

# ***Elder Abuse Resource Guide***

***Serving:  
Flin Flon, Creighton, Snow Lake & Area***



**Acknowledgement of committee members who researched and developed this guide. Thank you to all the employers and volunteer groups who supported their members in taking the time to complete this guide.**

**Flin Flon Friendship Centre  
NOR-MAN Regional Health Authority  
Ministerial Association of Flin Flon  
Women's Resource Centre  
Walmart Pharmacy  
Creighton Home Care  
Snow Lake Hospital Auxiliary  
Addictions Foundation Of Manitoba**

**Staff of the Manitoba Seniors and Healthy Aging Secretariat has provided expertise in researching and writing the Elder Abuse Resource Guide. This guide is a component of the Manitoba government's senior's strategy *Advancing Age: Promoting Older Manitobans*. This strategy addresses a wide range of issues, ensuring Manitoba is well positioned to respond to the current and future needs of Manitoba's aging population.**

# ELDER ABUSE RESOURCE GUIDE

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# FLIN FLON, CREIGHTON, SNOW LAKE & AREA ELDER ABUSE RESOURCE GUIDE

## 1.0 PURPOSE

The focus of this Community Elder Abuse Resource Guide is to help health care providers and other agencies recognize and effectively respond to elder abuse. It is intended for those who have contact with seniors in general.

*The purpose of this Resource Guide is to:*

- A) **Promote:**
  - ◆ Education and awareness about elder abuse
  - ◆ Linkages between agencies related to elder abuse
  
- B) **Identify:**
  - ◆ the rights of individuals
  - ◆ elder abuse
  - ◆ signs/characteristics of the abused and the abuser
  - ◆ risk factors for abuser and abused
  - ◆ the steps to take when abuse is identified
  - ◆ the appropriate sources of help for the victim and perpetrator
  - ◆ the roles of community organizations and agencies

### INSTRUCTIONS FOR USE

Please use this document as a resource to guide your actions in assisting in an elder abuse situation. Feel free to photocopy any relevant information that may be helpful. For further copies of the entire document please contact the C.A.R.E.S Advocate for the Seniors Team in Flin Flon at (204) 687-9333 Monday to Friday or Creighton Home Care at (306) 688-8630.

## 2.0 WHAT RIGHTS DOES A PERSON HAVE?

**Every individual has the right to:**

### **Confidentiality/Privacy...**

Older individuals have the right to privacy. Most agencies/organizations are governed by privacy policies or legislation that ensures confidentiality is maintained (i.e. Personal Health Information Act).

### **Freedom of choice...**

Older individuals have the right to make decisions and live their lives as they wish provided they do not infringe on the rights or safety of others. This includes the right to refuse assistance and intervention. There may be instances where an individual's ability to make decisions is in question. These situations should be referred to a medical professional.

### **Safety...**

Older individuals have the right to live in safety and without fear. This includes the right to be free from physical, emotional, and financial abuse as well as from neglect.

### Information...

Older individuals have the right to information required to make meaningful and informed choices. This includes information about their legal and civil rights, resources and the range of service options available to them to address their needs.

### The Basic Necessities of Life...

Older individuals have the right to basic requirements of life: food, clothing, shelter, etc...

(Source: The Direct Services Committee, Age and Opportunity Elder Abuse Resource Centre; Age and Opportunity Elder Abuse Resource Centre Assessment Protocol December 1992; Winnipeg, Manitoba.)

## 3.0 WHAT IS ELDER ABUSE?

### Definition of Elder Abuse:

Any action or inaction by a person in a position of trust that results in harm to or jeopardizes the well being or safety of an older person.

**Note:** *No one characteristic automatically points to abuse or neglect of the older adult. One should look for multiple factors that might indicate mistreatment. Some adults may have severe physical or emotional problems resulting from disease or the aging process. Indicators that trigger further investigation may include the following:*

### Types of Abuse:

#### 3.1 Physical:

Any act of violence or rough treatment that may or may not cause injury or physical discomfort. Such behavior includes any kind of physical assault such as slapping, pushing, pulling, kicking, punching; injury with any object or weapon; deliberate exposure to severe weather; and the inappropriate use of restraints. Physical abuse also includes misuse of medications and prescriptions.

### Possible Indicators of Physical Abuse Include Unexplained:

- ♦ difficulty walking or sitting
- ♦ hypothermia [low body temperature, blue lips, cold hands, shivering]
- ♦ black eye
- ♦ confusion
- ♦ baldness
- ♦ scratches
- ♦ layered clothing
- ♦ bite marks
- ♦ falls
- ♦ pain
- ♦ punctured ear drums
- ♦ broken teeth
- ♦ swelling
- ♦ lacerations, cuts
- ♦ infections
- ♦ fearfulness
- ♦ tenderness
- ♦ bumps
- ♦ sore throat
- ♦ torn, stained or bloody clothing
- ♦ burns
- ♦ fractures
- ♦ internal injuries
- ♦ bed sores
- ♦ scars
- ♦ grip marks

Any *unusual pattern or location* of injury such as clustered bruises or welts, or bruising along the inner arm or thigh, or any other soft body parts such as abdomen, buttocks.

#### 3.2 Financial Abuse

The illegal or inappropriate use of another person's money. Any act which involves the misuse/abuse of an individual's funds and/or assets. Such behavior includes obtaining property and funds without the individual's knowledge or consent or by using undue

influence such as forced changes of wills or titles or the misuse of power of attorney; or in the case of a client who has been found incompetent, not acting in her/his best interests.

