

## UK Study of Abuse and Neglect of Older People



**Elder abuse and neglect (mistreatment) are increasingly acknowledged as a social problem in the UK and internationally, but there has been an absence of any sound data on the extent of this in the UK. This lack of evidence prompted Comic Relief and the Department of Health to fund a dedicated survey to provide nationally representative prevalence estimates of elder abuse and neglect in the community, the results of which are presented here.**

- Overall, 2.6% of people aged 66 and over living in private households (including sheltered housing) reported that they had experienced mistreatment involving a family member, friend, or care worker during the past year.
- This equates to about 227,000 people aged 66 and over experiencing mistreatment, or around one in forty of the older population.
- When the one year prevalence of mistreatment is broadened to include incidents involving neighbours and acquaintances, the overall prevalence increases from 2.6% to 4.0%. This would give a figure of approximately 342,400 older people subject to some form of mistreatment.

*Considering mistreatment in the past year involving family, close friends and care workers:*

- The predominant type of mistreatment reported was neglect (1.1%), followed by financial abuse (0.7%). The prevalence of psychological and physical abuse was similar (both 0.4%), and sexual abuse (reported cases were of harassment) was the least reported type (0.2%).
- Women were more likely to say that they had experienced mistreatment than men: 3.8% of women and 1.1% of men.
- Mistreatment in the past year varied significantly by marital status, and increased with declining health status, depression and loneliness.
- 51% of mistreatment in the past year involved a spouse/partner, 49% another family member, 13% a care worker and 5% a close friend. (Respondents could mention more than one person.)

Following the House of Commons Health Committee report on elder abuse, which identified the absence of any sound data on the prevalence of elder abuse in the UK, NatCen and the Institute of Gerontology and the Social Care Workforce Research Unit at King's College London were commissioned by Comic Relief and the Department of Health to carry out the UK Study of Abuse and Neglect of Older People. The study focused on people aged 66 and over, living in private households (including sheltered accommodation, but excluding care homes and hospitals).

The overall context of policy addressing the abuse and neglect of older people is the growth of the older population and increasing longevity.

We know from previous research that in community settings there is a whole range of mistreatment, varying in severity, and ranging from the deliberately exploitative to the much more complex dynamics involved in adult relationships.<sup>1</sup>

### **Definitions of mistreatment**

The prevalence survey started from the definition developed by Action on Elder Abuse and adopted by the World Health Organisation: "A single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person".

The definition of elder abuse is widely recognised as complex. Measurement has been hampered by a lack of well validated and reliable instruments. We built on previous research to produce transparent definitions of both the 'actions' occurring and the idea of a 'relationship of trust'. Five types of mistreatment were included:

**Neglect** – e.g. repeated failure of a designated caregiver to provide help with personal care and day to day activities;

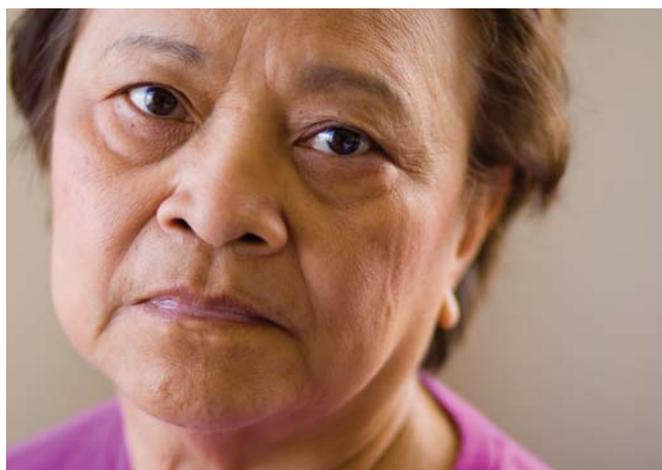
**Financial abuse** – e.g. theft, fraud, misuse of power of attorney;

**Psychological abuse** – e.g. persistent insults and threats;

**Physical abuse** – e.g. physical violence, physical restraint, over-medication;

**Sexual abuse** – e.g. verbal harassment, touching in a sexual way or intercourse without consent.

The term 'mistreatment' covers all five types; the term



'interpersonal abuse' covers physical, psychological and sexual abuse.

