

What We Know from Elder Abuse Research and Practice Evidence

National Adult Protective Services Association Conference

August 19, 2019

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- CVR is a one-stop resource for victim service providers and researchers to connect and share knowledge
 - ✓ User-friendly <u>website</u>
 - ✓ Library of victim research
 - ✓ Directory of researchers

- ✓ Free research TA
- ✓ State-of-the-field syntheses
- ✓ Fellowships, podcasts & more
- Partnership of researchers and practitioners

























Visit our website



Acknowledgements

This work was produced by the Center for Victim Research (CVR) under grant number 2016-XV-GX-K006, awarded by the **Office for Victims of Crime**, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this presentation are those of the contributors and do not necessarily represent the official position or policies of the U.S. Department of Justice.



Road Map for Today's Talk

- 1. Goals and process for CVR's evidence reviews
- 2. Findings from CVR's Elder Abuse review
- 3. Group discussions and activity
- 4. Share-out and Q&A



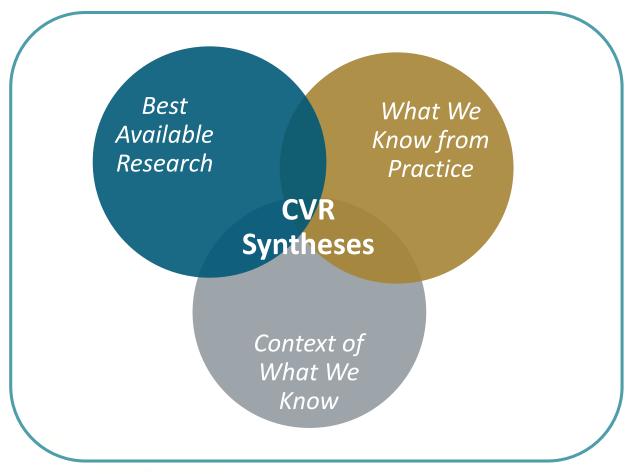
Goals of CVR's Reviews

- Assess state of the field in victimization response for different victimization topics
- Systematically synthesize the **best available evidence** from research and practice
- Help service providers and researchers understand what the field needs





Framework for Evidence



Modified from: Puddy, R. W. & Wilkins, N. (2011). Understanding Evidence Part 1: Best Available Research Evidence. A Guide to the Continuum of Evidence of Effectiveness, CDC



Questions to Answer

- 1. Number of victims (prevalence)
- 2. Risk factors
- 3. Harms and consequences
- 4. Prevention and intervention services
- 5. Policy, practice, and research implications



CVR Synthesis Process



SCOPE

Define victimization focus and identify relevant search terms



EVIDENCE

Gather relevant research, practice, and contextual evidence



KEY INFO

Extract key information from each evidence source



QUALITY

Assess strengths and limitations of each evidence source



SYNTHESIS

Summarize key information from relevant evidence, acknowledging context and quality

For more about CVR's methodology, see our website here



Inclusion Criteria

1. Standard screening criteria for both research and practice evidence:

- Available in English
- Produced in 2000 or later
- Within the victimization scope identified by the review team during Step 1

2. Further inclusion criteria by evidence type:

Research

Peer-reviewed research employing qualitative, quantitative, and mixed-methods approaches.

Practice

- Multiple perspectives or consensus
- Repeatedly cited (>=3 times)
- Government agency, nongovernmental organization or credentialed expert





Findings from CVR's Elder Abuse Review



Definition

Any intentional or negligent act that causes harm or serious risk of harm to an older person

- Physical abuse
- Emotional abuse
- Sexual abuse
- Financial (or material) exploitation
- Neglect
- Abandonment



Scope

- Abuse committed by a "person of trust"
 - "Person of trust" could be someone with a personal relationship, such as family or friend, or a legal/contractual relationship, such as caretaker or accountant
 - Excludes self-neglect and fraud/scams committed by strangers
- Search results
 - Yielded 300 research articles
 - Yielded 351 practice items



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Elder Abuse Self-Reported on National Surveys

National Elder Mistreatment Study:

n = 5,777 11%

Self- report

(Acierno et al., 2010)

