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Mistreatment of African American Elders

This Research to Practice Brief synthesizes recent information and research findings related to understanding the mistreatment of African American elders, particularly involving financial exploitation and psychological abuse. General cultural beliefs, views, and norms within the African American community offer both risk and protective factors that influence elder abuse in this population. Socioeconomic variables, such as poverty, institutionalized racism, and structural segregation also place African American elders at risk. While this population can also be referred to as Black or Black American, this brief uses the term "African American."

KEY TAKEAWAYS

▶ There is limited research on elder abuse and neglect for the African American population.

▶ Elder abuse in the African American community is influenced by risk factors and protective factors that span from the individual level to the community level.

▶ Compared to their non-African American counterparts, African Americans are disproportionately impacted by financial exploitation and psychological mistreatment.

Demographics

- In 2014 there were 4 million African Americans aged 65 and older, making up 9% of the older population in the U.S.
- This population is expected to triple to 12 million, comprising 12% of the older population by 2060.

(AoA, 2014)

9%
12%
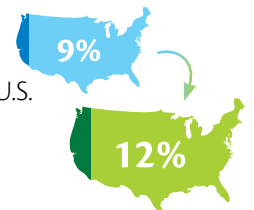
Background on Elder Abuse in the African American Community

The unique sociohistorical experience and cultural adaption of African Americans during and after slavery shape the ways in which elder abuse is both defined and manifested within the African American community (Tauriac & Scruggs, 2006).

AFRICAN AMERICAN FAMILIES

Common characteristics among many African American families often serve as sources of strength and stability, yet may create a risk of conflict and maltreatment. Such characteristics include:

- Extended family networks
- Flexibility of family roles
- Shared living, inclusive of multi-generational, extended, and fictive kin

(as fully reviewed in Tauriac & Scruggs, 2006)

PERCEPTIONS OF ELDER ABUSE

Several studies have reported that the African American population may be more likely to perceive situations as abusive when compared to other ethnic groups (as fully reviewed in Moon & Benton, 2000).

A study that examined African Americans' perceptions of elder abuse from an adult-child to an elderly parent found that **physical aggression** was the most frequently offered example of abusive behavior, along with **verbal aggression**. Physical forms of maltreatment were also significantly more likely to be depicted as "extremely abusive" by African Americans than were other forms of maltreatment (Tauriac & Scruggs, 2006).

FINANCIAL STRAIN

Financial strain faced by many African American households and elders may place African American elders at greater risk for being abused (as fully reviewed in Tauriac & Scruggs, 2006).

Research Findings on Financial Exploitation and Psychological Mistreatment of African American Elders

Beach, Schulz, Castle, and Rosen (2010) conducted a population-based study on financial exploitation and psychological mistreatment among 210 African American and 693 non-African American adults aged 60 years and older in Pennsylvania. In another study, Peterson and colleagues (2014), surveyed 788 African American and 3,368 non-African American adults aged 60 years and older in New York. The two studies provide complimentary and distinctive findings regarding financial exploitation among African American elders. Key findings from these studies are presented below.

FINANCIAL EXPLOITATION FINDINGS

Definition: Financial exploitation is defined as the improper use of funds, property or resources by another individual (Peterson et al., 2014).

Financial exploitation included an elder signing forms or documents that they did not understand; someone asking an elder to sign anything without explaining what was being signed; someone taking an elder's checks without permission; and an elder suspecting that anyone was tampering with their savings or other assets (Beach et al., 2010). Some key findings include:

- **Financial exploitation disproportionately affects African American older adults when compared to non-African Americans** (Beach et al., 2010). Peterson and colleagues (2014) found similar results when comparing 3,368 non-African American and 788 African American cognitively intact community-dwelling adults ages 60 and older residing in New York state (Peterson et al., 2014).

- The majority of financial exploitation that occurred within the past 6 months was perpetrated by someone other than a family member or trusted other, thus suggesting **African Americans may be more vulnerable to stranger-initiated scams or other financially-related deceptions, than non-African Americans** (Beach et al., 2010).

Financial Exploitation Reported

■ African Americans (n=210)
■ Non-African Americans (n=693)
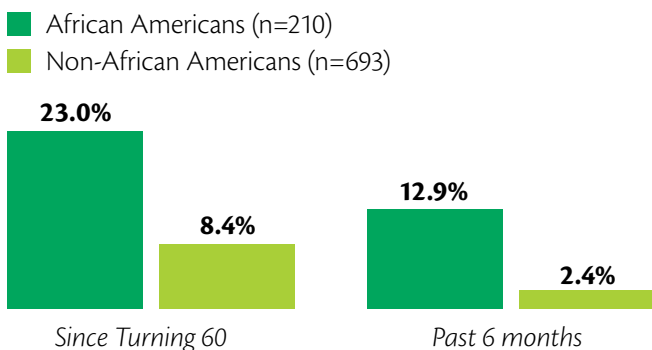
23.0%
8.4%
12.9%
2.4%
Since Turning 60   *Past 6 months*
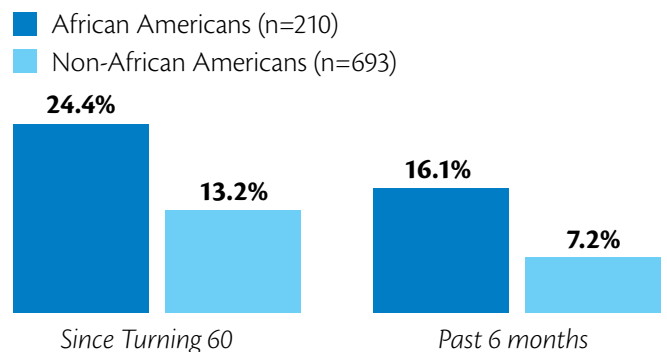(Beach et al., 2010)

PSYCHOLOGICAL MISTREATMENT FINDINGS

Definition: Psychological mistreatment is the infliction of anguish, pain or distress through verbal or nonverbal acts including, but not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment. Treating an older person like an infant; isolating an elderly person from his/her family, friends, or regular activities; giving an older person the "silent treatment" and enforced social isolation are examples of emotional/psychological abuse (NCEA, 2015).

Beach et al. (2010) measured psychological exploitation using a modified Conflict Tactics Scale. Psychological mistreatment included a family member or trusted individual screaming and yelling, insults, saying something to deliberately hurt, stomping out of the room after an argument, destroying something that belonged to an older adult, threatening to hit or throw something at an older adult, threating to send an older adult to a nursing home, and threatening to abandon or stop taking care of an older adult. Some key findings include:

- Non-African Americans were more likely to report the spouse as a source of screaming and yelling, while African Americans reported **other family members** (non-spouse, non-child) (Beach et al., 2010).

- African Americans reported **less upset with screaming and yelling and threats to hit or throw something** than non-African Americans (Beach et al., 2010).

Psychological Abuse Reported

■ African Americans (n=210)
■ Non-African Americans (n=693)

24.4%
13.2%
16.1%
7.2%
Since Turning 60   *Past 6 months*
(Beach et al., 2010)

Factors that Influence Elder Mistreatment in the African American Community

One theoretical model conceptualizes elder abuse in the African American community using the Human Ecological Theory. Using this model, elder abuse in the African American community can be viewed as influenced by multiple systems that include both risk factors and protective factors that are present within subsystems ranging from the individual level to the community level (Horsford et al., 2011).

PROTECTIVE FACTORS

COMMUNITY

A **strong sense of community** provides African American elders and relatives with a unique sense of belonging, social support, and safety that helps them cope with the challenges of aging.

SPIRITUALITY

Spirituality and resilience provide strength, support and comfort to African American caregivers, and in some cases, **religious communities** provide an important source of strength.

FAMILY

Loyalty to family has helped some African American communities overcome legacies of oppression over time and provides a unique source of strength to preserve family unity in the midst of intense contextual challenges.

RESPECT FOR THE ELDERLY

African Americans hold **values of admiration, respect and reverence toward the elderly** as they represent wisdom, honor, resilience and dignity in the community.

HIGH VALUE ON MOTHERHOOD

African Americans tend to place a **high value on motherhood** as mothers are recognized as preservers and the backbone of the family instilling intense feelings of loyalty among children.

RISK FACTORS

▶ African Americans face alarming rates of health and economic disparities resulting from **systematic racism and structural segregations** in the U.S. due to a legacy of slavery.

▶ **Internalized racism** may place African American elders at risk for abuse and neglect if elders embrace a cultural heritage that their caregivers are attempting to minimize or negate.

