



THINGS TO CONSIDER

Did domestic abuse exist in the relationship prior to the diagnosis of dementia?

Someone who experienced being a victim of domestic abuse who then develops dementia may find it much harder to come forward through fear of not being believed as a result of their condition. Their experience of abuse and isolation may therefore be increased and risk of harm to them escalating. Dementia may also cause a victim to re-live trauma experienced by previous abuse.

Someone who had been abusive to their partner previously who then develops dementia may cause significant risk to the victim; with them looking to try and exert their power and control over their partner/family member, and potentially becoming more unpredictable. In these circumstances, please speak to adult social care and GDASS.

Has domestic abuse in a relationship started following a diagnosis of dementia?

Domestic abuse is about power and control. If the person with dementia develops perceived abusive or aggressive behaviour, it is not likely this would be considered as domestic abuse, and instead is to be considered as a symptom of their condition.

If a carer becomes abusive when there was no abuse previously, carer stress should be considered. In this circumstance, please speak to adult social care and specialist dementia agencies.

If you are concerned about someone and are unsure how to respond contact:

GDASS

Gloucestershire Domestic Abuse Support Service (GDASS) is a service designed to reduce the level of domestic abuse and improve the safety of victims and their families.

Helpdesk: 01452 726570

Professionals Helpline: 01452 726561

e. support@gdass.org.uk

www.gdass.org.uk

MANAGING MEMORY TOGETHER

We support people who are worried about memory, people with dementia and carers of people with dementia, in Gloucestershire.

t. 0800 694 8800 or

e. managingmemory@ghc.nhs.uk

GLOUCESTERSHIRE CARERS HUB

Gloucestershire Carer's Hub exists to improve the life of a carer in Gloucestershire through tailored advice training and information.

T 0300 111 9000

e. carers@peopleplus.co.uk

www.peopleplus.co.uk or

gloucestershirecarershub.co.uk

For support in developing your organisational response to domestic abuse, or for formal guidance documents on identifying and responding to domestic abuse please contact:

County Domestic Abuse and Sexual Violence (DASV) Strategic Coordinator

e. glostakeastand@gloucestershire.pnn.police.uk

www.glostakeastand.com

DAA Dementia
Action Alliance
GLOUCESTERSHIRE



Dementia & Domestic Abuse

HISTORY OR MYSTERY?

Domestic abuse is defined by power and control. Understanding domestic abuse in the context of dementia can be complex.



SIGNS OF ABUSE

- **physical:** bruising, undue redness or discolouration of the skin (perhaps brought about by pressure, swelling or missing hair)
- **sexual:** recurring urinary tract infections, agitation during personal care, the wearing of more clothing to cover certain areas
- **psychological:** crying for no obvious reason, being anxious, withdrawn or fearful
- **financial:** lack of money, missing possessions, another person's suspicious behaviour or influence concerning money
- **neglect:** lack of personal hygiene, dirty clothes, failing to keep the house clean

Find out about the person, their personality and their history.

It is crucial to know the personality and history of the person who has dementia. Has a 'This is me' been completed? It can help to better understand who the person really is, which can help to understand the person's needs. It can therefore help to reduce distress for people with dementia and their carers. It can also help to overcome problems with communication.

It may be that a person is getting frustrated or upset as they are experiencing difficulties getting around their home.

www.alzheimers.org.uk/get-support/making-your-home-dementia-friendly.

Download 'This is me' from:
www.alzheimers.org.uk/get-support/publications-factsheets/this-is-me

IF A PERSON WITH DEMENTIA IS BEING 'ABUSIVE' OR BEING ABUSED

First of all listen and empathise, make notes as the person is talking, they may provide you with all the information you need straight away.

Guided questions/conversation starters;

- Tell me a bit about your relationship, what was it like before their/your diagnosis and what has it been like since?
- Can you tell me in more detail what happens and how you have reacted to this?
- Does it happen at particular times of day or during certain activities, for example, when going to bed or eating?
- Is the person/are you on any medication? If so, when was this introduced and have there been any changes since? (if this is the case, the GP will need to see them for a medication review)
- Is this very new behaviour that has come on very suddenly? (this would indicate delirium and will need to be signposted to the GP initially for a physical health check)

Be aware that if you are speaking to the person with dementia, your exploration of the situation may need to vary dependant on how advanced their condition is. If their condition is more advanced, you may need to spend some more time exploring who the person is, who are their family/friends/professional contacts and pick up on any visual clues that may highlight their experience.

If the 'abuse' has started either after their diagnosis or a bit before the diagnosis, then it is likely it is due to dementia.

If the person is in immediate harm as a result of

Domestic Abuse: Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members, regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:
PSYCHOLOGICAL | PHYSICAL | SEXUAL | ECONOMIC | EMOTIONAL

abuse always call the police on 999.

If the person is in immediate harm in relation to their care and support needs, always contact Adult Help Desk t. 01452 426868 e. socialcare.enq@gloucestershire.gov.uk

The Alzheimer Society's website has a number of fact sheets on this which might be helpful resources. www.alzheimers.org