

ELDER JUSTICE COORDINATING COUNCIL
RESEARCH & GRANTS SUBCOMMITTEE
NATIONAL RESEARCH AGENDA ON ELDER JUSTICE

Over the last decade, the collective knowledge of and experience with elder abuse, neglect, and exploitation has grown tremendously, as have efforts from the federal government to respond to this growing concern, with notable achievements having been made with the development of [the Elder Justice Roadmap](#) (2009), passage of [the Elder Justice Act](#) (2010), and the development of [the Elder Justice Coordinating Council's Eight Recommendations for Increased Federal Involvement in Addressing Elder Abuse, Neglect, and Exploitation](#) (2014). Yet huge gaps in the research literature still remain, and make responding to and preventing future abuse incredibly challenging.

A [national prevalence study funded by the National Institute of Justice](#) found that one in ten older Americans residing in the community experiences some form of elder abuse in a given year. Elder abuse is a significant social and public health problem in our country and yet our empirical understanding of elder abuse is limited.

The Research & Grants Subcommittee of the Elder Justice Working Group (EJWG), which supports and advises the Elder Justice Coordinating Council (EJCC), has put together this list of research needs that would serve to enhance the safety and recovery of older Americans, as well as enhancing society's response to elder abuse, neglect, and financial exploitation. The Research and Grants Subcommittee developed this list by conducting a scan of the existing literature and research agendas, in an attempt to understand what is still outstanding.

Terminology varies across disciplines, and as this document is the produce of multiple agencies working in multiple fields in coordination, there is some variety of language. Elder abuse, elder maltreatment, elder mistreatment, and older adult maltreatment are all used interchangeably here.

All people, including older adults, have the right to live free of abuse, neglect, and exploitation. This Research Agenda is presented with the intention of moving the field of Elder Justice forward to achieve a vision where that is possible.

- [Longitudinal Research on the Causes and Consequences of Types of Abuse \(\\$50m\)](#)
Despite recent research advances in the field of elder mistreatment, there are still many questions about the causes and consequences of elder mistreatment, which left unanswered, stand in the way of developing and implementing effective programs. As one example, although there is widespread consensus that the opioid crisis represents a significant and growing problem for older adults, because there are multiple explanations that can account for associations between opioid misuse and elder abuse, neglect, and financial exploitation, we are unable to draw causal conclusions. Elder mistreatment involves particularly complex dynamics that generally unfold over multiple periods. The etiology, ebb and flow, dynamics, life transitions, and cumulative effects that contribute to elder abuse remains a mystery, and yet if known could be used to develop effective prevention and intervention programs. Furthermore, as longitudinal data on elder abuse remains scarce, little is known about the long-term effects for individuals who have experienced abuse, and even less is known about how it affects families.

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- **Risk and Protective Factors Research (\$20m)**

Although research, to date, has focused primarily on identifying risk factors associated with elder mistreatment and neglect, there is little consensus on risk and protective factors associated with each type of abuse. Currently, researchers largely rely on indirect measures to infer abuse and much of what is known about elder mistreatment is derived from self-reports. Given that identifying risk and protective factors for abuse is crucial for the development of prevention and intervention programs, there exists a need for high-quality risk and protective factor research across types of abuse and at the individual, family, living situation, and community level. Risk and protective factors research should address both victims and perpetrators and include contextual factors (e.g., poverty, substance abuse, mental illness, diminished cognitive capacity, functional impairments such as vision, hearing and mobility limitations, family issues, and other social determinants of health). To the extent possible, to reduce health disparities, research among minority populations and across community and formal-care settings (i.e., institutional/residential) should be emphasized.

- **Decisional Capacity Research in the Context of Elder Abuse (\$20m)**

The right to autonomy and self-determination are fundamental human rights to which individuals with capacity are generally accorded. Whether an older adult has the capacity to make certain decisions, for example -- live alone, give all their money to their favorite charity and leave nothing to their children, engage in sex -- has implications for how society intervenes. The state has more authority to intervene when there is some diminished decision making capacity (impairments due to things like Alzheimer's disease and other dementias, stroke, traumatic brain injury, etc.). However, consensus on how to assess decisional capacity is lacking. There is little consensus in the scientific community on a definition of decisional capacity. The instruments used to assess capacity have not kept pace with advances in cognitive science. And yet we know that where decisional capacity is compromised, susceptibility to abuse of all types is known to be even higher. Therefore, building an evidence-based decisional capacity assessment protocol based on current cognitive science is critical to ensuring that we are intervening only where warranted.