▶ African Americans may have **few opportunities to secure wealth** for retirement, leading to reliance on social security income, disability income, or financial support from caregivers.

▶ African American elders may **distrust institutions**, and be reluctant to seek help in the community, particularly if they consider that they or their families are at risk of being discriminated against on the basis of race.

▶ Recognizing and denouncing abuse or neglect may be particularly painful for African American elders and lead to **denial of abuse** due to the cultural expectations of a strong family unit and respect for the elderly.

▶ The victim may feel **obligated to maintain a caretaker role**, avoiding becoming a burden for their relatives, not sharing their emotional needs, which could lead to loneliness, isolation, or depression.

▶ Little research has been done on culturally adapted interventions for African American families at risk of elder abuse, which may lead to **reluctance to seek specialized services** that could support them as they adapt to the demands of caring for an aging relative.

▶ A lack of external sources of support causes more internal stressors leading to **stressed family networks**.

▶ Special challenges such as racial discrimination, structural segregation, or anger and hopelessness associated with economic and health disparities may lead to **stress, burden of care, and mental health concerns** for caregivers in the African American community.

African American Family Caregivers

One of the largest studies comparing Caucasian (n=425) and African American (n=295) family caregivers of persons with dementia from four cities (Birmingham, Memphis, Boston, and Philadelphia) found that African American caregivers generally reported better well-being than Caucasian caregivers and lower anxiety scores. The relative lack of psychological distress found in African American caregivers may be due largely to **strengths of internal resources** such as appraisal and religious coping. There are also possible mechanisms through which African American family caregivers cope with caregiving such as prior experience with caregiving roles, expectations that caregiving will occur, cultural support for caregiving, and prior experience with adversity (Haley et al., 2004).

Tips for working in the African American Community

RESEARCH IMPLICATIONS

- Additional research is needed on how elder abuse impacts the health of the African American community.
- Research is needed to identify community and professional resources needed to prevent harmful behaviors from reoccurring in African American families (Horsford et al., 2011). These resources can assist health care providers, social service and law enforcement agencies working with African American elders and their families.
- The Elder Justice Roadmap report is a general resource that identifies and prioritizes actions that direct service providers, educators, and researchers can take to benefit older adults facing abuse, neglect or financial exploitation. The full report can be accessed at http://www.ncea.aoa.gov/Library/Gov_Report/index.aspx.

PRACTICE IMPLICATIONS

- Assist African American families and service providers to remain attentive to the socio-historical experiences of African Americans in the U.S. such as racism and structural exclusion, thus ending the cycle of violence (Horsford et al., 2011).
- Focus on cultural strengths to prevent abuse or neglectful behaviors (Horsford et al., 2011).
- Be cognizant of the lasting effects of historical oppression experienced by African American populations as well as structural racism and exclusion that continue to influence the etiology and maintenance of abuse and neglect (Horsford et al., 2011).
- Engage families from a collaborative stance and explore perceptions of abusive or neglectful behaviors (Horsford et al., 2011).
- Help families to identify healthcare, community, and familiar resources available to prevent harmful behaviors from reoccurring.
- Identify points of entry for service delivery systems located in the communities rather than expecting African Americans to reach out to formal institutions that they may not trust (Horsford et al., 2011).
- Target public awareness campaigns in African American neighborhoods (flyers in shopping areas, public transportation, etc.) (Beach et al., 2010).
- Encourage informal caregivers and family members of African American elders and health care and other professionals who interact with older African Americans to be vigilant for signs of financial exploitation among this population (Beach et al., 2010).

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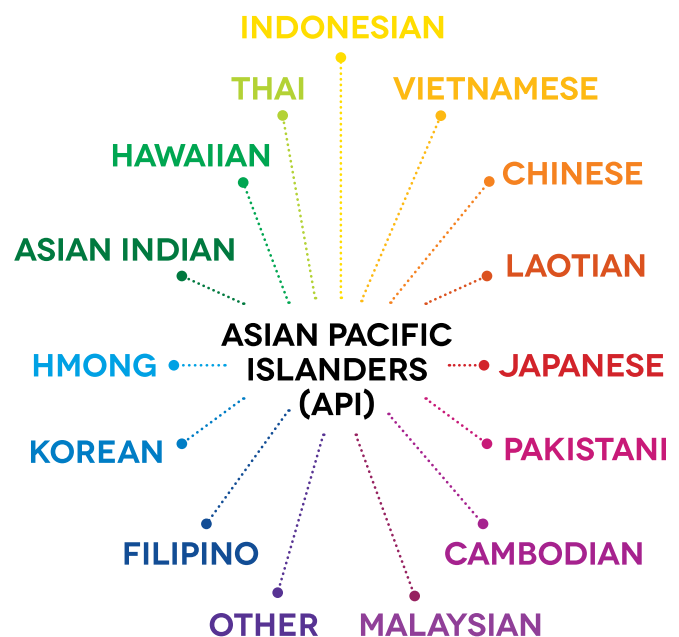National Center on Elder Abuse

Mistreatment of Asian Pacific Islander (API) Elders

KEY TAKEAWAYS

▶ The term "Asian" or "Asian Pacific Islander" encompasses very diverse groups of people, with over 20 different sub-groups.

▶ Culture can be a source of protective and risk factors for API elders. It affects how people perceive abuse and seek help and so should also affect how professionals engage, assess, and intervene.

▶ Don't assume an API elder will behave a certain way because of their ethnicity. If you want to understand their culture, beliefs, views, ask!

▶ In many API cultures, the family or group is emphasized over the individual. This can affect an elder's willingness to admit abuse or seek help. Filial piety is an important cultural value.

▶ When using an interpreter with an API elder be aware that the relationship between them may impact information sharing and reporting.

▶ Choose culturally appropriate words when working with API elders, e.g. the term "abuse" may be unfamiliar or unacceptable, but words like "sacrifice" or "suffering" may be acceptable.

▶ API elders may not openly display strong emotions or feelings. Emotional problems may be presented through somatic complaints.

▶ Psychological abuse, "silent treatment", avoidance, disrespect, etc. can be emotionally devastating for API elders.

▶ There are culturally informed methods of intervention that can be employed with mistreated API elders.

▶ Mistreated API elders may not want to or be able to seek help because of the shame it brings to their family, cultural or religious ideologies of perseverance through suffering, lack of culturally competent services, language barriers, lack of awareness of services, immigrant status or other reasons.

"Asian Pacific Islander" Is a Very Diverse Group

The 2010 U.S. Census reports that out of the total U.S. population, 17.3 million persons designated their race as Asian or Asian in combination with other races (e.g. Native Hawaiian, or other Pacific Islander) This group of people, commonly referred to as **Asian Pacific Islanders (API), is very diverse, consisting of a variety of sub-groups including: Chinese, Filipino, Korean, Japanese, Asian Indian, Vietnamese, Laotian, Cambodian, Thai, Hmong, Hawaiian, and other distinct ethnic groups**. With this diversity comes a variety of languages, customs, and culture. This fact sheet will focus on the intersection of culture and elder mistreatment in the largest and most studied API groups in the U.S.: the Chinese, Korean, Japanese, Asian Indian, Vietnamese, and Filipino populations. Different research refers to the population studied in different ways, from using general terms (e.g. Asians, South Asians) to specific terms (e.g. Koreans, Japanese) so terminology will necessarily differ throughout this document.

INDONESIAN

THAI   VIETNAMESE

HAWAIIAN   CHINESE

ASIAN INDIAN   LAOTIAN

ASIAN PACIFIC
ISLANDERS
(API)

HMONG   JAPANESE

KOREAN   PAKISTANI

FILIPINO   CAMBODIAN

OTHER   MALAYSIAN

The Impact of API Culture on Elder Mistreatment

Lack of services that are culturally appropriate can impede service and increase vulnerability to abuse for older adults from other cultures. (Henderson, 2011)

> To better understand the occurrence of elder mistreatment in API groups, and to provide appropriate services to diverse elders, **it is important for intervening professionals to learn about the impact of culture upon behavior and the practice environment**.

Culture impacts the definition of elder mistreatment, help seeking behavior, methods of intervention, and more. It can be **a source of both risk and protective factors for an elder**. This research brief provides insight into general cultural beliefs, views, norms, etc. of API groups and how they may relate to and influence elder mistreatment. Whether or not an API individual or family holds these beliefs, views, etc. depends on a variety of factors (e.g. level of acculturation or assimilation into mainstream U.S. culture, education). **Do not assume they will behave a certain way because of their ethnicity** (Pablo & Braun, 1997). The elder is the expert on their own culture and if information is needed, it is important to ask them to explain their beliefs, views, norms, etc. Beliefs, views and norms may change over time.

