NCEA Bibliography of Elder Abuse and Neglect

Related Articles & Research Studies July 2013 to June 2014

Introduction: This bibliography was created to provide a summary of recent articles and research studies, from a variety of disciplines, relevant to professional practice in the field of elder abuse. Each entry in the bibliography¹ includes a citation, abstract and weblink to gain access to the document. In some cases, due to copyright restrictions, you will not be able to access the entire article, but will be given information on how to purchase the entire article.

The bibliography is organized by author last name. To navigate the document ctrl + click the desired location or page number in the table of contents. To search this document for a particular keyword or phrase, press Control + F and enter the word or phrase.

Articles Cited Were Published From: July 2013 to June 2014

Database Sources: Psychinfo, CINAHL and PubMed.

This bibliography is not intended to be an exhaustive list of articles and studies on elder abuse and neglect over the specified time period. NCEA has attempted to identify the articles and studies most pertinent to professional practice in the United States, but inadvertent omissions are possible. This list includes peer reviewed and refereed journal articles along with other articles expected to be of interest. Articles from a variety of disciplines (e.g. medicine, law, social work, psychology, dentistry and nursing) and countries are included. Articles written in languages other than English are beyond the scope of this project and are not included. Citation styles will vary because they were pulled from different research databases.

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¹ ACL Disclaimer: This document was completed for the National Center on Elder Abuse and is supported in part by a grant (No. 90AB002/01) from the Administration on Aging, U.S. Department of Health and Human Services (DHHS). Grantees carrying out 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 or DHHS policy.

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A-C

Abolfathi Momtaz, Y., Hamid, T. A., Ibrahim, R. (2013). Theories and measures of elder abuse. *Psychogeriatrics*, *13*(3), 182-188. doi: 10.1111/psyg.12009

Abstract: Elder abuse is a pervasive phenomenon around the world with devastating effects on the victims. Although it is not a new phenomenon, interest in examining elder abuse is relatively new. This paper aims to provide an overview of the aetiological theories and measures of elder abuse. The paper briefly reviews theories to explain causes of elder abuse and then discusses the most commonly used measures of elder abuse. Based on the reviewed theories, it can be concluded that elder abuse is a multifactorial problem that may affect elderly people from different backgrounds and involve a wide variety of potential perpetrators, including caregivers, adult children, and partners. The review of existing measurement instruments notes that many different screening and assessment instruments have been developed to identify elders who are at risk for or are victims of abuse. However, there is a real need for more measurements of elder abuse, as the current instruments are limited in scope.

Keywords: aged, elder abuse, measurement, theory

Link to article

Adams, V.M., Bagshaw, D., Wendt, S., Zannettino, L. (2014). Financial abuse of older people by a family member: a difficult terrain for service providers in Australia. *Journal of Elder Abuse and Neglect*, 26(3):270-90. doi: 10.1080/08946566.2013.824844

<u>Abstract:</u> Financial abuse by a family member is the most common form of abuse experienced by older Australians, and early intervention is required. National online surveys of 228 chief executive officers and 214 aged care service providers found that, while they were well placed to recognize financial abuse, it was often difficult to intervene successfully. Problems providers encountered included difficulties in detecting abuse, the need for consent before they could take action, the risk that the abusive family member would withdraw the client from the service, and a lack of resources to deal with the complexities inherent in situations of financial abuse.

<u>Keywords:</u> Australia; elder abuse; family members; financial abuse; older people; service providers

Link to article

Alizadeh-Khoei, M., Sharifi, F., Hossain, S. Z., Fakhrzadeh, H., Salimi, Z. (2014). Elder Abuse: Risk Factors of Abuse in Elderly Community-Dwelling Iranians. *Educational Gerontology*, 40(7), 543-554. doi: 10.1080/03601277.2013.857995

Abstract: Elder abuse is currently recognized internationally as a common problem with serious consequences for the health and wellbeing of old people. This study sought to produce an estimate of the prevalence of, and risk factors for, elder mistreatment and types of abuse in an urban Iranian population. A cross-sectional, population-based, descriptive study was conducted on 300 elderly, aged 60+ years, utilizing two health centers in Ahvaz, a province in central Iran in 2012. The participants were interviewed in their homes to collect data on risk factors and mistreatment, elder mistreatment being defined as abuse belonging to any of the four major forms: psychological, financial, physical or neglect by an immediate family member, in-laws, or relatives. Elder mistreatment was reported by 14.7% of the participants. Physical (70.4%) and neglect (61.4%) were the most common subtypes of total mistreatments. Univariate analysis showed the most consistent associations of abuse types to be with being female (OR = 2.34, CI 1.17–4.69), with education (OR = 0.36, CI 0.17–0.71), and with dependency on children for an income to live (OR = 3.18, CI 1.57– 6.41). A multivariable logistic model indicated income dependency to be the only predictor of mistreatment (OR = 2.30, CI 1.10-4.81). Our data shows abuse of the elderly to be prevalent. That income dependency is the most important predictor of mistreatment of Iranian elderly suggests that addressing their income status with preventive intervention by establishing a social security system in Iran that provides for the elderly would have significant social welfare benefits.

<u>Keywords</u>: Elder Abuse, Risk Factors, Community Living, In Old Age, Iran, Vulnerability, Classification.

Link to article

Allen-Devlin, J., Freyne, A. (2013). Ms P: a case study in elder financial abuse (Ireland). *Journal of Adult Protection*, 15(6), 317-323. doi: 10.1108/JAP-03-2013-0010

<u>Abstract</u>: *Purpose* – The purpose of this paper is to discuss the case study of an older woman who was subject to elder financial abuse by a home help in the Republic of Ireland. *Design/methodology/approach* – The design of the research is a case study. *Findings* – It considers the indicators which alerted professionals to the concerns and the measures taken to protect the woman. The paper particularly highlights the co-operation of the large number of inter-agency multi-disciplinary professionals involved in resolving the case. The paper also considers the issue of capacity and the current legal background in the

Republic of Ireland and internationally relevant to protecting older people from elder abuse. *Originality/value* – The paper has not identified any published case studies of elder financial abuse within the Republic of Ireland, despite hundreds of cases being reported annually. Case reports may be of interest to those working in the field as a means of describing successful management strategies, and may highlight practical areas of difficulty such as conflict or lack of communication between agencies. They may also serve to heighten awareness of abuse in general.

<u>Keywords</u>: Elder abuse, Enduring Power of Attorney, Financial abuse, Gardai' (Irish police service), Mental capacity, Power of Attorney, Senior case worker, Ward of court, Ireland

Link to article

Alon, S., & Berg-Warman, A. (2014). Treatment and prevention of elder abuse and neglect: where knowledge and practice meet-a model for intervention to prevent and treat elder abuse in Israel. J Elder Abuse Negl, 26(2), 150-171. doi:10.1080/08946566.2013.784087

<u>Abstract:</u> Successful handling of elder abuse and neglect requires various interventions. This article presents findings from an evaluation study of a model for intervention implemented in three municipalities in Israel. Data from 558 older adults, exposed to abuse and treated through the program, and interviews with victims, abusers, and professionals revealed that improvement was achieved in 66% of the cases. In 20% of the cases, the abuse was stopped. The most widespread type of intervention consisted of individual counseling. Legal intervention yielded the highest rate of improvement (82%). Provision of supportive services for victims of neglect was found to be most effective (82% of improvement in the situation).

Keywords: elder abuse and neglect, model for intervention, evaluation, Israel

Link to article

Anand, J., Begley, E., O'Brien, M. Taylor, B., Killick, C. (2013). Conceptualising elder abuse across local and global contexts: implications for policy and professional practice on the island of Ireland. *Journal of Adult Protection*, *15*(6), 280-289. doi: http://dx.doi.org/10.1108/JAP-03-2013-0011.

<u>Abstract</u>: Purpose – Social policy and professional practice across the island of Ireland is dominated by the WHO definition of elder abuse and national and professional interpretations of what constitutes elder abuse. Top-down, generalist knowledge of the abuse of older people have facilitated paternalistic and protectionist policies and services designed to protect older vulnerable adults across the Republic of Ireland and Northern Ireland. However, a qualitative study involving 58 older people in six focus groups held across Ireland highlights an alternative understanding of elder abuse grounded in the subjective experiences of older people across urban and rural communities on the island.

Indigenous ways of knowing offer a broader and more inclusive understanding of the experience of elder abuse (Lafferty et al., 2012; Dow and Joosten, 2012) together with opportunities for the prevention of ageism and the empowering of older people across the jurisdictions. Design/methodology/approach – A description of how elder abuse is defined at the global and national level is then compared with the findings of an all-Ireland study of older people's older conceptualisation of elder abuse (Begley et al., 2012) at the local level. Findings – Understanding indigenous perceptions of elder abuse has significant implications for the delivery of cultural relevant social policy and professional practice across Ireland. Research limitations/implications – Given the exploratory nature of this study, there are significant methodological limitations to its replication, the representativeness of the participants involved and the generalisability of the findings. Practical implications – However, this study provides unique insights about how some older people conceptualised elder abuse across different cultural and political contexts across Ireland as compared with national and global definitions. Originality/value – The study on older people's conceptualisation of elder abuse was the first all-Ireland attempt to contribute to the body of knowledge on indigenous perspectives on elder abuse.

<u>Keywords</u>: Elder abuse, Older people, Professional practice, Safeguarding, Social policy, Social rights, Ireland

Link to article

Andersen, E., Raffin-Bouchal, S., Marcy-Edwards, D. (2013). "Do they think I am a pack rat?". *Journal of Elder Abuse and Neglect*, 25(5), 438-452. doi: 10.1080/08946566.2013.770317

Abstract: This case study presents details of the life of one older man who lived in seclusion and squalor, surrounded by hoarded possessions. This man was one participant of a focused ethnography of eight older adults who received home care. All participants in the original ethnography were identified by their community care coordinators as exhibiting hoarding behaviors. The case study presented here provides rich narrative and photographic detail in order to add strength to what has already been presented in previous research articles about compulsive acquisition. The narratives reveal examples of debilitating dysfunction, distress associated with decision making, broad acquisition of free things, compulsive buying, and ritualistic discarding. Quotes included in the case study stem from the original ethnography.

<u>Keywords</u>: case study, hoarding, ethnography, squalor, obsessions, compulsions, older person

Link to article

Ayalon, L. (2014). Reports of Elder Neglect by Older Adults, Their Family Caregivers, and Their Home Care Workers: A Test of Measurement Invariance. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*. [Epub ahead of print].

Abstract: OBJECTIVES: The present study evaluated the measurement invariance of a 7-item scale designed to assess elder neglect across three groups of informants: Older adults, family members, and home care workers. In addition, differential item functioning (DIF) was evaluated in order to examine whether individuals of certain characteristics have a different probability of endorsing certain items even at equivalent levels of the overall construct of neglect. METHOD: A cross-sectional sample of 686 family members, 388 older adults, and 523 home care workers was drawn. A series of sequentially nested confirmatory factor models was examined to identify whether configural (the same items are associated with the same factor across groups), metric (factors have a similar meaning across groups), and scalar (group means can be meaningfully compared across groups) invariances can be established. Multi indicators multi causes analysis was conducted to identify DIF across age, gender, and education. RESULTS: Five items were adequate indicators of the overall construct. The findings provide support to configural, metric, and scalar invariances across the 3 groups of informants. None of the items resulted in DIF. DISCUSSION: The findings advocate for the use of the 5-item neglect scale across different groups of informants and call for the evaluation of elder neglect within the constellation of the caregiving unit.

<u>Keywords:</u> Abuse, Confirmatory factor analysis, Differential item functioning, Elder neglect, Maltreatment, Measurement invariance, Multi indicators multi causes

Link to article

Báez-Molgado, S., Peñaloza, A. M., Spradley, M. K., Bartelink, E. J. (2013). Analysis of bone healing in a postoperative patient: skeletal evidence of medical neglect and human rights violations. *Journal of Forensic Sciences*, *58*(4), 1050-1054. doi: 10.1111/1556-4029.12121

Abstract: This study highlights complexities associated with postsurgical trauma interpretation of a 76-year-old female patient from a psychiatric institution in Mexico. The skeletal analysis identified complications from an unsuccessful surgical operation for an intertrochanteric fracture of the femur. An improperly placed surgical plate resulted in nonunion due to limited contact between fracture margins. However, it is unclear whether this resulted from surgical complications, ineffective postoperative care, or from the decedent's limited ability to follow postoperative care instructions. Additionally, failure of the plate resulted in degenerative changes to the acetabulum. These complications, associated with degenerative changes to upper limb joints, suggest significant mobility issues. The pattern of antemortem trauma and contextual information support a conclusion of postoperative medical neglect, a documented problem in psychiatric institutions in Latin America. This study provides insight into the relevance of detailed trauma assessment of skeletal remains in cases where neglect and human rights violations are suspected.

<u>Keywords</u>: forensic anthropology; forensic science; fracture; nonunion; osteoarthrosis; osteobiography; trauma

Bond, M. C., & Butler, K. H. (2013). Elder abuse and neglect: definitions, epidemiology, and approaches to emergency department screening. *Clin Geriatr Med*, *29*(1), 257-273. doi: http://dx.doi.org/10.1016/j.cger.2012.09.004

<u>Abstract:</u> Elder abuse and neglect is estimated to affect approximately 700,000 to 1.2 million elderly people a year with an estimated annual cost of tens of billions of dollars. Despite the large population at risk, its significant morbidity and mortality, and substantial cost to society, elder abuse continues to be underrecognized and underreported. This article aims to increase the awareness of elder abuse by reviewing the demographics, epidemiology, and risk factors of elder abuse, followed by a discussion of screening tools and ways to increase awareness and reporting.

Keywords: Elder abuse, Neglect, Geriatrics, Abuse

Link to article

Burnett, J., Dyer, C.B., Halphen, J.M., Achenbaum, W.A., Green, C.E., Booker, J.G., Diamond, P.M. (2014). Four Subtypes of Self-Neglect in Older Adults: Results of a Latent Class Analysis. *J Am Geriatr Soc.* [Epub ahead of print]. doi: 10.1111/jgs.12832

Abstract: OBJECTIVES: To determine whether there are subtypes of elder self-neglect (SN) with different risk factors that can be targeted using medical and social interventions. DESIGN: Cohort study using archived data of Adult Protective Services (APS) substantiated cases of elder SN between January 1, 2004, and December 31, 2008. SETTING: Houston, Harris County, Texas. PARTICIPANTS: Adults aged 65 and older with APS region VI substantiated SN between January 1, 2004, and December 31, 2008 (N = 5,686). MEASUREMENTS: Adult Protective Services caseworkers used the Client Assessment and Risk Evaluation (CARE) tool during home investigations, assessing risk of harm in the domains of living conditions, financial status, physical and medical status, mental health, and social connectedness. Latent class analysis was used to identify unique subtypes of elder SN. RESULTS: Four unique subtypes of elder SN were identified, with approximately 50% of individuals manifesting physical and medical neglect problems. Other subtypes included environmental neglect (22%), global neglect (21%), and financial neglect (9%). Older age, Caucasian descent, and mental status problems were more strongly associated with global neglect behaviors. African Americans were more likely to experience financial and environmental neglect than Caucasians and non-white Hispanics. CONCLUSION: Elder SN consists of unique subtypes that may be amenable to customized multidisciplinary interventions. Future studies are needed to determine whether these subtypes impose differential mortality risks and whether multidisciplinary tailored interventions can reduce SN and prevent early mortality.

Keywords: adult protective services; latent class analysis; medical neglect; self-neglect

Burnes, D. P, Rizzo, V. M., Courtney, E. (2014). Elder Abuse and Neglect Risk Alleviation in Protective Services. *Journal of Interpersonal Violence*, *29*(11), 1-23. . doi: 10.1177/0886260513516387

Abstract: Little is known about conditions associated with favorable elder mistreatment (EM) case outcomes. The fundamental goal of EM protective service programs is to alleviate risk associated with substantiated cases of elder abuse and neglect. Using the EM socio-cultural model, this study examined victim, perpetrator, victim-perpetrator relationship, social embeddedness, and socio-cultural factors predicting risk alleviation of EM cases. Data from a random sample of EM protective social service cases (n = 250) at a large community agency in New York City were collected and coded by multiple, independent raters. Multinomial and binary logistic regression were used to examine undifferentiated risk alleviation for the entire sample of EM cases as well as differentiated financial, emotional, and physical abuse sub-types. Undifferentiated EM risk alleviation was associated with male victim gender, older victim age, previous community help-seeking, and victim—perpetrator dyads characterized by a separate living arrangement and shorter term abuse longevity. Financial abuse cases with younger perpetrators were less likely to have risk reduction. Physical abuse risk reduction was less likely when the perpetrator was male and the victim-perpetrator dyad included different genders. Distinct findings across EM sub-types suggest a need to develop targeted practice strategies with clients experiencing different forms of EM. Findings highlight a need to develop EM protective service infrastructure around perpetrator rehabilitation.

Keywords: elder abuse, elder neglect, social services, case risk allocation

Link to article

Burns, D., Hyde, P., & Killett, A. (2013). Wicked problems or wicked people? Reconceptualising institutional abuse. *Sociol Health Illn*, *35*(4), 514-528. doi: 10.1111/j.1467-9566.2012.01511.x

Abstract: Institutional abuse is a global issue, sometimes ascribed to the behaviour of a few wicked people. It persists despite regulatory measures, interventions from enforcement and protection agencies, organisational policies and procedures. Therefore, the accurate recognition and early detection of abuse and taking corresponding steps to deal with perpetrators are critical elements in protecting vulnerable people who live in institutions. However, research is less clear about why and how abuse (re)occurs. Using the tame and wicked problem analysis of Rittell and Webber (1973) as a lens, we examine the ways institutional abuse is formulated in care settings. Drawing on case study data from eight care homes for older people, we show how solutions seeking to reduce institutional abuse and improve care quality can cause additional problems. The article reconceptualises institutional abuse through the lens of wicked problem analysis to illustrate the multifaceted and recurring, wicked problem characteristics of residential care provision.

<u>Keywords:</u> institutional abuse; older people; residential care; wicked problems

Butler, B., Agubuzu, O., Hansen, L., & Crandall, M. (2014). Illinois trauma centers and community violence resources. *J Emerg Trauma Shock*, 7(1), 14-19. doi: 10.4103/0974-2700.125633

Abstract: Background: Elder abuse and neglect (EAN), intimate partner violence (IPV), and street-based community violence (SBCV) are significant public health problems, which frequently lead to traumatic injury. Trauma centers can provide an effective setting for intervention and referral, potentially interrupting the cycle of violence. Aims: To assess existing institutional resources for the identification and treatment of violence victims among patients presenting with acute injury to statewide trauma centers. Settings and Design: We used a prospective, web-based survey of trauma medical directors at 62 Illinois trauma centers. Nonresponders were contacted via telephone to complete the survey. Materials and Methods: This survey was based on a survey conducted in 2004 assessing trauma centers and IPV resources. We modified this survey to collect data on IPV, EAN, and SBCV. Statistical Analysis: Univariate and bivariate statistics were performed using STATA statistical software. Results: We found that 100% of trauma centers now screen for IPV, an improvement from 2004 (P = 0.007). Screening for EAN (70%) and SBCV (61%) was less common (P < 0.001), and hospitals thought that resources for SBCV in particular were inadequate (P < 0.001) and fewer resources were available for these patients (P = 0.02). However, there was lack of uniformity of screening, tracking, and referral practices for victims of violence throughout the state. *Conclusion*: The multiplicity of strategies for tracking and referring victims of violence in Illinois makes it difficult to assess screening and tracking or form generalized policy recommendations. This presents an opportunity to improve care delivered to victims of violence by standardizing care and referral protocols.

<u>Keywords:</u> Community violence, elder abuse and neglect, intimate partner violence, trauma systems, Illinois.

Link to article

Cairns, J., & Vreugdenhil, A. (2014). Working at the frontline in cases of elder abuse: 'it keeps me awake at night'. *Australas J Ageing*, 33(1), 59-62. doi: 10.1111/ajag.12017

Abstract: Aim: To explore the experiences of frontline health and welfare practitioners in working with older people experiencing abuse. Methods: In-depth interviews with 16 Tasmanian community-based health and welfare practitioners regarding their experiences of working in 49 recent cases of elder abuse. Interview transcripts were analysed using thematic analysis. Results: All participants found working in cases of elder abuse challenging and the work itself was perceived as difficult, complex and at times dangerous. The cumulative effect of intimidating work contexts, practice dilemmas and a lack of support resulted in frustration and stress for many practitioners. Nevertheless, participants were committed to providing ongoing services and support for older people experiencing abuse. Conclusion: Frontline practitioners working in cases of elder abuse face significant

challenges and could be better supported through strengthening organisational elder abuse policies, increased management support and more age-inclusive family violence support services

Keywords: abuse; elder abuse; home-care service; older people, Australia

Link to article

Cannell, M. B., Manini, T., Spence-Almaguer, E., Maldonado-Molina, M., Andresen, E. M. (2014). U.S. Population Estimates and Correlates of Sexual Abuse of Community-Dwelling Older Adults. *Journal of Elder Abuse and Neglect*. [Epub ahead of print]. doi: 10.1080/08946566.2013.879845

Abstract: We describe the annual prevalence of sexual abuse among community dwelling older adults in the United States. We also describe factors associated with experiencing sexual abuse. We used data from 24,343 older adults from the 2005 Behavioral Risk Factor Surveillance System pooled across 18 states. We estimated prevalence of sexual abuse, bivariate distributions, and odds ratio associations across demographic, health, and contextual factors. Our results show that 0.9% of older adults reported experiencing sexual abuse in the previous year. This represents approximately 90,289 community dwelling older adults. We also report on factors associated with experiencing recent sexual abuse. There was a significant gender-by-binge drinking interaction, with a stronger association among women. There is a need for health promotion efforts targeted specifically towards older adults, encouraging them to seek services, if possible, after exposure to sexual abuse.

