In the earliest days of elder abuse research, caregiver stress and the dependence of frail elders was given much attention as the likely cause for violence toward older individuals. As elder abuse literature evolved, however, it became clear that there were multiple causes of elder abuse, and that most often domestic elder abuse had more to do with the characteristics of the abuser, not the dependence of the victim. In particular, the dynamics of power and control, so prevalent in domestic violence theory, were being identified in elder abuse. In addition, research had begun to recognize that many older battered women had been victims of domestic violence throughout the course of long-term relationships. In the early 1990's, advocates for victims of domestic violence and professionals from the Adult Protective Services began to collaborate on service interventions for these older victims of intimate partner violence.

The following collection of resources highlights many of the aspects of intimate partner violence as it affects older women, though it is by no means exhaustive. It is meant to complement Domestic Abuse in Later Life: A Research Review, published by the National Center on Elder Abuse and accessible from the NCEA Web site. In their reviews, the authors summarize and cross-reference 54 research studies according to subject area, including abuser characteristics, victim characteristics, relationships, and causation theories.

This bibliography includes a number of the more recent research pieces cited, in addition to a number of educational materials meant to enhance the competence of the many health, social services, and criminal justice professionals who work with older victims of intimate partner violence. Publications from the U.S., Canada, Australia, and Israel illustrate the global nature of this problem. Many of these publications are literally at your finger tips as they are online. Some resources, such as manuals, are available directly through the agencies that produced the publications.

To search for additional references on this and related topics, please visit the CANE Web site. To access the CANE Bibliography Series visit the NCEA Web site.

The National Center on Elder Abuse (NCEA) serves as a national resource for elder rights advocates, law enforcement and legal professionals, public policy leaders, researchers, and citizens. It is the mission of NCEA to promote understanding, knowledge sharing, and action on elder abuse, neglect, and exploitation.

The NCEA is administered under the auspices of the National Association of State Units on Aging.

NCEA Partners
National Association of State Units on Aging (NASUA), Lead Partner
American Bar Association (ABA) Commission on Law and Aging
Clearinghouse on Abuse and Neglect of the Elderly (CANE) at the University of Delaware
Annotated Bibliography

2002

Agency for Healthcare Research and Quality

*Delphi Instrument for Hospital-based Domestic Violence Programs*

2002

This instrument, developed by consensus under the auspices of the Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services, is used for the evaluation of hospital-based domestic violence programs. It was developed by Dr. Jeffrey Coben, Domestic Violence Senior Scholar-in-Residence (affiliated with Drexel University College of Medicine and Allegheny General Hospital, PA.), a position co-funded by the Family Violence Prevention Fund.

Brandl, B., of the National Clearinghouse on Abuse in Later Life (NCALL), the Pennsylvania Coalition Against Domestic Violence, and the Pennsylvania Department of Aging

*From a Web of Fear and Isolation to a Community Safety Net - Cross-Training on Abuse in Later Life - Participant Manual*

2002

This manual, an outgrowth of a project funded by the Pennsylvania Department on Aging, is meant to supplement a cross-training workshop on domestic abuse in later life. The curriculum is based upon the work of Bonnie Brandl (WCADV) and Jane Raymond (Wisconsin Department of Health and Family Services). As quoted from the introduction, "...The training has been designed to initiate or strengthen communication among local service providers through interactive exercises. Each participant will leave the training with a community-based action plan designed by the local team describing the next steps they want to take to improve services for older victims in their area..." Other training objectives include learning to distinguish caregiver stress from power and control issues of domestic violence, and understanding the EMPOWER model as it applies older battered women. The curriculum also addresses the importance of safety planning. (Note: This manual, along with the Training Curriculum, is available through the National Clearinghouse on Abuse in Later Life at Wisconsin Coalition Against Domestic Violence, 307 South Paterson St., Suite 1, Madison, WI 53703, telephone 608 255-0539. The cost of each manual is $35.00 plus shipping and handling.)
Brandl, B. for the National Clearinghouse on Abuse in Later Life (NCALL), the Pennsylvania Coalition Against Domestic Violence, and the Pennsylvania Department of Aging

From a Web of Fear and Isolation to a Community Safety Net - Cross-Training on a Abuse in Later Life - Training Curriculum

2002

This workshop curriculum was developed to foster a coordinated approach among community service professionals addressing the needs of domestic violence victims in later life. The training is intended to be used a starting point for community initiatives and policy development. It is accompanied by the Participant Manual (see M43-96). (Note: Both the curriculum and the participant manual are available through the National Clearinghouse on Abuse in Later Life at Wisconsin Coalition Against Domestic Violence, 307 South Paterson St., Suite 1, Madison, WI 53703, telephone 608 255-0539. The cost of each is $35.00 plus shipping and handling.)

Brandl, B. and Cook-Daniels, L.

