

**The 2004 Survey of State Adult Protective Services:  
Abuse of Adults 60 Years of Age and Older**

The National Committee for the Prevention of Elder Abuse  
and  
The National Adult Protective Services Association

Prepared for  
The National Center on Elder Abuse

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February 2006

This report was supported by a grant No. 90-AM-2792 from the Administration on Aging, U.S. Department of Health and Human Services. Grantees undertaking 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 policy.

# The National Center on Elder Abuse

*The Source for Information and Assistance on Elder Abuse*

The National Center on Elder Abuse (NCEA) serves as a national resource for elder rights advocates, adult protective services, law enforcement and legal professionals, medical and mental health providers, public policy leaders, educators, researchers, and concerned citizens. It is the mission of NCEA to promote understanding, knowledge sharing, and action on elder abuse, neglect, and exploitation.

The Center consists of a consortium of five organizations united by a shared commitment to elder abuse prevention. Administered by the National Association of State Units on Aging, NCEA is supported by grant no. 90-AM-2792 from the U.S. Administration on Aging, Department of Health and Human Services.

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## Acknowledgements

We are indebted to the Adult Protective Services (APS) staff from all 50 states, the District of Columbia, and Guam who took the time from their extraordinarily busy schedules to complete our survey by providing accurate and useful data. Due to a variety of definitions and state practices, the survey was truly a challenge for some to complete. We appreciate their dedication, their patience, and their commitment to the provision of services to older and vulnerable adults.

Definitions used for this study were compiled by the NAPSA Research Committee:

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We acknowledge and thank Paulette St. James (APS Program Administrator, Colorado Department of Human Services) and Sue Crone (Manager, Division of Protection & Permanency, APS, Kentucky) who completed the pilot surveys and made suggestions on revisions to draft surveys. Karen A. Roberto, Ph.D. (Professor and Director, Center for Gerontology, Virginia Tech) and Joy O. Duke, M.S.W. (Executive Director, Virginia Guardianship Association) were outside reviewers for NCPEA. Marilyn Whalen, M.S.W. (Consultant for NCPEA) also commented on the draft report.

We also express our sincere appreciation to the individuals below. Their support and patience made this study possible.

- Sara Aravanis, National State Units on Aging
- Frank Burns, U.S. Administration on Aging
- Brandt Chvirko, U.S. Administration on Aging
- Barbara Dieker, U.S. Administration on Aging
- Stephanie Whittier, U.S. Administration on Aging

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## EXECUTIVE SUMMARY

### **The 2004 Survey of Adult Protective Services: Abuse of Adults 60 Years of Age and Older**

This report contains the results of a national survey on elder abuse conducted by the National Center on Elder Abuse (NCEA). Information presented here represents Fiscal Year (FY) 2003 data from Adult Protective Services (APS) in all fifty states, the District of Columbia, and Guam. The report primarily summarizes data concerning reports of abuse for individuals 60 years of age and older. A forthcoming report will discuss abuse of adults of all ages. The National Committee for the Prevention of Elder Abuse (NCPEA) and the National Adult Protective Services Association (NAPSA), partners of the Center, carried out the project. The University of Kentucky conducted the research for NCPEA.

The purpose of the *2004 Survey of Adult Protective Services* was to gather the most recent and accurate state-level APS data on elder abuse. The project was a follow-up to the 2000 report, *A Response to the Abuse of Vulnerable Adults: The 2000 Survey of State Adult Protective Services* and provides data, where comparable, to identify trends. The first part of this report compares the 2004 data concerning abuse of adults of all ages with the 2000 data to provide a context for the age 60+ specific information. **To obtain a copy of the 2000 report, visit the NCEA website at [www.elderabusecenter.org](http://www.elderabusecenter.org). Click on “Statistics, Research and Resources” and go to “National Statistics, 2000 State APS Services Survey Results.”**

#### **National Trends- Abuse of Vulnerable Adults of All Ages**

- APS received a total of 565,747 reports of elder and vulnerable adult abuse for persons of all ages (50 states, plus Guam and the District of Columbia). This represents a 19.7% increase from the 2000 Survey (472,813 reports).
- APS investigated 461,135 total reports of elder and vulnerable adult abuse for persons of all ages (49 states). This represents a 16.3% increase from the 2000 Survey (396,398 investigations).
- APS substantiated 191,908 reports of elder and vulnerable adult abuse for victims of all ages (42 states). This represents a 15.6% increase from the 2000 Survey (166,019 substantiated reports).
- The average APS budget per state was \$8,550,369, compared to an average of \$7,084,358 reported in the 2000 Survey (42 states).

#### **Statewide Reporting Numbers**

- APS received a total of 253,426 reports on persons aged 60+ (32 states).
- APS investigated a total of 192,243 reports on persons aged 60+ (29 states).
- APS substantiated 88,455 reports on persons aged 60+ (24 states).
- APS received a total of 84,767 reports of self-neglect on persons aged 60+ (21 states).
- APS investigated a total of 82,007 reports of self-neglect on persons aged 60+ (20 states).
- APS substantiated 46,794 reports of self-neglect on persons aged 60+ (20 states).
- The most common sources of reports of abuse of adults 60+ were family members (17.0%), social services workers (10.6%), and friends and neighbors (8.0%).

#### **Categories of Elder Abuse, Victims Aged 60+**

- Self-neglect was the most common category of investigated reports (49,809 reports or 26.7%), followed by caregiver neglect (23.7%), and financial exploitation (20.8%) (19

States).

- Self-neglect was the most common category of substantiated reports (26,752 reports or 37.2%), followed by caregiver neglect (20.4%), and financial exploitation (14.7%) (19 States).

#### **Substantiated Reports, Victims Aged 60+**

- States reported that 65.7% of elder abuse victims were female (15 states).
- Of the victims aged 60+, 42.8% were 80 years of age and older (20 states).
- The majority of victims were Caucasian (77.1%) (13 states).
- The vast majority (89.3%) of elder abuse reports occurred in domestic settings (13 states).

#### **Substantiated Reports, Alleged Perpetrators of Victims Aged 60+**

- States reported that 52.7% of alleged perpetrators of abuse were female (11 states).
- Over three-fourths (75.1%) of alleged perpetrators were under the age of 60 (7 states).
- The most common relationships of victims to alleged perpetrators were adult child (32.6%) and other family member (21.5%) (11 states).
- Twenty-one states (40.4%) maintain an abuse registry or database of alleged perpetrators, while 31 (59.6%) do not.

#### **Interventions and Outcomes, Victims Aged 60+**

- Over half (53.2%) of cases were closed because the client was no longer in need of services or the risk of harm was reduced (8 states). Other reasons for closure were the death of the client, client entering a long-term care facility, client refusing further services, client moving out of the service area, unable to locate client, and client referred to law enforcement.
- Only four states, Colorado, Connecticut, Louisiana, and Massachusetts, and Guam provided information on outcomes of APS involvement.

#### **Recommendations**

- Accurate and uniform data must be continuously collected at both state and national levels so that abuse trends can be tracked and studied. A concerted effort is necessary to create uniform definitions of, and measures for reporting abuse. As a baseline, all states need to be able to provide the information that this survey requested.
- States should collect detailed age and gender specific information on race and ethnicity of victims and alleged perpetrators. Little is known about the racial composition and ethnic background data of elder abuse victims.
- The inclusion of information on reporters of abuse such as municipal agents, postal service workers, utility workers, and hospital discharge planners suggests that training on the identification of abuse should expand to groups heretofore not known as critical to prevention and intervention efforts.
- It is critical that states collect outcome data on the clients served. This information will be extremely helpful in determining efficacy of APS intervention.
- Increased numbers of reports, investigations, and substantiations lead to the need for increased local, state, and national intervention and education efforts targeted toward the abuse of adults 60+.
- Little information is available about perpetrators and what happens to them as a result of APS intervention. States should collect as much information as possible not only about the victims, but also about the perpetrators. Data collected will inform multiple actors in the elder abuse arena regarding prevention, intervention, and advocacy.
- A national study of APS data, specifically related to the abuse of adults 60+, should be conducted no less than every four years. The increment of every four years is recommended

because studies conducted in the past twelve years have been conducted within this time frame. This regularity is desirable for methodological comparability.