Keywords: abuse, sexual, population, BRFSS, surveillance

Link to article

Caspi, E. (2014). Does self-neglect occur among older adults with dementia when unsupervised in assisted living? An exploratory, observational study. *Journal of Elder Abuse and Neglect*, 26(2), 123-149. doi: 10.1080/08946566.2013.830532

Abstract: The phenomenon of older adults with dementia who develop behavioral expressions when they are unsupervised in assisted living residences is understudied. This qualitative study aimed to bridge this gap in the literature by focusing on 12 residents in various stages of dementia. Grounded Theory was followed to guide data collection and analysis. Data were collected in two special care units of an assisted living residence for 10 months. Participant observation was the primary data collection strategy. Semistructured interviews with staff and managers and review of clinical records augmented the observation data. While unsupervised, residents exhibited a wide spectrum of negative emotional states, behavioral expressions, functional difficulties, wayfinding difficulties, serious hygiene problems, and safety risks. More than half of the identified incidents represented self-neglectful behaviors. The study highlights the need for enhanced supervision and targeted interventions for residents with dementia who are susceptible to self-neglect.

<u>Keywords</u>: Alzheimer's disease, dementia, assisted living, long-term care, self-neglect

Link to article

Castle, N., Ferguson-Rome, J. C., Teresi, J. A. (2013). Elder Abuse in Residential Long-Term Care: An Update to the 2003 National Research Council Report. *Journal of Applied Gerontology* [Epub ahead of print]. doi: 10.1177/0733464813492583

Abstract: A synthesis of the last decade of literature on elder abuse in residential long-term care (i.e., Nursing Homes and Assisted Living) is discussed. Presented are definitions of abuse, theoretical and conceptual models, prevalence rates of abuse, outcomes and costs, and sources of abuse. The synthesis represents an update to the literature in the influential 2003 National Research Council report. We identify many of the same issues and concerns exist that were surfaced in this prior report. Many theoretical and conceptual models need further elaboration. Conflicting definitions of abuse are pervasive. Rates of abuse are generally inaccurate, and probably under-reported. However, we also identify progress in many areas. An increase in empirical studies that exist in this area (although very few in Assisted Living). Other forms and types of abuse have also been identified as important, such as resident-to-resident abuse. These areas are discussed, along with potential suggestions for additional research.

Keywords: nursing homes, assisted living, abuse

Link to article

Chan, K. L. (2014). Child victims and poly-victims in China: Are they more at-risk of family violence? *Child Abuse and Neglect* [Epub ahead of print]. doi: 10.1016/j.chiabu.2014.05.006

Abstract: Multiple forms of violence may co-occur on a child. These may include various forms of child victimization and different types of family violence. However, evidence that child victims are more likely to witness other types of family violence has been lacking in China. Using data of a large and diverse sample of children recruited from 6 regions in China during 2009 and 2010 (N=18,341; 47% girls; mean age=15.9 years), the associations between child victimization and family violence witnessed were examined. Descriptive statistics and the associations between child victimization, demographic characteristics, and family violence witnessed were analyzed. Lifetime and preceding-year rates were 71.7% and 60.0% for any form of child victimization and 14.0% and 9.2% for poly-victimization (having four or more types of victimization), respectively. Family disadvantages (i.e., lower socio-economic status, single parents, and having more than one child in the family) were associated with child victimization and poly-victimization. Witnessing of parental intimate partner violence, elder abuse, and in-law conflict also increased the likelihood of child victimization and poly-victimization, even after the adjustment of demographic factors. Possible mechanisms for the links between family violence and child victimization are discussed. The current findings indicated the need for focusing on the whole family rather than the victim only. For example, screening for

different types of family violence when child victims are identified may help early detection of other victims within the family.

<u>Keywords</u>: Child victimization; Elder abuse; Family violence; In-law conflict; Intimate partner violence; Poly-victimization, China.

Link to article

Chan, K. L., Choi, W. M., Fong, D. Y., Chow, C. B., Leung, M., & Ip, P. (2013). Characteristics of family violence victims presenting to emergency departments in Hong Kong. *J Emerg Med*, 44(1), 249-258. doi: http://dx.doi.org/10.1016/j.jemermed.2012.01.061

Abstract: Background: The Emergency Department (ED) has been shown to be a valuable location to screen for family violence. Study Objective: To investigate the characteristics of family violence victims presenting to EDs in a Chinese population in Hong Kong. Methods: This study examined a retrospective cohort of patients presenting to the Accident and Emergency Departments of three regional hospitals in the Kwai Tsing district of Hong Kong for evaluation and management of physical injuries related to family violence during the period of January 1, 1997 to December 31, 2008. Results: A total of 15,797 patients were assessed. The sample comprised cases of intimate partner violence (IPV; n = 10,839), child abuse and neglect (CAN; n = 3491), and elder abuse (EA; n =1467). Gender differences were found in patterns of ED utilization among the patients. The rates of readmission were 12.9% for IPV, 12.8% for CAN, and 8.9% for EA. Logistic regression showed that being male, being discharged against medical advice, and arriving at the hospital via ambulance were the common factors associated with readmission to the EDs for patients victimized by IPV and CAN. Conclusion: This study investigates the victim profile of a large cohort of a Chinese population, providing a unique data set not previously released in this cultural or medical system. The findings give insights to early identification of victims of family violence in the EDs and suggest that screening techniques focused on multiple forms of family violence would improve identification of violence cases. Multidisciplinary collaboration between health, legal, and social service professionals is also warranted to meet the various needs of victims and to reduce hospital readmissions.

<u>Keywords:</u> emergency departments; intimate partner violence; child abuse and neglect; elder abuse; family violence, Hong Kong, China

Link to article

Charpentier, M., Soulieres, M. (2013). Elder Abuse and Neglect in Institutional Settings: The Resident's Perspective. *Journal of Elder Abuse & Neglect*, *25*(4): 339-354. doi: 10.1080/08946566.2012.751838

<u>Abstract</u>: This article strives to share research findings concerning the rights and empowerment of the elderly living in various long-term care (LTC) or residential care

facilities (public and private sectors) in Quebec, Canada. Inspired by the theories of constructivism, the research aims to understand the residents' perception of abuse, as well as the strategies they are developing to exercise their rights and liberties. Data from semistructured interviews with 20 residents, mostly very old women aged 80 to 98, are presented. Results show that residents' perception of abuse: (1) is conditioned by sensationalistic media coverage; (2) is limited to physical mistreatment; and (3) tends to legitimize day-to-day infringements of their rights, as these "minor" violations seem inoffensive when compared to the "real" acts of violence reported in the media. Tensions that can build up among residents, sometimes resulting in intimidation or even bullying, were addressed.

Keywords: institutional settings, qualitative study, abuse, empowerment, strategies

Link to article

Chokkanathan, S. (2014). Factors associated with elder mistreatment in rural Tamil Nadu, India: a cross-sectional survey. *International Journal of Geriatric Psychiatry*. [Epub ahead of print]. doi: 10.1002/gps.4073

Abstract: BACKGROUND: There is limited evidence for the multifactorial aetiology of elder mistreatment. The goal of this study is to investigate the factors associated with the mistreatment of older adults living in rural Tamil Nadu, India. METHOD: A cross-sectional household survey was conducted in a sub-district of rural Tamil Nadu by using a standard questionnaire. Face to face interviews were conducted with 902 older adults aged 61 years and older. The relation between the characteristics of older adults, family members and family environments with reported mistreatment was examined by univariate and multivariate logistic regression analyses. *RESULTS*: The multivariate results reveal that elder mistreatment is related to several factors associated with the perpetrator and the family environment. Perpetrator factors include middle age, a tertiary education (protective), alcohol consumption and the mistreatment of other family members. Family environment factors include family stress and low cohesion. Among the factors related to older adults, only physical abuse of family members was associated with exposure to mistreatment. CONCLUSION: The characteristics of older adults, family members and family environment are potent predictors of elder mistreatment. Multi-dynamic interventions should target dysfunctional families displaying alcohol use, relationship conflicts, low cohesion and the presence of some form of family violence.

Keywords: ecological framework; mistreatment; older adults; rural India

Link to article

Chokkanathan, S., Natarajan, A., Mohanty, J. (2014). Elder Abuse and Barriers to Help Seeking in Chennai, India: A Qualitative Study. *Journal of Elder Abuse and Neglect, 26*(1), 60-79. doi: 10.1080/08946566.2013.782786

Abstract: This qualitative study attempts to understand why older persons abused by their family members in India do not seek help. In-depth interviews over three visits were conducted with six adults aged 65 years and above who had been physically abused by their sons/daughters-in-law. The interviews were transcribed and themes identified using a thematic analysis method. The barriers preventing a person from seeking help were service-related (accessibility, lack of trust); religious (Karma); family (deleterious effects on family, family members' responses to help seeking); and individual (socioeconomic dependency, self-blame). The unique findings that surfaced were fear of losing one's identity by losing one's family, attributing abuse to past sins, and concern over not attaining salvation if one's sons did not perform funeral rites. The authors propose a checklist to explore and assess the barriers to seeking help. Recommendations for geroprofessionals in overcoming barriers include implementing outreach programs and changing the misconceptions regarding Karma.

<u>Keywords</u>: elder abuse, barriers to help seeking, qualitative research, India

Link to article

Cohen, M. (2013). The process of validation of a three-dimensional model for the identification of abuse in older adults. *Archives of Gerontology and Geriatrics*, *57*(3), 243-249. doi: 10.1016/j.archger.2013.06.009

Abstract: Professional screening for abuse among older persons has been suggested as an efficient way to reach more individuals who are experiencing abuse, but effective screening depends on the use of succinct, structured and validated tools. The aim of the paper is to describe a process of constructing and validating a three-dimensional screening tool for identification of abuse in older persons. It describes four studies that were conducted in the process of development and assessment of a three-dimensional screening tool for identification of abuse that consisted of direct questioning, identification of risk indicators and identification of signs of abuse. The study participants were, respectively, 108, 730 and 1317 community-dwelling individuals, aged ≥65, cognitively intact, and 71 residents of long-term care facilities. Questionnaires included the three dimensional tool for identification of abuse, Expanded Indicators of Abuse (E-IOA), list of signs of abuse, direct questioning for disclosure of abuse, and personal, medical and functioning details. Discriminant function analyses (DFA) and receiver-operating curve (ROC) analyses in each of the described steps showed good psychometric properties of the risk indicators. Regression analyses adjusted for socio-demographic and health variables showed that risk indicators significantly increased likelihood of abuse in individuals living in the community and in long-term care facilities. The three dimensions of identification of abuse were partially overlapped in their identification of different rates of abuse. In conclusion, the three-dimensional identification tool is efficient for identifying older adults experiencing abuse or at risk of abuse.

Keywords: Elder abuse; Older adults; Risk for abuse; Screening tools

Link to article

Cohen, P.R. (2013). Hydroxychloroquine-Associated Hyperpigmentation Mimicking Elder Abuse. *Dermatology and Therapy*, *3*(2), 203-210.

Abstract: Background: Hydroxychloroquine may result in cutaneous dyschromia. Older individuals who are the victims of elder abuse can present with bruising and resolving ecchymoses. *Purpose*: The features of hydroxychloroquine-associated hyperpigmentation are described, the mucosal and skin manifestations of elder abuse are reviewed, and the mucocutaneous mimickers of elder abuse are summarized. Case Report: An elderly woman being treated with hydroxychloroquine for systemic lupus erythematosus developed drug-associated black and blue pigmentation of her skin. The dyschromia was misinterpreted by her clinician as elder abuse and Adult Protective Services was notified. The family was eventually cleared of suspected elder abuse. A skin biopsy of the patient's dyschromia confirmed the diagnosis of hydroxychloroquine-associated hyperpigmentation. Conclusion: Hyperpigmentation of skin, mucosa, and nails can be observed in patients treated with antimalarials, including hydroxychloroguine. Elder abuse is a significant and underreported problem in seniors. Cutaneous findings can aid in the discovery of physical abuse, sexual abuse, and self-neglect in elderly individuals. However, medication-associated effects, systemic conditions, and accidental external injuries can mimic elder abuse. Therefore, a complete medical history and appropriate laboratory evaluation, including skin biopsy, should be conducted when the diagnosis of elder abuse is suspected.

<u>Keywords:</u> Abuse; Dyschromia; Elderly; Hydroxychloroquine; Hyperpigmentation; Pigmentary disorders; Pigmentation

Link to article

Committee on Health Care for Underserved Women. (2013). Committee Opinion No. 568: Elder Abuse and Women's Health. *Obstetrics & Gynecology*, *122*(1), 187-191. doi: 10.1097/AOG.0b013e31829d2351

Abstract: Elder abuse, a violation of human rights, is defined as a single or repeated act, or lack of appropriate actions, which causes harm, risk of harm, or distress to an individual 60 years or older. As many as 1 in 10 older adults have been victims of elder abuse. Most cases of abuse occur in women. The U.S. Census predicts that by 2030, the segment of the population that is older than 65 years will reach an estimated 72 million. Categories of elder abuse include physical, psychological, emotional, or sexual abuse; neglect; abandonment; and financial exploitation. Screening, education, and policy change are the best interventions for the prevention of elder abuse. Early identification and prompt referral should be part of the preventive health care visit for women aged 60 years and older.

Keywords: women's health, underserved, abuse prevention, older women

Link to article

Cooper, C., Dow, B., Hay, S., Livingston, D., & Livingston, G. (2013). Care workers' abusive behavior to residents in care homes: a qualitative study of types of abuse, barriers, and facilitators to good care and development of an instrument for reporting of abuse anonymously. *Int Psychogeriatr*, 25(5), 733-741. doi: http://dx.doi.org/10.1017/S104161021200227X

Abstract: *Background*: Elder abuse in care homes is probably common but inherently difficult to detect. We developed the first questionnaire to ask care home workers to report abuse anonymously. *Method*: We held qualitative focus groups with 36 care workers from four London care homes, asking about abuse they had witnessed or perpetrated. Results: The participants reported that situations with potentially abusive consequences were a common occurrence, but deliberate abuse was rare. Residents waited too long for personal care, or were denied care they needed to ensure they had enough to eat, were moved safely, or were not emotionally neglected. Some care workers acted in potentially abusive ways because they did not know of a better strategy or understand the resident's illness; care workers made threats to coerce residents to accept care, or restrained them; a resident at high risk of falls was required to walk as care workers thought otherwise he would forget the skill. Most care workers said that they would be willing to report abuse anonymously. Care workers were sent the newly developed Care Home Conflict Scale to comment on but not to complete and to report whether it was acceptable and relevant to them. Several completed it and reported abusive behavior. Conclusion: Lack of resources, especially care worker time and knowledge about managing challenging behavior and dementia were judged to underlie much of the abuse described. We describe the first instrument designed to measure abuse by care home workers anonymously; field-testing is the logical next step.

Keywords: dementia, care home, qualitative, elder abuse, instrument

Link to article

Cramer, E. P., Brady, S. R. (2013). Competing values in serving older and vulnerable adults: adult protective services, mandated reporting, and domestic violence programs. *Journal of Elder Abuse and Neglect*, 25(5):453-68. doi: 10.1080/08946566.2013.782781

Abstract: State mandatory reporting statutes may directly or indirectly list domestic violence programs as among those that are mandated reporters of cases of suspected abuse, neglect, or exploitation of older individuals and those with disabilities. Domestic violence programs, however, may not consider themselves to be mandated reporters, because the responsibility of reporting abuse may be contrary to their programmatic philosophy. In the Commonwealth of Virginia, the potential conflict between domestic violence programs and Adult Protective Services about the issue of mandated reporting has created tension between these organizations as each entity continues interpreting the issues and policies of mandated reporting through its own lens. The authors draw out some of the reasons for the

conflict as well as make recommendations for improving relationships between the two organizations, which will ultimately benefit vulnerable adults who are experiencing abuse.

<u>Keywords</u>: Adult Protective Services, domestic violence programs, mandated reporting, elder abuse, abuse of people with disabilities

Link to article

Cronholm, P. F., Ismailji, T., Mettner, J. (2013). Academy on Violence and Abuse: highlights of proceedings from the 2011 conference, "toward a new understanding". *Trauma, Violence & Abuse, 14*(4):271-81. doi: 10.1177/1524838013495961

Abstract: In April 2011, the Academy on Violence Abuse (http://www.avahealth.org/) convened a network of experts for its second annual conference, "Developing the Science of Violence and Abuse: Toward a New Understanding." The conference served as a forum for highlighting the growing body of research regarding the biological consequences and adverse health consequences of abuse. In doing so, it underscored an important scientific premise: By evaluating the impact of violence and abuse from birth to death, one can better evaluate the social, behavioral, psychological, and biological context and pathways that result in the morbidity, mortality, and quality of life of all affected individuals and communities. In this article, we summarize content presented by the conference's keynote speakers and provide citations that speakers have submitted to support their statements.

<u>Keywords</u>: child abuse; cultural contexts; domestic violence; elder abuse; violence exposure

Link to article

D-F

Dakin, E. (2014). Protection as care: moral reasoning and moral orientation among ethnically and socioeconomically diverse older women. *Journal of Aging studies*, 28, 44-56. doi: 10.1016/j.jaging.2013.12.001

Abstract: This study examined moral reasoning among ethnically and socioeconomically diverse older women based on the care and justice moral orientations reflecting theoretical frameworks developed by Carol Gilligan and Lawrence Kohlberg, respectively. A major gap in this area of research and theory development has been the lack of examination of moral reasoning in later life. This study addressed this gap by assessing socioeconomically and ethnically diverse older women's reasoning in response to ethical dilemmas showing conflict between autonomy, representative of Kohlberg's justice orientation, and protection, representative of Gilligan's care orientation. The dilemmas used in this study came from adult protective services (APS), the U.S. system that investigates and intervenes

in cases of elder abuse and neglect. Subjects were 88 African American, Latina, and Caucasian women age 60 or over from varying socioeconomic status backgrounds who participated in eight focus groups. Overall, participants favored protection over autonomy in responding to the case scenarios. Their reasoning in responding to these dilemmas reflected an ethic of care and responsibility and a recognition of the limitations of autonomy. This reasoning is highly consistent with the care orientation. Variations in the overall ethic of care and responsibility based on ethnicity and SES also are discussed.

<u>Keywords</u>: Ethnicity; Moral development; Moral orientation; Moral reasoning; Older women; Socioeconomic status

Link to article

Daly, J. M., Jogerst, G. J. (2013). Multidisciplinary Team Legislative Language Associated With Elder Abuse Investigations. *Journal of Elder Abuse & Neglect*, *26*(1), doi: 10.1080/08946566.2013.782783

<u>Abstract:</u> Professionals from different disciplines providing care and services to persons at risk for or victims of elder abuse have formed various multidisciplinary teams (MDTs). The purpose of the study was to identify the adult protective services—related statutory trends in presence of MDT content and to determine the association of MDT legislation on the rates of reported, investigated, and substantiated domestic elder abuse. Aggregate reports of elder abuse and state statutes for 1999 and 2007 were retrieved from 50 states and the District of Columbia. Statutes of eight states in 2000 and nine in 2008 included text about MDTs. In 2007, investigation rates for those states having MDT text in the statutes were significantly higher than those states without. The incidence of MDTs in the country is unknown. Legislative text is but one factor associated with differences in elder abuse report, investigation, or substantiation rates.

Keywords: elder abuse, multidisciplinary team, statute

Link to article

Davies, M. L., Gilhooly, M. L., Gilhooly, K. J., Harries, P. A., Cairns, D. (2013). Factors influencing decision-making by social care and health sector professionals in cases of elder financial abuse. European Journal of Ageing, 10(4), 313-323. doi: http://dx.doi.org/10.1007/s10433-013-0279-3

<u>Abstract</u>: This study aimed to identify the factors that have the greatest influence on UK social care and health sector professionals' certainty that an older person is being financially abused, their likelihood of intervention, and the type of action most likely to be taken. A factorial survey approach, applying a fractional factorial design, was used. Health and social care professionals (n = 152) viewed a single sample of 50 elder financial abuse case vignettes; the vignettes contained seven pieces of information (factors). Following multiple regression analysis, incremental F tests were used to compare the impact of each

factor on judgments. Factors that had a significant influence on judgments of certainty that financial abuse was occurring included the older person's mental capacity and the nature of the financial problem suspected. Mental capacity accounted for more than twice the variance in likelihood of action than the type of financial problem. Participants from social care were more likely to act and chose more actions compared to health sector participants. The results are discussed in relation to a bystander intervention model. The impact of the older person's mental capacity on decision-making suggests the need for training to ensure action is also taken in cases where older people have full mental capacity and are being abused. Training also needs to highlight the more subtle types of financial abuse, the types that appear not to lead to certainty or action.

