Elder Neglect:
A Review of the Research

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Elder Abuse and It's Prevention:

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Goal Today

- Review studies that have data that is specific to neglect by others

- Document the paucity of data

- Document the paucity of scientists engaged

- Show the lack of imagination in how we study neglect

- Ask why intervention studies are not be reviewed favorably/funded

Elder Neglect Definitions

"Refusal or failure by those responsible to provide food, shelter, health care or protection for a vulnerable elder" (NCEA website*)

Neglect- An omission by responsible caregivers that constitutes "neglect" under applicable federal or state law (NRC 2003, p.39)

(National Center on Elder Abuse 2008)

Early Studies with Data on Neglect

Elder Abuse and Neglect: Findings from Three Model Projects
Godkin, Wolf, Pillemer (1984)

- Case Comparison- 62 Worcester/65 Boston
- Active neglect in <u>20% of cases</u>
- Neglect had the strongest relationship to dependency needs of the victims
- Neglect cases had significant problems with cognitive and physical functioning
- Neglect cases likely to be burdensome and stressful
- Caregivers had own life stressors

Assessing Elder Abuse: A Study
Fulmer and Cahill (1984)

- All subjects 70> Jan/Feb 1983 ED visits
- Screened with EAI by ED nurses
- Good-fair-poor strategy failed
- Nurses reticent to make judgments

Clinical Indicators of Elder Neglect
Fulmer and Ashley (1989)

- 107 cases of suspected neglect (EAI) referred to EM team, compared with 146 non-referred
- Expert panel selected 9 neglect indicators; factor analysis: nutritional deficits, alterations in skin integrity, alterations in elimination

The Prevalence of Elder Abuse: A Random Sample Survey
Pillemer and Finkelhor (1988)

- First large scale random sample survey of elder maltreatment involving 2,020 elderly persons from Boston, MA.

- 63 persons maltreated-7/63 neglected.

- 32/1,000 maltreated, of this <u>4/1,000 due to neglect</u>.

- Perpetrators in neglect cases-29% husband-wife; 29% daughter-mother and 42% were other.

- Most common characteristics of neglect victim-female, divorced, has spouse and child, in poor health and without a helper.

- Neglect victims commonly are in poor health and report that they do not have close contacts they can rely on.

Abuse, Neglect, Abandonment, Violence, and Exploitation: An Analysis of all Elderly Patients Seen in One Emergency Department During a Six-Month Period
Fulmer et al (1992)

- Screened all patients over 70 years presenting to ED
- All patients had a MMSE/EAI
- All charts screened for evidence of EM
- Follow up phone calls to the home
- 6 month data collection

YNNH Mistreatment Assessment Data 1991 (N=126, 4%)

- 55% (70) Recorded as neglect
- 34% (43) Recorded as abuse
- 6% (8)   Recorded as violent crime
- 3% (4)   Recorded as abandonment
- <1% (1)   Recorded as exploitation

A Prospective Community-Based Pilot Study of Risk factors for the investigation of elder mistreatment
Lachs, Berkman, Fulmer, Horwitz (1994)

- EPESE data base YHAP

- New Haven, CT cohort of 65> elderly community of 2,812; evenly distributed gender, race, housing

- In 1990, Connecticut reported that <u>78% of EM cases involved neglect</u> (over half constituting self-neglect).

- 1985-1986, 329 cases investigated as potential matches, 68 confirmed.

- Those at highest risk factor- minority status, female,75>, less than 8th grade education level, poor social networks.

Risk factors for reported elder abuse and neglect: A nine-year observational cohort study
Lachs, Williams, O'Brien, et al (1997)

- Compared APS records with a cohort of 2812 older adults (184 cases, 81 substantiated)

- 47 experienced abuse or neglect over the 9-year period

- 30 <u>(64%) experienced neglect by another party</u>

The Mortality of Elder Mistreatment
Lachs, Williams, O'Brien, et al (1998)

- Described the contribution of neglect to all cause mortality for older adults seen by APS

- 176 older adults were seen by APS over the course of 9 years

- 30 (17%) were for cases of <u>neglect</u>

Elder Neglect Assessment in the Emergency Department
Fulmer, Paveza, Abraham, et al (2000)

- Pilot study conducted on feasibility of screening for neglect in an emergency room

- 3 week period; 180 patients 70> were screened 36 eligible, 7 screened positive for neglect

- Nurses were able to screen with 70% accuracy for detecting neglect (vs. expert EM team)

