PROFILES OF ELDER ABUSE

IMPLICATIONS FOR SOCIAL WORK PRACTICE

A THESIS

SUBMITTED TO THE FACULTY OF ATLANTA UNIVERSITY IN FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF SOCIAL WORK

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ABSTRACT

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PROFILES OF ELDER ABUSE, IMPLICATIONS FOR SOCIAL WORK PRACTICE

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Elder abuse refers to the condition of an individual, generally sixty years of age and over, who has sustained physical, psychological, material, financial or substance abuse. This study attempted to gain insight into the problems of elder abuse by developing profiles of abused older persons, the alleged abusers, and the relationships between the two. The profiles were developed through secondary analysis of data on elder abuse collected under an ongoing study in seven counties by the Atlanta Regional Commission. The Statistical Package of Social Sciences was used to analyze the data. Atlanta University provided the hardware for the statistical analyses.

The major findings of the study are as follows: abuse and neglect of older persons exist to a shockingly significant degree within these seven counties in Georgia; the findings in this study are congruent with previous research on elder abuse and neglect; black elderly below the age of seventy-four are at a greater risk of abuse and neglect that their white counterparts, while black elderly over seventy-four are at a lesser risk of abuse or neglect.

CONCENTRATION: POLICY, PLANNING and ADMINISTRATION

SUBSTANTIVE AREA: CORPORATE SOCIAL RESPONSIBILITY

ACKNOWLEDGEMENTS

When I began to think about all the people who activated and inspired my creativity. I found there were so many, that individual names would fit a book. I want to personally thank Camille Jeffers of the Atlanta Regional Commission, who allowed me access to the data for completion of my thesis. Out of this data emerged the profiles of the older victim the abuser and the relationship between the two, their pain and struggles have therefore brought me into a deeper and more precise understanding of what the human condition is all about. wish to pay tribute to those professors and colleagues who have been willing to learn from me and thereby enabled me to learn from them. I especially want to mention the untiring efforts put forth by Theodora Bingham who helped me to the 12th hour. Special thanks to "William "Sonny" Walker and staff of the National Alliance of Business for their patience and support. Most of all I thank my mother and father, my children, Ricky, Chante', and Tara for understanding the need to spend time away from them for higher academic achievement. Love and special thanks to Jerome Nicholson, for helping me keep it all together. Last, but most important, I thank God for always being there, and for taking care of all my needs.

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CHAPTER I

INTRODUCTION

"...Old age for the respected, is like a warm day in springtime; Old age for the abused, is like a cold, damp, winter night..."

Reva Romine Taylor

Situations which are viewed as legitimate social problems are typically those which are found to be harmful to a significant number of people (Bassie, Gelles, and Levine, 1982). America has long been known as a violent society, according to authors Straus, Gelles, and Steinmetz (1980). The American family and home are perhaps more violent than any other single social group in our society, except for the military in time of war. A person is more likely to get hit or killed in his or her own home by another family member than anywhere else, or by anyone else. Nearly one out of four murder victims in the United States is a family member (Gelles, 1979).

As in the case with most social problems, it is difficult to determine the specific cause or causes of elderly abuse. Most experts appear to believe however, that a major precipitating factor is family stress.

Meeting the daily needs of a frail, dependent elderly

relative may be an intolerable burden for many family members. The resulting frustrations may sometimes be expressed in violent behavior, even in the most loving families (Steinmetz, 1981).

STATEMENT OF THE PROBLEM

Elder abuse refers to the condition of an individual, generally sixty years of age and older, who has sustained physical, psychological, material, financial or medical maltreatment in his or her home, and has had a history of repetitive injuries like these. While most older abused persons tend to reside either in the home of a son or daughter, other relatives or with a caregiver who is not a relative, most adult offsprings would probably consider it unthinkable to starve, steal from, or torture their elderly parents. However, whether deliberately or unwittingly, there have been growing numbers of adult offsprings in recent years who have been found guilty and/or implicated in cases of elder abuse. 2

Moreover, there have been a few public reports and scientific studies on elder abuse to alert the public about the facts of this widespread and frequent problem.³ However, based on data supplied by various states in the United States, elder abuse is estimated slightly less prevalent than child abuse; one out of three cases of child abuse is reported to protective services, whereas only one out of six cases of elder abuse is reported.⁴

PURPOSE

The purpose of this study is to develop insight into the problem of elder abuse in the seven-county planning and service area of the Atlanta Regional Commission. These counties include: Fulton, 94,913*; Dekalb, 42,965*; Gwinnett, 15,591*; Clayton, 8,319*; Douglas, 5,862*; and Rockdale, 3,973*.

particularly, this study aims to develop profiles of (a) the abused older person; (b) persons and conditions most likely associated with the abuse of an older person; and (c) relationship(s) between the older victim and the alleged abusers. This will be achieved through an ongoing study of abuse and neglect of the elderly under the aegis of the Atlanta Regional Commission. The specific objectives are as follows:

OBJECTIVES

Develop a profile of:

- a) the older abused person
 - b) the abuser or alleged abuser
 - c) abuser-abusee relationship(s)

^{*} Parenthetical references places superior to the figures are population estimates of persons 60 years and over, December, 1980, Atlanta Regional Commission.

2. Develop recommendations for policy and social work practice conducive to prevention and intervention by family, friends and professionals in the service of older persons who are at risk of abuse and neglect.

POLICY RELEVANCY

The conceptual frame of reference focuses on the concern of expanding previous research on elderly persons who are vulnerable to abuse and neglect in the later years of life.

The growing national, state and local problem of crimes against older persons especially domestic abuse and its distressful social and psychological effects are especially relevant to this thesis.

Just as social workers who worked with judicial courts, and victims of child and wife abuse first faced the question "How common is abuse?" those who advance the idea of the abuse of older persons as a social problem have begun to ask generally the same question, "How many elderly are being abused?"

The most frequently cited statistics on the extent of elder abuse are those which place the range between 500,000

and 2.5 million cases per year (Federal Contract Opportunities, June 30, 1980).

There are four studies which are frequently cited by those discussing the extent of elder abuse: (1) Lau and Kosberg's (1979) investigation at the Chronic Illness Center in Cleveland. They reported that thirty-nine of four four clients, sixty years of age and older, and were abused in some manner. They also estimated that one in ten elderly persons living with a member of the family are abused each year. (2) A University of Maryland report (Block and Sinnott, 1979) which estimated 4.1 percent of elderly respondents in urban area of Maryland were victims of abuse. Block and Sinnott state that if this rate were projected for the national population of the elderly, nearly one million cases of elder abuse would occur. (3) An exploratory study of professionals' and paraprofessionals' encounters with elder abuse in Massachusetts (Legal Research and Services for the Elderly, 1979) stated that fifty-five percent of the respondents (183 out of 322) knew of at least one incident of abuse in an eighteen-month period. (4) A study in Michigan (et al., 1980), which is based on recollections of professionals in five study sites in Michigan, concluded that many respondents reported little or no direct, regular

experience with verbal or emotional abuse active neglect, or physical abuse while fifty percent reported with passive neglect.

A first step in unraveling the causes of phenomenon such as elder abuse is to identify the major social and psychological factors associated with being an abuser or being abused. The current research and reports on elderly abuse offers some tentative insights profile of the abuser, abused, and the abusive situation. The insights gained through the research by the Atlanta Regional Commission will help agencies of protective and legal services to target their services more accurately and to allocate resources commensurate with known cases of elder abuse in neighborhoods or community settings where abuse is more likely to occur.