<u>Keywords</u>: Elder financial abuse, Decision-making, Bystander intervention, Safeguarding, Social care, Health care, United Kingdom

Link to article

Day, M. R., Leahy-Warren, P., & McCarthy, G. (2013). Perceptions and views of self-neglect: a client-centered perspective. *J Elder Abuse Negl*, 25(1), 76-94. doi: 10.1080/08946566.2012.712864

Abstract: Aging populations and chronic illness increase vulnerability of older people for self-neglect, which is a serious public health issue. Many referrals received by Elder Abuse Services (EAS) in Ireland are categorized as self-neglect. The aim of the research was to observe and describe the living circumstances of a purposive sample of eight older people who were deemed self-neglectful by senior case workers. An exploratory descriptive research design was used. The themes that emerged were early life experiences and lifestyle, disconnectivity, vulnerability, frugality, and service refusal. The majority of participants were content so decisions to live in this way must be respected.

<u>Keywords:</u> elder abuse services, home environments, older adult's perspective, self-neglect

Link to article

De Donder, L., Lang, G., Penhale, B., Ferreira-Alves, J., Tamutiene, I., Verté, D., et al. (2013). Item non-response when measuring elder abuse: influence of methodological choices. *Eur J Public Health*, *23*(6), 1021-1026. doi: 10.1093/eurpub/cks172

<u>Abstract:</u> *Background*: Efficient actions to fight elder abuse are highly dependent on reliable dimensions of the phenomenon. Accurate measures are nevertheless difficult to achieve owing to the sensitivity of the topic. Different research endeavours indicate varying prevalence rates, which are explained by different research designs and definitions used, but little is known about measurement errors such as item non-responses and how outcomes are affected by modes of administration. *Methods*: A multi-national study was developed to measure domestic abuse against home-dwelling older women (aged >60

years) in Europe. The measurement instrument covered six forms of abuse, adapted from the Conflict Tactics Scale. 2880 individuals were interviewed by three different data collection methods (i.e. postal, face-to-face, telephone). *Results*: Principal component analysis of missing values of 34 indicators of abuse showed various patterns of item non-response. Moreover, principal component analysis indicated several response patterns across different types of data collection. A binary logistic regression explained that item non-response and abuse prevalence is influenced by individual characteristics (social status, vulnerability), method effects such as content (sensitivity), the order of the questions (forms of abuse), by type of data collection and the presence of assistance in survey completion. *Conclusion*: The discussion revolves around how these findings could help improve measuring elder abuse. Advantages and disadvantages of the questionnaire and type of data collection methods are discussed in relation to three potential types of response errors: item positioning effect, acquiescence and social desirability.

<u>Keywords:</u> prevalence, research design, domestic abuse, older women, elder abuse prevalence, conflict tactics scale, Europe

Link to article

Dong, X. (2014). Elder abuse: research, practice, and health policy. The 2012 GSA Maxwell Pollack award lecture. *Gerontologist*. *54*(2), 153-62. doi: 10.1093/geront/gnt139

Abstract: Elder abuse, also called elder mistreatment or elder maltreatment, includes psychological, physical, and sexual abuse, neglect (caregiver neglect and self-neglect), and financial exploitation. Evidence suggests that 1 out of 10 older adults experiences some form of elder abuse, and only a fraction of cases are actually reported to social services agencies. At the same time, elder abuse is independently associated with significant morbidity and premature mortality. Despite these findings, there is a great paucity in research, practice, and policy dealing with this pervasive issue. In this paper, I review the epidemiology of elder abuse as well as key practical issues in dealing with the cases of elder abuse. Through my experiences as a Congressional Policy Fellow/National Health and Aging Policy Fellow, I highlight key previsions on 2 major federal legislations dealing with the issues of elder abuse: Older Americans Act (OAA) and Elder Justice Act (EJA). Lastly, I highlight major research gaps and future policy relevant research directions to advance the field of elder abuse. Interdisciplinary and community-based efforts are needed to devise effective strategies to detect, treat, and prevent elder abuse in our increasingly diverse aging populations. Collective advocacy and policy advances are needed to create a national infrastructure to protect the vulnerable older adults.

Keywords: Elder abuse; Epidemiology; Health policy; Maxwell Pollack lecture

Link to article

Dong, X., Chang, E. S., Wong, E., Simon, M. (2013). Perceived effectiveness of elder abuse interventions in psychological distress and the design of culturally adapted interventions: a

qualitative study in the Chinese community in Chicago. *Journal of Ageing Research*. [Epub 2013 Dec 25]. doi: 10.1155/2013/845425

Abstract: This qualitative study examines US Chinese older adults' views on the perceived effectiveness, challenges, and cultural adaptations of elder abuse interventions to psychological distress in the Chinese community in Chicago. A community-based participatory research approach was implemented to partner with the Chinese community. A total of 37 community-dwelling Chinese older adults (age 60+) participated in focus group discussions. Data analysis was based on grounded theory framework. Our findings suggest that older adults perceived social support, empowerment, and community-based interventions design as most effective to promote psychological well-being of victims. The perceived preferences were similar between elder abuse victims and non-victims. Strategies to culturally adapt evidence-based interventions were proposed with respect to nurturing filial piety values, familial integrations, and increased independence. Research and educational outreach initiatives were also discussed. This study has wide policy and practice implications for designing and deploying interventions to reduce psychological distress with respect to elder abuse outcome. Cultural relevancy of health interventions is important in the context of the Chinese communities. Collective federal, state, and community efforts are needed to support the culturally appropriate design and implementation of interventions suitable for the needs of the Chinese older adults.

<u>Keywords</u>: Psychological distress, Chinese, focus group, grounded theory, social support, interventions, filial piety

Link to article

Dong, X., Chang, E. S., Wong, E., Wong, B., Simon, M. (2014). Association of Depressive Symptomatology and Elder Mistreatment in a U.S. Chinese Population: Findings From a Community-Based Participatory Research Study. *Journal of Aggression, Maltreatment & Trauma*, 23(1), 81-98. doi: 10.1080/10926771.2014.864740

Abstract: Elder mistreatment (EM) is associated with increased morbidity and mortality. The objective of this study is to examine the association between depressive symptoms and EM in a U.S. Chinese population. A community-based participatory research approach was implemented to partner with the Chicago Chinatown population. Self-reported EM was assessed using a modified Vulnerability to Abuse Screening Scale instrument. Depressive symptomatology was assessed using the short form Geriatric Depression Scale. Exact logistic regression was used to assess these associations. Of the 78 participants, mean age was 74.8 (SD = 7.8) years and 52.6% were women. EM was reported in 20.5% of participants. After adjusting for potential confounding factors, higher numbers of depressive symptoms were independently associated with increased risk of EM (Exact OR, 1.99, 95% CI [1.23, 3.41]). Interaction terms analyses suggest that higher educational levels might buffer the risk of EM associated with depressive symptoms. Longitudinal studies are needed to confirm these findings in this U.S. Chinese population.

<u>Keywords:</u> depression, elder mistreatment, U.S. Chinese population

Link to article

Dong, X., Chen, R., Chang, E. S., & Simon, M. (2013). Elder abuse and psychological well-being: a systematic review and implications for research and policy--a mini review. *Gerontology*, *59*(2), 132-142. doi:10.1159/000341652

<u>Abstract</u>: Elder abuse and psychological distress are both important geriatric syndromes and are independently associated with premature morbidity and mortality. Despite recent advances, there has been little systematic exploration of the association between elder abuse and psychological distress. This systematic review synthesizes the qualitative and quantitative studies on the relationship between elder abuse and psychological distress, namely psychological distress as a risk factor and/or a consequence of elder abuse. Moreover, through this review, future research directions for elder abuse and psychological distress and their implications for practice and policy to improve the health and aging of vulnerable populations are also highlighted.

Keywords: Elder abuse, Psychological well-being, Aging, Chinese population

Link to article

Dong, X., Chen, R., & Simon, M. A. (2014). Elder abuse and dementia: a review of the research and health policy. *Health Aff (Millwood)*, 33(4), 642-649. doi: 10.1377/hlthaff.2013.1261

Abstract: Older adults with dementia may be at high risk for abuse, but the topic has not been well studied. We conducted a literature review to examine the relationships between elder abuse and dementia. We found that psychological abuse was the most common form of abuse among older adults, with estimates of its prevalence ranging from 27.9 percent to 62.3 percent. Physical abuse was estimated to affect 3.5–23.1 percent of older adults with dementia. We also found that many older adults experienced multiple forms of abuse simultaneously, and the risk of mortality from abuse and self-neglect may be higher in older adults with greater levels of cognitive impairment. We summarize programs and policies related to the abuse of older adults with dementia, including adult protective services, mandatory elder abuse reporting, and the Long-Term Care Ombudsman Program. We also summarize aspects of the National Alzheimer's Project Act, the Older Americans Act, and the Elder Justice Act. In spite of a recent increase in research and policy developments on elder abuse, challenges such as insufficient funding, limited knowledge about elder abuse, a lack of funding for the implementation of federal and state programs relevant to elder abuse and dementia, and a lack of dementia-specific training for front-line health care staff persist. Stronger programs targeting the well-being of older adults with dementia are needed.

<u>Keywords:</u> Elder Abuse, Health Policy, Dementia, Elder Self-Neglect, Alzheimer's Disease

Link to article

Dong, X., Simon, M. A. (2013). Association between reported elder abuse and rates of admission to skilled nursing facilities: findings from a longitudinal population-based cohort study. *Gerontology*, *59*(5), 464-472. doi: 10.1159/000351338

Abstract: BACKGROUND: Elder abuse is common and is a frank violation of an older adult's fundamental rights to be safe and free of violence. Our prior study indicates elder abuse is independently associated with mortality. This study aims to quantify the relationship between overall elder abuse and specific subtypes of elder abuse and rate of admission to skilled nursing facilities (SNF). METHODS: A prospective population-based study conducted in Chicago of community-dwelling older adults who participated in the Chicago Health and Aging Project (CHAP). Of the 6,674 participants in the CHAP study, 106 participants were reported to the social services agency for elder abuse. The primary predictor was elder abuse reported to the social services agency. The outcome of interest was the annual rate of admission to SNF obtained from the Center for Medicare and Medicaid Services. Poisson regression models were used to assess these longitudinal relationships. RESULTS: The average annual rate of SNF for those without elder abuse was 0.14 (0.58) and for those with elder abuse was 0.66 (1.63). After adjusting for sociodemographic and socioeconomic variables, medical comorbidities, cognitive and physical function, and psychosocial wellbeing, older adults who have been abused had higher rates of SNF admission (RR 4.60 (2.85-7.42)). Psychological abuse (RR 2.31 (1.17-4.56)), physical abuse (RR 2.36 (1.19-4.66)), financial exploitation (RR 2.81 (1.53-5.17)) and caregiver neglect (RR 4.73 (3.03-7.40)) were associated with increased rates of admission to SNF, after considering the same confounders. Elder abuse is associated with a higher rate of SNF stay longer than 30 days (RR 6.27 (3.68-10.69)). CONCLUSION: Elder abuse was associated with increased rates of admission to SNF in this community population. Specific subtypes of elder abuse had a differential association with an increased rate of admission to SNF.

Keywords: Elder abuse, Skilled nursing facilities, Population-based study

Link to article

Dong, X., Simon, M. A. (2014). Vulnerability Risk Index Profile for Elder Abuse in a Community-Dwelling Population. *Journal of the American Geriatrics Society, 62*(1), 10-15. doi: 10.1111/jgs.12621

<u>Abstract:</u> Objectives: To develop a vulnerability index for elder abuse in a community-dwelling population. Design: Population-based. Setting: Geographically defined community in Chicago. Participants: Community-dwelling older adults (N = 8,157) who participated in the Chicago Health and Aging Project (CHAP); 213 were reported to social services agency for suspected elder abuse. Measurements: A nine-item vulnerability index for elder abuse was constructed from sociodemographic, health-related, and psychosocial factors. The outcomes of interest were reported and

confirmed elder abuse. Logistic regression models were used to determine the accuracy of the index with respect to elder abuse outcomes. *Results:* For every 1-point increase in the vulnerability index, there was twice the risk of reported (OR = 2.19, 95% confidence interval (CI) = 2.00–2.40) and confirmed (OR = 2.19, 95% CI = 1.94–2.47) elder abuse. Older adults with three to four vulnerability index items had greater risk than the reference group (no elder abuse) of reported (OR = 2.98, 95% CI = 1.98–4.49) and confirmed (OR = 3.90, 95% CI = 2.07–7.36) elder abuse, and the risk of reported (OR = 18.46, 95% CI = 12.15–28.04) and confirmed (OR = 26.79, 95% CI = 14.18–50.61) elder abuse was 18 and 27 times as great, respectively, in older adults with five or more risk index items. Statistically derived receiver operating characteristic (ROC) curves ranged from 0.77 to 0.84 for predicting reported elder abuse and from 0.79 to 0.86 for predicting confirmed elder abuse. *Conclusion:* The vulnerability risk index demonstrates value for identifying individuals at risk of elder abuse. Additional studies are needed to validate this index in other community-dwelling populations.

Keywords: elder abuse index; population-based study

Link to article

Dong, X., Simon, M., & Evans, D. (2013). Elder self-neglect is associated with increased risk for elder abuse in a community-dwelling population: findings from the Chicago Health and Aging Project. *J Aging Health*, 25(1), 80-96. doi:10.1177/0898264312467373

Abstract: Objective: We examined the relationship between self-neglect and risk for subsequent elder abuse report to social services agency. Method: Population-based cohort study conducted Chicago. Primary predictor was elder self-neglect at baseline without concurrent elder abuse. Cox proportional hazard models were used to assess independent associations of elder self-neglect with the risk of subsequent elder abuse using time-varying covariate analyses. Results: Of 10,333 participants, 1,460 were reported for self-neglect and 180 were reported for elder abuse. The median time from self-neglect to elder abuse was 3.5 years. In multivariable analyses, elder self-neglect was associated with increased risk for subsequent elder abuse (odds ratio, OR, 1.75[1.18-2.59]). Elder self-neglect was also associated with increased risk for subsequent caregiver neglect (OR, 2.09[1.24-3.52]), financial exploitation (OR, 1.73[1.01-2.95]), and multiple forms of elder abuse (HR, 2.06[1.22-3.48]). Conclusion: Elder self-neglect report is associated with increased risk for subsequent elder abuse report to social services agency.

<u>Keywords:</u> self-neglect report, elder abuse report, aging, elderly, population-based study

Link to article

Doyle, S. (2014). The impact of power differentials on the care experiences of older people. *Journal of Elder Abuse and Neglect*, 26(3), 319-332. doi: 10.1080/08946566.2013.875970

<u>Abstract</u>: This study explored the lived experience of a small group of older people living in South East Queensland receiving community-based care while living in their own

homes. In-depth unstructured interviews were used in this interpretive hermeneutic phenomenological study to encourage participants to raise experiences that held meaning for them as individuals. Many reported a range of experiences demonstrating active power differentials between themselves as recipients of care and their carers, and impacting on their sense of independence and autonomy. The experiences described provide guidance on how care services might better address the needs of older people, from their own perspective.

<u>Keywords</u>: Australia; aged care; ageism; elder abuse; interpretive hermeneutic phenomenology; power differentials

Link to article

Eisikovits, Z., Koren, C., Band-Winterstein, T. (2013). The social construction of social problems: the case of elder abuse and neglect. *International Psychogeriatrics*, *25*(8), 1291-1298. doi: 10.1017/S1041610213000495

<u>Abstract</u>: The interaction and inter-penetrability overlap of abuse and neglect has been previously described. Therefore, the question is not whether a distinction can be made between the two, but how specific events are constructed into abuse and/or neglect based on how each of the protagonists involved (researchers, professional workers, family members, and the older persons themselves) make sense of abuse and neglect. The purpose of this paper is to explore the social and psychological construction of elder abuse and neglect and illustrate the theoretical constructs using case material and its application to the field.

Keywords: elder abuse and neglect; social construction; social work; practical applications

Link to article

Ellis, J. M., Teresi, J. A., Ramirez, M., Silver, S., Boratgis, G., Kong, J., et al. (2014). Managing resident-to-resident elder mistreatment in nursing homes: the SEARCH approach. *J Contin Educ Nurs*, 45(3), 112-121. doi: 10.3928/00220124-20140223-01

Abstract: This article describes an educational program to inform nursing and care staff of the management of resident-to-resident elder mistreatment (R-REM) in nursing homes, using the SEARCH (Support, Evaluate, Act, Report, Care plan, and Help to avoid) approach. Although relatively little research has been conducted on this form of abuse, there is mounting interest in R-REM because such aggression has been found to be extensive and can have both physical and psychological consequences for residents and staff. The goal of the SEARCH approach is to support staff in the identification and recognition of R-REM as well as to suggest recommendations for management. The educational program and the SEARCH approach are described. Three case studies from the research project are presented, illustrating how nurses and care staff can use the SEARCH

approach to manage R-REM in nursing homes. Resident and staff safety and well-being can be enhanced by the use of the evidence-based SEARCH approach.

<u>Keywords:</u> resident-to-resident, aggression, older adults, nursing homes, patient safety

Link to article

Enguidanos, S. M., Deliema, M., Aguilar, I., Lambrinos, J. Wilber, K. H. (2014). Multicultural voices: attitudes of older adults in the United States of America about elder mistreatment. *Ageing & Society*, *34*(5), 877-903. doi: 10.1017/S0144686X12001389

Abstract: Despite international growth in policies to increase the identification and response to elder abuse and neglect, there remain considerable barriers to treating the problem. Some of these barriers may be attributed to how older adults from different racial/ethnic backgrounds define, experience and seek to remedy elder mistreatment. Using focus group discussions based on case vignettes, this paper examines how older adults from different racial and ethnic backgrounds in the United States of America perceive elder mistreatment. Five focus groups were conducted with African Americans, English-speaking Latinos, Spanish-speaking Latinos, non-Latino Whites and African American care-givers for older adults. While similar definitions and meanings of elder abuse were expressed across the different racial/ethnic groups, Latino participants introduced additional themes of machismo, respect, love and early intervention to stop abuse, suggesting that perceptions/beliefs about elder mistreatment are determined by culture and degree of acculturation in addition to race/ethnicity. Most differences in attitudes occurred within groups, demonstrating that perceptions vary by individual as well as by culture. In identifying scenarios that constitute elder mistreatment, some participants felt that certain cases of abuse are actually the persistence of intimate partner violence into old age. Participants also indicated that victims may prefer to tolerate mistreatment in exchange for other perceived benefits (e.g. companionship, security); and out of fear that they could be placed in an institution if mistreatment is reported. Findings suggest the need for person-centred intervention and prevention models that integrate the cultural background, care needs and individual preferences of older adults.

<u>Keywords</u>: elder abuse, neglect, ethnicity, culture, acculturation, protective services, Latinos, person-centered intervention

Link to article

Eulitt, P. J., Tomberg, R. J., Cunningham, T. D., Counselman, F. L., & Palmer, R. M. (2014). Screening Elders in the Emergency Department at Risk for Mistreatment: A Pilot Study. *J Elder Abuse Negl*. doi:10.1080/08946566.2014.903549

<u>Abstract:</u> Impaired functional status is associated with risk of elder mistreatment. Screening for functional impairment in elderly patients admitted to emergency

departments could be performed to identify patients at risk for elder mistreatment who might benefit from further evaluation. This study utilized a modified Identification of Seniors at Risk (ISAR) screening tool to identify the proportion of elderly at risk for mistreatment due to functional difficulties presenting to two emergency departments in southeastern Virginia, one urban, the other rural. Of a 180 patient cohort (90 per site), 82 screened positive (46 %), ISAR >2 (range 0–6) indicating nearly half of all patients enrolled are at risk for mistreatment. Patients presenting to the urban emergency departments were potentially more at risk than their rural counterparts (p<0.01). Healthcare professionals, particularly in urban settings, should consider screening seniors with a simple tool to identify patients at risk of elder mistreatment.

<u>Keywords:</u> health outcomes, screening, population density

Link to article

Figueredo, B. N., Yarnoz, A. Z. (2014). Perceptions of Abuse in Nursing Home Care Relationships in Uruguay. *J Transcult Nurs*. [Epub ahead of print].

