

**A CLIENT CARE MODULE:
UNDERSTANDING ABUSE**



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A Client Care Module:

UNDERSTANDING ABUSE

We hope you enjoy this inservice, prepared by registered nurses especially for caregivers like you!

Instructions for the Learner

If you are studying the inservice on your own, please do the following:

- Read through **all** the material. You may find it useful to have a highlighting marker nearby as you read. Highlight any information that is new to you or that you feel is especially important.
- If you have questions about anything you read, please ask your supervisor.
- Take the quiz. Think about each statement and pick the best answer.
- Check with your supervisor for the right answers. You need **8 correct** to pass!
- Print your name, write in the date, and then sign your name.
- Email In the Know at feedback@knowingmore.com with your comments and/or suggestions for improving this inservice.

THANK YOU!

After finishing this inservice, you will be able to:

List at least three common types of abuse seen in children and the elderly.



Explain why children and the elderly are most at risk for being victims of abuse.



Name at least three signs (each) that may mean a client is being physically, emotionally, sexually or financially abused.



Explain how healthcare workers can help prevent abuse.



Describe the process at your workplace for recognizing and reporting abuse.



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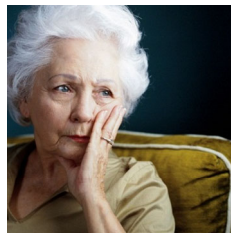
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A Client Care Module:

Understanding Abuse

INNOCENT VICTIMS OF ELDER ABUSE

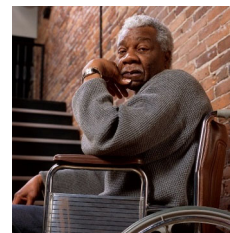


Meet Joan. Joan really appreciated her grandson for helping her run errands. Michael had always been a sweet boy and

seemed to genuinely care for his grandmother. It was the perfect arrangement. He would take her to the bank and wait while she deposited her check. Then he would drive her wherever she needed to do her shopping and other errands.

When the winter weather turned cold, Michael told his grandmother that it would be easier and safer if he just did the errands for her while she stayed warm and cozy at home. Joan didn't think twice about signing her check over to her grandson, who would make her purchases and then deposit the rest into her account.

It took several months to realize that while Michael was doing the shopping, he was also pocketing the rest of Joan's money. When Joan bounced a check for her mortgage, she found all her money was gone.



This is Don. Don desperately wanted to remain in his home—but really needed help with his activities of daily living. He

called an agency and quickly decided to hire Mindy, a Certified Nursing Assistant. The agency promised Don that Mindy would be able to meet his basic needs.

Mindy did the best she could, but Don's needs were a bit beyond her experience level. At first, she began to lose patience with how slowly Don moved. Later, she started to shove him—and out of frustration—she began to shout and call him names.

One day, she shoved him off of the toilet because he needed help cleaning himself after a bowel movement. Neighbors heard him crying in pain and called the police.

Don was found lying on the bathroom floor with a broken hip and bruises all over his body in various stages of healing.

Keep reading to learn all about abuse and neglect. In Part 1 of this series, you will read about abuse—how to recognize if someone is being abused, how to report it and even how to prevent yourself from abusing clients. In Part 2 of this series, you'll learn how to recognize, report and prevent neglect.

AN OVERVIEW OF THE PROBLEM

Abuse is a serious problem in our communities and in our institutions. People are most at risk for abuse when they are unable to take care of themselves. Can you name the two groups of people that are least able to care for themselves? **They are children and the elderly.**

What Exactly is Abuse?

Abuse is some action by a **trusted** individual that causes physical and/or emotional harm to the victim. There are a number of different kinds of abuse, including:

- Physical abuse
- Emotional abuse (includes verbal abuse)
- Sexual abuse
- Financial abuse (including identity theft)

Where Does Abuse Happen?

DOMESTIC ABUSE: Abuse can happen in every community around the United States. Every day, there are children and elderly people being abused in their own homes. The abuser is usually a family member, often someone with psychological problems.

- **IN THE NEWS:** A California man was arrested and charged with kidnapping and abusing his 82 year old grandmother after he got "angry" because she was driving too slowly. He "pounded" on the dashboard and "pushed" her right leg down to make the car go faster. Then he pulled his grandmother out from the driver's seat, "threw" her in the passenger's seat and punched her in the face several times after she tried to leave. Heroin was found in the car. Sadly, the grandmother refused medical attention and even helped her grandson get his sentence reduced.

