sector Standards (draft in consultation) include requirements for ensuring safety of consumers’ property and finances, that there are policies and procedures to prevent abuse or neglect of consumers and for reporting elder abuse.
- electronic monitoring by the financial institutions to detect unusual transactions
- ensuring that all information is presented in plain language which is easy for non-specialists to understand
- ensuring that consumers know how to make a complaint and are fully informed of their rights
- enabling access to affordable financial and legal advice
- providing clear information on the credentials and ‘track record’ of financial advisers and also on fee structures, remuneration and potential conflicts of interest.

**Government action**

Government could contribute to primary prevention of FEA through campaigns and public awareness initiatives which target ageist attitudes and behaviours. Goal 8 of the *New Zealand Positive Ageing Strategy* (2001) is: “People of all ages have positive attitudes to ageing and older people”. Goal 9 is “Elimination of ageism and the promotion of flexible work options”.\(^{10}\) There is further support in the *Carers’ Strategy* and *Te Rito New Zealand Family Violence Strategy*. Increasing the visibility of older people throughout the *It’s not OK* campaign would also recognise older people as victims as well as perpetrators of family violence, as community and family/whānau leaders and role models for change.

The PEAS study (Darzins et al. 2009) highlights a risk of 'ageing in place' policies where increasingly frail older people are cared for at home, making them vulnerable to social isolation and increased risk of FEA. “If the push to keep [them] at home is to continue then strategies need to be implemented that can prevent them from becoming isolated and therefore more vulnerable to being abused by those who are supposed to be caring for them” (ibid., p. 17).

**Legal protection**

Whether older people require special protection against FEA, over and above what is available to everyone, is a controversial question. Some countries have legislation to protect all adults unable to make their own decisions because of mental or physical disability or other causes, which can be invoked in situations of FEA. This gives statutory agencies the necessary powers to investigate and intervene in abusive situations and sends a message to abusers that their behaviour is unacceptable to society and will incur legal penalties.\(^{11}\) Further safeguards may be included in family and inheritance law. An example of such a safeguard in New Zealand is the Protection of Personal and Property Rights (PPPR) Act 1988.

An enduring power of attorney - property (EPA) is a legal mechanism for the management of income and assets by a third party. A person can choose to have their attorney take over their affairs when they become incapable of doing this themselves, or at any time before that.\(^{12}\)

While this is intended to support the well-being of an older person, it is sometimes misused.


\(^{11}\)Other examples of legislation which could provide protection against FEA include the Elder Justice Act in the USA (MetLife 2011).

\(^{12}\)EPA-personal care and welfare can only be activated when the donor is assessed by a relevant health practitioner as mentally incapable.
The PPPR Act 1988 was amended in 2008 in response to concerns about the financial abuse of older people through the misuse of EPAs (Office for Senior Citizens 2007). This amendment strengthens legislative safeguards and protections by:

- requiring the donor and their nominated attorney to seek independent legal advice when the EPA is established
- strengthening witnessing requirements
- introducing a presumption of competence
- providing clearer direction for the suspension and revocation of EPAs
- providing a clearer definition of mentally incapable in relation to personal care and welfare EPAs
- requiring certification that the donor is mentally incapable before personal care and welfare attorneys can act, or property attorneys, if so stated on the EPA
- introducing new duties on attorneys to consult with donors and anyone else named in the EPA, to act in donors’ interests, and to encourage the donor’s capability
- requiring property attorneys to keep records
- providing easier access to the courts for people who may have concerns about an attorney’s actions.

One unintended consequence of these changes has been increased cost in creating an EPA. Anecdotal reports from agencies working with older people suggest fewer people are now making an EPA. This raises the potential for future challenges including increased applications to the Family Court to appoint property managers, and increased work for trustee companies when there is no family member able to take on that role.

**How can FEA be dealt with when it occurs?**

Effective preventive action on FEA is clearly the best approach, as once it is recognised irreplaceable assets may already have been lost. But once FEA has been detected, what action can be taken and by whom? Should FEA be considered a social service or a criminal justice problem?