Domestic Abuse in Later Life
Applied Research Forum of the National Electronic Network on Violence Against Women web site
December 2002

In this article, the authors summarize and cross-reference 54 research articles that address domestic violence in later life (published between 1988 and 2002). Key findings are presented along the topics of prevalence/incidence, typology, culture, relationships, causation, abuser issues, victim issues, and services/interventions. Sexual abuse, homicide-suicide and caregiving experiences of wives and daughters are among the research areas examined. This aggregate of research appears to indicate that the dynamics of domestic violence in later life parallel the power and control issues experienced by younger victims of intimate partner violence. (The series of research charts that this article is based on is accessible on the NCEA web site at Research Briefs and Agendas)

Brandl, B. and Horan, D.

Domestic Violence in Later Life: An Overview for Health Care Providers
Women and Health; Vol. 35 (2/3), 41-54; 2002


This overview was prepared to assist health care professionals in detecting domestic violence in older women. Universal screening of all female patients over age 60 and those with disabilities is encouraged and combines an approach of assessing for medical indicators as well as interviewing patients regarding lifestyle and family history of conflict and violence. The authors discuss issues of competency, documentation (written and photographic), confidentiality, safety planning, referral and reporting, and support. In particular, the authors caution against the following: blaming the victim; prescribing anti-depressants without first conducting a thorough abuse assessment; recommending family or marital counseling without treatment for the batterer; colluding with the abuser; and minimizing the dangerousness for the victim or health care professional when help is offered.
Dodge, D.  
**Women Find Solace, Strength to Leave in Support Group**  
Milwaukee Journal Sentinel; July 7, 2002  
This news article describes the sentiments of a handful of participants in the Older Abused Women’s Program, part of the Milwaukee Women’s Center shelter. Since it began in 1992, the program has provided support for over 500 older survivors of intimate partner violence.

Doege, D.  
**Battered, Torn, But Not Broken For Many Older Women Love Hurts**  
Milwaukee Journal Sentinel; July 7, 2002  
This article highlights the Older Abused Women’s program at the Milwaukee Women’s Center, which began in 1992. It also describes some of the ageist beliefs and other barriers that older victims of intimate partner violence face. In August, 2002, Carol Seaver, the program coordinator, will be one of the 24 recipients of the Sunshine Peace Award in recognition of extraordinary efforts in the field of domestic violence.

Heisler, C. and Brandl, B.  
**Safety Planning for Professionals Working with Elderly and Clients Who are Victims of Abuse**  
Victimization of the Elderly and Disabled; Vol. 4 (5), 65-80; January/February 2002  
This article is designed to assist adult protective services workers in developing safety planning skills and strategies, for the protection of their clients and themselves. The author presents practical information, drawing upon the experiences of domestic violence advocates, for the APS worker to better prepare for home visits. Such preparation begins upon receiving the call of suspected mistreatment. Professionals are instructed to ask detailed questions regarding a history of violent or unstable conditions, both within and surrounding the home. Recommendations regarding parking, approaching the home, and entering are also detailed. The need for ongoing monitoring of the behavioral and emotional status of all present is discussed. The development of a concrete safety plan for those clients who continue to live with abuser, as well as those who are planning to or have recently separated from the abuser, is highlighted.

Hightower, J.  
**Violence and Abuse in the Lives of Older Women: Is it Elder Abuse or Violence Against Women? Does It Make Any Difference?**  
Background paper for INSTRAW Electronic Discussion Forum - Gender Aspects of Violence and Abuse of Older Persons; April 2002  
As quoted from the paper: "...The purpose of this essay is to stimulate discussion around the interrelationships among gender, age, power and control, and violence..." Issues surrounding elder abuse and violence against women are examined, along with the limitations of viewing older battered women solely as victims of elder abuse. The author (involved in the Canadian research project, "Silent and Invisible") reviews progress made in addressing the needs of older victims of intimate partner violence throughout the past decade, and surveys available literature.
Lev-Wiesel, R. and Kleinberg, B.

_Elderly Battered Wives' Perceptions of the Spousal Relationship as Reflected in the Drawings of the Couple_

The Arts in Psychotherapy; Vol. 29 (1), 13-17; 2002

This study was designed to examine how older battered women perceived their relationships after long-term physical abuse had stopped. A convenience sample of 10 participants was recruited by social workers in southern Israel. The women, aged 60-64, had experienced domestic violence for approximately 30 years, and none had ever filed for divorce or contacted the police for assistance. Although each wife was now the caregiver for her physically or mentally disabled husband, analysis of the Kinetic Family Drawings (KFD) suggest that these women continue to view their husbands as threatening and themselves as unempowered.

Vinton, L.