INSTITUTIONAL ABUSE: Abuse and neglect can also happen in an institutional setting, such as a day care center or a nursing home. Abuse that happens in institutions can go on for a long time without detection. In long term care, staff, visitors and even other residents can be the abusers.

- **IN THE NEWS:** A nursing home in Ohio had its rating drop from 5 stars to 2 stars after a hidden camera caught nurse aides repeatedly abusing a resident. The investigation led to eight employees being disciplined and two aides being convicted.



Key Terms

- **Negligence** involves actions (or failure to take actions) that result in injury to a client.
- **Malpractice** is claimed when a client is injured as a result of negligence, carelessness or lack of skill.
- **Assault** is *threatening* to harm a person. Telling a resident he will be slapped if he soils his clothes is an example of assault.
- **Battery** is *actually* harming a person. Pushing, hitting or even forcing someone to eat are all forms of battery.
- **Domestic Abuse** is abuse by a spouse, intimate partner or family member.
- **Involuntary seclusion** is separating a person from others against the person's will. Confining a client to his room is an example of this type of abuse.

WHAT'S NEW?

Grab your favorite highlighter! As you read this inservice, **highlight five things** you learn that you didn't know before. Share this new information with your co-workers!





THE FACTS

- A report of child abuse is made every ten seconds.
- More than five children die every day as a result of child abuse.
- Approximately 80 percent of children that die from abuse are under the age of four.
- About 30 percent of abused and neglected children will later abuse their own children, continuing the horrible cycle of abuse.

GET INVOLVED!

If you would like to get involved in preventing child abuse in your community, go to: preventchildabuse.org.

- This program, run by the folks at Prevent Child Abuse America hopes to “engage all people in our society to act to prevent abuse and neglect from ever happening in the first place.”

FOCUS ON CHILD ABUSE

Child abuse can happen in any type of family—small, large, rich, poor, white, black, etc. It can also happen to children of all ages.

- Infants and toddlers are more likely than older children to be seriously injured or killed by child abuse.
- Abuse to adolescents can go unrecognized, since teenagers might try to hide the problem.
- Most often, children are abused by their families or guardians, but there are cases of children being abused by day care workers or other caregivers.

ABUSED CHILDREN MIGHT:

- Say they deserve to be punished.
- Act frightened of parents or other adults.
- Get scared when other kids cry.
- Be very quiet or very aggressive.
- Sit and stare into space.
- Be afraid to go home.
- Act much older than they are.
- Try to get attention by being “naughty.”
- Try to run away from home.
- Get bad grades at school.
- Attempt suicide.

NEGLECTED CHILDREN MIGHT:

- Beg for or steal food.
- Appear in dirty or torn clothing much of the time.
- Miss a lot of school.
- Act very tired all the time.
- Show no emotion on their faces.
- Talk in a whisper or whine.
- Try to get attention by being “naughty.”
- Abuse alcohol or drugs.
- Take on adult responsibilities.
- Talk about being left alone or left “in charge” of younger siblings.

WHO IS AT RISK?

Studies have shown that certain things put children more at risk for abuse. These factors include:

- Living with a parent who has a drug or alcohol problem—or a parent who was abused as a child.
- Living in a family where the parents are having marriage problems.
- Being a “special needs” child, with physical and/or mental disabilities.
- Living with parents who are unemployed or who have money problems.



FOCUS ON ELDER ABUSE

Elder abuse is defined as harm done to persons over the age of 65 by someone who is in a position of being trusted.

- There are two types of elder abuse. *Domestic elder abuse* happens in the person's home. *Institutional elder abuse* occurs in a nursing home or other long term care setting.
- Even if a caregiver is trying to help, it can be considered abusive if they use enough force to cause unnecessary pain or injury to an elderly person.
- We can only guess at the number of elderly who are abused every year. The best estimate is that there are about 5 million cases per year, but authorities say that less than half of them are reported.

Elders don't always report the abuse because they are:

- Afraid that the abuser will find out and be angry.
- Afraid that the authorities might take their family members away.
- Ashamed that their family member is abusing them.

Know the signs! It should send up a red flag if:

- The client is not allowed to speak to you unless another family member is present.
- The client is punished for being incontinent.
- You see family members abusing drugs or alcohol.
- You hear a client being threatened.
- You hear two different stories about how the client got a bruise or other injury.
- A family member refuses to allow you to complete the client's care.

WHO IS AT RISK?