**Mandatory reporting**

Mandatory reporting of elder abuse (of all types) is in place in the USA, four provinces of Canada, Israel and South Africa, but its effectiveness remains contentious. Mandatory notification systems may produce better information on the incidence of abuse and better case management. This system can also act as an aid to raising public awareness of the problem. However, there is little evidence that mandatory reporting is more effective than voluntary systems and it denies the right of older people to make their own decisions (Darzins et al. 2009, p. 27).

Mandatory reporting and legislative protection for vulnerable older people are related issues which have surfaced periodically in New Zealand since the early 1980s. Mandatory reporting

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14 In 2007, Victoria, Australia introduced mandatory reporting by residential care facilities of physical or sexual abuse of residents. The same legislation established the role of Aged Care Commissioner.
usually applies to specified professionals - for FEA examples could be banking personnel, financial advisors and lawyers. As with child abuse, there are mixed views on whether or not mandatory reporting would improve outcomes for victims and their families/whānau. The implementation of mandatory reporting for FEA would require a statutory authority to act upon reports made.

Role of Banks

Banks are the financial institutions most likely to be used by older people. People working in the banking industry are often the first to suspect or detect FEA by identifying suspicious transactions. But this may put staff in a difficult position. They are often reluctant to become involved in family financial disputes. A key concern is the confidentiality of transactions between the bank and the client. A financial institution which discloses a customer’s personal information to a third party may be in breach of legal or ethical requirements. Thus banks are reluctant to report suspicious transactions for fear of violating obligations of privacy. If allegations made in reports by the bank are found to be false, they may face legal action for defamation (Edmonds and Noble 2008).

Should mandatory reporting over-ride privacy requirements in banking or similar contexts and should there be some protections for reporters (including their employers) from liability for disclosures? One method to address such concerns is to use a combination of prior written consent to monitoring of accounts, voluntary reporting and immunity provisions. Banks have liabilities for credit cards and consequently these are more heavily monitored, possibly providing a model for dealing with FEA.

The response of the banking industry to FEA is described as highly variable at present and it is criticised for being over or under regulatory. But there a range of actions which can be taken, some preventive and some remedial.

Appropriate training for all bank staff would allow them to recognise the signs of abuse, the common profile of a vulnerable customer and/or potential abusers. The banks could then set up protocols to deal with suspected abuse, for example, ensuring that older people are interviewed separately and in private, away from people who may be perpetrators. The Victorian Banking and Financial Ombudsmen (BFSO) bulletin of 2007 lists ‘red flags’ which may indicate to bank staff that FEA is occurring. Many of these could apply to staff in other institutions. An older person may:

- be accompanied by a new acquaintance to make a large or unusual withdrawal of cash
- be accompanied by a family member or other person who seems to coerce them into making transactions
- not be allowed to speak for themselves/the other party does all the talking
- start to appear fearful (particularly of the person accompanying them) or withdrawn
- have withdrawal slips presented by a third party, with their signature on it but the rest of the slip filled out in a different handwriting
- not understand or be aware of recently completed transactions
- appear confused about what they are doing with their money
- engage in bank activity that is inconsistent with their ability, such as apparent use of an ATM card despite the fact that they are housebound or in hospital
engage in bank activity that is unusual, erratic or uncharacteristic
have unpaid bills that they should be able to afford to pay – e.g. complain of having no heating despite the fact that they can afford to have it, or that they are being evicted
be concerned about missing funds or banking related documents
indicate that mail is no longer being delivered to their home.

Specialised Elder Abuse and Neglect Services

Helplines
Free telephone helplines can be useful in community education, answering general questions and providing people with self-help information. They can also offer referral, advocacy, support and legal services. Seniors Rights Victoria has a helpline dealing with all types of elder abuse, launched in 2008 (Wainer et al. 2010a, p.29). Similarly, in the United Kingdom and Ireland, Action on Elder Abuse operates a national free phone helpline providing “information on the nature of elder abuse and … what action might be taken in response to abuse or to prevent it”.15 This helpline does not provide legal advice. In Australia, Centrelink provides a financial information service through a telephone link, interviews and community seminars. Could this type of service be available for NZS recipients? In New Zealand the 0800 Family Violence information line “provides self-help information and connects people to services where appropriate”, working with all forms of family violence.16

Multidisciplinary financial abuse specialist teams
Given the complex nature of FEA, a mix of skills may be required to deal with it. Multidisciplinary teams operate in California and seem effective, although they are expensive, with some difficulties of management (MetLife 2009). A ‘lead’ professional may be required to provide coordination (Clare et al. 2011, p. 89).

