

Adult protective services provide an important safeguard for frail older adults. Individuals who are severely disabled and unable to meet their basic personal needs are generally dependent on family members, friends, and paid caregivers for care and support. Their physical or mental impairments and resultant dependency make them extraordinarily vulnerable to mistreatment and neglect. These situations have high potential for abuse, neglect and exploitation, and measures to protect the rights and interests of the frail and impaired in domestic settings are essential.

Issue Background

Elder Abuse among the Older Adult Population

In its common usage, the term “elder abuse” represents all types of mistreatment or abusive behavior toward older adults. This mistreatment can be an act of commission (abuse) or omission (neglect), intentional or unintentional, and of one or more types: psychological, physical, or financial. While elder abuse occurs in domestic and institutional settings alike, it is more prevalent in domestic settings, where the majority of disabled older adults live. Older adults living at home are also isolated and largely invisible to the rest of the community, which puts them at greater risk for mistreatment and neglect.

Researchers have offered various theoretical explanations of why elder abuse occurs: an overburdened caregiver, a dependent elder or perpetrator, a mentally or emotionally disturbed perpetrator, and a childhood of abuse and neglect. Others theorize that structural forces such as the imbalance of power within relationships or the marginalization of older adults within society have created conditions that lead to conflict and violence.

It is difficult to estimate the prevalence of domestic mistreatment of older adults or its

level of severity. Community surveys conducted in the last decade show that 4 to 6 percent of older adults report experiencing incidents of domestic elder abuse, neglect and exploitation. According to the National Elder Abuse Incidence Study (NEAIS), mandated by Congress in 1996, the number of reported cases of domestic abuse nationwide increased steadily from 117,000 in 1986 to 296,000 in 1996. The study estimated that 449,924 persons ages 60 and older living in domestic settings were abused, neglected, or exploited. While for each new incident of elder abuse, neglect, or self-neglect reported four or five incidents went unreported.

Little is known about the consequences of elder abuse because of the difficulty in disentangling the effects of the aging process, disease, and abuse. Researchers have found that abused older adults include higher proportions of people with depression or other mental distress, a history of physical abuse, and financial difficulties than are found among their non-abused cohorts. Clinicians suggest that other effects of elder abuse include feelings of learned helplessness, alienation, guilt, shame, fear, anxiety, denial, and posttraumatic stress syndrome. These findings underscore the need for more research, not only on the psychological and physical consequences of mistreatment, but also on the effectiveness of current intervention strategies.

Elder Abuse and Public Responses

Law enforcement, medical, nursing, health care, social work or other professionals in the community are the first line of defense for victims of neglect or abuse. All 50 states and the District of Columbia have enacted legislation to provide adult protective services for victims of abuse. These mandates usually provide for intervention, advocacy, and mandatory reporting of suspected abuse or neglect to a specific agency, some at the state level, but most often at the county or city level. These laws generally require various licensed

professionals to report incidents of abuse and neglect. After a report is received, a designated agency is obligated to investigate within a set time frame and if the mistreatment is verified, the investigation may involve the police, courts, social services or other community agencies. When the form of mistreatment is passive neglect, those affected can receive services, such as financial assistance, physical and mental health assessments, home maintenance, home health care, meal preparation, counseling and other interventions.

Many states use Social Services Block Grant (SSBG) funds for the protection of adults and children. Federal support for protective services is also provided through the Older Americans Act, which funds legal, guardianship, ombudsman, as well as more traditional nutrition and supportive services such as transportation, meals and personal care.

Policy Issues

With the growth of awareness of the problem of abuse and neglect of older adults has come an increased concern over the inadequacies in our adult protective services systems. Shortcomings in both policy and services seriously compromise the ability of the frail elderly to live in the community. Multiple factors most likely contribute to the ineffectiveness of protective services, including the victim's reluctance to accept help and the inadequacy of services offered. In addition, protective service agencies cannot refuse cases, and are routinely placed in the unenviable position of receiving those cases that other voluntary agencies find too difficult to handle. Burdened by heavy caseloads, insufficient staffing and inadequate training for staff, protective services in some locales have become stigmatized by other agencies and by the public.

Policy Recommendations

For protective services to succeed in the context of long-term care, several changes are required. The most important of these involve networking across service systems, amending state laws, and improving resources for adult protective services.

n4a urges policymakers to:

- **Provide adequate funding at the federal, state and local level to develop and enhance elder abuse prevention services;**
- **Continue to research the causes of abuse and neglect while acknowledging that many forms of domestic mistreatment are crimes and should be treated as such;**
- **Increase community awareness and understanding of elder abuse through a nationwide public education campaign;**
- **Encourage training and education to combat elder abuse for a wide range of professionals, particularly those working in adult protective services and law enforcement;**
- **Establish neighborhood watch programs and similar initiatives designed to provide assistance and referrals; and**
- **Promote recruitment, continued training, and support for the network of volunteers serving in the adult protective services system.**