**Possible Indicators of Exploitation/Financial Abuse:**

- ◆ signed over power of attorney against own will
- ◆ forced to change will or sell house
- ◆ used as a babysitter/house sitter
- ◆ inadequate living environment
- ◆ unable to afford social activities
- ◆ possessions disappear such as artwork, jewellery, furs, silverware, vehicles, equipment...
- ◆ unexplained or sudden withdrawal of money from accounts
- ◆ unexplained or sudden inability to pay bills
- ◆ lack of money for food, appropriate clothing, glasses, hearing aid, cane or other walking aids, dentures, or other necessities when income appears potentially adequate
- ◆ indicates papers were signed but doesn't know what for
- ◆ rent or mortgage in arrears
- ◆ bills unpaid (particularly if paying these bills is the responsibility of the alleged abuser)
- ◆ pension cheque withheld

**3.3 Emotional Abuse**

Any action, verbal or non-verbal, that lessens a person's sense of identity, dignity or self-worth. Such behavior includes confinement, physical and social isolation; verbal assault, harassment, humiliation, intimidation or infantilization; denial of information, privacy, visitors, or religious worship; coercion, compulsion by threat, or unlawful constraint to force a person to do some act that otherwise he/she would not have done.

**Possible Indicators of Emotional Abuse:**

- ◆ appears ashamed
- ◆ low self-esteem
- ◆ withdrawn, passive
- ◆ appears to recoil (flinching, cringing)
- ◆ fearful, anxious
- ◆ feels guilty without cause
- ◆ excluded from family gatherings
- ◆ loss of self determination
- ◆ does not make decisions
- ◆ "baby talk"
- ◆ depressed, hopeless, helpless
- ◆ agitated
- ◆ difficulty sleeping or needs excessive sleep
- ◆ tearfulness
- ◆ restricted access to: telephone, food, bathroom facilities, family, service providers...
- ◆ not permitted to have friends, visitors, go to church or outings

**3.4 Neglect**

The deliberate withholding of care or the necessities of life such as withholding or inadequately providing for physical or emotional needs, eg: food, housing, emotional support, respect. The failure to give proper care because of a lack of knowledge, experience or ability, eg: lack of awareness of community resources. Any situation in which a patient's basic needs (i.e. food, water, shelter, heat, clothing, hygiene, safety, emotional support, respect) are not being met, and/or proper medical, dental or psychiatric treatment is

not being received. Neglect may be the result of action or inaction and may be intentional or unintentional. Unintentional neglect refers to situations resulting from lack of experience, information or capability. Systemic neglect of respect occurs when facility operations create or facilitate harmful situations.

#### **Possible Indicators of Neglect:**

- ◆ malnourished, overly thin
- ◆ dehydration
- ◆ bed sores
- ◆ poor hygiene
- ◆ soiled linen, clothing
- ◆ deserted
- ◆ clothes in poor repair or inappropriate for season
- ◆ over sedation-reduced physical/mental activity
- ◆ immobility, weakness
- ◆ left alone, tied to bed or chair
- ◆ cancellation of or not taken to doctor/dentist/therapy
- ◆ lack of required safety features in home
- ◆ presence of untreated injuries
- ◆ no glasses, hearing aid, walker, cane when obviously necessary
- ◆ no dentures
- ◆ mouth sores
- ◆ poor skin condition
- ◆ unpleasant odor
- ◆ unkempt appearance
- ◆ home in disrepair
- ◆ confusion
- ◆ medication problems
- ◆ urine burns
- ◆ dangerous environment

#### **4.0 HOW DOES AN ABUSED OLDER ADULT ACT? WHAT MIGHT I SEE?**

**The abused older adult *may* exhibit any of the following:**

- ◆ history of repeated incidents of unexplained accidents or injuries
- ◆ medical history does not coincide with presenting injuries
- ◆ seek medical attention from a variety of doctors - “doctor shopping”
- ◆ postpone seeking medical attention
- ◆ frequent use of Emergency Department
- ◆ prolonged delay between time of injury and presentation for treatment
- ◆ has physical/mental limitations affecting ability for self-care
- ◆ gives information reluctantly: waits for caregiver to answer
- ◆ avoids physical, verbal, eye contact with caregiver or professional
- ◆ hesitant, inaudible, loud, rapid, slow speech
- ◆ agitated, anxious, excited, discouraged, fearful, humiliated, overly quiet, resigned, unresponsive, passive
- ◆ clenched hands
- ◆ rigid
- ◆ rocking
- ◆ suicidal thoughts or attempts
- ◆ crying
- ◆ complaints of insomnia
- ◆ cringing, flinching
- ◆ may indicate a fear of being left alone with the alleged abuser
- ◆ drug/alcohol abuse

## 5.0 WHAT DOES THE ABUSER ACT LIKE? WHAT MIGHT I SEE?

The alleged abuser *may* exhibit any of the following:

