

What are neglect and abandonment?

● Neglect

- Neglect is severe or persistent lack of attention to an elderly person's basic needs (e.g. adequate food, clothing, shelter, medical treatment, nursing care, etc.) that endangers or impairs the elderly person's health and safety.
- Neglect also includes the failure of provision of medicine and aids according to medical advice, which causes physical harm to the elderly person.
- If a formal service provider (e.g. Residential Care Home for the Elderly, Integrated Home Care Services Team, hospital, etc.) fails to perform its caring responsibility and causes harm to an elderly person, the case may also be considered as neglect.

● Abandonment

- Abandonment is the act of abandoning an elderly person without justifiable reasons committed by a carer or guardian, which endangers or impairs the elderly person physically or psychologically. For example, a family member, upon the elderly person's hospitalisation, gives a wrong correspondence address/ phone number, resists/ avoids contact repeatedly, or refuses to provide correspondence address/ phone number to the hospital which makes it impossible for the hospital to contact the carer or guardian to discuss the medical and welfare issues of the elderly person.

How to identify an elderly person is being neglected or abandoned?

An elderly person shows the following signs:

● Neglect

- serious loss of/ extremely low weight, dehydration or malnutrition
- chronic bed sores
- lacking medication/ medical care needed
- having dirty appearance frequently
- wandering around frequently or for prolonged period without being accompanied

● Abandonment

- wandering alone on streets, in parks or malls, etc. for a long period of time
- having dirty appearance for a long period of time
- no one paying visits or making arrangement for the elderly person's discharge after the elderly person's admission to hospital

The behaviours or signs listed above may not necessarily be evidence of elder abuse. However, once they appear, we should be alerted and pay more attention to the elderly person. Where necessary, assistance of relevant professionals (e.g. social workers, healthcare personnel and police officers, etc.) should be sought as soon as possible.

What kind of support is available for carers of elderly persons?

- Assistance should be sought if a carer is under great pressure or does not possess the care-giving skills or healthcare knowledge.
- Carer support service is provided in District Elderly Community Centres, Neighbourhood Elderly Centres, Day Care Centres/ Units for the Elderly, the Integrated Home Care Services Teams and the Enhanced Home and Community Care Services Teams. Through the provision of information, resources and training for carers, the carers' ability in taking care of the elderly persons may be enhanced and their pressure may be eased, thereby contributing to prevention of elder abuse.
- Respite services for the elderly persons are offered in subvented Residential Care Homes for the Elderly and Day Care Centres/ Units for the Elderly, which provide short-term residential or day care services to elderly persons in need and provide temporary relief for their carers.
- Frail elderly persons with care needs and whose family members are unable to take care of them may apply for long-term care services through various elderly services units, Integrated Family Service Centres/ Integrated Services Centres and Medical Social Services Units. Scope of the long-term care services includes both community care and residential care services. Arrangements will be made for the elderly applicants to undergo a standardised care need assessment to ascertain their impairment level and service need, after which they will be waitlisted for and allocated to the required services according to the assessment results.
- If an elderly person has a change in temperament or has become short-tempered and suspicious, his/ her family members should bring the elderly person to consult a doctor as soon as possible because such change may possibly be an early symptom of dementia rather than an intentional act to pick on his/ her family members. If family members can accept the difficulty of the elderly person, arrange necessary medical care for him/ her and change the ways they get along with the elderly person, the pressure of taking care of the elderly person may be relieved.

How to seek assistance?