## **Adult Protective Services Cases**

*(Names are changed in order to protect confidentiality).*

Rosa is a 79-year-old widow who lives with Michael, her 52-year-old son. Michael moved in with her after experiencing a divorce in which he lost custody of his two children and ownership of his home. Within months of Michael's move, he assumed responsibility of Rosa's Social Security checks and meager pension. Now, he does not allow her to see visitors and has begun to lock Rosa in her room when he leaves the house. When she has medical appointments, Michael insists on accompanying Rosa throughout all aspects of the examinations. Rosa's long-time neighbors, concerned that they never see their friend, suspect abuse but are unsure of where to turn. Finally, one neighbor dialed the APS hotline.

Eddie is 76 years old and a former high school history teacher. A year ago, his wife of 53 years died suddenly due to a massive stroke. Since that time, he has begun to show signs of memory loss. Eddie, who has always liked to "hold onto things," has begun to hoard newspapers. He claims they are a defense against future September 11<sup>th</sup> terrorists. His three underfed dogs bark incessantly, and the siding is falling off his home. He rarely bathes and leaves the house around 2:00 a.m. to buy groceries once a month. Recently, there was a small fire in his kitchen because he forgot to turn off the stove. His two children, who live out of state, are very worried, but Eddie insists that there is nothing wrong with him. A concerned check-out clerk at the grocery store that Eddie frequents made a report to APS.

Cynthia, a 93-year-old woman with diabetes, has lived in the same home for 60 years. Recently, her granddaughter Carol and her boyfriend Kyle moved in with her to provide caregiving assistance in exchange for rent-free housing. Carol convinced Cynthia to add her to her checking account to help her pay bills. Carol is also trying to convince Cynthia to sign over the deed to the house in order to allow Carol to make house payments and generally "run things more smoothly." Neither Carol nor her boyfriend has worked since moving in with Cynthia. Recently, Carol became physically abusive when she was intoxicated and pushed Cynthia down a short flight of stairs. Cynthia will not contact the authorities because she is embarrassed by the situation. She does not want to have her granddaughter arrested. A teller at Cynthia's bank noticed the irregular account activity and made a report to APS.



***This report is dedicated to people who may be similar to Rosa, Eddie, and Cynthia and the people who help them.***



## **The 2004 Survey of State Adult Protective Services: Abuse of Adults 60 Years and Older**

### **Introduction**

This report contains the results of a national survey on elder abuse conducted by the National Center on Elder Abuse (NCEA). Information presented here represents Fiscal Year (FY) 2003 data from Adult Protective Services (APS) in all fifty states, the District of Columbia, and Guam. This paper primarily summarizes data concerning reports of abuse for individuals 60 years of age and older. The National Committee for the Prevention of Elder Abuse (NCPEA) and the National Adult Protective Services Association (NAPSA), partners of the Center, carried out the project. The University of Kentucky conducted the research for NCPEA, who partnered with NAPSA on the project.

Prior to reading this report, a caveat is necessary. APS, as explained in detail below, is not a national program. Established under Title XX of the Social Security Act in 1975, it was a federally mandated program with little or no funding attached. Thus, APS programs developed in accordance with the needs and constructs of each state. While programs do have similarities, each is tailored to the laws and regulations of each state, and the ability of individual states to respond to survey questions are reflective of this fact. For example, there are only ten states that have specific statutory definitions for self-neglect (i.e., Alaska, Colorado, Louisiana, Maryland, New Hampshire, New York, Utah, Washington, Wisconsin and Wyoming.) In the remaining twenty-seven states that provide services for self-neglecting elders and/or vulnerable adults, self-neglect is included as part of another category in the statute. To address this problem, definitions for the 2004 Survey were crafted by APS experts who drew from years of experience, knowledge of other states, and the most recent and available research.

### **Adult Protective Services**

According to a generic definition of APS developed by the National Association of Adult Protective Services, “Adult Protective Services (APS) are those services provided to older people and people with disabilities who are in danger of being mistreated or neglected, are unable to protect themselves, and have no one to assist them” (NAAPSA, May 2001, p. 1). In most states, APS programs are the first responders to reports of abuse, neglect, and exploitation of vulnerable adults.

Although states differ in their statutory and regulatory definitions, general definitions are helpful in understanding this report. For example, for the purposes of this study, a committee of key NAPSA members defined *abuse* as the infliction of physical or psychological harm or the knowing deprivation of goods or services necessary to meet essential needs or to avoid physical or psychological harm.

*Neglect* is defined as the refusal or failure to fulfill any part of a person’s obligations or duties to an elder. Neglect may also include failure of a person who has

fiduciary responsibilities to provide care for an elder (e.g., pay for necessary home care services) or the failure on the part of an in-home service provider to provide necessary care. Neglect typically means the refusal or failure to provide an elderly person/vulnerable adult with such life necessities as food, water, clothing, shelter, personal hygiene, medicine, comfort, personal safety, and other essentials included in an implied or agreed-upon responsibility to an elder.

***Financial or Material Abuse/Exploitation*** is defined as the illegal or improper use of an older person's or vulnerable adult's funds, property, or assets. Examples include, but are not limited to, cashing an older/vulnerable person's checks without authorization or permission; forging an older person's signature; misusing or stealing an older person's money or possessions; coercing or deceiving an older person into signing any document (e.g., contracts or will); and the improper use of conservatorship, guardianship, or power of attorney.

***Self-Neglect*** is regarded as an adult's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including (a) obtaining essential food, clothing, shelter, and medical care; (b) obtaining goods and services necessary to maintain physical health, mental health, or general safety; and/or (c) managing one's own financial affairs. Choice of lifestyle or living arrangement is not, in itself, evidence of self-neglect.

Finally, a ***vulnerable adult*** is defined as a person who is either being mistreated or in danger of mistreatment and who, due to age and/or disability, is unable to protect himself or herself<sup>1</sup>. Though most APS programs serve vulnerable adults regardless of age (based either on their age or incapacity), some serve only older persons. A few programs serve only adults ages 18-59 who have disabilities that keep them from protecting themselves. Interventions provided by APS include, but are not limited to, the following: receiving reports<sup>2</sup> of adult abuse, neglect, or exploitation; investigating these reports; assessing risk; developing and implementing case plans; monitoring services; and evaluating the impact of intervention. Further, APS may provide or arrange for a wide selection of medical, social, economic, legal, housing, law enforcement, or other protective emergency or supportive services (NAAPSA, May 2001).

## **Purpose**

The purpose of the *2004 Survey of Adult Protective Services* was to gather the most recent and accurate state-level APS data on elder abuse. The 2004 Survey builds upon earlier efforts to capture a national picture of elder abuse, as drawn from APS data. Data collection efforts, refined with iterations, have been conducted since 1986 (Tatara, 1996). Because of differences in definitions and varying capabilities among states, comparisons with earlier data have been problematic at best. Replicating questions where possible and reflecting "lessons learned" in previous studies, the 2004 Survey

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<sup>1</sup> Further definitions created by the NAPSA committee are contained within the survey portion at the end of this report.

<sup>2</sup> The term "report" is used throughout the document to refer to reports, allegations, and/or complaints.

represents a follow-up to the *2000 Survey of States* and provides data, where comparable, to identify trends.<sup>3</sup>

The intent of this national report is to provide valuable information to assist APS personnel, advocates for elders, researchers, and policy makers in understanding issues surrounding service and intervention needs, planning, program management, resource allocation, and media inquiries related to the abuse of adults over 60 years of age. It is hoped that this report will not be a static document, but rather that it will be a highly useful tool that will inform not only APS staff at all levels, but also elder advocates and policy makers to assist with prevention, intervention, and advocacy efforts. For researchers, for administrators, and for others who collect data, this information will serve as the most recent, comprehensive, and accurate information gathered on this topic and will serve as a template for baseline data collection in future years. These data should also make a compelling argument, either for the impetus for data collection or for its continuance and refinement. These data will also inform policy decisions on funding levels and other resources related to elder abuse.

## **Methods**

### *Survey Population*

The population for this survey included state-level APS administrators in all 50 states, as well as the District of Columbia and Guam (52 respondents). Louisiana, Massachusetts, and Oregon have two separate divisions or agencies, one serving adults 60+ and another serving vulnerable adults ages 18-59. For this report, only data from the division serving adults 60+ are used, except when discussing describing summary information for adults of all ages on pages 10-12 of this report.