<u>Abstract:</u> *PURPOSE*: To describe the care relationships between caregivers and elderly people in Uruguayan nursing homes. DESIGN: A qualitative study with an ethnographic approach conducted at nine nursing homes for elderly people located in four Uruguayan departments. Twenty-three purposively and theoretically selected participants were interviewed and observed between January 2011 and January 2012. RESULTS: Study of relationships among caregivers, managers, and residents revealed a number of issues: perception and experience of elder abuse, suffering when faced with death, and existential pain. CONCLUSION: A cultural context of discrimination against the elderly and other factors converge to perpetuate elder abuse and suffering in care homes: the lack of adequate regulations covering safety and quality of care, lack of a care model and regular inspections, absence of minimum training requirements for caregivers, and lack of support in situations that have psychic and spiritual repercussions. The inclusion of nurses could promote the development of educational interventions to modify abusive conduct. Nursing home managers need knowledge, skills, and communication strategies to identify and manage inappropriate behavior. An urgent review of nursing home regulations is required to protect elderly people's rights.

Keywords: care; caregivers; elder abuse; ethnography; nursing homes, Uruguay

Link to article

Fisher, J. M., Walker, R. W. (2014). A new age approach to an age old problem: using simulation to teach geriatric medicine to medical students. *Age and Ageing*, 43(3), 424-428. doi: 10.1093/ageing/aft200

<u>Abstract:</u> *BACKGROUND*: simulation-based teaching is increasingly used in medical education, but no studies have evaluated its impact on learning in geriatric medicine. We developed and delivered a simulation teaching session on delirium, falls, elder abuse and breaking bad news. Simulation mannequins, professional role-players and simulated

clinical documentation were all incorporated into scenarios. We evaluated the effect of this intervention on student learning and on students' attitudes towards geriatric medicine. METHODS: third year Newcastle University MBBS students at Northumbria base unit received the simulation-based teaching session. Students' knowledge was assessed using a three question test mapped to learning outcomes for the elder abuse, delirium and falls stations. Each student undertook the test on three occasions: the day before the teaching session, immediately after the session and ~1 month later, allowing evaluation of learning over time. Test scores were also compared with those achieved by another cohort of third year MBBS students at a different base unit, who received traditional ward-based and didactic teaching but no simulation teaching. RESULTS: student knowledge improved significantly after the simulation session and this was maintained when reassessed a month later. Students who received the simulation-based training outperformed those who received usual teaching. Student feedback was overwhelmingly positive and the vast majority of students agreed that the session had a positive impact on their perceptions of geriatric medicine. DISCUSSION: our findings demonstrate the efficacy of simulation-based teaching in undergraduate geriatric medicine, its acceptability to students and its positive influence on students' perceptions of the specialty.

<u>Keywords:</u> delirium; education; elder abuse; older people; simulation; undergraduate

Link to article

Fraga, S., Lindert, J., Barros, H., Torres-Gonzalez, F., Ioannidi-Kapolou, E., Melchiorre, M. G., Stankunas, M., Soares, J.F. (2014). Elder abuse and socioeconomic inequalities: A multilevel study in 7 European countries. *Preventive Medicine*, *61*, 42-47. doi: http://dx.doi.org/10.1016/j.ypmed.2014.01.008

Abstract: *Objectives*: To compare the prevalence of elder abuse using a multilevel approach that takes into account the characteristics of participants as well as socioeconomic indicators at city and country level. Methods: In 2009, the project on abuse of elderly in Europe (ABUEL) was conducted in seven cities (Stuttgart, Germany; Ancona, Italy; Kaunas, Lithuania, Stockholm, Sweden; Porto, Portugal; Granada, Spain; Athens, Greece) comprising 4467 individuals aged 60–84 years. We used a 3-level hierarchical structure of data: 1) characteristics of participants; 2) mean of tertiary education of each city; and 3) country inequality indicator (Gini coefficient). Multilevel logistic regression was used and proportional changes in Intraclass Correlation Coefficient (ICC) were inspected to assert explained variance between models. Results: The prevalence of elder abuse showed large variations across sites. Adding tertiary education to the regression model reduced the country level variance for psychological abuse (ICC = 3.4%), with no significant decrease in the explained variance for the other types of abuse. When the Gini coefficient was considered, the highest drop in ICC was observed for financial abuse (from 9.5% to 4.3%). Conclusion: There is a societal and community level dimension that adds information to individual variability in explaining country differences in elder abuse, highlighting underlying socioeconomic inequalities leading to such behavior.

Keywords: Violence; Inequalities; Elder abuse; Multinational study

Link to article

Fraga, S., Lucas, R., Costa, D., Barros, H. (2013). Interviewer effects when investigating abuse were not compatible with effect modification but instead with confounding. *Journal of Clinical Epidemiology*, 66(8), 911-918. doi: 10.1016/j.jclinepi.2012.07.020

Abstract: OBJECTIVES: To describe interviewer-related variability in abuse estimates and assess the nature of the interviewer effects on the associations between elder abuse and covariates. STUDY DESIGN AND SETTING: After intensive training, six interviewers administered structured questionnaires through face-to-face interviews to assess abuse in a population-based sample of 641 Portuguese individuals aged 60-84 years. RESULTS: The overall prevalence of abuse victimization during the previous year was 28.1%, but it differed significantly according to the interviewer, ranging from 16.9% to 36.8%. There was no statistical effect modification introduced by the interviewer on the association of abuse and its determinants. Additionally, interviewer-level variables (empathy and violence beliefs) showed no significant contribution to explain the variance attributable to potential interviewer effects. Adjusting for the interviewer had little or no effect on the odds ratio of abuse for gender, age, education, and quality of life. However, the interviewer introduced relevant confounding of the associations between abuse and other sensitive topics, such as somatic complaints. CONCLUSION: Although no relevant effect modification was observed, this study emphasizes the importance of the interviewer as a relevant confounder when estimating associations between sensitive variables, as it is the case of elder abuse.

<u>Keywords</u>: Bias; Epidemiologic; Interviewer effects; Effect modifier; Confounding; Elder abuse

Link to article

Fulmer, T., Rodgers, R. F., Pelger, A. (2014). Verbal mistreatment of the elderly. *Journal of Elder Abuse and Neglect*, 26(4), 351-364. doi: 10.1080/08946566.2013.801817

Abstract: Elder mistreatment is expected to rise with the aging of the American population. To date, the association between specific forms of mistreatment and decreased quality of life is poorly understood. The aim of the present study was to explore the association between verbal mistreatment among elderly individuals and depression and quality of life. A sample of 142 older adults (40% male) aged 65 or over was enrolled from a large medical practice and academic dental practice, mean (SD) age = 74.88 (6.98) years. Thirty-eight percent of the sample reported verbal mistreatment. Controlling for sociodemographic characteristics and depression, verbal mistreatment was a significant predictor of social functioning (r = -.28, p < .001), mental health (r = -.25, p < .001), and role limitations OR = 3.02, 95% CI [1.34-6.77]. The present findings highlight the prevalence of verbal mistreatment of elderly individuals.

<u>Keywords</u>: depression; elderly; quality of life; verbal mistreatment

G-J

Gilbert, A., Stanley, D., Penhale, B., Gilhooly, M. (2013). Elder financial abuse in England: a policy analysis perspective related to social care and banking. *Journal of Adult Protection*, 15(3), 153-163. doi: 10.1108/JAP-11-2012-0026

Abstract: Purpose – The purpose of this paper was to undertake a review of selected adult safeguarding policy and guidance documentation to establish the level of guidance provided in relation to financial abuse; identify similarities and differences between the guidance given to professionals working in different contexts; and report gaps or inconsistencies in the guidance given. Design/methodology/approach – Qualitative documentary content analysis was undertaken to identify key issues and themes in documents selected from 25 local authorities in England. Findings – Little variation was found in the content of the documents, which were all heavily influenced by "No Secrets" guidance. The victim and perpetrator were largely invisible and there is no reference to the possible medium to long-term impact of abuse on individuals. There is no research evidence underpinning the use of the notion of "significant harm" when used in the context of adults. In addition, there is no means of comparing safeguarding decisions across different local authorities to evaluate consistency of decisions and outcomes. Research *limitations/implications* – The lack of any mechanisms to compare safeguarding decisions and outcomes across local authority areas is a serious limitation of the way safeguarding works. Also, the failure to address the aftercare and support of victims means they are left to manage the psycho-social consequences. *Practical implications* – Safeguarding boards should evaluate the outcomes of interventions in a standardised way to enable comparison. They should also do more to ensure the longer-term wellbeing of victims. Social implications – The paper raises awareness of elder financial abuse. Originality/value – This is the only policy review that focuses specifically on financial abuse.

<u>Keywords</u>: Banking, Elder care, Elder financial abuse, Health, Safeguarding policy, Social care, England

Link to article

Giraldo-Rodríguez, L., & Rosas-Carrasco, O. (2013). Development and psychometric properties of the Geriatric Mistreatment Scale. Geriatr Gerontol Int, 13(2), 466-474. doi: 10.1111/j.1447-0594.2012.00894.x

<u>Abstract:</u> *Aim*: Elder mistreatment is a phenomenon that has increased proportionally to the increase in the number of older adults in different populations of the world. So far, in Mexico there is no instrument measuring and assessing this phenomenon. The objective of the present study was to develop and to know some psychometric properties of the Geriatric Mistreatment Scale (GMS). *Methods*: A documentary and qualitative

investigation was undertaken to contextualize the mistreatment phenomenon in Mexico. Each item was included in the preliminary version if it obtained 80% or greater agreement by experts (content validity). The preliminary scale (49-item) was applied to 626 older adults using a probabilistic sample representative of the older adults living in Mexico City. Then a statistical process was carried out to reduce the number of items, prove their internal consistency and associations with other measurements. The 22-item final version of the GMS that assesses physical, psychological, neglect, economic mistreatment and sexual abuse is reported herein. *Results*: The mean age of participants was 71.94 ± 8 years. The internal consistency (Cronbach's alpha = 0.83) was appropriate. Subject memory complaint, depression, functional dependence and other measurements were associated with overall mistreatment. Regarding prevalence, 10.28% reported having experienced at least one type of mistreatment. *Conclusion*: The 22-item GMS had an acceptable internal consistency; the relationship with other measurements was significant according to the hypotheses. Therefore, the GMS is recommended for the screening of the five different types of elder mistreatment.

Keywords: abuse; aging; elder mistreatment; psychometric properties; screening

Link to article

Goergen, T., Beaulieu, M. (2013). Critical concepts in elder abuse research. *International Psychogeriatrics*, 25(8), 1217-1228. doi: 10.1017/S1041610213000501

Abstract: BACKGROUND: This paper identifies core elements in principal definitions of elder abuse or mistreatment of older adults (EA/MOA) and discusses the relevance of four crucial concepts: age, vulnerability, trust, and power balance in relationships. METHOD: A critical analysis of selected literature in EA/MOA with a focus on works from the last 10 years. RESULTS: Current definitions of EA/MOA share commonalities regarding an understanding of elder abuse as a status offence, the inclusion of both acts and omissions, and the consideration of multiple levels of behavior and its effects. Definitions differ with regard to aspects as crucial as the intentionality of an abusive action and its actual or potential harmful effects. EA/MOA can be considered as a complex subtype of victimization in later life limited to victim-perpetrator relationships, where the perpetrator has assumed responsibility for the victim, the victim puts trust in the offender, or the role assigned to the offending person creates the perception and expectation that the victim may trust the perpetrator. Vulnerability is identified as a key variable in EA/MOA theory and research. With regard to neglect, the mere possibility of being neglected presupposes a heightened level of vulnerability. Power imbalance often characterizes victim - perpetrator relationships but is not a necessary characteristic of abuse. CONCLUSION: Research on EA/MOA needs conceptual development. Confining phenomena of EA/MOA to specific relationships and tying them to notions of vulnerability has implications for research design and sampling and points to the limits of population-based victimization surveys.

<u>Keywords</u>: elder abuse; mistreatment of older adults; chronological age; vulnerability; risk; trust; power

Link to article

Gordon, A. L., Blundell, A., Dhesi, J. K., Forrester-Paton, C., Forrester-Paton, J., Mitchell, H. K., Bracewell, N., Mjojo, J., Masud, T., Gladman, J. R. (2014). UK medical teaching about ageing is improving but there is still work to be done: the Second National Survey of Undergraduate Teaching in Ageing and Geriatric Medicine. *Age and Ageing*, *43*(2), 293-297. doi: 10.1093/ageing/aft207

Abstract: INTRODUCTION: in 2008, a UK national survey of undergraduate teaching about ageing and geriatric medicine identified deficiencies, including failure to adequately teach about elder abuse, pressure ulcers and bio- and social gerontology. We repeated the survey in 2013 to consider whether the situation had improved. METHOD: the deans of all 31 UK medical schools were invited to nominate a respondent with an overview of their undergraduate curriculum. Nominees were invited by email and letter to complete an online questionnaire quantifying topics taught, type of teaching and assessment undertaken, and the amount of time spent on teaching. RESULTS: one school only taught pre-clinical medicine and declined to participate. Of the 30 remaining schools, 20 responded and 19 provided analysable data. The majority of the schools (95-100%) provided teaching in delirium, dementia, stroke, falls, osteoporosis, extra-pyramidal disorders, polypharmacy, incontinence, ethics and mental capacity. Only 68% of the schools taught about elder abuse. Thirty-seven per cent taught a recognised classification of the domains of health used in Comprehensive Geriatric Assessment (CGA). The median (range) total time spent on teaching in ageing and geriatric medicine was 55.5 (26-192) h. There was less reliance on informal teaching and improved assessment:teaching ratios compared with the 2008 survey. CONCLUSIONS: there was an improvement in teaching and assessment of learning outcomes in ageing and geriatric medicine for UK undergraduates between 2008 and 2013. However, further work is needed to increase the amount of teaching time devoted to ageing and to improve teaching around elder abuse and the domains of health used in CGA.

<u>Keywords</u>: curriculum; elder abuse; geriatrics; medical education; older people; undergraduate medical education

Link to article

Harries, P., Davies, M., Gilhooly, K., Gilhooly, M., Tomlinson, C. (2014). Educating novice practitioners to detect elder financial abuse: a randomised controlled trial. *BMC Medical Education*, *14*, 21. doi: 10.1186/1472-6920-14-21

<u>Abstract:</u> *Background:* Health and social care professionals are well positioned to identify and intervene in cases of elder financial abuse. An evidence-based educational intervention was developed to advance practitioners' decision-making in this domain. The objective was to test the effectiveness of a decision-training educational intervention on novices' ability to detect elder financial abuse. The research was funded by an E.S.R.C. grant reference RES-189-25-0334. *Methods:* A parallel-group, randomised controlled trial was

conducted using a judgment analysis approach. Each participant used the World Wide Web to judge case sets at pre-test and post-test. The intervention group was provided with training after pre-test testing, whereas the control group were purely given instructions to continue with the task. 154 pre-registration health and social care practitioners were randomly allocated to intervention (n78) or control (n76). The intervention comprised of written and graphical descriptions of an expert consensus standard explaining how case information should be used to identify elder financial abuse. Participants' ratings of certainty of abuse occurring (detection) were correlated with the experts' ratings of the same cases at both stages of testing. Results: At pre-test, no differences were found between control and intervention on rating capacity. Comparison of mean scores for the control and intervention group at pre-test compared to immediate post-test, showed a statistically significant result. The intervention was shown to have had a positive moderate effect; at immediate post-test, the intervention group's ratings had become more similar to those of the experts, whereas the control's capacity did not improve. The results of this study indicate that the decision-training intervention had a positive effect on detection ability.

<u>Keywords:</u> education, financial abuse, educational intervention, healthcare practitioners, social care practitioners

Link to article

Hoover, R. M., & Polson, M. (2014). Detecting elder abuse and neglect: assessment and intervention. *Am Fam Physician*, 89(6), 453-460.

Abstract: Elder mistreatment includes intentional or neglectful acts by a caregiver or trusted person that harm a vulnerable older person. It can occur in a variety of settings. One out of 10 older adults experiences some form of abuse or neglect by a caregiver each year, and the incidence is expected to increase. Although the U.S. Preventive Services Task Force found insufficient evidence that screening for elder abuse reduces harm, physicians in most states have professional and legal obligations to appropriately diagnose, report, and refer persons who have been abused. Screening or systematic inquiry can detect abuse. A detailed medical evaluation of patients suspected of being abused is necessary because medical and psychiatric conditions can mimic abuse. Signs of abuse may include specific patterns of injury. Interviewing patients and caregivers separately is helpful. Evaluation for possible abuse should include assessment of cognitive function. The Elder Abuse Suspicion Index is validated to screen for abuse in cognitively intact patients. A more detailed two-step process is used to screen patients with cognitive impairment. The National Center on Elder Abuse website provides detailed, state-specific reporting and resource information for family physicians.

<u>Keywords:</u> abuse detection, patient screening, cognitive assessment

Institute of Medicine & National Research Council. (2014). *The Evidence for Violence Prevention Across the Lifespan and Around the World: Workshop Summary*. Washington, DC: The National Academies Press

Abstract: The Evidence for Violence Prevention Across the Lifespan and Around the World is the summary of a workshop convened in January 2013 by the Institute of Medicine's Forum on Global Violence Prevention to explore value and application of the evidence for violence prevention across the lifespan and around the world. As part of the Forum's mandate is to engage in multisectoral, multidirectional dialogue that explores crosscutting approaches to violence prevention, this workshop examined how existing evidence for violence prevention can continue to be expanded, disseminated, and implemented in ways that further the ultimate aims of improved individual well-being and safer communities. This report examines violence prevention interventions that have been proven to reduce different types of violence (e.g., child and elder abuse, intimate partner and sexual violence, youth and collective violence, and self-directed violence), identifies the common approaches most lacking in evidentiary support, and discusses ways that proven effective interventions can be integrated or otherwise linked with other prevention programs.

<u>Keywords:</u> violence prevention, global, interventions, Institute of Medicine.

Link to article

Iris, M., Conrad, K. J., Ridings, J. (2014). Observational measure of elder self-neglect. *Journal of Elder Abuse and Neglect*, 26(4), 365-397. doi: 10.1080/08946566.2013.801818

Abstract: The purpose of this study was to improve measurement of elder self-neglect by testing the psychometric properties of the Elder Self-Neglect Assessment (ESNA). Social workers, case managers, and adult protective services providers from 13 Illinois agencies completed a 77-item assessment for 215 clients suffering from self neglect. Analyses used Rasch item response theory and traditional validation approaches to test for dimensionality, model fit, and additional construct validation, resulting in a 62-item assessment. The ESNA met Rasch fit criteria with good internal consistency, item reliability, and construct validity. A 25-item short form also met Rasch criteria. A hierarchy of items associated with severity of abuse was produced by frequency of occurrence. ESNA indicators of self-neglect align into two broad categories: behavioral characteristics and environmental factors, which must be accounted for in a comprehensive evaluation. Theoretical refinements developed using the empirically generated item hierarchy may help to improve assessment and intervention.

Keywords: Rasch analysis; assessment; elder self-neglect; severity

Jackson, S. L., & Hafemeister, T. L. (2013). Enhancing the safety of elderly victims after the close of an APS investigation. *J Interpers Violence*, 28(6), 1223-1239. doi: 10.1177/0886260512468241

Abstract: Purpose: The purpose of this study was to test whether particular actions on the part of adult protective services (APS), the elderly victim, and/or society's response to abusive individuals, are associated with the continuation of abuse after the close of an APS investigation and thereby compromise victim safety. *Method*: Interviews were conducted with 71 APS caseworkers, 55 of the elderly victims of substantiated abuse, and 35 third-party persons. Results: A small proportion of elderly victims continue to experience abuse after the close of an APS investigation. Elderly victims were more likely to experience continued abuse when they chose to have ongoing contact with their abusers, vis-à-vis cohabitation or otherwise, and when their abusers experienced no consequences. Although continuation of abuse did not differ by the type of maltreatment involved, reasons for the cessation of abuse, and other safety indicators, did. *Implications*: To enhance victim safety, greater monitoring may be warranted in cases wherein elderly victims continue to have contact with their abuser and when abusive individuals experience no consequences. To further enhance victim safety, abusive individuals must be incorporated into an overall strategic response to elder abuse. A potential avenue for facilitating victim safety while maintaining victim autonomy is to understand their motivations for desiring continued contact with their abuser and developing interventions based upon such knowledge.

Keywords: abusers, adult protective services, elder abuse, elderly victims, victim safety

Link to article

James, B. D., Boyle, P.A., Bennett, D.A. (2014). Correlates of susceptibility to scams in older adults without dementia. *Journal of Elder Abuse and Neglect*, 26(2), 107-122. doi: 10.1080/08946566.2013.821809

Abstract: This study examined correlates of susceptibility to scams in 639 community-dwelling older adults without dementia from a cohort study of aging. Regression models adjusted for age, sex, education, and income were used to examine associations between susceptibility to scams, measured by a five-item self-report measure, and a number of potential correlates. Susceptibility was positively associated with age and negatively associated with income, cognition, psychological well-being, social support, and literacy. Fully adjusted models indicated that older age and lower levels of cognitive function, decreased psychological well-being, and lower literacy in particular may be markers of susceptibility to financial victimization in old age.