Our research primarily focused on mistreatment which occurred within a relationship where there could reasonably be an 'expectation of trust'.

In this way, we aimed to distinguish the behaviour that takes place in the context of *relationships* from harmful behaviour by strangers, self-neglect or harm, and the kinds of 'abuse' which people may perceive but that arise at a societal level, such as long waits for healthcare treatment or ineligibility for social care. Three groups of people were identified as being in a 'relationship of trust': family members, close friends and care workers.

Our analysis is based on mistreatment in the past year by family members, close friends, and care workers. However, data was also gathered about mistreatment involving neighbours and acquaintances, and a prevalence estimate based on this is provided in this summary.

### **Prevalence in the community**

Overall, 2.6% of people aged 66 and over living in private households reported that they had experienced mistreatment during the past year. This is equivalent to about one in 40 of the older population and equates to about 227,000 people in the UK aged 66 and over.<sup>2</sup>

Our prevalence figures show neglect as the predominant form of mistreatment in the UK at 1.1%, followed by financial abuse (0.7%), physical and psychological abuse (both 0.4%) and sexual abuse (0.2%). The prevalence of neglect and financial abuse

<sup>1</sup> McCreadie C. Elder abuse: an update on research. Age Concern Institute of Gerontology, King's College London, 1996.

<sup>2</sup> Based on 2004 household population estimates (excluding people living in institutions) from the Office of National Statistics and the Northern Ireland Statistics Research Agency.

goes against the common perception of abuse as physical violence. Relatively, we know much less about these forms of mistreatment.

When incidents involving neighbours and acquaintances were included, the prevalence rate rose from 2.6% to 4.0%, which equates to roughly 342,400 people in the UK aged 66 and over.<sup>2</sup> *The rest of this summary discusses the more widely accepted definition of mistreatment, involving family, friends, and care workers.*

The likelihood of having been mistreated in the past year varied by:

- sex, with women more likely to have experienced mistreatment than men;
- marital status, ranging from 9.4% of those who were separated or divorced to 1.4% of those who were widowed;
- socio-economic position, from 4.3% of those who last worked in semi-routine and routine occupations to 0.1% of small employers and own account workers;
- tenure, with those who lived in rented housing (social or private) tending to have higher prevalence rates than owner-occupiers;
- health, with the likelihood of having been mistreated increasing with declining health;
- loneliness, depression and quality of life, with those feeling lonely, depressed or with a lower quality of life being more likely to have experienced mistreatment.

**Partners (51%) and other family members (49%) were most commonly reported as the perpetrators of mistreatment.**

13% of mistreatment in the past year involved a care worker and 5% a friend.

Three-quarters of those asked said that the effect of the mistreatment was either serious (43%) or very serious (33%). This is therefore an important problem for a number of older people.

## **Neglect**

Approximately one older person in a hundred reported that they had been neglected in the past year. Of these, 85% had not received help with a day to day activity (such as shopping, housework or meal preparation), 41% had not received help with personal care (such as getting in and out of bed, washing, using

the toilet, dressing and eating), and 20% had not received help with taking medication at the right time or the right dose. In all of these cases, the respondent had repeatedly not received help from someone they were relying on to provide that help.

Neglect dominates the prevalence figures for those aged 85 and over, especially for women, for whom neglect increases sharply with age. Those in bad or very bad health were more likely to have experienced neglect as were those who suffered from a limiting long-term illness. This is partly explained by the definition of neglect, which assumes that the respondent has dependency or disability related needs. Neglect is associated with poor quality of life and with depression.

Interestingly, although our numbers are very small, spouses or partners (closely followed by other family members) emerge as the main perpetrators of neglect. In this context, the age pattern for neglect is interesting, with a sharp rise for those aged 85 and over. One hypothesis is that the 'partner effect' is generally protective up till the older age group, but that as disability in the partner sets in – either mental or physical or both – neglect increases. Thus what is being reported may not necessarily be deliberate neglect, but the kind of neglect that comes about as a consequence of two people with increasing disabilities trying to support each other – and increasingly failing.

