Elder abuse and its prevalence

Gill Livingston
Claudia Cooper

• UCL
Older Adult Abuse

• “‘a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person.’”
  – WHO 2002

• By its nature often secret and hidden
Measuring abuse

• What is it
  – Cultural differences “disrespect and isolation in Chinese”
  – Legal differences
  – Opinion differences

• Who should be asked?
  – Adult Protective Services
  – Third party assessment of abuse
  – Older people
  – Family or professional carers
  – Police
Third party assessment

- Two studies used the Minimum dataset Healthcare (MDS-HC). It asks:
  - Fearful of a family member or carer
  - Unusually poor hygiene
  - Unexplained injuries, broken bones, or burns
  - Neglected, abused, or mistreated
  - Physically restrained

- Prevalence of elder abuse 4.7% (USA: Shugarman et al, 2003); 4.6% (Europe- Italy & Germany higher: Cooper et al, 2006)

- It is reliable (test-retest). Estimates too low
Asking older people about abuse

Wetzels
Pillemer & Finklehor
Podkieks
Comijs
Harris
Oh
Kivela
Hirseh
Chokkanathan
Ockleford
Yan 2001
Yan 2004

% older adult abuse
Asking older people

- Ogg and Bennett (1992) interviewed 589 people 60+ in UK; 6% any verbal abuse, 2% physical abuse occurred “recently”.

- Pillemer et al (1988) interviewed 2020 people 65+ in Boston, USA; 3.2% any physical abuse, or verbal abuse or neglect at least 10 times in a year; 2% physical abuse

- So most studies seem to agree that about 5% of general older population at risk of abuse

- Most exclude adults with dementia
Asking vulnerable older people about abuse

• Beach (2006) reported that about a quarter of vulnerable older people with physical disability screened positive for abuse.

Validated MCTS measure by comparing care recipient and family carer reports
<table>
<thead>
<tr>
<th>Never (0)</th>
<th>Almost never (1)</th>
<th>Sometimes (2)</th>
<th>Most of time (3)</th>
<th>All of the time (4)</th>
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**Verbal abuse**
- Screamed and yelled at person you care for
- Used a harsh tone of voice, insulted, swore at or called them names
- Threatened to send them to a care home
- Threatened to stop taking care of, or abandon them
- Threatened to use physical force on them

**Physical abuse**
- Afraid you might hit or try to hurt them
- Withheld food from them
- Hit or slapped them
- Shaken them
- Handled them roughly in other ways

We recorded total score, caseness according to MCTS (at least sometimes on one question)
Caseness according to Pillemer criteria: any of verbal abuse items at least 10 times, or physical abuse items at least once in a year? Abusive behaviour judged by our panel of professionals to be of potential clinical concern
Asking family carers about abuse

- In a sample of family caregivers of people referred for assessment of dementia in UK
- 74 (33.6%) participants reported significant abuse
- 72 (32.7%) psychological abuse
- 8 (3.6%) physical abuse
Rates of abuse using different definitions of abuse

- Any abusive act: 52%
- MCTS abuse case (at least sometimes in 3 months): 34%
- Pillemer criteria: 21%
- Professional panel: 6.80%
Predictors of abuse score

- Higher carer burden
  - Higher carer anxiety
    - More abuse by care recipient towards carer
    - Carer provides more hours care
  - Carer uses more dysfunctional coping strategies

β = .26, p = .003
β = .31, p = .001
β = .21, p = .001
Asking Adult Protective Services about abuse

- Adult Protective Service referrals have been analysed in USA, where some groups (clinicians, bankers) are mandatory reporters.
- Most found <1% of 60+ population reported to APS over a year. Probably the tip of the iceberg.
UK adult protection referrals

- Reported abuse prevalence is similarly low 0.3%
- 64% abuse in care home
  - usually neglect (80%)
- 70% financial abuse was people living in their own home
- Perpetrators
  - 57% staff
  - 39% family
  - 4% other resident to resident abuse (Milne et al. 2012)
Care homes

• ↑ abuse to older people in full time care,
• But Slovenia report it protects from physical and financial abuse (OR 0.1, 95% CI= 0.0–0.3)

• 577 nurses/ nursing aids in USA
  – 36% observed & 10% committed 1+ physically abusive act, most commonly excessive restraint.
  – 40% reported at least one psychologically abusive act. (Pillemer)

• Resident to resident aggression in 53 US nursing homes
  – Approx 1 episode per home per week (Pillemer & Lachs 2012)
Epidemiology of elder abuse

- **CR factors**: dementia, psychiatric diagnosis, neuropsychiatric symptoms, alcohol problems, poor social functioning, dependence on the abuser, social isolation
- **Family caregiver factors**: depression/ anxiety
- **Professional caregivers**: burnout, dissatisfaction in role
- **CR-caregiver**: premorbid relationship, history of family violence
- **Institutional features**: poor staffing, isolation, training
Elder abuse is common

- Elder abuse difficult to detect by its nature
- Under-reported to authorities
- Under-detected by interviewers assessment
- Family carers tell more but may deny
- Takes place in vulnerable so excluding impaired populations underreports it
- Different definitions
- Different types in different settings
- Minimum of 5% general population in a month
- >25% vulnerable
- About a third of people with dementia