Keywords: fraud, scam, financial exploitation, elder abuse, risk factors

Jargin, S. V. (2014). Elder Abuse and Neglect vs. Parricide: A Letter From Russia. *J Elder Abuse Negl*, 26(3), 341-4. doi: 10.1080/08946566.2014.898444

Abstract: In Russia, elder abuse is rarely discussed in the professional literature and the media. However, it is posited that parricide can be considered a form of elder abuse in Russia, as the line between elder abuse and parricide can be vague. Instances of parricide can appear trivial, hardly realized as such by victims and the social environment. Borderline cases can include involving older people in binge drinking, denying them help, and manipulating them to commit suicide. The perpetrators are often nonpsychotic, although sometimes exhibiting abnormal personality traits. Anger toward the victim can be absent on the part of the perpetrator, with their actions often driven by economic desires. A concluding point is that for better prevention of parricide and, therefore, elder abuse, it should not be considered only an unusual horrific crime committed by the mentally ill.

<u>Keywords:</u> Russia; alcoholism; commentary; elder abuse; parricide

Link to article

Jervis, L. L., Fickenscher, A., Beals, J. (2014). Assessment of Elder Mistreatment in Two American Indian Samples: Psychometric Characteristics of the HS-EAST and the Native Elder Life–Financial Exploitation and –Neglect Measures. *Journal of Applied Gerontology*, *33*(3), 336-356. doi: 10.1177/0733464812470748

Abstract: Although elder mistreatment among ethnic minorities is increasingly gaining attention, our empirical knowledge of this phenomenon among American Indians remains quite limited, especially with respect to measurement. The Shielding American Indian Elders (SAIE) Project used a collaborative approach to explore culturally informed measurement of elder mistreatment in two American Indian elder samples (a Northern Plains reservation and a South Central metropolitan area). The project sought to investigate the performance characteristics of the commonly used Hwalek-Sengstock Elder Abuse Screening Test (HS-EAST), as well as to examine the psychometric properties of a new measure developed to capture culturally salient aspects of mistreatment in American Indian contexts—the Native Elder Life Scale (NELS). Using methods and samples comparable to those in the literature, the HS-EAST performed adequately in these Native samples. The NELS also shows promise for use with this population and assesses different aspects of elder mistreatment than does the HS-EAST.

<u>Keywords</u>: American Indian, financial exploitation, elder abuse, measurement, HS-EAST

Link to article

Jirik, S., Sanders, S. (2014). Analysis of Elder Abuse Statutes Across the United States, 2011-2012. *J Gerontol Soc Work*. [Epub ahead of print].

<u>Abstract:</u> The purpose of this paper is to describe the state elder abuse statutes in the United States and Washington D.C during 2011-2012. The last review of elder abuse statutes occurred in 2001; thus, a re-examination is warranted given the increased awareness of elder abuse at the state and national level and the growing number of older adults in the US. This descriptive study analyzed the following components of elder or dependent abuse statutes: definitions, reporting requirements, training, and consequences for failure to report. It was determined that differences remain in how states respond to elder abuse at the community-based level.

<u>Keywords:</u> elder abuse; elder abuse statutes; older adults; policy

Link to article

K-N

Kalavar, J. M., Jamuna, D., & Ejaz, F. K. (2013). Elder abuse in India: extrapolating from the experiences of seniors in India's "pay and stay" homes. *J Elder Abuse Negl, 25*(1), 3-18. doi:10.1080/08946566.2012.661686

<u>Abstract:</u> Primary research on the issue of elder abuse and neglect in India is limited due to tremendous reluctance to discuss intergenerational conflicts. Nevertheless, researchers are beginning to identify collective voices of perceptions of abuse and neglect that are more rampant than individuals may directly admit. In this study of senior residents living in India's "pay and stay" homes, 150 individuals were interviewed in order to understand their relocation experience. Results suggest that challenges in interpersonal family relationships, conflicts in values and perceptions, particularly with regard to neglect and abandonment, are evident in descriptions of the relocation experience.

<u>Keywords:</u> Asian Indian elderly, elder abuse and neglect, pay and stay homes, elder maltreatment

Link to article

Koenig, T. L., Leiste, M. R., Spano, R., & Chapin, R. K. (2013). Multidisciplinary team perspectives on older adult hoarding and mental illness. *J Elder Abuse Negl, 25*(1), 56-75. doi:10.1080/08946566.2012.712856

<u>Abstract:</u> This qualitative study examined multidisciplinary team members' perspectives of their involvement in older adult hoarding cases. Fifteen informants, as representatives of four hoarding teams, described cases in which teams did or did not work well together. Specifically, informants described their (a) team characteristics, (b) awareness of hoarding as a mental health illness, (c) barriers to providing mental health services for older adults who hoard, and (d) components of successful teamwork within the team and with the older adult as hoarder. Implications include research to better guide interventions, team training

to develop common perspectives, and policy development that supports mental health representation on teams and in-home mental health treatment.

Keywords: hoarding, mental health services, multidisciplinary team, older adult

Link to article

Kosberg, J. (2014). Rosalie Wolf memorial lecture: reconsidering assumptions regarding men as elder abuse perpetrators and as elder abuse victims. *J Elder Abuse Negl*, 26(3), 207-22. doi: 10.1080/08946566.2014.898442

<u>Abstract:</u> From research findings and practice experiences, it is concluded that abuse of older men is especially invisible and underreported, compared to abuse of older women. It is proposed that attention should be directed not to gender, but to those conditions in different countries and cultures leading to abuse of both older men and women, including (but not limited to) economic problems, few alternatives to family care of the elderly, violence, changing characteristics of the family, ageism, and sexism. Advocates for the prevention of elder abuse should work together in combating, reducing, and eliminating the problem of elder abuse of both older men and older women.

<u>Keywords:</u> cross-national perspectives; elder abuse as a man's problem; elder abuse interventions with men; invisibility of men's abuse; nongendered collaboration; nongendered explanations for abuse; prevention of the abuse of older men; professional ageism and sexism

Link to article

Lacey, W. (2014). Neglectful to the Point of Cruelty? Elder Abuse and the Rights of Older Persons in Australia. *Sydney Law Review*, *36*(1), 99-130.

Abstract: Australia's ageing population is growing and so too is the number of older persons who experience abuse. Divorce, ill-health, disability, the death of a partner, dependency, poverty, social isolation, gender, and even the accumulation of assets, can heighten a person's vulnerability to abuse -- physical, social, sexual, psychological, financial or neglect. Addressing elder abuse from a legal and policy perspective is not, however, simple. Perceived Commonwealth dominance in the ageing portfolio, despite the lack of a comprehensive legislative mandate to safeguard older Australians; a lack of innovative legal reform at the state level; ageism; the invisibility of our older people; a lack of awareness within the community of both the prevalence, nature and the signs of elder abuse; together with the absence of an international normative framework for protecting the rights of older persons, have together created a situation where elder abuse is simply not widely acknowledged as a serious issue in Australia and is inadequately addressed under existing laws. This article examines the current legal situation in Australia and calls for a collaborative national strategy for preventing and responding to elder abuse, incorporating a rights-based approach to the review and reform of state and territory laws. Recognising that elder abuse involves the denial of a person's basic human rights,

including the right to live free from abuse, exploitation or neglect, this article calls for a national inquiry into elder abuse by the Australian Human Rights Commission.

<u>Keywords</u>: Commonwealth (Organization), Australia, Human Rights Commission, Older people -- Abuse of, Law reform, Older people -- Legal status, laws, etc., State laws, Human rights

Link to article

Lang, G., De Donder, L., Penhale, B., Ferreria-Alves, J., Tamutiene, I., Luoma, M. (2014). Measuring Older Adults' Abuse: Evaluation of Formative Indicators to Promote Brevity. *Educational Gerontology*, 40(7), 531-42. doi: http://dx.doi.org/10.1080/03601277.2013.857892

Abstract: Some literature on elder abuse recommends, and practitioners claim, that there should be better assessment and screening tools. In order to improve the accuracy of measurement instruments, the purpose of this article is threefold: (a) describing the construction of an instrument with formative indicators and the survey design about the sensitive topic of elder abuse, (b) development of an analytic strategy to improve the precision of the measures by (c) evaluating the measurement instrument through quality criteria against outcomes of the instrument. We randomly selected 2,880 home-dwelling older women aged 60 and above from five European Union countries who participated in a survey on elder abuse. Prevalence data on abuse against older women was gathered using a postal (BE, FI, PT), face-to-face (BE, LT), and telephone survey (AT) but using an identical instrument. A table with outcome measures was calculated to evaluate the formative indicators of the measurement instrument, and a decision strategy for item reduction was developed. The results suggest that 12 (35%) of the original 34-indicators instrument can be omitted. The adapted version can provide the same elder abuse prevalence rates (reliability) with the same negative associations in terms of life quality (validity). The results indicate in an applied way how an elder abuse instrument can be evaluated and further developed using formative measures.

<u>Keywords</u>: abuse measurement instrument, elder abuse screening tools, reliability, validity

Link to article

Lang, G., & Enzenhofer, E. (2013). Quality of life of older women with dependency and abuse experience. *Z Gerontol Geriatr*, 46(1), 27-34. doi: 10.1007/s00391-012-0318-2

Abstract: BACKGROUND: Quality of life is largely determined by changing biographical contexts of a person's behavioural action. In later age, health and social relationships are major determinants for a "good life". A decline in health status may lead to the need for support which may result in further dependency; thus, social relations play an even more important role for older people. Relationships characterised by strain and tension may increase the risk of exposure to force and violence. This article investigates the influence of

dependency and abuse on the subjective quality of life of older people. MATERIAL AND METHODS: The dataset was drawn from an Austrian survey of 593 home-dwelling older women aged 60 and over $(71.0 \pm 8.1 \text{ years})$. Quality of life was assessed by the EUROHIS-QOL Scale, dependency by the degree of need for support with respect to activities of daily living and by the levels of care allowance received by this cohort. Following the Conflict Tactics Scales (CTS), six different types of abuse have been operationalised by 34 indicators. The data were analysed by descriptive statistics, confirmatory factor analysis and structural equation modelling. RESULTS: With increasing dependency the subjective quality of life of older women decreases. At the same time it is reduced by the experience of abuse in the close social environment. Neglect, psychological abuse and the violation of personal liberties and rights can be identified as factors which have a negative impact on quality of life. It is also noted that neglect can be found particularly among women with a greater need for support and a higher level of care allowance, which is a particularly problematic situation. CONCLUSION: Dependency and abuse are major risk factors for low quality of life in old age. The results stress the importance of raising general awareness on violence and highlight the social taboos around the issue of abuse against older people, especially in the case of increasing dependency. In addition, the results point to an increasing demand for specific measures of health promotion and prevention activities addressing vulnerable older people.

Keywords: quality of life, vulnerable older women, dependency, Austria

Link to article

Lee, H. Y., Lightfoot, E. (2014). The Culture-Embedded Social Problem of Elder Mistreatment: A Review of International Literature on Asian Elders. *Journal of Aggression, Maltreatment & Trauma*, 23(1), 5-19. doi: http://dx.doi.org/10.1080/10926771.2014.864743.

Abstract: Elder mistreatment is now recognized as a worldwide social problem occurring in all racial and ethnic groups. The research on elder mistreatment started in the late 1970s and expanded its focus to ethnic elderly groups including Asian elders in the mid-1980s. Many researchers have explored the issues of elder mistreatment in conjunction with Asian elders' culture and immigration backgrounds. This article reviews the state of the literature on elder mistreatment among Asians living in Asia or abroad to identify future directions of research, prevention, intervention, and policy. This research indicates that prevention, education, and intervention must take into account the cultural backgrounds of Asian elders and their family members. There is clearly a need for greater research into appropriate elder mistreatment prevention and intervention with Asian elders and their family members.

<u>Keywords</u>: adult protective services, culture, elder mistreatment, help-seeking intention, perception

Lee, Y. S., Kaplan, C. P., Perez-Stable, E. J. (2014). Elder Mistreatment among Chinese and Korean Immigrants: The Roles of Sociocultural Contexts on Perceptions and Help-Seeking Behaviors. *Journal of Aggression, Maltreatment & Trauma, 23*(1), 20-44. doi: http://dx.doi.org/10.1080/10926771.2014.864741

Abstract: The purpose of this study was to identify dimensions of elder mistreatment in Chinese and Korean immigrant communities and to increase sociocultural understanding of such mistreatment by elucidating the complexities of abuse embedded in unique social and cultural contexts. In-depth interviews were conducted with 20 local professionals working primarily in Asian elderly advocacy, and six focus group discussions were conducted involving 60 community members in the San Francisco Bay area. Five dimensions of elder mistreatment were identified: psychological abuse, neglect by a trusted person, financial exploitation, physical abuse, and sexual abuse. In general, fewer Korean community member participants reported having observed physical or financial abuse than Chinese groups, but they reported greater knowledge of situations involving psychological abuse, neglect by a trusted person, and sexual abuse. The contexts of cultural influences and immigration and acculturation were salient themes that shaped participants' subjective perceptions and beliefs about elder abuse and hence help-seeking behaviors.

Keywords: cultural issues, elder mistreatment, intervention, prevention, race and ethnicity

Link to article

Lee, Y.S., Moon, A., Gomez, C. (2014). Elder mistreatment, culture, and help-seeking: a cross-cultural comparison of older Chinese and Korean immigrants. *Journal of Elder Abuse and Neglect*, *26*(3), 244-69. doi: 10.1080/08946566.2013.820656

<u>Abstract:</u> This study explored and compared the salient sociocultural characteristics that influenced elder mistreatment and help-seeking behaviors among older Chinese and Korean immigrants. Results from qualitative, in-depth focus groups with 30 participants revealed that elder mistreatment is a culturally laden construct, and core values of traditional culture and acculturation are significant contextual factors that profoundly affect the perceptions of elder abuse and receptivity of interventions. Older Korean participants, compared to their Chinese counterparts, demonstrated stronger influence of hierarchy and cultural beliefs in exclusive family ties and gender norms, and were less likely to disclose abuse. Implications for culturally based interventions are also discussed.

Keywords: culture; elder mistreatment; help-seeking; immigration/acculturation

Link to article

Lightfoot, E., Lee, H. Y. (2014). Elder Mistreatment among Asians and Asian Americans: New Directions toward Prevention, Intervention, and Policy. *Journal of Aggression, Maltreatment & Trauma*, 23(1), 1-4. doi: http://dx.doi.org/10.1080/10926771.2014.865150.

<u>Abstract</u>: This article points out the majority of research to date has focused on the prevalence, causes, and types of mistreatment among Asians, as well as help-seeking behavior among older Asians. In particular, this overview article discusses how research has uncovered that changing forms of filial patterns and obligations are embedded in understanding EM among Asians, and that cultural values have a strong impact on help-seeking. This review also highlights the gaps in research knowledge regarding EM among older Asians, and calls for more research, particularly into EM prevention and interventions for this population.

<u>Keywords</u>: Asians, Asian Americans, cultural values, help-seeking, elder mistreatment prevention

Link to article

Lin, M., Giles, H. (2013). The dark side of family communication: a communication model of elder abuse and neglect. *International Psychogeriatrics*, *25*(8), 1275-1290. doi: 10.1017/S1041610212002347

Abstract: To further address the potential factors that lead up to elder abuse in domestic settings, this paper proposes a model from a communication approach to explain dyadic influences between the family caregiver and the elderly care receiver that give rise to the abuse. That is, dysfunctional communication between the caregivers and care receivers may, therefore, increase the likelihood of elder abuse. Grounded in Bugental and her colleagues' work (1993, 1999, 2002) on child abuse, we propose a power-oriented communication model based, in part, on research in the fields of family violence and intergenerational communication to explain the likelihood of occurrence of elder abuse in family caregiving situations. We argue that certain risk factors pertaining to caregivers' characteristics – those who perceive high stress in caregiving, have mental health issues, have a history of substance abuse, and/or display verbal aggressiveness – may be more likely to attribute considerable power to those elderly under their custodianship. At the same time, such caregivers tend to feel powerless and experience loss of control when interacting with their elderly counterparts. When an elderly care receiver displays noncompliant behaviors, caregivers may be prone to employ abusive behaviors (in our model, it refers to physical abuse, verbal abuse, or communication neglect) to seek such compliance. Consequences of such abuse may result in lower self-esteem or lower confidence in one's ability to manage his/her life. It is suggested that researchers and practitioners investigate both parties' interactions closely and the role of elderly care receivers in order to detect, intervene, and prevent elder abuse.

<u>Keywords</u>: elderly; elder abuse; intergenerational communication; intergroup communication; family violence; perceived power; family caregiving; elder maltreatment

Lindenberg, J., Westendorp, R. G., Kurrle, S., Biggs, S. (2013). Special Issue Guest Editorial. Elder abuse an international perspective: exploring the context of elder abuse. *International Psychogeriatrics*, *25*(8), 1213-1215. doi: 10.1017/S1041610213000926

Abstract: The understanding of elder abuse and neglect, also called elder mistreatment, is at an interesting juncture, both empirically and conceptually. Since 2000 there has been a significant growth in prevalence studies, including major studies from the United Kingdom, Spain, Germany, Ireland, Israel, Finland, Canada, and the United States, with further studies planned in India and Hong Kong (see, for instance, Pillemer and Finkelhor, 1988; McDonald et al., 1991; Comijs et al., 1995; Penhale, 2008; Biggs et al., 2009; Goergen et al., 2009; Lowenstein et al., 2009; Naughton et al. 2010). And while development is still uneven, there is now a World Elder Abuse Awareness Day, held in June every year, with a network of grassroots support in a wide number of countries. At the International Congress of Gerontology and Geriatrics in Bologna, Italy (held on 14–17 April 2011, see http://iaggbologna2011.com), there were, for the first time, six symposia devoted to the topic, and in the Netherlands, a country with some of the first internationally recognized studies, the Leyden Academy in 2011 called the inaugural meeting of an international working group to critically consider interdisciplinary responses to this area of increasing professional concern.

Keywords: International Congress of Gerontology and Geriatrics, international

Link to article

Lindert, J., de Luna, J., Torres-Gonzales, F., Barros, H., Ioannidi-Kopolou, E., Melchiorre, M. G., et al. (2013). Abuse and neglect of older persons in seven cities in seven countries in Europe: a cross-sectional community study. *Int J Public Health*, *58*(1), 121-132. doi:10.1007/s00038-012-0388-3

<u>Abstract:</u> *Objectives*: We aimed to investigate the prevalence rate of abuse (psychological, physical, sexual, financial, neglect) of older persons (AO) in seven cities from seven countries in Europe (Germany, Greece, Italy, Lithuania, Portugal, Spain, Sweden), and to assess factors potentially associated with AO. *Methods*: A cross-sectional study was conducted in 2009 (n = 4,467, aged 60–84). Potentially associated factors were grouped into domains (domain 1: age, gender, migration history; domain 2: education, occupation; domain 3: marital status, living situation; domain 4: habitation, income, financial strain). We calculated odds ratios (OR) with their respective 95 % confidence intervals (CI).

Keywords: abuse prevalence, cross-sectional study, Europe

Link to article

Livingston, G., Barber, J., Rapaport, P., Knapp, M., Griffin, M., King, D., Livingston, D., Mummery, C., Walker, Z., Hoe, J., Sampson, E. L., Cooper, C. (2013). Clinical effectiveness of a manual based coping strategy programme (START, STrAtegies for RelaTives) in promoting the

mental health of carers of family members with dementia: pragmatic randomised controlled trial. *British Medical Journal*, 347, f6276. doi: http://dx.doi.org/10.1136/bmj.f6276

Abstract: Objective: To assess whether a manual based coping strategy compared with treatment as usual reduces depression and anxiety symptoms in carers of family members with dementia. Design: Randomised, parallel group, superiority trial. Setting: Three mental health community services and one neurological outpatient dementia service in London and Essex, UK. Participants: 260 carers of family members with dementia. Intervention: A manual based coping intervention comprising eight sessions and delivered by supervised psychology graduates to carers of family members with dementia. The programme consisted of psychoeducation about dementia, carers' stress, and where to get emotional support; understanding behaviours of the family member being cared for, and behavioural management techniques; changing unhelpful thoughts; promoting acceptance; assertive communication; relaxation; planning for the future; increasing pleasant activities; and maintaining skills learnt. Carers practised these techniques at home, using the manual and relaxation CDs. Main outcome measures: Affective symptoms (hospital anxiety and depression total score) at four and eight months. Secondary outcomes were depression and anxiety caseness on the hospital anxiety and depression scale; quality of life of both the carer (health status questionnaire, mental health) and the recipient of care (quality of life-Alzheimer's disease); and potentially abusive behaviour by the carer towards the recipient of care (modified conflict tactics scale). Results: 260 carers were recruited; 173 were randomised to the intervention and 87 to treatment as usual. Mean total scores on the hospital anxiety and depression scale were lower in the intervention group than in the treatment as usual group over the eight month evaluation period: adjusted difference in means -1.80 points (95% confidence interval -3.29 to -0.31; P=0.02) and absolute difference in means -2.0 points. Carers in the intervention group were less likely to have case level depression (odds ratio 0.24, 95% confidence interval 0.07 to 0.76) and there was a non-significant trend towards reduced case level anxiety (0.30, 0.08 to 1.05). Carers' quality of life was higher in the intervention group (difference in means 4.09, 95%) confidence interval 0.34 to 7.83) but not for the recipient of care (difference in means 0.59, -0.72 to 1.89). Carers in the intervention group reported less abusive behaviour towards the recipient of care compared with those in the treatment as usual group (odds ratio 0.47, 95% confidence interval 0.18 to 1.23), although this was not significant. Conclusions: A manual based coping strategy was effective in reducing affective symptoms and case level depression in carers of family members with dementia. The carers' quality of life also improved.