- **Trauma and Long-term Effects of Elder Abuse (\$25m)**

Victims of elder abuse have significantly higher levels of psychological distress and lower perceived self-efficacy than older adults who have not been victimized. This suggests that at least some older adults will experience abuse as a form of trauma and may reach the clinical level of post-traumatic stress disorder (PTSD). Yet, while some victims may develop symptoms that meet the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) criteria to make a diagnosis of post-traumatic stress disorder (PTSD), others may not reach criteria or may remain asymptomatic, but for reasons which are not well understood. Even less is known about factors contributing to PTSD, which is known to arise as a result of personally experiencing a traumatic event, witnessing a traumatic event, or learning that a relative or close friend was exposed to a traumatic event. Understanding vulnerabilities to trauma, whether it rises to the level of PTSD or otherwise, also has legal implications within the justice system given that PTSD could lead to memory loss or inaccurate eyewitness accounts. Understanding whether and under what

circumstances older adults experience elder abuse as a form of trauma and resulting PTSD would inform health and behavioral health interventions by expanding our understanding of the full impact of experiencing abuse.

- **Public Health Surveillance (\$25m to initiate)**

Public health surveillance involves the ongoing, systematic collection, analysis, and interpretation of health-related data essential to planning, implementation, and evaluation of public health practice (CDC). The first nationally representative prevalence study on types of elder abuse was conducted by phone, and published in 2010, and no follow up study has been forthcoming. Moreover, while prevalence estimates presented in this report were high (10% experienced emotional, physical, or sexual mistreatment or potential neglect), these numbers likely underestimate the full scope of elder mistreatment due to under-reporting. Accurate prevalence estimates from population-based surveillance data are critically needed to describe the extent of the problem, for assessing the costs of elder abuse, and determining the potential impact of interventions. Fraud and financial exploitation should also be included in ongoing surveillance.

- **Older Consumer Fraud Victim Intervention Programs (\$25m)**

There exists a need to identify the elements of a program that would interfere with the re-victimization of consumer fraud victims and restore the victim to previous levels of functioning to the extent possible. State and federal law enforcement authorities are well aware of consumers who have fallen victim to fraud, are placed on “sucker lists”, and then are repeatedly approached by fraud perpetrators. In the face of incontrovertible evidence provided to them time and again that they are being subjected to fraud, these older adults continue to send money to fraud perpetrators. Interventions to address this pervasive problem in our country are needed as older adults are losing their life savings to these fraud perpetrators and are experiencing the concomitant fallout from that loss (e.g., loss of their home, diminished health).

- **Family-Level Interventions (\$25m)**

There is interest in developing individual-, family- and community-level interventions to promote recovery and resilience in victims and their families. Yet, while elder mistreatment is often perpetrated by family members, interventions are rarely designed for the purpose of healing families. Research is needed on integrated, multi-faceted intervention approaches. Creating effective solutions for treating elder mistreatment requires, at minimum, knowing for whom the intervention would be used, most beneficial, and cost-effective. And to these ends, this would require the creation of a nationally representative data source that includes sensitive and robust dynamic measures of psychosocial and contextual variables associated with the different sub-types of elder mistreatment. Two examples of family interventions might include:

Some older adults are providing support to their adult children with various impairments (e.g., developmental disabilities, substance abuse, and mental illness) and are doing so willingly. Yet, these adult children are at times abusive in multiple ways towards their aging parent. Rather than separating the two, who do not want to be separated, and rather than institutional placements or incarceration for these adult children which is costly to society, or leaving

perpetrators homeless, interventions are needed that enable older parents to continue to provide support for their abusive adult offspring while maximizing their own safety.

