

DOMESTIC ABUSE IN LATER LIFE*

Abusers

What do perpetrators of domestic abuse in later life have in common? To end elder domestic violence, abusers must stop hurting their victims. To begin this process of determining whether criminal justice, social service, other approaches or a combination is most effective in changing abusers' behavior, research identifying common traits of abusers can be a starting point. This paper will examine the research that provides information, including gender, about abusers.

This series of papers** defines domestic abuse in later life as male and female victims, age 50 and older, abused by someone in a trusted, ongoing relationship like a spouse/partner, family member, or caregiver. The victims lived primarily in the community, not institutions (e.g., nursing homes). Studies from the United States and Canada were included.

ARTICLES REVIEWED

Twenty-one articles published between 1988 and 2000 were reviewed for this article.

Author(s) Pub. Date	Sample size and demographics	Type(s) of abuse covered ^s	Selected finding(s) (page number/s in parentheses)
Dunlop, et al 2000	319 substantiated cases of abused persons aged 60+ in Miami-Dade County, Florida	APS substantiated cases of abuse, neglect, and exploitation	<ul style="list-style-type: none">53.5% of all abusers were female; 56.2% of abusers of elder men were female. (108)
Phillips, et al 2000	93 cases of women aged 55+ caring for dependent spouse or other elder family member	Verbal and physical abuse; threatened with gun/knife; gun or knife used -- all by the elder for whom they were caring	<ul style="list-style-type: none">29% of the caregivers had been abused by the elder they were caring for. (128)
Teaster, et al 2000	42 substantiated cases of sexual abuse against persons 60+, collected over a 3-year period in Virginia	APS-substantiated cases of elder sexual abuse	<ul style="list-style-type: none">Of the 42 victims, 40 were female. All of the identified perpetrators were male. (5, 9)

* This series of articles is dedicated to Dr. Rosalie Wolf, internationally renowned researcher on elder abuse and domestic abuse in later life. We miss her gentle guidance, wisdom, and dedication to elder victims.

♦ This article is part of a series of papers examining research on domestic abuse in later life. To link to the other articles, see the note at the conclusion of this paper.

* For a chart with a more detailed description of the different definitions of abuse, see the National Center on Elder Abuse website at www.elderabusecenter.org.

Brownell, et al 1999	401 cases of abuse of elders 60+ (with 404 identified abusers) known to Elderly Crime Victims Resource Center in New York City; subanalysis done of 218 abusers for whom mental health status was reported	Physical, psychological, financial abuse and neglect (one case of sexual abuse was counted as physical abuse)	<ul style="list-style-type: none"> • 56% of abusers male; 44% female (86) • 74% of abusers suffered from impairment (substance abuse, mental illness, mental illness/chemical addiction, or dementia). (86) • Of the 161 abusers who were impaired, 82 were alcohol/drug abusers; 42 were mentally ill; 27 were both; 10 had dementia. (86) • Impaired abusers were more likely to live with victims, be unemployed and have a history of encounters with the criminal justice system. (81)
Crichton et al 1999	50 Canadians age 60+ abused by adult child; 50 abused by spouse, from Elder Abuse Resource Center in Winnipeg	Agency-substantiated cases of physical, psychological, and material abuse; neglect	<ul style="list-style-type: none"> • Of 50 adult child cases, 34 perpetrators were sons, 19 daughters. (122) • Of 50 spouse cases, 43 perpetrators were husbands, 7 wives. (122)
Lithwick and Beaulieu 1999	128 cases of mistreatment of adults aged 60+ brought to the attention of community service agencies in Quebec	Physical, sexual or psychological abuse; financial and material exploitation; neglect by family members and acquaintances	<ul style="list-style-type: none"> • 65% of the perpetrators were men. (101)
Anetzberger 1998	29 Cleveland APS cases from 1987 to 1995	Psychological abuse and psychological neglect	<ul style="list-style-type: none"> • “The perpetrator of psychological neglect [3 cases] was always a woman (wife or niece).” (146) • “The perpetrator of psychological abuse [26 cases] was slightly more likely (57.1%) to be a man (son, husband, ex-husband, or male companion).” (146)
Cohen et al 1998	137 spousal/consortial homicide-suicides from 7 Florida counties between 1988 – 1994. 48 involving perpetrators 55+ were compared to 89	Instances of homicide/suicide	<ul style="list-style-type: none"> • All older perpetrators were men; 2 younger perpetrators were women. (392) • 29% of older perpetrators were depressed and 18.7% had talked of suicide, but only one tested positive for antidepressants at autopsy. (393)