<u>Keywords</u>: caregiver depression and anxiety, coping strategy, dementia, intervention study

Link to article

Manthorpe, J. (2014). The abuse, neglect and mistreatment of older people with dementia in care homes and hospitals in England: The potential for secondary data analysis: Innovative practice. *Dementia (London)*, [Epub ahead of print]. doi: 10.1177/1471301214541177

<u>Abstract</u>: There is concern that people with dementia may be at particular risk of elder abuse however there is little data to confirm such fears. This paper presents findings from an up-dated investigation of secondary sources of data about the abuse of older people with dementia in England conducted in 2013. There are many sources of data about poor care, abuse and neglect of people with dementia in care home and hospital settings but these are collected for different purposes and hard to link. The article discusses the ways in which dementia care practitioners may be able to make the most of existing data.

Keywords: Elder abuse, dementia, data, statistics, research

Link to article

Manthorpe, J., Samsi, K. (2014). Care professionals' understanding of the new criminal offences created by the Mental Capacity Act 2005. *International Journal of Geriatric Psychiatry*. [Epub ahead of print]. doi: 10.1002/gps.4147

Abstract: OBJECTIVES: Implemented in 2007, the Mental Capacity Act (MCA) 2005 codified decision-making for adults unable to make decisions for themselves in England and Wales. Among other changes, two new offences of wilful neglect and ill-treatment were created under Section 44. Our study explored how the MCA was being implemented in community-based dementia care, focusing on frontline practice. METHOD: Using qualitative longitudinal methodology, we interviewed 279 practitioners, in the London and South-East area of England, two or three times over 3 years. We applied framework analysis to identify and delineate recurrent themes. RESULTS: Views of the new offences were positive overall, but understanding ranged from partial to non-existent among some participants. CONCLUSIONS: Clinicians may be increasingly called upon to provide advice on whether an alleged victim or perpetrator lacks decision-making capacity in cases of suspected elder abuse. They need to be aware of the new criminal offences to ensure that people with dementia, among others, are not abused and that abusers are brought to account.

<u>Keywords:</u> dementia: crime; elder abuse; mental capacity, England, Wales

Link to article

Mariam, L. C., McClure, R., Robinson, J. B., Yang, J. A. (2013). Eliciting Change in At-Risk Elders (ECARE): Evaluation of an Elder Abuse Intervention Program. *Journal of Elder Abuse and Neglect*. [Epub ahead of print].

<u>Abstract</u>: The current study evaluated the effectiveness of a community-based elder abuse intervention program that assists suspected victims of elder abuse and self-neglect through a partnership with local law enforcement. This program, Eliciting Change in At-Risk Elders (ECARE), involves building alliances with the vulnerable elder and key family members, directly connecting the elder to sustainable community resources that reduce risk

of further abuse, and utilizing motivational interviewing-type skills to help elders overcome ambivalence regarding accepting available abuse-related services and making changes that promote safety and well-being. Results showed that risk factors of elder abuse, including dependency and isolation, decreased over the course of the intervention, whereas working alliance between elder and outreach staff improved. Nearly three-quarters of participants showed change in the key focus of the intervention, as measured by advancement of at least one of Prochaska and DiClemente's (1983) stages of change (precontemplation, contemplation, preparation, action, and maintenance). Forty-three percent of elders moved into the stages of action and maintenance regarding their key focus of intervention. The usefulness of eliciting change in entrenched elder abuse situations through developing longer-term relationships with vulnerable elders and family members and utilizing nuanced measures of elder outcomes is discussed.

<u>Keywords</u>: elder abuse intervention, risk factors for abuse, self-neglect

Link to article

McDonald, L., Thomas, C. (2013). Elder abuse through a life course lens. *International Psychogeriatrics*, *25*(8), 1235-1243. doi: 10.1017/S104161021300015X

Abstract: BACKGROUND: This paper provides the findings from a large pilot study, Defining and Measuring Elder Abuse and Neglect, a precursor to a national prevalence study to be conducted in Canada beginning in September 2013. One purpose of this study and the focus of this paper was to determine whether a life course perspective would provide a useful framework for examining elder abuse. The two-year pilot study, 2009-2011, examined the prevalence of perceptions of abuse at each life stage by type of abuse, the importance of early life stage abuse in predicting types of elder abuse, and early life stage abuse as a risk factor for elder abuse. METHODS: Older adults who were aged >55 years (N = 267) completed a cross-sectional telephone survey, comprising measures of five types of elder abuse (neglect, physical, sexual, psychological, and financial) and their occurrence across the life course: childhood (\leq 17 years), young adulthood (18 to 24 years), and older adulthood (5 to 12 months prior to the interview date). Data analyses included descriptive statistics, bivariate correlations for abuse at the various life stages, and the estimation of logistic regression models that examined predictors of late life abuse, and multinomial logistic regression models predicting the frequency of abuse. RESULTS: Fifty-five percent of the sample reported abuse during childhood, and 34.1% reported abuse during young adulthood. Forty-three percent said they were abused during mature adulthood, and 24.4% said they were abused since age 55 but prior to the interview date of the study. Psychological (42.3%), physical (26.6%), and sexual abuses (32.2%) were the most common abuses in childhood while psychological abuse was the most common type of abuse at each life stage. When the risk factors for abuse were considered simultaneously including abuse during all three life stages, only a history of abuse during childhood retained its importance (OR = 1.81, p = 0.046, CI = 1.01-3.26). Abuse in childhood increased the risk of experiencing one type of abuse relative to no abuse, but was also unrelated to experiencing two or more types of abuse compared to no abuse.

CONCLUSIONS: Results suggest that a life course perspective provides a useful framework for understanding elder abuse and neglect. The findings indicate that a childhood history of abuse in this sample had a deciding influence on later mistreatment, over and above what happens later in life.

<u>Keywords:</u> elder abuse and neglect; life course theory; childhood abuse; young adult abuse; older adulthood; predictors of abuse

Link to article

Merriman-Nai, S., & Stein, K. (2014). World elder abuse awareness day: the concept, the reality, and the promise. *J Elder Abuse Negl*, 26(3), 345-349. doi:10.1080/08946566.2014.902669

<u>Abstract:</u> This commentary traces the origins and evolution of the World Elder Abuse Awareness Day (WEAAD) initiative and provides recommendations for increasing WEAAD's impact as a catalyst for a coordinated movement within the United States.

Keywords: commentary, public awareness, World Elder Abuse Awareness Day

Link to article

Milne, A., Cambridge, P., Beadle-Brown, J., Mansell, J., Whelton, B. (2013). The characteristics and management of elder abuse: evidence and lessons from a UK case study. *European Journal of Social Work*, *16*(4), 489-505. doi: 10.1080/13691457.2012.722983

Abstract: Despite older people representing a significant majority of victims of abuse in the UK and Europe, evidence about its characteristics and management is limited. This article reports on an analysis of adult protection referrals for older people over an eight year period in two English local authorities. It extends understanding of the characteristics of elder abuse and identifies lessons for its effective management. Findings suggest that older people are at particular risk of multiple and physical abuse. Those living alone are especially vulnerable to financial abuse and those living in a care home to multiple abuse. The most common sites of abuse were the person's own home or a care home. Just two fifths of abuse referrals were confirmed, with the vast majority involving multi-agency consultation and most resulting in ongoing monitoring. Findings also suggest that risk is a product of the intersection of dependency and setting and that information about user and carer need—especially the nature of disability—could enhance the quality of adult protection data and safeguarding responses. The study underscores the need for adult protection legislation and of committing professional resources to the prevention, identification, assessment and management of elder abuse across Europe.

<u>Keywords</u>: Elder Abuse, Older People, Adult Protection, Vulnerable Adult Safeguarding, Social Work, United Kingdom

Mukherjee, D. (2013). Financial exploitation of older adults in rural settings: a family perspective. *Journal of Elder Abuse Neglect*, 25(5), 425-37. doi: 10.1080/08946566.2012.751828

Abstract: Federal agencies responsible for funding protective services to older adults are increasingly concerned with the growing incidence of financial exploitation in rural areas. The Wall Street Journal recently has reported an increasing trend of unemployed adult children migrating from urban centers to smaller rural towns and countrysides to live with their parents since 2008. This current study explores the attitudes of family caregivers regarding management of financial matters for their elderly care recipients. The major findings of the study include that adult children often (1) overestimate their parents' ability to manage their finances; (2) prefer to manage their parents' finances informally, as opposed to using legal options like power of attorney; and (3) tend to think of their parents' assets as "almost theirs." The study concludes with recommendations on the critical need for information to help families make important decisions about helping elderly parents with their finances. This information would not only promote the use of safeguards against abuse, but could potentially provide caregivers with greater confidence and protection.

<u>Keywords</u>: elder abuse, financial exploitation, economic recession, family, older adults

Link to article

Mysyuk, Y., Westendorp, R. G., & Lindenberg, J. (2013). Added value of elder abuse definitions: a review. *Ageing Res Rev*, 12(1), 50-57. doi: http://dx.doi.org/10.1016/j.arr.2012.04.001

Abstract: Elder abuse has devastating consequences for older persons such as a poor quality of life, psychological distress, and loss of property and security. It is also associated with increased mortality and morbidity. Elder abuse is a problem that manifests itself in both rich and poor countries and at all levels of society. It is timely to discuss one of the basic problems that has hampered the study, detection and intervention of elder abuse as the variety of definitions that exist now produce a definitional chaos for researchers, practitioners, and policy makers. In this article we trace the elements of "how to define elder abuse" and situate them in their socio-historical context. We also analyze the purposes of these different definitions to assess their appropriateness in different settings concerned with elder abuse. Our analysis shows that elder abuse mirrors the societal arrangements which gave rise to them. It also highlights that it is a complex problem that is difficult to define. The central question is whether we need a common definition of elder abuse or different definitions that can be used in different settings. By evidence of our analysis we can see that there is a need for a sufficiently broad and flexible definition in order to cover different behaviors that can constitute abuse and the various settings in which it may occur. On the other hand, the definition needs to be specific and concrete to be useful in professional contexts. To take a further step forward for both research and practice of elder abuse, we propose to consistently adhere to the WHO definition that leads the enquirer towards a better understanding of the problem and helps to distinguish it from other phenomena; and to a simplified definition for professional practice that sets

boundaries to the phenomena and is appropriate for effective prevention and intervention measures.

Keywords: Elder abuse; Definition; Purpose

Link to article

Mysyuk, Y., Westendorp, R. G., & Lindenberg, J. (2013). Framing abuse: explaining the incidence, perpetuation, and intervention in elder abuse. *Int Psychogeriatr*, *25*(8), 1267-1274. doi: http://dx.doi.org/10.1017/S1041610212002281

Abstract: Background: The role of individual characteristics in incidences of elder abuse has long been highest on research and policy agendas. Now, it is timely to discuss factors that go beyond victim and perpetrator. Environmental factors also play an important role in elder abuse. In this paper, we address the framing of elder abuse as a social and health problem. Attention is paid to the factors that influence societal context and the healthcare system, its organization, structure, and principles. Methods: Focus groups and in-depth semi-structured interviews were held with different professionals and older people themselves. Qualitative analysis of focus groups and interviews transcripts was performed to analyze how different professional groups and older persons themselves view elder abuse, to determine opinions and attitudes toward elder abuse and the necessary actions that should be taken to prevent or intervene in the problem. Results: Two main explanatory frameworks emerged in the discourse of older persons and care professionals: social arrangements and healthcare system. The themes within the social arrangements included social taboo, social control and responsibility, and institutional cultures. The fragmentation of care and changes in the financing of healthcare were two aspects distinguished within the framework of the healthcare system. *Conclusion*: Two explanatory frameworks showed elder abuse as both a social and health problem. The environmental factors through social arrangements and healthcare system have an influence on framing of abuse. The different ways of framing abuse impact the understanding of abuse, ways of intervention, and prevention measures.

<u>Keywords:</u> elder abuse, qualitative research, framing, environmental factors, healthcare, neoliberalism

Link to article

Nakanishi, M., Nakashima, T., Sakata, N., Tsuchiya, N., Takizawa, K. (2013). Community-based system, reports, and substantiated cases of elder abuse: disparities between municipalities and relating factors in Japan. *Journal of Aging and Social Policy*, *25*(3), 234-247. doi: 10.1080/08959420.2013.793086

<u>Abstract</u>: This study examines (1) the staffing and financial characteristics of systems for elder abuse detection and intervention in the municipal governments of Japan and (2) the relationship among the development of detection and intervention systems, the reporting rates of suspected elder abuse cases, and substantiated abuse rates in 927 municipalities

across Japan. Progressive systems for the detection and intervention of elder abuse were significantly associated with a larger number of public officers than in non-progressive systems. Furthermore, greater rates of both suspected and substantiated cases of abuse were associated with progressive systems for elder abuse detection and intervention. Per capita annual expenditures on the comprehensive support project and the community general support center's catchment under the Long-Term Care Insurance (LTCI) program showed no significant association with the development of systems, the rate of suspected cases, or the number of substantiated cases. National social policy makers should examine strategies that would help municipalities assign sufficient staff to elder abuse detection and intervention programs.

Keywords: elder abuse, Japan, local government, long-term care insurance, social policy

Link to article

Nakanishi, M., Nakashima, T, Yamaoka, Y., Hada, K., Tanaka, H. (2014). Systems Development and Difficulties in Implementing Procedures for Elder Abuse Prevention Among Private Community General Support Centers in Japan. *Journal of Elder Abuse and Neglect*, 26(1), 31-43. doi: 10.1080/08946566.2013.784077

<u>Abstract</u>: The present study examines differences in systems development and difficulties in implementing procedures for elder abuse prevention in 1,119 private and 606 public community general support centers under the public long-term care insurance program in Japan. The private community general support centers showed more difficulty implementing procedures than the public community general support centers. Controlling for the type of municipality, progress in systems development did not differ between the private and public community general support centers. Further research should examine how the characteristics of municipal governments are related to systems development in community general support centers.

<u>Keywords:</u> community general support centers, elder abuse, Japan, local government, long-term care insurance

Link to article

Naughton, C., Drennan, J., Lafferty, A. (2014). Older people's perceptions of the term elder abuse and characteristics associated with a lower level of awareness. *Journal of Elder Abuse and Neglect*, 26(3), 300-318. doi: 10.1080/08946566.2013.867242

<u>Abstract</u>: A national representative survey of 2,021 community-dwelling older people was carried out in 2010 using face-to-face interviews. The study examined how the term "elder abuse" was understood by this population and identified factors associated with lower levels of awareness. Over 80% of this population recognized the term elder abuse, and 56% demonstrated specific insight related to typologies, locations, and perpetrators of abuse. Less specific responses were given by 22% of participants, and a further 21% could not

give a reply. Less specific or "don't know" responses were independently associated with age 80 years or older, a lower level of education, impaired physical health, and living in economically deprived communities. Despite ongoing public information campaigns, there remained a significant portion of older people who may be unaware of or have limited insight into elder abuse. This study suggests a need for more targeted education campaigns aimed at specific higher-risk groups.

Keywords: Ireland; awareness; elder abuse; public information campaigns; risk factors

Link to article

Naughton, C., Drennan, J., Lyons, I., Lafferty, A. (2013). The relationship between older people's awareness of the term elder abuse and actual experiences of elder abuse. *International Psychogeriatrics*, 25(8), 1257-1266. doi: 10.1017/S1041610213000513

Abstract: BACKGROUND: Awareness and experiences of elder abuse have been researched as separate entities; this study examined the relationship between awareness of elder abuse, disclosure of abuse, and reporting of abuse among people aged 65 years or older. METHODS: A national cross-sectional survey of a random sample of 2,012 community-dwelling older people was carried out in Ireland. People described their understanding of the term elder abuse followed by their experiences of mistreatment. Descriptive statistics and logistic regression were used with frequency, percentage, odds ratios (OR), and 95% confidence intervals (CI) presented. RESULTS: The prevalence of elder abuse, including stranger abuse, since 65 years of age was 5.9% (95% CI 4.6-7.3). Overall, 80% of the population demonstrated some understanding of the term elder abuse. Older people who experienced physical abuse (OR 5.39; 95% CI 2.31-12.5) and psychological abuse (OR 2.51; 95% CI 1.58-3.97) were significantly more likely than older people who had not experienced mistreatment to relate the term elder abuse to their personal experiences. There was no association between experiences of financial abuse or neglect and awareness of the term elder abuse. CONCLUSIONS: There was a relatively high level of awareness of the term elder abuse; however, a substantial proportion of people could not readily associate abusive behaviors within their personal lives with elder abuse. Public information campaigns need to move beyond simple awareness rising to enable people to bridge the gap between a theoretical understanding of elder abuse and recognizing inappropriate behavior in their own circumstances.

Keywords: elder abuse; awareness; elderly; older people

Link to article

Navarro, A. E., Gassoumis, Z. D., & Wilber, K. H. (2013). Holding abusers accountable: an elder abuse forensic center increases criminal prosecution of financial exploitation. *Gerontologist*, *53*(2), 303-312. doi: 10.1093/geront/gns075

<u>Abstract:</u> *Purpose*: Despite growing awareness of elder abuse, cases are rarely prosecuted. The aim of this study was to examine the effectiveness of an elder abuse forensic center

compared with usual care to increase prosecution of elder financial abuse. Design and Methods: Using one-to-one propensity score matching, cases referred to the Los Angeles County Elder Abuse Forensic Center (the Forensic Center) between April 2007 and December 2009 for financial exploitation of adults aged 65 and older (n = 237) were matched to a population of 33,650 cases that received usual care from Adult Protective Services (APS). Results: 1 Significantly, more Forensic Center cases were submitted to the District Attorney's office (DA) for review (22%, n = 51 vs. 3%, n = 7 usual care, p < .001). Among the cases submitted, charges were filed by the DA at similar rates, as was the proportion of resultant pleas and convictions. Using logistic regression, the strongest predictor of case review and ultimate filing and conviction was whether the case was presented at the Forensic Center, with 10 times greater odds of submission to the DA (Odds ratio = 11.00, confidence interval = 4.66–25.98). *Implications*: Previous studies have not demonstrated that elder abuse interventions impact outcomes; this study breaks new ground by showing that an elder abuse multidisciplinary team increases rates of prosecution for financial exploitation. The elder abuse forensic center model facilitates cooperation and group problem solving among key professionals, including APS, law enforcement, and the DA and provides additional resources such as neuropsychological testing, medical record review, and direct access to the Office of the Public Guardian.

<u>Keywords:</u> Elder abuse, Elder financial exploitation, Multidisciplinary team, Prosecution

Link to article

Nobrega Pinto, A., Rodrigues, F., Dinis-Oliveira, R. J., Magalhaes, T. (2014). Sexual offenses against elderly people: forensic evaluation and judicial outcome. *Journal of Elder Abuse and Neglect*, 26(2), 189-204. doi: 10.1080/08946566.2013.827951

Abstract: Forensic evaluation reports and judicial outcomes regarding older victims of suspected sexual offenses were retrospectively reviewed. During this period, a total of 14 cases were registered, corresponding to 0.3% of nonfatal crimes against elderly and 0.6% of the total of sexual crimes reported. All the victims were female. The majority lived alone and did not have limitations in communication, orientation, ambulation, or autonomy. The offenders were all male (17 to 81 years old); most were known to the victims and had history of previous disruptive behaviors. The majority of the sexual offenses occurred in the victims' homes, and the offenders tended to use physical violence. Forensic evaluation was crucial for the identification of physical and biological evidence, and forensic conclusions were positively correlated with the judicial outcome of each case. High prosecution and conviction rates were also observed.

<u>Keywords:</u> sexual offenses, elderly, forensic evaluation, judicial outcomes, Portugal

Norris, D., Fancey, P., Power, E., & Ross, P. (2013). The critical-ecological framework: advancing knowledge, practice, and policy on older adult abuse. *J Elder Abuse Negl*, 25(1), 40-55. doi:10.1080/08946566.2012.712852

<u>Abstract:</u> The abuse of older adults in our society is a recognized yet understudied issue compared to other forms of family violence. Within this article, research, theory, and practice in family violence and older adult abuse are compared; elements that can be transferred to the field are analyzed; and gaps are identified. An extensive literature review, two focus groups with local stakeholders, and interviews with six key informants recognized as national subject experts formed the basis of this analysis. The results informed the development of a critical-ecological model designed to address the gaps and advance the field.