_Questions and Answers About Older Battered Women_

Department of Elder Affairs

May 2002

This article provides an overview of the topic of older battered women. Through this "QandA" format, the author explores the impact and implications of seeing the victim as either one of domestic violence or one of elder abuse. She also discusses the potential barriers (internal and societal) these women face in seeking and obtaining help. The article includes a summary of initiatives designed to coordinate domestic violence with adult protective services, along with a bibliography of relevant literature and a detailed resource list of national and statewide services. The article, originally published on the Elder Affairs link of My.Florida.com, also contains specific information regarding the state's programs.

Anetzberger, G.

_Elder Abuse Identification and Referral: The Importance of Screening Tools and Referral Protocols_

Journal of Elder Abuse and Neglect; Vol. 13 (2), 3-22; 2001

This article describes the origins of the "Screening Tools and Referral Protocol for Stopping Abuse Against Older Ohioans: A Guide for Service Providers" (STRP). The tool was developed by the Benjamin Rose Institute in order to address the gaps in detecting elder abuse and domestic violence in later life and to refer victims for appropriate services. The project is an outgrowth of recommendations of the Ohio Family Violence/Elder Abuse/Domestic Violence Roundtable, which was established in 1996. The three objective's of the STRP are to acquaint service providers with elder abuse and domestic violence in later life within various settings, to offer service providers screening tools for detection, and to offer service providers a referral protocol. The eighteen month implementation, evaluation and dissemination of the STRP are further discussed in this volume of JEAN.
Bergeron, L.
**An Elder Abuse Case Study: Caregiver Stress or Domestic Violence? You Decide**
In this article, a clinical social worker demonstrates through a case study the complexities of assessing elder abuse in the presence of a long standing history of domestic violence. Two theories of elder abuse are discussed: the caregiver stress theory and the domestic violence theory. A key element of this article is the premise that elder protection is "victim-focused" rather than "perpetrator-focused" and that this has implications for reporting, prosecution, prevention and intervention. Another point of debate is whether a "well" spouse (one who is not physically dependent or cognitively impaired) can be the victim of abuse by a partner who is incapacitated.

Hightower, J., Smith, M. and Hightower, H.
**Silent and Invisible - A Report on Abuse and Violence in the Lives of Older Women in British Columbia and Yukon**
B.C./Yukon Society of Transition Houses, Vancouver, B.C.; 2001
This Canadian research project examines the presence and impact of violence in women age 50 and older in British Columbia. The study began in 1998, in response to the growing awareness that older women in need of transitional housing, as a result of abusive situations, had few resources available. The major findings indicate that women over age 50 appear underserved through women's shelters, and women's health and social service providers point out that older battered women often face poverty, ageism, age-related illnesses and isolation in addition to the abuse. The project involved public awareness and outreach campaigns, surveys of transition houses, focus groups of staff and volunteers, and combined quantitative and qualitative data. Sixty-four women, including First Nations individuals and women from other cultures, shared their personal histories of domestic violence. Recommendations generated throughout this process are presented in four areas: policy, training, research and development, and community development. (Note: To order, contact BC/Yukon Society of Transition Houses, Suite 507, 475 Howe St., Vancouver, BC V6C 2B3, telephone 604 669-6943. Price: $20.00 Canadian, plus shipping and handling.)

Malphurs, J., Eisdorfer, C. and Cohen, D.
**A Comparison of Antecedents of Homicide-Suicide and Suicide in Older Married Men**
American Journal of Geriatric Psychiatry; Vol. 9 (1), 49-57; Winter 2001
This study, part of ongoing retrospective research examining the phenomenon of homicide-suicide in older people, compares characteristics of older perpetrators of homicide-suicide with characteristics of those who committed suicide alone. Records of 27 men who perpetrated spousal homicide-suicide were compared with those of 36 married males who committed suicide alone (Florida, 1988-1994). Suicide victims typically appeared to have significantly more disease than the homicide-suicide perpetrators. Approximately half of the homicide-suicide perpetrators were spousal caregivers, compared to 17 per cent of the men who committed suicide. Depression appeared to be significant among both groups, though none of the perpetrators tested positive for anti-depressants. The researchers emphasize the need for
health professionals to routinely assess for depression as a preventative measure when treating geriatric patients.

Nagpaul, K.  
Application of Elder Abuse Screening Tools and Referral Protocol: Techniques and Clinical Considerations  
Journal of Elder Abuse and Neglect; Vol. 13 (2), 59-78; 2001  
This article is included in an issue of JEAN that focuses on the development, implementation and evaluation of the Ohio Elder Abuse Screening Tools and Referral protocol (STRP). The tool, developed by the Benjamin Rose Institute, was designed to assist service providers in the detection of elder mistreatment and domestic violence in later life and to offer guidance for appropriate referral. The article explores the clinical implications of using this tool. Through case study illustrations, practical aspects of the interview, evaluation and referral process are discussed. Interviewing techniques, ethical dilemmas regarding self-determination and confidentiality, considering how to best intervene within complex family systems, and distinguishing elder abuse from domestic violence (or intimate partner violence) are among clinical issues presented.