New Zealand services
Elder Abuse and Neglect Prevention (EANP) Services in New Zealand undertake awareness-raising and education as primary prevention activities. They also investigate and assess referrals about suspected abuse and co-ordinate multi-disciplinary services to meet the needs of older people (and their families/whānau where appropriate) (Age Concern New Zealand, 2007, p. 20).17 The Ministry of Social Development administers service contracts for EANP services throughout New Zealand. The providers are:

- Age Concern – the largest service provider, with national co-coordination responsibilities
- Family Works South Canterbury (Presbyterian Support Services)
- Te Hauora Pou Heretanga (a service of Tui Ora Ltd), in Taranaki
- TOA Pacific, in Auckland
- Te Oranga Kaumātua Kuia Disability Support Services Trust, also in Auckland
- Buller REAP (Rural Education Activities Programme), in Westport.

Age Concern New Zealand provides information and guidance on its website about older people’s rights, strategies to keep safe, maintaining independence and control over personal

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17 EANP Coordinators also provide services directly, as a component of the multi-disciplinary response.
affairs, future planning, where to get support, etc. The aim is to empower older people to help themselves. Age Concern also provides education resources for those working with older people. In 2006, Age Concern developed a range of resources to support an ongoing Preventing Financial Abuse campaign, with support from the Retirement Commission18 and Bank of New Zealand. An update of this material and development of education resources for EANP staff to use with banks, budget services and other financial service providers is planned for 2012.

Legal and quasi-legal measures

The Protection of Property and Personal Rights Act and other Family law

As previously noted, concerns about elder abuse led to the tightening of legislation governing EPA in New Zealand in 2008 (the PPPR Act). The new rules require people to seek independent legal advice before making an EPA and are intended to make attorneys more accountable. Studies in Australia found, however, that having an EPA does not guarantee safety. Many older people have limited understanding of EPA processes and are more likely to allow family members to manage their affairs informally. In Australia, as in New Zealand, there have been calls for a country wide registration of EPAs along with a system of auditing and also for a nationally consistent approach to assessment of mental capacity (Clare et al. 2011, p.53).

When there is concern that a property attorney is abusing this role and the older person is not mentally capable, application can be made to the Family Court for review of the attorney's actions. The list of people who may do this, as stipulated by the Act (s103), include: a social worker;19 a medical practitioner; a relative or another attorney of the donor; the manager of a hospital or residential care facility in which the older person is currently resident; a welfare guardian; a trustee corporation; a government approved elder abuse and neglect prevention service provider; and any other person the Court approves. If the Court is not satisfied that the attorney has been acting in the best interests of the older person, they can revoke the EPA and appoint a property manager.

Provisions of the Domestic Violence Act 1995 may also apply in situations of FEA between people in a domestic relationship. It is not known whether such action has ever been taken, but, given the low use of this legislation by older people, it is unlikely.

Using the criminal justice system

Anecdotal reports from EANP services suggest that older people tend not to access the criminal justice system to address elder abuse and neglect. This behaviour is consistent with international reports.20 Reluctance to lay charges may be due to shame or fear of the consequences of conviction for their family member. In some situations, the older person's health may inhibit their reliability as a witness, or their ability to participate in court proceedings. Successful convictions for theft which has occurred within the definition of FEA, have occurred. A sample of convictions reported in New Zealand newspapers between January 2007 and July 2010 reveal three cases of a carer stealing from a client, one of a

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18 On 6 October 2011 the Retirement Commission became known as the Commission for Financial Literacy and Retirement Income.
19 The definitions section limits this to social workers employed by Child, Youth and Family (authors’ interpretation).
neighbour befriending an older person and using the relationship to steal, two cases of grandchildren convicted for theft, one of a son, and two convictions of theft from an unidentified relative.

Although criminalisation may lead to better reporting and punishment of FEA, there are arguments against it. Legal action is costly and the problem may be more deep-seated than legal remedies can address. The BFSO bulletin (2007) identifies a ‘grey area’ where what is occurring may be improper rather than illegal; where the act or omission may not be deliberately abusive or malicious; or where a relationship of trust or dependence may cloud the question of consent. Criminal redress is not likely to be effective when FEA is seen as family issue.

