

Examining the Role of Substance Abuse in Elder Mistreatment: Results From Mistreatment Investigations

Journal of Interpersonal Violence

1–26

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DOI: 10.1177/0886260516640782

jiv.sagepub.com



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Abstract

Substance abuse has long been identified as a risk factor for elder mistreatment, yet research on the topic remains sparse. This study tested hypotheses whether perpetrator and victim substance use problems were associated with financial exploitation, physical abuse, emotional abuse, and neglect versus no abuse. Cross-sectional data were collected on 948 cases with yes/no substantiation decisions where 357 cases had no abuse in elder mistreatment investigations. Hypotheses were tested using odds ratios, bivariate, and multiple linear regression analyses including a control for victim vulnerability. Of 948 alleged victims, 42 (4.4%) exhibited signs of substance use problems. Among the 323 alleged perpetrators, 87 (26.9%) were reported to have substance use problems. Substance use problems by alleged perpetrators were associated ($p < .01$) with financial exploitation, physical abuse, and emotional abuse but not neglect. Substance use problems by alleged victims were associated with neglect, but not the other types. Alleged perpetrators with substance use problems tended to commit

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multiple forms of abuse, were male and not caregivers. Except for the findings on neglect, the associations with elder mistreatment were stronger for alleged perpetrators with substance use problems, than for alleged victims. Clarification of the role of perpetrator risk factors such as substance abuse should improve risk identification and subsequent intervention.

Keywords

abuse/neglect, addiction (alcohol/drug), home and community-based care and services, elder mistreatment

Substance abuse by perpetrators of elder abuse has long been identified as a risk factor for elder mistreatment (Acierno, Hernandez-Tejada, Muzzy, & Steve, 2009; Anetzberger, 2009; Anetzberger, Korbin, & Austin, 1994; Daly, Hartz, Stromquist, Peek-Asa, & Jogerst, 2008; Godkin, Wolf, & Pillemer, 1989; Hwalek & Sengstock, 1986; Rabiner, Brown, & O'Keeffe, 2004; Reis & Nahmiash, 1998). An obvious link is the association of substance abuse with increased violent behavior (World Health Organization, 2009). Substance abuse may also exacerbate neglect of caregiving responsibilities (World Health Organization, 2005).

The violence and neglect may be compounded when victims of elder mistreatment also abuse substances (Friedman, Avila, Tanouye, & Joseph, 2011; Hwalek, Neale, Goodrich, & Quinn, 1996; Tredal et al., 2013). Substance use by older adults may make them more vulnerable to abuse by contributing to increased health problems (Fisher & Regan, 2006) and inability to meet basic psychosocial and safety needs (Blondell, 2000). For example, caregivers may encourage substance abuse by older adults to make them more compliant or more susceptible to financial exploitation (World Health Organization, 2005). On the contrary, substance abuse may increase victim problem behaviors and caregiver burden (Anetzberger, 2009; Wiglesworth et al., 2010).

Increased elder mistreatment leads to increased costs for both individuals and society because victims are hospitalized more (Dong & Simon, 2013) and use more mental health and substance abuse treatment services by about 30% compared with those who are not victims of abuse (Schonfeld, Larsen, & Stiles, 2006). Expansion of the 60+ population and the greater exposure of the baby boom generation to substance use make it likely that we will see higher rates of older adults, including both elder mistreatment victims and their perpetrators, with pre-existing substance abuse problems. Even conservative estimates based on national surveys indicate that the number of Americans 50 years of age or older with a substance use disorder, including alcohol or drug use disorders, will double from 2.8 million (2002-2006) to