# **Research to Practice Series**

Title

# Social support can diminish negative effects of elder abuse

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Source

Acierno, R., Hernandez-Tejada, M. A., Anetzberger, G. J., Loew, D., & Muzzy, W. (2017). The National Elder Mistreatment Study: An 8-year longitudinal study of outcomes. Journal of Elder Abuse & Neglect, 29(4), 254-269.

### Summary of Research

Elder abuse represents a serious and growing public safety and public health concern. Although elder abuse has been shown to have negative effects, very little is known about the possible consequences of elder abuse over time, particularly long-term outcomes. The National Institute of Justice (NIJ) has been critically committed to expanding knowledge regarding this issue. Through NIJ's involvement, we have not only been able to investigate the link between elder abuse and negative outcomes, but also on tangible solutions for victims, specifically what aspects of elder adults' lives can be changed in prevention and

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intervention efforts. This article describes a series of studies that have pointed to the critical role that social support may play in preventing and ameliorating the negative effects of elder abuse.

Recent longitudinal research has begun to shed some light on long-term consequences of elder abuse. In particular, a couple of large longitudinal studies in the United States that have found elder abuse to be a significant risk factor for a range of negative outcomes such as Emergency Department use (Dong & Simon, 2013) and death (Dong et al., 2009; Dong et al., 2011). Elder abuse was also shown to be associated with negative psychological outcomes such as suicidal ideation (e.g., Dong, 2015), anxiety, and loneliness (Wong & Waite, 2017). These recent studies suggest that elder abuse is linked to worse health and mental health functioning, but face limitations in capturing the diversity of the U.S. population and the range in forms of abuse.

The National Elder Abuse Mistreatment Study (NEMS) (Acierno et al., 2010), funded by NIJ, was the first nationally representative study focused on elder abuse and it greatly expanded on previous research. In this study, Acierno and colleagues recruited 5,777 older adults, who ranged in age from 60-97, to examine the prevalence of elder abuse and related risk factors. A centrally important finding of this work was that nearly all forms of elder abuse were associated with low social support. The authors proposed that poor social support can lead to elder mistreatment, but that mistreatment can also cause lower levels of social support.

Acierno and colleagues (2017) recently completed another study, also funded by NIJ, to follow up with a portion of the original 5,777 participants from the 2010 study. In this longitudinal study, they attempted to re-contact all 752 people who originally reported mistreatment, as well as a randomly selected sample of non-mistreated people, in order to examine whether and how elder abuse contributes to psychological and physical health functioning eight years later. The researchers were ultimately able to gather information from 774 people, including 183 elder abuse victims and 591 non-victims. The elder abuse victims reported a range of mistreatment (163 emotional abuse, 18 physical abuse, 3 sexual abuse, 2 neglect) and outcomes.

In general, compared to non-victims, victims of elder abuse reported higher rates of Major Depressive Disorder (MDD), Generalized Anxiety Disorder (GAD), Post-Traumatic Stress Disorder (PTSD), and poorer self-reported health. Depression and PTSD in particular appeared to be most impacted by mistreatment. However, the level of perceived social support during the past month protected against the negative effects of mistreatment, with the exception of PTSD outcomes. In particular, social support even seemed to undo the effects of mistreatment on GAD symptoms and self-reported health outcomes. This finding about the important protective effects of social support is especially meaningful and interesting, given that a current aspect of functioning (i.e., how much social support someone feels that they are receiving) seems to lessen the negative impact of a past event that occurred many years prior.

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#### **Practice & Policy Implications**

This study shows that elder mistreatment has a long lasting impact on a range of health and mental health issues, but the level of social support someone perceives to have in their life seems to be protective against the effects of elder abuse. It is particularly striking that social support shows these effects even when taking into account various demographic factors, meaning that these protective effects could potentially apply across a diverse range of individuals. In fact, a lack of social support was shown to consistently predict negative outcomes, even more so than elder abuse itself. The fact that the lack of social support has been shown to reliably predict both elder mistreatment and the negative outcomes following elder mistreatment is especially encouraging, because it represents both a promising prevention target for elder abuse and a promising intervention target to buffer against the negative effects for elders who have been abused.

Other recent research has identified complexities in the link between social support and elder abuse. For example, different aspects of social support may be particularly relevant for specific types of elder abuse, such as positive social interactions being an especially important protective factor against elder financial exploitation (Liu, Wood, Xi, Berger, & Wilber, 2017). In addition, social support (in the form of opening up to and relying on someone) may not always be protective if the usual sources of support are also sources of stress, indicating the potential value of seeking out other social support and resources for these elders (Wong & Waite, 2017).

These research findings have important implications for practitioners who interact with victims of elder abuse. Services and activities that increase bidirectional social support for the elderly (e.g., senior centers, congregate meal programs) may prevent elders from becoming victims of abuse and may help to alleviate associated negative outcomes for those who have been abused in the past.

## **Further Reading**

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. Am J Public Health, 100(2), 292-297. doi:10.2105/AJPH.2009.163089

Acierno, R., Hernandez-Tejada, M. A., Anetzberger, G. J., Loew, D., & Muzzy, W. (2017). The National Elder Mistreatment Study: An 8-year longitudinal study of outcomes. Journal of Elder Abuse & Neglect, 29(4), 254-269. doi: 10.1080/08946566.2017.1365031

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Dong, X. Q. (2015). Elder Abuse: Systematic Review and Implications for Practice. J Am Geriatr Soc, 63(6), 1214-1238. doi:10.1111/jgs.13454

Dong, X. Q., Simon, M. A., Beck, T. T., Farran, C., McCann, J. J., Mendes de Leon, C. F., . . . Evans, D. A. (2011). Elder abuse and mortality: the role of psychological and social wellbeing. Gerontology, 57(6), 549-558. doi:10.1159/000321881

Liu, P., Wood, S., Xi, P., Berger, D. E., & Wilber, K. (2017). The Role of Social Support in Elder Financial Exploitation Using a Community Sample. Innovation in Aging, igx016. doi: 10.1093/geroni/igx016

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 and Neglect, 29(1), 15-42. doi: 10.1080/08946566.2016.1235521

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Findings and conclusions in this article are those of the authors and do not necessarily reflect the official position or policies of the U.S. Department of Justice.

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