Abuse and Neglect: A Ten-Year Review of Mortality and Morbidity in our Elders in a Large Metropolitan Area
Shields, Hunsaker, Hunsaker (2004)

- Retrospective 10 year study of abuse and neglect cases from Kentucky and Indiana (1992-2001)

- Clinical Forensic Medicine program evaluation

- 74 postmortem cases, 22 <u>suspected</u> neglect (30%)

- Most common cause of death was bronchopneumonia

- No further papers*

Elder Mistreatment in Urban India: A Community Based Study
Chokkanathan and Lee (2005)

- Probability study to identify cases of mistreatment

- 400 older adults surveyed: 56 (14% reported mistreatment)

- <u>4.3% reported neglect</u> vs. 5% physical abuse (chronic verbal abuse 10.8%)

Dyadic Vulnerability and Risk Profiling for Elder Neglect
Fulmer, Paveza, VandeWeerd, et al (2005)

- February 2001-September 2003- Screening in 5 ED; NY, FL

- Inclusion: >70, E/S, MMSE>17, P/UP caregivers 20 hr/wk

- 165 cases enrolled; 29 =neglect/136 no neglect

- Difference in demographics: race, illness burden, Medicare (+)

- Risk constructs: CG functional status, CG childhood trauma, CG personality

- Vulnerability constructs: E cognitive status, functional status, childhood trauma, personality

A Study of Elder Abuse in Korea
Oh, Kim, Martins, Kim(2006)

- Prevalence of elder abuse and neglect in Korea

- 15,700 older adults were interviewed, of which, 15,230 were used in study.

- 6.3% found to have experienced some kind of mistreatment

- <u>2.4% reported neglect</u>

Elder Neglect and the Pathophysiology of Aging
Collins and Presnell (2007)

- Autopsy cases (65 years and older) from 20 years were reviewed

- 8 cases of suspected neglect were identified (5 home/3 institution)

- Causes of death:*

  – Sepsis due to:

    - Extreme dehydration

    - Severe decubitus ulcers

    * No follow up studies

National Elder Mistreatment Study 2010

- Acierno, et al defined potential neglect as:
  - "Failing to meet the following needs: transportation, household needs (e.g. cooking and cleaning), taking care of financial matters, and obtaining medication."
- 5777 respondents
- Prevalence of 5.1% for potential neglect
- Risk for *potential* neglect was predicted by
  - Low income
  - Lack of social support
  - Racial minority status
  - Poor health

Association of Cognitive Function and Risk for Elder Abuse in a Community-Dwelling Population
Dong, Simon, Rajan, Evans (2011)

- 238 Chicago Health and Aging Project participants
- Study used EM subtypes including caregiver neglect: neglect, willful depravation and confinement.
- Association between cognitive function and caregiver neglect (95% CI):
  - Global cognition 1.91 (1.49-2.44)
  - MMSE 1.07 (1.04-1.11)
  - Episodic Memory 1.08 (1.04-1.12)
  - Perceptual Speed 1.05 (1.02-1.07)
  - In cases of caregiver neglect, there is a significant increase of abuse from middle-low in all four cognitive functions that were tested.

Association between elder abuse and use of ED: findings from the Chicago Health and Aging Project
Dong, Simon (2012)

- Population based: CHAP; 6674 enrolled, 106 suspected elder abuse

- Controlling for SES, comorbidities, cognitive and physical function, those who have been referred for EM had higher ED usage

- Caregiver neglect (RR,2.04 [1.38-2.99])

Urban and Rural Variations in the Characteristics Associated with Elder Mistreatment in a Community-Dwelling Chinese Population
Dong and Simon, 2013

- Cross sectional study of 269 urban and 135 rural participants

- Rural EM: Female; lower education, income, health, QOL

- Not specific to neglect vs. abuse

Primary Care Clinics for Estimating Prevalence & Incidence of Elder Mistreatment 2012
Fulmer, Russell, Strauss, Vemula

- Enrolled patients for busy primary care clinics, screened with EAI & for risk and vulnerability; followed to home for time 2 follow up
- Prevalence of EM overall: 4%
- <u>Neglect: most prevalent subcategory</u>
- Extremely challenging to capture cases in the clinical setting
- Gold standard continues to be longitudinal prospective cohort studies
- We are likely missing the phenomena

Take Home Message

- Prevalence of EM overall: 4%

- Neglect: most prevalent subcategory; likely more cases go undetected

- No intervention studies except Duier, Mosqueta

- Extremely challenging to capture cases in the clinical setting

- Most common research strategy continues to be longitudinal prospective cohort studies

- Need to redouble our energies