

**National Adult Protective Services Resource Center
NAPSA/NCPEA Research Committee
Research to Practice Brief
Research Summary**

Title - Elder Abuse Screening Tools in Primary Care: Reaching Solid Ground

Presenters - Hollie K. Caldwell, PhD (c), MSN, RN

Source - Campanella, H., Gilden, G. & Mueller, M. (2013). Elder abuse screening tools in primary care: An integrative review, 2004-2011. *Clinical Geriatrics*, 21(1), 20-25.

Summary of Research - This integrative review explored the state of elder abuse (EA) screening instruments for use in primary care settings from 2004 to 2011. Review of ten studies that met the review inclusion criteria revealed substantial growth in the nature and number of studies evaluating EA screening instruments for caregivers, caregivers and elders (care recipients), and elders. Noteworthy knowledge has been gained in the development of new EA instruments and the ability of EA screening instruments to identify current harm or risk of harm using sensitivity, specificity, and positive and negative predictive values. The studies continue to provide lower level evidence that is descriptive and cross-sectional in nature. Unfortunately, due to ethical concerns, higher level evidence involving randomized controlled trials may not be realistic. Three of the 10 studies were administered in healthcare environments and many investigated the use of less complicated EA screening instruments. Four studies included participants with dementia, which may signal a reduction of barriers to conducting EA screening instrument research in this vulnerable population. Similar to previous reviews, this review found no studies that investigated the possible adverse effects of EA screening.

Practice and Policy Implications - This review demonstrates that finding and developing EA screening tools is challenging. APS practitioners should be aware of the USPSTF criteria when evaluating screening tools and should watch for the “gold standard” and more serious errors in methodology as described in this study. Funding is needed to support research for qualitative approaches that examine the lived experiences of elders who screen positive for abuse using an EA screening instrument within primary care and are referred to Adult Protective Services (APS).

For Further Reading

Acierno R, Hernandez MA, Amstadter AB, Resnick HS, Steve K, Muzzy W, et al. Prevalence and correlates of emotional, physical, sexual, and financial abuse and potential abuse in the United States: the National Elder Mistreatment Study. *Am J Public Health*. 2010;100(2):292–7.

Daly JM, Merchant ML, Jogerst GJ. Elder abuse research: a systematic review. *J Elder Abuse Negl*. 2011;23(4):348–65

Nelson HD, Bougatsos C, Blazina I. Screening Women for Intimate Partner Violence and Elderly and Vulnerable Adults for Abuse: Systematic Review to Update the 2004 U.S. Preventive Services Task Force Recommendation. Evidence Synthesis No. 92. AHRQ Publication No. 12-05167-EF-1. Rockville, MD: Agency for Healthcare Research and Quality; May 2012.

The National Adult Protective Services Resource Center (NAPSRC) is a project (No. 90ER0002/01) of the U.S. Administration on Aging, U.S. Department of Health and Human Services (DHHS), administered by the National Adult Protective Services Association (NAPSA). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official Administration on Aging or DHHS policy. For more information and other Research-to-Practice briefs: www.napsa-now.org/NAPSRC/R2P.



This National Adult Protective Services Resource Center (NAPSRC) research summary is part of a series sponsored by the National Adult Protective Services Association (NAPSA) and the National Committee for the Prevention of Elder Abuse (NCPEA) joint Research Committee. The purpose of this research summary is to provide direct access to findings in order to enhance practice and clarify policy choices.

This brief released 8/2013

Prepared by:

**Hollie K. Caldwell,
PhD(c), MSN, RN**
College of Nursing
Medical University of
South Carolina