- ♦ refuses to permit hospitalisation/diagnostic tests
- ♦ ignores victim's hospital admission - doesn't visit
- ♦ refuses to participate in discharge planning or take elder home
- ♦ becomes impatient with victim/staff/procedures
- ♦ appears fatigued
- ♦ responds defensively when questioned
- ♦ makes excuses
- ♦ becomes hostile, suspicious, irritable, demanding, angry and impatient
- ♦ does not want victim interviewed alone
- ♦ lack of remorse
- ♦ becomes depressed
- ♦ has erratic behaviour
- ♦ abuses substances / gambles
- ♦ has employment difficulties
- ♦ has negative stereotyping attitude towards seniors
- ♦ feels excessively burdened by care giving role
- ♦ has feelings of anger/frustration
- ♦ denies that care giving has changed lifestyle in any way
- ♦ has unrealistic expectations of victim's limits and abilities
- ♦ lacks understanding of aging process
- ♦ intimidates, threatens, insults, or is indifferent to victim
- ♦ becomes reluctant to touch, make eye contact, face or speak directly to the victim
- ♦ speaks for victim
- ♦ becomes excessively involved with victim or not involved at all
- ♦ ignore needs and rights of victim
- ♦ excessively demanding in services for senior
- ♦ makes decisions without consulting victim
- ♦ treats victim like a child or non-person
- ♦ blames victim for problems which are not within the victim's control
- ♦ becomes unwilling or reluctant to comply with service provider when planning for care
- ♦ isolates the victim by denying access to friends, visitors, monitoring all social interactions
- ♦ misuses victims finances
- ♦ becomes caregiver based on financial need

## 6.0 WHY DOES ABUSE HAPPEN?

Intergenerational family violence:

- ♦ If violence is a typical pattern of family behaviour, abusers may learn to be violent by witnessing it.

Traits of abusers:

- ♦ Studies show that abusers are more likely to have psychological or substance abuse problems than people who are not abusive. Alcohol consumption and gambling has also been associated with severe and frequent abuse.

Social Isolation:

- ♦ As with other forms of family violence, some studies have shown that many abused older people have fewer social contacts than their peers who are not abused. However, it is not

clear whether social isolation causes abuse or results from it – both victims and abusers may feel that isolation is necessary to keep the abuse hidden.

#### Ageism:

- ◆ Because of the negative stereotypes and attitudes toward aging and older people, some segments of our culture can appear to dehumanise older adults. As a result, it is easier for some to abuse seniors without feeling guilt or remorse. Some older people hold many of these same negative stereotypes themselves. They may think that the abuse is deserved, unavoidable, or not significant enough to warrant help; it is accepted or expected that older people lose power and control over their lives.

#### Reacting to stress in violent or abusive ways:

- ◆ Caring for an older relative can be stressful for families. Caregivers may become angry and frustrated due to a limited understanding of the aging process, a lack of caregiving skills, and inadequate supports or resources. However, caregiver stress does not necessarily lead to violence or abuse.

#### Spousal abuse:

- ◆ Research suggests that older people are frequently abused by their spouses. According to a large national study, 40% of older men and 28% of older women who were abused by a family member were victimised by their spouses – Statistics Canada, 1999). Until recently, spousal abuse among older adults has been largely ignored, even though the number of injuries and level of violence are considered as serious as they are in cases of abuse by adult children toward their parents.

#### Tolerance of violence in this society:

- ◆ The abuse and neglect of older adults does not occur in a vacuum. Rather, it is a product of society's general tolerance and acceptance of violence, demonstrated by the toys children play with, the content of many movies and sports, and the methods used by nations to solve conflicts. This acceptance of violence contributes to the abuse and neglect of older people.

#### Housing Issues:

- ◆ Adequate housing is in short supply in northern Manitoba. Overcrowding increases stress and may produce abusive responses from family or others dwelling together. (Source: Abuse and Neglect of Older Adults: Community Awareness and Response, Health Canada, 2002).

## **7.0 HOW CAN I HELP?**

There may be opportunities for you to assist individuals in accessing available community services. If you suspect abuse contact the appropriate community resources listed in Appendix A.

### **7.1 Develop a trusting relationship**

In developing a trusting relationship it is important to be culturally sensitive and aware.

You can be supportive when talking to the abused person by reminding them of the following:

- ◆ it's not their fault
- ◆ they are not alone
- ◆ help is available
- ◆ it is abuse; they don't have to put up with it
- ◆ something can be done

If an individual does disclose abuse to you:

- ♦ take the report seriously the first time
- ♦ believe the individual
- ♦ identify your role as someone who can help
- ♦ be non-judgmental – avoid victim blaming
- ♦ support the individual:
  - ♦ listen and let them talk about their feelings
  - ♦ respect their feelings and concerns
  - ♦ help them find the good things about themselves

Give clear messages:

- ♦ abuse is never okay or justifiable
- ♦ personal safety is always the most important issue
- ♦ assault is a crime
- ♦ they do not cause the abuse
- ♦ they are not to blame for the abuser's behaviour
- ♦ they cannot change the abuser's behaviour
- ♦ apologies and promises will not end the violence
- ♦ they are not alone
- ♦ they are not crazy
- ♦ abuse is not loss of control, it is a means of control

Present options:

- ♦ talk about what they can do to plan for their safety
- ♦ encourage them to make their own decisions.
- ♦ ask the individual what they want
- ♦ know the key resources in the community and how to contact them (see Appendix A)
- ♦ respect the individual's right to confidentiality and the right to seek or not to seek treatment.

**Note:** *An abused person needs your support and encouragement in order to make choices that are right for them. However, **there are some forms of advice that are not useful and are even dangerous for them to hear.***

- ♦ Don't tell them to go back to the situation and try a little harder.
- ♦ Don't suggest you try to talk to the abuser to straighten things out.

## **7.2 Emotional Support**

Maintaining contact with the individual provides emotional support to the individual even if it is not outwardly shown to be appreciated – don't give up!

How do I determine what the individual wants?

- ♦ Practice active listening, reflect and clarify what you hear
- ♦ Ask, discuss, give options
- ♦ Allow time for the person to decide what they want
- ♦ Support decisions to seek help
- ♦ Keep lines of communication open for a later time

## **7.3 Develop a safety plan**

The older individual will require assistance to develop a safety plan. This can either be done by you or by referring the individual to an appropriate resource. Please refer to "What is a Safety Plan?".