This **RESEARCH BRIEF** synthesizes the latest available information and research relating to the mistreatment of API elders. Information is provided on **API perception of elder mistreatment**, **API emphasis of the group/family over the individual**, **API help seeking behavior**, **assessment of elder mistreatment**, **considerations for intervention**, and **on cultural considerations for elder mistreatment by API sub-group**. (e.g., Japanese, Korean)

RESEARCH FINDINGS ON
API Perception of Elder Mistreatment

Asian elders tend to **define elder abuse only within a family relations setting**. They may focus on children's lack of care or inappropriate treatment. Given this narrow definition of elder abuse, these and other ethnic group elders may be at increased risk for abuse from non-family members. (Moon, 2000)

Research studies report that elders, from a variety of cultural and ethnic groups including API, can **perceive psychological abuse to be the worst form of abuse** or as harmful as physical abuse. (Moon, 2000)

A person's ethnicity may not be a strong predictor of their beliefs or behavior. **Degree of acculturation into U.S. society and socioeconomic factors should be considered** when assessing risk for and perceptions of elder abuse in API groups. (Moon, 2000)

RESEARCH FINDINGS ON
API Emphasis of the Group or Family over the Individual

- API elders from **a culture which emphasizes the group over the individual** may only admit mistreatment if they are certain that family and perpetrators will not be negatively affected by the admission. (Tomita, 2000)
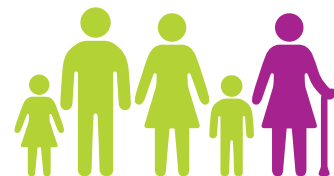
- In South Asia, **the family is afforded higher value than the individual**. South Asian societies tend to commend women who endure violence for the sake of keeping their family together. Women may believe in the concept of "karma" or fate, and may feel that their abuse is their "karma". (Dasgupta, 2000)

- **Filial piety (i.e. duty of respect, obedience, and care of one's parents and elderly family members), family solidarity, and family interdependency can be an important source of support for elders in API families**. These elders may have lower expectations for service provision from outsiders and a history of discrimination may discourage them from seeking services. (Moon, 2000)

- Cultural disparity between younger and older generations found in Asian immigrant families is a major source of increased vulnerability among elders and of family conflict. (Moon, 2000)

RESEARCH FINDINGS ON *API Help Seeking Behavior for Elder Mistreatment*

- Religious institutions may be a culturally acceptable and important resource for older immigrants who have been neglected, exploited, or abused. (Brownell, 1998)

- Even if abuse is detected in an API family, it may be denied or an **intervention may be rejected if methods of detection and intervention are not provided in a culturally sensitive manner**. (Brownell, 1998)

- Factors that may inhibit help seeking by an API elder include: **hesitancy to admit abuse occurred, language and cultural barriers, reliance on self for problem solving, lack of awareness of services, lack of perceived helpfulness of services**. (Moon, 2000)

- API victims of elder abuse may not want to reveal the abuse to outsiders as it is a **source of shame** and so may be inclined to suffer in silence or keep it within the family. (Moon, 2000). Therefore, obtaining reliable prevalence estimates may be difficult. (Chang & Moon, 1997). There may be a prohibition against sharing private information with outsiders. If someone breaks this privacy code, they are considered traitors to the family and may be sanctioned. South Asians view the legal system and the police as sources of oppression and shame. (Dasgupta, 2000)

- Asian victims of abuse are **more inclined to reveal their mistreatment to healers and medical providers** because medical problems are more socially acceptable than family related or psychological problems. (Leung, 2008)

RESEARCH FINDINGS ON *Cultural Considerations for Assessment of API Elder Mistreatment*

- If an interpreter is used to communicate with a family about potential abuse, **the relationship between the interpreter and the family must be considered**. The family may be reluctant to disclose problems to a member of their community and a community representative may not want to disclose a problem to protect the reputation of the family, community, etc. (Sanchez, 1997 as cited in Brownell, 1998)

- **The term "abuse" may be unfamiliar** or even unacceptable to elders, particularly if they do not speak English as their primary language. It may be beneficial to use terms that are culturally appropriate, e.g. with Asian elders using the term "suffering" or "sacrifice". (Tomita, 2000)

- In API families, **there may be a less open display of emotion**. Displaying one's strong emotions publicly is considered to be showing a lack of restraint and immaturity (Sue, 2006). In Asian cultures, the mind and the body are considered to be one. Therefore, emotional problems may be presented through somatic complaints. (Sue, 2006)

- For some Asian Americans, **verbal expression of emotions to outsiders is not typical**, so clear answers to questions asked regarding mistreatment may not be forthcoming. More subtle methods like using photographs, sharing stories, philosophical discussions, etc. may be effective. (Lee, 1997)

> " Building trust with an elder from a different culture may take time, so don't rush it. "
> (Henderson, 2011)

STEPS TO CONSIDER *When Assessing Mistreatment of API Elders* (Tomita, 2000)

1 **Explore the elder's degree of collective self or commitment to the perpetrator.** (e.g. how much of their resources do they share and how do they feel about it?)

2 **Explore the cultural context of elder mistreatment.** (e.g. how elders are viewed/treated, what is culturally acceptable and unacceptable?)

3 **Assess the likelihood of outside intervention.** For example, Japanese elders with a strong sense of collective/group identity may not allow an outside practitioner into the family circle because of the shame it will bring to them and their entire family.

4 **Look for subtle behaviors that are indicative of psychological abuse and neglect.**

RESEARCH FINDINGS ON *Cultural Considerations for Intervention in API Elder Mistreatment*

- Since many API elders are unlikely to report elder abuse, **community based organizations have to step up to prevent and report abuse**. Effort must be undertaken to inform each API community about: (1) what elder abuse is, (2) how it affects the well-being of the victim, (3) what can be done to help the senior and the perpetrator by seeking help, and (4) that the ultimate goal of the intervention is to restore safety and health of the older person. (Moon, 2012)

- API elders may not agree to **unfamiliar suggestions offered by outsiders** and may have never thought about seeking resolution or a solution. (Tomita, 2000)

- When working with API elders, **using tentative statements that are not accusatory preserves the elders' dignity and can also help** them realize that outside their family, the abusive behavior is viewed as unacceptable and that most elders are not treated the way they have been treated. (Tomita, 2000)

- When API elders cite loyalty to their family as a reason not to stop mistreatment, practitioners may **emphasize an elder's obligation to stop the mistreatment in order to end the negative effects of the situation and benefit the family as a whole** as well as to get help for the perpetrator. (Tomita, 2000)

- Elders may not want to report abuse out of fear of retaliation and out of guilt for causing trouble for the perpetrator. To help API elders to consider seeking outside help and reporting elder abuse, it is important to **emphasize that ending the abuse helps the perpetrator in the short and long-run** and that not all perpetrators end up in Jail. (Moon, 2012)

- There should be an absolute assurance to the victims and family members, especially in case of a family member perpetrator, that none of the information about the elder abuse will be provided to their community. Many API people came from countries where confidentiality was not highly respected, so **confidentiality needs to be ensured.** (Moon, 2012)

- API elders that are used to sharing their resources (e.g. housing, pensions) may not be aware that this is a source of power for them and that resources may be negotiated or exchanged. **Alliances formed with senior centers, law enforcement or protective services, and non-abusive friends and relatives may also provide empowerment to elders.** (Tomita, 2000)

- **Partnering with a third party that is established in the API elder's community may create new access for professionals.** They can assist in assessment, implementation, and enforcement, while allowing the elder to maintain their community standing. (Tomita, 2000)

- Given that some abuse of API elders is perpetrated by adult children, **professionals that intervene may need to serve as "mediators" between parents and children to facilitate communication and problem solving**. (Chang & Moon, 1997)
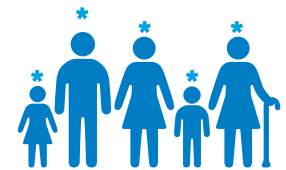
> Because of the diversity represented within the designation "Asian" or "Asian Pacific Islander", it is important to further examine research findings on the intersection of culture and elder mistreatment by API sub group.

