Governmental Action Plan to Counter MISTREATMENT of Older Adults 2017 2022

ENSEMBLE on fait avancer le Québec

Québec

Production

Ministère de la Famille – Secrétariat aux aînés

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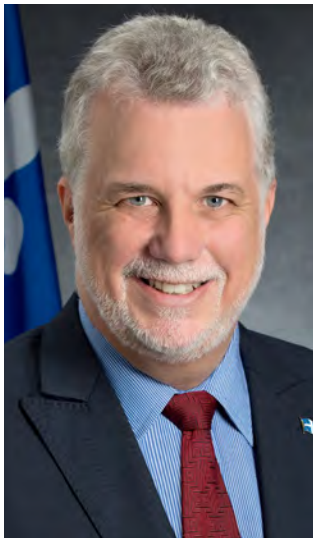
MESSAGE

Message from the Premier



Premier of Québec

Philippe Couillard

The mistreatment of older adults can take a variety of forms and occur in all settings. It is often overlooked or not recognized. Whether the mistreatment of older adults is intentional or not, it has consequences that can be devastating to the people subjected to it.

This is why it is important that we continue to deepen our knowledge of the subject and improve our ways of responding. Over the years, our government has taken many steps to combat this unfortunate phenomenon. With our second action plan, we are going even further in fulfilling our commitment to prevent and act against mistreatment, in addition to fostering well-treatment, a complementary lever in such an important struggle.

Thus, with this new plan, we will be able to rapidly detect situations of mistreatment and provide appropriate interventions for people suffering abuse in all walks of life. We will also facilitate disclosure. We want to ensure that everything is in place so that seniors can put an end to the mistreatment they encounter and will be supported in doing so.

Let us continue to work together so that the elderly, who have shaped the Québec we know today, may live and thrive in this society in complete safety.

MESSAGE

Message from the Minister responsible for Seniors and Anti-Bullying

Minister responsible for Seniors and Anti-Bullying

Francine Charbonneau

I have had the opportunity to work with seniors from all areas of life and from all over Québec since becoming Minister responsible for Seniors. Each time, these special moments allow me to see that every senior is unique due to their origins or path in life. This diversity, like that of citizens of all ages, is a source of richness for Québec.

Out of respect for what these seniors have accomplished and for what they are still achieving, we have a duty to ensure their well-being and safety. That is why I am determined to continue working with our government's partners to ensure that in Québec no form of mistreatment of older adults, violence or neglect will be tolerated. The dignity, health and safety of seniors in Québec are priorities for our government.

This second governmental action plan to counter mistreatment of older adults for the years 2017-2022 will allow us to go even further. In particular, it will make it easier to detect situations of mistreatment and intervene on behalf of those enduring it.

As well, material or financial mistreatment is a particularly important concern, since it is the most frequently reported type of abuse, along with psychological mistreatment. This form of exploitation can have adverse effects on the physical and psychological health of those who experience it. Specific actions will therefore be taken to combat it.

In parallel with the fight against mistreatment, actions are also planned to promote a culture of well-treatment. We will encourage the further development of existing behaviours of this kind among professionals or caregivers, family members, informal caregivers and volunteers who work with or spend time with seniors on a regular basis.

This action plan, with its 52 measures and numerous tools and references, will enable you to participate actively in the fight against older adults mistreatment in all its forms and in all areas of life. Concerted and joint efforts will help to better protect vulnerable people and to build a more respectful society in which everyone can grow old with dignity.

Acknowledgements

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Introduction

The first Governmental Action Plan to Counter Elder Abuse grew out of public consultations on the living conditions of older adults that took place in 2007. The testimonies of the approximately 4,000[1] citizens of all ages and of groups and organizations sensitive to the living conditions of seniors, highlighted the need for government action to address the abuse and maltreatement of older adults.[2] Many recommendations were also made to achieve this, including breaking the silence on situations of abuse and mistreatment, changing certain attitudes in order to detect situations of potential mistreatment and abuse, and providing better support.[3]

Through the deployment of a second action plan, the Government of Québec is reiterating its commitment to respond to the public's concerns by continuing to combat the mistreatment of older adults in all environments and encouraging positive treatment behaviours, thus laying the foundation for a more just, inclusive, healthy and safe society.

Today, the government is stronger as a result of the gains of the past few years. The deployment of the measures included in the Governmental Action Plan to Counter Elder Abuse 2010-2015 , renewed until 2017, helped achieve the following three main objectives:

- Publicize and acknowledge the phenomenon of abuse perpetrated by the elderly themselves, by relatives, those taking care of them and the general public;
- Reinforce the consistency and complementarity of actions carried out by the partners from various sectors;
- Improve knowledge about the phenomenon of abuse.

The achievement of these objectives has enabled a substantial increase in knowledge of this phenomenon through the creation of a research chair devoted entirely to this issue. In addition, the actions covered by the plan have also made it possible to ensure better coordination and harmonization of initiatives, in particular by setting up a team of regional coordinators specializing in the fight against the mistreatment of older adults. The setting up of a province-wide Elder Mistreatment Helpline, known as the Ligne Aide Abus Aînés (Ligne AAA), has contributed to a general improvement in the array of services.

In response to the satisfactory results and the structuring effects they have had, the Research Chair on Older Adults Mistreatment, as well as the Helpline and the team of regional coordinators are all still in place in the Action Plan 2017-2022.

While the Action Plan 2017-2022 reflects significant advances in our knowledge, as well as better coordination of actions and improved provision of services, the work must go on. In particular, more effort must be devoted to developing knowledge about how mistreatment is experienced differently by women and men. Specific attention will be given to mistreatment experienced by women or men; by ethnocultural, aboriginal, lesbian, gay, bisexual or transgender (LGBT) minorities; and by those who are disabled or unable to work. Few studies have documented these specific issues. Some Action Plan measures will fill these gaps by applying, for example, the concepts of gender-based analysis (GBA). The characteristics of these different social groups will be documented and the cross-discriminations they may experience will be taken into account. The well-treatment approach, a new factor introduced in the Action Plan 2017-2022 and presented as a complementary protective factor in countering mistreatment, will also be well represented in the research carried out during the five years of the action plan and will take gender-sensitive analysis into account. In addition, in this new plan, special attention will be paid to financial mistreatment, as this type of mistreatment is the most commonly reported (32.7% of the situations of material/financial mistreatment received at the Elder Mistreatment Helpline and referral line concern physical or financial mistreatment[2]). Twelve new measures will focus more closely on this type of mistreatment, i.e. slightly more than 20% of all 52 measures included in the action plan.

A forum focusing exclusively on financial and material mistreatment will be held within 18 months of the launch of the 2017-2022 action plan, and other measures will be taken to raise awareness, inform, train and provide tools for stakeholders in the financial sector. These initiatives will be in addition to the new levers provided by *An Act to combat maltreatment of seniors and other persons of full age in vulnerable situations* adopted May 30, 2017.

The prevalence of mistreatment is also difficult to document for various reasons. In many cases, mistreated older adults are reluctant to call themselves victims of mistreatment. In some situations they are isolated and difficult to reach, while in others they are vulnerable or still want to preserve the bond that unites them to the person who mistreates them. Some of our actions will therefore be devoted to advancing our knowledge, to learning more about issues that are specific to certain seniors and to the prevalence of mistreatment in Québec, but also to concepts of well-treatment and best practices that can help prevent abuse.

The Québec population in general, and also the various stakeholders concerned, are now more aware of the mistreatment of older adults. As with other social issues, such as intimate partner violence, advocacy efforts need to be sustained over time so they can become incorporated into behaviours and mentalities. By frequently invoking the fight against older adults mistreatment in the public arena and by promoting positive behaviours, the Government of Québec is urging the population to rally around this issue, and even to some extent, rethink their own actions in order to contribute actively to a society that is more respectful of seniors, more inclusive and free from violence.

A better understanding and greater awareness will improve the detection of situations of mistreatment and, as a result, lead to interventions that will put an end to them as quickly as possible, while respecting the tolerance for change and the wishes of the mistreated older adult. The senior's autonomy must be respected during such interventions, and their degree of vulnerability and need for protection must be taken into account. Maintaining this fragile balance between protection and respect for rights necessarily requires a broad understanding of the underlying dynamics (e.g., family conflicts, dependency relationships, etc.) in which the mistreatment occurs. This balance must also be founded on a sound knowledge of the aspects of law that apply, but above all on a relationship of trust and openness between the mistreated older adult and the various intervening parties. It is also important to avoid dispossessing older adults of their options and ability to choose what is best for them. To achieve this, the various individuals dealing with the mistreatment must be trained and equipped to act appropriately.

2. For calls received from October 1, 2010 to December 31, 2016.

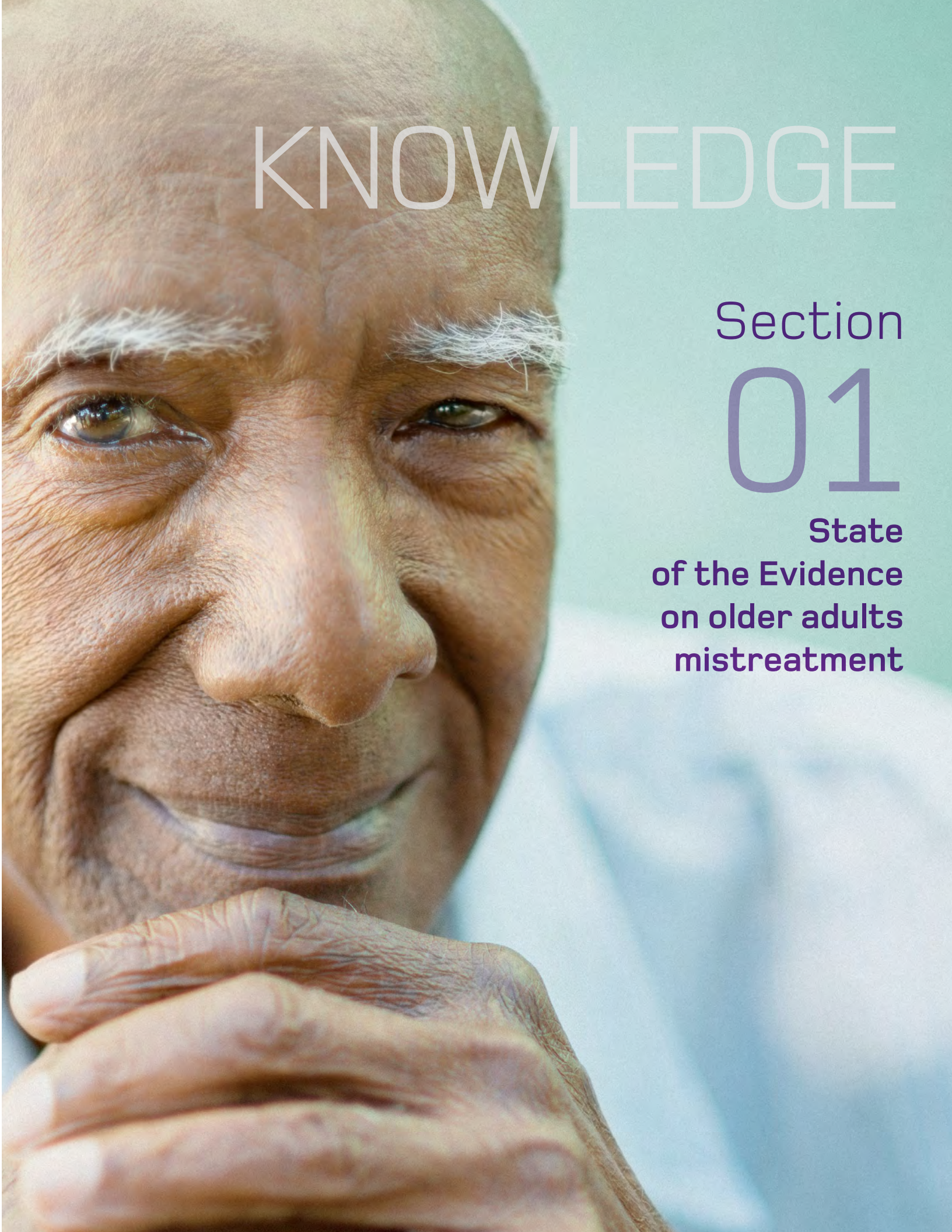
In this regard, intersectoral collaboration at the provincial, regional and local levels should be encouraged to optimize available financial and human resources.

Mistreated older adults and their friends and family must have access to a multitude of resources that will also create a safety net around them and provide support and accompaniment at the appropriate time to end the situation of mistreatment. This action plan therefore includes measures to encourage and facilitate the disclosure and reporting of situations of abuse. Application of *An Act to combat maltreatment of seniors and other persons of full age in vulnerable situations* will also contribute to this. Analysis of the current legislative framework reveals the many remedies that are already in place to take action, where appropriate, in certain situations of mistreatment. Charters of rights and freedoms and other statutes make criminal charges and civil prosecutions possible in situations of physical mistreatment, discrimination or harassment, to name just a few. There are a number of existing tools, remedies and laws in place. However, some efforts need to be made in promoting these measures to ensure that everyone can take ownership of the legal framework and thus assert their rights. The main avenues that can be pursued in situations of mistreatment, such as filing a complaint with the police or the *Commission des droits de la personne et des droits de la jeunesse* (CDPDJ), should also be publicized so that all concerned can better understand them.

Finally, this action plan takes into consideration the different realities faced by women and men in relation to mistreatment, with the aim of promoting interventions adapted to their specific needs, improving the offer of services and preventing or reducing inequalities between the sexes. Given that being a woman is a factor of vulnerability in mistreatment,[4] several Action Plan 2017-2022 measures will incorporate ideas of gender-based analysis. Thus, the plan provides for the collection of sexual data, and also for analysis to determine whether the fact of being a man or woman influences the type of mistreatment experienced, etc

The action plan is also in line with the *Stratégie gouvernementale de développement durable*. In particular, it supports the goal of making the environment in which we live healthier and safer. The measures it proposes incorporate several principles of sustainable development, including those of health and quality of life, prevention, equity and social solidarity, access to knowledge, participation and commitment.