#### **7.4 Documentation**

Later in privacy, write down everything that was said and note how the individual looked, reacted, and tone of voice. Document the facts of the situation: who, what, when, why. This will help you sort the reality of the situation in your mind and clarify the problem and the type of intervention that may be required. It will also help your memory if intervention occurs at a later date. As a courtesy follow up with the person making the referral (not specifics).

#### **7.5 Reporting/Not Reporting**

To date there is no mandatory legislation for the reporting of elder abuse in community settings as there is for the abuse of children. For more information about elder abuse in Manitoba call the Seniors Abuse Line at 1-888-896-7183. Please note that if your concern relates to a person in an institutional setting there is mandatory reporting as set out in the Protection of Persons in Care Act. In Manitoba call 1-866-440-6366.

If elder abuse has been disclosed to you:

- ♦ If the individual is suspected of being in imminent risk of death, serious physical harm or exploitation, in Saskatchewan dial 9-1-1 or the RCMP, in Manitoba call the RCMP. The person responsible for the abuse may be in a position to harm others.
- ♦ If abuse is suspected or an individual discloses the abuse see the flowcharts for a list of resources. (If you are concerned, it is worth investigating further)

### **8.0 WHAT IS A SAFETY PLAN?**

Things to consider when developing a safety plan with an older person:

- ♦ Ensure that they understand that if they are in immediate danger, they should call 911 in Saskatchewan, and local RCMP in Manitoba.
- ♦ Help them develop a plan for where they can go and how they can get there if they feel like their life and well being have been threatened i.e. ( trusted friend or relative, local women's shelter).
- ♦ Encourage them to have trusted friends and/or family visit often, and/or check in by phone regularly.
- ♦ Let them know that there are civil remedies available to them if they fear that the abusive behaviour is likely to continue (contact a peace officer, magistrate or lawyer for more information).
- ♦ Encourage them to participate in community activities so that they are getting out of the house and have contact with others if possible i.e. (Sport Program, Seniors Centres).
- ♦ Ensure they have access to their own telephone.
- ♦ Suggest that they post and open their own mail and have pension cheques or other income deposited directly into their bank account.
- ♦ Link them to legal advice to discuss arrangements to make now for possible future disability (i.e. power of attorney)
- ♦ Encourage them to keep accurate records, accounts, and lists of property/assets available for examination by a trusted individual
- ♦ Suggest that they review their will periodically and not make changes to it without careful consideration and/or discussion with a trusted family member or friend
- ♦ Remind them not to give up control of property or assets unless they decide they can't manage them.
- ♦ Encourage them to ask for help when they need it and ensure that they are aware of community support available for assistance (see Appendix A).
- ♦ Suggest that they discuss their plans regarding future financial and health care with their attorney, physician and family members.

## **9.0 HOW CAN OLDER ADULTS PROTECT THEMSELVES?**

- ◆ Stay Sociable – maintain regular contact with friends and family
- ◆ Post and open your own mail
- ◆ Have pension cheques directly deposited into your bank account
- ◆ Make sure that you have a will, power of attorney & health care directive
- ◆ Discuss your future plans with trusted family, doctor, lawyer, or friends
- ◆ Ask for help when you need it
- ◆ Educate yourself

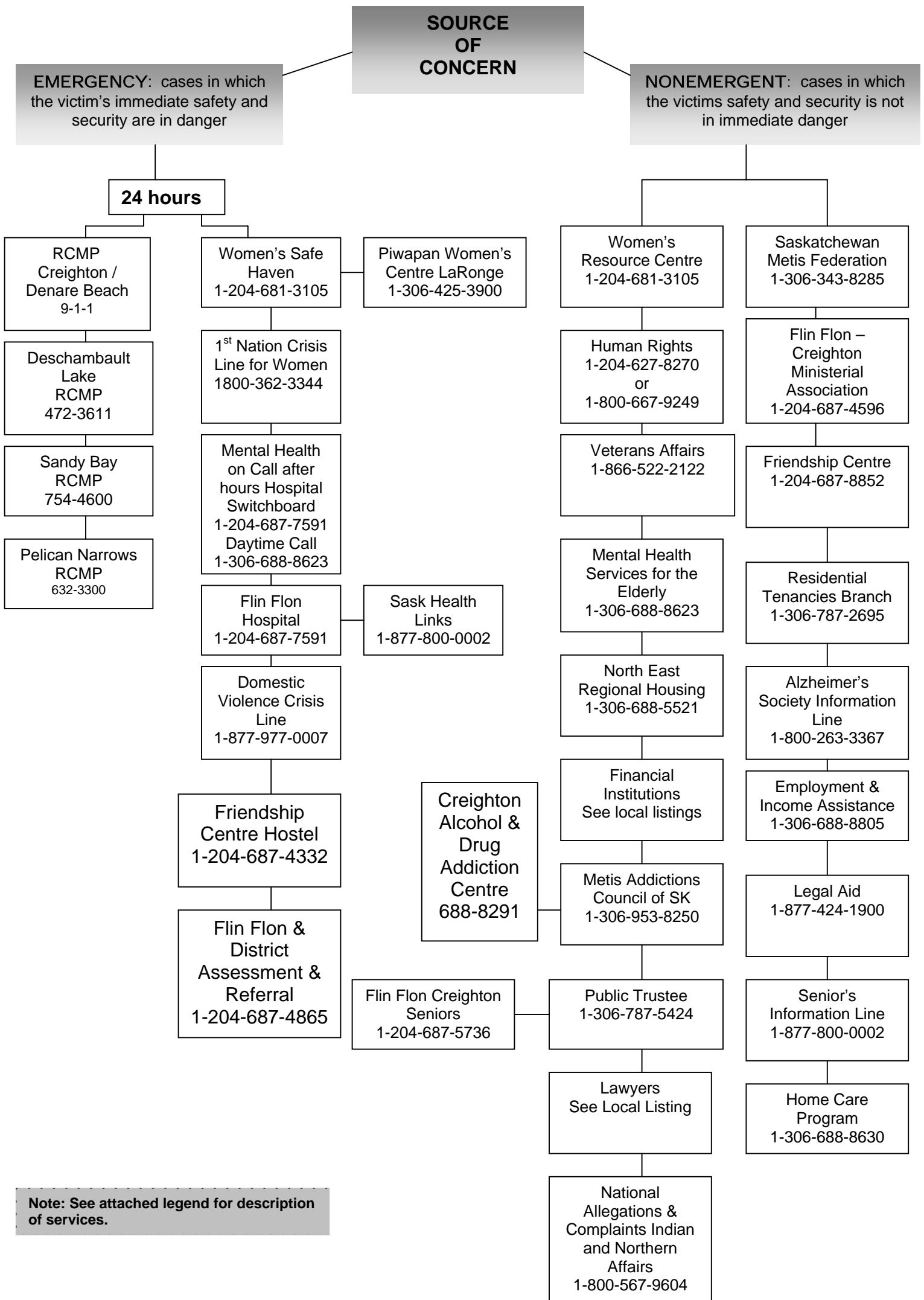
## **10.0 WHY ISN'T ELDER ABUSE REPORTED?**