Abuse can happen to anyone. However, there are certain factors that seem to increase the risk of abuse. Elderly people are more likely to be abused if:

- They are physically and/or mentally impaired.
- Their condition is getting worse.
- They are isolated from their family or community.
- They are dependent on others for all their needs.
- Their caregivers are stressed out.
- Their caregivers are not trained for the job of client care.
- Their caregiver is a family member with emotional problems or who is addicted to drugs or alcohol.



What Would You Do?

APPLY WHAT YOU'VE LEARNED

Whistleblowers are heroes who speak out when they witness abuse in the workplace, and have the power to make it STOP!

When you observe this behavior, do you tell the truth? Or, do you ignore the situation even though clients may suffer?

WOULD YOU BLOW THE WHISTLE IF...

- One day, you witness a co-worker slapping her client? Would it make a difference if you saw that co-worker slapping other clients previously?
- You overheard your client's adult son tell his mother, "You stink and I can't stand being in the same room with you"?
- You learned that your supervisor was withholding food and medicine from a client because the client was unable to pay for those services?



TALK ABOUT IT!

HELPING DON

Think about Don from the beginning of this inservice and discuss your answers to these questions with your supervisor and co-workers:

- What do you think went wrong in this situation?
- How could the situation have been prevented?
- Have you ever accepted a client assignment that was beyond your level of experience?
- If yes, how did you handle any difficulties or frustrations that arose?
- Mindy is the type of person who loses her cool under pressure. Have you ever worked with someone like Mindy?
- How would you respond to someone like Mindy if you were to witness an angry outburst or actual physical abuse of a client?

A CLOSER LOOK AT PHYSICAL ABUSE

Physical abuse is the use of physical force that may cause injury, pain or impairment. Physical abuse includes such things as:

- Striking, hitting, slapping or beating.
- Pushing or shoving.
- Shaking or choking.
- Kicking.
- Hair pulling.
- Pinching or scratching.
- Biting or spitting.
- Burning.
- Using physical restraints inappropriately.
- “Restraining” someone by giving too much medication.
- Taking away all food or water or forcing food.
- Putting someone out, unprotected, in severe weather.
- Using physical punishment.
- Making inappropriate sexual contact.
- Handling someone roughly during client care.

Know the signs! Be prepared to report any of these signs:

- Burns, including cigarette or hot water burns.
- Unexplained bruises, especially those in the shape of a belt or fingers.
- Multiple bruises that are at different stages of healing. (New bruises are red; then they turn blue, then black-purple, then dark green, then yellow.)
- Frequent trips to the emergency room.
- Cuts, scrapes or bite marks.
- Black eyes or broken eyeglasses.
- Signs of sexual assault such as bruises in the genital area, unexplained vaginal bleeding, and bloody or torn underwear.
- Unexplained venereal disease.
- Spots where hair seems to have been pulled out.
- Rope marks, especially on wrists or ankles.

Sadly, physical abuse can easily go unrecognized and unreported. It may be that the victim cannot tell someone what is happening or it may be that witnesses are afraid to speak out.

IN THE NEWS: A nurse in England was found guilty of abusing six residents in a nursing home. All six victims had dementia and could not *tell* their loved ones what was happening. The abuse had apparently gone on for years before several other staff members finally spoke out.

During the trial, one staff member testified that the abusive nurse would tell them, “No one will ever put in a complaint against me because my husband works in admin and he would find out and their life wouldn’t be worth living.”

Staff members in the home testified that they witnessed the nurse making dementia patients “walk like rag dolls” by kicking their heels from behind. She was also seen screaming at residents and forcing medication and food in their mouths.

A CLOSER LOOK AT EMOTIONAL ABUSE

Emotional abuse is when someone causes anguish, pain or distress to another person by what they say or do. Emotional abuse includes:

- Insults.
- Threats.
- Intimidation.
- Harassment.
- Yelling or screaming.
- Treating an elderly person like an infant.
- Constant criticism.
- Refusing to listen to someone.
- Giving someone the “silent treatment.”
- Humiliation, such as laughing when an elderly client wets their bed.
- Keeping someone away from family, friends or the community.



GET OUT! THINK OUTSIDE OF THE BOX!

Working with clients in the home often requires coming up with creative solutions to uncommon problems.