DEFINITION OF TERMS

The following categories of abuse and neglect that are used in this survey by the Atlanta Regional Commission on Aging, 1981, are similar to those used in other research on elder abuse and neglect.

PHYSICAL ABUSE: Resulting in bodily harm and injury, use of physical restraints, and sexual assault.

<u>SUBSTANCE</u> <u>ABUSE</u>: Misuse of drugs, overmedication, narcotics abuse, excessive use of alcohol.

<u>PSYCHOLOGICAL</u> <u>ABUSE</u>: Verbal assault, threats, intimidation, name calling, isolation from others.

FINANCIAL AND MATERIAL ABUSE: Theft or misuse of money or property.

<u>VIOLATION</u> <u>OF</u> <u>RIGHTS</u>: Forced removal from own home, inappropriate placement in a nursing home.

NEGLECT BY CAREGIVER: Failure to provide adequate food, shelter, clothing needed, personal care and medical care, with appropriate supervision.

ELDERLY: Any individual age sixty years or older who is residing in a non-institutional setting, including persons living alone, with family, friends or with a caregiver. (Lau and Kosberg).

PASSIVE NEGLECT: Being ignored, left alone, a form of isolation.

CHAPTER II

INTRODUCTION

HISTORICAL AND DEMOGRAPHIC BACKGROUND

Since the beginning of time, no law has been etched in the mind of man with such force as one of the Ten Commandments', "Honor Thy Father and Thy Mother that Thy Days may be longer..."

Among ancient Greeks, for example, the best thing that could be done to win the favor of the gods and respect from fellow citizens was to care for the older family members (Fowler, 1981).

History has also clearly illustrated that any group which is perceived as politically and economically weak is unlikely to receive its adequate share in the allocation of scare resources. The elderly are such a group. While their political clout is growing, the role of old people, like the very young, in the economic structure of a capitialistic system, is largely limited to consumption of goods and services rather than production of goods and services (Steinmetz, 1978).

Along with the increase of the aging society is the increase of family domestic violence. Abuse of older

persons by their own families is a problem which has recently emerged as a national concern. Such abuse is not new; what is new, according to Benedict (1980), is an awareness of the problem and a growing desire on the part of society to rectify it.

Elder abuse is a civil rights problem of enormous magnitude. It is a crime hidden by ignorance and social attitude. Negative perceptions of the elderly by middle-aged and younger-age groups resulted in the tolerance of neglect and abuse towards the elderly.

Based on data supplied by the House Select Committee on Aging (1980), the abused elderly are uniquely dependent upon their caregivers. They are often bound to their caregiver either legally, financially, or emotionally. Some abused elderly persons feel powerless to change their victimized condition. They are filled with self-blame, believing that their physical conditions have caused the beatings or psychological abuse they suffer. Many of the abused elderly are trapped by an unresponsive legal system that effectively leaves them without remedy against their caregivers who in many cases seek to control them. Their plight is disastrous because they in many cases are compelled to continue living with their abusers.

These neglected and abused elderly individuals are denied the civil rights and civil liberties guaranteed to all citizens by the Constitution (Fowler, 1981).

REVIEW OF THE LITERATURE

In 1980 approximately 24 million Americans were sixtyfive or over. In 1900 only four percent of the population
was elderly; by 1980 it had increased to eleven percent;
and by the year 2030 it may increase to seventeen percent
(Harris, 1978). This increase in the proportion of the
aged is due in large measure to the increase in life
expectancy from forty-seven years in 1900 to seventy-three
years in 1980. The unmistakable trend is toward a society
in which more and more Americans will live longer than ever
before. This trend is a tribute to the advances that have
been made in medical science and public health.

This increase in life expectancy has not been without its costs. Moreover, these costs are likely to become increasingly evident in the years ahead. Any rapid demographic shift is going to create certain kinds of problems (Blenker, 1965). One psycho-social problem that has already begun to arise is elder abuse.

Davidson (1979) depicts economic and population changes as potential causes of abuse, for they significantly affect the caretaking abilities of adult children. The changes in the relationship between the caretaker and the older dependent person may create the potential for abuse. For

example, an increasingly dependent older parent may be a source of distress under conditions in which the adult offspring retires from work with the expectation of a freer and more relaxed life style which, in practice, is restricted because of the need for momma-sitting created by the older dependent parent.

Against the background of these social demographic changes, adult children and other family members can be increasingly expected to be providers of a significant amount of care to an increasingly larger and older population. A survey done by O'Malley (1979) on professionals and paraprofessionals focusing on Elder Abuse in Massachusetts pointed out that there is also the possibility that the older dependent parent will be quite old and possibly guite frail.

Just as child abuse was a social problem in the 1960s, and wife abuse was identified as a major social issue in the 1970s, according to Steinmetz the 1980s may herald the public awareness of the battered aged (elderly parents who reside with, are dependent on, and battered by their adult, caretaking children). In the balance of the literature search, attention will be focused on the social context of elder abuse and findings from previous research on interpersonal and personality correlates of victims and

alleged abusers. Finally, the literature search will close with a discussion of the research findings that suggest specific characteristics of the victims and abusers that may help to formulate a profile of each.

SOCIAL AND PSYCHOLOGICAL CORRELATES OF ABUSE

Much abuse toward the elderly appears to occur in the home (Hendricks and Hendricks, 1977). Through a lack of recognition of the elderly's needs and concerns, society in general may share some of the responsibility for the abuse and neglect of the aged.

In a literature review by Legal Research and Services for the Elderly (1979) in Massachusetts, note was made of the myth in the United States which says that older individuals are abandoned by their children. Contrary to the myth, the Massachusetts study showed that seventy-five percent of home care for the aged (fifty-five and older) was provided by family members living in the same household. Today, the middle aged adult is more likely to have a living parent than his or her counterpart in the past.

Since 1950, the rate of divorce in the United States has been growing. Middle aged and older women with

dependent parents at home have been well represented among these divorcees. Moreover, there have been growing numbers of older married men and women with physically or mentally impaired spouses who, nevertheless, remain at home to be cared for by family and friends in the later years. these divorcees and middle-age caretakers, there has been a growing proportion of women who had to return to work to earn the means to sustain the broken family with an older The need to work, perform normal dependent parent. household chores, and care for an older dependent family member clearly increases the stress and strain on the caretaker middle-aged offspring. Occasionally there are additional strains on the caretaker-dependent relationship when the middle-aged or older caretaker himself or herself is suffering from some physical or mental impairment.

As pointed out by Steinmetz (1978), other stressors may develop from the fact that the growing dependency or failing health of the older parent may further exacerbate relations with the caretaking offspring when the parents dependency coincides with the increasing cost and related stressors associated with facilitating the emancipation of young adults (offsprings of the caretaker) from the family. For example, this often is a period of college and wedding expenses, as well as a time when many middle-aged

caregiving women are looking forward to fulfilling their own educational and occupational plans. Since the major caretaking responsibility will most likely be assumed by the wife, this further interruption of her personal goals may breed resentment towards the parent. The normative responsibility of caring for one's elderly parent versus the desire to support one's own offsprings may result in additional frustration and produce an environment conducive to battering.