Less than 1 out of 5 cases of elder abuse will ever reach the attention of authorities. Here are some reasons why:

- ◆ Older adults don't know that what they are experiencing is abuse
- ◆ Older adults, their family or service providers don't know about resources (Why tell if there is no help available)
- ◆ Fear of retaliation or punishment
- ◆ Fear of abandonment by the abuser or other family
- ◆ Shame and embarrassment
- ◆ Family loyalty
- ◆ Fear of placement in an institution

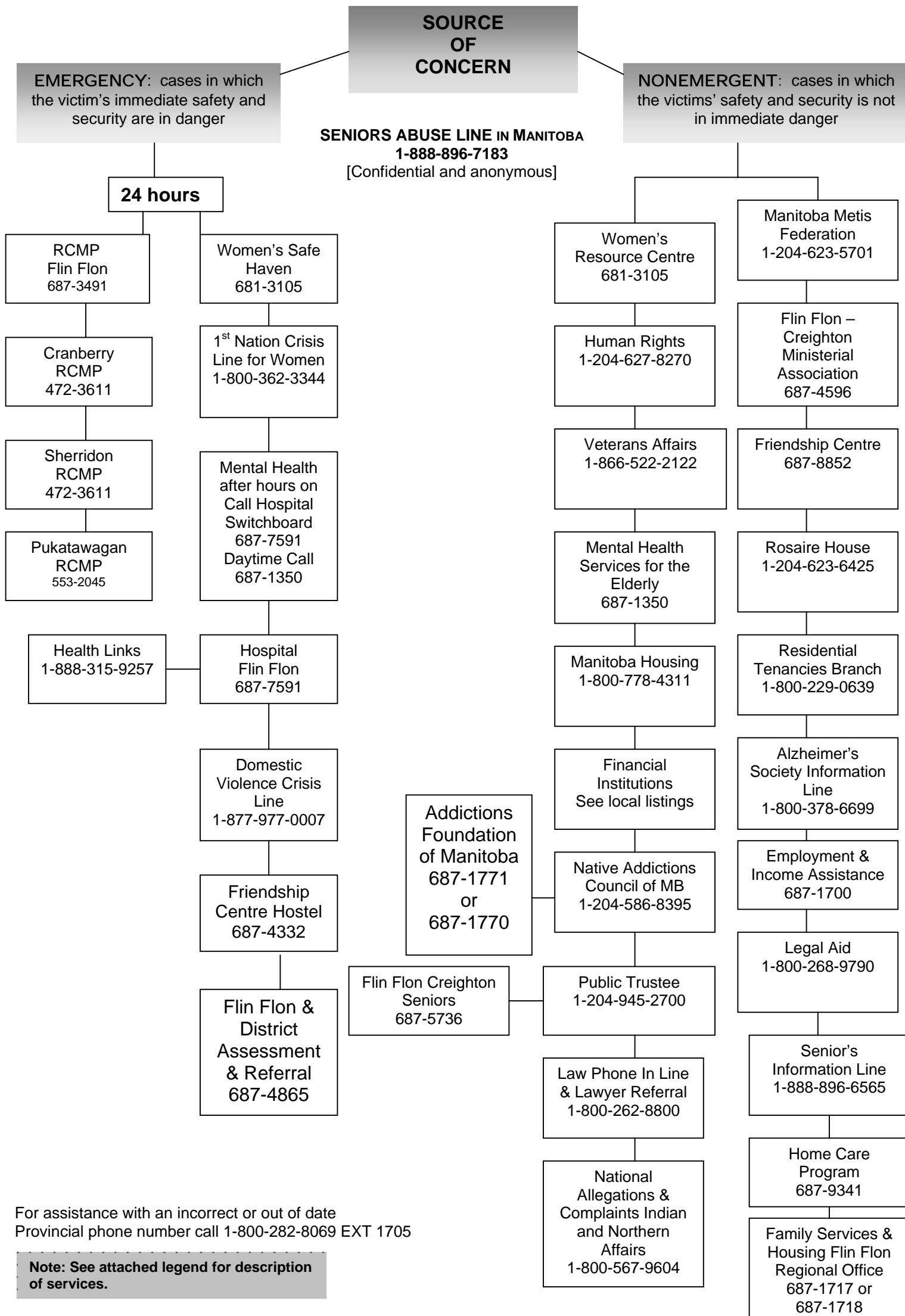
All of these reasons are compounded by the fact that many seniors are living alone and are socially isolated. Unlike children who attend school and younger adults who are often in the workplace, there is no common gathering for older adults. This is where front-line service workers are important. Often, they are the only people who have direct contact with an older person. It is crucial that these workers are keeping their eyes and ears open for the possibility of abuse.