To give teeth to this campaign to counter the mistreatment of older adults and promote efforts in well-treatment, the government is investing $45.8 million over 6 years, including $25.8 million in new funding. This investment is in addition to those proposed in the various action plans that are already in place in other ministries and agencies, such as combating homophobia and transphobia, intimidation, intimate partner violence and sexual violence. They also augment the efforts already being made at the provincial, regional and local levels to combat older adults mistreatment, thus restoring to its victims the peace and well-being to which all are entitled.



KNOWLEDGE

Section 01

State of the Evidence on older adults mistreatment

Section

01

KNOWLEDGE

State of the Evidence on older adults mistreatment

1.1. Definition of the mistreatment of older adults

The definition[3] adopted by the Government of Québec is based on the one used in the Toronto Declaration on the Global Prevention of Elder Abuse as adopted by the World Health Organization (WHO) in 2002:

Mistreatment is 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 adult, whether the person deliberately wants to cause harm or not.

As in the first action plan, the word "*maltraitance*" (here translated as *mistreatment*) is considered a generic term commonly used in Francophone societies. The scope of this Action Plan [4], encompasses all forms of mistreatment of older adults, exploitation and neglect.[5]

3. WORLD HEALTH ORGANIZATION, *The Toronto Declaration on the Global Prevention of Elder Abuse*, November 2002. The idea of intention has been added.
4. As in the Governmental Action Plan to Counter Elder Abuse 2010-2015, the term "abuse" is not favoured in French, although it is in common use, being a literal translation of the English term "elder abuse." It can, however, be employed correctly to designate harm done to the property or funds of an older person (financial abuse) or deception (breach of trust) (Action Plan 2010-2015 p.17).

The dimension of the trust relationship contained in the proposed definition must be interpreted broadly to encompass, among other things, the following contexts: conjugal, family, friendly or neighbourly relationships, care or domestic help, the provision of professional or financial services, and contractual and business relationships.

Mistreatment can occur in all aspects of life: at home, in private seniors' residences (RPA), and in public or private institutions (whether intermediate resources (RI) or family-type resources (RTF) or long-term care hospital centres (CHSLDs)), and also in various institutions or organizations where older adults receive care or services. The living environment may also refer more broadly to the community to which the senior belongs. Also, some types of mistreatment can occur in cyberspace.

1.2. Forms and types of mistreatment

In 2010, the Governmental Action Plan to Counter Elder Abuse 2010-2015 set out the first official terminology for the mistreatment of older adults. [5] In 2015, as knowledge related to mistreatment evolved, several actors involved in practice, research and public administration expressed a desire to work together to improve and clarify this terminology to better represent the specifics observed in their different fields of activity.[6] The results of this collaborative work reflect the evolution of practical and scientific knowledge in the fight against mistreatment as developed in Québec since the first Action Plan was established. The results of this collaborative work reflect the evolution of practical and scientific knowledge in the fight against mistreatment as developed in Québec since the first Action Plan was established *Guide de référence pour contrer la maltraitance envers les personnes aînées.*[7] The contents of the boxes on the following pages are an adaptation. Also, because of the changing context of knowledge related to the mistreatment of older adults, it is possible that this terminology will be adjusted again in the next few years, or that new types of mistreatment will be added.

The mistreatment of older adults can take two forms. The first is characterized as "violence," for example, "making the older adult act against his or her will, through the use of force and/or bullying."[8] The second is "neglect." This consists, for example, "in failure to show concern for the older adult, particularly by not taking appropriate action to meet his or her needs."[9]

The mistreatment of older adults may or may not be intentional. In some situations, the person who mistreates intends harm to the senior, while in others they do not intend harm or they fail to understand the harm they are causing. In both cases, the mistreated older adult is indeed being harmed, and in varying degrees this adversely affects their quality of life.

The following tables present the seven types of mistreatment covered in the new 2016 terminology. Each type can occur in one of the two forms mentioned above, i.e. either violence or neglect, and examples are given for each. Particular attention is also paid to the signs to be noted; that is, observable signs that may indicate a situation of mistreatment. These signs, however, may not confirm a situation of proven mistreatment. It is therefore important to analyze the situation more thoroughly and from different angles to ensure that these signs really do indicate signs of mistreatment.[10] To avoid hasty conclusions, warnings are also issued in these tables under the heading "Caution."

Signs : Observable facts requiring assessment to determine whether they are related to situations of mistreatment

Indicators: Evaluated observable facts indicating signs of mistreatment

5. Six types of mistreatment were covered: physical, psychological or emotional, sexual, material or financial, human rights violations and negligence. The forms of mistreatment were not indicated (Action Plan2010-2015, p.19).

TABLE 1 Types of Mistreatment[11]

PSYCHOLOGICAL MISTREATMENT

Gestures, words or attitudes that negatively affect an individual's psychological well-being or integrity.

VIOLENCE	SIGNS
Emotional blackmail, manipulation, humiliation, insults, infantilization, belittlement, verbal and non-verbal threats, disempowerment, excessive monitoring of activities, etc.	Fear, anxiety, depression, withdrawal, reluctance to speak openly, mistrust, fearful interaction with one or several people, suicidal ideation, rapid decline of cognitive abilities, suicide, etc.
NEGLECT	**CAUTION**
Rejection, indifference, social isolation, etc.	Psychological mistreatment is without a doubt the most common and least apparent type of mistreatment: ▪ It often accompanies other types of mistreatment. ▪ Its effects can be just as detrimental as those of other types of mistreatment.

PHYSICAL MISTREATMENT

Inappropriate gestures or actions, or absence of appropriate actions, which harm physical well-being or integrity.

VIOLENCE	SIGNS
Shoving, brutalizing, hitting, burning, force-**feeding**, inadequate medication administration, inappropriate use of restraints (physical or pharmacological), etc.	Bruises, injuries, weight loss, deteriorating health, poor hygiene, undue delay in changing of incontinence briefs, skin conditions, unsanitary living environment, atrophy, use of constraints, premature or suspicious death, etc.
NEGLECT	**CAUTION**
Failure to provide a reasonable level of comfort and safety; failure to provide assistance with eating, grooming, hygiene or taking medication when the older adult is in a situation of dependency, etc.	Some signs of physical mistreatment may be mistaken for symptoms associated with certain health conditions. It is therefore preferable to request a medical and/or psychosocial assessment.

SEXUAL MISTREATMENT

Non-consensual gestures, actions, words or attitudes with a sexual connotation, which are harmful to the person's well-being, sexual integrity, sexual orientation, or gender identity.

VIOLENCE	SIGNS
Suggestive comments or attitudes, jokes or insults with a sexual connotation, homophobic, biphobic or transphobic comments, promiscuity, exhibitionist behaviours, sexual assault (unwanted touching, non-consensual sex), etc.	Infections, genital wounds, anxiety when being examined or receiving care, mistrust, withdrawal, depression, sexual disinhibition, sudden use of highly sexualized language, denial of older adults' sexuality, etc.
NEGLECT	**CAUTION**
Failure to provide privacy, failure to respect a person's sexual orientation or gender identity, treating older adults as asexual beings and/or preventing them from expressing their sexuality, etc.	Sexual assault is above all an act of domination. Cognitive impairment may lead to disinhibition, which can result in inappropriate sexual behaviour. Not recognizing older adults' sexuality is a form of mistreatment, and it also makes it more difficult to identify and report sexual mistreatment. It is also important to keep an eye out for pathological sexual attraction toward older adults (gerontophilia).

MATERIAL OR FINANCIAL MISTREATMENT

Illegal, unauthorized or dishonest acquisition or use of the older adult's property or legal documents; lack of information or misinformation regarding financial or legal matters.

VIOLENCE	SIGNS
Pressure to change a will, banking transactions without the person's consent (use of a debit card, online banking, etc.), misappropriation of money or assets, excessive price charged for services provided, identity theft, etc.	Unusual banking transactions, disappearance of valuable items, lack of money for regular expenses, limited access to information regarding the management of the person's assets, etc.
NEGLECT	**CAUTION**
Failure to manage the person's assets in his or her best interest or to provide the necessary goods and/or services as required, failure to assess the person's cognitive abilities, understanding and financial literacy, etc.	Older adults who are in a relationship of dependency (e.g., physical, emotional, social or business-related) are at a greater risk of being mistreated in this way. In addition to the financial and material implications, this type of mistreatment can affect older adults' physical or psychological health by limiting their ability to fulfill their duties or meet their own needs.

ORGANIZATIONAL MISTREATMENT

Any discriminating situation created or tolerated by organizational procedure (private, public or community institutions providing all types of care and services), which compromise older adults' ability to exercise their rights and freedoms.

VIOLENCE	SIGNS
Organizational conditions or practices that do not respect older adults' choices or rights (e.g., services are provided in an abrupt manner), etc.	Treating the person as a number, inflexible care schedules, undue delays in service delivery, deterioration of the person's state of health (wounds, depression, anxiety), complaints, etc.
NEGLECT	**CAUTION**
Services ill-adapted to older adults' needs, insufficient or poorly understood instructions on the part of personnel, lack of resources, complex administrative procedures, inadequate training of staff, unmobilized staff, etc.	It is important to remain aware of organizational shortcomings that could violate the right of older adults to receive care and services, or that could lead to conditions that negatively affect the work of staff in charge of providing care or services.

AGEISM

Discrimination based on age, through hostile or negative attitudes, harmful actions or social exclusion.

VIOLENCE	SIGNS
Imposition of restrictions or social standards based on age, limited access to certain resources, prejudice, infantilization, scorn, etc.	Failure to recognize a person's rights, skills or knowledge, use of condescending language, etc.
NEGLECT	**CAUTION**
Failure to recognize or respond to ageist practices or comments, etc.	We are all influenced, to varying degrees, by negative stereotypes and discourses about older adults. These misguided assumptions lead us to misinterpret various situations, which can ultimately lead to mistreatment.

VIOLATION OF RIGHTS

Any infringement of individual and social rights and freedoms.

VIOLENCE	SIGNS
Forced medical treatment, denial of the right to: choose, vote, enjoy one's privacy, take risks, receive phone calls or visitors, practice one's religion, express one's sexual identity, etc.	Preventing the older adult from participating in making choices and decisions that affect his or her life, failure to respect the decisions made by the person, a family member answering on behalf of the older adult, restricting visits or access to information, isolation, complaints, etc.
NEGLECT	**CAUTION**
Lack of information or misinformation regarding the older adult's rights, failure to assist the person in exercising his or her rights, failure to recognize the person's capacities, etc.	Violation of rights occurs in all types of mistreatment. Everyone fully retains their rights, whatever their age. Only a judge can declare a person incapacitated and can appoint a legal representative. Persons declared incapacitated still preserve their rights, within the limits of their capabilities.

The development of knowledge and practices in phenomena related to mistreatment, such as intimidation, also allows us to fine-tune our knowledge and forms of intervention concerning the mistreatment of older adults. In 2015, the *Plan d'action concerté pour prévenir et contrer l'intimidation 2015-2018* raised questions about the links between bullying[6] and the mistreatment of older adults. Work has also begun on this subject at the Research Chair on the Mistreatment of Older Adults at the Université de Sherbrooke. Early results indicate that bullying that occurs in a relationship of trust, an essential element of older adults mistreatment, can be seen as a means of mistreating an older adult. For example, verbal bullying can be a means of psychologically mistreating an older adult.

The newly acquired knowledge on bullying has also confirmed that situations of mistreatment can continue in cyberspace and through information and communication technologies (ICT), [12,13] as is the case with bullying. This is online bullying. As there is significant growth in the use of ICTs among the older adults population, [7]it can be concluded that this issue will affect them more in the coming years, although it is not currently well documented.

6. As expressed in the Plan d'action concerté pour prévenir et contrer l'intimidation 2015-2018, the *Education Act* defines bullying as: "any repeated direct or indirect behaviour, comment, act or gesture, whether deliberate or not, including in cyberspace, which occurs in a context where there is a power imbalance between the persons concerned and which causes distress and injures, hurts, oppresses, intimidates or ostracizes. "

7. The *NETendances 2010* survey, conducted among 12,014 adults in Québec, showed that the proportion of people aged 65 and over using the Internet regularly increased from 9% in 2000 to 40% in 2010.

1.3. Mistreatment in numbers

The following section presents some figures related to the mistreatment of older adults. These provide insights into the extent of mistreatment, the most frequent forms, the gender and age of mistreated older adults, and the relationship between them and the person who mistreates.

Extent of the mistreatment of older adults

Two pan-Canadian studies that were conducted in the late 1980s and 1990s quantified the extent of mistreatement of older adults living at home. The first study reported that 4% of seniors living at home were victims of some form of mistreatement by family members,[14] and the second study reported that 7% of seniors living at home were victims.[15]

It is difficult to establish the percentage of older adults who are being mistreated, for a variety of reasons. It should be noted, for example, that many are reluctant to seek help for mistreatement. This can be explained by a number of different factors, such as fear of the repercussions from naming someone, feelings of shame, guilt, humiliation, sadness and anger, dependence on the abusive person, loss of autonomy, not understanding mistreatement, resignation or trivialization, lack of awareness of aid resources and mistrust in using them, protecting the family name, etc.[16]

Despite this, if we apply the figure of 7% as the prevalence of mistreatment, from the data obtained in the late 1990s, to the entire senior population of Québec, we can deduce that more than 105,000 seniors have been mistreated since July 1, 2016. Due to the aging of the population and the increased proportion of older adults, the number of people who are mistreated will grow, even if the prevalence of mistreatment remains unchanged.[18]

The Secrétariat aux aînés au Ministère de la Famille, in collaboration with the Québec Institute of Statistics, intends to carry out a survey of the prevalence of the mistreatment of older adults in order to obtain the most accurate picture of mistreatment in Québec, in accordance with the definition and various forms of mistreatment recognized by the Québec government. This will commence during the first years of application of the Action Plan 2017-2022. In particular, the study will support efforts to combat mistreatment, using relevant and recent evidence. It can also be used as a benchmark against which to measure changes in mistreatment over time.

The most frequent forms and types of mistreatment

According to the scientific literature, the most frequent form of mistreatment toward older adults living at home is neglect and the most common types of mistreatment are financial and psychological. As a result, financial mistreatment has received particular attention from many stakeholders for several years. Greater awareness of the various means of intervention and the introduction of new tools will help raise awareness, improve training of all those concerned and thus contribute to a reduction in this type of mistreatment.