TOWARD A PROFILE OF THE OLDER VICTIM AND HIS OR HER ABUSER

Characteristics of the Abused Elderly

The authors of the <u>Battered Elder Syndrome: An Exploratory Study</u>, report that, based on their limited data, the abused elder is generally older than average, is female, Protestant, lower-to-middle class, and living with a relative. Mental impairment was reported for sixty-two percent of the abuse case, thus: severe, twelve percent, moderate, thirty-five percent, and mild, fifteen percent. No impairment was reported for fifteen percent of the cases. Twenty-three percent of the cases did not respond.

Lau and Kosberg reported that thirty of the thirty-nine abused clients (twenty-nine white and ten black) identified in their study were women. Twelve lived alone, nine with spouses, seven with their daughters and ten with other relatives. Fifty-one percent of the clients were unable to walk without the assistance of another person, or a walker, or a wheelchair. Ten percent had a hearing or visual impairment, eighteen percent were partially or totally incontinent, and forty-one percent were either partially or totally confused or senile. Collectively, more than three-fourths had at least one major physical or mental impairment.

The preliminary picture sketched by these findings is that the majority of the abused elderly are female: among the older elderly age group, physically and or mentally impaired, and living in the community with their adult children or some other family members.

Some information is provided on the reactions of the elderly to abuse. Lau and Kosberg, for example, list typical reactions and their frequency: denial, 13; resignation, 10; withdrawal, 8; fear, 6; depression, 4; protection seeking, 4; mental confusion, 3; anger, 2; and other or unknown, 6. Frequently, denial was found to be related to protection of the abuser, such as denial of the

existence of a problem, or psychological refusal to acknowledge the problem. Resignation was described as a more conscious (and verbalized) acquience to abuse, while withdrawal involved psychological acquienscence and passive acceptance.⁵

The authors of the Massachusetts report found that the largest percentage, thirty-six percent of respondents indiciated that the refusal of the victim to acknowledge the problem constituted the primary barrier to service. Refusal was variously attributed to "fear of retaliation" by the abuser, feeling of kinship and love for the abuser, or simply as a refusal to accept services.

Respondents to the Michigan study frequently found that abused individuals were fearful of reprisals from the abusers if they reported problems to authorities. Such reprisals could take the form of heightened abuse or withholding of attention, shelter, or visitation. The respondents occasionally characterized the abused as being too apathetic or too independent to seek help. 7

<u>Characteristics</u> of the Abusers

The Battered Elder Syndrome: An Exploratory Study reported abusers to be relatives of the victims in eighty-one percent of the cases. Females (fifty-eight percent)

more often than males are the abusers. Forty-two percent were sons or daughters (in-laws included), fifteen percent spouses, nineteen percent grandchildren, four percent other relatives, and nineteen percent unrelated caretakers. The majority of the abusers were middle-age (forty-to-fifty): sixty-five percent were middle class, twelve percent lower income, and four percent unknown. The religious identification was Protestant for thirty-five percent, Catholic for eight percent, Jewish for four percent, and fifty-three percent for unknown. The race was eighty-eight for white and twelve percent for blacks.⁸

The abuser lived with the victim in seventy-five percent (137) of the cases of abuse cited in the Massachusetts survey was a relative in eighty-five percent of the cases. Sons, husbands, and daughters were the most frequent abusers, twenty-four percent, twenty percent, and fifteen percent, respectively. Only fourteen percent of the abusers were unrelated to the victims, that is more than one of every ten cases.

Twenty-eight percent of the abuses cited in the Massachusetts survey indicated that the abuser was suffering from either alcoholism or drug addiction at the time of the abusive act. Long-term medical complaints (eighteen percent of the abuse cases) and long-term

financial problems (sixteen percent) were primary categories of stress noted by respondents. The frequency with which each stress category was checked is considered to be less significant than the presence of stress in seventy-four percent of the abuse citings. The researchers note that the relative ranking of stressful conditions remains unclear but the stress itself appears to be a potential factor in the abusive situation.

In one hundred and sixteen (63%) of the Massachusetts responses citing abuse, the elderly victim was identified as a source of stress to the abuser. In 48% of these surveys the elderly victim's need for a high level of physical and emotional care from the abuser was the source of stress. Financial dependence on the abuser or severe, physical debilitating conditions were the sources of stress for the abuser in 13% of the cases.

In seventy-five percent of the responses citing abuse, the elderly victim was described as having a mental or physical handicap which impaired daily functioning; this suggests that the impairment of the elderly victim and its effect upon the abuser may be a relevant variable for further analysis. Nagging, demanding, manipulative behavior, previous family history of arguments over specific issues, and arguments over the placement or the

services for the elderly were recorded as the victim's contributions to the stress of the abuser.9

In discussing the abuser, Law and Kosberg identify thirteen as the daughters and six as the sons of clients. In six cases the granddaughter was the abuser, in five, the husband, and in another five cases, a sibling (generally a sister) was at fault. In four instances, the abuser was a non-relative. In two cases, the abusers were a son and a daughter, and in another two cases, a daughter and a grandaughter. 10

In Lau and Kosberg's study, elderly abuse is considered in the context of violence in America and in the American family. The aim is to develop recommendations for policy and social work practice conducive to intervention.

MODELS OF VICTIMS AND ALLEGED ABUSER

In examination of previous research studies on elder abuse, there seems to be a correlation of variables that are consistent with each other. As depicted, these trends have the following characteristics which will be used as a prototype which the researcher will use for a comparative analysis with data collected by the Atlanta Regional Commission.

HYPOTHETICAL PROFILES

Research on the victims of abuse depicts white females, older than average, with a lower-to-middle income, of Protestant religion, with the majority showing symptoms of mental impairment.

Research on the abuser depicts the abuser as a white, middle-age female, middle-class, unspecified religious affiliation, and a relative of the victim.

The researcher will treat each of the depictions as a prototype in preparation of data analysis. The aim is to determine to what extent the model of the victim and the alleged abuser prototype correspond to the researchers' own study.

SOCIAL INTERVENTION AND PREVENTION

The problems of abused elderly are complex and require a multifaceted approach to solutions. The point is made in The Battered Elder Syndrome: An Exploratory Study that the primary decisions relating to an abuse case are of a social service rather than of a legal nature. Although reporting with the civil or criminal courts is provided for, the goals of intervention are to end abuse and assure the well-being of the abused and the abuser, as far as possible, rather than rely on prosecution of the abuser.

The workers' first decision when investigating a reported case of abuse is to determine whether intervention is necessary. If abuse is suspected following the investigation, it must be decided whether social or legal intervention is the most appropriate approach, and it should not be an either/or situation.

The most common social intervention is identified as a removal from the home to an institution. This is considered the least favorable response, for it may deprive the older person of positive relationships at the same time that it eliminates abuse. Additionally, the individual may feel that his/her rights have been violated.

Factors that deserve attention in the disposition of the case and the final determination that abuse has occurred or that the abuser has committed a crime are discussed. One such factor is dependency on the part of the elder. A dependent victim may need a protective placement in order to end the abuse, a more independent individual might be helped by removal of the abuser.

The authors note that, although strategies for intervention depend greatly on the social service system, there is concern because the majority of reported cases analyzed in The Battered Elder Syndrome: An Exploratory Study approached social services for help with little result. They suggest that changes may be needed in the mechanisms by which abuse cases are dealt with. Revisions in abuse law and reporting procedures may increase the effectiveness of social service agencies.