**Creighton Saskatchewan AND AREA**  
**ELDER ABUSE Community RESOURCE**  
**FLOW CHART**  
**Appendix A1**



**Note: See attached legend for description of services.**

**Flin Flon Manitoba** AND AREA  
**ELDER ABUSE** Community Resource  
**FLOW CHART**  
 Appendix A2

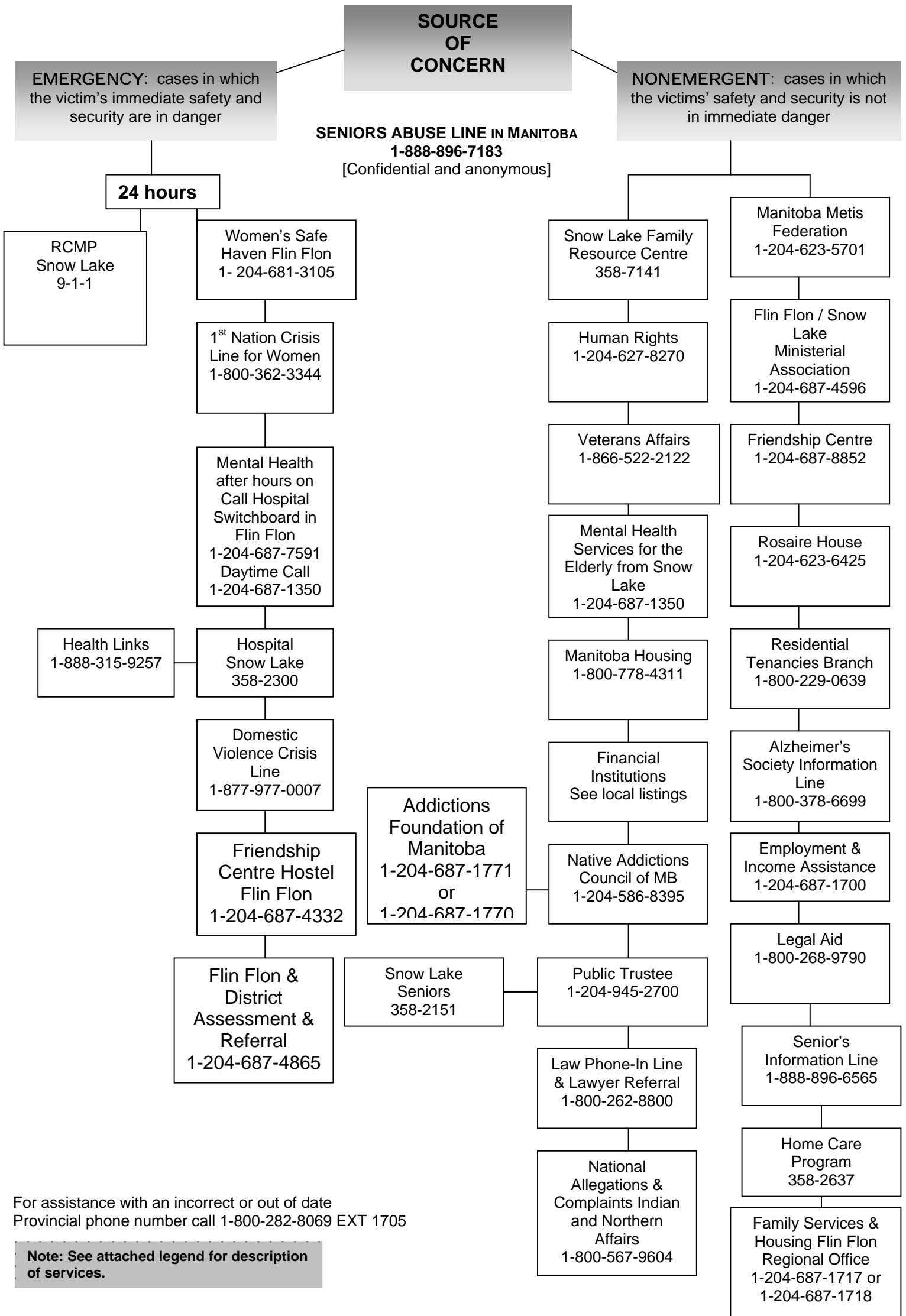


# Snow Lake Manitoba AND AREA

## ELDER ABUSE Community Resource

### FLOW CHART

#### Appendix A



For assistance with an incorrect or out of date Provincial phone number call 1-800-282-8069 EXT 1705