To support the fight against financial and material mistreatment, the Secrétariat aux aînés du ministère de la Famille will hold a forum devoted entirely to financial and material mistreatment within 18 months of launching the Action Plan 2017-2022, with a view to mobilizing the financial sector behind the issue.

At the other end of the spectrum, physical and sexual mistreatment are the least frequent forms. It should be noted that many older adults experience more than one type of mistreatment at a time.[19]

Implementation of the province's Elder Mistreatment Helpline within the framework of the Action Plan 2010-2015 (renewed until 2017) has permitted the compilation of data that, while not necessarily representative of older adults mistreatment in Québec, does help document the different types of mistreatment and the dynamics in which the alleged situations of mistreatment occur. Data collected by the Elder Mistreatment Helpline since its introduction on October 1, 2010 tend to confirm the results obtained from the scientific literature with regard to the most frequent types of mistreatment.

The following figures represent a statistical overview of the calls that were handled by the Elder Mistreatment Helpline from October 1, 2010 to December 31, 2016.
These data do not aim to present a portrait of the mistreatment of older adults in Québec, but rather to reflect the concerns, questions and preoccupations expressed in the 20,200 calls handled at the Elder Mistreatment Helpline during this same period.

TYPES OF MISTREATMENT REPORTED

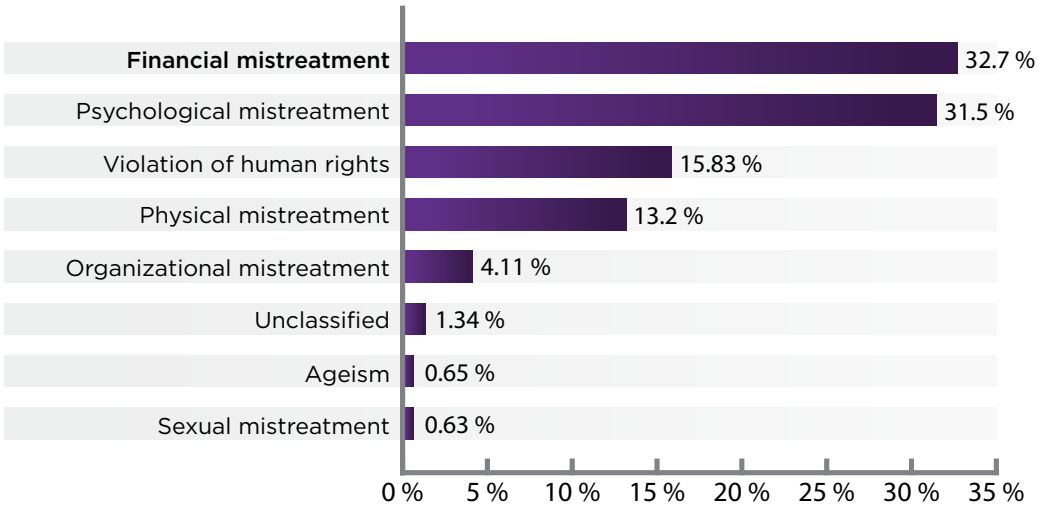


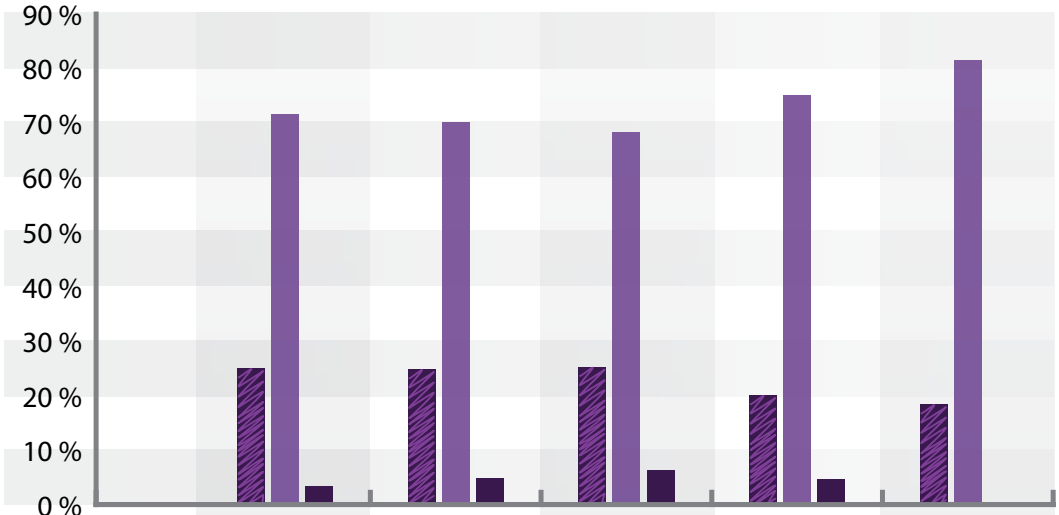
Figure 1: **Percentages of types of mistreatment reported in calls to the Elder Mistreatment Helpline**

Individuals who contact the Elder Mistreatment Helpline report situations of mistreatment that are mainly financial and psychological, with more than 30% for each type. It is important to remember that, based on the information provided by the callers, more than one type of mistreatment may occur at a time. For example, physical and financial mistreatment often occur in a situation in which there is psychological mistreatment.

Financial and material mistreatment: other statistics

- Statistics on exploitation of the elderly from the CDPDJ show that the vast majority of files opened each year mainly concern financial mistreatment.
- In 2015-2016, the Public Trustee dealt with 130 cases in which financial mistreatment was suspected.
- The report of the pilot project of a socio-judicial intervention procedure to counter the mistreatment of older adults in the Mauricie-Centre-du-Québec region states that financial and material mistreatment led to the greatest number of intervention procedures, or more than half of the cases (56%).

GENDER AND AGE OF ALLEGEDLY MISTREATED OLDER ADULTS



	60-69 years	70-79 years	80-89 years	90-99 years	100 years +
Man	25.00 %	24.82 %	25.25 %	20.06 %	18.38 %
Woman	71.64 %	70.24 %	68.39 %	75.20 %	81.63 %
Unspecified	3.34 %	4.92 %	6.34 %	4.72 %	0

Figure 2: **Percentage of men and women allegedly mistreated by different age groups**

Of all calls received by the Elder Mistreatment Helpline, elderly women were the victims of mistreatment in 70% of the cases, compared with 24% for elderly men. The gender was not specified in 6% of calls. As studies have shown, some types of mistreatment seem to be more commonly experienced by women,[20] although the mistreatment of older adults defies gender.[21] This higher percentage of elderly women being mistreated may also be explained by the demographic weight of women,[22] while other studies have also highlighted specific factors associated with the cumulative discrimination experienced by women throughout their lifetimes.[23] The forms of mistreatment inflicted on older women would also seem to be worse than those on men. However, it is the more serious situations of mistreatment that are most likely to be reported.[24]

For example, Statistics Canada, in its statistical profile of conjugal violence in Canada, highlights the fact that "gender differences were also observed among seniors experiencing family violence [...]. According to police data, in 2013 the rate of conjugal violence against older women was higher than that against older men (62.7 versus 49.7 per 100,000 seniors)."[25] This observation would also reflect the increased risk of domestic violence, and of intimate partner violence, faced by women during their lives. In Québec, senior women who were victims of intimate partner violence that had been reported to the police accounted for 65% of victims, compared with 35% of men for the same type of violence.[26]

An analysis of data gathered[27] between 2010 and 2013 by the team specializing in countering the exploitation of seniors of the *Commission des droits de la personne et des droits de la jeunesse* (CDPDJ) revealed that, in 71% of cases, mistreated older adults are women and 29% men. In over 60% of cases handled by the CDPDJ's specialized team, the age of mistreated older adults exceeded 80.

These percentages are similar to those observed at the Elder Mistreatment Helpline, where seniors aged 70 to 79 (70.24% women, 24.82% men) and aged 80 to 89 (68.39% women, 25.25% men) are those that are most often mistreated.

Suspected persons who mistreat

The chart below shows that, very often, members of the family (spouse, adult children and other family members) of the mistreated person are identified as the primary cause of the mistreatment of older adults. In 38% of the situations reported to the Elder Mistreatment Helpline, it was the adult children who were committing the alleged acts of mistreatment. Together with spouses and other family members (nephews/nieces, grandchildren, cousins, siblings, spouses of children), 55% of the situations dealt with by the Elder Mistreatment Helpline involve a member of the immediate or extended family of the mistreated older adult.

The mistreatment of older adults committed by family members is often the result of complex family dynamics, sometimes long established. Among spouses, the mistreatment of older adults may be a continuation or development of a situation of intimate partner violence. In parent-adult child relationships, the mistreatment of older adults can be a reversal of prior child abuse or neglect, or a reversal of prior unhealthy co-dependent family relationships.[28] Often it is the personal characteristics of the person who mistreates that lead to the mistreatment rather than the risk factors or vulnerability of the seniors.[29]

RELATIONSHIP BETWEEN PERSON WHO MISTREATES AND THE OLDER ADULT

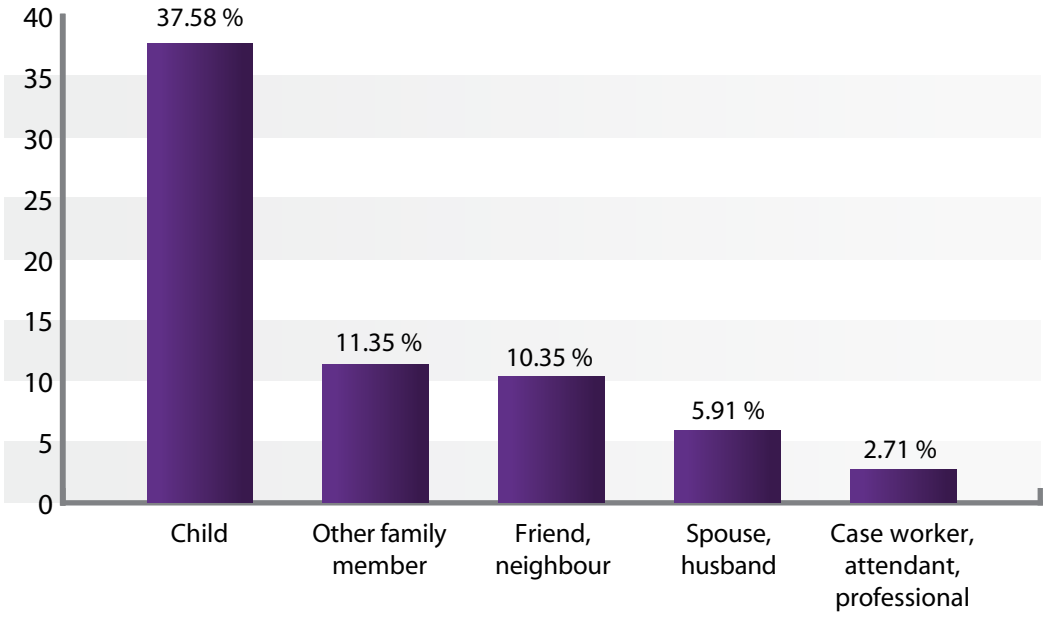


Figure 3: Nature of the relationship between person who mistreates and older adult by percentage. This excludes the categories "Not Available" and "Other."

1.4. Risk factors and vulnerability factors

This section presents risk and vulnerability factors, both for the older adult and the person who mistreates, that predispose them to a situation of mistreatment. However, current knowledge does not indicate a typical profile for an mistreated older adult or a person who mistreates.

Characteristics of mistreated older adults

Recent studies have highlighted certain characteristics of older adults who have been mistreated based on the types of abuse experienced. However, these same studies also indicate that characteristics associated with mistreatment are more likely found in the person who mistreates than in the mistreated older adult.[30] This would be the case, specifically, with regard to the consumption of illicit substances.[31]

No one is immune to mistreatment: women and men of all ages, from privileged or disadvantaged backgrounds, from various ethnocultural origins, living at home or in an institution, may become victims. However, many factors of vulnerability and risk factors predispose some older adults to becoming victims of mistreatment, although the presence of these different factors does not systematically lead to mistreatment.[32]

Factors of vulnerability concern specific traits of older adults that can make them more vulnerable to mistreatment. These may include physical health, loss of cognitive function, or mental health problems, which can make them dependent on others for certain daily activities or for their basic needs.

Risk factors are more related to the person's environment. An older adult involved in recent or long-standing family conflicts or cohabiting with one or more relatives is more likely to experience mistreatment. A tension in the relationship between senior and caregiver can also lead to mistreatment. Being isolated and having a limited social network can also encourage situations of mistreatment, particularly that of a financial nature.

Although the available evidence does not demonstrate a direct causal link, it should be noted that the evidence suggests that belonging to certain social groups may in itself be a factor of vulnerability. Examples are sexual orientation, gender identity[33] (such as homophobia, transphobia), living with a disability[34] (more vulnerable to neglect when dependent on others to perform daily activities) or incapacity.[35] The language barrier may be an additional risk factor, particularly for older adults who are Aboriginals or from ethnocultural minorities who may be dependent on others when interacting with society or seeking services or assistance. Being isolated and not having a social support network will also predispose older adults to mistreatment.