CHAPTER III

METHODOLOGY

SAMPLING PROCEDURE

The Atlanta Regional Commission Survey aims to collect the following data: A Sampling of the opinions of pastors and pastoral counselors, and eight categories of service providers in the seven county area to measure their knowledge of abuse and perceptions of profiles (1) abused persons, (2) the alleged abusers, and (3) abusee-abuser relationships. These seven counties include: Fulton, Dekalb, Gwinnett, Rockdale, Clayton, Cobb, and Douglas.

PASTORS AND PASTORAL COUNSELORS

There were 1,161 pastors in the seven-county region.

Two hundred eighty-eight were members of the Christian

Council and eight hundred sixty-three were non-members.

A stratified random sample was selected from this population. Stratification was defined by the unequal distribution of pastors between members (n=288) and non-members (n=862) in the population. Members represented twenty-five percent of the total population.

To facilitate random sampling, unique identification numbers were assigned to each individual in the member and non-member groups. Then, with the aid of a table of random numbers, fifty-eight pastors were selected from the list of members (representing 25%) and one hundred seventy-four pastors were selected from the list of non-members (representing 75% of the total sample). These proportions helped to meet two requirements: (1) each sample was consistent with the minimum size recommended for small group tests, and (2) the combined sample was representative of the distribution of members and non-members in the total population of pastors.

AGENCIES OF SERVICE PROVIDERS SELECTED FOR EXHAUSTIVE CANVASSING

Agency Names: (1) Adult Protective Services, (2) Home Health Agencies, (3) Hospital Social Services, (4) Economic Opportunity Atlanta, (5) Child, Family and Children Services, (6) Community Mental Health Centers, (7) Senior Citizen Centers, and (8) Police and Sheriff's Departments.

Because of the small number of professionals who work with older persons in each of these agencies and the expected small number of competed and returned

questionnaires, the research staff of ARC, decided to exhaustively canvass, rather than sample, each agency listed above for completed questionnaires from service providers. It is expected that this procedure will help to yield a total group (approximately 400) that is sufficiently large and comprehensive in agencies canvassed to provide a relatively representative perspective on the perspectives of elder abuse as seen by health and social service providers in the seven-county region.

To facilitate exhaustive canvassing in each agency, the agency director, or another designated liasion person in each organization, will be asked to assist the ARC in securing completed questionnaires from the pertinent service providers. It is expected that this procedure will help to yield a higher number of accurately completed questionnaires with return mailing to ARC within the shortest possible time. Because of the limited focus of the writer's thesis on developing a profile(s) of the abused older person and the limited time within which the writer desires to complete the thesis, this study will be restricted to a standardized sample of fity questionnaires returned by August 30, 1982.

INSTRUMENT

THE ELDER ABUSE QUESTIONNAIRE

(EAO)

The EAQ is a standardized instrument with fifty-seven questions and seventy-seven variables that addresses a variety of issues pertinent to the description and analysis of elder abuse. In addition to a design to isolate cases representing six different kinds of abuse, or combinations thereof, this instrument facilitates the collection of data on demographic, social, psychological and a variety of other factors that may be associated with the incidence of different kinds of abuse, profiles of the victims, the alleged abuser, and the relationship between the two. Finally, the EAQ is pre-coded for easy coding to facilitate rapid preparation of data for manipulation immediately after receipt in our research offices. (See Appendix A for a copy of the instrument.)

The researchers' investigation on elder abuse is a description exploratory study. In particular, the research shall focus on developing profiles of: (1) abused victims, (2) alleged abuser, and (3) victims-abuser relationship. The aim is to focus on "features of the abused/neglected"

victim" and "features of the alleged abuser (See Appendix A). The investigator will examine socical, demographic and health factors as they relate to the abused older person, through secondary analysis of ARC data sets.

PLANS FOR DATA ANALYSIS

The Statistical Package for the Social Sciences (SPSS) was used to manipulate the quantitative data collected through the EAQ. The computer center facilities of the Atlanta University Center will be utilized for analysis of data.

Comparative Content Analysis will be the technique used to manipulate and analyze the case study materials. Through these data the researcher searched the profiles of victims of abuse, the alleged abusers, and patterns in the abuser-abusee relationships to facilitate our understanding of the cross-sectional insights gained through analysis of the survey data.

CHAPTER IV

ANALYSIS OF DATA

CHARACTERISTICS OF THE VICTIMS OF ELDER ABUSE

While it is not comfortable for Americans to admit that abuse of the elderly by their loved ones exist at any level, the facts cannot be ignored. The data assembled in this thesis has served to provide a fairly good portrait of the people who are likely victims of elder abuse and of those most likely to perpetrate it.

The reported findings are from a selected sample of fifty cases, based on responses to a mail survey to health service providers in seven county planning and service areas of the Atlanta Regional Commission.

SOCIAL AND PSYCHOLOGICAL CHARACTERISTICS OF THE VICTIM OF ABUSE AND NEGLECT

The profile that emerged from the data suggest that the victims of abuse and neglect varied by age, sex, race, financial, marital and employment status.

AGE, RACE, AND SEX

The victims of abuse and neglect in this study ranged from 55 to 90 years of age. The average age of the victim was 73. Among these victims, 52% were 74 years of age or younger, 48% were 75 years of age or older. Table 4.1 shows characteristics of victim by age, sex and race. As shown, black victims 74 years and under showed a higher incidence of abuse and neglect than their white counterparts. By contrast, data showed white victims 75 and older had a higher incidence of abuse and neglect than blacks, on the ratio for every black victim over 75, there are two white victims suffering from abuse and/or neglect.

In regard to race, blacks represented 22 (44%) and whites represented 28 (or 56%) of reported cases. Males represented 16 (or 32%) and females represented 34 (68%) of the abused or neglected victims identified by service providers in this study.

RACE AND TYPE OF VICTIMIZATION

Among persons reported by service providers to have suffered physical, psychological, financial/material abuse, violation of rights, neglect by caretaker and substance abuse, whites tended to be represented in greater

Table 4.1 Characteristics of the Victims by Age, Sex and race. (N=5D)

BLACK

AGE	MALE	FEMALE	TOTAL	PERCENT
74 and under	7	7	14	64%
75 and above	3	5	8	36%
TOTAL	10	12	22	100%

WHITE

AGE	MALE	FEMALE	TOTAL	PERCENT
74 and under	6	6	12	43%
75 and above	1	15	16	57%
TOTAL	77	21	28	100%

proportions than blacks in all six categories. However, data indicated similarities that could not be ignored. (See Table 4.2. - 4.6.) Black and white men showed a lower incidence of physical abuse (hitting and slapping, etc.) than their white and black female counterparts. Whereby, white and black females showed a greater proportion of hitting and slapping, with greater consequences of abuse such as: bruises, welts, burns, scaldings, sprains, dislocations and fractures. Only one case of sexual assault was reported in this sub-sample of fifty cohorts, involved a white elderly female victim, who suffered from multiple categories of physical abuse.

White and black females showed a greater proportion of psychological abuse (verbal assaults, intimidation, and isolation from members of household) than white or black men. Both white men and women showed a higher incidence of financial and material abuse (theft or misuse of money/checks, or property) than their black counterparts. Black females suffered a higher incidence of violation of rights (illegally forced to leave their own home) more than any other group. In examination of data on neglect by the caretaker, results were far more dramatic for white women. Data showed a greater proportion of neglect by their caretaker more so than any other group, including the lack

Table 4.2 Frequencies of Citings of Acts and Consequences of Physical Abuse in Relation to Sex and Race of the Victim (N=50).

