Elder abuse

Abuse of the elderly, particularly those who are mentally enfeebled. The abuse can be physical, but also psychological or financial (e.g. extorting money).

Summary Article: Elder Abuse
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Elder abuse is a broad concept that refers to a wide range of victimizations experienced by older adults. Unfortunately, a uniform definition of elder abuse does not exist. This complex social problem is studied by scholars from diverse disciplinary backgrounds; thus, researchers often narrowly define elder abuse based on how their discipline views the problem. Similarly, statutory definitions of elder abuse vary by state with regard to the types of behaviors identified as abuse and the age at which an individual is classified as an “elder.”

In general, scholars and policymakers consider the elderly to be individuals of age 60 and above and recognize six types of behaviors within their definitions of elder abuse. These behaviors include physical, sexual, and psychological/emotional abuse, as well as neglect, abandonment, and financial abuse/exploitation. It is important to note that elder abuse can occur in the community and in institutional settings such as nursing homes. This entry presents a broad overview of the research exploring elder abuse. More specifically, this entry provides a discussion of the nature and extent of the major forms of elder abuse as well as outlines key risk factors and explanations for elder abuse.

Nature and Extent of Major Forms of Elder Abuse

A number of estimates of the extent of elder abuse exist throughout the literature. This research generally suggests that elder abuse is relatively common. Recent results from the National Elder Mistreatment Study indicate that 1 out of every 10 community-dwelling elders surveyed reported an experience with elder abuse within the past year. Scholars suggest that elder abuse is likely to increase over the next several decades due to a growing number of elders in the population. Specifically, the U.S. Census Bureau estimates that more than one fifth of the U.S. population (approximately 88 million people) will be age 65 or older by year 2050. It is difficult, if not impossible, to determine the true extent of elder abuse not only because of definitional issues but also because of underreporting.

Findings from the National Elder Abuse Incidence Study (NEAIS) suggest that 1 in 5 cases of elder abuse is reported to authorities, whereas other research indicates that only 1 in 14 cases is reported. Even though prevalence estimates vary and likely underestimate the true extent of elder abuse, the majority of scholars agree that elder abuse is a complex phenomenon involving a variety of abusive behaviors, and in many cases, victims experience more than one form of abuse.

Physical abuse is the use of physical force that may lead the victim to be physically harmed and/or impaired. Findings from community-based samples and official data show that physical abuse is less common compared with other forms of elder abuse. Only 1.6% of the elderly individuals surveyed in the National Elder Mistreatment Study reported experiencing physical abuse in the past year. Examples of physical abuse include slapping, hitting with a fist or an object, burning, and choking. Additionally, the improper use of physical and chemical constraints, force-feeding, and the use of physical punishments...
such as spanking are considered forms of physical elder abuse. The improper use of physical constraints refers to situations where an elder is unnecessarily tied to an object like a bed to control his or her behavior. In comparison, the improper use of chemical constraints involves the improper use of medications to control the elder’s behavior. Signs of physical abuse are typically very visible and include physical indicators such as bruises, cuts, and broken bones.

According to the National Center on Elder Abuse, psychological abuse involves the use of verbal actions and/or nonverbal behaviors to cause mental harm or distress. Psychological abuse is often hard to identify because the consequences are not as apparent as physical abuse, yet psychological abuse appears to occur relatively frequently. According to the NEAIS, more than 35% of substantiated elder abuse cases (i.e., cases Adult Protective Services confirmed to have occurred) in 1996 involved psychological abuse. Psychological abuse may consist of chronic verbal aggression including repeated insults and threats directed at an elder. Other common examples include humiliation, intimidation, harassment, and isolation. Infantilization is an additional form of psychological abuse. Infantilization occurs when an individual treats an elder as if he or she were a child through condescending speech, baby talk, confinement, and age-inappropriate nicknames (i.e., buddy, kiddo).

The third major type of elder abuse included in most research and legal definitions is neglect. Neglect takes place when an elder’s caregiver fails or refuses to provide the elder with adequate care. This form of abuse includes failure to meet an elder’s basic needs including, but not limited to, food, water, shelter, medical care, and sanitary living conditions. Abandonment is a form of neglect that occurs when a caregiver deserts an elder, usually at a hospital or nursing home. Scholars usually distinguish between active and passive neglect. Active neglect is intentional behavior, whereas passive neglect does not involve a deliberate attempt by the caregiver to inflict harm. More than 5% of the National Elder Mistreatment Study’s sample reported being victims of neglect and almost half of substantiated cases included in the NEAIS involved neglect. In comparison with neglect committed by caregivers and other forms of elder abuse, official data from Adult Protective Services indicate that self-neglect is the most common type of elder abuse. Self-neglect refers to situations where elders do not take proper care of themselves, which negatively affects their own physical health and/or safety.