COMMUNITY INTERVENTION

NO UNFAMILIAR SUGGESTIONS & ACCUSATORY STATEMENTS

EMPHASIZE BENEFITS TO FAMILY

EMPHASIZE ENDING ABUSE HELPS PERPETRATOR

ENSURE CONFIDENTIALITY

FORM ALLIANCES TO PROVIDE EMPOWERMENT

PARTNER WITH A THIRD PARTY

USE A MEDIATOR

ASIAN INDIAN ELDERS

▶ Traditionally, in Indian culture, emphasis was placed on the obligation of sons and their wives to respect, obey, and provide care for their parents, as the proper place for elderly people is within the family. A patriarchal system exists where the oldest male is the head of the family and responsible for preserving family honor and kinship relationships. A breakdown of the family system is regarded as a failure. (Nagpaul, 1997)

▶ The elderly traditionally are responsible for keeping the family together, resolving differences between family members, and keeping family problems from public view. However, family dynamics may change such that the elderly lose their authority and status, compounding the license to abuse. (Segal, 1999)

▶ Elder abuse is so conflicting to Indian cultural values that to acknowledge it may be an affront to the foundation of values and tradition. (Segal, 1999)

▶ In traditional Hinduism, the female is not considered to be an individual on her own; rather, everything is defined in her relationship with her husband. (Nagpaul, 1997)

▶ Asian Indian adult children leaving the home of the extended family may be viewed by their parents as abandonment. Changes in lifestyle, breaking away from traditions, etc. by the younger generation, may be perceived as neglect by the elder and cause psychological pain. (Nagpaul, 1997)

▶ Asian Indian parents continue to invest in their children into adulthood and so there may be financial interdependence within the family, potentially setting the stage for financial abuse. Parents expect to be cared for in old age. The eldest male controls the family finances in a traditional Indian family. (Nagpaul, 1997)

▶ Asian Indian elders may observe dietary restrictions for religious reasons. Willful violation of these restrictions by family or others may be viewed as neglect or mistreatment by the elder. (Nagpaul, 1997)

▶ Asian Indian elders may view behaviors that go against their philosophical or religious beliefs as psychological abuse. (Yick, 2009)

▶ Because age is venerated in Indian culture, physical abuse of the elderly appears to be uncommon. (Nagpaul, 1997)

▶ In a situation of elder mistreatment, Asian Indians may prefer to engage family and friends as an intervention, which exemplifies the traditional Asian value of family solidarity. An intervention which implies that the family is not doing their job will not be acceptable to caregiver or elder. (Nagpaul, 1997)

CHINESE ELDERS

▶ Elderly Chinese may be disinclined to disclose abuse to preserve family honor and harmony. Many Chinese may perceive elder abuse as a private family matter. Studies in Chinese societies show that abusers are often the victim's own offspring. (Yan, Tang, & Yeung, 2002)

▶ In a study of 39 Chinese older adults, elder mistreatment was mostly characterized as caregiver neglect. Psychological mistreatment was identified as the most serious form of mistreatment. Other than seeking help from local community service groups, Chinese older adults have limited knowledge of help-seeking resources. (Dong, et al, 2011)

▶ In a study of Chinese Canadian elders, disrespect from family members was identified as the key form of elder abuse. This is a culturally specific form of abuse because it violates the Chinese cultural value and norm of family member respect for elders and is different from Western views of psychological abuse or neglect. (Tam & Neysmith, 2006)

▶ A study of Chinese Canadian elders reported that immigrants may be socially isolated from resources, programs, and services, which along with limited English proficiency may make them dependent on family members to get their needs met. Isolation is a risk factor for elder abuse. (Tam & Neysmith, 2006)

▶ Younger Chinese may adhere less to the notion of filial piety and Chinese elders are no longer guaranteed power, prestige, or care in the family. This could mean more Chinese elders living alone or not having adequate care. (Yan, Tang, & Yeung, 2002)

▶ In a study of 195 Taiwanese adults aged 60 or older, measurement results for 44 adults (22.6%) indicated a greater likelihood of suffering psychological abuse. (Wang, 2006)

FILIPINO ELDERS

▶ Traditional Filipino culture places high value on collectivism and the family. Two important basic family values are the concepts of debt and shame. Children are expected to repay debt to parents and others for raising and helping them. Failure to repay the debt leads to shame. Family problems may be kept within the family to avoid shame. (Pablo & Braun, 1997)

▶ Filipinos may manifest conflict that has not been resolved as anxiety, sadness, or a physical illness. (Pablo & Braun, 1997)

JAPANESE ELDERS

▶ In a Japanese study of 78 frail elders in Japan, an elder abuse prevalence rate of 17.9% was found. Abuse identified included emotional abuse, neglect, physical abuse, and substance abuse. The number of elderly abused by daughter-in-law caregivers was higher than those abused by others. (Anme, 2004)

▶ Filial piety, the eldest son's duty to provide for the care of elderly parents, has a long tradition in Japanese culture. However, the primary responsibility for provision of care traditionally falls to the eldest son's wife. However, in some parts of Japanese society there has been a decline in the ethic of filial piety. (Arai, 2006)

▶ Japanese caretakers of the elderly often are trapped in a quandary in that they experience the burden of caretaking and want relief, yet feel compelled to provide support. (Arai, 2006)

▶ If Japanese adult children do not provide care for their elderly parents, traditional Japanese values consider this abusive (showing no respect) or socially unacceptable. (Arai, 2006)

▶ In Japanese culture, intentionally not speaking to someone is an extreme form of punishment. Use of avoidance and silence can be as emotionally devastating as physical abuse. (Tomita, 1994)

▶ In a study defining elder mistreatment, 80% of Japanese American respondents considered psychological abuse among the worst things that can be done to an elderly person by a family member. (Anetzberger, 1996)

▶ The idea of suffering quietly in a stoic manner is prevalent in Japanese culture. Fatalism, or attributing events to fate, and the Buddhist concept that life is full of suffering may also play a role in how an elder views their situation. They may not recognize elder mistreatment as mistreatment, but just more suffering that they must endure. (Tomita, 1994). Because they share a collective identity, Japanese parents may blame themselves for their adult child or relative's misdeeds and feel it necessary to suffer the consequences of their failure. (Tomita, 2000)

▶ If an elder's children or grandchildren fail to adhere to Japanese notions of family obligation, it may not be productive to ask the elder to think of their own needs. Instead it may be helpful to focus on the family's needs and engage the elder in finding solutions that will benefit the family and themselves. (Tomita, 1994)

▶ In Asian cultures, the family and community may be viewed as the best sources for problem solving and seeking help from Western professionals may be viewed as against Asian philosophy and non-productive. (Tomita, 1994)

▶ If a Japanese elder believes that they are betraying the group they belong to by revealing abuse or neglect, they may not admit to the abuse (Tomita, 1994)

KOREAN ELDERS

▶ In one study comparing elder Korean immigrant women with African American and Caucasian women, Korean women were significantly more tolerant of potentially abusive situations. Korean women were significantly less likely to seek help than the comparison groups. (Moon & Williams, 1993)

▶ In a research evaluation of tolerance of potential financial exploitation, 45% of Korean American elderly versus 2% of White and African American elderly said it was okay for an elderly parent's money to be used by an adult child for themselves (Moon & Benton, 2000). This tolerance may reflect the Korean norm of transferring one's wealth and property to the eldest son when one gets old. Korean American elders may be at risk for financial abuse by their children. (Moon, 1998)

▶ One study of 124 Korean Americans showed that while the vast majority associated physical, financial, and psychological abuse with elder mistreatment, a lack of familiarity with the concept of neglect as elder mistreatment was indicated. A high tolerance for elder neglect in this community may lead to potential increased prevalence of neglect. Elderly Korean males and those less educated, displayed lower odds of help seeking. Males showed a high tolerance for elder mistreatment, as seeking help may assault their dignity or shame their family. (Lee & Shin, 2010)

▶ How long one has resided in the U.S. appears to be an important predictor of help seeking in neglect situations, with those who have lived longer in the U.S. more likely to seek help. Lack of knowledge of services may also lead elders to accept mistreatment. (Lee & Shin, 2010)

▶ In Korean society, filial piety is emphasized and so sending elder parents to a nursing home, instead of taking care of them, is viewed as shameful and may be considered abuse (Jang, 2009). In one study, Korean immigrants self-identified elder abuse in terms best understood in the context of Korean cultural norms. Examples of abuse cited included adult children placing parents in a nursing home, not wanting to live with their elderly parents, or not showing proper respect. (Chang & Moon, 1997)

VIETNAMESE ELDERS

▶ Vietnamese elders have a strong sense of self-reliance and family preservation. They feel obligated to keep family problems within the home and disclosure of abuse or neglect would be considered as bringing shame to the family. (Le, 1997)