NewsRX Network  
Program Helps Older Women Victims  
Women's Health Weekly; July 12, 2001  
This brief article describes a pilot program of University of Cincinnati College of Medicine's Women's Health Program designed to address issues of domestic violence and older battered women. The program will focus on three initiatives: to improve screening and referral, to provide training for physicians and health care professionals, and to enhance community outreach and education regarding intimate partner violence among older individuals.

Osgood, N. and Manetta, A.  
Abuse and Suicidal Issues in Older Women  
Omega; Vol. 42 (1), 71-81; 2000-2001  
Abuse crisis hotlines do not typically assess for depression and suicidality, and suicide hotlines do not typically assess for histories of abuse. This study addresses the link between suicidal issues and histories of abuse. The hospital charts of 92 women, aged 55 and older, who were discharged from two psychiatric hospitals and one medical center in central Virginia between October 1994 and August 1996 were examined for information regarding suicidal ideation and behaviors and past or current abuse (childhood abuse, rape and battering). There were a significantly higher number of women experiencing suicidal issues who had experienced past or ongoing abuse. Social workers, counselors and other crisis intervention professionals are urged to assess abuse victims for depression and suicidality and to assess depressed clients for histories of abuse. A number of screening tools for both abuse and depression are identified.

Wisconsin Coalition Against Domestic Violence (WCADV), National Clearinghouse on Abuse in Later Life (NCALL)  
Abuse Against the Elderly and Vulnerable Adults - Potential Legal Remedies
2001
As quoted from the introduction: "...The purpose of this booklet is to provide information about potential criminal justice and civil actions to assist professionals who work with older persons and vulnerable adults who are victims of abuse and neglect. These individuals may be living in the community, short-term health care, or residential/institutional facilities. The booklet was written for law enforcement and the legal profession. Domestic violence advocates, adult protective services workers, lead elder abuse staff and other social service workers may also find it useful..." The booklet cross-references elder abuse issues with corresponding legal code citations for Wisconsin statutes. Related laws are also discussed, including reporting and restraining orders. A statewide directory for domestic violence and elder abuse agencies is included. (Note: This publication is available only through the Wisconsin Coalition Against Domestic Violence, 307 south Paterson St., Suite 1, Madison, WI 53703, attn: NCALL, telephone (608) 255-0539. Price: $3.00 plus shipping and handling. Discount for WACDV members.)

2000
Brandl, B.
*Power and Control: Understanding Domestic Abuse in Later Life*
Generations; 39-45; Summer 2000
Although many people believe that caregiver stress is the primary reason for elder abuse, research indicates that family violence is a more common cause. The author draws upon research and her experience in working with the Wisconsin Coalition Against Domestic Violence (WCADV) to outline the dynamics of domestic violence for home and health care professionals who may encounter elderly victims. The author discusses the danger of misassessment and blaming the victim and the paramount importance of breaking the isolation of the victim. Other practical interventions described include education regarding dynamics of abuse in later life, encouragement, assistance in developing a detailed safety plan in the event of a dangerous situation, and referral. (This article is part of a special edition of Generations dedicated to the recognition of the problem of elder abuse.)

Brandl, B. and Meuer, T.
*Domestic Abuse in Later Life*
The Elder Law Journal; Vol. 8 (2), 297-335; 2000
This in depth discussion of domestic elder abuse addresses four questions: what is abuse in later life; how can professionals intervene; what criminal and civil remedies address the issues; and which interventions are most helpful to victims. Legal issues highlighted include competency versus victimization, the complexities of applying mandatory arrest laws to circumstances of elder abuse, and fiduciary concerns. The authors conclude that focus on victim's safety while decreasing isolation is the key to effective intervention. A systematic rather than piecemeal response to this growing problem is encouraged.

Cohen, D.
Caregiver Stress Increases Risk of Homicide-Suicide
Geriatric Times; Vol. I (4); November/December 2000
This article explores the impact that depression and caregiver stress has on the incidence of homicide-suicides. The myth that most homicide-suicides are mercy killings is disputed with statistical evidence that indicates that perpetrators are often acting unilaterally and out of desperation. Pointing out that most homicide-suicides are planned in advance, and that most caregiver/perpetrators are involved with the victim's physician, the author offers strategies for assessment and intervention that can be employed by the health care professional to aid in risk identification.

Cohen, D.

Homicide-Suicide in Older People
Psychiatric Times; Vol. XVII (1); January 2000
This article provides an overview of homicide-suicides among older couples. There is discussion of incidence rates, clinical characteristics and perpetrator profiles. Three subtypes of homicide-suicides are identified: dependent-protective, aggressive and symbiotic. The author stresses the importance of detection of depression in caregivers as well as patients as a preventative step.