Research suggests that financial abuse of the elderly is also prevalent. This type of abuse made up the third largest percentage (30.2%) of substantiated elder abuse cases in 1996. Financial abuse is the misuse of an elder's finances, assets, and/or property. For instance, financial abuse can include situations where family members and caregivers steal money or property from an elder, improperly use their power of attorney privileges to gain access to the elder’s assets, and force the elder to sign over his or her property in order to receive better care. In addition, fraud committed by sales representatives, telemarketers, and repairpersons against the elderly fall under the category of financial abuse.

The final type of elder abuse, sexual abuse, has received less attention in comparison with other types of victimization the elderly may experience. Elder sexual abuse is any form of nonconsensual contact with an elder. Similar to sexual abuse among younger individuals, this type of abuse includes nonconsensual sexual touching, rape, sexual harassment, and sexual coercion. In addition, improper use of enemas and medicated creams, as well as genital or rectal penetration during bathing are all examples of elder sexual abuse. Existing estimates suggest elder sexual abuse occurs less frequently than other forms of elder abuse. Less than 1% of individuals included in the National Elder Mistreatment Study reported sexual victimization.

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Risk Factors and Explanations for Elder Abuse

It is well acknowledged that no single theoretical model or explanation can account for all types of abuse, and specific explanations may be more relevant for particular abuse types. Research has identified a variety of factors associated with an increased risk of abuse and multiple explanations have been developed on the basis of established risk factors. Among the most regularly cited explanations are intraindividual explanations, dependency, stress, isolation, and intergenerational transmission of violence.

Intraindividual explanations emphasize the importance of individual-level victim and offender characteristics in predicting the risk of elder abuse. Characteristics of victims and offenders that are associated with an increased risk of elder abuse include offender and victim psychological issues, alcohol abuse, emotional problems, and cognitive and functional impairments. For victims, these characteristics are believed to reduce the elder's ability to defend himself or herself and to create barriers to help seeking. For offenders, the aforementioned attributes are thought to reduce the individual's capacity to handle the stress he or she may experience in social interactions with a low-functioning elder or when he or she provides care to an elder.

Dependency is also viewed as a risk factor for elder abuse. Individuals who are “dependent” need help from other individuals to meet their basic needs and to continue to reside in the community. Early researchers drew attention to how an elderly victim's dependence on others for care increased his or her vulnerability to victimization. More recently, however, studies have suggested that the offender's dependence on the victim for housing and financial support is a more important predictor of abuse. Social exchange theory has been proposed as a theoretical framework for understanding the relationship between offender dependency and elder abuse. Specifically, scholars have argued that dependent caregivers or family members may feel powerless due to their dependence on the elder, and violence may be a means of reestablishing power in unbalanced relationships.

Caregiver stress surfaced as one of the earliest explanations for elder abuse. This perspective combines elements of dependency and intraindividual explanations by highlighting the stress associated with caring for a dependent elder. According to caregiver stress explanations, overwhelmed caregivers may react to the stress of caregiving by behaving in harmful or abusive ways. The research testing the caregiver stress explanation has provided inconsistent support and seems to indicate that stress is not the primary source of elder abuse. Rather, stress plays a role in a more complex process involving multiple risk factors.

Social isolation is another key risk factor for elder abuse. Elders who are socially isolated are typically more likely to experience abuse compared with elders who are not isolated. Scholars have suggested that isolation may contribute to higher rates of elder abuse by reducing the likelihood that abuse will be detected and reported to authorities. Interestingly, elders who live with others are found to be at a greater risk of experiencing abuse compared with elders who live alone. According to the National Center on Elder Abuse, cohabitation does not necessarily indicate that an individual is less isolated. That is, a shared living arrangement may provide an offender, in this case another household member, more opportunities to victimize the elder living in his or her household. Furthermore, the offender may isolate the victim in an effort to prevent others from discovering the abuse.

Finally, the intergenerational transmission of violence perspective has been offered as an explanation for elder abuse. Based on principles derived from social learning theory, this perspective asserts that

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individuals learn to be violent within the family. The intergenerational transmission of violence suggests that children who were abused by their parents and/or witnessed their parents being violent toward one another learn that violence is an acceptable way to resolve conflict. Consequently, abused children are expected to use violence in their adult interpersonal relationships when confronted with conflict. Applied to elder abuse, the intergenerational transmission of violence suggests that adults who were abused as children will be more likely to abuse their elderly parents. Despite the intuitive appeal of this perspective, very little research has found support for this explanation. In fact, many abused children do not grow up to be abusive, which further suggests that a complex process underlies elder abuse.

See also: Ageism; Domestic Violence; Physical Disabilities

Further Readings


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