▶ Psychological intimidation, including use of "silent treatment" against Vietnamese elders was reported to be a prevalent form of mistreatment. In Vietnamese culture, not speaking to someone is extreme punishment. The use of avoidance and silence may be more devastating emotionally than physical abuse. (Le, 1997)

▶ Language barriers, fear of losing family members they rely on, fear of bringing shame to the family, and lack of familiarity with services available to them keep Vietnamese elders from seeking help. (Le, 1997)

▶ Vietnamese elders are not used to disclosing personal feelings openly with others. Instead, in times of distress or loss, they may complain to doctors of physical symptoms. Indigenous healers may be used in refugee communities. (Le, 1997)

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NOTE: * *Indicates that the source is a peer-reviewed journal. Other pertinent sources (e.g. presentation, book, educational curriculum) are also included in this review for informational purposes, even though they may not be peer-reviewed. The specific author should be consulted regarding questions on their content, research and/or review process.*

For more information:
**www.ncea.aoa.gov**

Mistreatment of Latino Elders

GLOSSARY OF COMMONLY USED TERMS

▶ **Comunidad** – community; interrelations with those who share common culture, customs and personal interests

▶ **Familia** – the family; a cohesive unit

▶ **Machismo** – pride in being male; virility; masculinity

▶ **Marianismo** – matriarchy; a household lead by a female role; femininity; family care taker

▶ **Promotores** – advocates that act on behalf of an older adult whose goal is to provide prevention or intervention services and resources (often times from a community based setting)

▶ **Vergüenza** – shame, embarrassment or humiliation

Note that due to many different dialects of the Spanish language, the terms used in this fact sheet may be interpreted differently in each country. Several terms have been identified that have interchangeable meanings such as: abuse & mistreatment as well as perpetrator & abuser.

KEY TAKEAWAYS: *Mistreatment Of Latino Elders*

- Culture can be a protective or risk factor for Latino elders. It affects how they perceive abuse and seek help and so should also affect how professionals and authorities engage, assess, and intervene.

- Don't assume a Latino elder will behave a certain way because of their cultural heritage. If you want to understand their beliefs, ask!

- La *familia* is emphasized over the individual in many Latino cultures affecting an elder's willingness to admit abuse or seek help.

- The utilization of *promotores* is a culturally informed method of intervention that can be employed with mistreated Latino elders.

- Latino elders may not perceive financial exploitation as abuse because interdependency is common in Latino families.

- Some reasons Latino elders may not want to seek help are: the *vergüenza* it brings to their family, cultural or religious ideologies. Lack of culturally competent services, language barriers, and lack of awareness of services.

- An elder's willingness to report abuse and understand the services available to them may be influenced by where they were born (U.S. vs. outside of the U.S.), English proficiency, and level of acculturation to U.S. society.
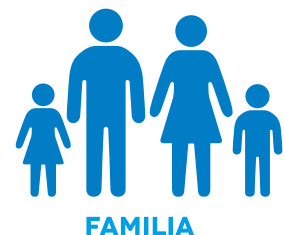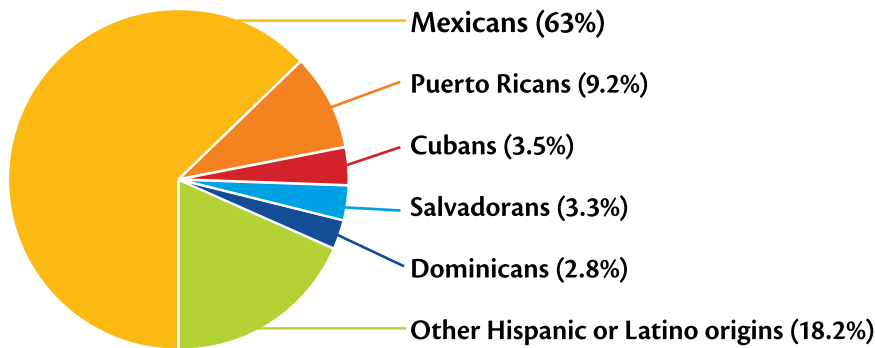
FAMILIA

PROMOTORES

VERGÜENZA

This **RESEARCH BRIEF** synthesizes the latest available information and research relating to the mistreatment of Latino elders, providing insight into **general cultural beliefs, views, norms, of Latinos and how they relate to and influence elder mistreatment**.

Statistics

"Hispanic or Latino" refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race (Centers for Disease Control and Prevention, 2011). They are the nation's largest ethnic minority and account for about 17% of the total US population (U.S. Census Bureau, 2011). *Hispanic* can be interpreted as an ethnic term acknowledging cultural ties back to Spanish heritage. *Latino* refers to Latin American decent blending Native American, African and Spanish heritage (Franco et al, 2000).

LATINO POPULATION SUBGROUPS & STATISTICS

- Mexicans (63%)
- Puerto Ricans (9.2%)
- Cubans (3.5%)
- Salvadorans (3.3%)
- Dominicans (2.8%)
- Other Hispanic or Latino origins (18.2%)

CDC 2010

Research Findings on Prevalence

Due to the limited number of studies of elder mistreatment in the Latino population as well as study design variations, it is difficult to estimate an exact prevalence rate. A study of a nationally representative sample of older adults, found that **Latinos were less likely to report both verbal and financial mistreatment** than their White counterparts (Laumann et al, 2008).

A study that specifically looked at 198 Latino elders, found that **40% experienced at least one type of abuse and 21% experienced multiple types** (Deliema et al, 2002). Among those that have experienced mistreatment, nearly **25% reported psychological abuse, 10.7% reported physical abuse, 9% reported sexual abuse, 16.7% reported financial exploitation, and 11.7% reported caregiver neglect**. Despite the high rates of reported mistreatment, only 1.5% of respondents indicated they had reported abuse of any kind to Adult Protective Services (APS) in the past year.

TYPES OF ABUSE REPORTED

40% — at least one type of abuse

21% — multiple types of abuse

0%   100%

- Psychological Abuse
- Physical Abuse
- Sexual Abuse
- Financial Exploitation
- Caregiver Neglect

Research Findings on Cultural Values & Risk Factors

Language barriers and lack of cultural competency can impede services and create barriers to understanding the context of abuse for older adults from other cultures (Pinquart & Sorensen, 2005; Henderson, 2011). To better understand the occurrence of elder mistreatment in Latino groups, and to provide appropriate services to diverse elders, it is important for intervening professionals to learn about the impact of culture upon behavior and the practice environment.

Familism emphasizes that **the need of the family unit supersedes the need of individual** family members. Imbued with a sense of pride for *la familia*, a Latino elder may avoid seeking help or reporting mistreatment to avoid *vergüenza* (Montoya, 1998; Vazquez & Rosa, 1999).
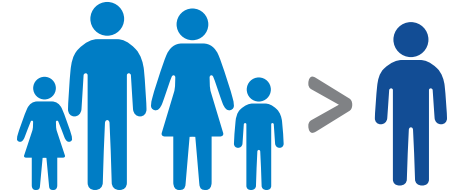
Latinos may have a **preference to receive in-home care** and rely on family caregivers. Latinos have low utilization rates of long term care (Cox & Monk, 1990; Johnson et al, 1997; Herrera et al 2008). This is most often the case among Mexican Americans (Crist, 2002; Lim et al, 1996; Wallace & Lew-Ting, 1992; Herrera et al, 2008). However, high levels of interdependence may place elders and their caregivers at risk for abusive situations. Language barriers, lack of financial resources, limited insurance, and isolation are factors that may facilitate interdependence (Montoya, 1998; Franco et al, 2000). Some adult children caregivers may be financially dependent on their elderly parents and become abusive because they resent their own dependency (Franco et al, 2000).