Eisdorfer, C. and Cohen, D.

Homicide-Suicides in Older Persons: Acts of Violence Against Women
Paper prepared for the roundtable discussion of the Elder Justice: Medical Forensic Issues Concerning Abuse and Neglect; Washington, D.C.; October 18, 2000
In this paper, the authors review their findings on homicide-suicides among couples aged 55 and older. The research presented indicates that most older women are unaware victims, not willing partners in a death pact. They discuss the subtypes of perpetrators; half can be categorized as dependent-protective subtype, one-third can be categorized as aggressive subtype wherein there is a history of physical and/or verbal conflict, and twenty percent can be categorized as the symbiotic subtype. A common risk factor is undetected, untreated depression in the perpetrator and therefore the authors urge all health care professionals, particularly primary care physicians, to be alert to indicators of depression in caregivers as well as patients.

Hobart, M. for the Washington State Coalition Against Domestic Violence
Honoring Their Lives, Learning From Their Deaths - Findings and Recommendations from the Washington State Domestic Violence Fatality Review; December 2000
The goal of Washington State Domestic Violence Fatality Review is to generate cooperation and communication among the local community services and the criminal justice system that address domestic violence in order to provide more effective intervention and response. This report is based upon 30 in depth fatality reviews and analysis of 130 cases of homicides related to intimate partner violence (IPV), from 1992 through 2000. The IPV victims ranged in age from 15 to 81, with 15 of the victims aged 50 or older. The link between suicidal behavior on the part of an abusive partner and the potential for homicidal behavior is emphasized. Among many other topics, recommendations are related to health care provision, protective orders, the criminal justice system, marginalized women, and the protection of children.
Statistics indicate that in Australia, one-third of all victims of domestic violence are older women. This multi-method, qualitative, exploratory study garnered input from 162 individuals aged 50 and over regarding their experience of domestic violence. The research took place from November 1999 through June 2000, and consisted of in-depth interviews, responses from a national phone-in, and focus groups. Although the project was designed to reach older women, researchers were also contacted by 22 male victims of domestic violence. Professionals and representatives of community organizations contributed. In particular, this report examines the increased difficulties that older battered women face, in part due to socialization that included the widespread acceptance of violence. The experiences of violence within lesbian couples, of Aboriginal and Torres Strait Islander women, and of foreign born victims, are highlighted within the case studies. The role of gatekeepers, family, friends, clergy, physicians and others are considered as recommendations are made to reach out more effectively to this group and provide services and support that are necessary at this life stage.

Volume Two of this multi-method, qualitative, exploratory study reviews the literature on the theories and relationship between elder abuse and domestic violence. The research of Wolf, Eastman, Mears, Sargent, McCreadie, Easteal, Seaver, Brandl is discussed, along with the work of Jennifer Shaffer, who undertook the first study of domestic violence and older women in Australia. This volume also contains a secondary data analysis of the ABS Women's Safety Australia research project on the occurrence of domestic violence in Australia. Attachments include the scoping paper which outlines the purpose and structure of the project, the survey for phone-in interviews, and the questions for focus groups of professionals and participants.

This article addresses intimate partner violence among older women and also examines the dynamics of domestic violence against older female caregivers. Older battered women appear more inclined to view abusive behaviors as normal, and therefore acceptable, thus making identification and reporting of abuse more difficult. The author's research indicates that neither cognitive status nor abuse by caregivers appears linked to abuse of aging caregivers. Rather, it is more likely a continuation of long-standing abuse or resentment. Specific guidelines are provided so that nurses can enhance their ability to assess, refer and assist these patients. (Note: This article includes a CE test with instructions for filing.)

Abuse of Female Caregivers by Care Recipients: Another Form of Elder Abuse
This article explores the abuse of aging, female caregivers by the elders for whom they provide in-home care. Ninety-three caregivers (a subset of over 400 in the primary study conducted from 1990-1996) were divided in two ethnic groups: Mexican Americans and Non-Hispanic Whites. This study focused on the relationship of caregiver abuse to structural, situational and interactional variables. Difference between past and present image of the elder, perception of power imbalance, and interpersonal conflicts are among those variables with significant correlation to caregiver abuse. The data also indicated that while 29% of those assessed verbalized being mistreated, the actual frequency was higher at 39%, suggesting that some women may view this mistreatment as normal behavior.

Adapted from an article by Raymond, J., by the staff of Legal Eagle

_Elder Abuse - Housing for the Elderly Battered Woman_
Legal Eagle - A Newsletter for the Criminal Justice Community
March, 2000
This overview provides a thumbnail sketch of the housing barriers faced by older battered women. When attempting to end a relationship characterized by domestic violence, older women may face limited economic resources and limited shelter options, since facilities may not be fully accessible and may be relatively chaotic. Recommendations include the need for temporary housing with longer lengths of stay in quieter environments. (Note: This article, which is accessible online at the above web address, was adapted from "Housing and the Older Battered Woman," Raymond, J.; Victimization of the Elderly and Disabled, Vol. 2 (5) Jan/Feb 2000.)