National Social Life Health and Aging Project (NSHAP)

n= 3,005

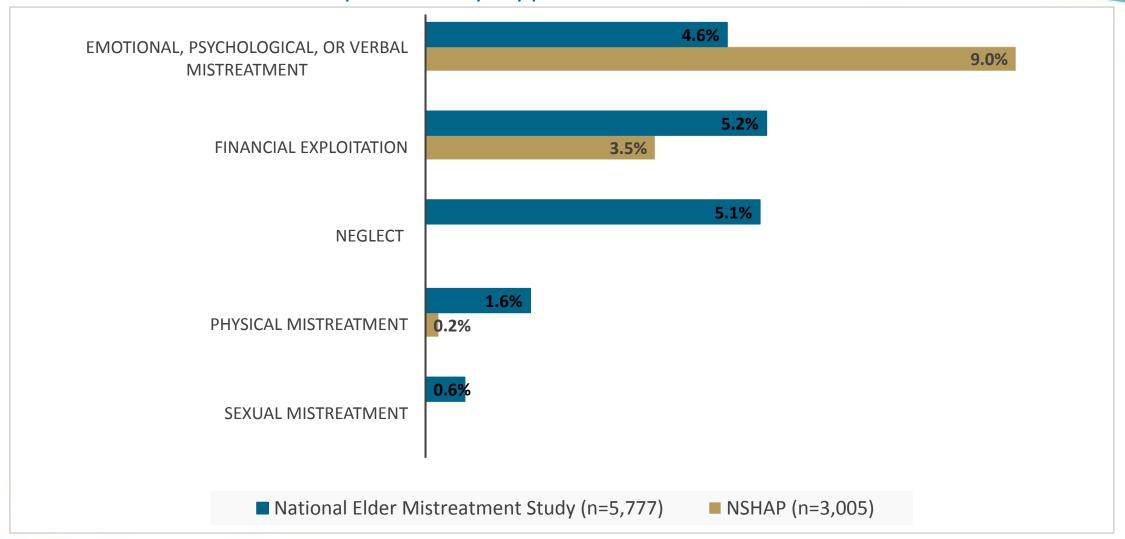
Wave 1: 23.5%

Self- report

(Schafer & Koltai, 2014)



Elder Abuse Self-Reported by Type of Abuse





Elder Abuse Reported to Social Services

Chicago Health and Aging Project

1993-2010 n = 6,139

2.3%

Reported to social services

(Dong, Simon, & Evans, 2012)

Elder Abuse Reports in 17 states
0.86%
Reported to social services
(Jogerst et al., 2003)



Elder Abuse Detected by Medical Professionals

2012 Nationwide Emergency
Department Data

N= 6,723,667

.025%

*using weighted prevalence (Evans et al., 2017) Medicare Primary and Consumer Demonstration
N= 724 older adults with

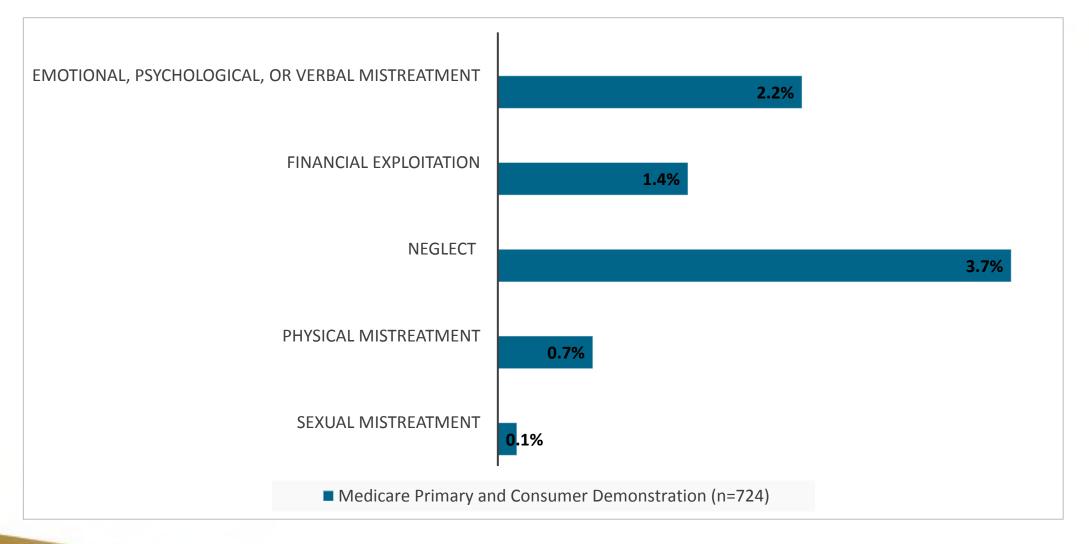
7.5%

physical impairment

(Friedman et al., 2015)



Elder Abuse Detected by Medical Professionals by Type of Abuse





Demographic Risk Factors

- Gender (women)
- Mixed evidence on age
- Minority sexual orientation and gender (LGBT)
- Race (people of color)



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More Risk Factors

Social

- Isolation and Loneliness
- Low Socioeconomic Status
- Dependency on others for care