Likewise, there are aging couples in which one partner is providing care for the other partner who is suffering from a chronic condition or health or cognitive decline. At times, these caregivers/partners may commit forms of elder abuse or neglect and come under the auspices of the state. As an alternative to state intervention, there is a need to develop family-systems approaches and strategies to support the caregivers/partners who also may be suffering from health or cognitive decline while trying to provide care for an ailing partner.

- **Perpetrator Intervention Programs (\$25m)**

Prosecution is perfectly appropriate for some cases involving elder abuse (such as financial fraud), but not all cases. Our response to perpetrators must become both more robust but also more nuanced. Simply separating victim and perpetrator (especially among family members) is ineffective unless the victim desires it. Perpetrators may move on to other victims without effective intervention. The need to match perpetrator motivations with an appropriate formal response that addresses those causative issues is required. For example, for lower level perpetrators, a program akin to the Judicial Oversight Demonstration Project might be effective. Perpetrators are brought into the criminal justice system so that judges can provide the needed leverage to ensure perpetrator's compliance with programming/treatment while remaining in the community. This and other types of innovative perpetrator programming is needed to advance victim safety.

- **Prevention Programs for Older Consumers of Financial Fraud (\$20m)**

The federal government expends countless resources on investigating and prosecuting cases involving financial fraud perpetrated against older adults, both nationally and internationally. There is a void in the literature on program elements that would most effectively prevent older consumers from losing money to financial fraud in the first place. According to a 2019 report released by the White House entitled [Emerging Technologies to Support an Aging Population](#), technology has the potential to provide protections to older adult's money and assets. The development of technological financial safeguards should be part of a prevention program for older consumers.

- **Elder Abuse Prevention Programs (\$20m)**

There have been several efforts supporting elder abuse prevention projects. However, those projects have yet to be systematically reviewed to understand which elements of a program remedy an abusive situation, as well as restore the victim to previous levels of functioning to the extent possible. This effort would include a meta-analysis of the federally funded prevention projects funded to date to identify themes and trends in outcomes; and replication and testing of any of the interventions showing promise. The results of this effort would be a delineation of what program elements are critical to primary, secondary, and tertiary prevention strategies.

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- **Forensic Research (\$25m)**
Forensic research in the context of elder abuse enables physicians to distinguish different types of intentional mistreatment from accidental injury, illness, or malnutrition. Being able to identify physical injuries and health conditions that are inconsistent with a perpetrator's account gives physicians the authority needed to report perpetrators. Furthermore, prosecutors need this type of information to vigorously pursue prosecution. While there is strong research on the patterns of bruising in older adults related to elder physical abuse, this knowledge could be deepened using radiographic evidence and bioinformatic approaches.
- **Elder Abuse Screening Instruments (\$20m)**
Both detection and the prevention of re-victimization depend on accurate screening for elder mistreatment. The most recent recommendation from the US Preventive Services Task Force (2018) on elder abuse screening is an "I" statement, indicating that there is no evidence-base on the efficacy of screening for elder abuse in medical settings due to a lack of validated elder abuse screen tools. To bridge this knowledge gap, ACL has undertaken a project to inventory the existing screening tools for elder maltreatment and to assess the level of validation for each tool. Research is needed to further the validation of a sub-set of those tools determined to be most viable for further validation testing. In addition to health care settings, this effort would target a sub-set of tools for use in social and behavioral health settings.
- **Research on Understanding Perpetrators (\$20m)**
While historically long neglected, there is increasing recognition of the need to understand elder abuse perpetrators. There has been some recent growth in this area. Findings from a recent analysis of victim reports substantiated by Adult Protective Service (APS) caseworkers in Illinois suggest that perpetrators can be characterized according to four different perpetrator subtypes, based on the types of abuse they inflict, and the characteristics of the victims affected. However, the elder abuse perpetrator literature is slim, fails to directly include perpetrators in the research, and tends to rely on clinical samples. Our understanding of offenders across types of abuse must become more sophisticated and nuanced if we are to adequately understand offending and subsequently develop interventions for victims as well as offenders.
- **Forensic Investigative Interviewing with Older Adults (\$15m)**
Historically, with the emphasis placed on social services, adult protective services (APS) was responsible for interviewing older adults to determine whether they met eligibility requirements for services. Whether these interviews were forensically sound was of little import. However, our current push to involve law enforcement and prosecutors in these cases requires that forensically sound investigative interviewing processes be in place to ensure accuracy, reliability, and completeness of victim's account of an incident. However, APS workers are not consistently trained on how to conduct forensic interviews. Research is needed to develop a standardized protocol for APS case workers on forensic interviewing skills so that if a case is referred to law enforcement, both APS and prosecutors can have increased confidence in the victim's account of the incident.