In order to counter the isolation of older adults and encourage their autonomy and maintenance in their community, the Secrétariat aux aînés du ministère de la Famille intends to continue deploying community workers among community organizations throughout the province. These professionals will help vulnerable seniors to obtain certain resources based on identified needs. A document listing the various initiatives for working with seniors in situations of vulnerability (ITMAV) is available at: **https://www.mfa.gouv.qc.ca/fr/publication/Documents**/ card ITMAV-16-17-combo.pdf

Risk factors for the older adults that are most commonly reported in the scientific literature are: [36]

- Cohabitation with one or more relatives
- Conflicts with family or friends
- Inaccessibility of resources
- Social isolation and limited social network
- Financial dependence on a third party due to sponsorship status (immigration situation)
- Older adults and the person who mistreates sharing the same residence
- Tension in the relationship between senior and caregiver

Vulnerability factors for the older adults that are most frequently reported in the scientific literature are:[37]

- Advanced age
- Illiteracy
- Personal characteristics that can predispose them to prejudice (e.g., odours, appearance, etc.)
- Disruptive or violent behaviour toward caregivers and helpers (e.g., aggressiveness, resistance to care, wandering, etc.)
- Dependency problems (e.g., alcoholism, drug addiction, medication, etc.)
- Dependence on others for business management (e.g., budgeting, paying bills, finances, etc.)
- Dependence for basic care (e.g., food, hygiene, taking medication, etc.)
- Difficulty or inability to express themselves, submissive attitude, excessive reliance on others
- Behavioural or emotional difficulties (e.g., mental health, depression, etc.)
- Financial difficulties
- Social and geographical isolation
- Lack of knowledge of the official languages (English and French)
- Unfamiliarity with the rights and resources to which they are entitled
- Mistrust of public services (e.g., health and social services, police, etc.)
- Physical health problems, loss of cognitive function or mental health problems
- Reluctance or resistance to receiving care
- Being female

Characteristics of persons who mistreat

As discussed above, the person who mistreates may be a son or daughter, spouse, caregiver, friend or neighbour, etc. These people, like mistreated older adults, manifest their own risk and vulnerability factors. As mentioned, certain of their personal characteristics will predispose them to committing mistreatment.[38]

Factors most commonly reported in the scientific literature concerning persons who mistreates are as follows:[39]

- History of family violence
- Dependency problems (e.g., drugs, alcohol, compulsive gambling, etc.)
- Mental and physical health problems
- Personal problems related to work, finances, family
- Financial dependence on the senior
- Social isolation
- Lack of support
- Primary caregiver is a family member
- Care giver role imposed
- Lack of knowledge about diagnoses and care
- Stressed and exhausted from caregiving, which feels like a burden

1.5. Consequences

The mistreatment of older adults is not without its consequences. Although the senior is the first to be affected by the consequences of mistreatment, the people around that individual also suffer negative effects. The family, friends but also more generally the environment (e.g., the living environment) of the mistreated older adult may be affected. Mistreatment, like bullying or conjugal violence, goes beyond being the problem of one individual.

Various sources cited in the *Guide de référence pour contrer la maltraitance envers les personnes aînées* report some of the consequences[40] that mistreatment can have on the quality of life of older adults:

- Temporary or permanent physical ailments
- Suicidal thoughts and destructive behaviour
- Higher rates of illness and mortality
- Loss of savings to provide for their well-being
- Development of anxiety, confusion, depression
- Withdrawal
- Growing sense of insecurity
- Increased visits to Emergency
- Suicide as the ultimate consequence

1.6. Protective factors

Protective factors are characteristics specific to the person (intrinsic) or to their environment (extrinsic) that tend to reduce the risk of developing certain problems sush as mistreatment.

Protective factors, along with vulnerability and risk factors, benefit from being analyzed in a specific way based on each type of mistreatment, since these factors differ from one type to another.

The presence of protective factors does not necessarily signify the absence of vulnerability or risk factors. An older adult can have both an adequate social network (protective factor) and significant cognitive losses (factor of vulnerability). Protective factors are not the opposite of risk or vulnerability factors. For example, cognitive losses are a factor of vulnerability for mistreatment, but the absence of cognitive losses cannot be considered a protective factor at the outset.

However, when the following conditions are present, the senior will be better protected:

Intrinsic protective factors for the older adults[41]

High self-esteem:

- Self-knowledge and ability to recognize when to seek help; acknowledging achievements; accepting failures and learning from them
- Confidence: having a high level of trust in others
- Sense of responsibility
- Resourcefulness

Ability to seek help

- Emotional support: being able to confide in someone, being understood, receiving advice, etc.
- Cooperation, mutual assistance
- Solid support: able to rely on someone when necessary
- Security net

Understanding emotions:

- Understanding, recognizing and taking ownership of emotions
- Ease of expressing emotions and feelings
- Ability to face events and make sense of them
- Adopting strategies to deal with stress

Social participation:

- Sense of belonging (e.g., social belonging, inclusion and support)
- Ability to practice skills: a willingness to draw on personal knowledge and employ different strategies in a particular situation
- Feeling of social competence

Ability to learn alone and within the community:

- Personal development: having a hobby, self-learning, exercising, setting personal goals, pursuing lifelong learning

Maintaining good lifestyle habits:

- Ability to project into the future, being detached, relaxed, aware, etc.
- Being independent
- Building positive and beneficial relationships with family and friends

Extrinsic protective factors for the older adults[42]

Network:

- Quality of a social network or support system, consisting of appropriate, available and well equipped people
- Ability of the network to adapt to the senior's needs and to use community services

Environment:

- Healthy physical and psychosocial environment in which the senior feels safe
- Availability of services locally (medical, community, etc.)
- Living environments free from ageism and social exclusion

Financial situation:

- Availability of adequate income
- Various means in place to secure assets

1.7 Best practices

In Québec, a number of measures are in place to counter older adults mistreatment at different stages of the intervention process, including awareness, prevention, detection, intervention and follow-up. Coupled with protective factors specific to the elderly, these measures, as described below,[8] can sometimes prevent mistreatment. In certain situations, they can improve the detection of problems and steps that can be taken to stop them.

The *Guide de référence pour contrer la maltraitance envers les personnes aînées* is a valuable tool for learning about the principal roles and responsibilities that fall to various partners involved in countering the mistreatment of older adults at different points in the continuum of services. This electronic tool is available on the website of the Ministère de la Famille at: **www.mfa.gouv.qc.ca/fr/publication/Documents/13-830-10F.pdf**

Prevention and awareness of mistreatment

Awareness and prevention campaigns, as well as various tools devoted to the issue, are valuable assets in increasing public awareness and vigilance with regard to the mistreatment of older adults. These awareness measures can also be addressed to the various partners involved in certain situations of mistreatment: family members, stakeholders, volunteers and community organizations, to name just a few. Efforts must also be made to reach all older adults, including those who are most isolated, or those who speak neither French nor English. Awareness can be achieved in different ways: producing and distributing leaflets, booklets or DVDs to commemorate World Elder Abuse Awareness Day (June 15 of each year); conducting awareness campaigns in certain key communities or within the general population; carrying out prevention activities; developing policies, regulations or guidelines to guide interventions in situations of mistreatment, etc.

8. The elements presented in this section are based on the contents of the *Guide de référence pour contrer la maltraitance envers les personnes aînées*.

The fight against ageism can also be seen as an important concern in preventing older adults mistreatment. In normalizing certain reprehensible behaviours (e.g., condescending attitudes toward the older adults), ageism can become a breeding ground for mistreatment. On the other hand, promoting a well-treatment approach toward older adults could prevent abuse, in particular because their needs would be taken into account and put in the forefront of all concerns. In addition, the different needs of men and women, as well as the specific characteristics of those from certain social groups, such as the LGBT community or ethnocultural minorities, would be taken into consideration. In practical terms, this may mean knowing the senior's daily routine, respecting when they wish to wake up and go to bed, or offering services in different languages. The second section of the Action Plan 2017-2022 devoted to well-treatment describes this approach in detail.

Improving the quality of the initial and ongoing training of the various caregivers (social workers, nurses, nurses' aides, police officers, managers, volunteers, etc.) with respect to the concepts of aging and the fight against older adults mistreatment should also be encouraged. The acquisition of certain knowledge in these areas can ensure that abusive behaviour will be prevented. Updating programs based on practice, releasing staff to participate in professional development activities, and creating specialized teams to transfer knowledge to peers can all be achieved in relation to initial training and continuing education. The training content can also include the various signs that may indicate abusive situations, as well as those that confirm the presence of mistreatment (indicators). The training then helps detect situations of abuse, thus enabling the stakeholders to offer support and guidance to the mistreated older adults, and also to avoid aggravating the situation.

Detecting older adults mistreatment

Various tools for detecting mistreatment are available and can be used and disseminated. An inventory of approved international tools,[43]documented by the Institut national de santé publique du Québec (INSPQ), has identified 15 such tools, four of which were designed or tested in Québec. Each of these tools is developed for a specific practice setting (doctor's office, home support service, hospital emergency room, etc.) and for specific professionals (doctor, social worker, nurse, etc.). Québec's police services have also developed detection tools[44] to better equip police officers who have to deal with mistreatment situations as part of their work. While everyone is able to detect a situation of abuse, it is preferable that the mistreated older adult be referred to those who are able to continue the intervention.

Interventions in situations of mistreatment

In a large number of interventions in mistreatment cases, an ethical dilemma arises when there is a need to both protect the senior and respect their right to self-determination.[9]

On the one hand, it may involve excessive protection in the name of safety, which could lead to denying the senior their right to autonomy. On the other hand, disregarding the situation in the name of autonomy will expose the individual to certain risks. Achieving a balance means taking into consideration a number of factors: respecting the senior's choices and their tolerance of change, values and culture; equipping them to make free and informed decisions; obtaining their consent or that of their legal representative before the intervention; encouraging the least intrusive intervention possible and adjusting it if necessary, etc.[45]

Situations of older adults mistreatment are often complex and involve a variety of stakeholders who make their expertise available to the mistreated older adult and the people closest to them, if appropriate. Intervention practice guides have also been developed, along with detection tools, to support practitioners in their individual or intersectoral work. The guides are available for different spheres of intervention, including psychosocial monitoring, police practice and two-pronged intersectoral practice. Several are listed in the *Guide de référence pour contrer la maltraitance envers les personnes aînées.*

In this context, intersectoral work and consultation among the various stakeholders who may be confronted with situations of mistreatement of older adults are to be encouraged. It will have a positive influence on the quality and efficiency of service continuity from one organization to another, and also within a single organization. Examples include developing intersectoral protocols and agreements, case discussions within interprofessional teams, and instituting internal service policies or trajectories.

In this spirit, and following the enactment of *An Act to combat maltreatment of seniors and other persons of full age in vulnerable situations*, the Secrétariat aux aînés du ministère de la Famille, in collaboration with seven other ministries and agencies, will deploy collaborative intervention processes from the national framework agreement in the area of the mistreatment of older adults throughout Québec. These processes promote rapid, concerted and complementary measures that aim to ensure better protection and provide necessary assistance to seniors who are or may be in vulnerable situations, and who are victims of physical or financial mistreatment or serious neglect.

9. The right to decide for oneself, according to personal will

WELL TREATMENT

Section 02

Well-Treatment

Section

02

WELL-TREATMENT

Well-treatment

The following section discusses the basics of well-treatment, an approach often presented by various partners and organizations working with older adults as a way forward, an inspirational model that could prevent mistreatment. In this spirit, the Government of Québec has established a definition of well-treatment and ways of promoting it, since it is seen as a complementary lever in countering older adults mistreatment. It is important to emphasize that the absence of mistreatment does not mean the presence of well-treatment. It is therefore important that we question our behaviours and practices in order to improve them, in accordance with the needs and wishes of the older adults.

2.1. Definition of well-treatment

Well-treatment (*bientraitance*) as an approach originally began in France in the late 1990s in the context of child protection. It was first used by members of the Steering Committee of "Operation Nursery," which was set up by the French government to take care of young children who had been abused by their parents or by an institution. This approach was subsequently extended to care for the older adults and the disabled in the mid-2000s.[46,47] The French government and various health agencies also used it in 2007 to implement the Plan for Developing Compassionate Care and Combating the mistreatment of Older Adults and Disabled.[48]

The definition[10] of well-treatment that the Government of Québec has adopted for this action plan can be applied in any context, in any living environment and for all older adults, whether in a situation of vulnerability or not. Thus, it goes well beyond providing well-treatment in care-giving situations, an area that has been extensively studied and discussed by various authors.[49] It is defined as follows:

Well-treatment is about fostering the well-being and showing consideration for the dignity, self-fulfillment, self-esteem, inclusion and safety of a senior. It is expressed through attentiveness, attitudes, actions and practices that are respectful of the values, cultures, beliefs, life journeys, uniqueness and rights and freedoms of that individual.

10. This definition cannot be considered definitive as it will evolve over time, based on the advancement of knowledge, and depending on the situations and evaluation of its application.

As mentioned earlier, well-treatment is considered a positive approach and represents a complementary lever in combating mistreatment. It can prevent the occurrence of older adults mistreatment by promoting positive attitudes and behaviours that respect their wishes and preferences. It is neither the opposite or the absence of mistreatment. Thus, when the examples of well-treatment given below are not applied, they do not amount to mistreatment. Sometimes, the different situations or characteristics of an individual or their community will impede the implementation of certain measures.

2.2. Conditions that foster well-treatment

The six elements described in this section are considered to be conditions that foster well-treatment. To summarize, well-treatment means:

- Placing the individual at the centre of actions taken. They must judge whether an action taken or suggested is suitable for them and will have a positive outcome.
- Encouraging the self-determination and empowerment of the senior so they can take control of their lives and make choices that reflect their values, lifestyle, culture, etc.
- Respecting the individual and their dignity so they feel well thought of, and can build self-esteem.
- Promoting social inclusion and participation to bring well-being to older adults who wish to end their isolation and contribute to society.
- Carrying out actions and interventions by combining hard skills (know-how) and soft (interpersonal) skills.
- Providing coordinated support in order to take the most appropriate actions for each dimension of the senior's life (housing, health, diet, family life, relationships, etc.), while respecting the choices made by them.

Placing the individual at the centre of actions taken

First employed in the field of psychology, the person-centred approach aims to place the individual at the heart of actions taken, rather than focusing on the situation they face.[50] For example, it may involve asking about their general condition before touching on a particular medical or psychological problem. This approach has been adapted to the fields of health and social services, particularly in Québec.[51] It aims to provide care and services that respect and respond to individual preferences and specific needs. It also ensures that its values guide all decisions concerning that individual.[52,53]

This approach, possibly the most crucial condition in promoting well-treatment, means taking into account a number of factors that can influence the individual's needs and aspirations. They include:

- Living conditions
- Physical and psychological capabilities
- Social environment (socioeconomic situation, isolation from services and relatives, quality of the social network, etc.)
- Life experience of the individual (their personal journey)
- Uniqueness of the individual (ethnocultural origin, sexual orientation, gender identity, values, habits, lifestyle, etc.)

Placing the senior at the centre of actions taken means adapting to their preferences and their own pace. This approach also requires attentiveness to changes in their life that are likely to increase their vulnerability. It also aims to validate and understand older adults desires, habits, expectations and needs, and assess their understanding of the situation.