### *Data Collection Instrument*

The data collection instrument consisted of a detailed 21 item survey and used *The 2000 Survey of State Adult Protective Services* as a starting point for its design. Building on the 2000 Survey where possible, construction of the 2004 Survey began in March 2004 with input from Joanne Otto, Executive Director of NAPSA, and the research team at the University of Kentucky (UK), which included a consultant who holds a Ph.D. in biostatistics. The survey went through refinement and numerous revisions after soliciting and responding to comments from NCEA partners, NAPSA staff, and staff from the Administration on Aging. The survey was also piloted by APS program managers Paulette St. James (Colorado) and Sue Crone (Kentucky) before being sent to state level APS contacts for completion. A copy of the 2004 Survey is found in Appendix A.

NAPSA provided UK a list of APS contacts for all 50 states, the District of Columbia, and Guam. The survey was sent to APS contacts in early September 2004,

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<sup>3</sup> To obtain a copy of the 2000 report, visit the NCEA website at [www.elderabusecenter.org](http://www.elderabusecenter.org). Click on "Statistics, Research and Resources" and go to "National Statistics, 2000 State APS Services Survey Results."

and states could return it via e-mail, fax, or traditional mail. The 2004 Survey relied on states' independent data collection. States provided information based on their own records for the 2003 Fiscal Year. The survey included the following sections: Statewide Reporting Numbers, Complaints Received, Categories of Abuse, Victim Information, Alleged Perpetrator Information, Service Delivery and Outcomes, and Funding and Administration. By January 2005, after multiple follow-up efforts, all states, the District of Columbia, and Guam provided data for the report (100% response rate), although not all states were able to respond to every question.

### *Procedure*

Data from all the states, the District of Columbia and Guam were entered into a spreadsheet and checked for accuracy after each entry. To double-check accuracy, all data were re-entered by a second research assistant, and the statistical consultant compared the two data sets for data entry errors. Slight discrepancies, usually relating to wording choices or spelling, were found and corrected. The NAPSA director also reviewed the data to check for inconsistent answers. In addition, members of the UK research team made numerous telephone calls and sent many e-mail messages to clarify answers provided. Numbers in the tables and text of the report were double-checked by the UK research team. Prior to NCEA partner review, the report was reviewed by members of NAPSA, NCPEA, and three independent outside reviewers. The UK research team responded to reviewers' suggestions and made changes where possible and as warranted.

## **National Trends, Abuse of Adults of All Ages**

### *Numbers of Elder Abuse Reports Received by APS*

**Brief information on abuse of all ages is provided here in order to put information regarding abuse of adults 60+ in appropriate context. A report on the abuse of adults of all ages is forthcoming.** For the 2004 Survey, APS received a total of 565,747 reports of elder and vulnerable adult abuse. Using 2000 Census data, for every 1,000 persons over the age of 18 in the United States, there was an average of 2.7 reports of abuse of older adults and vulnerable adults. For individual states, abuse reporting rates ranged from 0.8/1,000 in South Dakota to 8.3/1,000 in Oklahoma, with a median rate of 2.1/1,000.

All states, and the District of Columbia and Guam, provided abuse report data (n=52). The 565,747 compares to 472,813 reports documented in the 2000 APS Survey. This represents a 19.7% increase in total reports.

### *Investigated and Substantiated Reports*

There were a total of 461,135 investigations for adults of all ages in the 2004 study, representing a 16.3% increase from the 2000 Survey when states reported 396,398

investigations. Forty-nine states provided the total number of investigations, the same number of states as 2000.

For the 2004 study, 191,908 reports of abuse were substantiated for victims of all ages. This compares to 166,019 substantiated reports in 2000. Of the 42 states that could provide both the number of reports investigated and substantiated, the substantiation rate was 46.2%.<sup>4</sup> This percentage is very similar to the 48.5% substantiation rate from the 2000 Survey. The median substantiation rate of individual states was 35.1%. Table 1/Figure 1 summarizes the differences in total reports received, investigated, and substantiated in the 2004 and 2000 studies.

<b>Table 1: Comparison of Total APS Reports, 2004 and 2000 Surveys (All Ages)</b>				
	<b>2004 Survey</b>		<b>2000 Survey</b>	
	Reports	n	Reports	n
Received	565,747	52	472,813	52
Investigated	461,135	49	396,398	49
Substantiated	191,908	42	166,019	24

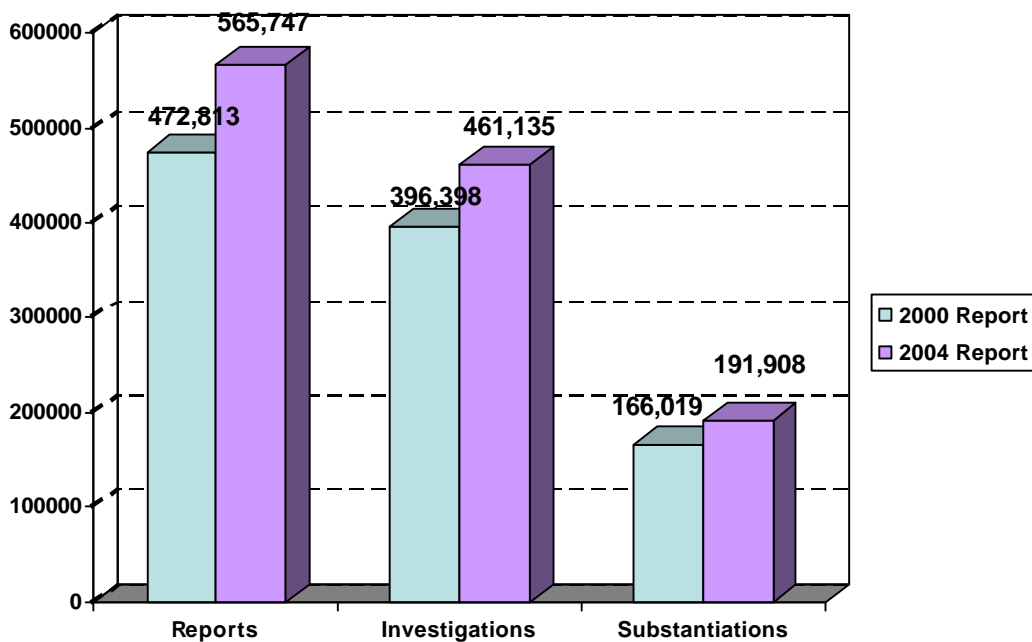


Figure 1. Comparison of Total APS Reports, 2004 and 2000 Surveys (All Ages)

Note: For both Table 1 and Figure 1, reports of self-neglect are included in the totals.

### *Self-Neglect Reports Received, Investigated, and Substantiated- Adults of All Ages*

Thirty-four states indicated receiving 174,940 reports of self-neglect for adults of all ages. States reported 170,218 investigations and 79,816 substantiations of self-

<sup>2</sup>The substantiation rate was calculated by using the ratio of substantiated reports and total investigated reports in the 42 states that provided these data.

neglect. The 2000 survey reported 118,447 reports investigated and 71,216 reports substantiated reports of self-neglect. The 2000 survey did not collect data on self-neglect for total reports received.

<b>Reports</b>	<b>All Ages</b>	<b>n</b>
Received	174,940	34
Investigated	170,218	36
Substantiated	78,816	30

### *Adult Protective Services Budget*

States did not separate budget information based on age categories of the victims. Forty-two states (80.8%) provided figures for their total APS budget. The average budget per state was \$8,550,369 as compared to an average budget of \$7,084,358 reported in the 2000 Survey. Tremendous diversity existed in state budgets, which ranged from \$170,609 (North Dakota) to \$72,000,000 (California).

The average amount that states spent on APS services per individual over 18 years of age was \$1.99. However, states revealed that they calculate their budgets differently. For example, New Jersey’s budget does not take county contributions into account, and Connecticut’s budget figures do not include salaries of APS staff.

For states providing both budget and substantiation information (n=35) an average expense (total budgeted divided by number of substantiated cases) of \$1,443 (range \$138-\$20,897) per substantiated case was calculated. This is not to say that the cost of substantiating a single case is \$1,443, for the agency also devotes financial resources to numerous reports and investigations that often do not result in a substantiated case. Nonetheless, the \$1,443 figure per substantiated case is instructive as a baseline calculation.

### **Key Points on National APS Reports (Vulnerable Adults, 18+)**

- APS received a total of 565,747 reports of elder and vulnerable adult abuse for persons of all ages (50 states, plus Guam and the District of Columbia). This represents a 19.7% increase from the 2000 Survey (472,813 reports).
- APS investigated 461,135 total reports of elder and vulnerable adult abuse for persons of all ages (49 states). This represents a 16.3% increase from the 2000 Survey (396,398 investigations).
- APS substantiated 191,908 reports of elder and vulnerable adult abuse for victims of all ages (42 states). This represents a 15.6% increase from the 2000 Survey (166,019 substantiated reports).
- APS investigated a total of 82,007 reports of self-neglect on persons aged 60+ (20 states).
- The average APS budget per state was \$8,550,369, compared to an average of \$7,084,358 reported in the 2000 Survey (42 states).