## **Financial abuse**

Financial abuse increased with age for men, a pattern not seen for women. The survey supports earlier research in finding that financial abuse is significantly more prevalent for people living on their own. Divorced or separated women were also at higher risk. Both men and women in bad or very bad health indicated higher rates of financial abuse. Women who reported feeling lonely were more likely to experience financial abuse, but this was not found for men. Both men and women who received home care services or were in touch with professionals were more likely to have experienced financial abuse.

The survey confirmed other studies that family, other than partners, are the most common perpetrators.

## **Interpersonal abuse**

Unlike neglect and financial abuse, interpersonal abuse is most likely to be experienced by women aged 66-74, and seems to virtually disappear among those aged 85 and over.

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Interpersonal abuse was largely carried out by partners (57%) or other family members (37%). The perpetrator lived in the same household in two-thirds of the cases, and in two-fifths of cases the older person was providing care for them. 75% of perpetrators of interpersonal abuse were aged 65-74 and 80% of them were men. The implication, allied with the data on living arrangements, is that they are either experiencing domestic violence in later life, or that they have a condition, for example dementia, that sometimes gives rise to aggressive or challenging behaviour – or both.

## Discussion

This study provides reliable estimates for the extent of abuse and neglect among older people living in their own homes in the UK. This is the first study of its kind in the UK and widens the evidence base for policy making.

The findings suggest that the problem of abuse and neglect of older people in the UK is comparable with that in other Western societies. The estimate of prevalence ranges from 2.6% to 4.0%, depending on whether neighbours and acquaintances are included. While the estimated prevalence of 2.6% may appear low, it translates into a significant number of older people who have experienced, or are continuing to experience, a problem which may have serious effects on their health and well-being. Moreover, there are good reasons for thinking that our estimate is conservative and that some mistreated people, including some of those who are most vulnerable, will not have been included in the survey. Including neighbours and acquaintances increases the figure to 4.0% and draws attention to the possibility of additional forms of abuse beyond the areas of family and caring that have traditionally been looked at.

## Methods

Face to face interviews were carried out with respondents aged 66 and over living in private households (including sheltered accommodation) in England, Scotland, Wales and Northern Ireland, between March and September 2006.<sup>3</sup>

Respondents from government commissioned health surveys were followed up to obtain large, nationally representative random probability samples. In Wales, no such follow up sample was available, so a random probability sample was selected from the comprehensive postcode address file.

In total, 2111 individuals were interviewed. The overall UK response rate was 65%. The achieved sample was weighted to be representative of the general UK population aged 66 and over living in private households.

The survey was only of people living in the community, not those living in institutions. Although designed to achieve a representative sample, the survey methodology is likely to result in an under-estimate of the prevalence of mistreatment for two reasons: 1) individuals were excluded from the survey if their mental capacity or ill health prevented them from participating; 2) individuals who had been mistreated may have feared the consequences of participating in the interview, or may have been prevented by someone from taking part or been reluctant to participate because of psychological factors such as denial, shame and guilt.

Interviews lasted an average of 50 minutes and were conducted face to face using computer assisted personal interviewing (CAPI), with a self completion component for the most sensitive questions on sexual abuse.

## Obtaining the full report for this study

The full report of these research findings, UK Study of Abuse and Neglect of Older People: Prevalence survey report, by Madeleine O'Keeffe,<sup>i</sup> Amy Hills,<sup>i</sup> Melanie Doyle,<sup>i</sup> Claudine McCreadie,<sup>ii</sup> Shaun Scholes,<sup>i</sup> Rebecca Constantine,<sup>i</sup> Anthea Tinker,<sup>ii</sup> Jill Manthorpe,<sup>ii</sup> Simon Biggs<sup>ii</sup> and Bob Erens<sup>i</sup> (2007) is published by the National Centre for Social Research. For further information, contact Sue Johnson, or e-mail [info@natcen.ac.uk](mailto:info@natcen.ac.uk).

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