Speltz, K. and Raymond, J.
_Elder Abuse, Including Domestic Violence in Later Life_
Wisconsin Lawyer; Vol. 73 (9); September 2000
This article provides an overview of elder abuse and neglect and the legal and social strategies in place in Wisconsin to address this problem. Topics discussed include the erroneous assumption that caregiver stress is the most common cause of elder abuse. Dynamics of domestic violence and indicators of sexual and financial abuse are outlined. Reporting remains voluntary in order to respect the elder's right to privacy and self-determination. The coordination of social service agencies and law enforcement is emphasized and the "Memorandum of Understanding" agreement is identified as an example of such efforts.

Stiegel, L., Heisler, C., Brandl, B. and Judy, A.
_Developing Services for Older Women Who Are Victims of Domestic Violence or Sexual Assault_
Victimization of the Elderly and Disabled; Vol. 3 (2), 17-28 and Vol. 3 (4) 49-60; 2000
This two part article reports upon the information generated during a teleconference held on December 16, 1999, under the STOP Grants Technical Assistance Project (STOP TAP). The conference (presented by the authors) was designed to assist State STOP Grant Program Administrators and domestic violence advocates in the development of services for older battered women and victims of sexual assault. Among the topics discussed were recommendations to enhance the criminal justice system's response to these older victims,
including suggestions for training and education. The need for collaboration between APS, criminal justice systems and domestic violence programs was emphasized. Contributions of several programs including the Wisconsin Coition Against Domestic Violence (WCADV) and the Wisconsin Coalition Against Sexual Assault (WCASA) were highlighted.

U.S. Department of Justice and U.S. Department of Health and Human Services

*A Guide to Featured Programs: Our Aging Population: Promoting Empowerment, Preventing Victimization, and Implementing Coordinated Interventions*

Workshop # 2: Working Across Systems to Improve Services for Victims of Domestic Violence and Sexual Assault

National Symposium, Washington, D.C., October 30-31, 2000

This is a program description of a workshop offered as part of a national symposium. The workshop highlighted three programs that address the problem of domestic violence and older victims: Wisconsin Coalition Against Sexual Assault's "Widening the Circle" project; Wisconsin's Older Battered Women's Project; and the Maricopa Elder Abuse Prevention Alliance (MEAPA) in Phoenix, Arizona.

Wisconsin Coalition Against Domestic Violence (WCADV), National Clearinghouse on Abuse in Later Life (NCALL)

*Safety Planning: A Guide for Individuals with Physical Disabilities*

2000

As quoted from the introduction: "...This safety plan is designed to help adults with physical disabilities who have been or may be abused by an intimate partner, spouse, adult child, other family member, personal assistant, or caregiver. This safety plan can also be useful for people with mental, cognitive, developmental disabilities, and those who have hidden disabilities. The brochure includes sections on: planning for an explosive incident; safety during an explosive incident; safety in your home; safety when preparing to leave; safety in public settings; and safety with a restraining order..." (Note: This material is available through the Wisconsin Coalition Against Domestic Violence, 307 S. Paterson St., Suite 1, Madison, WI 53703, telephone (608) 255-0539. Cost: $1.00 members/$1.25 non-members, plus shipping and handling.)

Wolf, R.

*The Older Battered Woman*

Institute on Aging, University of Massachusetts, Memorial Health Care; 2000

National Violence Against Women,

This overview provides a historical context for the emerging recognition of the issue of domestic violence (or intimate partner violence) and older women. Barriers to help-seeking, due to individual characteristics and circumstances, and barriers to service delivery, such as features of programs designed specifically for younger women with children, are outlined. Brief examples of effective support models are included.
1999

Erwin, P.
*Intimate and Caregiver Violence Against Women with Disabilities - an article commissioned by the Battered Women's Justice Project-Criminal Justice Office*
circa 1999
While women with disabilities experience many of the same risks and complications that non-disabled battered women experience, they may also experience compounding physical, emotional and financial stressors. Intimate partner violence among this group of women is an invisible problem as these women are marginalized in society. This paper provides an overview of domestic violence experienced by women with disabilities, including the difficulties of devising a viable safety plan for victims who may be dependent upon their abusers for physical assistance. Increasing awareness of domestic violence among clients with disabilities and service coordination are several recommendations presented.