EXAMPLES

- Routinely consult the senior about any issues or decisions that concern them; do not presume to know what they would like or prefer.
- Arrange work schedules, meal management, waking up and bedtime routines by taking into account the senior's preferences as much as possible.
- Talk with the senior about their life story, to get to know them better.
- Consider the senior in their entirety; don't stop at their age or health condition.

Promoting self-determination and empowerment

Self-determination is the person's ability to act and make decisions on their own and based on what they want. It is the senior who must decide, to the best of their knowledge, about the environment in which they prefer to live, the way they want to live and the care and services they want to receive. Respect for the senior's lifestyle habits, values and culture must also be taken into account.[54,55]

Empowerment is a principle that refers to "the process by which the individual becomes capable of influencing the organization and course of their life by making decisions that concern them directly or concern their community."[56,57] The empowered senior will have the necessary strengths and skills, or at least the potential to acquire them, to make a decision or initiate a change. The senior must be supported and equipped, not directed, in their thoughts and choices. The empowerment principle applies to a wide range of situations and contexts, regardless of the senior's ability or capacity, as it recognizes that the individual still has a certain amount of ability (strengths and competencies), however minimal it may be.

EXAMPLES

- Allowing older adults to make their own decisions, and respecting them, even if they are at odds with your values and not the best choice in your opinion.
- Consulting and involving older adults in all decisions that concern them.
- Including older adults in discussions about choosing a new living environment that may be better suited to their physical condition.
- Informing older adults about their choices, rights, recourses and various legal concepts, in addition to offering them support.
- Establishing committees so that older adults can play an active role in the governance of various organizations.

Respecting the individual and their dignity

The Charter of Human Rights and Freedoms also guarantees respect for the dignity of the human being and the right to safeguard it.[58] Respecting dignity is about respect for the individual, their considerations and self-esteem.[59] This means respecting their individuality, personal characteristics (age, gender, ethnocultural origin, sexual orientation, gender identity, values, etc.), preferences and life journey.

Respecting dignity also implies consideration for the individual's private life. The more people depend on others to meet their daily needs, such as eating or personal hygiene, the more likely they are to be bullied in a private situation.[60] It is therefore essential to preserve, as much as possible, the privacy and dignity of the individual, regardless of their environment or the care and services they are receiving.

EXAMPLES

- Knocking on the door before entering, announcing your arrival before coming to the person's home.
- Arranging the living spaces in such a way as to respect privacy as much as possible.
- Standing at a distance that is "acceptable" for the senior; this can vary from one person to another.
- Respecting the confidentiality of conversations with the senior.
- Adapting funeral services to the rituals of different ethnocultural minorities when a relative dies.

Encouraging social inclusion and participation

Social inclusion allows people to feel they are part of society and that society is useful to them. This also reinforces their sense of belonging and the relationships they have with other generations, as well as with members of their family and community. Social inclusion has a positive impact on quality of life and well-being. It can lead to an increase in social skills, reduce the risk of mistreatment by increasing protective factors, and have a positive effect on health, since strong social networks often foster healthier lifestyles.[61,62]

Social participation involves taking part in all kinds of activities in society. It helps improve health and adds to the sense of well-being.[63]

Older adults have a role to play in society, regardless of their abilities and skills, and they can continue to make a contribution to their families and communities. What is important is that the older adults have space to express themselves and feel that their opinion has value and impact. There are government programs in place in Québec that are designed to promote the social participation of seniors,[11] such as the *Initiatives de travail de milieu auprès des aînés en situation de vulnérabilité (ITMAV), Québec ami des aînés (QADA)* and *Municipalité amie des aînés (MADA).*

EXAMPLES

- Organizing a block party or other activities where links can be forged with neighbours of all ages and origins.
- Creating different spaces for socializing in the various living environments of older adults, such as common rooms.
- Establishing mentoring programs that allow experienced workers of a company to share their expertise with younger people.
- Ensuring the safety of municipal buildings and public places (e.g., adequate, clean and accessible lighting).
- Encouraging older adults to volunteer in community organizations.

11.

Intervening with hard and soft skills

Hard skills are defined as competencies acquired from practising a trade or profession that can be used to resolve practical problems. [64] It refers to a person's knowledge and ability in making interventions, applying techniques and judging when to use them.[65]

Soft skills can be defined as "expected social or relational skills."[66] They are reflected in the attitudes, behaviours and personal style of the individual who steps in.[67] It could be the ability to make a decision and adapt to a complex situation. It refers to attitude and behaviour. Empathy, open-mindedness and willingness to get to know the other person are soft skills that can help you better understand that individual.

EXAMPLES

- Looking at the senior when speaking to them and using a respectful tone; encouraging them to express themselves, and being patient.
- Developing a relationship with the senior that is both professional and personalized.
- Announcing what you are about to do and explaining what you are doing.
- Asking the senior whether they wish to be called by their first or last name.
- Knowing the techniques for moving older adults about safely when administering personal care.
- Ensuring that caregivers of older adults know and understand any illness and the implications it may have for the senior's behaviour.

Providing coordinated support

Coordinated support or collaborative practice is a "dynamic process of interactions in the form of sharing information, education and decision-making." [68] In other words, it means that the employees, and also the senior's friends and family, must work together to offer the senior the best care and services, and the most appropriate care for their needs, condition and preferences. This sharing of knowledge and information helps ensure that actions taken are carried out in accordance with the person's individuality.

Caregivers possess a great deal of knowledge about the senior (their interests, tastes, values, life history, habits, fears, etc.) This is particularly useful knowledge when the senior is experiencing a significant loss of autonomy and when interventions must be coordinated among different organizations and professionals. Some organizations and municipalities can also provide support by adapting their services to the needs of older adults. To do so, they must take into account all facets of the senior's life (housing, family support or lack of it, services and health care, etc.). Again, the senior must be included in the discussions and participate in the decision-making.

EXAMPLES

- Ensuring that relevant information is communicated among those looking after the senior, for example, during shift changes at the CHSLD.
- Support friends and family who are involved in the life of the older adults, including caregivers (recognition, training, etc.).
- Conduct a survey on people in vulnerable situations in municipalities.

ACTION PLAN

Section 03

Governmental Action Plan

Section

03

ACTION PLAN

The Governmental Action Plan

3.1. Guiding principles for governmental actions in countering the mistreatment of older adults

- The mistreatment of an older adult is unacceptable and must be condemned and denounced by society.
- Every senior enjoys the right to respect for their physical and psychological integrity as well as for their choices and autonomy.
- Any senior experiencing mistreatment must be able to access services and resources to end this situation as soon as possible. **A list of aid resources is available in Appendix 2 of this action plan.**
- The balance between the need to protect older adults and a respect for self-determination must be addressed in any situation.
- Access to environments and living environments free of the mistreatment of older adults is based on individual and collective responsibility.
- Elimination of the mistreatment of older adults is based in particular on equality and equity, as well as the adoption of respectful behaviours and well-treatment towards older adults.

3.2. Issues related to countering the mistreatment of older adults

The objectives and directions taken by this Action Plan have been largely based on the many findings and proposals made by the partners[12] involved in countering older adults mistreatment. In the box below are listed the main issues arising from the consultations held in May 2016 with these same partners, and to which the measures of the Governmental Action plan to Counter Mistreatment of Older Adults 2017-2022 aim to respond.

The actions emanating from this Action Plan will be deployed for the benefit of the entire population of Québec, including Inuit and First Nations people. However, in order to provide concrete answers to the problem of the mistreatment of older adults in Aboriginal communities and to propose actions that are better suited to their situations, the government advocates a separate intervention that will take into account the distinctive features and differences, notably sociological, of the First Nations and Inuit people.

As a result, measures to address the needs of Aboriginal peoples with respect to the mistreatment of older adults will be developed separately as part of a specific governmental action plan that will incorporate actions taken by the government to address a range of social Aboriginal issues. This comprehensive approach will take into account the varied ongoing work of the Government of Québec in the area of social and cultural development. Measures focused on the issues of mistreatment will be based, among other sources, on the testimony and representations given by Aboriginal organizations at consultations held in 2016 as part of the renewal of this Action Plan.

12. The list of partners consulted is available in Appendix 3.

Main issues reported by the partners:

- It is difficult to establish the prevalence of mistreatment of older adults. The cases of mistreatment which are reported are considered by some to be the "tip of the iceberg," partly because many older adults do not acknowledge that they are being mistreated, or say they are not being mistreated or do not want to name anyone.
- Financial mistreatment is the most frequently reported type, followed closely by psychological mistreatment.
- Many people (seniors, caregivers, relatives, general population, etc.) remain unable to recognize situations of mistreatment.
- It appears that some types of mistreatment are trivialized.
- Given the aging of the population, there could be an even greater number of mistreated older adults.
- The isolation of some older adults complicates prevention and detection while providing fertile ground for situations of mistreatment.
- Field experience demonstrates that disclosure of situations of mistreatment and intervention are complex, as they must take into account respect for the senior's self-determination and their need for protection.
- Knowledge about older adults mistreatment and training related to it could be improved.
- The fight against the mistreatment of older adults must adapt to social diversity and the different types of seniors.
- Mistreatment can occur in all environments that are frequented by older adults.
- The fostering of well-treatment should be encouraged from an early age.
- The expertise acquired by various community-based agencies in countering older adults mistreatment over the past several years should be accessible and used in a sustainable manner.

3.3. Orientations

The directions taken in the Action Plan 2017-2022 were established in light of the evaluations and results achieved by the Action Plan 2010-2015, as well as the findings and recommendations made by the various partners during the consultations prior to the development of this Action Plan.

Four main orientations have been identified:

Orientation 1:
Prevent mistreatment and foster well-treatment

Orientation 2:
Encourage early detection and appropriate interventions

Orientation 3:
Promote and facilitate disclosure of situations of mistreatment, including situations of financial and material mistreatment

Orientation 4:
Develop knowledge and improve knowledge transfer

The following section outlines the measures proposed by the 13 ministries and partner government agencies to counter the mistreatment of older adults in accordance with the above four orientations.

The symbol ⚤ **identifies actions being implemented for which the different realities and needs of men and women are taken into account.** Measures relating to financial or material mistreatment are highlighted in purple in the tables that follow.

The list of acronyms for all the responsible ministries and agencies or contributors to the measures presented in section 3 is available in Appendix 4.

ORIENTATION 1

Prevent mistreatment and foster well-treatment

Prevention is aimed at reducing the incidence of mistreatment in all areas of seniors' lives, whether at home, in private seniors' residences (RPA), in public or private institutions including intermediate resources (RI) and family-type resources (RTF) or long-term care hospital centres (CHSLDs), and also in various institutions or organizations frequented by older adults. As mentioned earlier, "living environment" may also refer more broadly to the community or group to which seniors belong.

Prevention often complements awareness-raising actions that can lead to greater knowledge and a better understanding of mistreatment. The affected population is thus made aware of the fact that older adults mistreatment is unacceptable. In this respect, mistreatment must not be reduced to physical injuries and theft of money and property. Many acts of mistreatment are mistakenly referred to as "minor mistreatment." It is important that in no circumstances must these acts be considered less serious, or excused or tolerated.

Prevention can also raise the level of communal sensitivity and help in developing respectful attitudes and behaviours toward older adults. Some good examples of this are the promotion of more active senior years and an inclusive society that is free of ageism. The Action Plan 2017-2022 is also part of this commitment to promote positive and appropriate behaviours by emphasizing the importance of well-treatment toward older adults. In this action plan, promoting well-treatment runs parallel with countering mistreatment and is seen as a complementary lever in the fight against the mistreatment of older adults.

Some of the actions already underway or being supported by the government to prevent older adults mistreatment and promote well-treatment

- Deployment throughout Québec of the program of *It's Not Right! Neighbours, Friends and Families for Older Adults* to help friends and family recognize the signs of the mistreatment of older adults and take simple and practical steps to help, respectfully and safely (CIUSSS West-Central Montreal).
- Updating and reprinting of the brochure *Les agressions sexuelles contre les personnes aînées existent et marquent profondément… Soyons vigilants*, as part of the Government's Strategy to Prevent and Counter Sexual Violence. 2016-2021.
- Holding of information sessions on mistreatment and fraud for seniors, through the program Aîné-Avisé (FADOQ, Sûreté du Québec).
- Publication of the guide *Aînés et consommation. Des droits à faire valoir pour éviter les soucis*, which is aimed at educating older adults about their rights and helping them prevent problems that may affect them in particular as consumers (Office de la protection du consommateur).

OBJECTIVES

1.1. Raise awareness and mobilize the population of Québec regarding the phenomenon of older adults mistreatment and its consequences.

1.2. Adapt certain settings and living environments to counter different types of mistreatment.

1.3. Develop and promote well-treatment behaviours toward older adults.

OBJECTIVE 1.1.

Raise awareness and mobilize the population of Québec regarding the phenomenon of older adults mistreatment and its consequences.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
1	Develop and disseminate a public service campaign to expose the mistreatment of older adults.	**Famille-SA and SCG**	**2018**
2	Develop and make available various awareness-raising methods and tools related to mistreatment, including financial and material mistreatment, as well as a well-treatment approach toward older adults.	**Famille-SA**	**Ongoing**
3	Sensitize caregivers of older adults to the phenomenon of mistreatment, integrating the information into various communication tools and activities carried out by Appui (Support).	**Famille-SA and Appui**	**Ongoing**

OBJECTIVE 1.2.

Adapt certain settings and living environments to counter different types of mistreatment.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
4	Adapt and implement policies to counter the mistreatment of residents in residential and long-term care settings.	**MSSS** *Famille-SA*	**2017-2020**
5	Disseminate and promote regulations on the use of cameras and other technological means of surveillance in facilities operating as long-term care hospital centres (CHSLD).	**Famille-SA and MSSS**	**Ongoing**

OBJECTIVE 1.3.

Develop and promote well-treatment behaviours toward older adults.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
6 ⚥	Identify so-called "well-treatment" practices in care settings, combining hard and soft skills, and promote them to employees in the health and social network.	**Famille-SA** *MSSS*	**2017-2020**
7	Raise awareness and mobilize the public regarding well-treatment of older adults.	**CPQ**	**2017-2021**
8	Promote well-treatment in private seniors' residences through awareness-raising activities and tools.	**MSSS** *Famille-SA*	**2017-2020**

ORIENTATION 2

Encourage early detection and appropriate interventions

Early detection of situations of mistreatment can help prevent further violations. To achieve this, employees must be informed, trained and equipped to detect various types of mistreatment, as well as to intervene appropriately with the mistreated older adults, their friends and family, and the person who mistreates. Improving knowledge about mistreatment experienced by women and men also ensures that the types of intervention are better suited to the respective needs of each gender.