	involving perpetrators <55.		
NCEA National Elder Abuse Incidence Study 1998	APS reports and community “sentinel” reports of abused and neglected persons age 60+ from 20 US counties in 15 states	Physical abuse, sexual abuse, emotional or psychological abuse, neglect, abandonment, financial or material exploitation	<ul style="list-style-type: none"> • 34.3% of perpetrators were aged 60 years or older. (7) • “Overall, men were the perpetrators of abuse and neglect 52.5% of the time. Of the substantiated cases of abuse and neglect, males were the most frequent perpetrators for abandonment (83.4%), physical abuse (62.6%), emotional abuse (60.1%) and financial/material exploitation (59.0%). Only in cases of neglect were women slightly more frequent (52.4%) perpetrators than men.” (7)
Reis and Nahmiash 1998	341 cases of elders (aged 55+) being cared for by unpaid family or friends, in Montreal, Canada. Abuse was assessed as “likely” in 69 cases; “not likely” in 272 cases	Physical, psycho-social, and financial abuse; both passive and active neglect	<ul style="list-style-type: none"> • Ranking 27 caregiver and care receiver characteristics associated with abuse, caregiver characteristics were: <ol style="list-style-type: none"> 1. Has behavior problems 2. Is financially dependent 3. Has mental/emotional difficulties 6. Has alcohol/substance abuse problems 7. Has unrealistic expectations 9. Lacks understanding of medical condition 10. Caregiving reluctance 12. Has marital/family conflict 13. Has poor current relationship (with care receiver) 14. Caregiving inexperience 17. Is a blamer 24. Had poor past relationship
Lachs, et al 1997 (b)	182 victims of physical abuse aged 60+ from New Haven, Connecticut	APS-substantiated cases of physical abuse	<ul style="list-style-type: none"> • Adult son was abuser in 28.9% of cases. (450) • Spouse was abuser in 26.8% of cases. (450) • Adult daughter was abuser in 21.6% of cases. (450) • Abusers cohabitated with victims in 87% of cases. (451)
Reis and	6 groups from Montreal,	Physical,	<ul style="list-style-type: none"> • “The abusive group were more

Nahmiash 1997	Canada were compared: a family caregiver group (total caregivers 136) and a care receiver (age 55+) group (total care receivers 128) for confirmed abuse cases receiving services; confirmed nonabuse cases receiving services; and confirmed nonabuse cases not receiving services.	psycho-social, and financial abuse; both passive and active neglect	<p>depressed and had fewer available social supporters than each of the two nonabusive groups.” (347)</p> <ul style="list-style-type: none"> • “Abusive caregivers are, on the whole, no less agreeable or more neurotic than are nonabusive ones.” (347) • “Less social support (according to caregiver reports rather than care receiver ones) and greater caregiver depression are confirmed in this study as abuse markers.” (347)
Wolf and Pillemer 1997	73 abused women aged 60+ from 4 U.S. cities. 22 were abused by husband, 51 by children (review of written case assessment data)	Physical abuse, psychological abuse, neglect, financial exploitation	<ul style="list-style-type: none"> • 54.2% of adult child abusers were single; 20.8% divorced. (328) • 76.6% of adult child abusers were somewhat to entirely financially dependent on abused mother. (331) • 64.6% of adult child abusers were somewhat to entirely dependent on abused mother for housing. (331)
Seaver 1996	132 women aged 50+ who have attended older abused women’s program in Milwaukee, Wisconsin	Unspecified	<ul style="list-style-type: none"> • Eleven of the husbands (14%) were dependent on the women for caregiving. (15) • 35 (66%) of the adult children were financially dependent on their mothers. (15) • 38% of the abusers had problems with drugs and/or alcohol. (16) • 51% of the adult kin had substance abuse problems, and 30% had psychiatric problems. (16)
Griffin 1994	10 abused African Americans age 60+ and 6 of their perpetrators from 3 rural counties in North Carolina	APS-substantiated cases of financial exploitation (6), self-neglect (5), verbal abuse (2), and neglect (1)	<ul style="list-style-type: none"> • Victims and perpetrators minimize and neutralize abusive behavior. (21)
Ramsey-Klawnsnik 1991	28 community-dwelling older (ages 65 – 101) women suspected by MA APS workers of being sexually abused	APS suspicion elder was sexually abused	<ul style="list-style-type: none"> • All but 1 perpetrator was male. (73)
Greenberg et al	204 cases of abuse of person 60+ by adult	APS-substantiated	<ul style="list-style-type: none"> • 25% of abusers were financially dependent on elder. (78)