Keywords: abuse, aging, critical, ecological, family violence, older adult, theory

Link to article

O-R

O'Brien, J.G., Riain, A.N., Collins, C., Long, V., O'Neill, D. (2014). Elder abuse and neglect: a survey of Irish general practitioners. *J Elder Abuse Negl.*;26(3):291-9. doi: 10.1080/08946566.2013.827955

<u>Abstract:</u> The objective of this study was to survey general practitioners (GPs) in Ireland regarding their experience with elder abuse. A random sample of 800 GPs were mailed a survey in March 2010, with a reminder in May 2010, yielding a 24% response rate. The majority, 64.5%, had encountered elder abuse, with 35.5% encountering a case in the previous year. Most were detected during a home visit. Psychological abuse and self-neglect were most common. Most GPs in Ireland have encountered cases of elder abuse, most were willing to get involved beyond medical treatment, and 76% cited a need for more education.

Keywords: Ireland; Irish general practitioners; elder abuse; neglect

Link to article

Olson, J. M., & Hoglund, B. A. (2014). Elder abuse: speak out for justice. *J Christ Nurs*, *31*(1), 14-21. doi: 10.1097/CNJ.000000000000028

<u>Abstract:</u> It is estimated that 1 in 10 older adults experience abuse, but only 1 in 5 to as little as 1 in 24 cases are reported. Elder abuse is expected to increase as the population ages. Nurses are in a prime position to identify, assess, manage, and prevent elder abuse. This

article explores elder abuse and its prevalence, potential causes, and risk factors, offering case studies, assessment tools, resources, and interventions.

<u>Keywords:</u> abuse prevention, elder abuse, elder mistreatment, gerontology, nursing

Link to article

Oveisi, S., Karimi, R., Mahram, M. (2014). Note From Iran: Self-Reported Elder Abuse in Qazvin, 2012. *Journal of Elder Abuse and Neglect*, 26(3), 337-340. doi: 10.1080/08946566.2014.883947

Abstract: This brief report provides a first look at self-reported instances of elder abuse by a sample of people 60 years and older living in Qazvin, Iran. Six hundred community-dwelling persons, drawn from the registry files of each health center in Qazin, completed questionnaires during April to October 2012. At least 80% of the participants reported experiencing some form of psychological abuse, financial abuse, and/or neglect at least once during a 2-month period. Physical and sexual abuse were rarely reported. Despite a strong Iranian cultural emphasis on respect for elders, the self-reporting of elder abuse, especially psychological abuse, is greater than our expectation. We recommend that health-related policies and programs begin to identify elder abuse and neglect as a first step in prevention.

<u>Keywords:</u> brief report, elder abuse, psychological, physical, financial, neglect, Iran

Link to article

Palmer, M., Brodell, R. T., & Mostow, E. N. (2013). Elder abuse: dermatologic clues and critical solutions. *J Am Acad Dermatol*, 68(2), e37-42. doi: http://dx.doi.org/10.1016/j.jaad.2011.03.016

<u>Abstract:</u> Elder abuse affects approximately 2% to 10% of older Americans. Unfortunately, it is often unrecognized and certainly underreported. Dermatologists have a unique role in the detection and reporting of elder abuse. An analysis of risk factors, clinical signs, reporting requirements, and prevention of elder abuse brings this issue into focus.

<u>Keywords:</u> abrasions; bruising; burns; decubitus ulcers; elder abuse; geriatrics; lacerations; traumatic alopecia

Link to article

Park, H. J. (2014). Living with 'Hwa-byung': the psycho-social impact of elder mistreatment on the health and well-being of older people. *Aging & Mental Health*, 18(1), 125-128. doi: 10.1080/13607863.2013.814103

<u>Abstract</u>: *OBJECTIVES*: Elder abuse and neglect is an increasing concern that adversely affects the health and well-being of older people in most societies. The purpose of this paper is to describe the psycho-social impact of elder mistreatment on the health and

well-being of older Korean people living in New Zealand. *METHOD*: Data were collected from in-depth interviews. The lived experiences of elder abuse and neglect were studied with 10 older people who were, or who had been, mistreated in their family context. To analyse the data collected, a combined analysis approach was employed using traditional code-based techniques and a concept-mapping method. *RESULTS*: The findings of the study show that the effects of elder mistreatment were complex and multidimensional. The older persons who were mistreated in family settings experienced a range of emotional, psychological distress and physical symptoms. Many of them identified 'Hwa-byung' (literally anger disease) as a health issue associated with suppressed emotions of anger, demoralisation, heat sensation and other somatised symptoms. *CONCLUSION*: Elder abuse and neglect is a traumatic life event that has considerable psycho-social impacts on older people experiencing the problem. It is important to recognise the power of multidimensional challenges caused by elder mistreatment in health and well-being.

Keywords: elder abuse and neglect, health, Korean

Link to article

Pelotti, S., D'Antone, E., Ventrucci, C., Mazzotti, M. C., Salsi, G., Dormi, A., Ingravallo, F. (2013). Recognition of elder abuse by Italian nurses and nursing students: evaluation by the Caregiving Scenario Questionnaire. *Aging Clinical and Experimental Research*, *25*(6), 685-690. doi: 10.1007/s40520-013-0087-9

Abstract: Elder abuse appears to be widely underestimated by health professionals. We aimed to evaluate the recognition of elder abuse among Italian nurses and nursing students related to their professional, personal experiences and socio-demographic characteristics. 193 nursing students and 76 nurses attending a post-graduate nursing management master's degree at the University of Bologna (Italy) completed the Caregiving Scenario Questionnaire measuring the ability to recognize elder abuse. Data on age, gender, previous professional and personal experiences as well as nursing school teaching were collected. Regarding abusive items, preventing elder's movements by putting a table over the elder's lap was identified by almost all participants, while locking someone at home was identified by half of them. Neglect was recognized by 25 % of nurses and 20 % of students, respectively. The majority of nurses and students correctly identified non-abusive strategies. Reporting being taught on elder abuse was inversely associated with a good performance in detecting neglect. Italian nurses' and nursing students' uncertainty in identifying abusive strategies, especially neglect, was consistent with results of previous studies in other countries. Standardized education in healthcare core curriculum, reference guidance and training are strongly needed to improve elder abuse recognition in Italy.

<u>Keywords</u>: Elder abuse, Recognition, Caregiving Scenario Questionnaire, Nursing, Education

Phelan, A. (2014). Elder abuse: a review of progress in Ireland. *Journal of Elder Abuse Neglect*, 26(2), 172-188. doi:10.1080/08946566.2013.784088

<u>Abstract:</u> Until recent years, Ireland has not formally responded to elder abuse. This article considers the recent developments in Ireland through an ecological framework, which focuses on the multidimensional progress of Irish policy, practice, and legislation related to protecting older people. Although significant progress has been made, the discussion highlights areas for continued development and improvement.

<u>Keywords:</u> Ireland, policy, elder abuse, legislation, ecological approaches, media scandals

Link to article

Phillips, L. R., Guo, G., & Kim, H. (2013). Elder mistreatment in U.S. residential care facilities: the scope of the problem. *J Elder Abuse Negl*, 25(1), 19-39. doi:10.1080/08946566.2012.712851

Abstract: Many in the United States believe elder mistreatment in long-term care is serious and widespread, but until recently few studies focused on the problem. This study was designed to describe the scope of mistreatment in assisted living facilities (ALFs) in Arizona during a 3-year period. Findings showed that receiving citations for elder mistreatment was relatively rare. However, analysis of narrative reports from only 7% of facilities showed 598 allegations of mistreatment in complaint investigations, of which 372 (62.2%) were substantiated and given citations for something other than mistreatment. Results show that elder mistreatment in ALFs is seriously underidentified, even by state inspectors.

Keywords: assisted living, elder abuse, elder neglect, long-term care

Link to article

Ploeg, J., Lohfeld, L., Walsh, C. A. (2013). What is "elder abuse"? Voices from the margin: the views of underrepresented Canadian older adults. *Journal of Elder Abuse and Neglect*, 25(5), 396-424. doi: 10.1080/08946566.2013.780956

Abstract: We know relatively little about the definitions and perceptions of elder abuse held by marginalized groups of older adults in Canada. The current study used focus group methodology to explore perceptions of elder abuse among marginalized groups such as Aboriginal persons, immigrants, refugees, and lesbians. We found both similarities and differences in perceptions of elder abuse across groups. Groups identified traditional forms of elder abuse (i.e., physical, sexual, psychological/emotional, financial abuse, and neglect) as well as less frequently identified types of abuse such as disrespect and government or systemic abuse. Groups also discussed issues related to immigrant sponsorship arrangements and abuse in nursing homes.

Keywords: elder abuse, definitions, focus groups, older adults, Canada

Link to article

Policastro, C., Payne, B. K. (2014). Assessing the Level of Elder Abuse Knowledge Preprofessionals Possess: Implications for the Further Development of University Curriculum. *Journal of Elder Abuse & Neglect, 26*(1), 12-30. doi: 10.1080/08946566.2013.784070

Abstract: Elder abuse is a multifaceted problemthat requires interdisciplinary prevention and intervention strategies. An important question that arises is whether professionals are adequately prepared to address elder abuse in this collaborative network. Unfortunately, no studies have been conducted to assess the varying levels of knowledge that preprofessionals enrolled in university courses possess with regard to elder abuse. To fill this void, this study assesses the levels of elder abuse awareness among social work, nursing, health professions, and criminal justice students. Specific attention is given to determining whether there are differences in the amount of exposure to elder abuse literature across the disciplines. The study involves the analysis of survey data collected from 202 students enrolled in health and human sciences classes at a large university. Results show that none of the preprofessional groups, on average, reported knowing enough about elder abuse. Implications for future practice and research are provided.

<u>Keywords:</u> elder abuse, interdisciplinary education, curriculum, training

Link to article

Radcliff, T. A., White, A., West, D. R., Hurd, D., Côté, M. J. Evaluation of a seven state criminal history screening pilot program for long-term care workers. *Journal of Elder Abuse and Neglect*, 25(5), 375-395. doi: 10.1080/08946566.2013.780955

<u>Abstract</u>: This article summarizes results from an evaluation of a federally sponsored criminal history screening (CHS) pilot program to improve screening for workers in long-term care settings. The evaluation addressed eight key issues specified through enabling legislation, including efficiency, costs, and outcomes of screening procedures. Of the 204,339 completed screenings, 3.7% were disqualified due to criminal history, and 18.8% were withdrawn prior to completion for reasons that may include relevant criminal history. Lessons learned from the pilot program experiences may inform a new national background check demonstration program.

<u>Keywords</u>: elder abuse, mixed methods, program evaluation, long-term care, health policy, criminal history processing

Raja, S., Hoersch, M., Rajagopalan, C. F., & Chang, P. (2014). Treating patients with traumatic life experiences: providing trauma-informed care. *J Am Dent Assoc*, 145(3), 238-245. doi: 10.14219/jada.2013.30

Abstract: Background and Overview: Dentists frequently treat patients who have a history of traumatic events. These traumatic events (including childhood sexual abuse, domestic violence, elder abuse and combat history) may influence how patients experience oral health care and may interfere with patients' engagement in preventive care. The purpose of this article is to provide a framework for how dentists can interact sensitively with patients who have survived traumatic events. *Conclusions*: The authors propose the trauma-informed care pyramid to help engage traumatized patients in oral health care. Evidence indicates that all of the following play an important role in treating traumatized patients: demonstrating strong behavioral and communication skills, understanding the health effects of trauma, engaging in interprofessional collaboration, understanding the provider's own trauma-related experiences and understanding when trauma screening should be used in oral health practice. *Practical Implications*: Dental patients with a history of traumatic experiences are more likely to engage in negative health habits and to display fear of routine dental care. Although not all patients disclose a trauma history to their dentists, some patients might. The trauma-informed care pyramid provides a framework to guide dental care providers in interactions with many types of traumatized patients, including those who choose not to disclose their trauma history in the context of oral health care.

<u>Keywords:</u> Trauma-informed care, mandated reporting, patient-dentist interaction, posttraumatic stress disorder, communication skills, behavioral science

Link to article

Roberto, K. A., McPherson, M. C., Brossoie, N. (2013). Intimate partner violence in late life: a review of the empirical literature. *Violence Against Women, 19*(12), 1538-1558. doi: 10.1177/1077801213517564

<u>Abstract</u>: This integrated review of the empirical literature synthesizes a decade of scientific research across scholarly and professional publications addressing intimate partner violence (IPV) in late life. Deriving insights through a qualitative coding scheme and detailed analysis of 57 empirical sources, we discuss the theoretical frameworks, conceptual themes, and methodological approaches that cut across the literature. Based on these findings, we identify future research directions for improved understanding of late-life IPV as well as implications for policy development and refined community interventions.

Keywords: domestic violence; elder abuse; older women; spousal abuse

Rudnick, J. D., Teaster, P. B. (2013). Elder Abuse and Neglect: A Survey of Clergy Awareness, Knowledge, and Intervention Preferences. *Journal of Elder Abuse and Neglect*, *25*(4), 323-338. doi: 10.1080/08946566.2013.770311

Abstract: This article explores the research question: What is the perceived level of elder abuse and neglect awareness and knowledge among Protestant clergy members in Kentucky? Of the 300 clergy contacted, 160 participated, for a response rate of 53.3%. Pearson Chi-Square analyses were used to determine statistical significance, and phi coefficient correlations examined the strength of the associations between variables. Findings indicate that approximately 44% of clergy members in this study report some "awareness" of elder abuse and neglect. However, 56% of clergy respondents do not know that Kentucky is an "any person" mandatory reporting state. Specifically, participating clergy appear poorly informed about legal requirements for reporting elder abuse and neglect and perceive types of abuse differently. Untrained clergy with little formal training indicate a willingness to provide therapy to victims despite reporting that they do not feel qualified to do so.

<u>Keywords</u>: elder abuse and neglect, clergy, awareness, intervention preferences

Link to article

S-V

Sandmoe, A., & Kirkevold, M. (2013). Identifying and handling abused older clients in community care: the perspectives of nurse managers. *Int J Older People Nurs*, 8(2), 83-92. doi: 10.1111/j.1748-3743.2011.00279.x

Abstract: Background: Abuse of older people can lead to an increased need for health care services, and early identification of and intervention with abused, older clients should be a priority. *Objectives*: To gain knowledge about how nurse managers and their staff identify and handle abused older clients. *Design*: Qualitative study. *Methods*: Fifty-two participants were interviewed, the text transcribed and analysed using manifest qualitative content analysis. Findings and discussion: The identification and handling of older victims depended on individual nurses and the involvement of the participants and are based on clinical experience and less on knowledge through professional training and education. The participants emphasised the need for an individualised approach to older victims suspected of abuse. The important role of the nurse managers in the handling of abuse is discussed as well as the need for support of the nurse managers and the staff in community care by increased interdisciplinary collaboration to handle complex cases. *Conclusion*: The identification and handling of abused older clients are a challenging issue for community care, and more knowledge and support are needed. Implications for practice: The concept of elder abuse must be clarified, and strategies for its identification and intervention must be developed.

Keywords: abuse; community care; handle; identify; nurse manager; older client

Link to article

Schafer, M. H., Koltai, J. (2014). Does Embeddedness Protect? Personal Network Density and Vulnerability to Mistreatment Among Older American Adults. *The Journals of Gerontology*. *Series B, Psychological sciences and Social sciences* [Epub ahead of print]. doi: 10.1093/geronb/gbu071

<u>Abstract</u>: *Objectives*. This study considers the association between personal network density and risk of elder mistreatment among American adults. *Method*. Using egocentric network data from the National Social Life, Health, and Aging Project, we employ logistic and negative binomial regression to predict recent experience of elder mistreatment. We further unpack the density mistreatment association by linking perpetrators to the victim's network and by assessing their position within its structure. *Results*. As hypothesized, older adults with dense networks had a lower risk of elder mistreatment. Interestingly, the perpetrators of these harmful acts were often found within seniors' close networks—though there was little evidence to suggest that perpetrators themselves were poorly embedded in the network. *Discussion*. Results highlight how network-level phenomena can operate distinctively from dyadic mistreatment processes. Dense personal networks seem to provide structural protection against elder mistreatment, even as many offensive acts are committed by those that are close to the victim and relatively well embedded in their network.

Keywords: Abuse, Elder mistreatment, Interpersonal relationships, Social networks

Link to article

Shankardass, M. K. Addressing elder abuse: review of societal responses in India and selected Asian countries. *International Psychogeriatrics*, *25*(8), 1229-1234. doi: 10.1017/S104161021300063X

Abstract: In India, during the last two decades, significant developments in societal responses to address elder abuse have emerged. There is greater emphasis on recognizing that older people may be subjected to abuse and neglect by family members and the community as well. Although there is growing interest in the collection of valid statistics on the incidence and prevalence of elder abuse, there is still a need for bringing better clarity on the conceptual understanding and refining definitions of elder abuse. The government, academic community, and the civil society are working toward understanding the underlying causes of elder abuse and neglect and are focusing on appropriate interventions to address it. This paper notes the developments in recognizing elder abuse and reviews the responses in addressing the issue from a legal, social, and public health perspective in India compared with some of the Asian countries, namely China, Hong Kong, Philippines, Singapore, and Thailand. While the paper highlights the Indian experience, it is also put in an Asian context where emerging demographics are raising many concerns related to the aging of the population, and the new dynamics of relationships at the family, community, and societal levels demand fresh approaches and

thoughts toward improving the quality of life of older people and reducing their vulnerability toward the risk of abuse and neglect.

<u>Keywords</u>: elder abuse; societal response; interventions; Indian context; Asian context; new developments

Link to article

Sharma Bhattarai, L.P. (2014). Neglect and abuse of older people in Nepal: a commentary on a baseline study on reported cases of elder abuse in Nepali press. *J Elder Abuse Negl*, 26(3), 333-336. doi: 10.1080/08946566.2013.830040

<u>Abstract:</u> Little is known about elder abuse in Nepal. To gain further insights, the National Human Rights Commission in association with the Geriatric Center in Nepal published a report that analyzes all cases of older people's abuse published in two daily newspapers in Nepal over a 2-year period. This commentary discusses the main findings of the report, as well as future directions.

Keywords: Nepal; commentary; elder abuse and neglect; older people

Link to article

Shibusawa, T., Iwano, S., Kaizu, K., Kawamuro, Y. (2014). Self-Reported Abuse and Mistreatment among Japanese Elders Receiving Respite Care. *Journal of Aggression, Maltreatment & Trauma, 23*(1), 67-80. doi: http://dx.doi.org/10.1080/10926771.2014.864742

Abstract: This study examines physical and psychological mistreatment reported by Japanese elders who received care from family members. Data is based on structured face-to-face interviews with community-dwelling elders who utilized respite care services. Among the 118 elderly respondents, 12% reported being hit or almost being hit by their caregivers. Close to 54% reported at least one type of psychological mistreatment. Men who received care from their spouses were most likely to report abuse. Elders who were victimized reported increased levels of depressive symptoms. Logistic regression analyses indicated associations between physical abuse and past conflicts with the caregiver. Psychological mistreatment was associated with receiving care from a spouse, past conflicts with the primary caregiver, and depression. The findings suggest the need for increased awareness of the needs of community-dwelling Japanese elders who are at risk for abuse, mistreatment, and depression.

Keywords: elder mistreatment, Japanese elders, respite care, rural elders

Sommerfeld, D. H., Henderson, L. B., Snider, M. A., Aarons, G. A. (2014). Multidimensional Measurement Within Adult Protective Services: Design and Initial Testing of the Tool for Risk, Interventions, and Outcomes (TRIO). *Journal of Elder Abuse and Neglect*. [Epub ahead of print].

Abstract: This study describes the development, field utility, reliability, and validity of the multidimensional Tool for Risk, Interventions, and Outcomes (TRIO) for use in Adult Protective Services (APS). The TRIO is designed to facilitate consistent APS practice and collect data related to multiple dimensions of typical interactions with APS clients including the investigation and assessment of risks, the provision of APS interventions, and associated health and safety outcomes. Initial tests of the TRIO indicated high field utility, social worker "relevance and buy-in", and inter-rater reliability. TRIO concurrent validity was demonstrated via appropriate patterns of TRIO item differentiation based on the type of observed confirmed abuse or neglect and predictive validity was demonstrated by prediction of the risk of actual APS recurrence. The TRIO is a promising new tool that can help meet the challenges of providing and documenting effective APS practices and identifying those at high risk for future APS recurrence.

<u>Keywords:</u> APS recurrence, Adult Protective Services (APS), elder abuse & neglect, measure development, reliability, risk assessment, validity

Link to article

Sooryanarayana, R., Choo, W. Y., Hairi, N. N. (2013). A review on the prevalence and measurement of elder abuse in the community. *Trauma Violence & Abuse, 14*(4), 316-325. doi: 10.1177/1524838013495963

Abstract: OBJECTIVES: Aging is a rising phenomenon globally and elder abuse is becoming increasingly recognized as a health and social problem. This review aimed to identify the prevalence of elder abuse in community settings, and discuss issues regarding measurement tools and strategies to measure elderly abuse by systematically reviewing all community-based studies conducted worldwide. METHOD: Articles on elder abuse from 1990 to 2011 were reviewed. A total of 1,832 articles referring to elders residing at home either in their own or at relatives' houses were searched via CINAHL and MEDLINE electronic databases, in addition to a hand search of the latest articles in geriatric textbooks and screening references, choosing a total of 26 articles for review. RESULTS: Highest prevalence was reported in developed countries, with Spain having 44.6% overall prevalence of suspicion of abuse and developing countries exhibiting lower estimates, from 13.5% to 28.8%. Physical abuse was among the least encountered, with psychological abuse and financial exploitation being the most common types of maltreatment reported. To date, there is no single gold standard test to ascertain abuse, with numerous tools and different methods employed in various studies, coupled with varying definitions of thresholds for age. CONCLUSION: Current evidences show that elder abuse is a common problem in both developed and developing countries. It is important that social, health care, and legal systems take these findings into consideration in screening for abuse or reforming existing services to protect the health and welfare of the elderly.