There is a need to better equip and support certain actors who have not all been reached to date and who are frequently witnesses to situations of mistreatment, in particular in cases of financial or material mistreatment. For example, these may be employees of financial institutions such as accountants and notaries. Several measures from the Action Plan 2017-2022 are devoted to this.

Situations of older adults mistreatment are often complex and involve several people:

- The mistreated older adult, with the personal characteristics that are specific to them.
- The senior's friends and family, who are often involved in the abusive situations. This involvement may be negative, for example when the person who mistreates comes from the senior's circle of friends, or positive, when the senior is supported by a relative in a situation of mistreatment. Isolation and lack of social support are also factors to be considered since they predispose individuals to abuse.[69] The senior then becomes the only person who can testify to the mistreatment to which they are subjected, making assistance and support all the more necessary.
- Various stakeholders and professionals who experience the mistreatment of older adults because they have to deal with it in their work. When they do recognize it, they often wonder how they can intervene, for various reasons. The reasons may include applicable laws, professional secrecy,[70] absence of defined procedures,[71] and respect for the will of the mistreated older adult.[72] To a certain extent, these may become obstacles to intervention.

In this respect, for an abusive situation to cease, the expertise of several jurisdictions may be necessary (health and social services network, justice, public safety, community organizations, etc.). Initiatives encouraging intersectorality and interdisciplinarity are desirable, always with a view to ensuring that a better safety net is built around the mistreated older adult and that they receive effective follow-up.[73,74]

In adopting *An Act to combat maltreatment of seniors and other persons of full age in vulnerable situations*, the Government of Québec, supports intersectoral work by, among other measures, developing a national framework agreement on criminal and penal forms of the mistreatment of older adults and its deployment throughout Québec through concerted intervention processes. People living in situations of mistreatment can then count on the speedy mobilization and coordination of services, including the health and social services network, police, prosecutors, criminal and penal prosecutions, etc. in order to stop the abuse.

Government actions that are already underway to promote early detection and appropriate intervention

- Encouraging municipalities, RCMs and Aboriginal communities, through the Municipalité amie des aînés (MADA) program, to promote prevention and counter the mistreatment of older adults through various levers (Famille-SA).
- Implementing a memorandum of understanding between the Public Curator and the Commission des droits de la personne et des droits de la jeunesse to optimize the effectiveness of interventions (CPQ and CDPDJ).
- Using the Public Curator's investigative power to detect and deal with financial mistreatment of incapacitated persons (CPQ).

OBJECTIVES

2.1. Inform, train and equip actors on concepts related to the mistreatment of older adults, including financial and material mistreatment.

2.2 Encourage and support provincial, regional and local initiatives to counter the mistreatment of older adults.

2.3. Support the development and implementation of multisectoral agreements or other mechanisms of intervention and consultation aimed at helping and supporting mistreated older adults and the various stakeholders involved.

2.4. Recognize and respond to various risk and vulnerability factors.

OBJECTIVE 2.1.

Inform, train and equip actors[13] on concepts related to the mistreatment of older adults, including financial and material mistreatment.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
9 ⚥	Update and implement the training designed by the Elder Mistreatment Helpline on the mistreatment of older adults for professionals in the health and social services network and stakeholders in the community.	**Famille-SA** *MSSS*	**2017-2018** **Ongoing**
10	Organize a meeting to discuss the *Initiatives de travail de milieu auprès des personnes aînées en situation de vulnérabilité ou à risque de fragilisation* (ITMAV) with the aim of refining the practices of people working in senior environments and allowing them to discuss their interventions.	**Famille-SA** *AQCCA*	**2018**
11	Develop and deploy a provincial dissemination strategy for the *Guide de référence pour contrer la maltraitance envers les personnes aînées.*	**Famille-SA** *MSSS*	**2017** **Ongoing**
12	Raise awareness of the mistreatment of older adults among community organizations and of the role they can play in countering it.	**Famille-SA** *MSSS*	**Ongoing**
13	Disseminate, in education and higher education institutions, available tools and training on the mistreatment of older adults and on promoting a well-treatment approach toward older adults.	**MEES** *Famille-SA*	**Ongoing**
14	Carry out awareness-raising activities with agents and partners of the Société d'habitation du Québec (SHQ) to prevent and detect situations of the mistreatment of older adults.	**SHQ** *Famille-SA*	**2017-2022**
15	Draft and publish a guide for the industry [14] that is overseen by the Autorité des Marchés Financiers, setting out guidelines on good practices for people in vulnerable situations.	**AMF** *Famille-SA*	**2018**

13. "Actor" means any person who is likely to detect or intervene in situations of mistreatment, including staff of the health and social services network (HSSS), of financial institutions, volunteers, managers, community organizations, community workers, etc.
14. The Autorité des marchés financiers (AMF) oversees Québec's financial sector, notably the fields of insurance, securities, derivatives, deposit-taking institutions (except banks) and the distribution of financial products and services.

16	Design, make available and distribute to financial sector stakeholders a checklist pointing out the signs and risk factors that can help identify situations of financial mistreatment among older adults.	**AMF** *Famille-SA*	**2019** **Ongoing for distribution**
17	Develop and provide financial sector stakeholders with an information session on preventing, detecting and intervening in situations of the mistreatment of older adults.	**AMF** *Famille-SA and MJQ*	**2019**
18	Continue to offer talks on the prevention of financial fraud among older adults, through senior associations and to stakeholders in the financial sector working with this clientele.	**AMF** *Famille-SA and MJQ*	**2017-2019**
19	Disseminate information on the mistreatment of older adults in the police community.	**MSP**	**Ongoing**
20	Update the detection, intervention and investigation techniques in the *Guide de pratiques policières.*	**MSP**	**Once during the 5 years of the Action Plan**
21 ⚥	Update training materials on the mistreatment of older adults in the police patrol basic training program.	**MSP**	**2017**
22	Develop a directive for criminal and penal prosecutors covering all of their obligations and responsibilities toward victims of criminal acts and vulnerable witnesses, including mistreated older adults.	**DPCP**	**2018**
23	Add a section on offences against seniors to the economic crime training given to prosecutors in criminal and penal proceedings.	**DPCP**	**2019**
24	Develop and implement a strategy for the deployment of various training sessions on the mistreatment of older adults to stakeholders in the health and social service network.	**MSSS** *Famille-SA*	**2018-2020**

OBJECTIVE 2.2.

Encourage and support provincial, regional and local initiatives to counter the mistreatment of older adults.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
25	Develop and disseminate a thematic pamphlet on combating the mistreatment of older adults, aimed at municipalities, RCMs and Aboriginal communities, outlining the procedure for obtaining the classification of "Municipalité amie des aînés" (MADA).[15]	**Famille-SA**	**2018-2019**
26	Support projects and initiatives that contribute to preventing and responding to the mistreatment of older adults through the program Québec ami des aînés (QADA).	**Famille-SA**	**Ongoing**
27 ⚥	Facilitate the setting up of "friendly visits" in which community organizations can participate, with the aim of ending the isolation of older adults in ethnocultural minorities and combating situations of the mistreatment of older adults.	**MIDI**	**2017-2018**[16]

OBJECTIVE 2.3.

Support the development and implementation of multisectoral agreements or other mechanisms of intervention and consultation aimed at helping and supporting mistreated older adults and the various stakeholders involved.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
28 ⚥	Develop a province-wide framework agreement to ensure better protection and provide assistance to older adults in vulnerable situations who are victims of mistreatment.	**Famille-SA** *AMF, CDPDJ, CPQ, DPCP, MJQ, MSP, MSSS*	**2017**
29 ⚥	Deploy the concerted intervention processes of the Québec framework agreement on the mistreatment of older adults throughout the province.	**Famille-SA** *AMF, CDPDJ, CPQ, DPCP, MJQ, MSP, MSSS*	**2017-2020**
30 ⚥	Strengthen the role of regional coordinators specializing in the mistreatment of older adults, in particular by having them coordinate the development and deployment of the concerted response processes of the provincial framework agreement on the mistreatment of older adults in their respective regions.	**Famille-SA** *MSSS*	**Ongoing**
31 ⚥	Continue deployment of the *Initiatives de travail de milieu auprès des personnes aînées en situation de vulnérabilité ou à risque de fragilisation* (ITMAV).	**Famille-SA**	**Ongoing**
32	Assess the possibility of establishing an interview protocol for the mistreatment of older adults victims.	**MJQ** *Famille-SA, AMF, DPCP, MSP*	**2017-2021**

15. A municipality classified as MADA is: actively combating ageism; adapting its policies, services and structures; acting in a comprehensive and integrated way; promoting the participation of the older adults; consulting and mobilizing the entire community (Ministère de la Famille website, "Qu'est-ce qu'une municipalité amie des aînés? Qu'est-ce qu'une municipalité amie des aînés? ").
16. Ongoing if the results of the pilot project prove satisfactory.

OBJECTIVE 2.4.

Recognize and respond to the various risk[17] and vulnerability factors.[18]

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
33	Integrate risk and vulnerability factors into risk management analyses of the surveillance of privacy protection plans.	**CPQ**	**2017**
34 ⚥	Raise awareness of the mistreatment of older adults among seniors who speak neither French nor English by overcoming the language barrier through the use of adapted channels.	**MIDI** *Famille-SA*	**2017-2018**

17. Risk factors are related more to the social and human environment (e.g., conflict with family members or cohabitation with one or more relatives).
18. Vulnerability factors are related to personal characteristics such as health status or behaviour (e.g., cognitive loss, mental health problems, heavy psychotropic use, etc.).

ORIENTATION 3

Promote and facilitate disclosure of situations of mistreatment, including situations of financial and material mistreatment

Although the detection of certain situations of mistreatment can at times be complex, it is even more difficult getting older adults to recognize that they are being mistreated, and ultimately, that they should put an end to the mistreatment. The disclosure of situations of abuse itself is an important issue in the fight against it.

Breaking the silence about a situation of mistreatment is a difficult step for the mistreated person. The family (spouse, child and other family members) of the person affected is often identified as the primary source of the mistreatment, which means that the older adults must sometimes report a loved one, such as a son or daughter. On the other hand, a number of factors may induce the mistreated older adult to seek help:[75] a feeling of trust in the person offering support, a safe environment, more benefits than disadvantages, a sense of preventing something worse from happening, believing that the person who mistreates will be able to change with help, and so on. When mistreated older adults are aware of their rights, and of the services and resources available to help them (also to help the person who mistreates), this can facilitate disclosure.

The adoption of *An Act to combat maltreatment of seniors and other persons of full age in vulnerable situations* facilitates disclosure of situations of mistreatment, through:

- The obligation for health and social service providers and all professionals (except lawyers and notaries) to report situations of mistreatment that seriously impair the physical or psychological integrity of those residing in a residential and long-term care centre, as well as of incapable persons under tutorship, curatorship or whose protection mandate has been approved;
- The processing of complaints and alerts by the local Services Quality and Complaints Commissioner;
- The lifting of confidentiality or professional secrecy when there is a serious risk of death or serious injury, protection from retaliation and immunity from prosecution.

Government actions that are already underway to promote and facilitate the disclosure of situations of mistreatment

- Dissemination of information on victims' rights and the services and recourses available to them in the justice network (MJQ).
- Dissemination of training content in the judicial network on legal provisions allowing the disclosure of confidential information (MJQ).
- Use of the Info-Aidant service, a free and confidential telephone crisis line that provides information and professional referrals to caregivers of seniors and their families, health professionals and employees (Appui).
- Updating by regional coordinators of the regional resources directory, which offers services or support in situations of mistreatment of older adults (Famille-SA).
- Support and assistance services offered by the Direction des services aux personnes handicapées et à leur famille (OPHQ).
- The work of the local commissioner on service quality and complaints, who is responsible for respecting the rights of users and diligent handling of their complaints (MSSS).
- Access to the Elder Mistreatment Helpline, which offers the public a listening and referral service specifically for the mistreatment of older adults, as well as professional support in the form of interventions by different agencies in mistreatment situations (Family-SA and CIUSSS West-Central Montreal).

OBJECTIVES

3.1. Improve knowledge about the various services and recourses available to mistreated older adults, and promote them.

3.2. Improve and diversify the provision of services for mistreated older adults and their family members, as well as for the person who mistreates.

OBJECTIVE 3.1.

Improve knowledge about the various services and recourses available to mistreated older adults, and promote them.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
35	Produce tools and organize information sessions on rights and recourses, as well as on the role of the Commission en matière d'exploitation des personnes âgées, particularly with regard to groups and organizations working with Aboriginal peoples, ethnocultural communities, and lesbian, gay, bisexual and transgender (LGBT) seniors.	**CDPDJ**	**2018** **Ongoing**
36	Establish, reinforce and disseminate the main trajectories of services to be used in situations of mistreatment of older adults.	**Famille-SA** *AMF, MSP, SCF, DPCP, OPHQ, MIDI, SHQ, CDPDJ, MJQ, CPQ*	**2017-2019**

OBJECTIVE 3.2.

Improve and diversify the provision of services for mistreated older adults and their family members, as well as for the person who mistreates.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
37	Deploy initiatives so that the intervention team specializing in combating the exploitation of seniors can better take into account social diversity and the plurality of senior models when processing exploitation complaints, particularly among Aboriginal people, ethnocultural minorities and lesbian, gay, bisexual, or transgender (LGBT) people.	**CDPDJ**	**Ongoing**
38	Contribute to the development of mediation training in the context of protective mandates and regimes.	**CPQ**	**2017**
39 ⚤	Maintain the province's Elder Mistreatment Helpline, known as Aide Abus Aînés, and expand its application to make it accessible to all, in particular by offering an interpretation service to overcome any language barrier. 1 888 489-ABUS (2287)	**Famille-SA** *MSSS*	**Ongoing**
40	Foster dispute prevention and resolution services that are appropriate for older adults, such as mediation.	**MJQ** *Famille-SA*	**2017-2021**

ORIENTATION 4

Develop knowledge and improve knowledge transfer

Multifactorial social issues such as the mistreatment of older adults require constant research. Developing knowledge is therefore regarded by the government as one of the prioritized directions of the Action Plan 2017-2022, while taking into account gender differences.

