Is There a Relationship Between Elder Abuse and the Opioid Epidemic?

Summary

Older adults are not immune to the consequences of the opioid epidemic, a finding which is unsurprising given that about 1/4 of long-term opioid users are 65 and older, and 2.2% have reported non-medical use of prescription opioids in the prior year. Experts believe that cases of elder mistreatment (EM) have increased as the opioid epidemic has proliferated despite the lack of empirical evidence. Researchers from Virginia Tech facilitated a series of focus groups comprised of 20 human services personnel across four states in Central Appalachia, regions with high opioid misuse. Participants were questioned about the connection, if any, between opioid misuse and EM. Four themes emerged: a) opioid related EM is a growing problem; b) older adults exposed to opioid abuse may feel isolated and unsafe in their own homes; c) care providers who steal patient medication and physicians who overprescribe opioids contribute to opioid-related EM; and d) older people may both misuse and deal opiates.

Method

The study team facilitated four one-hour telephone focus groups with 20 law enforcement, health care, legal, Adult Protective Services (APS), and social service professionals. Participants were from Kentucky, West Virginia, Ohio, and Virginia, states with high concentrations of opioid misuse. They were asked about their roles in their respective agencies, how older adults were adversely affected by perpetrators and the nature and outcomes of those encounters, the caseworkers’ responses to abuse and challenges they faced, and documentation of opioid related abuse. Researchers used a thematic analysis to analyze the focus group feedback.

Results

- Participants observed an increase in EM when associated with opioid and other drug misuse
- Typical cases of opioid abuse involved family members stealing drugs and financially exploiting older relatives to support their addiction
- Financial exploitation was often accompanied by co-occurring psychological and sometimes physical abuse
- APS reports of self-neglect were sometimes associated with opioid abuse
- Participants reported that older adults experiencing EM and opioid abuse by a co-residing family member felt isolated and unsafe, with one participant describing older adults with co-occurring EM and opioid abuse as “prisoners” in their homes
- Participants perceived that health care providers contributed to opioid abuse among elders, specifically referencing care facility employees who financially exploit residents, and physicians who overmedicate patients
- According to participants, some older adults misused their prescriptions, abused drugs, and dealt opioids

Key Takeaways

- Opioid abuse is related to elder abuse
- The four themes identified in this study help to create a framework in which to address issues at the intersection of EM and the opioid crisis
- A reliable database is needed to document cases of EM involving opioid abuse

Implications for Practice

The nexus between the opioid crisis and EM is clear and warrants further study. A reliable, accessible database is needed to document the co-occurrence of opioid abuse and EM, so that researchers can further explore the relationship between elder abuse and opioid misuse. Community interventions, family and professional education, culturally informed EM information, and public awareness are needed to respond to this complex issue.