	FEMA	<u>lle</u>	Sub-	<u>M</u> A	LE_	Sub-		Rank
Acts of Abuse	Black	White	Total	Black	White	<u>Total</u>	Total	Order
Hitting, Slapping	3	9	12	. 2	5	7	19	1
Sexual Assult	-	1	1	-	-		. 1	5
Tying to a Bed or Chair	-	•	-	-	-	-	- -	-
Consequences of Abuse	,					,		
g Bruises, welts	3	6	9	'' <u>-</u>	1	1	10	2
Burns, scaldings	1	3	4	-	-	-	4	3
Sprains, dislocations, or fractures	1	1	2	- -	-	٠.	2	4
Wounds, cuts, punctures	1	-	1	-	-	-	1	5
Total Citings	9	20	29	2	6	8	37	
Sex Totals	13	21	34	9	7	16	50	
No. of Different victims abused	9	20	29	2	6	8	37	
Percent of Total	69%	95%	85%	22%	86%	50%	74%	

Table 4.3 Frequencies of Citings of Psychological Abuse in Relationship to Sex and Race of Victim (N=50).

	Fema	<u>le</u>	Sub-	Male	<u>e_</u>	Sub-		Rank
Types of Abuse	Black	White	Total	Black	White	Total	Tota1	Order
Verbal assults	5	9	14	3	1	4	28	1
Threats	4	7	11	3	3	6	· ·17	2
Intimidation	5	4	9	3	4	7	16	3
Name calling	1	4	⊗5	2	4	6	11	4
Isolation from household members	3	7	10	1	3	4	14	5
Total Citings	18	31	49	12	15	27	86	
Sex Totals	13	21	34	9	7	16	50	
No. of Different victims abused .	9	14	23	3	6	9	15	
Percent of Total	69%	67%	68%	33%	14%	56%	30%	

Table 4.4 Frenquencies of Citings of Violation of Rights in Relation to Sex and Race of the Victims (N=50).

	, <u>F</u>	EMALE	•	MALE			·	
Illogally famoud Ac	BLACK	WHITE	SUB- TOTAL	BLACK	WHITE	SUB- TOTAL	TOTAL	RANK ORDER
Illegally forced to leave own home	1	2	3 ,		1	1	4	1
Forced into inapprop- riate nursing home placement		,						
Other	2	-	2.	-	-	<u>-</u>	2	2
Total Citings	3	2	5	-	1	1	6	
Sex Totals	13	21	34	9	7	16	50	
No. of Different Victims Abused	3	2	5	0	1	1	6	
Percent of Total	23%	9%	15%	0%	14%	6%	12%	

Table 4.5 Frequencies of Citings of Neglect by Caregivers in Relation to Sex and Race of the Victims (N=50)

	<u>F</u>	emale	Sub-	_ <u>Ma</u>	<u>le</u>	CL		Donata
Types of Neglect	Black	White	Total	Black	White	Sub- Total	Total	Rank Order
Lack of needed personal care	5	13	18	4	6	10	28	1
Lack of adequate food, shelter, clothing	4	9	13	3	5	8	21	3
Lack of essential medical care	5	9	14	4 ' ·	5	9	23	2
Lack of appropriate supervision	3	12	15	1	5	6	21	3
Abandonment	2	4	6	0	3	3	9	4
Total Citings	19	47	66	12	24	36	102	
Sex Totals	13	21	34	9	7	16	50	
No. Different Victims Neglected	10	15	25	5	7	12	37	
Percent of Total	77%	71%	74%	56%	100%	75%	74%	

Table 4.6 Frequency of Citings of Substance Abuse in Relation to Sex and Race of Victim (N=50)

Types and Citings of Substance Abuse	Fem		Sub-		<u>le</u>	Sub-		Rank
of Substance Abuse	Black	White	Total	Black	White	Total	Total	Order
Over Medication		1	1		1	1	2	1
Needed medication Not Provided		1	1	,		1	1	2
Alcoholism			u,		1	1	1	
Total Citings		2	2		2	3	. 4	
Sex Totals	13	21	34	9	7	16	50	
No. Different Victims Abused		2	2		2	2	4	
Percent of Total	_	10%	59%	_	29%	13%	8%	

29

of needed personal care, adequate food, shelter, clothing, essential medical care, abandonment and lack of appropriate supervision. However, among all types of neglect and abuse, "neglect by the caretaker" had the greatest impact on all elderly victims included in this study, each group ranked high. In other words, males and females, regardless of race, financial status or other contigency factors, all suffered in high proportion of neglect. White women and men suffered from substance abuse (over or under medication) where blacks experienced neither type of substance abuse.

AND NEGLECTED VICTIMS BY RACE AND SEX

Even though 94% of the reported victims in this study were unemployed or retired, service providers reported as many as 50% of the elderly victims were financially independent. Bar Graph 4.1 is illustrative. This finding suggest economic stability among elderly persons in this study. Given the high incidence of poverty reported among older blacks and whites (38.1% and 13% respectively), in the 1980 U. S. Census of the population, the elderly victims included in this study contradicts these

4

statistics. However, this is a small standardized sample and cannot be compared to the whole population of elderly in Georgia. Table 4.7 identifies the abused and neglected victims financial status by race and sex. Data indicated 18% of blacks and 11% of whites were totally dependent on others for financial help. 32% for both groups, blacks and whites were partially dependent on others for financial help. The greatest amount of financial independence was enjoyed by white women at 39%, followed next by black women (23%). Both black and white men had the same amount of financial independence at 18%.

MARITAL STATUS OF THE ABUSED VICTIM

The majority of the elderly victims of abuse or neglect were widowed. In ranking order 60% were widowed, 22% were married, 8% were never married, 4% were divorced, and 2% were separated. 4% either didn't answer or the information was unknown to the health service respondent.

CHARACTERISTICS OF THE ALLEGED ABUSER

Previous research on elder abuse and neglect suggested that the abuser tended to be white, middle-aged, female, middle class, and a relative of the victim. Several factors provided a concise link between previous research

TABLE 4.7 Financial Status of Abused or Neglected Victims by Race and Sex. (N=50)

BLACK	Male	Female	Percent
Totally	2	2	18%
Partially	2	5	32%
Independent	4	5	41%
D.K.	1	1	9%
TOTAL (N=22)			100%

WHITE	Male	Female	Percent
Totally	0	3	11%
Partially	2	7	32%
Independent	5	11	57%
D.K.	0	0	0%
TOTAL (N=28)			100%

and the findings of this study.

Fully, 80% of the abusers in this study were related by law to the victim, only 4 (8%) had been appointed legal guardians of the victim. By contrast, data showed that 44 (88%) had no legal guardianship over the abused victim. Moreover, the abuser tended to be the son, daughter, or spouse of the abused victim (see Table 4.8 of sex and the relationship of the abuser). However, based on perceptions of service providers, the majority of abusers were female, middle-aged, approximately 48 years of age, unemployed, married, and black not white (see Table 4.9). Over 80% of the abusers lived in the same household or in the same neighborhood with the victim. Data was not available to measure socio-economic class or religion in this study.