## Statewide Reporting Numbers, Adults 60+

**From this point of the report onward, information presented concerns only adults 60+.** Thirty-two states were able to separate reports where the victim was at least 60 years old, for 253,426 total reports, ranging from a low of 85 (Guam) to a high of 66,805 (California). This represents 8.3 reports of abuse for every 1,000 people over the age of 60. From these data, it can be inferred that there were 381,430 reports of elder abuse to APS in the U.S.<sup>5</sup> Abuse reporting rates ranged from .40/1,000 in Oregon to 24.5/1,000 in Connecticut, with a median rate of abuse reporting for older adults was 5.7/1,000 (Table 3). These data compare to a range as reported by Jogerst and colleagues (2004) of a low of 4.5 (New Hampshire) to a high of 14.6 (California) per 1,000 older adults.

<b>State</b>	<b>Abuse Reporting Rate (per 1,000 population over 60)</b>	<b>State</b>	<b>Abuse Reporting Rate (per 1,000 population over 60)</b>
AK	*	MS	*
AL	*	MT	10.97
AR	4.71	NC	*
AZ	*	ND	*
CA	14.09	NE	*
CO	*	NH	6.64
CT	24.51	NJ	*
DC	*	NM	*
DE	3.48	NV	10.74
FL	*	NY	5.31
GA	*	OH	5.27
GU	6.67	OK	*
HI	4.87	OR	0.4
IA	1.65	PA	5.59
ID	9.52	RI	12.54
IL	3.91	SC	*
IN	*	SD	2.14
KS	6.79	TN	4.81
KY	8.35	TX	14.55
LA	5.73	UT	5.53
MA	8.66	VA	*
MD	4.12	VT	*
ME	*	WA	*
MI	4.60	WI	4.25
MN	10.72	WV	13.21
MO	11.50	WY	1.51

These figures are put in context concerning reports of prevalence that have been attempted since the late 1980s. Few calculations of prevalence of elder abuse have been conducted (Bonnie & Wallace, 2003). The classic study is that of Pillemer and Finkelhor (1988), who found a prevalence rate of 32/1,000 of all persons 65 years of age and older

<sup>5</sup> The group of respondents (32 states) and non-respondents (20 states) were compared based on 60+ population, total number of reports of abuse, gender, race, income (proxy for SES), and APS budget using 2004 APS data and 2000 Census data. No statistically significant differences were found between the two groups.

in Boston; the study did not include exploitation. In the study conducted 10 years later, Comijis and colleagues reported a rate of 5.6%. Related information by the National Center on Elder Abuse (1996) found that approximately 550,000, or 10/1,000 persons aged 60 and over experienced abuse or neglect, or both.

It is important to stress that states have different methods of receiving reports. Some states operate call centers that screen reports and redirect them to an agency other than APS for investigation if appropriate. Therefore, in these states, not all of the abuse reports that are received are forwarded to APS for investigation. Reports that are referred directly to law enforcement or another agency are not represented in APS data.

For the 29 states able to provide investigation information for adults aged 60+, there were a total of 192,243 investigations. Twenty-four states separated abuse of individuals aged 60+ and reported 88,455 substantiated reports. The average substantiation rate for states that provided both investigated and substantiated reports was 46.7%. Rates of substantiation from the 2004 Survey ranged from a low of 7.2% (Arkansas) to a high of 72.4% (Texas). The wide range of substantiation rates is largely attributable to different definitions and procedures that states use for substantiation.

*Reports, Investigations, and Substantiations of Self-Neglect*

For the twenty-one states able to separate self-neglect reports by age group, 84,767 reports of self-neglect were received for adults 60+. Twenty states investigated a total of 82,007 reports of self-neglect for older adults. With data from 20 states, there were 46,794 substantiated reports specific to those 60+ (Tables 4, 5).

<b>Table 4: Summary of Reports of Self-Neglect Received, Investigated and Substantiated (2004 Survey)</b>		
<b>Reports</b>	<b>60 +</b>	<b>n</b>
Received	84,767	21
Investigated	82,007	20
Substantiated	46,794	20

<b>Table 5: Summary of Reports Received, Investigated, and Substantiated (2004 Survey)</b>				
<b>Reports</b>	<b>Total 60+</b>	<b>n</b>	<b>Self-Neglect 60+</b>	<b>n</b>
Received	253,426	32	84,767	21
Investigated	192,243	29	82,007	20
Substantiated	88,455	24	46,794	20

*Sources of Elder Abuse Reports*

Of the 11 states able to identify the sources of reports on elder abuse, the most common reporters were family members (17.0%), followed by social services agency staff (10.6%), and friends and neighbors (8.0%). Nearly a fourth (22.8%) of reports was received from those who were classified as “Other”; however, very few states specified



the “Other” category. Of those specified, the greatest numbers of reports were initiated by the abusers themselves, municipal agents, postal service workers, utility workers, and hospital discharge planners. Table 6 is a compilation of the top ten categories of sources of reports, which, together with the “Other” category, account for 88.3% of identified sources.

<b>Source of Report</b>	<b>Number of Reports</b>	<b>Percentage of Reports</b>	<b>n</b>
Family Members	16,073	17.0%	10
Social Services Agency Staff	10,000	10.6%	9
Friends/ Neighbors	7,511	8.0 %	9
Self	5,902	6.3%	10
Long Term Care Facility Staff	5,196	5.5%	6
Law Enforcement	4,964	5.3%	10
Nurses/ Nurses’ Aides	4,475	4.7%	6
Anonymous/ Undisclosed	3,568	3.8%	9
Home Health Staff	2,782	2.9%	7
Physicians	1,361	1.4%	7
Other	21,510	22.8%	9

### **Key Points on Statewide APS Reports (Adults 60+)**

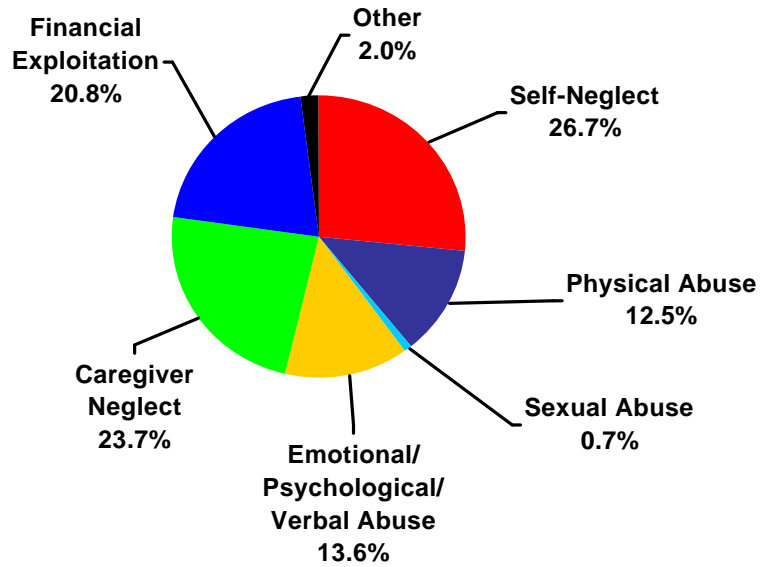
- APS received a total of 253,426 reports on persons aged 60+ (32 states).
- APS investigated a total of 192,243 reports on persons aged 60+ (29 states).
- APS substantiated 88,455 reports on victims aged 60+ (24 states).
- APS received 84,767 reports of self-neglect on persons aged 60+ (21 states).
- APS substantiated 46,794 reports of self-neglect on victims aged 60+ (20 states).
- The most common sources of reports of elder abuse were family members (17.0%), social services workers (10.6%), and friends and neighbors (8.0%) (11 states).