Use of civil law and civil court proceedings
Another legal option for dealing with FEA is to take a civil case, or, for amounts less than $20,000, the Disputes Tribunal. Civil proceedings are for disputes between individuals which do not involve criminal action (for example, disputes over business contracts or debts) and which the parties have not been able to resolve in other way, or in which one party wishes to recover money they believe is owed to them. Although it is possible to represent oneself in a civil claim, some older people will be reluctant or unable to do this. The cost of filing a claim (over $1,000), of securing legal representation, and the time and stress involved with court action, may pose insurmountable barriers for older victims. Community Law Centres can provide advice on whether to make use of civil court proceedings. Civil legal aid may also be available in certain circumstances.

Alternative dispute resolution
Alternative dispute resolution (ADR) involves a range of processes that avoid the adversarial processes of a formal court of law. It includes mediation, arbitration, negotiation (with or without assistance from a third party), conciliation, pre-trial conferences, and case presentations. Negotiation and mediation are the most common ADR processes used in New Zealand. The purpose of ADR is to achieve a voluntary agreement (avoiding the need to go to court), or an agreement which can then be formalised by a court.

ADR, primarily mediation, has been used to resolve family related disputes in New Zealand (Saville-Smith and Fraser 2004, p.15) and there is potential for it to be used in situations of FEA. Mediation, however, is often inappropriate in situations where there is power imbalance between the parties, as occurs in domestic violence situations. Restorative justice processes are likely to be more effective and safe for the victim in such circumstances.

Restorative justice
Restorative justice is a voluntary process for resolving crime that focuses on redressing the harm done to victims, while holding offenders to account. It does this primarily through a restorative justice conference between the victim and the offender. Both the victim and offender must agree to participate, and the offender must admit responsibility for the crime before the restorative justice process can commence. "While there is no standardised

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process, often an agreement will result from the conference which includes certain actions or activities to be completed by the offender as part of taking responsibility for the offending or responding to some of the underlying causes of this offending”.24

Restorative justice processes can occur at three different stages of the criminal justice process: before conviction, before sentencing and during the sentence (on parole or as part of re-integration back into the community). Ministry of Justice contracts with 24 community based restorative justice service providers who facilitate the process with victims and offenders.25 26 A restorative justice conference is usually attended by the offender, the victim or their representatives, support people (family members and/or advocates like Age Concern), police officers, probation officers and victim support. A report on the conference agreement is provided to the victim, offender and the Judge.

Restorative justice processes are being used in appropriate elder abuse cases in Ontario, Canada, with some indications of success (Groh 2003). The Restorative Justice Approaches to Elder Abuse Project aims to decrease the fear of older adults and increase the community's ability to respond to elder abuse by providing a safe environment to address the abuse in a way that is fair and just for everyone (ibid., p. 1). Quoting Poirier, Groh argues: “Since in the most cases older persons want not to punish their children, but rather to recover their property or reach an amicable understanding with their children, the use of these provisions...should be encouraged” (ibid.).

**Formal advocates or defenders**

Wainer et al. (2010a) mentions a financial ombudsman in Victoria and the State Trustees who work with older people and families (p. 24). The Office of the Public Advocate in Western Australia, South Australia and Victoria are independent statutory bodies appointed to promote the rights, dignity and autonomy of people with decision-making disabilities and to reduce their risk of neglect, exploitation and abuse. 27 The office investigates complaints and allegations from public.

Home and Community Care (HACC) services in Australia can include financial matters when assessing people for care. The Department of Health, Aged Care Branch has practice guidelines for health service and community agencies to respond to and address suspicions or allegations of EA. Social workers in hospitals in Victoria may record concerns about FEA in their case histories. The Ministry of Health’s Family Violence Intervention Guidelines: Elder Abuse and Neglect offer similar guidance to health professionals in New Zealand.