Current literature on elder abuse and neglect suggest that unemployment would be a major inducer of elder abuse. Such is true, according to the characteristics that could have contributed to the maltreatment of the elderly victims. Over 56% of the alleged abusers in this study were unemployed or retired. Listed in ranking order are the characteristics of the abuser that could have contributed to maltreatment of the victim: (1) financial problems, (2) alcohol abuse, (3) emotional stress of caregiving, (4) internal family conflicts, and (5) loss of

TABLE 4.8 Kinship of the Abuser to the Abused and Neglected Victim. (N=50)

RELATIONSHIP	FREQUENCY	PERCENTAGE
SON	12	24%
DAUGHTER	8	16%
SPOUSE	8	16%
SISTER	2	4%
BROTHER -	1	2%
GRANDDAUGHTER	1	2%
GRANDSON	-0-	-0-
NIECE	2	4%
SISTER-IN-LAW	1	2%
DAUGHTER-IN-LAW	4	8%
COUSIN	2	4%
OTHERNEIGHBORSFRIENDS.	9	18%

100%

Table 4.9 Where the Abuser lives in Relationship to the Abused Victim. (N=50)

Abuser Lives	Frequency	Percentage
Same Household	33	66%
Same Neighborhood	8	16%
Sub-Total	41	82%
Elsewhere in Atlanta	5	10%
Outside of Atlanta	1	2%
Unknown	3	6%
Total Number	50	100%

82% of the abusers that are relatives, either lives in the same household, or same neighborhood as the victim.

employment. Financial problems followed closely by alcohol abuse led the list of personal characteristics of the alleged abusers.

CHAPTER V

CONCLUSION & SUMMARY

The overwhelming consensus of the health service providers in this study was that abuse and neglect of older persons exists to a significant and shocking degree, and that a concerted effort is needed at the federal, state and local levels to address the problem. The findings in this study are congruent with previous research on neglect and abuse of the elderly. However, in this literature search, information on blacks concerning abuse and neglect was extremely limited. This study not only provided information on age, sex and race, it also provided greater insight into psycho-social problems of the black elderly. Why do so many people believe in the myth, "blacks take care of their own", when in reality they suffer as much or greater than their counterparts?

The findings in this study revealed enough information to suggest that blacks may very well take care of their own, but the question is why and on what level of caretaking are they providing for the elderly. Since slavery, black women have had a caretaking role for survival sake of the extended family, kept them out of institutions (old folks homes), either because of

commitment or they were financially unable to pay for such services. Data also revealed that the abuser was a black, middle-aged female, living in the same household or community of the victim, unemployed and an abuser of alcohol. Data indicated that loss of employment ranked fifth in analysis of characteristics of the alleged abuser. However, loss of employment had a greater impact on the abuser than indicated by health and social service providers, since financial problems ranked number one on the list. If one looks at the abuser through circular reasoning of cause and effect, it could be said: employment caused financial problems, which is a probable determinant of hostile acts towards an older dependent family member. Under these conditions it seems reasonable that there would be a sharp increase of internal family conflicts causing a great deal of emotional stress on the caretaker, consequently causing the caretaker to look for an outlet such as alcohol. Given the close interrelations between alcohol abuse and low tolerance for "emotional stress of caregiving" (Merton and Nisbet, 1971), it is not surprising to find these factors ranking high among characteristics of alleged abusers. In terms of theories of stress and coping behavior, financial problems may frustrate goal achievement and increase the risk of

alcohol abuse when protracted over a long period (Watson, 1980).

The reported findings on abuse and neglect showed that blacks were at a greater risk of abuse below the age of 74, than whites. Could this be because blacks do not live as long as their white counterparts? Statistics reveal, white women outlive any other group of elderly persons America. Therefore, the probability of white women becoming frail and more dependent upon their caretaker is more likely than any other group. Examination of the frequency of citings of abuse was also higher for white women than their counterparts, which documents the previous statement. In examination of the frequency of citings of abuse and neglect, there were 116 multiple citings of abuse for white women in only 21 cases. Then it drops to 59 citings of abuse for white males, out of 7 cases. Out of 12 cases there were 57 citings of abuse and neglect for black females. Finally, there were 30 citings of abuse for black males out of 10 cases. Therefore, it can be implied that in this study, white females are abused and neglected 3.8 or 4 times more often than any other group. leaves a question in mind, if the alleged abuser is a black instead of a white female (which much of the data female indicates) and white women are neglected and abused more so

than any other group by a family member (meaning the family member is white), then one must consider re-examining the data more closer, by analysis of age and sex of the abuser.

Data also indicated that more blacks were abused below the age of 74 and whites were abused more above the age of 74. A very significant finding in the data revealed that black females were the abuser to victims 74 years of age and under, while white females were abusers to victims 74 years of age and over. These findings indicate two types of abusers for different aged cohorts.

It is recognized that existing research on elder abuse, especially on blacks, is very limited. There is a need for vigorous and high-quality research to expand the knowledge base about incidence, characteristics and effective intervention and prevention strategies.

It is worth noting that 29 (38%) of the cases of abuse and neglect were still active or continuing at the time of our survey of service providers: temporary solutions had been found for 9 (18%) of the cases, and 20 (40%) of the cases have been fully resolved, either by service providers or death. The fact that 17 (34%) of these cases had been active for two or more years and were still unresolved, suggest the need for intervention at the earliest possible date.

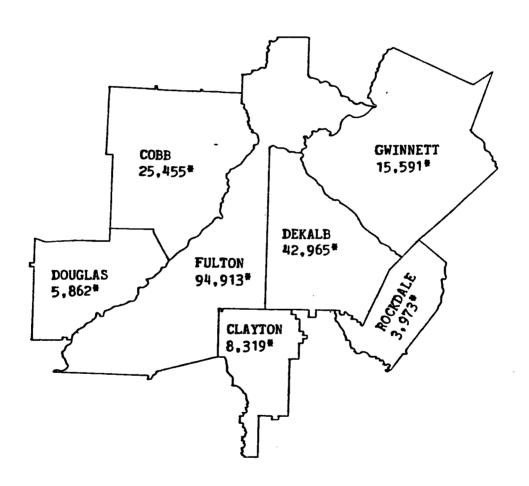
RECOMMENDATIONS FOR POLICY

There is a need for a multi-disciplinary approach in training, screening, case planning, and in the development of a local response system. There is a need for written, pre-planned response guidelines and protocols which clarify the appropriate functions and responsibilities of each member of the professional and paraprofessional network that encounters abuse and neglect--a systems approach to treatment rather than on therapeutic techniques alone. This reasoning is based on the beliefs that (1) without a strong resource system to back up the intervention of an individual worker, treatment will be minimally effective; (2) the literature and research indicate the lack of an adequate resource; (3) some or, if not most of the causes of elder abuse and neglect lie in the larger social system. Therefore, solutions must be developed in the context of the larger society rather than be limited to individual treatment. There is a need for a national center on elder abuse and neglect to serve as a clearinghouse for information, research training and as a provider of technical assistance. Community education programs should be developed for families who have older relatives living with them or are considering such a move. These courses should be designed to prevent abuse or neglect from

occurring by informing families of what to expect in an extended family setting, how to cope with such a living arrangement and what to do when outside assistance is needed.

APPENDIX

ELDER ABUSE AND NEGLECT SURVEY



^{*}Population estimates of persons 60 years and over, December, 1980, Atlanta Regional Commission.

ELDER ABUSE AND NEGLECT QUESTIONNAIRE

PART I.