Know the signs! Watch for and report clients who:

- Seem to be afraid of certain caregivers or family members.
- Are yelled at by family members or caregivers.
- Are made fun of by family members or caregivers.
- Are suddenly very agitated.
- Are suddenly confused or are more confused than usual.
- Talk about being worthless.
- Cry all the time.
- Never seem to get enough sleep.
- Have a sudden change in appetite.
- Have big changes in their weight (either up or down).
- Seem very quiet or just stop talking suddenly.
- Talk about being helpless.
- Seem scared to talk to you about their lives or their health.
- Are angry all the time.

While physical, emotional and sexual abuse are all horrible in different ways, people who are emotionally abused tend to go undiagnosed most often. Victims of emotional abuse (and their loved ones) may not even believe the abuse is happening if there is no “physical” evidence.

IN THE NEWS: In her new book “Breaking the Chains to Freedom,” 37 year old Esther Adler describes being married to an emotionally abusive man.

Emotional abuse can be difficult to recognize and prove. Adler recalls being physically abused by her father as a child and says, “but with my husband I couldn’t understand I was being abused. I didn’t understand why I was hurt and in pain. I couldn’t pinpoint it.”

She also sends the warning that, “Emotional abusers are often **liked** by others.” This is why her children “sided” with her husband when she finally decided to file for divorce.



- **THE PROBLEM:** You are caring for Joan, the elderly woman from the beginning of this inservice.
- After Joan discovers all her money is gone, she confronts Michael. You hear Michael tell Joan that he *deserved* the money and that she should have been paying him anyway.
- You hear Joan crying when Michael threatens to never come back if she tells anyone about the theft.
- **WHAT YOU KNOW:** You know Michael is being emotionally abusive in an attempt to cover up the theft.
- **GET CREATIVE:** What will you do? Think of three ways you may be able to help Joan with this.
- **TALK ABOUT IT:** Share your ideas with your co-workers and supervisor and find out how they would solve this problem.



THINK ABOUT IT!

IDENTITY THIEVES, MODERN DAY PICKPOCKETS

The newest form of financial abuse is identity theft. Now, all a thief has to do is gather a few key pieces of a person's identity to rake in tons of stolen money.

Example: An Occupational Therapist in the Midwestern U.S. stole the identity of a patient, then took out nearly \$100,000 in loans.

Seniors are at greater risk for identity theft than most people because they:

- Often have more cash and better credit than others,
- Are less technologically savvy, and
- Do not monitor their credit or bank accounts very closely.

How can you help protect your senior clients from identity theft?

What does your workplace do to protect your clients' personal identification? Is it enough?

A CLOSER LOOK AT FINANCIAL ABUSE

Financial abuse includes the theft or misuse of someone's money or property by a trusted individual. This includes the following activities:

- Committing fraud.
- Getting money by lying about why it is needed.
- Forging checks.
- Cashing someone else's check without permission.
- Using someone's ATM card without permission.
- Forcing someone to change his or her will.
- Forcing someone to transfer property.
- Keeping someone away from his or her own home or money.
- Providing healthcare services to a client that are not really needed.
- Promising care in exchange for money and then not following through.

Know the signs! Keep an eye out for clients who:

- Can't pay their bills for housing, food, basic clothing or medications even though they seem like they should have money to do so.
- Get credit card bills for stores they have never been to.
- Suddenly have new "best friends."
- Talk about having to give money to others.
- Seem anxious about—or don't know—where their money is going.
- Have a family member who complains constantly about how much the client's care is costing.
- Have family members who appear suddenly and claim they have a right to the client's money.

Sadly, elder financial abuse is on the rise. In the majority of cases, abusers have a close connection to the victim and take advantage of this connection. Family members, friends, neighbors and caregivers are often the ones committing these crimes.

IN THE NEWS: A man who was a personal live-in caregiver in Canada was recently arrested in connection with a fraud investigation. He is accused of swindling an 84-year-old man who has Alzheimer's disease. It was reported that the caregiver lived with the man for just under a year and, while there, he is alleged to have stolen more than \$100,000 by accessing the man's bank accounts. Police believe there may be more victims.



A CLOSER LOOK AT SEXUAL ABUSE

Sexual abuse is any sexual contact of any kind with a person who has not given consent. Sexual abusers can be family members, medical staff and even other residents. Sexual abuse includes:

- Unwanted touching.
- Rape.
- Sodomy.
- Coerced nudity.
- Sexually explicit photographing.



Know the signs! You should suspect sexual abuse if you see:

- Bruises around the breasts or genital area.
- Unexplained venereal disease or genital infections.
- Unexplained vaginal or anal bleeding.
- Torn, stained, or bloody underclothing.
- A client **actually being** sexually assaulted or raped. (This may seem obvious, but see the true story below.)