Physical/Mental

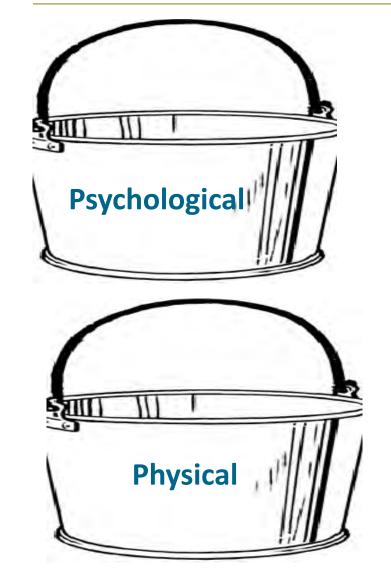
Physical Health Impairment

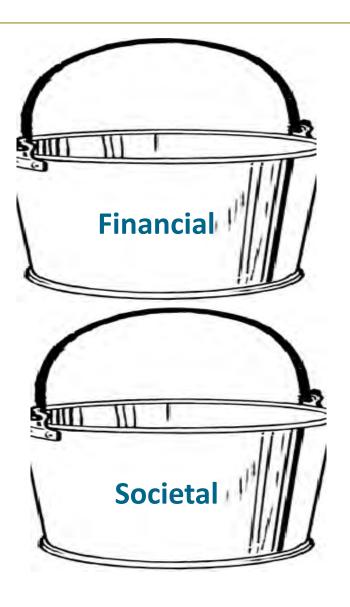
 Cognitive Impairment (e.g. Alzheimer's dementia)

 Mental/ behavioral health issues (e.g. substance abuse)