- Persons in need of assistance may approach District Elderly Community Centres or Integrated Family Service Centres/ Integrated Services Centres in respective districts. Telephone numbers for enquiries and addresses of these centres are available on the Social Welfare Department website at <http://www.swd.gov.hk/>
- If the elderly person being abused is receiving other social services, he/ she may seek assistance from the social worker of the service unit concerned, who may arrange referrals where necessary.
- **Social Welfare Department Hotline : 2343 2255**
- **Family Crisis Support Centre (24-hour hotline) : 18288**
- **CEASE Crisis Centre 24-hour Hotline : 18281**



保護長者

免受疏忽照顧及遺棄

Protecting Elderly Persons Against Neglect and Abandonment

何謂疏忽照顧及遺棄？

● 疏忽照顧

- 疏忽照顧是指嚴重或長期忽視長者生活上的基本需要（例如沒有為長者提供足夠飲食、衣服、住宿、醫療、護理等），以致危害長者的健康或生命安全。
- 疏忽照顧亦包括沒有根據醫生的指示給予長者所需的藥物或輔助器具，使長者身體受到損害。
- 如果正規服務提供者（例如安老院、綜合家居照顧服務隊、醫院等）因沒有遵行照顧長者的責任而引致長者受到傷害，亦可以被視作疏忽照顧。

● 遺棄

- 遺棄是指在欠缺合理原因下，長者被負責提供照顧或監護者離棄，而對長者身體或心理造成傷害，例如家人將長者送入醫院時虛報通訊地址／聯絡電話，或多次抗拒／逃避接觸，或拒絕提供通訊地址／聯絡電話，以致醫院無法聯絡照顧或監護者，商討有關長者的醫療及福利事宜。

怎樣可留意長者受到疏忽照顧或遺棄？

長者出現下列情況：

● 疏忽照顧

- 體重暴跌／極低、脫水或營養不良

- 長期長出褥瘡
- 欠缺所需的藥物／醫療照顧
- 經常骯髒
- 經常或長時間在無人陪伴下到處遊蕩

● 遺棄

- 長期單獨逗留在街上／公園／商場等
- 長期骯髒
- 入住醫院後沒有人探訪或安排出院

以上所列的行為或跡象，並非一定是虐待長者的證據，但當這些表徵出現時，大家應提高警覺，多關注長者的情況，如有需要，應盡快向有關專業人士（例如社工、醫護人員、警方等）尋求協助。

在照顧長者方面有甚麼支援？

- 如果照顧者感到壓力太大，或者不懂得照顧的技巧或護理的知識，應尋求協助。
- 長者地區中心、長者鄰舍中心、長者日間護理中心／單位、綜合家居照顧服務隊和改善家居及社區照顧服務隊，都有提供護老者支援服務。透過提供資訊、資源和訓練予護老者，提升他／她們照顧長者的能力和紓緩他／她們照顧的壓力，也藉此預防因照顧者壓力太大而引致長者受虐。
- 政府資助的安老院舍及長者日間護理中心／單位均提供「長者暫託服務」，為有需要的長者提供短暫的住宿或日間照顧服務，好讓護老者得到歇息的機會。

- 若家庭成員無法照顧有護理需要的體弱長者，可聯絡各長者服務單位、綜合家庭服務中心／綜合服務中心、醫務社會服務部，為長者申請長期護理服務，服務範圍包括社區照顧及住宿照顧服務。長者會獲安排接受統一評估以確定他／她們的身體缺損程度及服務需要，並按評估結果的建議輪候及編配所需服務。
- 如果長者脾氣轉變，甚至變得暴躁及多疑，家人便應盡早陪同長者看醫生，因為這可能是認知障礙症初期的病徵，而並非長者存心針對家人。家人如能接納長者的困難，安排長者接受所需的醫療照顧，改變大家相處的模式，應可減輕照顧長者的壓力。

如何求助？

- 可聯絡各區長者地區中心或綜合家庭服務中心／綜合服務中心，各中心的查詢電話及地址可參考社會福利署網頁：
<http://www.swd.gov.hk/>
- 如受虐長者正接受其他社會服務，可向該服務單位求助。如有需要，該服務單位社工可安排轉介。
- 社會福利署熱線：2343 2255
- 向晴熱線（24小時）：18288
- 芷若園24小時危機熱線：18281