13.1. BACKGROUND AND INTRODUCTION

Over the past two decades, increasing attention has been paid to mistreatment of older persons by researchers, policy makers, and the general public. In this chapter, we review issues related to the prevention of elder abuse and neglect. We begin by discussing the state of existing research and estimates of the extent of the problem. We provide a discussion of risk factors, because prevention programs necessarily need to take probable risk factors into account. We then review types of interventions that have been used to prevent elder abuse. As will be discussed, there is a paucity of reliable research on elder abuse in general and almost no scientifically acceptable research on the effectiveness of various prevention strategies for elder mistreatment. For this reason, we focus on identifying promising program examples and on suggestions for future research. Further, several preventive options are controversial in the field of elder abuse and, therefore, require rigorous evaluation.

13.1.1. Definitions

A recent panel convened by the U.S. National Academy of Sciences (National Research Council, 2002) has proposed a useful scientific vocabulary for elder mistreatment, which we follow in this chapter. Elder abuse is defined as: “(a) intentional actions that cause harm or create a serious risk of harm (whether or not harm is intended), to a vulnerable elder by a caregiver or other person who stands in a trust relationship to the elder, or (b) failure by a caregiver to satisfy the elder’s basic needs or to protect the elder from harm.” This definition encompasses two key ideas: that the older individual has suffered injury, deprivation, or unnecessary
danger and that a specific other person (or persons) is responsible for causing or failing to prevent it.

Within the overarching framework of elder abuse, there is now general agreement on the scope of actions that fall under this rubric. Researchers, practitioners, and most legal statutes recognize the following types of abuse: (1) physical abuse, which includes acts carried out with the intention to cause physical pain or injury; (2) psychological abuse, defined as acts carried out with the intention of causing emotional pain or injury; (3) sexual assault; (4) material exploitation, involving the misappropriation of the elder’s money or property, and (5) neglect, or the failure of a designated caregiver to meet the needs of a dependent older person. For the purposes of this chapter, we focus primarily on physical abuse, because of its clear relationship to the potential for injury. However, a number of studies and prevention programs focus on one or more additional types of abuse, and we have included them in our discussion.

13.1.2. Problems in the Research Base

Before summarizing the available findings, it is important to review briefly the problems in using existing research to understand risk factors for elder mistreatment and the potential effectiveness of prevention programs. The first major limitation of previous research is an unclear definition of the object of study. Most studies are weakened by their undifferentiated treatment of various types of abuse and neglect. Second, different criteria have been used to determine the population at risk of elder mistreatment. Some researchers have included people younger than 60 years of age in their studies, whereas most others have chosen 60 or 65 years as the entry point. A number of investigators have restricted their studies to caregivers to elderly people, frail elders, or to people sharing a residence, while others have included all categories of older people.

Third, few studies that have purported to address risk factors have in fact included comparison groups in their designs. For this reason, the generalizations made by the researchers are necessarily suspect. Fourth, studies have employed widely differing methods, including random sample surveys, interviews with patients in medical practices or caregivers in support programs, and reviews of agency records. Fifth, a number of studies have not employed reliable and valid measurement of the indicators of risk.

Sixth, with one exception (Lachs, Berkman, Fulmer, & Horwitz, 1994; Lachs, Williams, O’Brien, Hurst, & Horowitz, 1997), prospective studies of elder abuse do not exist. As Lachs et al. (1994) point out, retrospective research designs contain several potential biases, including recall bias, the respondent reinterpreting key facts or feelings from a later vantage point; information bias, the respondent (especially if cognitively impaired) may not be able to recall or provide valid information about exposure to maltreatment; and the failure of retrospective studies to take into account the timing and duration of events and their progression over time.

Finally, and most pertinent to this chapter, there is little hard evidence regarding the effects of interventions of any kind, including preventive interventions. A review of the elder abuse literature for the period 1980–1996 by the National Academy of Sciences Committee on Family Violence Interventions (Chalk & King, 1998) produced reports on approximately a dozen elder abuse programs. Seven of these were evaluation studies that included outcome measures, but only two met the scientific standard for inclusion in the evidentiary base for the committee’s report. Both of the latter were small-scale projects: one assigned advocates to