### **Categories of Elder Abuse**

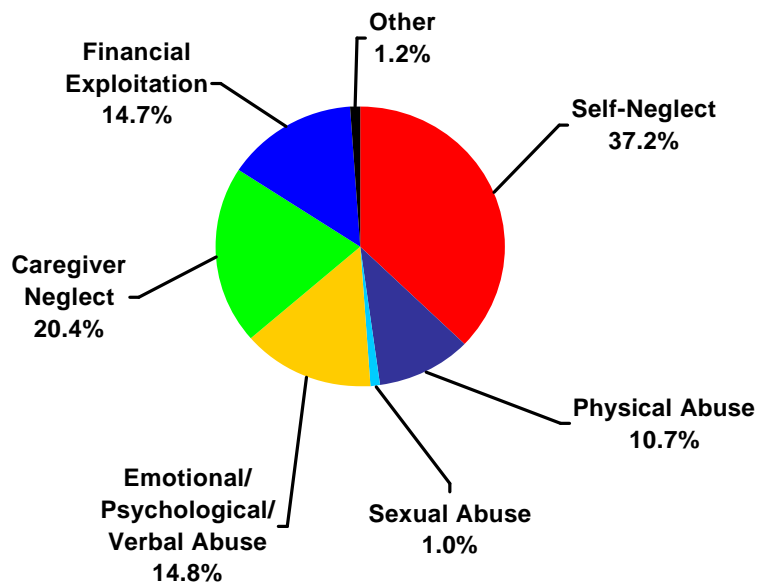
Twenty-two states provided information related to specific categories of abuse for adults aged 60+. Sixteen of these states provided numbers for both investigated and substantiated reports. For the following two figures, data from the state of Texas are excluded from the “Other” category. Since Texas employs a different method for tracking neglect than that used in this survey, it was not possible to separate cases of caregiver neglect from self-neglect. Including them would artificially inflate totals for the “Other” category.<sup>6</sup>

<sup>6</sup> Provided is a breakdown of Texas APS “Other” data for investigations: Adults 18-59: suicide threat, 465; physical neglect, 17,736; medical neglect, 6,309; mental health neglect, 3,194; neglect (MHMR), 2,816. Adults 60+: suicide threat, 296; physical neglect, 30,839; medical neglect, 9,478; mental health neglect, 3,563; neglect (MHMR), 213. Texas “Other” data for substantiations: Adults 18-59: suicide threat, 177; physical neglect, 12,240; medical neglect, 4,313; mental health neglect, 2,242; neglect (MHMR), 490. Adults 60+: suicide threat, 92; physical neglect, 21,016; medical neglect, 6,185; mental health neglect, 2,501; neglect (MHMR), 53.

**Figure 2: Investigated Reports by Category for Adults 60+ (n = 19 States)**



**Figure 3: Substantiated Reports by Category for Adults 60+ (n = 19 States)**



### Key Points on Categories of Elder Abuse

- Self-neglect was the most common category of investigated reports (49,809 reports or 26.7%), followed by caregiver neglect (23.7%), and financial exploitation (20.8%) (19 States).
- Self-neglect was the most common category of substantiated reports (26,752 reports or 37.2%), followed by caregiver neglect (20.4%), and financial exploitation (14.7%) (19 States).

### Victim Profiles, Substantiated Cases

Fifteen states reported that 65.7% of elder abuse victims aged 60+ were female. Twenty states were able to break down the ages of abuse victims in increments of 10 years. For those states, 20.8% of victims were between the ages of 60 and 69, 36.5% were 70-79, and 42.8% were 80 years of age and older.

According to the 13 states that provided data on race (Table 7), the majority of victims aged 60+ who experienced elder abuse were Caucasian (77.1%), followed by African American (21.2%), American Indian and Alaskan Native (0.6%), Asian (0.5%), Native Hawaiian and Pacific Islander (0.2%), and “Other” (0.2%).

Racial Category	Reports	Percentage
Caucasian	34,709	77.1%
African American	9,606	21.2%
American Indian and Alaskan Native	288	0.6%
Asian	243	0.5%
Native Hawaiian or Pacific Islander	89	0.2%
Other	92	0.2%
<b>Total</b>	<b>45,207</b>	<b>100.0%†</b>

†The sum of the percentages listed does not equal 100 due to rounding.

With data from 13 states, an overwhelming majority of substantiated reports of elder abuse occurred in domestic settings (89.3%), and approximately 6.2% of substantiated reports were in long-term care settings, and 1.8% occurred in “other” locations, which included hotels/motels, the workplace, and assisted living facilities.

Note that not all state APS programs investigate abuse that occurs in long-term care facilities; therefore, this number may be lower than the actual incidence of abuse. In addition, there are several other agencies to which reports of abuse occurring in long-term care facilities may be made, such as the Survey and Certification Agency and Medicare Fraud Units.

### Key Points on Substantiated Reports of Victims Aged 60+

- States reported that 65.7% of elder abuse victims were female (15 states).
- Of the victims aged 60+, 42.8 were 80 years of age and older (20 states).
- The majority of victims were Caucasian (77.1%) (13 states).
- The vast majority (89.3%) of elder abuse reports occurred in domestic settings (13 states).

### Alleged Perpetrators, Substantiated Cases

Eleven states reported that 52.7% of the alleged perpetrators of abuse of individuals aged 60+ were female (47.3% male). For the seven states reporting ages for alleged perpetrators, 4.3% were under 18 years of age, 10.6% were 18-29, 16.1% were 30-39, 25.6% were 40-49, 18.5% were 50-59, 11.2% were 60-69, 7.9% were 70-79, and 5.8% were over 80 years of age.

Eleven states provided information on the relationship of the perpetrator to the victim (Table 8). The most common relationship was that of adult child (32.6%), followed by other family member (21.5%), unknown relationship (16.3%), and spouse/intimate partner (11.3%).

Relationship	Reports	Percentage	n
Adult Child	5,976	32.6%	8
Other Family Member	3,946	21.5%	10
Unknown	2,989	16.3%	8
Spouse/Intimate Partner	2,074	11.3%	10

Twenty-one states (40.4%) maintain an abuse registry or database of alleged perpetrators, while 31 (59.6%) do not. States maintaining an abuse registry are Arkansas, Delaware, Hawaii, Iowa, Indiana, Kansas, Louisiana, Massachusetts, Minnesota, Missouri, Mississippi, Nebraska, New Mexico, Nevada, Oklahoma, Oregon, Texas, Utah, Vermont, Washington, and Wyoming. Several states do not maintain a specific registry of alleged perpetrators; however, perpetrators in substantiated reports are placed into other state crime databases (e.g., Idaho, Alaska, and Wisconsin).

### Key Points on Alleged Perpetrators of Victims Aged 60+

- States reported that 52.7% of alleged perpetrators of abuse were female (11 states).
- Over three-fourths (75.1%) of alleged perpetrators were under the age of 60 (7 states).
- The most common relationships of victims to alleged perpetrators were adult child (32.6%) and other family member (21.5%) (11 states).
- Twenty-one states (40.4%) maintain an abuse registry or database of alleged perpetrators, while 31 (59.6%) do not.

## **Interventions and Outcomes, Victims Aged 60+**

### *Reasons for Case Closure*

Eight states provided reasons why cases of elder abuse were closed. The most common reasons specified for case closure were “client no longer in need of services (risk of harm reduced)” (42.0%) and “client refused further services” (16.0%). Cases were also closed due to referrals to law enforcement (7.8%), clients entering a long-term care facility (6.3%), and death (2.4%). Clients moving out of the service area and APS being unable to locate clients accounted for about 2.5% of total cases closed. An additional 21.1% of cases were closed due to “Other.”

### *Outcome Measures*

One of the most critical pieces of information regarding APS intervention is the outcome of service provision. Respondents were asked, broken out for abuse, neglect, self-neglect, and exploitation, whether client risks were reduced, stayed the same, or increased for substantiated cases. Only four states, Colorado, Connecticut, Louisiana, and Massachusetts, and the territory of Guam provided information on outcomes of APS involvement.<sup>7</sup>

### **Key Points on Interventions and Outcomes, Victims Aged 60+**

- Cases were closed most often because the client was no longer in need of services or the risk of harm was reduced (8 states).
- Only four states and the territory of Guam provided information on outcomes of APS involvement.

### **Conclusions and Recommendations**

#### *Abuse of Adults of All Ages*

Reports of elder abuse, neglect and exploitation increased significantly from the 2000 Survey, representing a 19.6% increase for adults of all ages. The substantiation rate was fairly consistent with 48.5% in 2000 and 46.2% as reported in the 2004 Survey. Data on adults 60+ were not gathered in the 2000 Survey.

Sources of abuse complaints were largely from family members and social services staff. Interesting subsets emerged as reporters, such as the abuser himself/herself, postal workers, and medical examiners.

