

Sexual Abuse in Nursing Homes:

What You Need to Know

Sexual abuse is non-consensual sexual contact by one person upon another. It may happen as the result of deceiving, manipulating, or forcing the resident into sexual contact. Sexual abuse is a form of elder abuse that frequently goes underreported, under-investigated, and unnoticed. In 2016, Ombudsman programs investigated 819 complaints regarding sexual abuse.¹

Sexual abuse can take on many forms and includes:

- Unwanted intimate touching of any kind, especially to breasts or genital area;
- Rape, oral or anal sex;
- Forced nudity;
- Forced observation of masturbation and/or pornography; and
- Taking sexually explicit photographs or audio/video recordings of a resident and distributing them online or in-person. This includes pictures or recordings of residents that are not fully clothed while they are being cared for (bathing, dressing, etc.).

Women and residents with dementia are more likely to be victims of sexual abuse. Women comprise nearly two-thirds (65.6%) of the nursing home population.² Residents with dementia are particularly susceptible to sexual abuse because of their impaired memory and communication skills. While women and residents with dementia are more likely to become victims of sexual abuse, all residents are vulnerable to abuse.

The abuser can be anyone who has contact with the resident. Residents may know their abuser, such as a family member, friend, or staff person, or they could be complete strangers. Abusers could include permanent and temporary staff, visitors to the facility, and even other residents. Some residents may have dementia or another mental health issue that impacts their choices and behavior and result in resident-to-resident sexual aggression (RRSA). Dementia-driven RRSA is the most common form of sexual abuse in nursing homes.³

It is important to note that residents have the right to engage in consensual sexual activity, but this is dependent on both residents having the capacity to consent. A resident's ability to consent to sexual activity needs to be carefully and adequately assessed through proper legal and ethical processes, as

¹ See National Ombudsman Reporting System, Nursing Facility Complaints by Category and Sub-Category (2016) at http://ltcombudsman.org/uploads/files/support/2016-B-2-NF-Comp-Full.xlsx.

² See Nursing Home Data Compendium 2015 Edition, Centers for Medicare and Medicaid Services, U.S. Department of Health and Human Services at https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/Downloads/nursinghomedatacompendium 508-2015.pdf.

³ See The Medico-Legal Aspects of Dementia-Driven Resident-to-Resident Sexual Abuse in Nursing Homes, Lisa Tripp, 2011 Consumer Voice Annual Conference at http://theconsumervoice.org/uploads/files/events/wed-2pm-lisa-tripp-dementia-driven-sexual-abuse (1).pdf.

some residents with dementia or other cognitive disorders may not be able to consent. Facilities must ensure both resident safety and residents' right to consensual sexual expression.

What are signs of sexual abuse?

If a nursing home resident is being sexually abused, there may be physical and psychosocial signs of this abuse.

Signs of sexual abuse may include:

- Bruises around inner thighs, the genital area, or breasts
- Unexplained genital infections or sexually transmitted diseases
- Unexplained vaginal or anal bleeding, pain, or irritation
- New difficulty sitting or walking
- Torn, stained, or bloodied underclothing

Sometimes, there may be no clear physical signs of abuse. However, there may be other signs that something is wrong, such as:

- Extreme agitation
- Withdrawal from social interactions
- Panic attacks or emerging post-traumatic stress disorder (PTSD) symptoms
- Suicide attempts
- Sudden or unexplained changes in behavior including fear or avoidance of a person or place, fear of being left alone or the dark, and increased nightmares, and/or disturbed sleep.

Residents may exhibit unusual behavior with their abuser, including tense relationships and frequent arguments. They may also exhibit anxiety or excessive fear around their abuser and engage in more aggressive behaviors.

If a resident says they have been sexually assaulted or raped. Believe them!

Residents have the right to be free from abuse

Under federal law, nursing home residents have the right to be free from abuse, including sexual abuse.⁴
Nursing facilities must:

- Have written policies and procedures to prohibit, prevent, and investigate abuse;⁵
- Train staff on what constitutes abuse and the procedures for reporting incidents or allegations; ⁶ and
- Not hire anyone who has been found guilty of abuse by a court, has had a finding entered into the state nurse aide registry for abuse, or has had a disciplinary action against them for abuse.⁷

⁴ 42 C.F.R. §483.12

⁵ 42 C.F.R. §483.12(b)(2)

^{6 42} C.F.R. §483.12(b)(3)

⁷42 C.F.R. §483.12(a)(3)

When the facility receives information about a suspected incident of abuse, they must:

- Implement safeguards to prevent further potential abuse;⁸
- Report the abuse to the State Survey Agency, law enforcement, and other state officials;⁹
- Conduct a thorough investigation of the abuse; and
- Thoroughly document and report the result of the investigation. 10

What to do if you suspect sexual abuse is occurring?

If you suspect that you or another resident is the victim of sexual abuse, please take the following steps:



Ensure the resident's safety. Make sure the resident who has been targeted is safe and all his/her immediate care needs are being met.



Report the abuse to the nursing home administrator and the person in charge in the facility at the time of the incident.



Call 911 or the local police to report the allegation of abuse. Do not bathe, urinate, change or wash your clothing or bedding, or brush your teeth or gargle, to preserve any physical evidence of the abuse. See the resources available in the Elder Abuse Guide for Law Enforcement, available at https://eagle.usc.edu/types-of-abuse/sexual/.



Obtain medical attention for the resident and support from victim's services programs. Talk to the resident about the need for a rape kit (if warranted), gain consent, and then ensure they get one done.



Call your state's Licensing and Certification Agency. This is the agency that inspects nursing homes and investigates complaints.



Call Adult Protect Services (APS). In some states, APS investigates reported suspicions about abuse of nursing home residents.



Call your Long-Term Care Ombudsman Program. The local long-term care ombudsman is an advocate for nursing home residents and can assist in getting residents needed help.



Continue to connect with the resident periodically to monitor how she/he is recovering from the abuse. Link the resident with appropriate medical and psychological support.

Contact information for the Long-Term Care Ombudsman Program, Adult Protective Services, and State Survey and Certification Agency can be found at www.theconsumervoice.org/get_help or by calling ElderCare Locator at 1-800-677-1116 or www.eldercare.acl.gov.

⁸ 42 C.F.R. §483.12(c)(3)

⁹ 42 C.F.R. §483.12(c)(1)

¹⁰ 42 C.F.R. §483.12(c)(2) & (c)(4)

Additional Resources can be found at:

- National Consumer Voice for Quality Long-Term Care www.theconsumervoice.org
- National Long-Term Care Ombudsman Resource Center www.ltcombudsman.org
- National Center on Elder Abuse www.ncea.acl.gov
- National Sexual Violence Resource Center www.nsvrc.org
- National Adult Protective Services Association www.napsa-now.org
- Elder Abuse Guide for Law Enforcement (EAGLE) https://eagle.usc.edu/

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