Never be afraid to report if you suspect sexual abuse. If your report is not taken seriously by your supervisor, go up the chain of command. Do whatever is necessary to protect your client from sexual abuse.



IN THE NEWS: Mae Campbell, an 88-year-old Baptist preacher's daughter who suffers from Alzheimer's Disease was sexually abused at least twice while she was a resident in a Kentucky nursing home.

During one incident, Mae was sitting in the hallway, within sight of a nursing supervisor and other staff members, when a male **resident** walked up and ejaculated on her face. The nursing supervisor reportedly told the others not to tell anyone and that no harm had been done to Mae.

A few months later, a nurse saw a second male resident with Mae in a room where he had blocked the door. He was nude from the waist down and Mae had semen on her. Again, the nurse was told by the supervisor "to go on and keep working and . . . not to discuss it with anyone," and that "there was no actual harm done to the patient."

An investigation later uncovered that Mae had complained her throat was sore and she had soreness and bruising of her inner thighs. She had also complained of men trying to hurt her. Those complaints were never thoroughly evaluated and no action was ever taken.

The only reason these events were ever uncovered was because a caregiver and a nurse spoke out during an interview regarding the wrongful death of another resident. Mae's family was informed of the abuse and she was taken out of the nursing home.

THE NEXT STEP!

Whether you work in home health or in a facility, think about the clients you care for right now. Ask yourself:

Is it possible that any of my clients are being abused (physically, emotionally, financially, or sexually)?

If so, what are the signs?

What should I do about it?

Who can I go to for support with this issue?

What are the possible consequences if I *don't* get involved?

Talk to your supervisors and co-workers. Find out what they would do.



YOU CAN PREVENT ABUSE

Studies have shown that 93% of caregivers have seen or heard of a client being mistreated by a family member or a co-worker. You and your co-workers have to work together to prevent abuse.

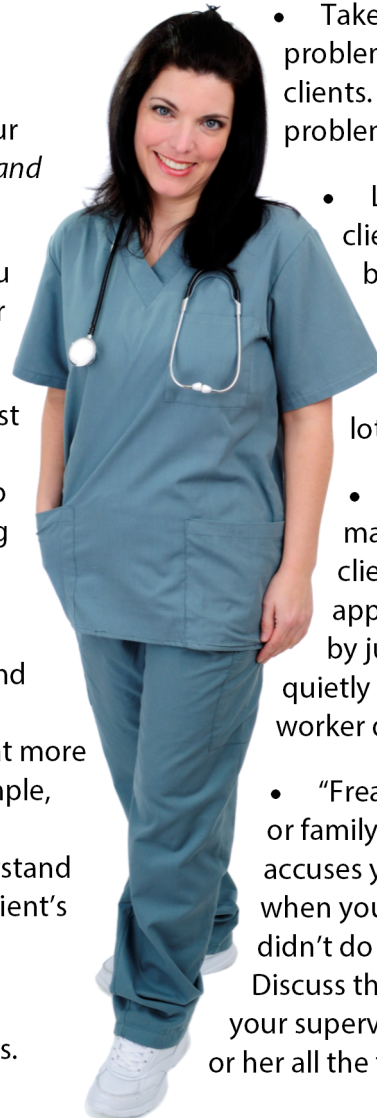
Here is what you can do:

ALWAYS:

- Let your supervisor know if your client's family members seem stressed out. (Abuse is more likely to happen when people are stressed. Your supervisor may have some suggestions for community resources to help the family members.)
- Remember that clients from different cultures may communicate their needs in different ways. Listen to your clients with both your eyes *and* your ears.
- Know your own limits. If you feel overstressed, talk it over with your supervisor.
- Remember that ANGER is just one letter short of DANGER! Breathe deeply and count to ten if you feel yourself losing your temper during client care.
- Tell your supervisor if you find yourself unable to handle a specific client. It may be that more training will help. (For example, an inservice on Alzheimer's disease may help you understand and deal with Alzheimer's client's better.)
- Be a model of professional behavior for your co-workers.

NEVER:

- Keep quiet if the abuser is a co-worker. While it may seem like you are "squealing" on a co-worker, if you stay quiet you could be guilty of neglect yourself. You will be helping both the client and the co-worker if you speak up.
- Take your personal problems out on the clients. Leave your problems at home.
- Let "difficult" clients get the better of you. Treat everyone with kindness, respect and lots of patience!
- Threaten or make fun of a client. Don't appear to approve by just standing quietly by while a co-worker does it either.
- "Freak out" if a client or family member accuses you of abuse when you know you didn't do anything wrong. Discuss the situation with your supervisor, telling him or her all the facts.