**Note: See attached legend for description of services.**

## RCMP Detachment Chart Manitoba

| Detachment        | Administration number | Emergency number |
|-------------------|-----------------------|------------------|
| Flin Flon         | 687-7488              | 687-3491         |
| Cranberry Portage | 472-3612              | 472-3611         |
| Sherridon         | 472-3612              | 472-3611         |
| Snow Lake         | 358-7723              | 358-7722         |
| Pukatawagan       | 553-2342              | 553-2045         |

## RCMP Detachment Chart Saskatchewan

| Detachment                  | Administration number | Emergency number |
|-----------------------------|-----------------------|------------------|
| Creighton /<br>Denare Beach | 688-8888              | 9-1-1            |
| Sturgeon Landing            | 688-8880              | 688-8880         |
| Sandy Bay                   | 754-4600              | 754-4600         |
| Deschambault<br>Lake        | 632-2392              | 632-2392         |
| Pelican Narrows             | 632-3300              | 632-3300         |

**ELDER ABUSE RESOURCE FLOW CHART  
LEGEND**

**AFM (ADDICTIONS FOUNDATION OF MANITOBA) 687-1771 OR 687-1770**

The Addictions Foundation of Manitoba provides prevention, treatment and rehabilitation services for seniors with problems involving the misuse of alcohol or other drugs and gambling. AFM is also a good resource for seniors who are affected by somebody else's use of alcohol or other drugs, or gambling.

**ALZHEIMER'S SOCIETY OF MANITOBA 1-800-378-6699  
IN SASKATCHEWAN 1 800 263-3367**

This office can provide support, counselling for those diagnosed with Alzheimer's disease or for those who care for them.

**CADAC (CREIGHTON ALCOHOL & DRUG ADDICTION CENTRE):  
IN SASKATCHEWAN 688-8291**

CADAC provides prevention, treatment and rehabilitation services for seniors with problems involving the misuse of alcohol or other drugs and gambling. CADAC is also a good resource for seniors who are affected by somebody else's use of alcohol or other drugs, or gambling.

**DOMESTIC VIOLENCE CRISIS LINE IN MANITOBA 1-877-977-0007**

Support by phone 24 hours a day. If you or someone you know is being abused this crisis line can provide information to help, or to listen.

**EMPLOYMENT AND INCOME ASSISTANCE IN FLIN FLON CALL 687-1700  
IN SASKATCHEWAN CALL 688-8805**

This is a provincial office which provides financial assistance and counselling.

**FINANCIAL INSTITUTIONS [SEE LOCAL LISTINGS]**

It is the financial institution's responsibility to help protect their customers and their money the best way they can. Vulnerable customers may not have any other guidance in protecting their assets and in some cases the financial institutions are their last line of defense. The financial institution may be in a position to recognize potential financial abuse due to their relationship with the client. If there are concerns the staff may speak with the customer directly and explore the situation. If the customer appears competent to make their own financial decisions, their decisions will be respected. If the client

does not appear competent and they have a Power of Attorney appointed then staff would disclose their concern and contact their legal department.

**FLIN FLON CREIGHTON SENIORS 687-5736  
SNOW LAKE SENIORS 358-2151**

These groups are a resource for seniors in the community living independently.

**FLIN FLON / CREIGHTON MINISTERIAL ASSOCIATION 687-4596**

This is a contact number which will provide the name and phone number or contact for a specific religious preference for clients in need of spiritual support services.

**FLIN FLON & DISTRICT ASSESSMENT AND REFFERAL 1-204-687-4865**

Group and individual counselling is available, as well as referral to further resources based on individual needs. Some restrictions on access to this program exist.

**FRIENDSHIP CENTRE HOSTEL IN FLIN FLON 1-204-687-4332**

This service provides affordable short term lodging.

**FRIENDSHIP CENTRE 1-204-687-3900**

Promotes and enhances individual quality of life and Aboriginal integrity within the Community through the provision of Culturally sensitive programs and services. Counselling and referral services are also available.

**HEALTH LINKS (MB) 1-888-315-9257 SASK HEALTH LINKS 1-877-800-0002**

A 24 hour phone line available to people requiring health related information. Trained nurses are available 24 hours a day to answer questions or to provide direction.

**HOME CARE IN FLIN FLON & AREA 687-9341, IN SASKATCHEWAN 688-8631,  
IN SNOW LAKE 358-2637**

The Home Care program helps people who need health services and assistance with daily living activities remain at home and independent for as long as possible.

Some of the services offered by Home Care are personal care, nursing, household assistance, respite, occupational therapy and physical therapy assessments, referrals to other agencies, co-ordination of community services, and assessments for long term care and specialty services.

## **HUMAN RIGHTS 1-204-627-8270**

The Manitoba Human Rights Commission is the agency responsible for carrying out the provisions of The Human Rights Code. The Commission accepts complaints alleging contravention of The Code, offers opportunities to voluntarily resolve complaints by way of conciliation or mediation, and investigates complaints (that are not otherwise resolved) to the extent necessary to provide an appropriate recommendation to the Board of Commissioners. In addition, the Commission is charged with the responsibility of developing, promoting and conducting educational programs designed to prevent and eliminate discrimination prohibited by The Code.

## **IKWE-WIDDJITIWIN, INC. 1<sup>ST</sup> NATION CRISIS LINE FOR WOMEN IN MANITOBA 1-800-362-3344**

The goal of IKWE-WIDDJITIWIN is to provide a system of active support and advocacy to abused women in all areas of Manitoba through culturally appropriate programming utilizing the traditional four directions of empowerment – physical, mental, emotional and spiritual.

Aboriginal workers are available through a 24 hour crisis line and speak several dialects.