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- **Evaluation of APS investigation (\$50m)**
Adult protective services (APS) is the entity in each state with responsibility for accepting reports of elder abuse from any source, conducting an investigation, and if eligible, providing services. To date, ACL has undertaken a process evaluation to methodologically outline all the service components of APS programs and practice, and an initial study design to begin building the knowledge base about what APS practice elements produce good client outcomes. Research is needed to expand that evaluation by testing on a larger scale those elements identified in the initial two evaluation efforts.
- **Prosecution Engagement with and Court Accommodations for Older Victims (\$10m)**
As more federal and state prosecutors pursue elder abuse cases, it will be critical to understand an older victim's reluctance for interfacing with the criminal justice system and to develop strategies to help engage their participation. For a variety of complex reasons, when a perpetrator is a family member, victims may be reluctant to cooperate, especially if one of the individuals is dependent on the other, or if the perpetrator faces incarceration. Relatedly, for those older adults who do enter the courtroom, it will be critical to provide necessary court accommodations. It also will be important to determine which of these accommodations are most desired by older adults, and indeed enhance their comfort and thereby their ability to testify.
- **Effective Training for Professionals (\$10m)**
Training for professionals who respond to elder abuse is critical. Without training, responses are never optimal. Currently, training for professionals (first responders, service providers, those placing a formal report) is provided in the absence of any empirical evidence as to what approaches are most effective. At most, there might be a pre-post knowledge test for those taking a training, but that approach assesses only knowledge gained from training, and not performance, for which quality metrics do not yet exist. We have learned in other areas that training must be repeated periodically or the learned behaviors fade and professionals revert to their old practices. Training that is intensive, face-to-face, with feedback built in to the training from both instructors and peers is most effective and long lasting. Our current training delivery system contains none of these elements.
- **Messaging Research (\$15m)**
Detection is the first step in a case of elder abuse. Without detection, cases will never be reported and the suffering may continue potentially unabated. Research identifying the most effective messaging for preventing older consumers from engaging with fraud perpetrators could save consumers countless dollars as well as turmoil associated with financial victimization. We need to test the effectiveness of education and prevention messaging and message delivery for use with older adults and those around them.
- **Mandatory Reporting Policy (\$10m)**
While most states have mandatory reporting laws in place to identify and connect victims of elder abuse to adult protective services (APS) and to bring perpetrators to the attention of

authorities, there is considerable variation across the United States in who is required to report cases of suspected abuse. It remains unknown the extent to which mandatory reporters are equally effective in detecting abuse and in reporting it. It is widely appreciated that reporters across professions lack the requisite tools and information for fulfilling this duty. Research on the policy of mandatory reporting could be used to construct the most effective mandatory reporting policies that would ultimately serve to ensure victims receive the services to which they are entitled consistent with their rights as victims.

- **National Elder Abuse Public Awareness Campaign (\$5m)**

Primary prevention involves widespread acknowledgment of an issue, and basic steps all people can take to prevent or address the issue. There are numerous examples of large-scale public awareness campaigns that have effectively changed our collective understanding of certain public health issues, and changed our behavior, such as Mothers Against Drunk Driving – MADD, ODDS Campaign for early testing of children for Autism, and the Red Dress campaign for Women’s Heart Health. The Frameworks Institute undertook a project in 2015, “[Talking Elder Abuse](#),” to understand effective messaging of the issue of elder maltreatment and created a communications toolkit incorporating those messages. This project was funded in partnership by AARP, the American Federation for Aging Research, the American Geriatrics Society, the American Society on Aging, the Gerontological Society of America, Grantmakers in Aging, the National Council on Aging, the National Hispanic Council on Aging, and ACL’s National Center on Elder Abuse. With these tested communication messages, a national public awareness campaign is needed to increase awareness across the country.