<u>Keywords</u>: abuse; aged; diagnosis; elder; elderly; maltreatment; mistreatment; prevention and control

Link to article

Speak, P. M., Kennedy, B. L., Henry, N. D., Ernst, E. J. (2013). Analysis of Possible Sexual Assault of Abuse in a 67-Year-Old Female With Early Dementia Post-Brain Attack. *Advanced Emergency Nursing Journal*, *35*(3), 217-239. doi: 10.1097/TME.0b013e31827ef655

Abstract: The case analysis explores an emergency department visit by a 67-year-old female with early dementia post–brain attack, with complaints of possible sexual assault or abuse. This patient resides in a long-term skilled nursing facility. The case outlines the forensic care provided by the Advanced Practice Forensic Nurse (APFN) once medically cleared by the emergency department Advanced Practice Nurse (APN). The case discussion includes issues related to sexuality in aging populations, consent, sexual abuse or assault in institutions, and forensic care of older persons. Expected genital injuries in older women that result from sexual assault and abuse are also explored. The case discussion will analyze the key elements for critical thinking and clinical reasoning and demonstrate standards of care for the APFN and APN practice.

<u>Keywords</u>: advanced practice forensic nurse, elder abuse, nursing home, sexual abuse, sexual assault

Link to article

Stankunas, M., Soares, J. F., Viitasara, E., Melchiorre, M. G., Sundin, O., Torres-Gonzales, F., Stankuniene, A., Avery, M., Ioannidi-Kapolou, E., Barros, H., Lindert, J. (2013). Factors associated with refraining from buying prescribed medications among older persons. *Australian Journal on Ageing*. [Epud ahead of print]. doi: 10.1111/ajag.12075

<u>Abstract</u>: *AIM*: To evaluate the associations between refraining from buying prescribed medications and selected factors among older persons. *METHODS*: A total of 4467 people aged 60-84 years from seven European countries answered a questionnaire (response rate 45.2%). Refraining from buying prescribed medications was measured with the question: 'Have you ever refrained from buying prescribed medication and care?' *RESULTS*: About 11.9% of older people refrained from buying prescribed medications. The multiple regression analysis showed that ages 60-64 (odds ratio (OR) = 2.08; 95% confidence interval (95%CI): 1.38-3.13) and 65-69 (OR = 1.73; 95%CI: 1.16-2.57) years, experience of financial strain (OR = 1.59; 95%CI: 1.27-2.01), as well as exposure to abuse (OR = 1.64; 95%CI: 1.31-2.06) when taking into account country of participant were independently associated with refraining from buying medications, while an opposite association was observed for being male (OR = 0.72; 95%CI: 0.58-0.91). *CONCLUSIONS*: The study has revealed that refraining from buying prescription medications is a problem among older people and it has identified a number of factors associated with this.

Keywords: aged; aged 60 and over; elder abuse; medication adherence

Link to article

Strasser, S. M., Smith, M., Weaver, S., Zheng, S., Cao, Y. (2013). Screening for Elder Mistreatment among Older Adults Seeking Legal Assistance Services. *The Western Journal of Emergency Medicine*, 14(4), 309-315. doi: 10.5811/westjem.2013.2.15640

Abstract: *Introduction*: The aging population is a rapidly growing demographic in the United States. Isolation, limited autonomy, and declining physical and mental health render many older adults vulnerable to elder mistreatment (EM). The purpose of this study was to assess the prevalence and correlates of EM among a sample of older adults using legal assistance services in Atlanta, Georgia. Methods: Researchers administered surveys to consenting older adults (aged 60+) in 5 metro Atlanta community centers that hosted legal assistance information sessions as part of the Elderly Legal Assistance Program. The surveys screened for risk factors and prevalence of EM risk using valid and reliable measures and included additional questions regarding demographics characteristics and healthcare use behaviors. *Results*: Surveys were completed by 112 participants. Findings reveal that 32 (28.6%) respondents met the criteria for elder abuse / neglect risk; 17 (15.2%) respondents met criteria for depression; and 105 (93.7%) had visited a healthcare provider during the past 6 months. *Conclusion*: The rates of EM risk in this sample were higher than those previously reported in research. Findings support continued examination of unique risks that may be present among older adults who may be possibly facing legal issues. Additionally, the reported frequency of healthcare visits among participants reveals a promising opportunity to examine development of a more widespread EM screening approach to be conducted in non-emergency settings. Interdisciplinary collaboration is required to inform screening approaches that account for complexities that EM cases present.

<u>Keywords</u>: vulnerable older adults, screening, Legal Assistance services, prevalence, Georgia

Link to article

Tareque, M. I., Ahmed, M. M., Tiedt, A. D., Hoque, N. (2014). Can an active aging index (AAI) provide insight into reducing elder abuse? A case study in Rajshahi District, Bangladesh. *Archives of Gerontology and Geriatrics*, 58(3):399-407. doi: 10.1016/j.archger.2013.11.003

Abstract: We use data from respondents aged 60 years and above, collected during April 2009 in the Rajshahi district of Bangladesh, to examine whether high activeness, as captured by an AAI or in sub-domains, can help reduce the risk of elder abuse. The findings suggest that more than half of rural elderly and 14 percent of urban elderly were at some point abused. High activeness in health and security dimensions lowers the risk of being abused while those who are low active in community participation have the lowest risk of being abused in both rural and urban areas. Being literate (elderly with

primary/secondary education) is revealed to be a significant factor that lowers the risk of abuse in both rural and urban areas. These results imply a need for educational programs that bolster positive and proper community interaction, in turn promoting a secure later life for elders, and reducing burden for families and society. High activeness in health and security dimensions should also be promoted to keep the elderly healthy and protect from abusive behavior.

Keywords: Active aging index; Bangladesh; Elder abuse

Link to article

Taylor, B.J., Killick, C., O'Brien, M., Begley, E., Carter-Anand, J. (2014). Older People's Conceptualization of Elder Abuse and Neglect. *J Elder Abuse Negl*, 26(3), 223-43. doi: 10.1080/08946566.2013.795881

Abstract: This qualitative study used data from eight focus groups involving 58 people aged over 65 years in both urban and rural settings across Northern Ireland and the Republic of Ireland. Following training, four older people assisted in facilitation and analysis as peer researchers. Increasing lack of respect within society was experienced as abusive. The vulnerability of older people to abuse was perceived as relating to the need for help and support, where standing up for themselves might have repercussions for the person's health or safety. Emotional abusiveness was viewed as underpinning all forms of abuse, and as influencing its experienced severity. Respondents' views as to whether an action was abusive required an understanding of intent: some actions that professionals might view as abusive were regarded as acceptable if they were in the older person's best interests. Preventing abuse requires a wide-ranging approach including rebuilding respect for older people within society. Procedures to prevent elder abuse need to take into account the emotional impact of family relationships and intent, not just a description of behaviors that have occurred.

<u>Keywords:</u> adult protection; adult safeguarding; ageism; cultural responsiveness; elder abuse; emotional abuse, Ireland; peer researchers; psychological abuse; qualitative research; social work; vulnerable adult

Link to article

Teresi, J. A., Ramirez, M., Ellis, J., Silver, S., Boratgis, G., Kong, J., et al. (2013). A staff intervention targeting resident-to-resident elder mistreatment (R-REM) in long-term care increased staff knowledge, recognition and reporting: results from a cluster randomized trial. *Int J Nurs Stud*, *50*(5), 644-656. doi: http://dx.doi.org/10.1016/j.ijnurstu.2012.10.010

<u>Abstract:</u> *Background*: Elder abuse in long-term care has received considerable attention; however, resident-to-resident elder mistreatment (R-REM) has not been well researched. Preliminary findings from studies of R-REM suggest that it is sufficiently widespread to merit concern, and is likely to have serious detrimental outcomes for residents. However, no evidence-based training, intervention and implementation strategies exist that address

this issue. *Objective*: The objective was to evaluate the impact of a newly developed R-REM training intervention for nursing staff on knowledge, recognition and reporting of R-REM. *Design*: The design was a prospective cluster randomized trial with randomization at the unit level. *Methods*: A sample of 1405 residents (685 in the control and 720 in the intervention group) from 47 New York City nursing home units (23 experimental and 24 control) in 5 nursing homes was assessed. Data were collected at three waves: baseline, 6 and 12 months. Staff on the experimental units received the training and implementation protocols, while those on the comparison units did not. Evaluation of outcomes was conducted on an intent-to-treat basis using mixed (random and fixed effects) models for continuous knowledge variables and Poisson regressions for longitudinal count data measuring recognition and reporting.

<u>Keywords:</u> Resident-to-resident elder mistreatment (R-REM); Nursing homes; Long-term care; Older people; Elder abuse; Staff education; Staff training

Link to article

W-Z

Weinmeyer, R. (2014). Statutes to combat elder abuse in nursing homes. *Virtual Mentor*, 16(5), 359-364. doi: 10.1001/virtualmentor.2014.16.05.hlaw1-1405

<u>Abstract:</u> This article discusses the legal efforts made by the federal government to address the persistent problem of elder abuse in nursing facilities. Since the 1980s, two major legislative acts have sought to identify and correct abusive transgressions that have injured and even killed adults in the twilight years of their lives. Starting with the Nursing Home Reform Act in 1987, and followed by the Elder Justice Act of 2010, Congress has sought to close gaps in surveillance and corrective enforcement that have resulted in instances of elder abuse falling off the radar of law enforcement and regulators.

Keywords: nursing homes, legal statutes, Nursing Home Reform Act, Elder Justice Act

Link to article

Widmeier, K. (2013). Respect your elders. Special considerations for EMS response to geriatric patients. *Journal of Emergency Medical Services*, *38*(8), 36-41. Review. PMID: 24319883

Abstract: A variety of chronic pathologies often come along with the aging process and are experienced by many patients in late adulthood. EMS providers must be aware of the various challenges of transporting the geriatric population. And although an emphasis is often placed on the physical and medical issues associated with this population, it's also imperative to look at the whole picture to help prevent issues before they become an emegent problem. This includes being vigilant for elder abuse and neglect, as well as potential home hazards-including fall potentials and maintaining colder home

temperatures-and dangerous cost-cutting measures, such as sharing medications. Prevention is key to helping older patients avoid potentially devastating situations, such as falls, medication errors and urban hyperthermia. But when those situations happen and providers are called to care for an older patient, compassion and demeanor are necessary to make this more vulnerable patient population comfortable and safe.

<u>Keywords</u>: Emergency Medical Services, EMS, home accident prevention, geriatric patients, abuse vigilance

Link to article

Wood, S., Rakela, B., Liu, P. J., Navarro, A. E., Bernatz, S., Wilber, K. H., Allen, R., Schneider, D. (2014). Neuropsychological Profiles of Victims of Financial Elder Exploitation at the Los Angeles County Elder Abuse Forensic Center (LACEAFC). *Journal of Elder Abuse and Neglect*. [Epub ahead of print].

Abstract: Financial elder exploitation (FE) is an increasing problem for vulnerable elders and for the social service and criminal justice system designed to protect them. The current paper examines neuropsychological correlates in a sample of older adults who have been documented victims of financial elder exploitation. The purpose of this exploratory study was twofold. First, we compared a subsample of the referrals at the Los Angeles County Elder Abuse Forensic Center (LACEAFC) to community dwelling adults in terms of the specific cognitive domains linked to financial capacity including memory, calculation, and executive functioning. Next, we examined the correlation between presence of neuropsychological data and the likelihood of filing a case with the LA County's District Attorney (DA) office. Twenty-seven LACEAFC cases were reviewed that met study criteria including substantiated cases of elder financial exploitation and presence of neuropsychological test data. Thirty-two community dwelling older adults were also assessed using the same measures. Overall, the forensic center group (FC) performed worse than a community-based age-matched control group on the MMSE, calculation, and executive functioning (ps < .01). The presence of neuropsychological data was significantly correlated to an increased likelihood of a case being filed.

Keywords: financial abuse, forensic centers, neuropsychology

Link to article

Wu, L. T., Blazer, D. G. (2014). Substance use disorders and psychiatric comorbidity in mid and later life: a review. *International Journal of Epidemiology, 43*(2), 304-317. doi: 10.1093/ije/dyt173

<u>Abstract</u>: *BACKGROUND*: Globally, adults aged 65 years or older will increase from 516 million in 2009 to an estimated 1.53 billion in 2050. Due to substance use at earlier ages that may continue into later life, and ageing-related changes in medical conditions, older substance users are at risk for substance-related consequences. *METHODS*: MEDLINE

and PsychInfo databases were searched using keywords: alcohol use disorder, drug use disorder, drug misuse, substance use disorder, prescription drug abuse, and substance abuse. Using the related-articles link, additional articles were screened for inclusion. This review focused on original studies published between 2005 and 2013 to reflect recent trends in substance use disorders. Studies on psychiatric comorbidity were also reviewed to inform treatment needs for older adults with a substance use disorder. RESULTS: Among community non-institutionalized adults aged 50+ years, about 60% used alcohol, 3% used illicit drugs and 1-2% used nonmedical prescription drugs in the past year. Among adults aged 50+, about 5% of men and 1.4% of women had a past-year alcohol use disorder. Among alcohol users, about one in 14 users aged 50-64 had a past-year alcohol use disorder vs one in 30 elder users aged 65+. Among drug users aged 50+, approximately 10-12% had a drug use disorder. Similar to depressive and anxiety disorders, substance use disorders were among the common psychiatric disorders among older adults. Older drug users in methadone maintenance treatment exhibited multiple psychiatric or medical conditions. There have been increases in treatment admissions for illicit and prescription drug problems in the United States. CONCLUSIONS: Substance use in late life requires surveillance and research, including tracking substance use in the racial/ethnic populations and developing effective care models to address comorbid medical and mental health problems.

Keywords: Epidemiology; comorbidity; older adults; substance use disorders

Link to article

Yan, E. (2014). Abuse of older persons with dementia by family caregivers: results of a 6-month prospective study in Hong Kong. *Int J Geriatr Psychiatry*. doi: 10.1002/gps.4092

Abstract: Objective: To examine the association between care recipients' agitated behaviors, family caregivers' burnout, and abuse in community dwelling older Chinese with dementia in Hong Kong. *Design*: This was a 6-month prospective study. *Method*: One hundred forty-nine caregivers provided information on their demographic characteristics, care recipients' everyday functioning and agitated behaviors, and caregivers' burnout symptoms. Caregivers were re-interviewed 6 months later and provided information on changes in both care recipients' everyday functioning and agitated behaviors, and verbally and physically abusive behaviors directed at care recipients in the past month. Results: The single most significant variable in predicting abuse at 6-month follow-up was abuse at baseline. In addition, verbal abuse was predicted by more co-residing days, a high level of agitated behavior, and a strong sense of caregiver depersonalization. Care recipients were more likely to be physically abused if they were male, had no chronic conditions other than dementia, and demonstrated a high level of agitated behaviors. Entering caregiver burnout into the model did not modify the association between care recipients' agitated behavior and abuse for either verbal or physical abuse. Conclusion: This study is the first to establish an association between care recipients' agitated behaviors, burnout, and abuse by family caregivers using prospective data. The present results confirmed that care recipients' agitated behaviors and caregivers' symptoms of burnout are associated with family caregivers' abusive behaviors. Caregiver burnout did not mediate the association between agitated behaviors and abuse. Proper

management of care recipients' agitated behaviors and adequate support provided to family caregivers may help prevent the development of new cases of elder mistreatment.

Keywords: dementia; elder abuse; family caregiving; burnout, Hong Kong

Link to article

Yon, Y., Wister, A. V., Mitchell, B., Gutman, G. (2014). A national comparison of spousal abuse in mid- and old age. *Journal of Elder Abuse and Neglect*, 26(1), 80-105. doi: 10.1080/08946566.2013.784085

Abstract: This exploratory study addresses whether there are similar or different risks and protective factors associated with spousal abuse among mid-age adults (persons aged 45-59) and old-age adults (persons aged 60 and over). The risk and protective factors of abuse are compared across these two age groups and situated within a life course framework. Cross-sectional data from the 1999 and 2004 General Social Surveys are merged to address the research questions. Overall, it was found that there are as many differences as there are similarities in risk/protective factors connected to individual, relationship, and community environments. The findings are discussed in terms of program development and future research.

Keywords: spousal abuse, age comparisons, life course framework

Link to article

Zafar, S. N., Cornwell, E. E., Greene, W. R. (2014). Geriatric Trauma and Injury Prevention. In J. A. Yelon & F. A. Luchette (Eds.), *Geriatric Trauma and Critical Care, Part III* (221-224). New York: Springer. doi: 10.1007/978-1-4614-8501-8 21

<u>Abstract:</u> In the United States, trauma is the leading cause of death for children and adults less than 45 years of age. However, trauma does not only affect the young. Elderly or "geriatric" trauma, defined as injuries to individuals aged 65 years or above, accounts for a significant number of traumatic incidents, deaths, and expenditure of dollars resulting in an immense burden on the health-care system. Trauma in the elderly differs from trauma in younger adults in its incidence, presentation, management, and outcome. In this chapter we discuss the unique challenges and successes of injury prevention in the geriatric trauma patient.

Keywords: geriatric trauma, injury prevention, elderly patients

Link to article

Ziminski, C. E. (2014). *Mother-Adult Daughter Relationships In the Context of Chronic Conflict* (Doctoral dissertation). Retrieved from CINAHL Plus. (2012573082)

Abstract: One out of ten older adults is a victim of elder abuse. Perpetrators of elder abuse include anyone who is in a position of trust with an elder, though adult children are the most frequent perpetrators of abuse. The role of gender in relationships has been largely ignored in elder abuse, despite the research on aggression in interpersonal relationships demonstrating gender differences. While research has shown how adult daughters successfully transition to caregivers and maintain relationships with their aging mothers, there is little understanding of how these relationships transition to violence and victimization. Mother-daughter relationships are lifelong intimate relationships, making their unique dynamics integral in understanding the context which creates aggression. Therefore the purpose of this study was to generate theory to explain the experience of aggression between adult daughters and their aging mothers, from the perspective of the daughters, describing the factors that influence the development of elder abuse. Grounded theory methodology, informed by feminism, was used to achieve the study aims. Thirteen telephone interviews were completed with adult daughters who self-identified as being in an abusive relationship with their aging mother. Daughters' descriptions of their mother-daughter relationship were framed around their perceptions of past childhood injustices. This past-framing led to the negative emotional responses daughters experienced in their relationship. Despite feeling the relationship was explicitly negative daughters remained in the relationship out of a desire to pursue the dream relationship and validate their mother-daughter bond, as well as a sense of obligation to do their due diligence. Daughters used both coping and self-protective strategies in managing their ongoing relationship with their mother. These strategies developed over time as daughters found them useful. While the strategies served the daughters' needs, they often came at the expense of the mothers' needs resulting in a situation in which elder neglect could occur. Additionally, daughters found the use of reciprocal and spiteful aggression to be useful, promoting the occurrence of elder abuse. Findings from the study provide theoretical insights to the conceptualization of aggression, power relationships between adult daughters and aging mothers, as well as the development of elder abuse and neglect. Furthermore, the findings have practical relevance as they suggest targeted areas for assessing family safety and elder abuse as well as potential opportunities for interventions.

Keywords: Daughters In Adulthood, Elder Abuse Etiology, Mother-Child Relations

Link to article

Ziminski Pickering, C. E., Rempusheski, V. F. (2014). Examining barriers to self-reporting of elder physical abuse in community-dwelling older adults. *Geriatric Nursing*, *35*(2), 120-125. doi: 10.1016/j.gerinurse.2013.11.002

<u>Abstract:</u> One out of 10 older adults experiences elder abuse in their lifetime, though less than one third of these cases ever get reported. The purpose of this study was to describe older adults' perceptions of physical abuse (PA) as a type of elder abuse including reasons why they may or may not self-report. An author developed vignette scale was used to present three types of PA and three barriers to reporting for each of three living situations. Older adults (n = 76) rated perceptions of whether or not the situation is abusive, likelihood of reporting and likelihood of reporting when presented with each of three barriers. The study participants had a consistent perception of PA; however the barriers affected their

likelihood of reporting, which varied across types and situations. The results provide further evidence that reporting abuse is multifactorial and have implications for educational interventions.

Keywords: Adult protective services; Domestic violence; Elder abuse; Physical abuse