Hightower, J., Smith, M.J., Ward-Hall, C., and Hightower, H.
*Meeting the Needs of Abused Older Women? A British Columbia and Yukon Transition House Survey*
Journal of Elder Abuse and Neglect; Vol. 11 (4), 39-57; 1999
Results of a survey of domestic violence services in British Columbia and the Yukon are presented with regard to the services they provide to women between the ages 50-59 and to women over 60. Results suggest that older victims of violence are more often categorized as victims of elder abuse than victims of family violence. The needs of these older victims of family violence are not often met by social and health agencies alone and better interaction is needed between these agencies and providers of support and advocacy for abused women.

Maxwell, M.S. and O'Rourke, K.S.
*Domestic Abuse in Later Life - A Competency-Based Training Manual for Meals on Wheels Volunteers and Other Elder Services Staff*
Rural Victimization Project, Institute for Family Violence Studies, School of Social Work, Florida State University; 1999
This 238 page manual was designed to train Meals on Wheels volunteers in rural communities to identify and refer victims of abuse to appropriate social service agencies. Topics not only include basic education regarding the dynamics of domestic violence, but also address the possible connection between nutrition and domestic violence, and the assessing and overcoming of rural barriers in order to access resources. Detailed resource appendices are included. (Note: A print version may be ordered from the Institute of Family Violence Studies, FSU School of Social Work, C-2500 University Center, Tallahassee, FL 32306-2750, telephone: 850 644-6303. Price: $25.00 for Florida residents and $25.00 for non-residents.)

National Committee for the Prevention of Elder Abuse
*Domestic Violence*
This brief article provides information regarding intimate partner violence involving older women. Three categories of domestic violence in later life are described: domestic violence grown old, late onset domestic violence triggered by events such as disability or changing family dynamics, and the development of new relationships with abusive partners. A brief bibliography and resource list is included.

Penhale, B.  
**Bruises on the Soul: Older Women, Domestic Violence, and Elder Abuse**  
Journal of Elder Abuse and Neglect; Vol. 11 (1), 1-22; 1999  
A general examination of the abuse of older women is presented. Examples are drawn from six cases undertaken by the author as a social work practitioner and manager in the United Kingdom. All six cases involve women over the age of eighty and are assessed with regard to type of abuse, relationship and sex of abuser, risk factors, as well as types of intervention employed. The focus of the article is to increase understanding of abuse and specific abusive situations and provide insights that may be used to reduce and prevent incidences of abuse.

Sanchez, C.  
**Elder Abuse in the Puerto Rican Context**  
Understanding Elder Abuse in Minority Populations ; T. Tatara, ed.; Chapter 7, 93-105; Taylor and Francis, Phila., PA; 1999  
This chapter provides an overview of elder mistreatment in Puerto Rico. Four major studies are reviewed: Munoz (1985) with the significant finding that abuse is correlated to aging and dependency; Arroyo (1992) which draws upon research from professionals and practitioners in various elder care roles; Ramos-Tossa (1991) which addresses elder mistreatment in long-term care settings; Baba, Colon and Cruz (1996) which addresses domestic violence towards women aged 60 and over. Legislative limitations are also discussed. Poverty, ageism, and the concept of "familismo" contribute to the invisibility of elder abuse in this culture.

Schaffer, J.  
**Older and Isolated Women and Domestic Violence Project**  
Journal of Elder Abuse and Neglect; Vol. 11 (1), 59-77; 1999  
This report documents the results of an Australian national phone-in designed to elicit responses to a questionnaire from older and isolated women who live with domestic violence. A copy of the questionnaire is included as an appendix. Significant themes and responses that emerged from the phone-in are reported, as are the logistics of organizing a phone-in of this magnitude. Themes identified by older women are listed and discussed and issues for women from rural and remote communities are explored in detail. Recommendations are made for policy development, improved service provision, and prevention strategies.

State of New Hampshire Governor’s Commission on Domestic and Sexual Violence  
**Elder Abuse: Domestic Violence Protocol**  
June 1999
This protocol is one in a series developed in the state of New Hampshire to address domestic and sexual violence. Its purpose is to serve as an assessment guideline for adult protective services (APS) professionals who are investigating domestic violence. The report describes the role of the state's Division of Elder Abuse Services (DEAS), established in 1986, and an overview of the investigation process. Specific recommendations are included, such as observing the dynamics of power and control while interviewing alleged victims, alleged perpetrators and collateral witnesses. The comprehensive list of appendices include legislation regarding reporting suspected abuse of elderly and dependent adults and protection for victims, a template for a detailed personal safety plan, the Power and Control Wheel, The Equality Wheel, a coordinated community action model, and bibliographic references.