1990	child in Wisconsin	cases of physical abuse, material abuse, and neglect	<ul style="list-style-type: none"> • 44% of male abusers and 14% of female abusers had alcohol/drug problems. (78) • 11% of abusers had mental illness; 58% of these were primary caregivers to the elder parent. (82)
Brown 1989	Random sample of 37 Southwest reservation-dwelling male and female Navajo aged 60+, and their family members	5 types of neglect; 5 types of verbal/psychological abuse; 4 types of physical abuse; financial exploitation	<ul style="list-style-type: none"> • Caregivers with personal problems were more likely to physically abuse; this was not true of perpetrators of other types of abuse. (31)
Godkin, et al 1989	59 abused elders (60 years and older) compared to 49 non-abused elders, both served by a Massachusetts home care program	Physical, psychological, and material abuse; active and passive neglect by a caregiver	<ul style="list-style-type: none"> • “[M]embers of abusive families are more likely to have emotional problems which contribute to interpersonal difficulties. Abused elders are not more dependent on caregivers for many of their daily needs. However, the abused elderly and their caregivers have become increasingly interdependent prior to the onset of abuse because of the loss of other family members, increased social isolation, and the increased financial dependency of the perpetrator on the elderly person.” (207) • 55.9% of abusers were under the age of sixty. (212) • “A significantly higher percentage of caregivers in abuse/neglect cases had a history of mental or emotional illness (40.7%) or had suffered a decline in their mental health prior to the abuse (45.8%) than the caregivers in the non-abuse samples (5.3% and 5.0%, respectively).” (212) • Alcohol abuse occurred in one-third of abuse cases but was absent in the comparison group. (212) • 74.4% of abusing caregivers were financially dependent on the elder, compared to 36.8% of the non-

			<p>abusing caregivers. (217)</p> <ul style="list-style-type: none"> • “Nearly two-thirds (60.3%) of the abusers had undergone a recent change in their family relationships and two-fifths (41.4%) in living arrangements prior to the onset of abuse or neglect compared to 15.0% and 0.0%, respectively, for the caregivers in the non-abuse situations.” (218) • “...it appears that both abused elders and the abusers experience emotional problems which contribute to interpersonal difficulties in their relationship.” (223)
Pillemer and Finkelhor 1989	Random sample of 2020 community dwelling people aged 65+ in Boston, Massachusetts; 63 cases of elder abuse found	Physical assault, psychological abuse, and neglect	<ul style="list-style-type: none"> • The abusers had a very high incidence of socioemotional maladjustment such as having been arrested, hospitalized for psychiatric condition, or involved in other violent behavior. (183 – 184) • Abusers were likely to be dependent on victim for financial assistance, household repairs, transportation, and housing. (184)
Pillemer and Finkelhor 1988	Random sample of 2020 community dwelling people aged 65+ in Boston, Massachusetts; 63 cases of elder abuse found	Physical assault, psychological abuse, and neglect	<ul style="list-style-type: none"> • 43% of the physical violence cases were of wife assaulting husband, and 17% were of husband assaulting wife. (54)

GENERALIZED FINDINGS

A number of the studies found that a significant number of abusers suffer some form of impairment (Brownell, 1999; Cohen, 1998; Reis, 1998 and 1997; Seaver, 1996; Greenberg, 1990; Lachs, 1997b; Godkin, 1989; Pillemer, 1989). These impairments included substance abuse, mental illness and depression, or cognitive impairments.

Research also indicated that the abusers tended to be dependent on their victims. This goes against the prevalent notion that elder abuse is primarily caused when frail, elderly are dependent on others for their care. Often this dependence is seen to cause stress as care needs increase and the care provider “snaps” and become abusive. However, a number of studies found that the abuser often depends on the victim for housing, transportation and sometimes care

(Brownell, 1999; Wolf, 1997; Seaver, 1996; Pillemer, 1989). Financial dependency of adult children also seems to be a key factor (Reis, 1998; Wolf, 1997; Seaver, 1996; Greenberg, 1990; Godkin, 1989; Pillemer, 1989).

Some research also suggests that abusers have problems with relationships, may be more isolated and lack social supports (Reis, 1998 and 1997; Godkin, 1989). Brown (1989) suggests that abusers with personal problems may be more physically abusive. Perpetrators may minimize or deny their abusive behavior (Griffin, 1994).

