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

Research to Practice Series

Title

Associations between Social Support, Social Networks and Financial Exploitation in Older Adults

Author(s)

Scott R. Beach, PhD

Source

Webinar (recording located here)

Summary of Research

Social networks and social support are key correlates of health, subjective well-being and quality of life. Larger social networks and higher perceived availability of social support are related to decreased morbidity and mortality, better psychological well-being, and reduced health-risk behaviors. Social networks and social support have also been examined in the context of elder mistreatment, but the findings are complex. Prior research has shown that shared household living arrangements and social isolation are both risk factors for elder mistreatment. Shared living arrangements increase opportunities for contact, and thus household conflict and mistreatment are also more likely. The social isolation findings may result from families that isolate the older adult, thus enabling the mistreatment to remain hidden from view. A recent study found that older adults with "dense social networks" were less likely to report elder abuse; while another found that negative interactions with close others was a risk factor for abuse. The largest national survey on elder mistreatment to date - The National Elder Mistreatment Study (NEMS) - found low perceived support was a consistent predictor of all types of abuse except for financial exploitation (FE) by family.

This research, presented in the webinar along with work by my colleague Marti DeLiema, extends previous research in this area by simultaneously assessing the effects of perceived social support and social network size on risk for FE. A population-based telephone survey of 903 older adults (60+) was conducted in Allegheny County (Pittsburgh, PA, USA). We found that while higher perceived social support was related to lower risk of FE, larger social networks were related to higher risk of FE. These contrasting effects occurred simultaneously in multivariate models controlling for a variety of known risk factors for FE. Further, in supplemental follow-up analyses, we found a statistically significant interaction between perceived social support and social network size on FE since age 60. It showed that the protective effects of perceived social networks are related to risk for FE, while size of the family network was unrelated to FE. In sum, older adults with large non-family social networks and low perceived social support were at highest risk of FE since age 60. Supportive relationships are certainly protective, but having larger non-family networks can simultaneously put an older adult at risk for FE and perhaps other forms of elder mistreatment. The more people older adults are exposed to, the greater the opportunity for supportive relationships, but at the same time there is a higher risk that network members will perpetrate FE. Knowing lots of people outside the family combined with low perceived support seems to be especially problematic.

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Practice & Policy Implications

This study suggests that when it comes to the role of social relationships and risk for FE, "more may not always be better," and that a "quality not quantity" maxim may apply. Family members, caregivers, and healthcare / service providers should encourage older adults to develop and nurture high quality, close, supportive interpersonal ties. Encouragement to widen the social network by "making new friends" should be stressed less than making sure these new network members will truly be supportive of the older adult. For example, older adults' use of social networking technologies and online dating sites may put them at increased risk of FE. Similarly, frequent visits to senior centers or participation in group activities with strangers may also increase risk. These risks for FE may be especially heightened in the context of living alone or other forms of social isolation. Policies aimed at enhancing network size and access to potentially "weak ties" should be balanced with a focus on enhancing supportive relationships with family and intimate friends.

Further Reading

Beach, S.R., Schulz, R., & Sneed, R. (in press). Associations between social support, social networks and financial exploitation in older adults. Journal of Applied Gerontology. PMID: 27255685. doi: 10.1177/0733464816642584.



Prepared By

Scott R. Beach, PhD. Interim Director and Director of Survey Research University Center for Social & Urban Research University of Pittsburgh

This research summary is part of a series sponsored by the <u>National Adult Protective Services Association</u> (NAPSA) and the <u>National Committee</u> 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.