Tomita, S.
*Exploration of Elder Mistreatment Among the Japanese*
Understanding Elder Abuse in Minority Populations ; Chapter 9, 119-139; T. Tatara, ed.; Taylor and Francis; Phila., PA; 1999
This chapter, from Understanding Elder Abuse in Minority Populations , reports on a study that explores the impact of cultural norms upon elder mistreatment among Japanese Americans. The study employs the "grounded theory" of research with ongoing comparative data analysis and draws upon transcripts of interviews of Japanese Americans from earlier research (Pillemer and Wolf; Anetzberger, Korbin, and Tomita). The second phase of the research was data analysis of semistructured interviews with 22 Japanese Americans in Seattle and Hawaii. Cultural themes that emerged and are discussed centered around the core category of group above self and include the concepts of dual and multiple selves, hiding of individual problems and Japanese wrongdoings, male dominance and unaccountability. Excerpts from transcripts illustrate issues of domestic violence that were present throughout the marital lives of some participants.

Vinton, L.
*Working with Abused Older Women from a Feminist Perspective*
Journal of Women and Aging; Vol. 11 (2/3), 85-100; 1999
This article discusses how the public, professional helpers, and women themselves view elder abuse victims, as well as the impact that labeling has on assessment and treatment. The prevalence of domestic elder violence is discussed. Ageism and sexism in relation to the victimization of older women is covered, as are national, state, and local prevention efforts. A number of recommendations for working with these women, individually and within agency settings, are outlined.
Research Applications: Domestic Violence in the Elderly
Geriatric Nursing; Vol. 19 (3), 165-167; 1998
This article discusses domestic violence as it may present itself in the lives of elderly women and the role that home care nurses can play in helping victims of abuse. Abuse at the hands of a lifelong spouse or a relatively new companion can take many forms and be defined in numerous ways. Examples of abuse are reported and strategies for detection and intervention in abusive situations are presented. The situational challenges, responsibilities, and limitations that home care nurses face are discussed with regard to domestic violence.

Vinton, L.
A Nationwide Survey of Domestic Violence Shelters' Programming for Older Women
Violence Against Women; Vol. 4 (5), 559-571, October 1998
This article reports upon the results of a survey on specialized services provided for older battered women through domestic violence shelters. Over 40% of the 428 respondents indicated that they had served at least one woman aged 60 or older, and 61 of these agencies offered specialized programming, particularly outreach, geared towards older victims of domestic violence. This represents an increase from a 1993 AARP study that indicated the existence of only 15 such specialized programs. A review of the existing literature is also included.

1997

Wolf, R. and Pillemer, K.
The Older Battered Woman: Wives and Mothers Compared
Journal of Mental Health and Aging; Vol. 3 (3), 325-336; 1997
This research explores the differences between older battered women who are victimized by their husbands and those victimized by their children. The comparison groups consisted of 22 women who were abused by their husbands and 51 abused by their adult children. While battered wives were found more likely to be dependent upon their husbands for some assistance with instrumental activities of daily living, the abusive adult children were more likely to be financially dependent upon their mothers. Other comparisons are discussed.

1996

Nerenberg, L.
Older Battered Women - Integrating Aging and Domestic Violence Services
Institute on Aging, San Francisco Consortium for Elder Abuse Prevention for the National Center on Elder Abuse (NCEA); San Francisco, CA; 1996
This manual contains a primer on domestic violence that provides a basic introduction for service providers from both the fields of aging and adult protective services. It also describes
the older battered woman and her service needs. The final section outlines model programs for older battered women and describes innovative services that have been developed across the U.S. and Canada. A directory of additional resources and a bibliography are also included. (To order, contact the Institute on Aging, San Francisco Consortium for Elder Abuse Prevention, 3330 Geary Blvd., San Francisco, CA 94118, 415 447-1989 ext. 519. Price: $15.00, payable by checks only. CA residents add 8.5% sales tax.)

Seaver, C.  
**Muted Lives: Older Battered Women**  
Journal of Elder Abuse and Neglect; Vol. 8 (2), 3-21; 1996  
This article, by the director of Milwaukee’s Older Abused Women’s Program, explores the plight of older victims of domestic violence and refutes the notion that older battered women are resistant to change. Based upon the observations of 132 participants of this weekly support group, the author discusses the similarities and differences that these older survivors share with younger women. Within this sample, women who had both high levels of support and faced high degrees of dangerousness were most likely to leave an abusive situation. The fact that 39% of these women aged 50 and over were able to leave an abusive relationships, and that 12 of these participants used the shelter, demonstrates that older women can and will use supportive interventions and resources that are designed for and accessible to them.

The Women's Center  
**Domestic Violence and the Clergy**  
The Women's Center; Bloomsburg, PA; 1996  
As quoted from the introduction: "...This manual was created to assist clergy to respond effectively to battered women. It seeks to address issues specific to older battered women, in addition to providing general information about domestic violence and how to respond to it...This manual is meant to be an easy-to-follow guide, not in-depth reference work and is most effective when accompanied by a presentation from your local domestic violence program...." For more information, contact: The Women's Center, Inc., 111 North Market St., Bloomsburg, PA 17815, telephone (717) 784-6632.

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