A Latina elder who is abused may believe that she should have the ability to endure abuse and that violent partnerships are commonplace. A Latina abuser may become abusive because she takes on more responsibilities than she can handle (Vazquez & Rosa, 1999; Dakin et al, 2009). Abusive marital relationships may be precipitated by **gender role expectations** of *marianismo*, mandating women to tolerate abuse and focus on serving others, economic dependence, and societal expectations disapproving of marital dissolutions (Vazquez & Rosa, 1999; Parra-Cardona et al, 2007).
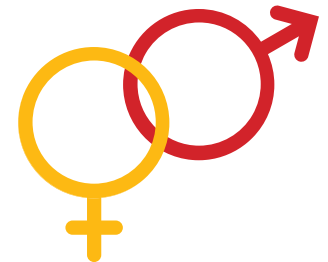
The patriarch is the family provider and protector and expects to be included in communications when outsiders are involved with the family. If a male elder is being mistreated, he may not want to reveal the loss of respect and status expected in his position (Montoya, 1998; Vazquez & Rosa, 1999). **Machismo may also play a role in self-neglect**. In a small study of Latino custodial grandfathers who neglected their own personal or medical care, the elders discussed prioritizing the needs of the family above their own as a sacrifice they made for their family members (Bullock & Thomas, 2007).
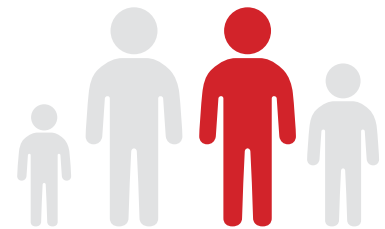
Research Findings on Perceptions of Mistreatment

When asked to define elder mistreatment, 62.5% of Puerto Rican respondents considered **psychological neglect (e.g., excluding from activities, isolation) among the worst things that can be done to an elderly person by a family member**. Deliberate acts of aggression, such as, taking money without permission and striking or yelling at elders were also perceived to be forms of mistreatment (Anetzberger et al, 1996). Refusing to provide basic and emotional needs of Latino elders has been reported as one of the most frequent forms of elder abuse (Sanchez, 1999).

Latino elders often **do not identify financial abuse as a form of mistreatment** and may not consider providing adult children or grandchildren with money or other resources to be exploitative (Sanchez, 1999; Dakin & Pearlmutter, 2009; Bullock & Thomas, 2007). Many financial exchanges are rooted in familial and cultural expectations of support for *la familia* and *la comunidad* at large (Sanchez, 1997).

Caregivers may be misinformed about what constitutes abuse. One study found that some caregivers believed physical abuse to be the only reportable type of mistreatment (Herrera et al, 2008).

In a study of older women, Latinas identified putting an elderly relative in a nursing home as being an abusive act (Dakin & Pearlmutter, 2009). In the study of Mexican-American caregivers, **78% indicated they would feel guilty if they did not care for an older relative in need** and **57.8% thought that it was assumed that the women would care for aging relatives in their families** (Herrera et al, 2008).

78%
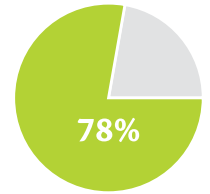
Caregivers that feel guilty if they did not care for an older relative

57.8%
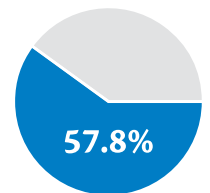
Caregivers that assumed that women would care for aging relatives in their families

Research Findings on Domestic Violence

Elders may be at considerable risk for mistreatment if they experienced domestic, physical or sexual abuse before age 65 (DeLiema et al, 2012). In a national study of adults aged 55 and older, researchers found that **Latinos were more likely to be victims of intimate partner violence** compared to Whites (Jasinski & Dietz, 2003). Female victims are likely to have abusers who are husbands or former husbands (Grossman & Lundy, 2003). The *machismo* ideology in Latino culture has been strongly linked to domestic violence (Enguidanos et al, 2014).

Violent domestic partnerships may be common within the cultural setting and Latinos may prefer interventions that preserve and strengthen the family unit (Dakin & Pearlmutter, 2009).

Research Findings on Help-Seeking Behavior and Beliefs

In a survey of Mexican-Americans, some elders were **unaware of the option of reporting abuse anonymously** and reluctant to contact authorities out of fear that a suspected abuser would retaliate (Herrera et al, 2008). Caregivers who identified as "Mexican-American" as opposed to "Hispanic" said that people in their culture would be **less likely to report abuse**, even though many were more cognizant of abuse (Franco et al, 2000). However, one study showed that most Puerto Ricans would contact authorities if an elderly person was mistreated by a family member (Anetzberger et al, 1996).

Immigrants **considerably underreport mistreatment** due to the family's preference to seek resolution on their own. Involvement of authorities is feared to cause harm to not only the victim but also the family (DeLiema et al, 2012). Some Latino elders may be concerned that they will not be treated with respect by professionals (Blanchard & Lurie, 2004; Herrera et al, 2008).

An elder may feel the need to defend the family member abuser or may **fear that reporting will lead to incarceration**. There is a stigma associated with incarceration because of poor experiences with law enforcement, resulting in a sense of distrust (Enguidanos et al, 2014). The Latino elder may not want to be brought to a place where prosecution is inevitable, because it may impact *la familia* (Dakin & Pearlmutter, 2009).

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Mistreatment of Lesbian, Gay, Bisexual, and Transgender (LGBT) Elders

KEY TAKEAWAYS

▶ Many LGBT older adults are at high risk for elder abuse, neglect and exploitation.

▶ A pressing need for LGBT elders is dealing with social isolation as isolation is a risk factor for elder abuse.

▶ Fear of homophobia or transphobia keep LGBT elders from seeking help and services.

▶ Internalized homophobia or transphobia may affect an LGBT elder's willingness to seek help and put them at risk of self-neglect.

▶ Some LGBT elders choose to hide their LGBT identity and disclosure of that identity against their wishes can cause problems.

▶ Elder gay men and lesbians place high value on self-sufficiency and may be reluctant to accept help.

▶ Be sensitive to an LGBT elder's lack of legal protections, desires, relationships, and potential need to be connected to the LGBT community.

Population Estimates of LGBT Elders

It has been estimated that **9 million Americans identify as lesbian, gay, bisexual, or transgender (LGBT)** (Gates, 2011). It has also been approximated that **1.5 million adults, aged 65 or older, are LGB** (no transgender estimate provided) (Movement Advancement Project (MAP), Services & Advocacy for Gay, Lesbian, Bisexual, & Transgender Elders (SAGE), & Center for American Progress (CAP), *LGBT Older Adults: Facts At A Glance*, 2010). It should be noted, however, that estimates of the LGBT population may vary depending upon measurement methods and consideration of those who may not self-identify as LGBT due to societal stigma.

9 million
LGBT
in America

1.5 million
LGB aged 65+
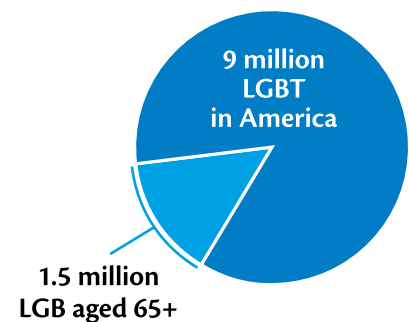
LGBT Elders Face Multiple Challenges

LGBT elders face the typical challenges of aging, including the possibility of elder abuse or domestic violence, in combination with the **threat of discrimination and abuse due to their sexual orientation or gender identity** (Cook-Daniels, 1998). In a 2006 study by Metlife Mature Market Institute, 27% of LGBT Baby Boomers reported that they had great concern about discrimination as they age.
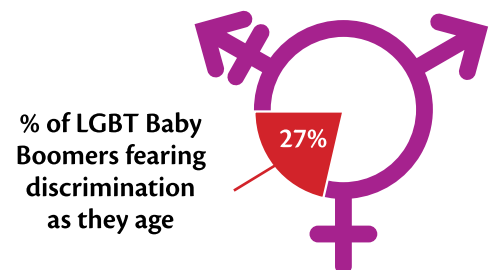
% of LGBT Baby Boomers fearing discrimination as they age

27%

This **RESEARCH BRIEF** synthesizes the latest available information and research relating to the mistreatment of LGBT elders. Information is provided on the **occurrence of abuse**, **isolation as a risk factor**, **issues affecting help seeking**, and **tips for working with LGBT elders**.