The Health and Disability Commission (HDC) was established in New Zealand in 1994 to promote and protect the rights of health and disability services consumers, and to facilitate the fair and efficient resolution of complaints. The Code of Health and Disability Services Consumers’ Rights sets out ten rights, including “the right to be treated with respect, to be free from discrimination or exploitation, to dignity and independence, to services of an

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27The relevant legislation in each state is: in Western Australia, the Guardianship and Administration Act 1990; in Victoria, the Guardianship and Administration Act 1986; in South Australia, the Guardianship and Administration Act 1993.
appropriate standard, to give informed consent, and to complain”. Complaints about financial exploitation of consumers by health and disability service providers have been received and investigated by the HDC; reports are available about three such complaints since 2008 - two complaints of financial exploitation by one residential care facility (08HDC08672 and 08HDC10236) and one complaint of financial exploitation by a community health coordinator (09HDC01375).

A range of professional bodies (for example lawyers, real estate agents, financial advisers, nurses, social workers) have disciplinary processes used in response to complaints or breaches of standards. These processes may be applied in addition to other consumer complaints mechanisms like the HDC. Sanctions vary across the professions and at the extreme, can include exclusion from future membership of that profession.

Summary and Conclusion

Common findings on FEA

Any attempt to estimate the incidence of FEA and hence its overall impacts, especially in financial terms, must bear in mind the difficulties of definition and measurement which have been outlined earlier, plus the lack of standardisation in data recording from country to country. However, some common threads have emerged from the discussion. Studies generally conclude that the older people who are especially susceptible to financial abuse are those who are living alone, especially those aged over 80, women, and those in poor physical and mental health (therefore requiring assistance). Other risk factors, at the individual level, are social isolation and loneliness, being dependent on a potential abuser, and low levels of financial literacy (Peri et al. 2008, pp.62-65). At the wider level, a history of family violence, current family stress and/or gambling or addiction problems may put older people at risk.

Being assertive, having good coping strategies and being educated about financial matters and personal rights are the corresponding protective factors for older people. Supportive families and peer networks will also help in avoiding FEA. But the ability of families to be supportive can be threatened by financial stress and the pressures of care giving.

Social connectedness will help to protect older people living in the community against FEA and will give them avenues from which to seek help. In residential care settings, good monitoring systems and staff training, along with a culture of respect, are additional protective factors.

Data in studies of FEA in New Zealand and beyond agree that most of the perpetrators of FEA are family members, especially adult sons, and daughters to a lesser extent, and their partners. These are the people who have the opportunities and perhaps also a sense of entitlement. But FEA may also be carried out by financial advisers, solicitors and by paid carers in the home or in residential care. Less commonly, the abusers may be opportunistic strangers who ‘befriend’ older people. Financial exploitation may be perpetrated by unscrupulous sales and trades people or people who make contact through a scam. Technological change, with greater use of on-line services may increase this type of opportunity for FEA. Initiatives to detect FEA, to prevent it and to deal with it when it does

occur will vary according to these different circumstances and groups of perpetrators. FEA is much more difficult to detect and regulate when it happens within families, but there are also challenges in the care and service sectors.

Although there is much debate about the definition of FEA, the PEAS study (Wainer et al. 2010a, p.24) consulted with a range of agencies in Western Australia, and brought together the key elements, in their view, of FEA:

- It causes significant harm.
- There is clear intent.
- It is opportunistic.
- It involves a relationship of trust.
- It is not in the best interests of and against expressed wishes of the older people involved.

**Policy relevance of FEA**

The discussion has shown that FEA impinges on human rights and so is relevant to policy in the public, private and voluntary sectors. Policies to combat ageism and encourage respect for older people, subscribed to by many governments, call for public education and specific training for public sector staff (especially case managers) and service providers – GPs, police, residential care staff, social workers, nurses and other health professionals. Education needs to be extended to the commercial and professional sectors - building knowledge of FEA and capability in challenging and combating it among solicitors, staff of banks, legal firms, insurance, loan and investment companies. Some education and awareness activity is undertaken now by a range of organisations (Elder Abuse and Neglect Prevention Services, Public Trust, Retirement Commission, for example) but lack of capacity and resources limit their reach.

Action around FEA is relevant to policy on domestic violence. There are, however, arguments both for and against seeing FEA only as an aspect of domestic violence.