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<sup>7</sup> Data were not included because two states’ outcome numbers were significantly higher than substantiated report totals provided.

### *Abuse of Adults 60+ Years of Age*

Self-neglect made up approximately one-third of both investigated and substantiated reports of abuse of adults aged 60+ (20 states). Self-neglect was closely followed by caregiver neglect and financial exploitation.

As borne out by previous surveys and extant research literature (Bonnie & Wallace, 2003; Teaster & Colleagues, 2003), the most common reporters of elder abuse were family members, followed by social services agency staff and friends and neighbors (11 states). Medical staff, including nurses/nurses' aide, home health staff, and physicians constituted less than 5% of total report sources. New categories of reporters arose in the other category, notably the abusers themselves, municipal agents, postal service workers, utility workers, and hospital discharge planners. Also, as borne out by the research literature (Bonnie & Wallace, 2003) and discussed below, the reporters can also arise from family members who are reporting on the abuse of other family members.

Over 65% of victims aged 60+ were women (15 states). Over 40 percent of victims in the 60+ age category were 80 years of age and older (20 states). Domestic settings were the most common location of the occurrence of abuse in substantiated reports (13 states), likely because all state APS programs investigate in domestic settings. The majority of victims aged 60+ were Caucasian (71.1%); however, only 13 states were able to provide data on racial composition. Only three states could compare Hispanic and non-Hispanic victims.

Slightly more than half of alleged perpetrators of abuse of victims aged 60+ were women (11 states). The largest age category of alleged perpetrators was between thirty and fifty years of age (7 states). Most alleged perpetrators were adult children or other family members (11 states).

The 2004 Survey revealed that a large percentage (53.2% of cases categorized) of cases were closed because "the client was no longer in need of services (risk of harm reduced)" (8 states). A follow-up question asking states to provide case outcomes was completed by only five states.

To reiterate limitations mentioned earlier, conclusions and recommendations are limited by the inability of all states to provide data for many of the questions asked. Definitions of terms likely were a contributing factor, although the survey included its own definitions of terms used in the questions. Fiscal restraints related to ability to collect the data requested may also be a contributing factor.

### *Recommendations*

- Accurate and uniform data must be continuously collected at both state and national levels so that abuse trends can be tracked and studied. A concerted effort is necessary to create uniform definitions of, and measures for reporting abuse. As a baseline, all states need to be able to provide the information that this survey requested.

- States should collect detailed age and gender specific information on race and ethnicity of victims and alleged perpetrators. Little is known about the racial composition and ethnic background data of elder abuse victims.
- The inclusion of information on reporters of abuse such as municipal agents, postal service workers, utility workers, and hospital discharge planners suggests that training on the identification of abuse should expand to groups heretofore not known as critical to prevention and intervention efforts.
- It is critical that states collect outcome data on the clients served. This information will be extremely helpful in determining efficacy of APS intervention.
- Increased numbers of reports, investigations, and substantiations lead to the need for increased local, state, and national intervention and education efforts targeted toward the abuse of adults 60+.
- Little information is available about perpetrators and what happens to them as a result of APS intervention. States should collect as much information as possible not only about the victims, but also about the perpetrators. Data collected will inform multiple actors in the elder abuse arena regarding prevention, intervention, and advocacy.
- A national study of APS data, specifically related to the abuse of adults 60+, should be conducted no less than every four years. The increment of every four years is recommended because studies conducted in the past twelve years have been conducted within this time frame. This regularity is desirable for methodological comparability. The increment of every four years is recommended because studies conducted in the past twelve year have been conducted within this time frame. This regularity is desirable because of methodological comparability.

## Individual States' Responses to Selected Questions

State	Reports 60+		Investigations 60+		Substantiations 60+		Budget Information	Sources of Reports 60+	Categories of Abuse 60+		Victim Demographics 60+			Perpetrator Demographics 60+	
	ANE	SN	ANE	SN	ANE	SN			Inv.	Sub.	Age	Sex	Race	Age	Sex
AK							X				X		X		
AL							X								
AR	X	X	X	X	X	X	X		X	X	X	X	X		
AZ							X				X				
CA	X	X	X	X	X	X	X		X	X					
CO							X								
CT	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
DC							X								
DE	X														
FL					X	X	X		X	X	X				
GA															
GU	X				X		X	X	X	X	X	X	X	X	X
HI	X	X	X	X	X	X			X			X			
IA	X				X						X				
ID		X	X	X	X	X	X								
IL	X	X	X	X	X	X	X	X	X	X	X	X	X		X
IN							X				X				
KS	X						X								
KY	X			X	X	X	X		X	X					
LA	X	X	X	X	X		X	X	X		X	X	X		
MA	X	X	X	X	X	X	X	X		X	X				
MD	X	X	X	X	X	X	X			X	X		X		
ME							X								
MI	X														
MN	X	X	X	X	X	X	X	X	X	X	X	X	X		X
MO	X														
MS															
MT	X						X								
NC							X								
ND							X								
NE															
NH	X	X	X		X	X		X		X	X			X	X
NJ							X								
NM							X								
NV	X	X	X	X	X	X	X		X	X			X		X
NY	X	X	X	X			X								
OH	X	X	X	X	X	X	X				X	X	X		
OK							X								
OR	X				X		X	X	X	X	X	X		X	X
PA	X	X	X	X	X	X	X	X	X	X		X	X	X	X
RI	X	X	X	X			X		X	X		X			

ANE = Abuse, Neglect, and Exploitation; SN = Self-neglect.



State	Reports 60+		Investigations 60+		Substantiations 60+		Budget Information	Sources of Reports 60+	Categories of Abuse 60+		Victim Demographics 60+			Perpetrator Demographics 60+	
	ANE	SN	ANE	SN	ANE	SN			Inv.	Sub.	Age	Sex	Race	Age	Sex
SC							X								
SD	X	X	X	X	X	X	X		X	X					X
TN							X								
TX	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
UT		X	X	X	X	X	X		X	X	X	X		X	X
VA							X								
VT		X	X				X								
AWA							X								
WI	X	X	X	X	X	X		X	X	X	X	X	X	X	X
WV	X				X		X		X						
WY						X	X				X				

ANE = Abuse, Neglect, and Exploitation; SN = Self-neglect.

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## APPENDIX A

# The 2004 Survey of Adult Protective Services Data

The National Center on Elder Abuse (NCEA) is conducting a national study of elder abuse. The National Committee for the Prevention of Elder Abuse and the National Adult Protective Services Association, partners of the Center, will carry out the project. The University of Kentucky is conducting the research for NCEA. The results of this survey will provide the most comprehensive information about reports of elder abuse in the country.

It is vital to the project to have your assistance in completing this survey. We anticipate that survey completion will take approximately 45 minutes. If you have any questions, do not hesitate to contact Tyler Dugar, A.B.D., Research Coordinator, at [tdugar@uky.edu](mailto:tdugar@uky.edu) or 859.257.1450 x80191. You may return the survey by e-mail attachment, fax (cover sheet provided), or conventional mail (mailing label provided). Please return the survey by **September 24**. If you return the survey via email as an attachment, please send to [tdugar@uky.edu](mailto:tdugar@uky.edu) with the subject line "APS Survey."

### DEFINITIONS FOR 2004 NCEA SURVEY OF STATE APS PROGRAMS

For the purposes of this study and in order to generalize the findings, definitions have been drawn from articles in Vol. XXIV of *Generations- the Journal of the American Society on Aging* (2001), Elder Mistreatment: Abuse, Neglect, and Exploitation in an Aging America (2003), NAPSA, Key Words in Ethics, Law, and Aging (Kapp, 1995) and the *Older Americans Act*.

Please refer to the definitions below as guidelines when answering the questions for your state.

### DEFINITIONS

**Abandonment:** The desertion of an elderly person by an individual who has assumed responsibility for providing care for an elder, or by a person with physical custody of an elder.

**Abuse:** The infliction of physical or psychological harm or the knowing deprivation of goods or services necessary to meet essential needs or to avoid physical or psychological harm.

**Adult Protective Services:** Services provided to elders and to vulnerable adults with disabilities who are, or who are in danger of, being abused, neglected, or financially exploited, who are unable to protect themselves, or who have no one to adequately assist them. The term includes activities such as receiving reports of abuse, neglect or financial exploitation; disseminating reports of adult abuse, neglect or exploitation; investigating those reports; case planning; monitoring; evaluation; providing other casework services; and providing, arranging for, or facilitating the provision of medical, social service, economic, legal, housing, law enforcement, or other protective, emergency, or support services targeted toward risk reduction, increased safety and protection.