# RESEARCH FINDINGS ON *Occurrence of Abuse*

Unfortunately, prevalence and incidence studies regarding the abuse and neglect of LGBT elders are sorely lacking. Available data and information relating to the occurrence of abuse includes:

- In a survey of 416 LGB elders, aged 60 or older, **65% of respondents reported experiencing victimization due to sexual orientation** (e.g. verbal abuse, threat of violence, physical assault, sexual assault, threat of orientation disclosure, discrimination) and **29% had been physically attacked**. Men were physically attacked nearly three times more often. Those who had been physically attacked reported poorer current mental health. Many in the study were still closeted from others. Serious family or personal problems can result from disclosure of an older adult's LGB identity. (D'Augelli & Grossman, 2001)

Experienced victimization

Physically attacked

👤 *= Approx. 10 surveyed LGB elders, aged 60+*
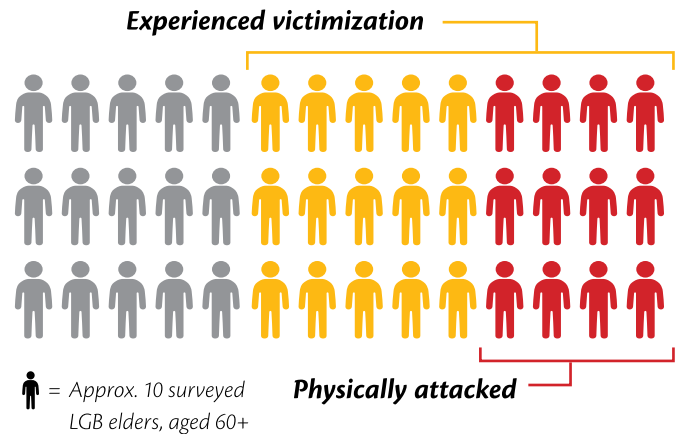
- Caregivers may not be accepting of LGBT elders. In a survey of 3,500 LGBT elders, 55 and older, **8.3% of the elders reported being abused or neglected by a caretaker because of homophobia** and **8.9% experienced blackmail or financial exploitation**. (Frazer, 2009)

- **Prejudice and hostility encountered by LGBT elder persons in institutional care facilities create difficult environments.** Staff may deny an LGBT elder's visitors, refuse to allow same-sex couples to share rooms, refuse to place a transgender elder in a ward that matches their gender identity, or keep partners from participation in medical decision making. (MAP, SAGE, & CAP, *LGBT Older Adults and Inhospitable Health Care Environments*, 2010)

- Transphobia, or social prejudice against transgendered persons, may be more intense than that of homophobia with a **very high rate of violent victimization**. (Cook-Daniels, 1998)

- Cross study investigation reveals that transgender people, in general, are at high risk of abuse and violence. Initial data reported by MAP state that an average of **42% of transgender people have experienced some form of physical violence or abuse**. Further, an average **80% of transgender people have experienced verbal abuse or harassment** (MAP, 2009). Therefore, it is a reasonable assumption that transgender elders may have experienced some form of abuse.

Abuse experienced by transgender people

42% Physical Abuse

80% Verbal Abuse
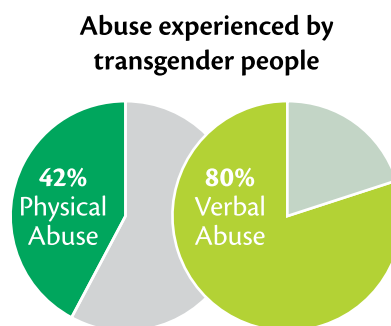
- Many transgender older adults have experienced mistreatment in long term care facilities. Examples include physical abuse, denial of personal care services, psychological abuse, being involuntarily "outed", and being prevented from dressing according to their gender identity. Others are refused admission into long-term care facilities. **The fear of discrimination and its reality result in underutilization of services**. (National Academy on an Aging Society/GSA & SAGE, 2011)

SUMMARY OF WHAT'S HAPPENING INSIDE INSTITUTIONAL AND LONG TERM CARE FACILITIES:

TYPES OF DISCRIMINATION EXPERIENCED BY LGBT ELDERS

- Denial of visitors
- Refusal to allow same-sex couples to share rooms
- Refusal to place a transgender elder in a ward that matches their gender identity
- Keeping partners from participation in medical decision making

TYPES OF MISTREATMENT EXPERIENCED BY TRANSGENDER ELDERS

- Physical abuse
- Denial of personal care services
- Psychological abuse
- Being involuntarily "outed"
- Being prevented from dressing according to their gender identity
- Refused admission

RESEARCH FINDINGS ON *Isolation as a Risk Factor*

"A focus group reported that the most pressing health and human service need for LGBT elders' is **dealing with social isolation**. Isolation is a risk factor for elder abuse. LGBT elders are more likely to age alone than heterosexuals." (Frazer, 2009)

"Many LGBT older adults are at high risk for elder abuse, neglect, and various forms of exploitation because of **living in isolation and fear of the discrimination** they could encounter in mainstream aging settings."

(National Academy on an Aging Society/GSA & SAGE, 2011)

ISOLATION

RESEARCH FINDINGS ON *Issues Affecting Help Seeking*

- In growing up in a homophobic or transphobic environment, some LGBT elders may **go to extraordinary measures to hide their sexual orientation**. There may be such significant stigma for these elders that they will not label themselves. This may affect an abuse victims willingness to seek help, out of fear of needing to "out" themselves to authorities and face possible hostility. This may also affect their desire to enlist home care services out of fear of abuse. (Cook-Daniels, 1998)

- LGB adults from older generations lived under **severe stigmatization of their identities**. Many victims of attacks due to sexual orientation do not tell others of the attacks, out of fear that their sexual orientation will be disclosed or that authorities will act with hostility or indifference. (D'Augelli & Grossman, 2001)

- Victimization because of sexual orientation can lead to **internalized homophobia manifested as guilt or shame**. Victims may come to believe that they are not worthy people and deserve loneliness, poor living conditions, and ill health. They may not want to seek or accept help and are at risk of self-neglect. (D'Augelli & Grossman, 2001, Cook-Daniels, 1998)

- For a victim of abuse in a same-sex relationship, it may be difficult to seek help because of the **personal, familial, and societal risks in coming out as gay or lesbian** and as a victim of domestic violence. (Perilla, Frndak, Lillard, & East, 2003)

- Abusers may use victim fear of homophobia or **threaten to "out" their victims** to others as tools of control. (Cook-Daniels, 1998)

- **Legal discrimination** may discourage elder LGBT abuse victims from leaving abusive relationships because they may have no or limited legal rights to assets shared with the partner. (Cook-Daniels, 1998)

"Gay men and lesbians tend to place high value on self-sufficiency and so may be hesitant to accept help in old age." (Cook-Daniels, 1998)

HIDING IDENTITY

STIGMA

GUILT & SHAME

RISKS OF COMING OUT

THREATENED TO BE "OUTED"

LEGAL DISCRIMINATION
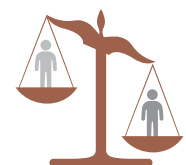
TIPS FOR WORKING WITH LGBT ELDERS (Cook-Daniels, 1998)

▶ Be aware of the lack of legal protections for LGBT elders and the potential impact. For example, an elder gay man with limited income has no legal right in many states to a portion of his abusive partner's income.

▶ It is imperative that all who interface with the LGBT elder use the name and pronoun (e.g. he, she) used by the elder, regardless of legal identification or genitalia.

▶ Connect and build rapport with the LGBT elder by asking about their career/profession, friends, and personal effects.

▶ Listen especially carefully to the LGBT elder's input and desires.

▶ Be aware that not all couple relationships are heterosexual. Use the same terminology used by the elder (e.g. partner, roommate, friend) when referring to the other member of the couple. Ask the elder if the partner/roommate/friend can be counted on to provide care or financial assistance to them. Keep in mind that a large age gap between partners in a gay couple doesn't necessarily imply an exploitative relationship.

▶ Be prepared to be able to connect the elder to community resources for LGBT elders should they so desire (e.g. if they want to talk about being gay, lesbian, or transgendered).

▶ Lesbian and gay elders may have close networks of friends that may serve as a protective factor.

IMPORTANT NOTE: *The information contained in this research brief is taken from pertinent research articles, policy reports, etc. available at the time of creation. While some articles are scholarly peer reviewed research articles, others have been created by the organization cited. The author or organization should be consulted regarding questions on their content, research and/or review process.*

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Abuse of Adults with a Disability

Sadly, people with disabilities get abused, sometimes at the hands of people who help or care for them. Care providers and personal assistants, including family members and service providers (paid or unpaid) can be abusive. When abuse occurs, a disabled person's personal health, safety and emotional well-being may be at risk, along with their ability to engage in daily life activities.
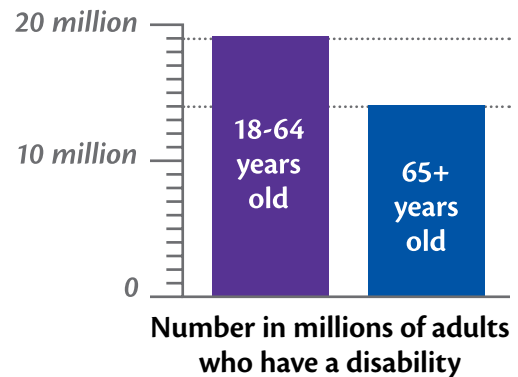
Approximately 1 in 8 of All U.S. Adults Has a Disability

1 in 8 U.S. adults aged 35 to 64 has a disability

1 in 3 adults aged 65 or older has a disability

(2010 American Community Survey – U.S. Census)

Number in millions of adults who have a disability

Who Uses Personal Assistance Service (PAS)?