The next five years will be devoted to establishing a clear picture of the prevalence of the mistreatment of older adults in Québec and carrying out various projects and studies aimed at documenting the mistreatment of older adults. Particular attention will be paid to the situation of ethnocultural and Aboriginal minorities, as well as that of LGBT seniors who are disabled and incapacitated. Promoting well-treatment will also be among the prioritized subjects of study.

Government actions that are already underway and aimed at the development of knowledge and knowledge transfer

- Contribution of the Research Chair on Older Adults Mistreatment at the Université de Sherbrooke to the development, dissemination and diffusion of knowledge as well as the introductory and continuing training of professionals concerned (45-hour course devoted exclusively to the mistreatment of older adults) (Famille-SA).
- Dissemination of information on victims' rights and the services and recourses available to them in the justice network (MJQ).
- Forum of Partners to Counter the Mistreatment of Older Adults (Famille-SA).

OBJECTIVES

4.1. Develop and disseminate general knowledge on the mistreatment of older adults and the promotion of a well-treatment approach toward seniors.

4.2. Increase and disseminate knowledge on how mistreatment is experienced specifically by older adults from ethnocultural, aboriginal, LGBT, disabled or incapacitated minorities.

OBJECTIVE 4.1.

Develop and disseminate general knowledge on the mistreatment of older adults and the promotion of a well-treatment approach toward seniors.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
41	Support the Research Chair on Mistreatment of Older Adults at the Université de Sherbrooke	**Famille-SA**	**Ongoing**
42	Develop and carry out a Québec-wide survey on the prevalence of the mistreatment of older adults phenomenon.	**Famille-SA** *ISQ*	**2017-2020**
43	Support networking and the dissemination of knowledge and best practices through the Forum of Partners to Counter Older Adults Mistreatment.	**Famille-SA**	**Every 12 to 18 months**
44	Organize a forum on financial mistreatment involving stakeholders in the financial sector.	**Famille-SA**	**2018**
45	Develop and publish web content on preventing financial mistreatment, addressed to retirees, older adults and their friends and families, as well as to stakeholders in the financial sector working with seniors.	**AMF** *MJQ and Famille-SA*	**2017-2019**
46	Identify and develop surveillance indicators to determine the nature, percentage and trends of various types of mistreatment.	**MSSS** *Famille-SA*	**2017-2018**
47	Disseminate, through knowledge transfer initiatives, the *Rapport québécois sur la violence et la santé*, in particular the section on the mistreatment of older adults.	**MSSS** *INSPQ and Research Chair on Older Adults Mistreatment*	**2018-2019**
48	Update the newsletter on police statistics of crimes against seniors.	**MSP**	**Ongoing**

OBJECTIVE 4.2.

Increase and disseminate knowledge on how mistreatment is experienced specifically by older adults from ethnocultural, aboriginal, LGBT, disabled or incapacitated minorities.

	MEASURES	ENTITIES *RESPONSIBLE*	TARGET
49	Support research on the psychological and financial mistreatment experienced by persons with disabilities through the Experimental Subsidy Program of the Office des personnes handicapées du Québec.	**OPHQ** *Famille-SA*	**2018-2020**
50	Support the development of various research projects concerning older adults mistreatment, well-treatment and best practices to be put in place among different groups of seniors, whether they are men or women, ethnocultural, indigenous, LGBT, disabled or incapacitated minorities.	**Famille-SA** *MSP, MSSS, SCF, DPCP, OPHQ, MIDI, SHQ, CDPDJ, AMF, MJQ*	**Ongoing**
51	Develop an awareness-raising tool and training content specifically oriented to the realities of LGBT seniors for the benefit of professionals in the health and social services network and those working in various senior living environments (at home, RPA, RI-RTF, CHSLD).	**Famille-SA** *MSSS*	**2017-2020**
52	Document the various collaboration models available to support female seniors who are victims of spousal violence, in order to target best practices and promote their dissemination.	**SCF** *Famille-SA, MSSS, INSPQ*	**2017-2020**

MEASURES

Oversight and Evaluation Measures

The Secrétariat aux aînés de la Ministère de la Famille is responsible for coordinating and implementing the Governmental Action plan to Counter Mistreatment of Older Adults 2017-2022. It is supported by an inter-ministerial committee and a measures oversight committee, both of which are drawn from the 13 ministries and agencies involved in one or more measures of the action plan. These committees must oversee the execution of the measures under their responsibility, as well as the achievement of targets set and their evaluation, if necessary. In the accountability process, measures that take into account the different characteristics of women and men should have gender-based results.

The Forum of Partners to Counter Older Adults Mistreatment will continue to be a focal point for all stakeholders in demonstrating to organizations involved in countering mistreatment the progress being made by the various measures in the Action Plan. This forum will be held every 12 to 18 months, depending on needs and possible advances made, such as the dissemination of data and analysis results from the Québec study on the prevalence of the mistreatment of older adults.

In accordance with the guidelines issued by the Treasury Board on oversight and evaluation, the Action Plan 2017-2022 will be accompanied by an evaluation framework. It will include implementation or outcome indicators for each of the measures included in the plan. It will also identify some measures to be further evaluated and will ensure that gender-based analysis is included. The various actions deployed during the five years covered by the plan will be evaluated in terms of the overall rate of deployment of the action plan. The oversight and evaluation framework and review of the action plan will be coordinated by the Secrétariat aux aînés, in collaboration with the Direction de la recherche, de l'évaluation et de la statistique de la Ministère de la Famille and with the members of the inter-ministerial Action Plan committee.

CONCLUSION

Conclusion

The Governmental Action plan to Counter Mistreatment of Older Adults affirms the government's commitment to ensuring that Québec society is more respectful, inclusive, healthy and safe for older adults. It is also in line with the main principles of active aging, namely the full economic, social and civic participation of the older adults. When older adults are mistreated, they are denied this involvement in their community. They are also dispossessed of some of their rights and see their quality of life directly affected.

The rapid aging of the population can only add greater urgency to the need to implement more concerted solutions to assist mistreated older adults and guide them, at their own pace, toward solutions that will put an end to these situations. It also underlines the need for reinforcement of behaviours that are respectful and open, from an early age.

Governmental action to counter the mistreatment of older adults, coupled with all the initiatives already in place in many localities and regions of Québec, has been a success story in recent years. There is still work to be done and the 52 measures provided in this Action Plan will also bring further progress in countering the mistreatment of older adults and promoting a well-treatment approach toward seniors.

The solution also lies in taking individual and collective responsibility for the older adults, for parents and grandparents, and also for neighbours, friends and co-workers. Let us be vigilant and available, offer our support, and rethink some of our behaviours. Today more than ever, we must join forces to combat the mistreatment of older adults.

APPENDIX 1

Legal Framework

In Québec, the Canadian Charter of Human Rights and Freedoms, the Civil Code, Criminal Code, the ***Act to combat maltreatment of seniors and other persons of full age in vulnerable situations,*** as well as various laws and regulations, apply in certain situations of the mistreatment of older adults. As a whole, they recognize the rights of seniors and allow, in some cases, for the application of sanctions and penalties.

The following table provides the main legal framework for combating the mistreatment of older adults. Its content is based on the detailed information in Chapter 7, "Connaître les mesures légales et juridiques" (Knowing the legal and judicial measures)" of the *Guide de référence pour contrer la maltraitance envers les personnes aînées*[19] supplemented by information in the ***Act to combat maltreatment of seniors and other persons of full age in vulnerable situations***.

The information it contains is reported on the basis of the state of the law at the time of its drafting, but must be interpreted in the light of the law's evolution. It should be noted that legal and regulatory texts prevail over the contents of Appendix 1 presented below.

19. *Guide de référence pour contrer la maltraitance envers les personnes aînées*, pages 449 to 561.

GENERAL LAWS

LAWS	SUMMARY	ORGANIZATIONS RESPONSIBLE FOR ITS APPLICATION OR THAT MAY PARTICIPATE IN THE PROCESS
Canadian Charter of Rights and Freedoms	The Canadian Charter of Rights and Freedoms concerns relations between the State and individuals. It guarantees the rights and freedoms set out in it, including freedom of conscience and religion. It also guarantees the right to life, liberty and safety of persons, and prohibits all cruel and unusual treatment or punishment.	**Competent court**
Charter of Human Rights and Freedoms	The Québec Charter of Human Rights and Freedoms concerns relations between citizens and with their institutions. The right to life, personal security, inviolability and freedom are affirmed by this charter. It also declares that everyone has the right to full and equal recognition and enjoyment of their rights and freedoms, without distinction, exclusion or preference based, in particular, on age, disability or use of a means to overcome this disability. Within the meaning of the Charter of Human Rights and Freedoms, to exploit an elderly person or a person with a disability is to take advantage of their vulnerability or dependency by depriving them of their rights, including money or property, subjecting them to abuse, depriving them of health, security or well-being, or violating their dignity.	**Human Rights Tribunal** **Commission des droits de la personne et des droits de la jeunesse**
Criminal Code	As a guideline, certain criminal offences may constitute different types of abuse: ▪ Physical abuse (e.g., assault causing bodily harm, aggravated assault, forcible confinement, etc.) ▪ Neglect (e.g., criminal negligence, failure to provide the necessities of life, etc.) ▪ Sexual abuse (e.g. sexual assault, etc.) ▪ Psychological and emotional abuse (e.g., harassment, threat of death or bodily harm, harassing communications, bullying, etc.) ▪ Financial and property abuse (theft, extortion, fraud, identity theft, etc.)	**Court of Québec** **Superior Court of Québec** **Court of Appeal of Québec** **Director of Criminal and Penal Prosecutions**
Civil Code of Québec	The Civil Code of Québec provides general provisions applicable to certain situations of abuse, in particular: ▪ Physical, sexual and psychological abuse (e.g., every person is inviolable and is entitled to their integrity; and every person has a duty to abide by the rules of conduct that, depending on circumstances, usage or the law, do not cause harm to others, etc.) ▪ Financial abuse (free and informed consent, unfair terms in a contract, donation, etc.) Conditions of dwellings are also covered by the Civil Code, at least when they pertain to renting a dwelling (e.g., peaceful enjoyment of the premises, poor condition of the dwelling, etc.). However, these rules do not apply, in particular, to rooms in a health facility.	**Court of Québec** **Superior Court of Québec** **Court of Appeal of Québec**

SECTORAL LAWS

LAWS	SUMMARY	ORGANIZATIONS RESPONSIBLE FOR ITS APPLICATION OR THAT MAY PARTICIPATE IN THE PROCESS
Application of *An Act to combat maltreatment of seniors and other persons of full age in vulnerable situations* will also contribute to this.	The *Act to combat maltreatment of seniors and other persons of full age in vulnerable situations* aims to prevent situations, facilitate the reporting of abusive situations, and promote an effective intervention process in such situations. This Act establishes or reinforces the following protective measures: 1. Compulsory adoption by establishments in the health and social services network of a policy to combat the mistreatment of older adults in vulnerable situations who are receiving health and social services 2. Processing of complaints and reports of mistreatment by the Local Service Quality and Complaints Commissioner 3. Conclusion of a provincial framework agreement on the mistreatment of older adults, which is deployed by region and which can then be applied to any adult in a situation of vulnerability 4. Lifting of confidentiality or professional secrecy when there is a serious risk of death or serious injury 5. Regulatory oversight of the use, by users or their representatives, of surveillance mechanisms, such as cameras The law also makes it mandatory for all health and social service providers and all professionals (except lawyers and notaries) to report situations of mistreatment that seriously undermine the physical or psychological integrity of the following persons: ▪ Persons residing in residential and long-term care centres ▪ Incapacitated persons (under tutelage, curatorship or whose protection mandate has been approved) Such situations of mistreatment must be reported to the Local Complaints and Quality Assurance Commissioner of an institution if the person is receiving services there, or in other cases, to the appropriate police force.	**Ministère de la Famille (including the Secrétariat aux aînés)** **Ministère de la Santé et des Services sociaux** **Ministère de la Sécurité publique** **Ministère de la Justice du Québec** **Director of Criminal and Penal Prosecutions** **Autorité des marchés financiers** **Commission des droits de la personne et des droits de la jeunesse** **Public Curator of Québec** **Local Complaints and Quality Assurance Commissioner** **Police Force**
Act respecting health services and social services	The *Act respecting health services and social services* establishes a service plan whose purpose is, among other things, to maintain and improve the physical, mental and social capacity of persons. In combating mistreatment, the related objectives of the Act are to: ▪ Take action on determining factors of health and welfare and ensure that individuals, families and communities take more responsibility in that regard through prevention and promotion ▪ Foster the recovery of the individual's health and well-being ▪ Foster the adjustment or rehabilitation of the individual, as well as their social integration or reintegration ▪ Reduce the impact of problems that threaten the stability, fulfillment or autonomy of individuals	**Ministère de la Santé et des Services sociaux** **Committee of Users** **Local Complaints and Quality Assurance Commissioner**

SECTORAL LAWS

LAWS	SUMMARY	ORGANIZATIONS RESPONSIBLE FOR ITS APPLICATION OR THAT MAY PARTICIPATE IN THE PROCESS
Public Curator Act	The *Public Curator Act* governs, in particular, the administrative organization and some of the powers and duties of the Public Curator of Québec. Under this Act, the Public Curator may intervene in any proceedings pertaining to the homologation or revocation of a given mandate in view of incapacity (or a protection mandate), or to the application of protective supervision (tutor or curator).	**Public Curator of Québec**
Act respecting the Health and Social Services Ombudsman	The *Act respecting the Health and Social Services Ombudsman* provides that the Public Protector exercise the functions of Health and Social Services Users. The Public Protector's main function is to examine complaints made by users. The Public Protector ensures that users are respected and that their rights, as defined by the *Act respecting health services and social services*, are recognized.	**Québec Ombudsman**
Act respecting the protection of persons whose mental state presents a danger to themselves or to others	The *Act respecting the protection of persons whose mental state presents a danger to themselves or to others* complements the Civil Code of Québec concerning the confinement in a health and social services institution of persons whose mental state presents a danger to themselves or to others, and concerning the psychiatric assessment carried out to determine the necessity for such confinement.	**Ministère de la Santé et des Services sociaux**
Act respecting assistance for victims of crime	The *Act respecting assistance for victims of crime* includes several provisions aimed at addressing the needs and concerns of victims of crime. The Act provides that a person who is a victim of a criminal offence has the right to: ▪ Be treated with courtesy, fairness, understanding and with respect for their privacy ▪ Receive prompt and fair restitution or compensation for damage suffered ▪ Receive medical, psychological and social care, as their condition may require, as well as other assistance services capable of meeting their needs for shelter and support or referral to other services better suited to provide them with assistance	**Ministère de la Justice du Québec** **Bureau d'aide aux victimes d'actes criminels** **Centres d'aide aux victimes d'actes criminels**
Crime Victims Compensation Act	The *Crime Victims Compensation Act* allows crime victims to obtain financial support and compensation for physical and psychological injuries.	**Ministère de la Justice du Québec** **Direction de l'indemnisation des victimes d'actes criminels** **Centres d'aide aux victimes d'actes criminels**