The New Zealand government has moved recently to improve consumer protection in financial markets and financial services, through regulation and the promotion of ethical behaviour. This should help to prevent FEA and white collar crime against people of all ages. Policy in this area needs to ensure that information for consumers is clear and accessible, and that complaints procedures are user-friendly. Vigilance is required to keep up with emergent frauds and scams and to ensure that EPA procedures, family and inheritance law protect older people.

**Combating FEA**

Many difficulties surround efforts to combat FEA - problems of definition, assessment of incidence, and designing different initiatives for different circumstances. Effective responses also require understanding of and sensitivity to cultural differences. While the greater part of FEA occurs within families, it is also found in the public, private and voluntary sectors.

The number of older people experiencing or vulnerable to FEA appears to be increasing, and this may not solely be due to population ageing. Opportunities for FEA may be growing as greater numbers of older people are surviving to late old age, when they may have physical
and cognitive disabilities. The economic pressures on families and the demands of paid work are growing, contributing to the allure of assets in the hands of older relatives. These pressures also make family caring more stressful, especially for the so-called ‘sandwich’ generation.

We agree with the Families Commission that no single response will be sufficient to tackle the complex issue of elder abuse, and financial abuse in particular, and that cross-sector, multi-disciplinary approaches are required. A sustained, long-term commitment to improving societal attitudes towards ageing and older people and to promoting public awareness of the issues must be a major focus. Clearly, a great deal of public education and awareness-raising is needed, including education and information for older people themselves. This calls for something similar to the It’s not OK campaign against family violence, but aimed at combating ageism and promoting respect for older people.

Higher levels of financial capability and self confidence would help older people to avoid abuse and retain their financial independence. Increased awareness of and accessibility to education for family members who are managing relatives’ finances would also be beneficial. Extension of current measures to tackle social isolation among older people (like Age Concern’s Accredited Visiting Service) and to provide support and assistance, including easier access to legal services, would also have a preventive effect, as well as contributing to general well-being.

This review has suggested several initiatives to deal with FEA. Banks, financial services and other services providers can develop protocols to apply when FEA is detected. Professional sanctions may be applicable in some cases. Specialised services, help lines and multidisciplinary teams have been used in other countries. Formal advocates, such as the New Zealand Health and Disability Commissioner may have a role. Mandatory reporting of FEA is contentious, as it is for other types of family violence. A range of formal legal and quasi legal processes are available, but the criminal justice system and even civil proceedings may not be appropriate and are costly. Adversarial approaches are probably best avoided, although there could be some potential in voluntary restorative justice processes. Many of these measures have not been robustly evaluated in the FEA context. They need to be closely examined for their applicability to New Zealand, taking into account different social contexts and policy settings.

Variable responses and inadequate coordination between government agencies, NGOs and other service providers in New Zealand inhibit the development of effective prevention and intervention strategies. This paper has raised numerous questions which remain unanswered. Some of these are listed below.

Responses are required at the primary prevention level - to influence general social, cultural, and individual attitudes and behaviours to prevent FEA from happening; at the secondary prevention level - targeted at older people who are at risk of FEA; and at the tertiary level - providing support, reducing harm, and preventing more abuse after FEA has occurred. To combat a multi-dimensional problem like FEA, a multi-faceted response is required. We hope that this paper will promote discussion, as a step towards policies to ensure the elimination of financial elder abuse.
Questions for discussion

1. Should financial crimes perpetrated by strangers be included:
   a. in data collection about FEA?
   b. in community education about preventing FEA?

2. Should intervention services focus only on the needs of vulnerable older people? Should they focus on the needs of vulnerable adults of any age? How would ‘vulnerable’ be defined?

3. Financial literacy programmes generally target young people. Should they be also directed to older people? How could this be resourced?

4. How can knowledge about EPA be more widely dispersed?

5. What more can be done to prevent and reduce FEA by:
   a. Banks?
   b. Financial services?
   c. Health professionals?
   d. Home support providers?
   e. Police?
   f. Helplines?

6. How can we change ageist attitudes?

7. Should we have mandatory reporting of FEA:
   a. at all?
   b. limited to specific bodies, or specific situations?

8. New Zealand uses an empowerment model in both prevention and intervention of elder abuse. Is this the most effective model for FEA?

9. How can awareness be increased across different ethnic communities? Does it need to be? What else needs to be considered?
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