PAS refers to assistance provided in performing activities associated with well-being, comfort, safety, appearance, and community interaction. Approximately 14.8 million American adults received assistance with activities of daily living in 1995. The majority of PAS users live in the community and are older than 65 years of age.

How is PAS provided?

Among community dwelling PAS consumers:

79% use volunteer/unpaid PAS only, often a family member or friend.

11% use both volunteer and paid PAS.

10% use paid PAS only.

(World Institute on Disability, 2000)

What Does the Research Say?

- **30% of adults with disabilities**, who used PAS for support of activities of daily living, **reported one or more types of mistreatment** (i.e. physical abuse, verbal abuse, financial abuse) by their primary provider. Adults with lower incomes were the most likely to experience mistreatment. (Oktay & Tompkins, 2004)
- In a study of 342 adult men, **55% of men experienced physical abuse** by any person after becoming disabled. Nearly **12% of these men stated they experienced physical abuse by a PAS provider** over their lifetime. (Powers, et al, 2008)
- In a study of Canadian women and men, **97% of whom were age 25 or older, the prevalence of interpersonal violence (IPV) was greater for those with activity limitations as compared to those without them**. An activity limitation is a difficulty encountered by an individual in executing a task or action. Women and men with activity limitations, compared to those without them, were more likely to report more severe and recurring violence. When comparing men and women with activity limitations who experienced IPV, women encountered more frequent and severe violence. (Cohen, et al., 2006)
- In 2010, the age-adjusted, serious violent crime (e.g. rape, robbery, assault) victimization rate for persons with disabilities was 16 per 1000 persons. **This is triple the rate of 5 per 1,000 persons for those without disabilities**. Data was based on non-institutionalized U.S. persons age 12 or older. (Bureau of Justice Statistics, 2011)

## *What Does the Research Say?* CONTINUED

- Institutionalized adult women with disabilities reported a **33% prevalence of having ever experienced IPV** versus **21% for institutionalized adult women without disabilities**. (Barrett, et. al., 2008)
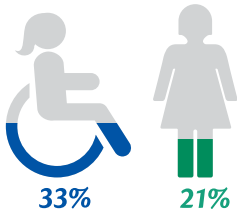
**Percentage of women in institutions who have ever experienced IPV**

33%   21%

- In one sample of **sexually assaulted women age 55 and over, 33% of the women had physical disabilities** and **52% had a psychiatric diagnosis**. (Eckert & Sugar, 2008)

- In an anonymous sample, **68% of 305 adult women with disabilities reported experiencing one or more types of abuse** in the preceding year. Of those abused, 30% experienced sexual abuse in the preceding year. (Curry, et al., 2009)

30% sexual abuse
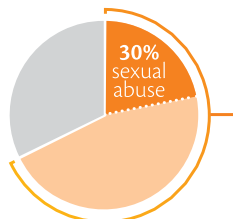
68% of women with disabilities reported experiencing abuse in preceding year

- When considering lifetime abuse by any perpetrator, a sample of 200 adult women with disabilities indicated that **67% had experienced physical abuse and 53% had experienced sexual abuse**. (Powers, Curry 2002)

67% physical abuse   53% sexual abuse
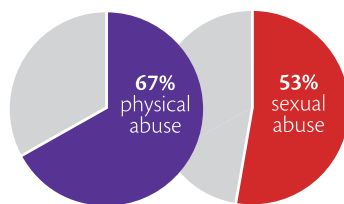
Abuse experienced by a sample of women with disabilities

- In a study of 78 adult men with disabilities, participants clearly indicated that **abuse occurs for men with disabilities who utilize personal assistance services**. Abuse included physical violence, neglect, withholding of care, financial, emotional, verbal, and sexual abuse. (Saxton, et. al 2006)

- In a study of 162 reports of sexual abuse or assault against adults and children with disabilities, **50% of respondents disclosed experiencing abuse or assault on more than 10 occasions**. (Sobsey & Doe, 1991)

- In a study of 691 adults with an established psychotic disorder, **16% of patients reported being violently victimized**. Those with psychosis are at considerable risk of violent victimization in the community. (Walsh, Moran, 2003)

- In a comprehensive review of literature published from 2000-2010, lifetime **prevalence of any type of IPV against adult women with disabilities was found to be 26-90%**. Lifetime **prevalence of IPV against adult men with disabilities was found to be 28.7-86.7%**. It was concluded that, over the course of their lives, IPV occurs at disproportionate and elevated rates among men and women with disabilities. (Hughes, et al, 2011)

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Research Brief: Adults with a Disability

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RED FLAGS OF ABUSE

Does someone you know—a senior or adult with a disability—display any warning signs of mistreatment?

» Neglect

- Lack of basic hygiene, adequate food, or clean and appropriate clothing
- Lack of medical aids (glasses, walker, teeth, hearing aid, medications)
- Person with dementia left unsupervised
- Person confined to bed is left without care
- Home cluttered, filthy, in disrepair, or having fire and safety hazards
- Home without adequate facilities (stove, refrigerator, heat, cooling, working plumbing, and electricity)
- Untreated pressure "bed" sores (pressure ulcers)

» Financial Abuse/Exploitation

- Lack of amenities victim could afford
- Vulnerable elder/adult "voluntarily" giving uncharacteristically excessive financial reimbursement/gifts for needed care and companionship
- Caregiver has control of elder's money but is failing to provide for elder's needs
- Vulnerable elder/adult has signed property transfers (Power of Attorney, new will, etc.) but is unable to comprehend the transaction or what it means

» Psychological/Emotional Abuse

- Unexplained or uncharacteristic changes in behavior, such as withdrawal from normal activities, unexplained changes in alertness, other
- Caregiver isolates elder (doesn't let anyone into the home or speak to the elder)
- Caregiver is verbally aggressive or demeaning, controlling, overly concerned about spending money, or uncaring

» Physical/Sexual Abuse

- Inadequately explained fractures, bruises, welts, cuts, sores or burns
- Unexplained sexually transmitted diseases

If you or someone you know is in a life threatening situation or immediate danger, call 911 or the local police or sheriff.

WHAT IS ELDER ABUSE?

In general, elder abuse refers to intentional or neglectful acts by a caregiver or "trusted" individual that lead to, or may lead to, harm of a vulnerable elder. *In many states, younger adults with disabilities may qualify for the same services and protections.* **Physical abuse; neglect; emotional or psychological abuse; financial abuse and exploitation; sexual abuse**; and **abandonment** are considered forms of elder abuse. In many states, **self-neglect** is also considered mistreatment.

WHO IS AT RISK?

Elder abuse can occur *anywhere* – in the home, in nursing homes, or other institutions. It affects seniors across all socio-economic groups, cultures, and races.

Based on available information, women and "older" elders are more likely to be victimized. Dementia is a significant risk factor. Mental health and substance abuse issues – of both abusers and victims – are risk factors. Isolation can also contribute to risk.

WHAT SHOULD I DO IF I SUSPECT ABUSE?

Report your concerns.

Most cases of elder abuse go undetected. Don't assume that someone has already reported a suspicious situation. The agency receiving the report will ask what you observed, who was involved, and who they can contact to learn more.

You do not need to prove that abuse is occurring; it is up to the professionals to investigate the suspicions.

» **To report suspected abuse in the community,** contact your local Adult Protective Services agency. For state reporting numbers, visit **www.apsnetwork.org**, visit the NCEA website at **www.ncea.aoa.gov** or call the *Eldercare Locator* at **1-800-677-1116 (eldercare.gov).**

» **To report suspected abuse in a nursing home or long–term care facility,** contact your local Long-Term Care Ombudsman. For reporting numbers, visit **www.ltcombudsman.org**, visit the NCEA website at **www.ncea.aoa.gov** or call the *Eldercare Locator* at **1-800-677-1116 (eldercare.gov)**.

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The National Center on Elder Abuse (NCEA) directed by the U.S. Administration on Aging, helps communities, agencies and organizations ensure that elders and adults with disabilities can live with dignity, and without abuse, neglect, and exploitation. NCEA is the place to turn for **education**, **research**, and **promising practices in stopping abuse**.

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