**Caregiver:** An individual who has the responsibility for the care of an elder either voluntarily, by contract, by receipt of payment for care, or as a result of the operation of law. The term refers to a family member or other individual who provides (on behalf of such individual or of a public or private agency, organization, facility or institution) compensated or uncompensated care to an elder or vulnerable adult who needs supportive services in any setting.

**Elder:** A person 60 years of age or older. Elders may also be referred to as older adults.

**Emotional/psychological/verbal abuse:** The infliction of anguish, pain, or distress through verbal or nonverbal acts. Emotional/psychological abuse includes but is not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment. In addition, treating an older person such as an infant; isolating an elderly person from his/her family, friends, or regular activities; and enforced social isolation are examples of emotional/psychological abuse.

**Fiduciary:** In a fiduciary relationship, the more powerful party (i.e. the fiduciary) accepts the special obligation to act in a manner consistent with the best interests of the less powerful party, rather than primarily serve his or her own interests.

**Financial or Material Abuse/Exploitation:** The illegal or improper use of an older person's or vulnerable adult's funds, property, or assets. Examples include, but are not limited to, cashing an older/vulnerable person's checks without authorization or permission; forging an older person's signature; misusing or stealing an older person's money or possessions; coercing or deceiving an older person into signing any document (e.g., contracts or will); and the improper use of conservatorship, guardianship, or power of attorney.

**FY 2003:** FY 2003 refers to Fiscal Year 2003. FY 2003 means the twelve month period the individual state defines as the fiscal year.

**Guardianship:** (a) the process by which a court determines that an adult individual lacks capacity to make decisions about self-care and/or property and appoints an individual or entity known as a guardian, conservator, or a similar term, who serves as a surrogate decision maker; (b) the manner in which the court-appointed surrogate carries out duties to the individual and the court; or (c) the manner in which the court exercises oversight of the surrogate.

**Investigation/Assessment:** The process of collecting information through interviews, inquiry, or similar means, for the purpose of determining whether or not alleged victims of elder/vulnerable adult abuse need protective services or other services to decrease risks to their health and safety or whether or not allegations of abuse are founded/believed to be true.

**Involuntary Adult Protective Services:** Interventions initiated by Adult Protective Services social workers, without the consent of the affected adult, for the purpose of safeguarding the vulnerable adult who is at risk of abuse, neglect, or exploitation. The services are involuntary because: (a) the recipient of services lacks capacity to consent to receive the services (b) there is no person authorized to consent on his/her behalf, and (c) intervention is ordered by the court of jurisdiction.

**Location/Living Arrangements:** Living arrangements are delineated by:

- ◆ ***Domestic location:*** Living alone or with others in a private residence in the community.
- ◆ ***Domestic violence shelters:*** Includes safe houses and other residential arrangements made specifically for victims of domestic abuse.
- ◆ ***Long-term care facility setting:*** Includes nursing homes, long term care assisted living facilities, continuing care retirement communities, boarding home or group home arrangements.
- ◆ ***Mental health/Mental Retardation/Developmental Disabilities (DD) facilities:*** Includes psychiatric treatment and DD facilities, group homes, boarding homes, host homes and/or adult foster care homes specifically for persons with mental illness or developmental disabilities that provide treatment and/or care.
- ◆ ***Homeless:*** Includes homeless shelters as well as no permanent living arrangement.

**Neglect:** The refusal or failure to fulfill any part of a person's obligations or duties to an elder. Neglect may also include failure of a person who has fiduciary responsibilities to provide care for an elder (e.g., pay for necessary home care services) or the failure on the part of an in-home service provider to provide necessary care. Neglect typically means the refusal or failure to provide an elderly person/vulnerable adult with such life necessities as food, water, clothing, shelter, personal hygiene, medicine, comfort, personal safety, and other essentials included in an implied or agreed-upon responsibility to an elder.

**Physical Abuse:** The use of physical force that may result in bodily injury, physical pain, or impairment. Physical abuse may include but is not limited to such acts of violence as striking (with or without an object), hitting, beating, pushing, shoving, shaking, slapping, kicking, pinching, and burning. In addition, inappropriate use of drugs and physical restraints, force-feeding, and physical punishment of any kind also are examples of physical abuse.

**Report:** An allegation, request for assistance or application for services regarding a situation of abuse, neglect by others, financial exploitation, or self-neglect of an elder or vulnerable adult received by the agency or agencies responsible for providing adult/elder protective services.

**Self-Neglect:** An adult's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including (a) obtaining essential food, clothing, shelter, and medical care; (b) obtaining goods and services necessary to maintain physical health, mental health, or general safety; and/or (c) managing one's own financial affairs. Choice of lifestyle or living arrangement is not, in itself, evidence of self-neglect.

**Sexual Abuse:** The coercion of an older person/vulnerable adult through force, trickery, threats, or other means into unwanted sexual activity. It includes sexual contact with elders/vulnerable adults who are unable to grant consent and unwanted sexual contact between service providers and their elder clients.

**Substantiated Report:** Through the process of investigation/assessment or evaluation it is determined that the allegations of abuse are believed to be founded or true.

**Vulnerability:** Financial, physical or emotional dependence on others or impaired capacity for self-care or self-protection.

**Vulnerable Adult:** An adult, age 18 to 59 or older, who needs protections and programs that are the same as, or similar to, protections and programs for elder adults, including an adult who, due to a developmental, cognitive, psychological, physical, or other type of disability, is unable to protect him/herself from abuse, neglect, or financial exploitation or is unable to provide or obtain essential care or services.

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**Note:**

**For the purposes of this survey and unless specified,**

- ***Abuse* includes physical abuse, sexual abuse, and emotional/psychological/verbal abuse.**
- ***Neglect* includes self-neglect unless otherwise specified.**
- ***Exploitation* includes financial or material abuse.**

**CONTACT INFORMATION OF PERSON COMPLETING SURVEY**

Name  
 Title  
 Agency Name  
 Street Address  
 City  
 State  
 Zip Code  
 Telephone  
 Fax  
 E-mail  
 Website

**SECTION A: STATEWIDE REPORTING NUMBERS**

**Please answer all questions using only your FY 2003 data on elder/vulnerable adult abuse, neglect (including self-neglect), and exploitation. FY 2003 data refer to how your state defines a twelve month fiscal year.**

*Note: Please provide data only if your state has collected FY 2003 data.*

*Please provide only numbers for this section.*

1. In FY 2003, how many **reports** of elder/vulnerable adult abuse, neglect, and exploitation were **received**?

**State cannot provide this information** *(please check box if appropriate).*

	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Number of reports			

1b. How many of the above reports were self-neglect?

**State cannot provide this information** (please check box if appropriate).

	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Number of reports			

2. In FY 2003, how many **reports** of elder/vulnerable adult abuse, neglect, and exploitation were **investigated/assessed?**

**State cannot provide this information** (please check box if appropriate).

	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Number of reports			

2b. How many of the above reports were self-neglect?

**State cannot provide this information** (please check box if appropriate).

	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Number of reports			

3. In FY 2003, how many **reports** of elder/vulnerable adult abuse, neglect, and exploitation were **substantiated?**

**State cannot provide this information** (please check box if appropriate).

	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Number of reports			



3b. How many of the above reports were self-neglect?