Card # Column #

For Office Use Only	Identification NumberAgency/Organization	. 1/-4/ 5/-6/
	County Reporting	7/

Most of the questions that follow can be answered by simply placing a check mark on the line to the left of the response that best completes the question-answer sequence for you. A few questions do require one or two word responses. ALL NUMERALS ON THE RIGHT ARE FOR OFFICE USE ONLY.

The following categories of abuse and neglect are used in this survey and are similar to those used in other research on elderly abuse and neglect.

Physical Abuse:

Resulting in bodily harm and injury, use of

physical restraints, sexual assault.

Substance Abuse:

Misuse of drugs, over medication, narcotics

abuse, excessive use of alcohol.

Psychological Abuse:

Verbal assault, threats, intimidation, name-

calling, isolation from others.

Financial/Material Abuse: Theft or misuse of money or property.

Violation of Rights:

Forced removal from own home, inappropriate

placement in a nursing home.

Neglect by Caregiver:

Failure to provide adequate food, shelter,

clothing, needed personal care and medical

care, appropriate supervision.

Thank you for your cooperation in this very important project. Your responses are confidential.

		Column
Wha	t is your occupational/professional title?	8/_
	you know of any instances of domestic abuse	
by sin	neglect of persons 60 years of age and over family or non-relatives that have occurred ce July, 1980 in one or more of the cateies on the preceding page?	
No.	I have no knowledge of cases of domestic se or neglect1 NO, SKIP TO QUESTION #56, page 12.	*
Yes		9/_
8.	If yes, how many of these older persons have been abused or neglected in one or more of the ways described on the preceding page?	
	Total #	10/_
b.	Did any of these cases involve Multiple abusers of the same older person?	
	Yes1	
	Yes 1 No 2 Don't know 8	11/_
	If yes, how many cases were there?	12/_
c.	Did any of these cases involve a single abuser of several different older persons?	
	Yes1	
	No 2 Don't know 8	13/
	Don t know	15/_
	If yes, how many cases were there?	14/

		Column #
đ.	Were there any cases in which two or more members of the same family or household group collectively abused two or more older members of the same household?	
	Yes1	
	Yes 1 No 2 Don't know 8	451
	Don t know8	15/
	If yes, how many cases were there?	16/
e.	Are you willing to give an indepth interview	
	about the cases that you are aware of that	
	pertain to items b., c., or d. above?	
	Yes 1	
	Yes 1 No 2	17/
	If yes, please contact Camille Jeffers, 656-7248.	
PAR	T II.	
1 311	11 11 11 11 11 11 11 11 11 11 11 11 11	
	FOLLOWING QUESTIONS FOCUS ON CASES OF ELDER ABUSE A	
	WHICH THERE WAS ONE ABUSED ELDER AND ONE ALLEGED ABU	
	ASE COMPLETE THIS SECTION OF THE QUESTIONNAIRE FOR E	
	ULD BE COMPLETED SEPARATELY FOR EACH CASE OF ABUSE.	
	NAL QUESTIONNAIRES. CONTACT THE ABOVE PERSON OR THE	
	R ORGANIZATION FROM WHOM YOU RECEIVED THIS QUESTIONN	
FEATURES	OF THE ABUSED/NEGLECTED ELDERLY PERSON	
3. How	did this case come to your attention?	
	Anonymous report 1 Physician/psychi	atrist 8
	Clergyman 2 Police officer_	9
	Crisis hotline 3 Self report	10
· —	Family member 4 Social service a	gency11 12
	Hospital/clinic staff 5 Other Neighbor 6 (please s	
	Personal observation 7	poorag,
		18/-19/

			Column #
Info	ormation on the elderly abused/ne	eglecte	ed person:
4.	Estimated Age 20/-21/	8.	Employment Status:
_	_		Employed 1 Unemployed 2 Retired 3
5.	_		Unemployed2
	Male1 Female_2 22/		Retired
	Female_2 22/		25/
6.	Race/Ethnic Identify:	9.	Chronic Health Problems
	Black1		(please specify)
	Hispanic 2		
	White3		
	Hispanic 2 White 3 Asian 4 American Indian 5		
			Don't know 8
	Other6 23/		
	(please specify)	10.	Financial Status:
	•		Totally dependent on
7.	Marital Status:		others1
	Never married 1		Partially dependent
	Married 2		on others 2
	Separated3		Independent 3
	Divorced4		Independent 3 Don't know 8 28/_
	Widowed5		28/
	Separated 3 Divorced 4 Widowed 5 Don't know 8 24/		
Pleas	se describe the types of abuse/n	eglect	most frequently
	ained in the home by this person	. In	each category
checl	k one item, only.		
11.	Physical Abuse:		
	Hitting, slapping	=	1
	Burns, scalding		3
	Sprains, dislocation, fract	ures_	4
	Bruises, Weits Burns, scalding Sprains, dislocation, fract Wounds, cuts, punctures Tying to bed or chair Sexual assault		5
	Tying to bed or chair		6
	Sexual assault		7
	Other (please specify)		o
	Does not apply		9 29/

12, Psychological Abuse: Verbal assault Threats Intimidation Name-calling Isolation from members of household Other (please specify) Does not apply 13. Financial/Material Abuse:	<i>1</i> .
Verbal assault 1 Threats 2 Intimidation 3 Name-calling 4 Isolation from members of household 5 Other (please specify) 6 Does not apply 9	/ .
Threats	/ .
Intimidation 3 Name-calling 4 Isolation from members of household 5 Other (please specify) 6 Does not apply 9 30	1 .
	1 .
	1.
	1.
	1.
	′—
Theft or misuse of money or checks1	
Theft or misuse of property 2 Other (please specify) 3	
Other (please specify) 3	
Does not apply 9 31	
14. Violation of Rights:	
Illegally forced to leave own home 1	
Forced into inappropriate nursing home placement 2	
Other (please specify)	
Other (please specify) 3 Does not apply 9 32	'
15. Neglect by Caregiver:	
Lack of needed personal care	
Lack of adequate food, shelter, clothing 2	
Lack of essential medical care 3	
Lack of appropriate supervision 4	
Abandonment 5	
Other (please specify) 6	
Does not apply 9 33	
16. Substance Abuse:	
Over medication1	
Other (please specify) 2	
Does not apply 9 34	

Disabi	lity	Rating	Scale

18.	Eating:	22.	Bathing:	
	Requires no assistance 3	~~.	No assistance require	a ·
	Moderate assistance 2		Moderate assistance	_
	Considerable assis-		Considerable assis-	—
	tance		tance	
	35/		39/_	_
9.	Hearing:	23.	Dressing:	
	Normal 3		No assistance re-	
	Moderately impaired 2		quired	:
	Deaf1		Moderate assistance	;
	36/		Considerable assis-	
_			tance	_1
0.	Sight:		40/_	
	Normal3			
	Moderately impaired 2	24.	Incontinence: (Bladder)	
	Blind1		Never	
	37/		Occasionally	2
	50 1		Frequently	_1
•	Physical Mobility:		41/_	
	Walks without			
	assistance5	25.	Incontinence: (Bowel)	_
	Walks with human		Never	3
	assistance 4		Occasionally	_2
	Walks with cane or		Frequently	_1
	walker 3		42/_	
	Requires wheelchair 2	-		
	Unable to walk or use	26.	•	
	wheelchair 1		Personal Safety:	
	38/		Never	-4
			Sometimes	
			Frequently	-{
			All the time43/	_'
			43/	