FIVE KEY POINTS!

REVIEW WHAT YOU LEARNED!

1. Abuse is a serious problem in our communities and in our institutions.
2. The people most at risk for abuse are **children** and the **elderly** because they often cannot protect themselves from harm.
3. Abuse is some action by a **trusted** individual that causes physical and/or emotional **harm** to the victim.
4. Whistleblowers are heroes who speak out when they witness abuse in the workplace, and have the power to make it STOP!
5. Caregivers are Mandated Reporters. That means you are **required** to report to the proper authorities if you observe or even just suspect a client is being abused.

HOW DO YOU REPORT ABUSE

CAREGIVERS ARE MANDATED REPORTERS!

A Mandated Reporter is a professional who has regular contact with vulnerable people—and is required to report to the proper authorities if abuse is observed or suspected. You can make reports anonymously, but you can also be charged with negligence for failing to make a report.

When making a report, be prepared to answer the following questions:

- Is the client in immediate danger?
- Is the client in need of emergency medical treatment?
- Does the client have any current medical problems?
- What is the client’s current living situation?
- Have you seen or heard yelling, hitting or other abusive behavior?
- Do you know the identity of the abuser?

WHAT WILL HAPPEN NEXT?

- If the situation is an emergency, the authorities forward the report to the police or paramedics.
- The case is assigned to a staff member who contacts the victim. In some states, if the victim is a competent adult, he or she has the right to refuse an investigation.
- If appropriate, the authorities will conduct an investigation of the situation. They may interview health care providers, police, clergy, neighbors, family and friends.
- Based on what the investigation shows, the victim may be moved to a safer location.

If the authorities find that it is safe for the victim to remain in his or her current living situation (or an adult victim refuses to leave), they may arrange for a variety of support, including:

- Mental health assessments.
- Counseling for the victim and/or the abuser.
- Support groups for stressed-out caregivers.
- Legal services such as restraining orders that keep an abuser away from the victim or lawsuits to get back stolen funds.



WHAT I KNOW NOW!

Now that you’ve read this inservice on abuse, jot down a couple of things you learned that you didn’t know before.



A Client Care Module:
Understanding Abuse

Are you "In the Know" about abuse?

Circle the best choice then check your answers with your supervisor!

EMPLOYEE NAME
(Please print):

DATE: _____

- ***I understand the information presented in this inservice.***
- ***I have completed this inservice and answered at least eight of the test questions correctly.***

EMPLOYEE SIGNATURE:

SUPERVISOR SIGNATURE:

Inservice Credit:

<input type="checkbox"/> Self Study	1 hour
<input type="checkbox"/> Group Study	1 hour

File completed test in employee's personnel file.

1. **You witness your client giving another Aide the login and password to her online bank account. You should:**
 - A. Report what you heard immediately.
 - B. Do not report it. Your client can make her own decisions.
 - C. Ask the client if you can have her login and password too.
 - D. Ask your co-worker to explain why she needed the information.
2. **Abused children are most often abused by:**
 - A. Nurses.
 - B. Teachers.
 - C. Parents or Guardians.
 - D. Older siblings.
3. **Elderly people may not report being abused because they are:**
 - A. Afraid that the abuser will find out and be angry.
 - B. Ashamed that their family member is abusing them.
 - C. Afraid that the authorities might take their family members away.
 - D. All of the above.
4. **During a bath, you notice your client has some bruises on her arms and legs. She tells you it happened when another Aide bathed her too roughly. You should:**
 - A. Speak to the other Aide to confirm the story.
 - B. Report your observations to your supervisor right away.
 - C. Do nothing. This type of thing happens and cannot be avoided.
 - D. Contact the police and the client's family members to have the client relocated.
5. **True or False**
Giving a client the "silent treatment" is a form of emotional abuse.
6. **True or False**
It's okay to accept a gift of money from a client, as long as it is for a job well done.
7. **True or False**
It's not technically abuse if a client is abused by another resident in the facility.
8. **True or False**
You should never accuse a co-worker of abuse. This can be harmful to the reputation of your employer.
9. **True or False**
A caregiver can be charged with negligence for failing to report abuse.
10. **True or False**
Abuse is most likely to happen when people are stressed.