Most studies found the majority of perpetrators to be male (Brownell, 1999; Crichton, 1999; Lithwick, 1999; NEAIS, 1998). Sexual abusers were almost exclusively male (Teaster, 2000; Ramsey-Klawnsnik, 1991). Of the cases reviewed, only older men (not women) perpetrated homicide-suicide in later life (Cohen, 1998).

A few studies found more female perpetrators than male (Dunlop, 2000; Anetzberger, 1998). These studies included neglect, where women tend to exhibit higher rates of abuse than men (possibly because women provide more care than men). Pillemer (1988), using the Conflict Tactics Scale, also found women more likely to use physical violence than men. Unfortunately, the Conflict Tactics Scale does not differentiate between levels of physical violence. Throwing something across the room rates equally to choking a victim. The scale also does not take into account which party may be living in fear or have changed their lifestyle as a result of the abuse.

The NEAIS study (1998) identified that more than 1/3 of perpetrators are age 60 or older. These abusers are predominately spouse/partner abusers but may also include older adult children abusing their parents who are in their 80's or 90's. In addition, Phillips (2000) found that many older caregivers (age 55+) were being abused by their (older) care recipient.

LIMITATIONS OF STUDIES

Numerous limitations in the research on abuse in later life were found. In part because of the lack of financial resources, only a few studies have been large (more than 1,000 respondents) random sample studies (Lachs 1997a; Podnieks, 1992a; Pillemer, 1988). Even these large studies ultimately based their conclusions on relatively small numbers of abuse victims, ranging from 47 to 80. Only one of the random sample studies included cognitively impaired elders (achieved by interviewing other family members), but using the reports of proxies is considered unreliable (The Robert Wood Johnson Foundation, 2001).

All the other studies had serious sampling biases because they were based on elders who were using services of some sort and/or were known to adult protective services or domestic violence programs. This is problematic, because it is clear that many abused elders are isolated and do not come to the attention of professionals or seek help. With one exception (Otiniano, 1998), these studies also involved relatively small samples – 10 to 401, with the majority being under 100. Respecting the confidentiality and safety of victims creates problems with many scientific methods. Very few studies used control groups.

In addition, some elders deny that what they are experiencing is abuse (see, for example, Phillips, 2000), introducing another source of underreporting. Perhaps more importantly, studies have shown that elders' definitions of abuse do not always correspond to professionals' definitions, which may confound findings.

Comparing results across studies is practically impossible. These studies varied widely in: the types of abuse studied, the specific definitions of the types of abuse studied; whether abuse was self-reported or from agency records; the age of respondents (which ranged all the way down to 40); whether the target audience was predominately healthy elders or vulnerable adults; and whether only women or men and women were included.

POTENTIAL IMPLICATIONS

Given the number of studies identifying mental health or substance abuse problems among abusers, professionals in domestic violence/sexual assault, aging and adult protective services must work closely with providers in these systems. These services must include or be in addition to programs focusing on ending abusive behavior.

Professionals and community members require training to consider an adult child's dependence (emotional, daily living or financial) as a potential red flag for abuse. Too often professionals look for the dependency of the victim as a red flag rather than the dependency of the potential abuser. Focusing questions on all parties' financial dependency may help providers begin to identify other forms of abuse.

While the research identified men as the primary abusers of older people, a higher percentage of women were abusers than is seen in younger domestic violence. More services for women abusers, particularly those who neglect older people they provide care for, will need to be created.

Finally, services must be created to hold older abusers accountable and change their behavior to truly keep victims safe. Currently, batterers treatment programming is not designed for older batterers or adult children/grandchildren who are abusive. Like services tailored for older battered women, age-specific services may be needed to work with older perpetrators and adult children, other family members or caregivers who abuse elders.

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ADDITIONAL RESOURCES

Nexus. (1999) Moving Beyond Violence: Treating Older Batterers. (Available from the Goldman Institute on Aging, 3330 Geary Boulevard, San Francisco, CA, 94118, (415) 750-4188.)

Ramsey-Klawnsnik, H. (2000). Elder Abuse Offenders: A Typology. *Generations*. Vol. XXIV, No. II, 17 – 22.

For a list of research questions on elder abuse and domestic abuse in later life, go to <http://www.elderabusecenter.org/research/agenda.html>.

For other articles in this series (ADD LINKS TO OTHER 8 ARTICLES).

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