				Column #
27.	Confined to Bed:	31.	Mentally Confused:	
	Not at all4		Never	3
	Sometimes 3		Occasionally	2
	Most of the time 2		All the time	1
	All the time1			48/
	44/	20	Dama - 4.0. 3	
20	II na an ann an Admir	32.	Forgetful:	-
28.	Uncooperative:		Never	
	Never3		Occasionally	2
	Occasionally 2		All the time	1
	All the time 1			49/
	45/			
	_	33 •	Sleeplessness/Wande	ring:
29.	Depression:		Never	3
	Never3		Occasionally	2
	Occasionally 2		Frequently	1
	All the time1			50/
	46/			
30.	Outgoing in Social Relations:			
	Never 1			
	Occasionally 2			
	All the time 3			
	47/			
	The state of the s			

FOR OFFICE	Physical Self Maintenance Ability (sum of	
USE ONLY	items/columns 35/-44/)	51/-52/
1	Disposition to Social Interaction (45/-47/)	53/
	Mental Status (48/-49/)	54/

		Column #
Vic	tim Classification	
34.	Which of the following types of elder abuse/neglect victims best describes this case?	
	A person who is mentally competent and consents to receiving help with the problem1	
	A person who is mentally competent but will not admit that there is a problem 2	
	A person who is mentally competent, admits that there is a problem, but will not accept help 3	
	A person who is not mentally competent and does not seek help 4	
	An emergency case in immediate danger of death or serious physical, mental or financial harm 5	
	Don't know8	5 5/
RESI	DENCE AND HOUSEHOLD OF THE ELDERLY PERSON	
35.	In what county does the abused person live?	
	Clayton 1	
	Dokalh	
	Douglas 4	
	Fulton 5	
	Fulton 5 Gwinnett 6	
	Rockdale 7	
	Don't know 8	56/
36.	Does the abused person live in one of the following cities	es?
	Atlanta 1	
	Decatur 2 Marietta 3 Other (please specify) 4	
	Other (please specify) 4	
	Don't know 8	57/

			Column #
37.	In what type of housing does the	abused person live?	
	Single family dwelling 1	Boarding home	6
	Multiple family dwelling 2	Mobile home, tra	ailer 7
	Multiple family dwelling 2 Public housing for the	Condominium	
	elderly 3	Other	9
	Private housing for the	(please spe	ecify)
	elderly4	Don't know	
	Apartment5		58/-59/
38.	Estimated number of rooms in house elderly person lives	hold where the	60/
39.	With whom does the elderly person	live?	
	Lives alone	1	
	With angues only	2	
	With other relatives		
	With non-relatives	4	
	(please specify)		
	Don't know	8	61/
40.	Total number of persons in theDon't know	household8	62/
41.	Number of generations in the ho	ousehold?8	63/
42.	Where does the abused person sleep?	?	
	Alone, private bedroom	1	
	Bedroom with spouse	2	
	Bedroom with others	3	
	Living room cot or sofa	4	
	Other room (please specify)	5	
	Don't know	8	64/

	•		•	•
				Column #
43.	Which of the following statement financial status of the abused			
	household?	.	•	
	Less than adequate to pay	•	·	
	Adequate More than adequate			
	Don't know		8	65/
				
FEAT	TURES OF THE ALLEGED ABUSER			
44.	Estimated Age:	48.	Marital Status:	
	Estimated Age: 66/-67/		Never married	1
			Mannied	
45.	Sex:		Separated Divorced Widowed	3
	Male1		Divorced	4
	Female 2		Widowed	5
	68/		Don't know	8
46.	Race/Ethnic Group:			71/
40.		JI O	Major Health Proble	· • •
	Black 1 Hispanic 2	77.	(please specify)	:III.3
	White 3 Asian 4 American Indian 5 Other 6		(prease specify)	
	Agian			
	American Indian 5			
	Other 6		Don't know	R
	(please specify)			2/-73/
	69/		•	-, 15, <u></u>
47.	Fundament Status			
٧1.	Employment Status: Employed 1			
	Unemployed 2			
	Retired 3			
	70/			
50.	Where does the alleged abuser 1	live?		
	In same household as the ab	oused/n	eglected elder 1	
	In the same neighborhood, b			
	Elsewhere in the Atlanta Re			
	Outside the Atlanta Region		4	
	Don't know		8	74/

	,	
	•	Column #
51.	What relation is the alleged abuser to the abused/	•
21.	neglected person?	
	neglected person:	
	Son1	
	Daughter 2	
	Grandson 3	
	Granddaughter 4	
	Brother 5	
	Sister 6	
	Spouse 7	
	Other (please specify) 8	
	Don't know 9	7 5/
		
52.		
	abused/neglected elderly person?	
	Yes 1	
	NO Z	
	Don't know 8	76/
		 _
53.	Characteristics of the alleged abuser that could have	
	contributed to his/her mistreatment of the elderly person	?
	Alcohol abuse 1	
	Alcohol abuse1	
	Financial problems 3	
	Drug abuse 2 Financial problems 3 Loss of employment 4 Internal family conflicts 5 Health problems 6 Emotional stress of caregiving 7	
	Internal family conflicts 5	
	Health problems	
	Frational atreas of caregiving 7	
	Other 8	
	(please specify)	
	Don't know9	77/
		•••
54.	How long has this abusive behavior existed?	
	1-6 months 1 3-5 years	4
		5
	1-2 years 3 Don't know	8
		78/
		· · · · —

		Column #
55.	What is the current status of the case?	
	Abuse continues 1 Neglect continues 2 Temporary solution 3 Problem fully solved 4 Don't know 8	
	Neglect continues 2	
	Temporary solution 3	
	Problem fully solved 4	
	Don't know 8	79/
56.	Are there any comments you wish to make about this survey	?
	k you for your cooperation in participating in this survey.	
Plea	se return this questionnaire promptly. Fold and staple so paid return address is visible.	that the
DATE	COMPLETED / /	
NAME	(OPTIONAL)	
AGENC	CY/ORGANIZATION	
•	ess	·
PHONE		

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FOOTNOTES

¹Elizabeth E. Lau and Jordan I. Kosberg, "Abuse of the Elderly by Informal Care Providers", Aging 299-300., (September/October 1979): 12.

²Marilyn R. Block and Jan D. Sinnott, eds., <u>The Battered Elder Syndrome:</u> An <u>Exploratory Study</u> (College Park, Md., 1979).

³Fowler, Jan, "Domestic Violence: Elder Abuse", Library of Congress, Congressional Research Service, Education and Public Welfare Division, February 6, 1981 p. 4.

⁴U. S. Congress, House Select Committee on Aging Hearing, 1980, The Hidden Problem, (Washington, D. C.: Government Printing Office, 1980.

⁵Lau and Kosberg, p. 11-13.

⁶Helen O'Malley, Howard Segars, Ruben Perez, Victoria Mitchell, and George M. Knuepfel, "Elder Abuse in Massachusetts: A Survey of Professionals and Paraprofessionals" (Boston: Legal Research and Services for the Elderly, 1974), p. 2.

⁷Richard L. Douglass, Tom Hickey, and Catherine Noel, "A Study of Maltreatment of the Elderly and Other Vulnerable Adults", (Ann Arbor: University of Michigan), p. 40.

8Block and Sinnott, p. 77.

 $^9\text{O'Malley, Segars, Perez, Mitchell, and Knuepfel, pp. 31-32.}$

10Block and Sinnott, pp. 73-74.

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