SECTORAL LAWS

LAWS	SUMMARY	ORGANIZATIONS RESPONSIBLE FOR ITS APPLICATION OR THAT MAY PARTICIPATE IN THE PROCESS
Act respecting the Autorité des marchés financiers	The *Act respecting the Autorité des marchés financiers* establishes the mission of the Autorité des marchés financiers: to provide assistance to consumers of financial products and services, in particular by providing consumer-oriented educational programs on financial products and services, processing complaints filed by consumers and giving consumers access to dispute-resolution services, and implementing consumer protection and compensation programs. The AMF also focuses on enforcing laws specific to each of the areas it oversees, including the *Act respecting insurance*, the *Act respecting financial services cooperatives*, the *Act respecting the distribution of financial products and services*, the *Securities and the Derivatives Act*. These laws contain numerous provisions aimed at protecting consumers of financial products and services. The Authority may also call upon the services of self-regulatory organizations such as the Chambre de la sécurité financière, the Chambre de l'assurance de dommages and the Investment Industry Regulatory Organization of Canada, to which certain oversight powers have been delegated.	**Autorité des marchés financiers** **Administrative tribunal of financial markets** **Superior Court of Québec** **Chambre de la sécurité financière** **Chambre de l'assurance de dommages** **Investment Industry Regulatory Organization of Canada**
Consumer Protection Act	The *Consumer Protection Act* applies to any contract for goods or services (e.g., itinerant sale, purchase of a trip, etc.) entered into between a consumer and a merchant in the course of carrying out their business.	**Office de la protection du consommateur du Québec**

APPENDIX 2

Aid Resources

Help, Referral and Support

For all emergencies
9-1-1

Elder Mistreatment Helpline
1 888 489-ABUS (2287)

http://www.aideabusaines.ca/

Centres d'assistance et d'accompagnement aux plaintes (CAAP)
Toll-free line for all regions of Québec

1 877 767-2227

http://fcaap.ca/caap/

Centres d'aide aux victimes d'actes criminels (CAVAC)
1 866 LE CAVAC (532-2822)

http://www.cavac.qc.ca/

Centres d'aide et de lutte contre les agressions à caractère sexuel (CALACS)
1 877 717-5252

http://www.rqcalacs.qc.ca/

Centres intégrés de santé et de services sociaux (CISSS) and Centres intégrés universitaires de santé et de services sociaux (CIUSSS)
To find contact information for CISSSs, CIUSSSs, CLSCs, family medicine groups, hospitals and pharmacies:

http://www.sante.gouv.qc.ca/repertoire-ressources/

Centre de prévention du suicide / Suicide Prevention Centre
1-866-APPELLE (277-3553)

https://www.cpsquebec.ca/

Research Chair on Older Adults Mistreatment
http://www.maltraitancedesaines.com/fr/

info@maltraitancedesaines.com

Complaints and Quality Assurance Commissioner
The list of commissioners for each region is available at:

http://sante.gouv.qc.ca/systeme-sante-en-bref/plaintes/#liste-commissaires

Conseil pour la protection des malades
1 877 CPM-AIDE (276-2433)

https://www.cpm.qc.ca/

Regional coordinators specializing in combating older adults mistreatment
The list of coordinators for each region is available at:

https://www.mfa.gouv.qc.ca/fr/publication/Documents/Liste_des_coordonnateurs.pdf

Info-Aidant
1 855 852-7784

https://www.lappui.org/

Info-Santé 8-1-1
8-1-1

Initiatives de travail de milieu auprès des aînés en situation de vulnérabilité (ITMAV)
Map of current projects:

https://www.mfa.gouv.qc.ca/fr/publication/Documents/Carte-ITMAV-16-17-combo.pdf

Indemnisation des victimes d'actes criminels (IVAC)
1 800 561-4822

http://www.ivac.qc.ca/

Toll-free helpline – Sexual Assaults
1-888-933-9007

http://www.agressionssexuelles.gouv.qc.ca/fr/

Regroupement provincial des comités des usagers
To find a committee:

http://www.rpcu.qc.ca/fr/trouver-un-comite.aspx

Police Service – Sûreté du Québec
General number: 514 598-4141

http://www.sq.gouv.qc.ca/

Service de police de la Ville de Montréal (SPVM)
1 514 280-2222

INFO-CRIME Montréal (anonymous): 1 514 393-1133

https://www.spvm.qc.ca/

S.O.S. violence conjugale
1-800-363-9010

http://www.sosviolenceconjugale.ca/

Government organizations

Autorité des marchés financiers (AMF)
1 877 525-0337

https://lautorite.qc.ca/

Commission des droits de la personne et des droits de la jeunesse (CDPDJ)
1 800 361-6477

http://www.cdpdj.qc.ca/

Public Curator of Québec (CPQ)
1-800-363-9020

http://www.curateur.gouv.qc.ca/

Office des personnes handicapées du Québec
1 800 567-1465

1 800 567-1477 (teleprinter)

https://www.ophq.gouv.qc.ca/

Office de la protection du consommateur du Québec
1 888 672-2556

http://www.opc.gouv.qc.ca/

Québec Ombudsman
1 800 463-5070

https://protecteurducitoyen.qc.ca/

APPENDIX 3

List of organizations that submitted a report or took part in the consultations

(in alphabetical order)

1. Kativik Regional Government
2. Alliance des associations de retraités (AAR)
3. L'Appui national – Société de gestion pour le soutien aux proches aidants
4. À cœur d'homme | Réseau d'aide aux hommes pour une société sans violence
5. First Nations Chief of Police Association
6. Association féminine d'éducation et d'action sociale (AFEAS)
7. Association des groupes d'intervention en défense des droits en santé mentale du Québec (AGIDD-SMQ)
8. Association Prévention Suicide Premières Nations et Inuits du Québec et du Labrador
9. Association québécoise des centres communautaires pour aînés (AQCCA)
10. Association québécoise de défense des droits des personnes retraitées et préretraitées (AQDR)
11. Association québécoise des directeurs et directrices d'établissement d'enseignement retraités (AQDER)
12. Association québécoise de gérontologie (AQG)
13. Association québécoise des infirmières et infirmiers en gérontologie (AQIIG)
14. Association québécoise de prévention du suicide (AQPS)
15. Association québécoise des retraité(e)s des secteurs public et parapublic (AQRP)
16. Association de professionnelles et professionnels retraités du Québec (APRQ)
17. Association des ressources intermédiaires d'hébergement du Québec (ARIHQ)
18. Association des retraitées et retraités de l'éducation et des autres services publics du Québec (AREQ-CSQ)
19. Barreau du Québec
20. Carrefour action municipale et famille (CAMF)
21. Centre facilitant la recherche et l'innovation dans les organisations, à l'aide des technologies de l'information et de la communication (CEFRIO)

22. Centre de recherche sur le vieillissement (CDRV) – Équipe de recherche sur les Municipalités amies des aînés

23. Antoine-Turmel Research Chair on the Legal Protection of Seniors – Université Laval

24. Research Chair on Homophobia – UQÀM

25. Research Chair on Older Adults Mistreatment – Université de Sherbrooke

26. Chambre des notaires du Québec (CNQ)

27. Coalition pour le maintien dans la communauté (COMACO)

28. Comité d'orientation régionale pour contrer la maltraitance envers les personnes aînées Mauricie et Centre-du-Québec

29. Comité lavallois en abus et violence envers les aînés (CLAVA)

30. Commission de la santé et des services sociaux des Premières Nations du Québec et du Labrador (CSSSPNQL)

31. Concertation estrienne contre la maltraitance des personnes aînées

32. Confédération des organismes de personnes handicapées du Québec (COPHAN)

33. Conférence des Tables régionales de concertation des aînés du Québec (CTRCA)

34. Conseil du statut de la femme

35. Conseil pour la protection des malades (CPM)

36. Conseil québécois LGBT

37. Cree Women of Eeyou Istchee Association (CWEIA)

38. Fédération des centres d'action bénévole du Québec (FCABQ)

39. Fédération des centres d'assistance et d'accompagnement aux plaintes (FCAAP)

40. Fédération des coopératives de services à domicile et de santé du Québec (FCSDSQ)

41. Fédération des maisons d'hébergement pour femmes (FMHF)

42. Fédération québécoise du loisir en institution (FQLI)

43. Fédération québécoise des Sociétés Alzheimer (FQSA)

44. Quebec Native Women (QNW)

45. Fondation Émergence

46. Fondation Institut de gériatrie de Montréal (FIUGM)

47. Avataq Cultural Institute

48. Fondation Institut de gériatrie de Montréal (FIUGM)

49. Elder Mistreatment Helpline – CIUSSS West-Central Montreal

50. Desjardins Group

51. Nunavik Elders Commitee

52. Ordre des dentistes du Québec

53. Ordre des ergothérapeutes du Québec (OEQ)

54. Ordre des infirmières et infirmiers du Québec (OIIQ)

55. Ordre des infirmières et infirmiers auxiliaires du Québec (OIIAQ)

56. Ordre des pharmaciens du Québec

57. Ordre professionnel des diététistes du Québec (OPDQ)

58. Ordre des psychologues du Québec

59. Ordre des travailleurs sociaux et des thérapeutes conjugaux et familiaux du Québec (OTSTCFQ)

60. SAVA (soutien aux aînés victimes d'abus) regional project, Vallée du Haut-Saint-Laurent, Grand Rassemblement des Aînés de Vaudreuil, members of the Table de concertation sous-régionale de la Montérégie-Ouest

61. Regroupement des aidants naturels du Québec (RANQ)

62. Regroupement des centres d'amitié autochtones du Québec (RCAAQ)

63. Regroupement interprofessionnel des intervenants retraités des services de santé (RIIRS)

64. Regroupement provincial des comités des usagers (RPCU)

65. Regroupement des offices d'habitation du Québec (ROHQ)

66. Regroupement des popotes roulantes et autres services alimentaires bénévoles (PRASAB)

67. Regroupement québécois des résidences pour aînés (RQRA)

68. Réseau FADOQ

69. Réseau d'action pour l'égalité des femmes immigrées et racisées du Québec (RAFIQ)

70. Réseau d'information des aînés du Québec (RIAQ)

71. Réseau des lesbiennes du Québec (RLQ) – Quebec Lesbian Network (QLN)

72. Réseau québécois des OSBL d'habitation (RQOH)

73. Service de police de la Ville de Montréal (SPVM)

74. Table régionale de concertation des aînés de la Côte-Nord

75. Table régionale maltraitance aînés Saguenay-Lac-Saint-Jean (TRÉMA)

APPENDIX 4

Initialisms and Acronyms

ADS
Gender-based analysis

AMF
Autorité des marchés financiers

AQCCA
Association québécoise des centres communautaires pour aînés

BAVAC
Bureau d'aide aux victimes d'actes criminels

CALACS
Centres d'aide et de lutte contre les agressions à caractère sexuel

CAVAC
Centre d'aide aux victimes d'actes criminels

CDPDJ
Commission des droits de la personne et des droits de la jeunesse

CHSLD
Centre d'hébergement et de soins de longue durée (Long-term care hospital centre)

CISSS/CIUSSS
Centres intégrés de santé et de services sociaux

Centres intégrés universitaires de santé et de services sociaux

CPQ
Public Curator of Québec

DPCP
Director of Criminal and Penal Prosecutions

Famille-SA
Ministère de la Famille (including the Secrétariat aux aînés)

HLM
Habitation à loyer modique

INSPQ
Institut national de santé publique du Québec

ISQ
Institut de la statistique du Québec

LGBT
Lesbian, gay, bisexual and transgender

LSSSS
Act respecting health services and social services

MADA
Municipalité amie des aînés

MEES
Ministère de l'Éducation et de l'Enseignement supérieur

MIDI
Ministère de l'Immigration, de la Diversité et de l'Inclusion

MJQ
Ministère de la Justice du Québec

MO
Ministries and organizations

RCM
Regional county municipalities

MSSS
Ministère de la Santé et des Services sociaux

MSP
Ministère de la Sécurité publique

PAGDSA
Plan d'action gouvernemental en matière de développement social autochtone

WHO
World Health Organization

OPHQ
Office des personnes handicapées du Québec

QADA
Québec ami des aînés

RI
Ressource intermédiaire (Intermediate resource)

RPA
Résidence privée pour aînés (Private seniors' residence)

RTF
Ressource de type familial (Family-type residence)

SAA
Secrétariat aux affaires autochtones

SCF
Secrétariat à la condition féminine

SCG
Secrétariat à la communication gouvernementale

SHQ
Société d'habitation du Québec

TIC
Technologies de l'information et des communications

REFERENCES

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1 MINISTÈRE DE LA FAMILLE ET DES AÎNÉS (2008). *Préparons l'avenir avec nos aînés : rapport de la consultation publique sur les conditions de vie des aînés*, Québec, Le Ministère, p. 21.

2 *Ibid*. p. 104.

3 *Ibid*. p. 107-109.

4 GOUVERNEMENT DU QUÉBEC (2016). *Guide de référence pour contrer la maltraitance envers les personnes aînées*, p. 17.

5 MINISTÈRE DE LA FAMILLE ET DES AÎNÉS (2010). *Governmental Action Plan to Counter Elder Abuse* 2010-2015, Québec, Le Ministère, 84 p.

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