Addressing Elder Abuse

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**Objective:** Summarize the state-of-the-science in EM, identify gaps in knowledge, and elaborate upon the types of work needed to advance the science since the National Research Council’s 2003 landmark publication *Elder Mistreatment: Abuse Neglect and Exploitation in an aging America.*

2010 State-of-the-Science Meeting
Salient Outcomes

• Need for interventions at all levels:
  prevention - keeping abused elders in their own homes -
  clinical interventions - legal/criminal justice
  interventions.

• Ready for a national prevalence/incidence study:
  under the direction of agencies with mission closely
  aligned with prevalence/incidence and detection such as
  CDC or DoJ.

• Financial fraud identified as a significant problem:
  too little research being conducted on determining
  detection and prevention strategies.

• Need for research in minority populations
The Family Care Conference, an elder-focused, family-centered, community based intervention for the prevention and mitigation of elder abuse, was successfully pilot tested in a northwestern Native American community.

To date, families have accepted and appreciated the intervention. The approach helps bring focus to family concerns and aligns their efforts toward positive action.

Holkup PA et al. “Drawing on Wisdom From the Past: An Elder Abuse Intervention With Tribal Communities.” Gerontologist. 2007 April; 47(2): 248–254
Recent NIH-Supported Studies
Resident-to-Resident Mistreatment

- Development of a new instrument to measure staff-reported resident-to-resident mistreatment in care facilities.
- Will help advance the evaluation of interventions for residents in long-term care settings.

Recent NIH-Supported Studies
Detection Among Latinos

• Specially trained Spanish-speaking community members identified a higher rate of abuse in low-income Latino neighborhoods than was previously suspected.

• Latino immigrants are more willing to disclose abuse to people who represent their culture and community.

Examples of NIH-Supported Studies
Detection in the Clinical Setting


Current NIH-Supported Research
Neural Predictors of Vulnerability

• Study hypothesis: Vulnerability to deception in older adults is an instance of flawed decision making related, at least in part, to age-related changes in emotional processing.

• Investigators are working to identify groups of seemingly normal older adults who may be vulnerable to deception and to study their behavior in complex decision making and memory tasks.
Researchers are using experimental and neuroimaging methodologies to explore the social and neural bases of this vulnerability.

Investigators are examining the function of brain regions in domains such as emotion regulation, social isolation, declines in older adults' ability to decode deceit and recognize cues of untrustworthiness, and inappropriately high trust of strangers.
A feasibility study in support of a future community-engaged longitudinal population-based study of relevant health issues in Chinese older adults.

• Build a culturally appropriate and sustainable collaborative partnership.

• Pilot a random block census of older Chinatown residents.

• Examine the linguistic and cultural barriers of studying relevant health disparity issues.
Current NIH-Supported Research
Family Violence Prevention

• Interdisciplinary training for nursing, public health, and medical scholars.

• Mentoring by experienced violence researchers from multiple disciplines to: 1) conduct policy and practice relevant epidemiological and clinical risk factor analysis and theory testing studies, and 2) design and test primary, secondary and tertiary interventions to prevent, identify, and ameliorate violence and the occurrence and/or recurrence of physical and mental health and developmental and behavioral sequelae.
Many Older Americans are the victims of financial abuse and exploitation.

- Laumann et al. (2008) use data from the National Social Life, Health and Aging Project (NSHAP) to show that 3.5% of respondents report financial exploitation over the last year.
- Acierno et al. (2010) find 5.2% of those interviewed in another national sample experienced financial exploitation within the last year.
- Lachs et al. (2011) calculates the one-year incidence of financial abuse to be 4.2%.
Risk Factors of Financial Abuse

- Employer-provided retirement plans have shifted from defined benefit plans managed by employers to defined contribution plans that accumulate assets in accounts that can be managed by individuals. Estimates suggest that older Americans will hold a substantial amount of wealth in such accounts and that relatively little will be in the form of annuities.

- For those relying solely on Social Security, small losses of income can produce large reductions in well-being.

- Both psychological and neurobiological changes associated with aging can work for or against individuals’ financial best interest - depending on which decisions are made, and the demands placed on individual capabilities.

- Beyond the ability to process, good information is the ability to discern whether a source can be trusted – some findings suggest that older adults may be worse at recognizing signals of untrustworthiness in others.

- Cognitive decline could make the elderly more vulnerable to financial exploitation.
Research Need: Develop Interventions to Prevent Financial Abuse

• 2010 NIA/NAS Panel identified financial fraud as needed research area.

• In response, NIA encourages research to better understand the risk factors associated with financial exploitation and abuse and the development of interventions to address financial elder abuse.

• NIA has also interacted with Administration for Community Living (ACL) and the Consumer Financial Protection Bureau (CFPB) to explore potential collaboration, such as improved longitudinal measurement in surveys.
NIH Grants Mechanisms

- Investigator-initiated/unsolicited
- Early stage and new investigator incentives
- R13 Conference grant
- Select Centers’ grants – NIA Edward R. Roybal Centers for Translation Research in the Behavioral and Social Sciences of Aging
Addressing Elder Abuse

- Issues are complex.
- The need is great.
- Needs collaborative process.
Addressing Elder Abuse:
Issues Are Complex

• Characteristics of the victims - What makes them vulnerable?
  cognitive impairment – psychological distress – social isolation –
  low income – need for assistance with ADLs – pre-morbid
  relationship to abuser

• Characteristics of perpetrators - What are the red flags?
  substance abuse – mental illness – dependency – unemployment

• Several types of abuse
  physical – sexual – psychological – neglect – financial exploitation

• Settings where abuse occurs
  home – residential care facilities – community

• Cultural and other personal differences
  tradition – perception – values

• IRB approval and State reporting requirements
Addressing Elder Abuse: The Need Is Great

- AT LEAST one in ten older adults - with high percentage unreported
- Increased risk of mortality
- Increased risk for emergency room visits, hospitalization, and nursing home placement
- Loss of independence
- Need to grow the field of EM researchers
Addressing Elder Abuse: Collaborative Process

• Stronger evidence base for policy
  prevalence data - characteristics of abused and abusers and settings - proven interventions - cultural differences

• More and improved education and training
  Content: what it is - how to identify it - how to prevent it - what to do when it is suspected/confirmed
  Audiences: family - physicians and nurses - ombudsmen - community members - Adult Protective Service workers

• Program evaluation
  – Assess the success of interventions.
  – Identify ways to improve them.