## **LAW PHONE-IN LINE & LAWYER REFERRAL IN MB ONLY 1-800-262-8800**

A resource to call if you have a legal question or if you would like assistance in finding legal representation.

## **LEGAL AID IN MANITOBA 1-800-268-9790 IN SASKATCHEWAN CALL 1-877-424-1900**

Legal Aid assists individuals and groups who require the services of a lawyer and who do not have the means to obtain those services. Also see Law phone in line and lawyer referral 1-800-262-8800.

## **MANITOBA HOUSING 1-800-778-4311 NORTH EAST REGIONAL HOUSING (SK) 688-5521**

The Manitoba Housing Authority & North East Regional Housing offers housing to people 55 years of age or older whose income is too low to obtain affordable, suitable, and adequate accommodations in the private sector. Rental rates are based on the person's gross income. In Saskatchewan please call North East Regional Housing at 688-5521 to inquire about housing for people 55 years of age or older.

**MANITOBA METIS FEDERATION 1 (204) 623-5701  
METIS FEDERATION OF SASKATCHEWAN 1 (306) 343-8285**

This is a non-profit organization that provides assistance to those of Metis, Inuit and non-status descent.

**MENTAL HEALTH SERVICES FOR THE ELDERLY IN FLIN FLON, SNOW LAKE &  
AREA 687-7591 OR 687-1350  
IN SASKATCHEWAN 688-8623**

The NOR-MAN Regional Health Authority through Mental Health Services provides Mental Health Services for the elderly. Mental Health support after hours can be reached through the on call system at Flin Flon General Hospital or by directly contacting 687-1350 during regular office hours and asking for the intake worker. In Saskatchewan Mental Health support can be reached by calling 688-8623. These people have experience working with the elderly who have complex mental health needs. They will see clients in a variety of settings including hospitals, personal care homes or the client's own home.

**METIS ADDICTIONS COUNCIL OF SK 1-306-953-8250 ALSO SEE CADAC AND  
AFM**

This is a treatment centre for persons of aboriginal descent who require assistance in coping with an addiction to alcohol, gambling or narcotics.

**NATIONAL ALLEGATIONS & COMPLAINTS INDIAN & NORTHERN AFFAIRS  
1-800-567-9604**

This is a resource for allegations of abuse on reserve. In order for a formal investigation to take place, the caller will need to put their complaint in writing.

**NATIVE ADDICTIONS COUNCIL OF MANITOBA 1-204-586-8395  
ALSO SEE CADAC LISTING & AFM LISTING**

This is a treatment centre for persons of aboriginal descent who require assistance in coping with an addiction to alcohol, gambling or narcotics. They also sponsor a women's group. They have both in residence and outreach programs.

**PIWAPAN WOMEN'S CENTRE LARONGE 1-306-425-3900**

Piwapan Women's Centre is a shelter for women and children fleeing domestic violence. The role of this centre is to help women regain their self worth and to make their own decisions. The centre also provides one on one and group counselling as well as resources specific to women's needs.

**PUBLIC TRUSTEE IN MANITOBA 1-204-945-2700  
IN SASKATCHEWAN CALL 1-306-787-5424**

**In Manitoba:**

The Public Trustee provides the following types of trustee services for seniors:

- Administers estates and makes personal decisions for people who are not mentally capable of doing so
- Administers the estates of mentally competent people who have granted a Power of Attorney to the Public Trustee
- Administers the estates of people who have died in Manitoba with no one else capable or willing to act as administrator

**In Saskatchewan:**

The Public Trustee provides the following types of trustee services for seniors:

- Administers the property and finances of adults who are incapable of managing their financial affairs
- Protecting property rights of children under 18 years of age
- Administering the affairs of deceased persons
- Holds and administers unclaimed property

**RESIDENTIAL TENANCIES BRANCH IN MANITOBA 1-800-229-0639  
IN SASKATCHEWAN CALL 1-306-787-2695**

The Residential Tenancies Branch deals with landlord and tenants relations and related problems, matters pertaining to rent increases of any amount, the allowable rent charges for premises, and general rent controls.

**ROSAIRE HOUSE 1 (204) 623-6425**

This is a recovery centre that provides residential or non-residential programs for those wishing to recover from addiction. They provide counselling services for spouses & friends of addicted persons.

**SENIORS ABUSE LINE IN MANITOBA 1-888-896-7183**

The toll-free Seniors Abuse Line is a confidential information service aimed at providing seniors and others concerned about elder abuse with a one-stop information resource on elder abuse. The abuse line staff can provide information about community resources and support services available to help.

**SENIORS INFORMATION LINE IN MANITOBA 1-800-665-6565 OR 1-204-945-6565  
IN SASKATCHEWAN CALL THE SASK HEALTH LINE AT 1-877-800-0002**

These numbers provide information to seniors on various programs and services available.

### **SNOW LAKE FAMILY RESOURCE CENTRE 1-204-358-7141**

This centre provides resources to families on a variety of topics, as well as some counselling. The Snow Lake Family Resource Centre also partners with other organisations to promote family wellness in the community.

### **VETERANS AFFAIRS 1-866-522-2122**

This organization can provide resources [financial] for those persons who have a record of service in the Canadian Armed Forces.

### **WOMEN'S RESOURCE CENTRE 681-3105**

The role of Women's Resource Centre is to help women regain their self worth and to make informed decisions in their lives. The Women's Resource Centre provides one on one and group counselling as well as resources specific to women's needs. The Women's Resource Centre offers a short term emergency housing program "WOMEN'S SAFE HAVEN" for women and children who fear for their personal safety.