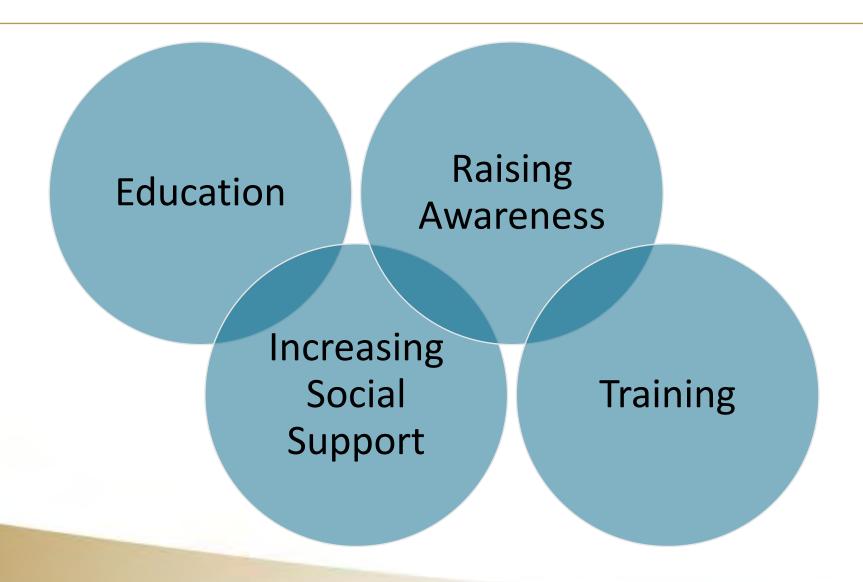
Harms and Consequences







Prevention



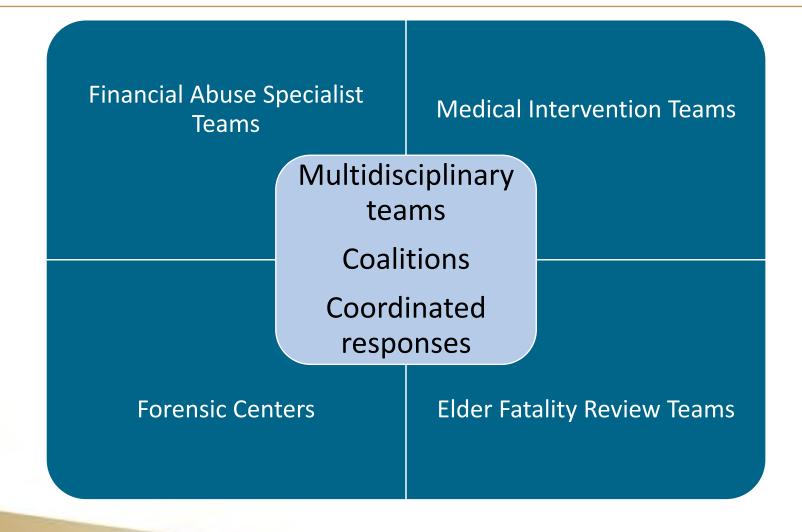


Services and Interventions



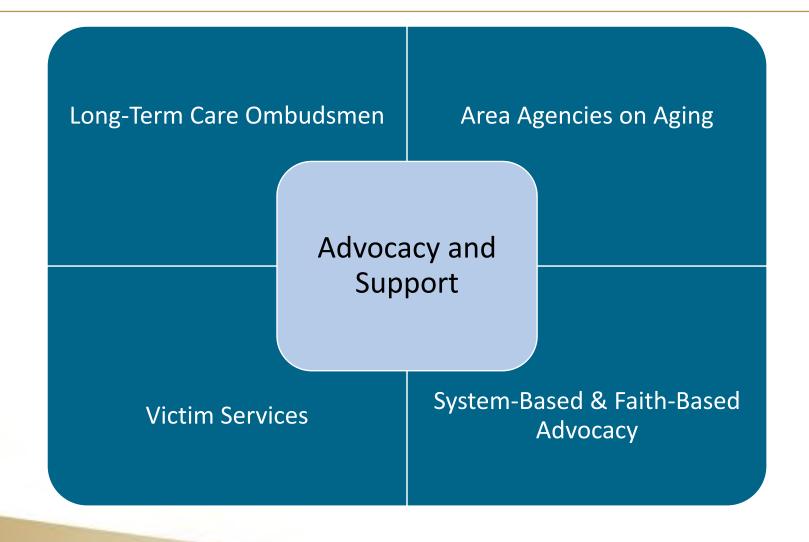


Services and Interventions





Services and Interventions





Barriers to Accessing Services



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- Physical and cognitive limitations
- Shame and embarrassment
- Fear of retaliation
- Dependence on abuser
- Self-blame
- Lack of awareness
- Cultural norms/responses



Services for Vulnerable Older Adults

LGBT

- Self-help and peer-based social support
- Partnerships with LGBT service providers

Native Americans

Restorative justice

Latinx

 Communitybased advocates

Asian Pacific Islanders

- Religious institutions
- Communitybased organizations

African Americans

Religious communities



Key Legislation

- Elder Justice Act (2010)
- Older Americans Act (1965)
- Older Americans Reauthorization Act (2016)
- Violence Against Women Reauthorization Act (2013)
- Mandatory Reporting Laws
- Power of Attorney and Guardianship Laws



Where the Field Needs to Grow

- Include input from older adults in all efforts
- Improve policies and oversight of substituted decision-making
- Identify and evaluate other effective interventions and programs



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Where the Field Needs to Grow



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- Increase research and prevention around cognitive incapacity
- Increase research, culturally appropriate training, resources, and evidencebased victim services for diverse racial and ethnic populations



Selected References

- Acierno, R., Hernandez, M. A., Amstadter, A. B., Resnick, H. S., Steve, K., Muzzy, W., & Kilpatrick, D. G. (2010). Prevalence and correlates of emotional, physical, sexual, and financial abuse and potential neglect in the United States: The National Elder Mistreatment Study. *American journal of public health*, 100(2), 292-297.
- Burgess, A. W., & Phillips, S. L. (2006). Sexual abuse, trauma and dementia in the elderly: A retrospective study of 284 cases. *Victims and Offenders*, 1(2), 193-204
- Dong, X., Simon, M., De Leon, C. M., Fulmer, T., Beck, T., Hebert, L., Dyer, C.B., Paveza, B., & Evans, D. (2009). Elder self-neglect and abuse and mortality risk in a community-dwelling population. *Jama*, 302(5), 517-526.
- Dyer, C. B., Pavlik, V. N., Murphy, K. P., & Hyman, D. J. (2000). The high prevalence of depression and dementia in elder abuse or neglect. *Journal of the American Geriatrics Society*, 48(2), 205-208.
- Friedman, L. S., Avila, S., Tanouye, K., & Joseph, K. (2011). A case–control study of severe physical abuse of older adults. *Journal of the American Geriatrics Society*, *59*(3), 417-422
- James, B. D., Boyle, P. A., & Bennett, D. A. (2014). Correlates of susceptibility to scams in older adults without dementia. *Journal of elder abuse & neglect*, 26(2), 107-122.
- Roberto, K. A., Teaster, P. B., & Duke, J. O. (2004). Older women who experience mistreatment: Circumstances and outcomes. *Journal of Women & Aging*, 16(1-2), 3-16
- Wong, J. S., & Waite, L. J. (2017). Elder mistreatment predicts later physical and psychological health: Results from a national longitudinal study. *Journal of elder abuse & neglect*, 29(1), 15-42



 Who do you partner with in the community, in the state, on a national level to address elder abuse?

 How do services in your community adapt to serve culturally, socially, and economically diverse older adults?

What is working well to prevent and respond to elder abuse in your practice?

 What overarching barriers do practitioners face in addressing elder abuse?





Building an evidence base for victim services



Thank You

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