**State cannot provide this information** (*please check box if appropriate*).

	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Number of reports			

**Please provide any comments or explanations you would like on questions from this section. (Specify question number when responding).**

**SECTION B: COMPLAINTS RECEIVED**

4. What were the sources of elder/vulnerable adult abuse, neglect, and exploitation complaints to your agency for FY 2003? *(Please indicate the number of total reports that come from sources below).*

**State does not track this information.** *(Please check this box if applicable and proceed to Section C).*

<b>SOURCE OF REPORTS</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Anonymous/Undisclosed			
Animal Control Staff			
Area Agencies on Aging			
Attorneys			
Bankers			
Clergy			
Coroners			
Dentists			
Developmental Disabilities Staff			
EMT/Firefighters			
Family Members			
Friends/Neighbors			
Guardian/Conservator			
Home Health Staff			
Housing Agency Landlord			
Law Enforcement			
Long-term Care Facility Staff			
Long-term Care Ombudsmen			
Mental Health Staff			
Nurses/Nurses' Aides			

<b>SOURCE OF REPORTS</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Paid Caregivers			
Pharmacists			
Physicians			
Psychologists			
Self (Individual Abuse)			
Social Services Agency Staff			
Social Workers (Private Practice)			
Other 1 <i>(please specify)</i>			
Other 2 <i>(please specify)</i>			
Other 3 <i>(please specify)</i>			

**Please provide any comments or explanations you would like on questions from this section. (Specify question number when responding).**

**SECTION C: CATEGORIES OF ABUSE**

5. Please provide the **total number of allegations** for each of the following categories in FY 2003. *(Numbers for this section may be higher than the total number of reports in Section A due to multiple allegations/findings).*

a.) Information for elder adults, ages 60+:

**State does not separate information by age** *(please check box if this is the case and proceed to question 5c).*

CATEGORIES OF ABUSE	Elder adults, ages 60+	
	Investigated (number)	Substantiated (number)
Physical Abuse		
Sexual Abuse		
Emotional/ Psychological/ Verbal Abuse		
Caregiver Neglect/ Abandonment		
Financial Abuse/ Exploitation		
Self-neglect		
Other <i>(please specify)</i>		

b.) Vulnerable adults, ages 18-59:

**State does not separate information by age** (please check box if this is the case and proceed to question 5c).

CATEGORIES OF ABUSE	Vulnerable adults (ages 18-59)	
	Investigated (number)	Substantiated (number)
Physical Abuse		
Sexual Abuse		
Emotional/ Psychological/ Verbal Abuse		
Caregiver Neglect/ Abandonment		
Financial Abuse/ Exploitation		
Self-neglect		
Other (please specify)		

c.) Please provide information for vulnerable and elder adults. **(Complete the following chart only if you were unable to separate information for questions 5a & 5b).**

CATEGORIES OF ABUSE	Vulnerable and Elder adults, ages 18+	
	Investigated (number)	Substantiated (number)
Physical Abuse		
Sexual Abuse		
Emotional/ Psychological/ Verbal Abuse		
Caregiver Neglect/ Abandonment		
Financial Abuse/ Exploitation		
Self-neglect		
Other (please specify)		

**Please provide any comments or explanations you would like on questions from this section. (Specify question number when responding).**

*For Sections D, E, and F, please provide information from substantiated cases only*

**SECTION D: VICTIM INFORMATION FOR SUBSTANTIATED CASES ONLY**

*Please provide only numbers for this section.*

6. By sex, please provide the number of individuals who experienced substantiated abuse, neglect and exploitation.

**State cannot provide this information** *(please check box if appropriate).*

<b>SEX</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults, ages 18+ (state cannot separate data)
Female			
Male			

7. By ethnicity, please provide the number of individuals who experienced substantiated abuse, neglect and exploitation.

**State cannot provide this information** *(please check box if appropriate).*

<b>ETHNICITY</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults, ages 18+ (state cannot separate data)
Hispanic/Latino			
Non-Hispanic/Latino			

8. By race, please provide the number of individuals who experienced substantiated elder/vulnerable adult abuse, neglect, and exploitation.

**State cannot provide this information** *(please check box if appropriate).*

<b>RACE</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults, ages 18+ (state cannot separate data)
Black or African American			
American Indian and Alaska Native			
Asian			
Native Hawaiian and other Pacific Islander			
White or Caucasian			
Some other race			
Unknown			

9. By age group, please provide the number of individuals who experienced substantiated elder/vulnerable adult abuse, neglect, and exploitation.

**State cannot provide this information** *(please check box if appropriate).*

<b>AGE</b>	Total Number of Reports
Younger than 18 Years	
18-29 years	
30-39 years	
40-49 years	
50-59 years	
60-69 years	
70-79 years	
80 years and older	

10. By location, please provide the number of substantiated reports of abuse, neglect, or exploitation that occurred.

**State cannot provide this information** (please check box if appropriate).

<b>LOCATION</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Domestic Setting			
Hospitals			
Long-Term Care Facility			
Mental health facilities			
Developmental Disabilities facilities			
Homeless			
Other Location (please specify)			
Unknown			

**Please provide any comments or explanations you would like on questions from this section. (Specify question number when responding).**

<b>SECTION E: ALLEGED PERPETRATOR INFORMATION FOR SUBSTANTIATED CASES ONLY</b>
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*Please provide only numbers for this section.*

11. By sex, please provide the number of alleged perpetrators of elder/vulnerable adult abuse, neglect, and exploitation for substantiated cases only.

**State cannot provide this information** (please check box if appropriate).

<b>SEX OF ALLEGED PERPETRATOR</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Female			
Male			



12. By age category, please provide the number of alleged perpetrators of elder/vulnerable adult abuse, neglect, and exploitation.

**State cannot provide this information** *(please check box if appropriate).*

<b>AGE OF ALLEGED PERPETRATOR</b>	Elder adults, Ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
18 years and younger			
18-29 years			
30-39 years			
40-49 years			
50-59 years			
60-69 years			
70-79 years			
80 years and older			

13. By relationship to the victim, please provide the number of alleged perpetrators of substantiated cases of elder/vulnerable adult abuse, neglect, and exploitation.

**State cannot provide this information** *(please check box if appropriate).*

<b>RELATIONSHIP OF ALLEGED PERPETRATOR TO VICTIM</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Adult Child			
Agent Acting under Power of Attorney			
Community Service Provider			
Friend/Neighbor			
Grandchild			
Guardian/ Conservator			
Hospital Staff			
Long-term Care Facility Staff			
No Relationship/ Stranger			
Other Family Member			

<b>RELATIONSHIP OF ALLEGED PERPETRATOR TO VICTIM</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Parent			
Representative Payee			
Sibling			
Spouse/ Intimate Partner			
Tenants			
Other 1 ( <i>please specify</i> )			
Other 2 ( <i>please specify</i> )			
Unknown			

14. Does your program maintain an abuse registry or database of alleged perpetrators?

Yes  No

**Please provide any comments or explanations you would like on questions from this section. (Specify question number when responding).**

<b>SECTION F: SERVICE DELIVERY AND OUTCOMES FOR SUBSTANTIATED CASES ONLY</b>
--

*Please provide only numbers for this section.*

15a. How many cases of elder/vulnerable adult abuse, neglect, and exploitation involved court interventions or legal actions in order to protect clients?

**State cannot provide this information** (*please check box if appropriate*).

15b. How many of the above cases resulted in involuntary adult protective services?

**State cannot provide this information** (*please check box if appropriate*).

16. Please indicate how many reports of elder/vulnerable adult abuse, neglect, and exploitation closed in FY 2003 for the following reasons.

**State cannot provide this information** (please check box if appropriate).

<b>REASON FOR CLOSURE</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Client moved out of service area			
Client died			
Client entered long-term-care facility			
Client refused further services			
Client no longer in need of services (risk of harm reduced)			
Unable to locate client			
Referred to law enforcement			
Other (please specify)			

17. For the primary allegation for each case, what was the outcome for victims of elder/vulnerable adult abuse, neglect, self-neglect, and exploitation upon case closure?

**State cannot provide this information** (please check box if appropriate).

<b>ABUSE OUTCOME</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Risk reduced			
Risk the same			
Risk increased			

<b>NEGLECT OUTCOME</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Risk reduced			
Risk the same			
Risk increased			

<b>SELF-NEGLECT OUTCOME</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Risk reduced			
Risk the same			
Risk increased			

<b>EXPLOITATION OUTCOME</b>	Elder adults, ages 60+	Vulnerable adults, ages 18-59	Vulnerable and elder adults (state cannot separate data)
Risk reduced			
Risk the same			
Risk increased			

**Please provide any comments or explanations you would like on questions from this section. (Specify question number when responding).**

<b>SECTION G: FUNDING AND ADMINISTRATION</b>
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18. For Adult Protective Services only, what was your program's total allocation for FY 2003?

\$

**State cannot provide this information** (*please check box if appropriate*).

19. For Adult Protective Services only, please specify allocations from the following funding sources for FY 2003.

**State cannot provide this information** (*please check box if appropriate*).

Local funding	\$
State funding	\$
Social Services Block Grants (Title XX)	\$
Older Americans Act	\$
Private grants/donations	\$
Other Sources	\$

(*Please specify the "other sources above"*)

20. Do the data you are providing for this survey represent 100% of Adult Protective Services counties/administrative areas in your state?

Yes  No

If no, please explain why the information is not available.

21. Is there anything that we have missed that you would like to tell us?  
(*Feel free to attach additional pages of comments*).

*Thank you for taking the time to complete this survey!*